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3rd | Dr. Eli Stavisky | 2016
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4th | Dr. Frederick S. Johnson | 2017
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221 West Penn Ave. #213, Cleona, 17042
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5th | Dr. James M. Boyle | 2017
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7th | Dr. Cynthia A. Iseman | 2018
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9th | Dr. Joseph E. Ross | 2016
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10th | Dr. Herbert L. Ray Jr. | 2015
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IMPRESSIONS

By Dr. Bruce R. Terry
Editor

It Wasn’t Me

Who didn’t hear about the recent ranking of the best jobs in 2015? U.S. News and World Report, Jan. 13, 2015, listed dentistry as the No. 1 career based upon salary, work-life balance and expected employment growth. “Woo Hoo!” The unemployment rate for dentists is 0.9 percent and according to the Bureau Of Labor and Statistics there will be a 16 percent growth in the need for dentists between 2012 and 2022. That would amount to 23,300 new jobs for dentists.

Well, Dr. Leopold Weinstein of Camarillo, Calif. did not see the news. Either that or he couldn’t wait for the local competition to subside when he decided to set fire to three different competitors’ offices. In one case he threw a road flare and other flammable items onto the roof, but was unsuccessful in starting a fire. In another case he is accused of drilling holes in the roof of an office and pouring gasoline, also hoping to set the office on fire.

Now I’m no psychologist, but this guy has issues. Thank goodness he is a lousy arsonist. Obviously he is not as busy as the current news would indicate.

According to a report of the 2013 Health Policy Institute of the ADA:

- The number of practicing dentists per capita in the United States has increased after years of stability, going from 59.8 dentists per 100,000 people in 2008 to 62.0 in 2011. The increased number of dentists is a result of two factors. First, dental school enrollment has increased considerably in recent years and these new graduates have entered the labor market. Second, the average retirement age of dentists has increased dramatically in the past decade. According to the ADA’s Health Policy Institute, the average age of retirement for dentists in 2001 was 64.8 and has increased to 68.3 in 2011.
- A new patient waited an average of 11.3 days in 2001 and 5.4 days in 2012. These changes were statistically significant. Taken together with the decrease in busyness, this data suggests that significant unused capacity is available in the dental care system.
- From 2000 to 2011 the average percentage of gross billing collected by GPs decreased from 94.8 percent to 92.0 percent. The comparable decrease for specialists was from 94.9 percent to 91.0 percent. These changes were statistically significant. In 2012, this statistic stopped falling for the first time in years, equaling 92.1 percent for GPs and 91.8 percent for specialists. But it is too early to tell if this represents a reversal in the trend.
- Dental care and dental spending is on the rise by the elderly.

Maybe Dr. Weinstein read this Health Policy Institute study and was discouraged by his future prospects. Maybe he had one too many patients leave to go to another practice. Whatever the reason, what I want to know is, who’s right? The U.S. News and World Report telling young college students to prepare to go to dental school and on to the “golden highway” of success, or guys like Leopold and the ADA who say that times are tough and may be getting tougher?

This year will mark my 29th year in practice. I can honestly say that it has been everything I could ever want. I love to go to work, and although I complain about a lot of things, I wouldn’t trade my dental career for any other profession. However, not all of my dental friends and colleagues will say the same thing. Each has a different perspective. Some have been disappointed in the business of dentistry (i.e. staff, insurance, etc.). Others have not been as busy as they had hoped. But the majority of them agree, as I do, that it has been a terrific profession.

But just when I am feeling pretty good about being a dentist, along comes another news article like the one from Indiana on Feb. 18, 2015. Three dentists in Anderson, Ind., were charged with Medicaid fraud. How many times have we seen or heard this before? Yes, these individuals are greedy and saw an opportunity to take advantage of the system. But it also suggests that they weren’t making it the old fashioned way with hard work.

And then there is Dr. Damian Newhart of Laguna Nigel, Calif. It seems the really good stuff happens in California. Dr. Newhart is accused of robbing a bank. That’s what many patients accuse us of daily! Damian is/was an orthodontist who couldn’t get it straight (get it?). The “Rolled Sleeved Bandit,” as he was dubbed, with his aviator sunglasses and rolled sleeves on his pink button down shirt made a splash in the new for robbing five banks.

M i n d s E n f o r c e m e n t

Before I go, I must mention a different professional in this area. Dr. Edmund G. Newhart of the University of Pennsylvania was recently charged with stealing $94,000 worth of drills and other dental equipment from a local dentist. Dr. Newhart is accused of taking advantage of his patient’s trust.

But there is one thing that we all have in common. Do we love to work, and do we love our patients?

So I ask the question again. Is dentistry the No. 1 profession in our country? Let’s look at the benefits:
• You are your own boss
• You make your own hours
• You have freedom to burn down your competitors’ offices, submit fraudulent claims, and steal from your local bank

And the cons:
• Dealing with insurance companies
• Managing patients and staff
• Keeping up with all the regulations
• Evading the police

My opinion is that the benefits outweigh the negatives. So, the next time you see a colleague at a meeting make sure your wallet is in a safe place and your office fire alarm is on. You just never know!

—BRT

3rd Annual MOM-n-PA

The 3rd Annual MOM-n-PA dental mission will be held in Harrisburg on Friday May 29 and Saturday May 30, at the State Farm Show Complex.

Last year the MOM-n-PA mission in Allentown provided more than $1 million in free dental care and treated more than 2,000 patients. You can help with the 2015 mission by volunteering your services or making a donation. For more information, visit www.mom-n-pa.com.

Volunteer registration for the Harrisburg mission is now open!
It’s been busy for PDA since the new legislative session commenced in mid-January. Already 10 bills have been introduced that impact dentistry in some way. Our staff and lobbyists are monitoring these bills while the Government Relations Advisory Group is carefully reviewing each bill and developing PDA’s position, should these bills start moving through the process.

While addressing the bills that have already been introduced, we are also lobbying aggressively on our own legislative priorities: assignment of benefits, primary care student loan forgiveness, more funding for the Medical Assistance program, and closing loopholes with Act 184 (legislation that passed in 2012 prohibiting insurers from capping non-covered services) and Act 94 (legislation requiring insurers to cover general anesthesia for children younger than seven and patients with special needs).

We have spent the past few months educating the new administration and talking with Senate and House leaders.

Be sure to check out the May/June issue of the Journal for a comprehensive update on Democratic Governor Tom Wolf’s budget negotiations with the Republican General Assembly. We are working to ensure continued funding for the Donated Dental Services program, and more funding in the primary care student loan forgiveness and MA programs.

**HR 58: Resolution designating February as National Children’s Dental health Month**

Rep. Leslie Acosta (D-Philadelphia) introduced a resolution recognizing February as National Children’s Dental Health Month in order to improve the public’s awareness of the importance of oral health. The House of Representatives unanimously adopted the resolution in February.

**SB 472: Creating an Official State Prescription Form**

Sen. John Rafferty (R-Berks, Chester, Montgomery) introduced SB 472, legislation that would establish an official state prescription form for distribution by the Secretary of Health for use by all health care professionals authorized to prescribe drugs. These forms would be serially numbered and non-transferable. Health care providers who prescribe Schedule II, III or IV prescription drugs would be required to use this form. SB 472 would grant the Secretary of Health authority to direct the proper retention and filing of such prescription forms and would require the immediate notification of the Department of Health and the Attorney General’s Office in the event that such forms are lost or stolen from a healthcare provider.

Sen. Rafferty introduced this legislation based on the premise that legitimately approved Schedule II, III, and IV controlled substances such as Oxycodone, Hydrocodone, certain amphetamines, and various benzodiazepines, are becoming more readily available to unintended users through various methods of diversion. Increased demand for prescription narcotics has pushed street prices for drugs such as Oxycodone as high as $30 per tablet. The criminal activity associated with illicitly obtaining and distributing these drugs, as well as serious consequences of illicit use, including addiction and fatal overdose deaths, are becoming more common throughout the Commonwealth.

Along with combating the growing problem of diversion, Sen. Rafferty believes SB 472 would also address another issue which contributes to the loss of millions of dollars a year to the Commonwealth. Medicaid fraud has become increasingly more common and contributes to the illegal prescription drug market. He claims that by utilizing tamper proof prescription pads with built-in security protections, the Commonwealth would be able to significantly curtail fraudulent Medicaid claims and save millions of dollars.

SB 472 was assigned to the Senate Public Health and Welfare Committee in February.

**HB 92: Expunging Licensee Disciplinary Records for Minor Infractions**

This legislation would provide all state licensing boards under the Bureau of Professional and Occupational Affairs with the power to expunge disciplinary records of licensees for minor violations of their practice act and board regulations.

Rep. Kate Harper (R-Montgomery) introduced HB 92, legislation to provide all state licensing boards under the Bureau of Professional and Occupational Affairs (BPOA) in the Department of State with the power to expunge disciplinary records of licensees for minor violations of their practice act and board regulations.

Any disciplinary actions, whether serious or a mere technical violation, currently remain on a licensee’s record permanently on-line because the various state licensing boards lack the authority to expunge records. Many practitioners with otherwise unblemished disciplinary histories have complained to state licensing boards that the existence of minor infractions as a permanent part of their publicly available licensure records has prevented them from getting a job, or simply caused them needless embarrassment with clients and colleagues after they have corrected the violation.

Expungement seals the affected record from public access and allows the licensee to represent that no record exists. However, BPOA and the licensing board or commission would continue to maintain the record and may release it upon request from law enforcement or other governmental body as permitted by law.

HB 92 was assigned to the House Professional Licensure Committee for first consideration.
HB 184: State Preemption for Local Mandated Leave Ordinances

Rep. Seth Grove introduced HB 184, legislation that would allow state preemption for local mandated leave ordinances.

Over the past few years, local governments across the nation have passed legislation which dictate leave requirements to businesses of all sizes. Most recently, the City of Philadelphia attempted to pass a bill that would require businesses with more than five employees to provide up to 56 hours of paid time off a year, regardless of the type of business and any current policy that is in place. The 56 hours could be used for nearly any reason.

Rep. Grove believes that not all businesses are the same and a blanket policy that does not recognize these differences only hurts small businesses struggling in this current economy. He contends that local mandates such as this not only create an uneven playing field for the businesses located inside the municipality, but as more governments jump on board, businesses with more than one location are forced to comply with a variety of different and changing mandates. Twelve states have already passed preemption bills.

HB 184 was assigned to the House Labor and Industry Committee in January.

HB 336: Ban on Non-Compete Agreements for Health Care Practitioners

Rep. Jim Christiana introduced (R-Beaver) introduced HB 336, legislation that would ban any non-compete language in an employment agreement for a health care practitioner. The legislation would allow health care practitioners to alert their patients to the new affiliation and allow the patient the option to follow the health care provider to the new location. It would not apply to any additional services provided by the individual outside their scope of practice or to trade secrets or confidential information learned through the course of the prior employment.

Rep. Christiana’s introduced HB336 because he heard from a number of health care professionals who have spent large sums of money on their education and training that they cannot continue to provide care for their patients simply because they have changed employers. He found this troubling especially in light of the House of Representatives having unanimously approved a resolution last session which calls for a study on the physician shortage crisis the Commonwealth is facing. Rep. Christiana believes this problem extends to all health care providers, and that is a concern given that the demand for health care professionals is ever increasing and resulting in a loss of qualified talent to other states.
HB 336 was assigned to the House Health Committee for first consideration. PDA is working with legislative staffers to address our concerns.

HB 330: Establishing a State-Run Health Insurance Exchange
Rep. Tony DeLuca (D-Allegheny) introduced HB 330, legislation to establish a state operated Health Insurance Exchange that is compliant with the Patient Protection and Affordable Care Act (ACA).

Since its enactment, the ACA has been at the center of many controversies and disagreements at both the Federal and State levels. Several cases surrounding the law are still pending in federal court, most notable among them being King v. Burwell, a case that the Supreme Court will hear in the near future. At issue in King is whether federal insurance subsidies may be provided to individuals who purchase health insurance on the federal exchange. However, regardless of how the Court rules, individuals purchasing health insurance in states that have created their own state insurance exchange will continue to receive federal insurance subsidies.

HB 330 was assigned to the House Insurance Committee in February 2015.

HB 294: Any Willing Provider
Rep. Tony DeLuca (D-Allegheny) introduced HB 294, legislation that ensures that private practitioners and facilities remain “in network” if they are qualified and willing to accept the terms of the contract.

Pennsylvania currently does not have “Any Willing Provider” (AWP) legislation. Under an AWP law, a health insurer may not refuse to accept as a participating provider any provider in its geographic area who is willing to meet its conditions of participation. The definition of “insurer” includes insurance companies; health maintenance organizations, or HMOs; dental service corporations; and other entities.

Rep. DeLuca believes that when selection is limited on the insurance side but not on the provider’s end, quality health care may not always be obtained at a reasonable price. Through this legislation, he hopes to ensure that employers and others who pay for health insurance are receiving the best value for their dollar by ensuring that the entity that sets the premium rates charged to subscribers is not permitted to also determine the rates received as a provider of hospitals and other services.

HB 294 was assigned to the House Insurance Committee for first consideration.
HB 209: Requiring all licensees under BPOA to report convictions

Rep. Harry Readshaw (D-Allegheny) introduced HB 209, legislation that will require all licensees under the Bureau of Professional and Occupational Affairs (BPOA) to report convictions within 30 days. Currently, the laws vary on the reporting requirement; however, each board under BPOA will consider certain convictions as not complying with licensure requirements. To provide consistency, HB 209 ensures that compliance apply equally to every individual licensed with BPOA.

HB209 was reported from the House Professional Licensure Committee and is in the full House for first consideration.

HB 157: Considering military education and training to satisfy licensing or certification requirements

Rep. Doyle Heffley (R-Carbon) introduced HB 157, legislation that ensures that a service member’s military education and training are taken into consideration for the purpose of fulfilling requirements for professional licensing. HB 157 requires a licensing board to consider whether a veteran’s military service, education, training and service experience satisfies certain or all licensing or certification requirements. This will prevent the duplication of training and education of a veteran and get them into a civilian career faster.

HB 157 was fast tracked through the House with a unanimous vote taken on February 4, 2015. It is now assigned to the Senate Veteran Affairs and Emergency Preparedness Committee.

HB 199: Smokeless Tobacco Tax to Fund the Waiting List Account for Adults with Intellectual Disabilities & Autism

Rep. Thomas Murt (R-Montgomery) introduced HB 199, legislation that would create a tax on the retail sale of smokeless tobacco products in or limitations in the bill will prevent funds in the account from being used to supplant resources for existing community resources. To assure that individuals receiving services are able to provide input into the design or delivery of service he/she receives, funds shall also be used in accordance with consumer-centered planning.

As of September 2014, there were almost 14,000 individuals on a waiting list for services related to intellectual disabilities and autism. HB 199 would establish a special account in the Treasury to be used to fund the waiting list for these types of services.

HB 199 was assigned to the House Finance Committee for first consideration.
Welcome New Members!

Following is a listing of members who have recently joined PDA, along with the dental schools from which they graduated and their hometowns.

Shimma Abdulla, DMD
Temple University '09
King of Prussia

Andrew O. Abolarin, DDS
New York University '05
Burlington, NJ

Patrick J. Adonizio, DMD
Temple University 1989
Harvey’s Lake

Bijan R. Ahmazadeh, DMD
University of Pennsylvania '10
South Abington Township

Nasrine Ahmed, DDS
New York University '03
West Milford, NJ

Michelle L. Aitken, DDS
Baltimore College of Dental Surgery '02
Media

Todd C. Alexander, DMD
University of Pittsburgh 1996
Sharon

Agostino J. Alfano, DDS
Temple University 1981
Wyoming

Hammad R. Amjad, DMD
University of Medicine and Dentistry of New Jersey '07
North Wales

Bryan B. Amos, DMD
University of Pittsburgh 1998
Pittsburgh

Regina M. Aslanian, DMD
Temple University 1996
Camp Hill

Faina M. Badineva, DDS
New York University 2000
Philadelphia

Mariam Barikbin, DMD
University of Florida '08
Harleysville

Fabio C. Beltran, DDS
University of Maryland 1987
Parkton

Michael A. Benko, Jr., DMD
University of Pittsburgh '01
Middletown

Victor D. Brown, DMD
University of Pittsburgh 1981
Coudersport

Elsie M. Casimir, DMD
Temple University 1993
Lower Gwynedd

Nithya K. Chalikonda, DMD
Temple University '13
Bethlehem

I-Fang Chen, DMD
University of Pennsylvania '14
Williamsport

Mary P. Counts, DMD
Temple University 1993
Bethlehem

Christine E. Cutler, DDS
University of Detroit Mercy '14
Philadelphia

Sarah De Marco Davies, DDS
University of North Carolina '00
Pittsburgh

Cristina M. Dobrescu, DDS
New York University '10
Philadelphia

Glenda M. Eidenshink, DMD
University of Pennsylvania '13
Southampton

Ameir Eltom, DDS
University of the Pacific '07
Eagleville

Ajikwaga Fell, DMD
University of Pennsylvania
Philadelphia

Anne Foard Adams, DDS
University of Maryland 1984
Lebanon

Brian P. Ford, DMD, MD
University of Pennsylvania '09
Philadelphia

Brittney A. Franklin, DMD
University of Pittsburgh '07
Baltimore, MD

James R. Fruehan, DMD
University of Pennsylvania 1986
Clarks Summit

Irina Garmiz, DMD
Temple University '09
Warrington, PA

Maria J. Garubba, DMD
University of Pittsburgh '12
Bethlehem
NEW MEMBERS continued

Allen Geng, DMD
University of Pittsburgh ‘11
Chesterbrook

Thomas B. Gladnick, DMD
Temple University ‘12
Wichita Falls, TX

Ashley E. Gonsky, DMD
University of Pennsylvania ‘12
Stroudsburg

Angela Gruber, DMD
University of Pittsburgh ‘10
Media

Doreen E. Gunder, DDS
Baltimore College of Dental Surgery 1996
Boiling Springs

Jonathan Hayashi, DMD
State University of New York at Buffalo ‘00
Philadelphia

Julie Hong, DMD
University of Pennsylvania 1997
Allentown

Olga M. Kabouridou, DMD
University of Pennsylvania ‘03
West Chester

Vinita Atul Kalanuria, DDS
New York University ‘08
Furlong

Bilal A. Kassak, DDS
New York University ‘00
Philadelphia

Rami A. Khoury, DMD
Boston University ‘03
Whitehall

Andrew M. Kim, DMD
University of Pennsylvania 1999
Lansdale

Colleen Kristofor, DDS
North Western University 1994
Philadelphia

Joanna T. Ku, DMD
Harvard University ‘05
Philadelphia

Albert C. La Torre, Jr., DDS
Temple University 1984
Warrington

Iris Lewis-Moody, DDS
Howard University 1983
Philadelphia

Noelle Ling, DMD
University of Pennsylvania 1999
Bryn Mawr

Shaghayeagh Lorei, DMD
University of Pittsburgh ‘01
Enola

Monica L. Marta, DMD
Temple University 1997
Scranton

Michael W. Matisko, Jr., DMD
University of Pittsburgh 1986
Cheswick

Lynnette F. Mesina, DMD
Temple University 1995
Berwyn

Damian Cosmas Milillo, DMD
Temple University ‘05
Clifton Heights

Michael S. Monro, DMD, MD
University of Pennsylvania ‘92
New Hampton

Ernest W. Moody, Jr., DDS
Howard University 1983
Philadelphia

Pooja D. Mukhatyar, DDS
University of Minnesota ‘11
Langhorne

David Adam Myers, DMD
University of Pittsburgh ‘09
Erie

Jeremy D. Olen, DMD
University of Pennsylvania ‘13
Tannersville

Thomas O. Olson, DDS, MS
University of Texas ‘07
Fallston, MD

Satya J. Pabbaraju, DDS
New York University ‘08
Yardley

John C. Pagana, DMD
Temple University ’06
Wynnewood

Dr. Lawrence J. Paul, DDS
Temple University 1980
Lafayette Hill

Rajalalitha Ponnambalam, DMD
Boston University ‘09
Audubon

Michael J. Rahner, DMD
University of Pittsburgh 1986
Erie

Robert S. Reffner, DMD
University of Pittsburgh 1987
Waynesboro

James D. Riesenberger, DMD
Temple University 1995
Newtown

Maribel Romero, DMD
Temple University 1996
Reading

Kranthi Rupanagunta, DDS
New York University ‘11
State College

Kiran Satashia, DMD
Temple University ‘01
Chalfont

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Stroudsburg

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Sheeba Shaju, DDS
New York College of Dentistry ‘10
Downingtown

John T. Sneek, DDS
West Virginia University 1998
Washington

Clark J. Sparrow, DDS
Temple University 1972
Towanda

Meredith L. Stabiley, DMD
Temple University ‘12
Elizabethtown

Bari J. Steinberg, DDS
Columbia University - NY ‘12
Philadelphia

Gregory Stephens, DMD
University of Pennsylvania 1984
Aldan

Dave Sullivan, DMD
University of Pittsburgh 1994
Pittsburgh

Rachel C. Taddeo, DMD
Temple University ‘11
Wynnewood

Scott D. Trask, DMD
Temple University 1996
Camp Hill

Jim G. Tsou, DDS
New York University ‘13
Conshohocken, TX

Joshua B. Wolgin, DMD
University of Pennsylvania 1998
Narberth

Helene A. Woodmancy, DMD
Temple University ‘01
Telford

Rafael E. Yanez, DMD
Temple University 2007
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Jeanne Yang, DDS
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REMININDER: Opt in or Out of Medicare Enrollment by June 1

PDA has been monitoring the changes to the Medicare Prescription Drug Program. With the deadline approaching wanted to remind our members of the June 1 deadline.

In order to have your prescriptions covered under Part D, eligible providers who write prescriptions for Part D drugs must:

• Be enrolled in Medicare in an approved status, or
• Have a valid opt-out affidavit on file

Ever since the Center for Medicare & Medicaid Services (CMS) issued the notice indicating changes to the Medicare Prescription Drug program, PDA has been fielding calls from member dentists requesting clarification. Per information received by CMS, the American Dental Association and Novitas Solutions, Inc. (Novitas is the Medicare carrier in Pennsylvania), dentists must notify the Medicare carrier in their location, including Medicare Advantage Plans, of their decision to opt in/out by June 1, 2015. The provision will go into effect Dec. 1, 2015.

If a dentist:
1. Opt in, an eligible Part D prescription will be paid.
2. Signs an opt out affidavit (requires updating every two years), eligible Part D prescriptions will be paid.
3. Does nothing, eligible Part D prescriptions will be denied.

By June 1, 2015, the appropriate form should be sent to:

Novitas Solutions, Inc
Provider Enrollment Services
PO Box 3157
Mechanicsburg, PA 17055-1836

In summary — Prescribers of Part D drugs must submit their Medicare enrollment application or opt-out affidavits to Novitas by June 1, 2015 or earlier to avoid their patients’ prescription drug claims from being denied by their part D plans beginning December 1, 2015.

For more information and to obtain the appropriate forms visit:
http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/Part-D-Enrollment-Information.html (CMS website article)
In November 2013, *U.S. News and World Report* found that STEM studies (Science, Technology, Engineering and Math) were the hottest majors in college. It’s no surprise that the current generation of Lego Robotic, app developing, kitchen chemist young minds are finding hope in science. We must help by fueling a new generation of idea development that will continue to promote growth in new materials and technology.

Luckily there is significant research going on in our three state dental schools. I had a chance to meet and talk with Dr. Steven Jefferies at Temple University Kornberg School of Dentistry about what brought him into research and what he sees for the future of dental material research.

Dr. Steven R. Jefferies is a Professor in the Department of Restorative Dentistry, Maurice H. Kornberg School of Dentistry, Temple University; where he holds the Donald and Cecelia Platnick Professorship in Restorative Dentistry. He is also the Director of the Biomaterials Research Laboratory in the Department of Restorative Dentistry; and Director of Clinical Research for the School of Dentistry. Prior to his current full-time academic position, Dr. Jefferies completed almost 20 years of service with Dentsply International, where he was Corporate Vice President for Advanced Technology, Vice President of Corporate Product Development, and Director of Clinical Research for Dentsply’s Caulk Division in Milford, Delaware. He has also held the appointment of Associate Clinical Professor in the Advanced Education in General Dentistry (AEGD) Program of the Department of Health Promotion and Policy, Dental School, University of Maryland at Baltimore.

After completing a General Practice Residency (GPR) in the United States Public Health Service, Dr. Jefferies was in full-time private general practice for almost six years. He has been an inventor or co-inventor on 29 issued U.S. Patents and 63 Worldwide Patent Disclosures; an author or co-author on over 60 scientific articles and abstracts, including 3 book chapters. His educational credentials include: a DDS from the University of Maryland, Baltimore; an MS (Chemical and Biochemical Engineering) from Rutgers, The State University of New Jersey-New Brunswick; a PhD,(Dental Materials/Operative Dentistry) from the Medical University of South Africa; and a BA in Biology/(Coursework in Mechanical Engineering) from The Johns Hopkins University, Baltimore, Maryland. He is a member of the American Dental Association, Academy of General Dentistry, International Association of Dental Research/ American Association of Dental Research, and the Academy of Operative Dentistry; and is a fellow in the International College of Dentists, American College of Dentists, the Academy of Dentistry International, and Academy of General Dentistry.

We must help by fueling a new generation of idea development

*Continues on Page 18*
Dr. Jefferies could you tell me about your facility at Temple?

Dr. Jefferies: The Department of Restorative Dentistry at the Kornberg School of Dentistry/Temple University maintains a dedicated biomaterials testing laboratory. The laboratory maintains instrumentation for mechanical strength testing of materials and various tissues (Instron Mechanical Tester); a microhardness/surface modulus analyzer (CSM Instruments); a contact profilometer (Surftester SE 1700); a VC-50 precision diamond saw (Leco); a Model 900 Grinder/Polisher (Southbay Technologies); and several standard light and stereoptical microscopes for taking digital images of the teeth (SLR digital camera/microscope (Olympus DP1II Digital Camera/Microscope with Optiva Zoom 100 lens attachment) and a Nikon microscope with digital camera attachment as part of the CSM microhardness tester.

The laboratory also maintains a collaborative relationship with the Microcomputed Tomography (micro CT) core facility in the Department of Anatomy and Cell Biology at the Temple University School of Medicine; and also has access to Scanning Electron Microscopy (SEM) facilities and expertise in the Department of Bioengineering on the main campus, Temple University.

The research interests of this biomaterials laboratory include the following areas: Dental Biomaterials Property Evaluations; Surface Modification of Enamel/Dentin; Remineralization/Caries Treatment; Oral Health Clinical Research; Tissue Engineering/Peptide Drug Delivery; and laboratory/clinical evaluation of Bioactive, “Smart” Materials.

How long have you been at Temple and give me a short history of where you were before?

Dr. Jefferies: I came to Temple on November 1, 2005. Prior to joining Temple University, I completed almost 20 years of service with Dentsply International; having served as Corporate Vice President for Advanced Technology, Vice President of Corporate Product Development, and as Director of Clinical Research for Dentsply’s Caulk Division in Milford, Delaware.

Concurrent with my positions at Dentsply, I am an Associate Clinical Professor in the Advanced Education in General Dentistry (AEGD) Program of the Department of Health Promotion and Policy, Dental School, University of Maryland at Baltimore. Prior to joining Dentsply International, I completed a one-year General Practice Residency at the United States Public Health Service Hospital in New Orleans, Louisiana, followed by five years in full-time private practice in Baltimore, Maryland.

How did you get started in the research of dental materials?

Dr. Jefferies: I started being involved in biomaterials research as a graduate student in chemical and biochemical Engineering at John Hopkins University, and continued research in that area as a dental student.

What significant research has come out of Temple in its past history?

Dr. Jefferies: We have significant research programs in the departments of Endodontics, Periodontics and Orthodontics, specifically in the areas of viral bacteriophage, microbiology, and muscle research. My research has focused on the study and translation of bioactive restorative dental materials. Dr. Dan Boston (Associate Dean) has been involved in the development of new dental technology such as the fissurotomy and smart burs, and has also collaborated with me on a number of laboratory and clinical research investigations.

What has come to market with your assistance?

Dr. Jefferies: Most recently, our laboratory and research group conducted the translational research leading to the introduction of the first bioactive luting cement, Ceramir Crown & Bridge. At Dentsply, I was the inventor of the Enhance Finishing Device, and hold a number of patents involved in the development of a number of composite restoratives, cements, and dental adhesives.
What would you say to other who would like to go into research?

Dr. Jefferies: Research is a critical and essential function in the process of discovery and the creation of new knowledge. Current thinking is that all students in dental school should develop a basic understanding of the role of science in dentistry and have some exposure and experience with a research project or activity during their dental school experience. Such activities will further develop critical thinking skills. For those individuals who want a more in-depth involvement in research, especially dental research, a strong background in the basic sciences, basic research methods, and applied mathematics-computer science and statistics is very important. For those who wish to pursue an active career in research, post-graduate training leading to a PhD is very helpful, but not essential.

It is critical to identify faculty and mentors to work and study with in your chosen research field. If a student is uncertain about specific areas of research or has multiple interests, it may be very helpful to meet with your associate dean of research and/or various faculty engaged in research at their institutions to identify a specific research area to pursue.

How has research changed in the past 30 years?

Dr. Jefferies: Dental research has expanded internationally and there is greater competition for resources and research funding. The expanded focus on dental research internationally has also created more opportunities for collaboration. There have been considerable technical advances in our analytic and measurement capabilities and test methods, especially in the areas of materials science and molecular biology. Research methods and advances in information technology and computer aided analysis/reconstruction/manufacturing have also dramatically changed dental research.

Is there a different focus or direction in dental research today?

Dr. Jefferies: In the area of dental and biomaterials, nanotechnology and nanoscience are having a significant impact. Research concerning new technology to diagnose and treat (remineralize) early, incipient enamel carious lesions has recently emerged and will continue to evolve. The concept of inert dental materials is being replaced by the development of responsive, “bioactive” and/or interactive dental materials. These materials may have the ability for self-repair, antimicrobial action and controlled release of therapeutic agents (such as fluoride), as well as the ability to stabilize the dentin-material interface.

The study of the interaction between bacterial biofilms and dental materials is receiving increased attention as well. Stem cells and regenerative technology are having an increasing focus in the areas of operative dentistry, endodontics, periodontics, implantology, and reconstructive oral surgery. The ability to manage “large data” through advances in information technology is expanding research in oral health and dental epidemiology.

You talk about remineralization. Can you be more specific on how the process works?

Dr. Jefferies: Most of the current remineralizing agents available today are calcium- or calcium phosphate-based formulations (with or without fluoride), which when applied to areas of demineralized enamel, deliver both sufficient quantities of calcium and phosphate to that area to promote the formation of new apatite-like mineral and as such facilitate the remineralization process.

How have the labs changed and the level of research to develop new products and materials?

Dr. Jefferies: There has been an increased emphasis on translational research (laboratory bench to chairside clinical evaluation). There is also an increased awareness of the funded federal research programs such as the Small Business Innovative Research (SBIR), which can provide start-up funding to small technology businesses in collaboration with university/dental school research centers to develop new materials. There are other sources of funding available (industry, private foundations), but these appear to be more limited and targeted to specific areas of interest.

What are the current challenges in the lab? (i.e. funding, pressure from companies, pressure from the scientific community)

Dr. Jefferies: Funding in dental research appears to be far more competitive today than in previous decades. As was noted above, there are more research laboratories working around the world, especially in the area of dental materials research. Funds for
dental materials research are more limited as well. The Biomaterials Laboratory/Clinical Research Program at Kornberg/Temple has been fortunate to secure some commercial grants in the last decade directed at translational research in areas of new and advanced technology in dentistry. We also have a current ongoing research collaboration with a major internationally researcher in the area of bioactive materials.

What do you see for the future? What is on the horizon?

Dr. Jefferies: In the area of dental materials, we may be able to develop a “true,” cost-effective, direct-placement, tooth colored alternative to amalgam. Bioactive and regenerative dental materials will also have an expanded role in restorative and reconstructive dentistry. Also, we will probably see a greater impact of CAD/CAM fabricated restorations as the technology expands to more dental practices with increased accuracy and lower cost. Improved adhesives with bioactive and anti-microbial activity have just recently appeared and are currently in development.

Future research directions include: three-dimensional, micro-CT analysis of early carious lesions and various treatment modalities; therapeutic delivery of osteogenic peptides on calcium and titanium biomaterials; clinical evaluation of new dental biomaterials and therapeutic agents for erosion/demineralization; in-vitro/in-vivo evaluation of bioactive/“smart” biomaterials with respect to “bio-toughening” properties; and the effect of various oral therapeutics/surface treatments on surface microhardness and material micro surface roughness.

Our latest and future planned research efforts have included, but not been limited to, investigation of the remineralization potential of new experimental fluoride varnishes, and the further exploration of a recent discovery in our laboratory concerning the ability of calcium-based, bioactive cements to reseal marginal gaps and defects. These efforts serve the profession and practicing dentists by providing important translational laboratory and clinical research information to the clinician and exploring potentially new materials and oral therapeutics to improve patient care.

What are manufacturers or dentists asking for?

Dr. Jefferies: Dentists continue to request products and restorative systems that are less technique sensitive, user friendly, and that give consistent, reliable clinical results. Manufacturers appeared also to be focused on providing these same product performance characteristics. Clinicians I speak with are also asking for more product-specific clinical studies (in addition to available laboratory studies) to assist them in selection of new dental materials.

You are obviously involved in dental materials. If you had to do it over would you wish to be in another area of research?

Dr. Jefferies: No, I would select my career course in dental materials. I was so fortunate to have the unique opportunity to combine a professional career that spanned private practice, positions of increasing research responsibility in industry, and my current position in academic dentistry. I was also so fortunate to meet and work with so many outstanding clinicians, scientists who assisted me greatly over the years and from whom I learned so much. No, I wouldn’t change anything.

We all love our toys. Is your lab missing anything you wished you had?

Dr. Jefferies: A table-top SEM with Energy-dispersive X-ray spectroscopy (EDX or EDS) right in our laboratory to permit qualitative morphological and quantitative elemental analysis.

You are a long standing member of the ADA. Can you comment what you see as member value?

Dr. Jefferies: The ADA’s role as a major leader and resource for reliable clinical and scientific information has always been a great benefit to me throughout my roles in private practice, industry and academics. The ADA’s history with and support for the Standards Program for professional and consumer dental products, as well as the more recent development of the Association’s Evidence Based Dentistry program, have both been significant and often unsung benefits to clinicians and patients. The ADA’s support of dental students’ early involvement in oral health science and dental research is also noteworthy. All of these efforts, among many others, are examples of valuable benefits that we can relate to new graduates to encourage their membership and active participation in the ADA.

Thank you Dr. Jefferies for spending time with our readers. We are very happy to see that you are a member of the ADA and PDA.
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CLINICOPATHOLOGIC REVIEW:

RADIOLUCENCY OF THE JAW ASSOCIATED WITH AN UNERUPTED TOOTH
A 19-year-old female presented for an orthodontic consult due to a delayed eruption of #5 and 6 (permanent maxillary right first premolar and canine). Clinically, she presented with multiple displaced teeth in the upper jaw and a retained #C (primary maxillary right canine). The patient’s medical history is noncontributory.

A cone beam computed tomography imaging was performed to evaluate for her delayed eruption. The imaging showed an incidental finding of a well circumscribed, expansile, corticated, unilocular radiolucency enveloping the entire impacted tooth #5. Within the radiolucency were scattered speckles “snowflakes” of radiopacities coronal to the crown of #5 (Figure 1 and 2). The lesion seems to have some buccal expansion resoring the buccal cortical wall, and thinning the buccal wall of the maxilla. The lesion appears to be pushing #4 distally and has displaced #6 superiority and mesially producing a slight bulge on the lateral nasal wall.

The patient was referred to an oral and maxillofacial surgeon for the excision of the lesion. The specimen was submitted for histopathologic examination. The specimen showed an encapsulated lesion of epithelial cells which are spindle and polyhedral in shape forming a swirled pattern. Some epithelial cells formed small nests referred to as ‘duct-like spaces’ (“rosettes”) often enclosing droplets of an eosinophilic material (Figure 3). Areas of calcification were also seen which represented the snowflake opacities (Figure 4).

**WHAT IS THE DIAGNOSIS?**

A. Dentigerous cyst  
B. Calcifying cystic odontogenic tumor  
C. Adenomatoid odontogenic tumor  
D. Calcifying epithelial odontogenic tumor

---

**Figure 1.**  
A reconstructed panoramic radiograph from the cone beam CT showing a well circumscribed, expansile, corticated, unilocular radiolucency enveloping the entire impacted tooth #5. Within the radiolucency are scattered speckles “snowflakes” of radiopacities coronal to the crown of #5.

**Figure 2.**  
A sagittal view of the cone beam CT.
INTRODUCTION

Adenomatoid odontogenic tumor (AOT) is a progressively slow growing, encapsulated tumor of benign odontogenic epithelium with mature fibrous stroma without odontogenic ectomesenchyme. The lesion accounts for about 1.7-7.5% of odontogenic tumors. The tumor has been described as the “two-thirds tumor.” With two-thirds of the tumor occurring in females, two-thirds of the tumor occurs in the anterior maxilla, two-thirds of associated unerupted teeth are permanent canines, two-thirds are also associated with scattered radiopaque foci, and the lesion is usually diagnosed in patients in their second and third decade of life with two-thirds of patients in the second decade. However, it can be diagnosed at any age. The lesion is almost exclusively found intraosseous, and a peripheral type is rare. The intraosseous type could be follicular or extrafollicular; follicular when it is enveloping an unerupted tooth (usually the maxillary permanent canine) and extrafollicular when it is unrelated to an unerupted tooth. Clinically, the lesion is asymptomatic and is usually found on a routine exam or on evaluation for a delayed eruption. The lesion may present as a palpable bony-hard swelling that may or may not have pain associated with it. A peripheral lesion may present with an epulis-like swelling of the gingiva. Radiographically, the intraosseous type presents as a unilocular, corticated, well-defined radiolucency with occasional scattered coronal radiopaque foci “snowflakes” and may cause tooth displacement, and if associated with an unerupted tooth it attaches beyond the cementoenamel junction of the tooth. Peripheral lesions can cause cupping, or slight erosion of the alveolar bone. The treatment involves enucleation/excision and the lesion rarely recurs.

DISCUSSION

Option A. Dentigerous cyst. The radiolucency associated with this unerupted permanent maxillary right first premolar makes a dentigerous cyst a clinical differential diagnosis. Dentigerous cyst is an odontogenic developmental cyst that forms as a result of fluid accumulation in the follicular space of an unerupted tooth. The reduced enamel epithelium gives rise to the cystic epithelium in a dentigerous cyst, which is usually associated with the crown of a tooth extending to the cementoenamel junction. It is considered a cystic lesion once the dental follicle expands at least 3-4 mm around the tooth. It is commonly found around unerupted third molars, particularly the mandible, although impacted canines and premolars can be involved as well. The lesion is commonly asymptomatic but can become infected, leading to symptoms of pain and swelling. Dentigerous cyst does have the potential to expand greatly and may present with some swelling or bone expansion. Radiographically, the lesion presents as a well-defined, unilocular, corticated, and mostly expansile lesion around the crown of an unerupted tooth extending to the cementoenamel junction. The presence of speckles “snowflakes” of radiopacities coronal to the crown of #5 and extension of the lesion beyond the cementoenamel junction enveloping the unerupted tooth argues against dentigerous cyst as a diagnosis.

Option B. Califying cystic odontogenic tumor (CCOT). CCOT, an odontogenic ghost cell lesion, which is also known as Gorlin cyst, is a benign odontogenic tumor of odontogenic epithelium with odontogenic ectomesenchyme, with or without hard tissue formation. It is a slow-growing neoplasm that is made up of ameloblastic-like epithelium and ghost cells that may or may not calcify. The ghost cells are commonly found within the cystic cavity and in the fibrous wall. It is the most common odontogenic tumor that can be associated with other odontogenic tumors.
Clinically, the lesion presents as an asymptomatic lesion and has a predilection for anterior parts of the jaw, and may present with some swelling. Radiographically, most lesions present as unilocular radiolucency with about 50 percent of them having a variable amount of radiopacities. About a one-third of them may be associated with an unerupted tooth, often a canine. Clinical differentiation of CCOT from AOT may be difficult warranting histopathologic examination. CCOT is made up of ameloblastic-like epithelium and ghost cells which is absent in AOT.

**Option D.** Calcifying epithelial odontogenic tumor (CEOT). CEOT is also known as Pindborg tumor. It is a benign odontogenic tumor of odontogenic epithelium with mature fibrous stroma without odontogenic ectomesenchyme. CEOT is a slow-growing, locally aggressive lesion made up of irregular sheets/islands of eosinophilic polyhedral epithelial cells with an eosinophilic amorphous material which stains with amyloid markers that tends to calcify into basophilic concentric rings (Liesegang rings). There are two types, an intraosseous type and peripheral type. The intraosseous type is more commonly found in the mandible and has a predilection for the premolar and molar region. If the lesion is peripheral it usually occurs in the anterior gingiva. Radiographically, it can present with varying appearance from poorly/diffuse to well-circumscribed unilocular radiolucency with flecks of radiopacities (driven snow). It may or may not be associated with an impacted tooth. Clinical differentiation of CEOT from AOT may be difficult also warranting histopathologic examination. CEOT consist of sheets of epithelial cells and amyloid-like material which is absent in AOT.

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**REFERENCES**


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April 16-19
Bedford Springs Resort
Bedford, PA
PAGD Annual Meeting featuring Dr. William Strupp, Dr. Karl Korner and Dr. John Portwood

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Implants: The Nuts and Bolts of Implant Dentistry from Gaining Case Acceptance to Full Mouth Restorations with Dr. Zola Makrauer

May 8
Scranton, PA
Comprehensive Diagnosis of Obstructive Sleep Apnea and Understanding the Sleep Study Location with Dr. Jeff Horowitz

May 15
State College, PA
Endodontics: Treatment Planning, Techniques and Materials for General Practitioners with Dr. Robert Salehribi

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McElwee Receives Two Honors

Congratulations to PDA’s Charles McElwee, who was recently presented two prestigious honors. The Irish Echo, the largest and most widely read Irish-American weekly newspaper, honored McElwee as one of its distinguished group of “40 Under 40” Irish and Irish-Americans for his professional accomplishments and extensive historic preservation work. He received the award February 27 in The Manhattan Club at Rosie O’Grady’s in New York City.

McElwee was also honored by the City of Hazleton, receiving the Irish-American Award for his service to the city during a ceremony at the Markle Lobby of Hayden Tower in downtown Hazleton on March 13. He received a commendation from Hazleton Mayor Joseph Yannuzzi recognizing him for contributions to the city as a consultant to the Downtown Hazleton Alliance for Progress, columnist for the Hazleton Standard-Speaker and volunteer on the board of the Greater Hazleton Historical Society and Museum.

A graduate of Lebanon Valley College, McElwee has been a government relations coordinator at PDA since 2012. He is currently completing a Masters in Public Administration from the Fels Institute of Government at the University of Pennsylvania. He will graduate this August.
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Born: 1928
Died: 10/12/2014

Dr. Robert Weber Tighe
Allentown
Temple University (2002)
Born: 1974
Died: 2/1/2015

Dr. Hugh W. Wilson
Selinsgrove
Temple University (1970)
Born: 1944
Died: 12/5/2014

Dr. Joshua H. Barron
Lansdowne
Temple University (1952)
Born: 1928
Died: 10/12/2014

Dr. David B. Agostoni
Pittsburgh
University of Pittsburgh (1971)
Born: 1945
Died: 1/23/2015

Dr. Salvatore A. Migliore
Ellwood City
University of Pittsburgh (1961)
Born: 1931
Died: 12/7/2014

Dr. C. Rebecca Shelby
Lancaster
University of Pittsburgh (1994)
Born: 1968
Died: 11/22/2014
Are you interested in...

- Receiving world-class CE?
- Networking with your peers from around the country?
- Exploring your nation’s capital?

Then, save the date for ADA 2015 — America’s Dental Meeting.

For the first time in nearly two decades, the annual meeting is coming to Washington, D.C. this November 5-10, and there are lots of new and exciting additions in store for you.

With over 300 CE courses, the annual meeting is the innovator of cutting-edge educational offerings. Take advantage of over 80 hands-on workshops, the ever popular live-patient Education in the Round and a not-to-be-missed exhibit hall where you can find the specialty pavilion, CAD/CAM live-patient stage, health and fitness courses, and more.

Join us at the Opening General Session for the Distinguished Speakers Series. Hear Charles Krauthammer and Eleanor Clift speak and gain D.C. insider perspectives of the upcoming 2016 presidential election.

Have you been in practice for less than 10 years? The New Dentist Conference is being held at the annual meeting this year. Check out ADA.org/meeting to learn more about all the exciting new opportunities (hint: customized CE track, exclusive lounge, significantly reduced hotel rates, and more!).

Having a local network is helpful, but having a national network can be incredibly powerful. Connect with colleagues from across the country and catch up with old friends. New this year, you and your family are invited to the new after-hours Welcome Reception taking place at two of the world-renowned Smithsonian museums, the National Museum of Natural History and National Museum of American History.

Looking to combine the annual meeting with a vacation? Recently named the “Coolest City in America” by Forbes, Washington, D.C. has lots to offer everyone from historic monuments and museums to exceptional cuisine and family fun.

Registration for ADA 2015 opens in May, so mark your calendars. For more information, visit ADA.org/meeting.
## University of Pittsburgh

- **November 12**
  The Science Of Good Health And Longevity  
  Dr. Nasir Bashirelahi

- **Pittsburgh (VAMC)**
  - **April 29**
    Current State Of Sedation In Dentistry Restorative Dentistry  
    Dr. Joseph Giovannetti

- **Reading**
  - **September 18**
    The ABC’s of Pediatric Dentistry... It’s As Easy As 1...2...3!  
    Dr. Mary Beth Dunn

- **Scranton**
  - **April 22**
    Shift Happens! Problem Solvers for Restorative Dentistry  
    Dr. Howard Strasser

- **Titusville**
  - **April 22**
    Is What We Do For Our Patients Really The Best Treatment – How Do You Decide?  
    Dr. Carl Driscoll

## Temple University

- **Contact:** Nicole Carreno  
  (215) 707-7541  
  (215) 707-7107 (Fax)  
  ncarreno@temple.edu

- **University of Pennsylvania**

- **Contact:** Pamela Rice  
  Administrative Secretary  
  (215) 573-6841  
  pamrice@dental.upenn.edu

- **June 11-13**
  The Penn Esthetics Symposium  
  Course Directors: Joseph P. Fiorellini, DMD, DMSc  
  Ernesto A. Lee, DMD  
  [www.dental.upenn.edu/esthetics2015](http://www.dental.upenn.edu/esthetics2015)

- **June 28-July 3**
  Penn Periodontal Conference  
  Course Director: Denis F. Kinane, BDS, PhD  
  Dana T. Graves, DDS, DMSc  
  [www.dental.upenn.edu/pennperio2015](http://www.dental.upenn.edu/pennperio2015)

- **October 17**
  AAOMF Fall Meeting 2015  
  The World of Oral Medicine: Essentials for Healthcare Professionals  
  Course Director: Eric T. Stooper, DMD, FDS RCSEd, FDS RCSEng  
  [www.dental.upenn.edu/cde](http://www.dental.upenn.edu/cde)

- **November 14**
  TMJ A to Z  
  Initial Management Strategies, Approaches and End-Stage Disease  
  Course Director: Eric Granquist, DMD, MD  
  [www.dental.upenn.edu/TMJ2015](http://www.dental.upenn.edu/TMJ2015)

## Greensburg

- **Giannilli’s II Restaurant & Banquet Facility**  
  Contact: Rebecca Von Nieda, PDA  
  (800) 223-0016, ext. 117

- **May 8**
  The Latest, Concise Information on Cardiovascular Disease—Supplements and Everything In-Between  
  James Lichon, RPh, DDS, NCCM

- **September 25**
  Problem Solving with Composite – Unique Solutions to Everyday Practice Solutions  
  Robert N. Obrodovich, DMD

## Wellsboro

- **Tokishi Training Center**  
  Contact: Rebecca Von Nieda, PDA  
  (800) 223-0016, ext. 117

- **May 8**
  The Latest, Concise Information on Cardiovascular Disease—Supplements and Everything In-Between  
  James Lichon, RPh, DDS, NCCM

## Brookville

- **Pinecrest Country Club**  
  Contact: Rebecca Von Nieda, PDA  
  (800) 223-0016, ext. 117

- **May 1**
  Digital X-Ray Imaging and Dental X-Rays – Are They Safe? Are They Necessary?  
  Dale A. Miles, DDS, MS, FRCDC

- **June 5**
  Esthetic Dentistry and Periodontal Prosthesis: A Wonderful Marriage for Today’s Restorative Dentist  
  Joseph R. Greenberg, DMD, FAGD
### Dental Society of Chester County and Delaware County

**PDA/PDAIS**

| Bel-Aire Hotel, Erie          | Contact: Rebecca Von Nieda, PDA  
|                              | (800) 223-0016, ext. 117  
| May 15                       | The New Materials & The New Restorative Dentistry — Opportunities & Challenges  
| Steve R. Jeffries, MS, DDS, PhD |  

**Pennsylvania Prosthodontics Association**

| Contact: Dr. David Kopecki  
| (610) 363-2300  
| Drdkopecki@aol.com  
| Registration:  
| PPAMeeting@eventbrite.com |  
| June 5-6                  | Real World Dentistry Circa 2015  
| Dr. David Garber          |

### The Institute For Facial Esthetics

| Fort Washington          | Contact: Linda Maroney, CE Coordinator  
| (215) 643-5881  
| On-Line Registration:   | www.iffe.net/registration  
| May 18                   | Severely Atrophic Maxilla  
| Thomas J. Balshi, DDS, PhD, FACP  
| Glenn J. Wolfinger, DMD, FACP  
| Stephen F. Balshi, MBE  
| June 1                   | All-On-4 and More  
| Thomas J. Balshi, DDS, PhD, FACP  
| Glenn J. Wolfinger, DMD, FACP  
| Stephen F. Balshi, MBE  
| June 13                  | Dental Assisting in the Implant Practice  
| James R. Bowers, DDS  
| Hillerie Swinehart, EFDA  
| September 14-15          | Teeth In A Day®  
| Thomas J. Balshi, DDS, PhD, FACP  
| Glenn J. Wolfinger, DMD, FACP  
| Stephen F. Balshi, MBE  
| October 5                | All-On-4 and More  
| Thomas J. Balshi, DDS, PhD, FACP  
| Glenn J. Wolfinger, DMD, FACP  
| Stephen F. Balshi, MBE  
| November 9               | Advanced Guided Surgery with Zygoma  
| Thomas J. Balshi, DDS, PhD, FACP  
| Glenn J. Wolfinger, DMD, FACP  
| Stephen F. Balshi, MBE  

### Eastern Dental Society 2015

**Spring All Day Program: Friday, May 15, 2015**

_The Buck Hotel, Feasterville, PA_

“Dentistry 360”

In this “Total Office Training”, Timothy Biga, D.D.S., Theresa Groody, M.Ed., EFDA, CDA, Marianne Drywer, RDH, M.Ed., and practice management consultant Amy Kirsch came together for one day at the Buck Hotel together to present and train you and your staff in the latest techniques and technologies that are driving advancements in dental care and practice development. We invite you, your assistants, hygienists, and your front desk staff to experience this one of a kind course. Each group in your team will experience their own lecture from these experts in their field. As the doctor, Tim Biga, D.D.S. will educate you on the clinical and practice management advancements in dentistry. And at the end...your entire team comes back together to tie everything together. This course format is changing the way study clubs and dental societies engage their dental teams and advance their practice.

**Annual Golf Outing: June, 2015**

Philmont Country Club

For more information on Eastern Dental Society, please contact Dr. Michael Salin at Info@EasternDental.org or (215) 322-7810; or visit us online at www.Eastern-Dental.org.
OPPORTUNITIES AVAILABLE

Outstanding Career Opportunities
In Pennsylvania, providing ongoing professional development, financial advancement and more. Positions also available in FL, GA, IN, MI, VA and MD. For more information contact Jeff Dreels at (941) 955-3150, fax CV to (941) 330-1731 or email dreels@dentalcarealliance.com or visit our website www.dentalcarealliance.com.

Immediate Opportunity — Shamokin Dam
Merit Dental is seeking dental candidates for an immediate practice opportunity in Shamokin Dam. Our philosophy of preserving and supporting the traditional private practice setting provides a great work-life balance, excellent compensation and benefits, and unlimited opportunity for professional development. Our comprehensive support team takes care of the administrative details, providing you the freedom to lead your team while focusing on your patients and skills. If you possess a passion for providing quality care and are looking for a rewarding practice opportunity in Shamokin Dam, please contact Brad Smith by phone at (715) 590-2467 or email at bsmith@midwest-dental.com. Visit our website or apply online at: www.mymerididental.com.

ASSOCIATED NEEDED
A P/T OR F/T general dentist needed for a well-established family practice in Hanover. We have a steady patient base, a friendly staff and excellent work atmosphere. Competitive base salary with bonus and other benefits. Please email resume to wibowo80@yahoo.com or call (215) 820-7113.

Associate — General Dental Practice
Beaver County Pennsylvania (Pittsburgh area) extremely busy general practice seeking quality long term associate or buy in candidate. Contemporary practice is computerized and has all digital X-rays. Experience in all phases of general practice including endo, implants and crown and bridge preferred but will consider a recent, qualified graduate. Established practice includes experienced staff, modern equipment, great location, and doctors willing to make this a win-win situation. Contact office at (724) 775-4115 or email mfddmd@comcast.net.

General Dentists Needed
Dental Dreams desires motivated, quality oriented general dentists to work in our busy Pennsylvania practices. At Dental Dreams, we focus on providing the entire family superior quality general dentistry in a modern technologically advanced setting with experienced support staff. Because we understand the tremendous value of our associate dentists, we make sure that their compensation package is amongst the best. Our competitive compensation package includes: minimum guaranteed salary of $150,000 with potential to earn up to $300,000, visa sponsorship, and health and malpractice insurance reimbursement. Make Dental Dreams a reality for you! To apply, please email CV to humanresources@dentaldreams.org or call (312) 274-4520.

Love Doing Dentistry?
Smilebuilderz is a comprehensive dental practice offering a full array of dental services, specialties, and walk in emergency care! We provide a professional support staff, excellent facilities, and advance dental technologies to allow each of our doctors to shine. As a rapidly expanding practice we are looking for exceptional doctors to join our team! Please contact our human resource department to learn more about our opportunities by email at hr@smilebuilderz.com, call Christi at (717) 481-7645 ext. 1084, and visit our site at www.smilebuilderz.com.

Orthodontist Wanted
The Dentists of Brinton Lake in Glen Mills has an unique opportunity for the right Orthodontist. The practice is a multidisciplinary practice with two general dentists, a Periodontist and Oral Surgeon. We are seeking a dynamic Orthodontist to grow the orthodontic portion of our practice.

The dental facility is a new state of the art office, located in a medical pavilion in Chester County, PA. Our referral base is predominately in-house. Initially, our practice requires one day a week of orthodontic time. The position will rapidly require a greater time commitment.

Clinical excellence, a high degree of energy and superior interpersonal communication skills are a must! Draw per day guarantee against a forty percent commission of net receipts, with the Orthodontist receiving whichever is greater. The position is available immediately. If this opportunity interests you, please email your curriculum vitae to: dental@dabl.biz or fax it to (610) 459-8290.
Associate Leading to Partner  
Established, private dental practice in Hanover is seeking a highly motivated dentist to join our team as an Associate leading to a partner. We have a high volume of patients and the number grows daily. Flexible scheduling, optional Fridays and no weekends. Guaranteed Salary, 40%K/Profit sharing. Please contact John Grimes at (717) 632-4164 or john@finkandgrimes.com.

Pediatric Dentist Wanted  
Busy Pottstown family and Pediatric practice seeking a pediatric dentist. Our patient list has been steadily expanding, and we have recently moved to a new, state-of-the-art office. Great opportunity for a recent graduate or young dentist. Email CV and cover letter to rosiejy@comcast.net.

Pedodontist Wanted in Glen Mills  
This is truly a unique opportunity. We are located in Glen Mills, an area of unprecedented growth near West Chester and Philadelphia, PA and Wilmington, Delaware. Our facility is brand new, high tech and well equipped. You will have everything to meet your needs. Our practice consists of four general dentists, a Periodontist, Oral Surgeon, Endodontist and Orthodontist. We currently have over 13,000 active patients and are experiencing rapid growth. At this time we can utilize a Pedodontist one or two days a week.
Please contact our administrator, Myra Reid to schedule an interview. Fax your Curriculum vitae to (610) 459-8290 or email to dental@adabi.biz.

ASSOCIATESHIP  
Multi-Specialty Practice #PA-1206 Lehigh County, 17 Operatories, 7,000 square feet. Owner looking for associate. Office currently open Mon-Fri. Many specialties (OMS, Endo, Ortho). For details contact Bernie Kowalski, DMD, our central/eastern Pennsylvania representative, NPT, LLC (National Practice Transitions) (215) 437-3045 x233, b.kowalski@NPtDental.com or www.NPtDental.com.

Dentist Wanted  
Busy Pottstown family and Pediatric practice seeking a pediatric dentist. Our patient list has been steadily expanding, and we have recently moved to a new, state-of-the-art office. Great opportunity for a recent graduate or young dentist. Email CV and cover letter to rosiejy@comcast.net.

General Dentist  
Part-time position available for experienced DDS or DMD in the Wilkes-Barre, Scranton, Dunmore area. Excellent Pay. Flexible hours. No ovs or weekends. Fixed location. No transport of equipment or supplies needed. Excellent opportunity for dentists looking to supplement their current income. Please email or fax resume. Email lynneb.cwmobiledentistry@verizon.net or fax (855) 562-8030.

Part Time Associate Wanted  
Large family dental practice with 7 operatories in Bedford. Looking for a part-time associate for potential buy-in. Over $800,000 average collections in the last few years. Please contact bedforpadentist@gmail.com.

Wanted Part-Time  
Our office is in need of an Orthodontist on a part-time basis, specifically 1 day per week. The applicant will be joining a group consisting of a General Dentist and a Pediatric Dentist. We are located in beautiful Bucks County Pennsylvania, about 35 minutes northeast of Philadelphia. Contemporary practice is computerized, has digital X-rays and a fantastic staff. Excellent compensation package, plus we provide the opportunity to step in and take over a thriving Orthodontic patient population. Perfect for an individual looking to add substantial supplemental income. To apply, please email CV to mph132@yahoo.com or call (215) 605 3365.

Associate Dentist Wanted  
The position will include: treating dental patients under PA state guidelines. Examine teeth, gums and related tissues, using dental instruments, X-rays and other equipment. Diagnose diseases and plan appropriate treatment and write prescriptions for patients. Education required: DDS or DMD and PA dental license required. Please send your resume to Torresdale Dental Associates, PC, 7108 Torresdale Ave., Philadelphia, PA 19135.

Full Time Dental Associate Position Available  
Partnership or buy in available after one year for the right person. The practice is well established with over 5,000 active patients. Currently we have two full time dentists and five hygienists. There are 10 operatories and a private office for each doctor. Services performed in office include crown and bridge, cosmetic dentistry, implant restoration (not placement) simple root canal treatment, extraction, whitening, InvisibleAlign and a full hygiene program.
Each operatory is equipped with digital radiography equipment, intra oral cameras, computers with both doctor and patient monitors and high speed hand pieces.
Practice has shown consistent growth in a very tough economy. We are located in Mechanicsburg, 10 minutes outside of Harrisburg, the capital. Philadelphia is a two hour drive, NYC 3 hours 20 minutes, Washington 2 hours 15 minutes and Baltimore 1 hour 35 minutes. Please email your resume to skrei22877@aol.com or call (717) 649-0663. All inquiries will be kept confidential.

Part-time GP Wanted  
We are looking for an associate for our GP practice 18-20 hours per week.
We are a growing, patient centered, multi-provider, modern practice located in Lansdale. There is an immediate opening for a dentist who is a self motivated, energetic, and compassionate dental professional with a positive attitude and excellent clinical skills. Qualities and skills should include superb communication, a desire to individually and corporately excel and a team mentality. Excellent opportunity for growth. Please only respond if you have at least 2 to 3 yrs exp.
Compensation: Very competitive based on experience. Email resume to mk0641@aol.com.

General Dentist Wanted  
Immediate F/T salaried position for a general dentist available in busy Central PA multi-dentist clinic. Multiple hygienists and EFDA's. Office recently upgraded to digital X-rays and electronic charting. Must have active dental license for PA. Guaranteed salary with benefits including: health, malpractice insurance and paid time off. Great opportunity for new or experienced dentist. Hours include Monday through Friday with no on call, evenings or weekends. If interested forward resume to srvdhc@gmail.com.

General Dentist  
HealthDrive is seeking a General Dentist to provide dental services to the residents of nursing homes and long term care facilities in the Philadelphia area.
Contact Tanya at providercare@healthdrive.com or (857) 255-0293.

FOR SALE  
For Sale  
Luzerne County, Drums PA. Well located on main road in growing area. General Dental Practice, 4 operatories. Est 25 years . Excellent growth potential. Doctor willing to stay to introduce patients. General Dental Practice in Drums, Luzerne County. Well located on main road in area. 4 operatories. Est 25 years, excellent growth potential. Doctor willing to stay introduce patients. Phone (570) 788-7010 or send resume to jjamacdds@ptd.net.

Home Office with Dental Equipment for Sale  
Home office with parking lot in award winning school district. Located on busy Baltimore Pike in Media. Includes 2 Ops, hygiene room, sterilization lab, N2O plumbed, and compressor. Good opportunity for establishing or relocating a practice. Terms negotiable. Contact Dr. Claire Field at clairefield@verizon.net or (610) 209-5573.

For Sale  
Dental practice and office building for sale in Grove City. Building consists of four operatories, digital radiograph, waiting, reception and computer rooms, two business offices and a one bedroom apartment. Email jwedentist@verizon.net for more information.
For Sale
Dental Practice and Office Building in Charleroi. Spacious reception, panoramic X-ray, multiple computers, electronic surveillance, three apartments for rent. Corner location on route 88 and two private office rooms. Phone (724)-942-1935 or (724) 942-1941 or email csdent@verizon.net.

For Sale
Dental Practice for Sale in McMurray. Excellent location, terr Dam Plaza, ideal a view of the lake. Panoramic X-ray, well designed spacious rooms. Rapidly growing area. Route 19 just south of Donaldson Crossroads. Phone (724)-942-1935 or view of the lake. Panoramic X-ray, well designed spacious rooms. Rapidly growing area. Route 19 just south of Donaldson Crossroads. Phone (724)-942-1935 or www.paragon.us.com or contact David A. Molfa, DMD, MAGD (724) 244-9449 or dmoffa@paragon.us.com.

LEHIGH VALLEY DENTAL PRACTICE FOR SALE
Well established and modern cosmetic & family dental office with 4 ops and over 3,000 active patients. Great location, patients and staff. Practice has much positive growth opportunity. **Confidential information RNR4155@gmail.com or call (610) 217-5507.

Lehighton
Busy 3 operatory, general dentistry practices. Real estate, with additional 2 income residential rentals, for sale or rent. Call (610) 377-4719 or email cchawk@ptd.net.

For Sale
McKEESPORT/HOMESTEAD: Family general practice for sale, gross collections over $500, 000 with well designed treatment areas — well established practice with long time patients and loyal employees. Contact PDI at (412) 373-7044 for confidential information.

For Sale
SOUTH HILLS: Well established general practice with loyal employees, fee for service with $260,000 in collections - senior doctor willing to stay to introduce patients, also willing to treat patients at a limited capacity. Contact PDI at (412) 373-7044 for confidential information.

For Sale
NORTHWEST WASHINGTON CO: Well established family dental practice of 40 years, located in rural Western PA, with over 15,000 patient records. Contact PDI at (412) 373-7044 for confidential information.

For Sale
PERIODONTAL PRACTICE: East suburbs of Pittsburgh, PA with 4 treatment areas in a beautiful office space. Great periodontal practice with steady recalls and great potential for continued growth. Owner is ready to help buyer with introductions to the patients and the referring doctors. Contact PDI at (412) 373-7044 for confidential information.

For Sale
DELMONT/MURRYSVILLE, PA: Newly equipped dental office for rent/purchase/time share to develop your own specialty or general satellite office. All equipment, instruments available for Endodontic, Periodontic, Oral surgery, Orthodontics, or Implant Dentistry. Staff is available to help. Contact PDI at (412) 373-7044 for confidential information.

For Sale
ORTHODONTIC Practice #PA-1214: Lancaster County. 3 Operatories. Highly productive (Avg. net 51%)! Up-to-date equipment. Prosperous county. Dentist currently in process of relocating. Price: $461,000. For details contact Bernie Kowalski, DMD, our central/eastern Pennsylvania representative, NPT, LLC (National Practice Transitions) (215) 437-3045 x233, b.kowalski@NPTdental.com or www.NPTdental.com.

For Sale
Immediately Available in Western PA: Prime location in the North Hills with parking right off of Interstate 79. Well established dental practice w/ 4 op; 2,700 sq/ft of office space. We are willing to sell building or rent building and sell practice with lease of space. Dr. retiring but willing to stay on to introduce patents or work part time. Over 8,000 patent records. Please call us at (724) 612-8625 or email 1979Awilson@gmail.com for more information.

For Sale
Delaware County: Commercial Building for Sale
Drexel Hill (20 minutes from Center City Philadelphia), One story, 2,500 sq/ft professional building for sale with a partially finished basement. Centrally located and on a heavily traveled road. Ideal for dental or medical usage. Previously fit out for an orthodontic practice. All plumbing in place, panorex X-ray equipment, existing cabinetry for front desk, as well as, other mill work. Contact Dr. Anthony Cook, acookdmd@aol.com or call (610) 622-4400.

PRACTICE FOR SALE
General Dental practice for sale in Bedford. 40 Years same location. 3 operators, easily expandable, owner retiring, would help transition. Gross $525,000, 28 hours per week. Historical town and perfect location. Practice, office building and separate remodeled historical home next door for sale. Call (814) 977-1747.

FOR SALE
Ligonier-Latrobe area. Active general practice. Excellent facility, modern equipment (digital), staff, patient base, opportunity. PROFESSIONAL PRACTICE PLANNERS, 332 Fifth Avenue, McKeesport, PA 15131, (412) 673-3144, (412) 621-2882 (after normal hours), stanpoll@aol.com.

FOR SALE
Schuylkill County. Active general practice. Excellent facility, modern equipment, (digital), staff, patient base, and opportunity. Reasonably priced. PROFESSIONAL PRACTICE PLANNERS, 332 Fifth Avenue, McKeesport, PA 15132, (412) 673-3144 or (412) 621-2882 (after normal hours), stanpoll@aol.com.

For Sale
Berks County. Busy office located on 2,100 sq/ft w/room to expand. Diverse group of patients; PPO’s, HMO’s & Medicaid, intraoral cameras, digital X-ray, and a patient education system in all 4 operatories. About 30 new patients per month. Lots of opportunity to grow this, currently, 28 hours per week office. Please call or email Sharon Mascetti (484) 78-4071 or email: Sharon.mascetti@henryschein.com. #PA151.

For Sale
Chester County - Very nice 23 year old practice in the heart of a great area. Recent cosmetic update and the 2,000 sq/ft. Show VERY well. 4 ops, plumbed for 5 and the equipment averages 10 years old. Robust recall system with staff that will be instrumental in the transition. SoftDent. Please call or email Henry Schein Professional Practice Transitions representative Sharon Mascetti at (484) 788-4071 or Sharon.mascetti@henryschein.com. #PA150.
Practice Sale
Western, PA - Your chance to buy one of the most progressive, Fee for Service, in a college town, this practice has it all. E4D, (cad cam) Hard & Soft tissue lasers, places implants, Digital X-ray, Cone Beam, Intra Oral Cameras. Excellent hygiene & soft tissue management programs. Contact Henry Schein Professional Practice Transitions representative: Mark Sirney at (724) 778-8000 or mark.sirney@henryschein.com. #PA142

Practice Sale
Harrisburg area - Established general practice. 3 operatories, active, desirable area, free patient parking. More than 2,700 patients. The practice offers full range of services. Care Stream management software, panoramic X-ray, and good mix of PPOs and FFS. Contact Henry Schein Professional Practice Transitions representative: Donna Costa at (800) 988-5674, donna.costa@henryschein.com. #PA139

Practice Sale
Montgomery County, Well established 5 op GP located in great area. 1,500 active patients. Rev $443,000. Contact Henry Schein Professional Practice Transitions Rep: Donna Costa at (800) 988-5674 or donna.costa@henryschein.com. #PA143

Practice Sale
Very busy, well located and well established 2 op, part time practice! EagleSoft, Digital, free parking in large lot. Leased space. Great satellite or practice start up-DR MOTIVATED!!! Contact Henry Schein Professional Practice Transitions representative: Donna Costa (800) 988-5674, donna.costa@henryschein.com.

Western Pennsylvania / Greater Pittsburgh Area
Numerous practices available with collections ranging from $225,000 to $5,000,000:
PA (#s are collections): GENERAL DENTIST - Altoona $242,000, Beaver Valley $225,000, Carnegie $670,000, Clarion County $630,000, Cranberry Township $300,000, East suburb of Pittsburgh $514,000, Harrison City $770,000, Indiana County $400,000, Pittsburgh-North Hills area $300,000, Pgh-Squirrel Hill $390,000, Venango County $240,000.
PERIODONTAL – Northeastern Suburb of Pgh $822,000
OUTSIDE OF PA
PERIODONTAL – Warrick/Narragansett, Rhode Island $2,300,000, Memphis, Tennessee $5,000,000.
We offer formal Valuation Services in case of divorce, business planning, estate planning, retirement planning, help in determining exit strategy, partner “buy out”, etc. As always, we treat these matters with the highest amount of confidentiality and any contact with United Dental Brokers of America will be kept completely confidential. Please contact Bob Septak at (412) 931-1040 or email bob@udba.biz.
Register your email address at www.UDBA.biz for new dental listings.

PRACTICE FOR SALE

For Rent in Wexford
For rent 2,300 sq/ft office. Beautifully designed with skylights in five fully equipped operators with intra-oral cameras, computer monitors. Office furniture and waiting room furniture can also remain. Turnkey ready. Ready for occupancy October 1, 2015. Ideal location for specialist. Contact drsgeorge@consolidated.net.

Dr. Fill-In “Dentists helping Dentists”
Dr. Fill-in was established 5 years ago to match qualified dentists with dentists who are looking for temporary or permanent dental coverage. We serve the Pennsylvania and New Jersey area to keep your office open while you are away. For more information, please visit our website at www.doctorfillin.com or if you prefer contact us by phone at (610) 216-2899.

PROFESSIONAL SERVICES

PRACTICE SALE/PURCHASE
OFFICE LAYOUT and DESIGN, HELP WITH EQUIPMENT SELECTION, PRACTICE AND EQUIPMENT APPRAISAL, GREAT SELECTION OF REFURBISHED AND NEW EQUIPMENT, CONSULTING SERVICES. ESTABLISHED IN 1986 to THINK AS A DENTIST with DENTISTS IN MIND. Contact PDI at (412) 373-7044 for confidential info.

Practice Transitions
We specialize in Practice Sales, Appraisals and Partnership Arrangements in Eastern Pennsylvania. Free Seller and Buyer Guides available. For more details on our services, contact Philip Cooper, DMD, MBA America Practice Consultants, (800) 400-8550 or cooper@ameriprac.com.

Financial Services
Fischer Financial Services, Inc. is an independent money management firm located in Harrisburg. As a “Registered Investment Adviser” with the U.S. Securities and Exchange Commission, the firm specializes in money management for institutions and individuals. To learn more, call (888) 886-1902 or visit www.fischerfinancialservices.com.

PRACTICE TRANSITION
Considering VALUING-SELLING-BUYING-MERGING-EXITING AN ASSOCIATESHIP?? Contact TRANSITION & VALUATION SPECIALISTS, PROFESSIONAL PRACTICE PLANNERS, 332 FIFTH AVENUE, MCKEESPORT, PA 15132. (412) 673-3144 or (412) 621-2882 (after hours) stanpoll@aol.com.
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