

FALL 2015



NEW MEXICO

DENTAL JOURNAL

The Official Publication of the New Mexico Dental Association

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Volunteering around the world



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Shelly L. Fritz, DDS
Editor
 7520 Montgomery Blvd NE, Ste E-12
 Albuquerque, NM 87109
 505-888-6980

New Mexico Dental Association Staff
 9201 Montgomery Blvd NE, Ste 601
 Albuquerque, NM 87111
 505-294-1368 | fax 505-294-9958

Mark Moores, MBA
Executive Director
 mmoores@nmdental.org

Nancy Arenas
Assistant Executive Director
 narenas@nmdental.org

Joseph D. Menapace, PhD
Senior Legislative Consultant
 jdmenapace@comcast.net

Michael Moxey
Director of Communications and Advocacy
 mmoxey@nmdental.org

Kansas K. Begaye
Associate Director of Membership
 kbegaye@nmdental.org

New Mexico Dental Association Officers

Michael Law, DDS
President
 4141 Camino Coyote, Ste A
 Las Cruces, NM 88011
 575-524-5812

Christopher Morgan, DDS
President-Elect
 1442 S Saint Frances Dr., Ste G
 Santa Fe, NM 87505
 505-988-4119
 morgandmd@comcast.net

Joe Valles, DDS
Vice President
 500 Central Ave SE
 Albuquerque, NM 87102
 505-243-3535 (office)
 505-720-0253 (cell)
 joevalles@aol.com

David Manzanares, DDS
Secretary-Treasurer
 3615 State Hwy 47
 Peralta, NM 87042
 505-565-0609 (office)
 505-670-4439 (cell)
 david.j.manzanares@gmail.com

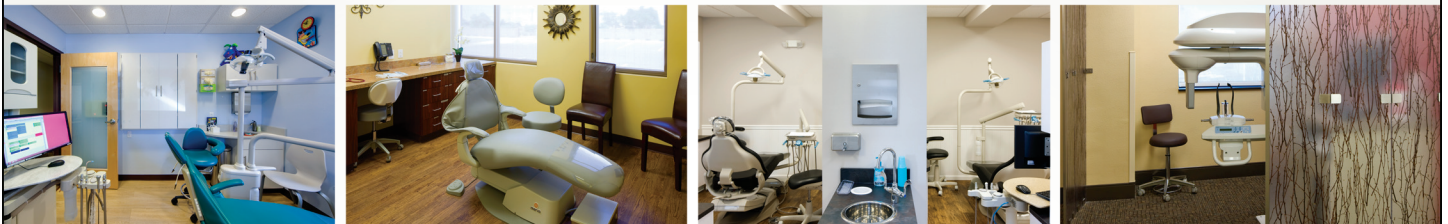
Greg LoPour, DDS
Immediate Past President
 6500 Jefferson St NE, C-4
 Albuquerque, NM 87109
 505-298-7475

Gary Yonemoto, DDS
ADA Fourteenth District Trustee
 Honolulu, HI
 yonemotog@ada.org

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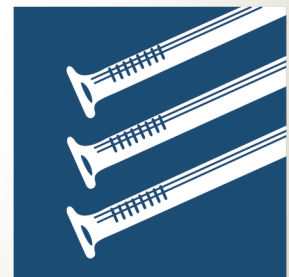
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Michael Law, DDS

President's Message

Colleagues, I hope everyone had a great summer, and is doing well. As you have probably noticed, this issue and the previous issue of the *New Mexico Dental Association Journal* have quite a bit of information contained within on membership. The next few journals will continue to contain more and more information on being a member of the New Mexico Dental Association and how to encourage our colleagues who are not members to become involved in organized dentistry.

The best way we can continue to practice the way we have been practicing is by being able to come together as one voice. The only way to do that is to increase the membership in the New Mexico Dental Association, but in order to do this, I need your help. As some of you may know, our membership market share has dropped over the last couple of years. This is a trend that is not only being seen in our state, but other states throughout the country. Over the next couple of months, we will be rolling out a few new recruitment programs to help those dentists in our state who are not members see the value of being involved in our state's dental association. One program that will be rolled out is our 1-on-1 membership recruitment program. This will involve participation from all of our members. It will be as easy as offering to take a fellow dentist to lunch, or even simply going to their office and talking to them about the New Mexico Dental Association and the benefits of being involved.

Lastly, I would like to thank everyone who attended this year's annual session in Albuquerque. I hope that you saw the value in attending and that you and your staff attend again this next year. I encourage you to invite your colleagues and encourage them to attend along with their staff. We have an amazing line up of speakers for this next year, the largest collection of renowned speakers I have ever seen at our convention. We want to continue to bring renowned speakers to our convention and see it continue to grow. So go out into your community and convince your fellow dentists to attend our amazing convention. The theme this year is "Denim & Diamonds Dentistry"; I feel it explains dentistry in our state, being that we are a laid back people, but we still expect and perform the best quality treatments for our patients.

As always, if you have any questions or suggestions please feel free to contact me.

Sincerely,

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By Michael Moxey—Director of Communications and Government Advocacy

The **New Mexico Dental Association** has been working with the American Dental Association to create an exciting new branding template that brings together the national, state and local components.

This process began in early 2015 and was officially revealed during the 2015 Annual Convention. The results were the fruition of months of research, conference calls and brainstorming sessions. Dozens and dozens of different designs, color palettes and fonts were considered, and the final results were voted on during the Spring 2015 Board of Trustees meeting.

The ADA’s “**Power of Three**” concept ties together the national, state and local dental components. To embody that all three are “one,” the branding designs needed to reflect a consistency that had been lacking to this point. The designs also needed the ability to be tied (or “locked”) together, to create a brand unity.

The final results yielded various New Mexico Dental Association branding designs, as well as branding for each of the 6 component societies, the New Mexico Dental Association Foundation, and the New Mexico Dental Association Alliance. All branding retains a similar look and feel to emphasize the bond between the groups, and lets the public know that we are all part of the same team.

Here is an overview of the branding results:

New Mexico Dental Association standard logos



Component Logos: Each of the 6 statewide component societies also received their own individual design for each of the 3 logo formats.



By Linda J. Hixon, DDS



“I prayed
for you
to come.”

My desire to volunteer was sparked during high school. My high school history teacher, a recent Peace Corps worker in Africa, would hold impromptu language lessons before class. I became obsessed with seeing places where I would need to say, “Get the cow out of the kitchen.” After college, I entered the Peace Corps and built toilets in the Philippines for four years. While there, I also taught local government officials how to write grant proposals, helped improve local water sources, and worked with water and fishing co-ops. The last tasks weren’t in my job description, but they asked me for help.

I went to dental school in my 40s. Shortly after graduation, Hurricane Mitch devastated Honduras and I traveled to the area with a church group to offer free dental care in a parish. One man came to me in tears saying, “I prayed for you to come—my teeth hurt so bad.” I was further hooked on volunteering.

When you are open to volunteering, it’s amazing how many invitations are issued.

I’ve travelled to the Dominican Republic with students from Creighton University. I’ve handled solo missions in Kenya and Tanzania at the invitation of a local Anglican bishop. I’ve taught dental assistants in Sri Lanka with Dental Care International (DCI) and performed free dental work while teaching local women basic chairside procedures. I repeatedly travel to India, Nepal, Cambodia, and Kenya with Global Dental Relief (GDR). The Philippines will always be my second home and every three years I visit in May during mango season and celebrate my Pilipino mother’s birthday. My son often assists during the missions and sometimes my goddaughter, who is also a dentist, helps as well. The missions vary in scale from basic extractions and gross debridements to fully-equipped mobile units as provided by DCI and GDR. Whatever assistance we can provide, there is always a need.



Photos from left

Making friends with a tortoise in Mombasa, Kenya

Clinic in Loon, Bohol, Philippines with my goddaughter, Dr. Adele Maestrada, in foreground

With Dr. Dawn McClellan and the second graduating class of dental assistants in Fridsro, Sri Lanka

On top of Mt. Kilimanjaro, Tanzania

There are two outcomes of volunteering that I value the most:

1) Getting local dentists involved in volunteering; and 2) leading young women into a valuable career in dental assisting.

In Kenya, I was introduced to many public health officials, including the head of the dental school in Mombasa. We agreed that having students work with me in town and at a remote interior site would be beneficial for everyone. I taught the students how to problem solve and adapt their solutions to desired outcomes and they went back to their school and inspired the department to begin free clinics regularly at the remote site. (Picture me leaping with joy.)

In Sri Lanka, I was contacted by the head of DCI to help launch a dental assistant training program for young women. Women in Sri Lanka receive little or no education in favor of their brothers. They are expected to marry, remain at home and have no occupational choices

since they can barely support themselves without an education. The first classes I set up were English (the language of professionals), math, and radiology. And I was tough. Sometimes I worried that I was too hard on the students, but we're leading our third class now and "my girls" from the previous classes came back and said that they know more than their more senior co-workers. All of our graduates have jobs in their field.

I believe that overseas volunteers are born, not made.

My daughter returned from a mission trip in Honduras rejoicing about floors and screens on the windows, not on the beds. She currently works with a volunteer organization based in Seattle. My youngest son came back from his first trip to the Philippines and wanted to know the minimum age requirement to join the Peace Corps (it's 18). While he waits, he accompanies me on select trips. A woman we know, who provides free room and board to volunteers stranded

between flights, expressed her shame in not going overseas herself. On the other hand, she provides a valuable service to travelers voluntarily.

The ability to travel, use a squat toilet and deal with bugs is not universal, but the opportunity to donate one's time and expertise arises daily at home. Simply look for the need.



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By Tony Algermissen, DDS

My parents instilled in my siblings and me the belief that helping the less fortunate is one of the reasons we exist on this earth. In the summer between my high school sophomore and junior year, I travelled to Honduras as part of a team from Amigos de las Americas to administer vaccinations in rural areas. Years later, when my partner, Dr. Shelly Fritz, started going to Guatemala as part of The Faith in Practice organization, it was just a matter of time before I joined the team.

In some ways, the trip to Guatemala was a natural extension of what I experienced in Honduras. We travelled to a Central American country where we didn't speak the language and the poverty was beyond description.

In many ways the trip to Guatemala was very different from my high school mission. I was thrown so far out of my comfort zone. We worked in areas with no electricity and half the time we set up outside with no roof over our heads. With the limited access and materials, we could only perform dental extractions. I have extracted teeth on the beach with the Gulf of Honduras mere steps away. I have extracted teeth under mango trees outside a coffee warehouse. The patient chair

was a wooden table and we used rolls of paper towels as pillows. We had no x-rays. Have you ever extracted a tooth without first looking at an x-ray of that tooth? That will certainly blow you out of your comfort zone.

Have you ever attended to a 14-year-old who is pointing to what looks like a sound lower left first molar, and indicating that it hurts? I didn't want to extract it with no x-ray available to show me what was really there. I asked several times if he was sure it hurt. Shelly's advice to me was "if he says it hurts, then pull it." Sure enough, I pulled the tooth and it had a huge carious interproximal lesion.

The dentistry we practice in Guatemala (and other remote locations) is vastly different from our learned practice experiences in the U.S. It is physically and emotionally exhausting. Yet, as it pulls you back each year, it is like the most addictive narcotic. I feel so needed. The locals are genuinely grateful for our presence. Shelly summed up the work perfectly, "It is nourishment for your soul." ✚



Tony in the catacombs of the famous church in San Agustín Acasaguastlán, El Progreso, Guatemala

You can contact the Faith In Practice office at 713-484-5555 or email teams@faithinpractice.org so that they can work to find a role on one of our available teams.

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By Robin S. Berrin, DMD, MAGD

Dentistry provides us with the ability to alleviate human suffering. Dentists acquire the training to cure oral diseases, perform transformative cosmetic dentistry, and improve the quality of life for their patients. My expectations for a joyous life have been exceeded because I am able to use my dental skills to help people. I have been honored to serve as a volunteer dentist on numerous occasions. I feel that I get more from these experiences than I can give. So, you may be wondering, “How did I get involved? What, where, and when and why did I do it? How was it done?”

During my extended college career I became an active volunteer with the American Cancer Society. After years as a speaker, I was asked to be the chairman of the colorectal screening program in Long Beach, California. Later, a friend referred me to provide outpatient general anesthesia at the first oral surgery practice in the U.S. Dr. L.W. Stark hired and mentored promising pre-dental students; paying for their training to become certified oral surgery assistants. Dr. Stark volunteered his dental services to the homeless at the Union Rescue Mission in Los Angeles. I assisted him as a volunteer once every

three months over a three year period. This was my introduction to volunteer dentistry.

In 1982, I was working for the National Health Service Corps at a migrant health clinic in Crystal City, Texas, when I was approached to go on a dental mission in Mexico. Greg, our pharmacist, asked if I would like to provide free dental care at an orphanage in the border town of Piedras Negras. His wife, Laura, was a Mexican dentist, and would work with me. I accepted the offer and my wife and 12-year-old daughter agreed to volunteer as well. Greg and Laura obtained portable equipment from their church group and I asked my clinic CEO if he would donate excess clinic supplies. To my surprise he was very supportive.

During the mission, we used a portable dental unit and suction unit along with a belt-driven dental hand piece. I taught my daughter to mix alloy pellets with liquid mercury in a mortar and pestle. She would then use the squeeze cloth to remove the excess mercury. Overall, we extracted about 90 painful chronically abscessed teeth and provided over 40 alloy restorations. A few months later we all returned to the same orphanage for more procedures.

The following year we traveled to Del Rio, Texas, and crossed the border to Ciudad Acuna, Mexico to provide dental services in a church.

During procedures, the patients reclined on the church pews. Even though we were working at the same time as Mass, the priest came in and held Mass alongside our clinic.

Our final mission trip to Mexico with Greg and Laura was memorable. We worked at a community center in Piedras Negras. A local dentist stopped by to observe us, liked what we were doing, and joined us. Greg asked him to continue our work afterwards, he accepted, and Greg gave him the portable equipment and arranged for supplies to be delivered through his church’s donations.

My next experience with foreign volunteerism was in the Philippines. In 2003 I attended the Asia Pacific Dental Congress in Manilas. My wife wanted me to lead a free dental mission in Boblaran, the small village where she grew up. I purchased dozens of dental forceps, elevators, toothbrushes, toothpaste, floss, local anesthetic, and disposable supplies. While in the Philippines, we were invited to our friends’ church wedding. The wife was a member of the local dental society, but the couple met and married while working as dentists in Saudi Arabia. About one dozen local and military dentists organized a dental mission in a nearby rural area. My initial role as observer did not last long as they goaded me into working. “Hey, Doc! Let’s see your technique.” I assisted with a number of patients and demonstrated an extraction of an abscessed root to the cheers of the group.

I intended to work for one day in Boblaran; it quickly expanded into a four-day mission. I ran out of local anesthesia and took an hour-long boat trip twice to restock our supply. I saw 142 patients and extracted almost 500 teeth! There was no





electricity, no suction, and no x-rays. I used a hiker's headlamp and used cotton balls for visibility. To sterilize instruments, I soaked them in Clorox for at least two hours. My oldest patient was my wife's 87-year-old uncle. He asked me to extract seven root tips in one day and came back the next day to take out another six roots. I worked all day and into the night, using my headlamp in 95 degrees and 85% humidity. There was a pig pen outside the window and a studious pig stood on his rear legs, snorting and watching my work for the entire four days. People were talking and ranting with glee. I asked my wife what they were saying. She translated,

“Pinch me. I can't believe that he is really here to help us. No one has ever come here to help us.”

My second series of Mexican missions started in 2002. My hiking buddy, Dr. Steven Heath, asked me if I would join a group that was planning a medical mission to Central Mexico in the mountain villages near Durango, Mexico. The group leader was an RN originally from the area. They would coordinate with the local authorities to obtain necessary permits and clearances in the town of Suchil. We named our group “Salud Para Suchil.” The team consisted of two internists, one pediatrician, one dentist, three RNs, one dental assistant, and the children and spouses of the core group. We paid \$100 each for our living and travel expenses. With help from the Catholic Church in Gallup, New Mexico, we obtained tax deduction status and garnered donations from local businesses and drug companies. I supplied the dental equipment for the dental part and my wife donated two used reclining chairs from her beauty

salon. For dry heat sterilization, I used a Black & Decker toaster oven at 500 degrees for one hour.

The medical members of our group were impressed by what services and supplies that I, as a dentist, could provide. They only provided a few months of medications for chronic conditions (pain, diabetes, hypertension, etc.). In dentistry, we perform surgery on almost every patient and we are the branch of medicine that actually cures disease. We follow the surgeon's creed, “A chance to cut is a chance to cure.” I think my MD friends were jealous.

We travelled across the Mexican border and drove all day, past Durango, Mexico to the town of Suchil. This was our staging area. We met other Mexican volunteers, officials, and local villagers to form a truck caravan as we traversed the dangerous, boulder filled trails and crossed several streams. We set up our tents and kitchen equipment in a goat corral which offered some protection from wild creatures. All night we listened to nonstop hee-haws by herds of mules. Our services were provided in classrooms at this location and, in different villages, we worked in community centers or schools. I participated at Suchil with the same group the following year.

In summary, I really do not understand why I volunteer, and why I chose a career in public health dentistry working for the needy. Instead, I feel like I have been chosen to do these things. I am lucky to be asked to participate in dentistry missions and I meet most challenges with a firm belief in myself. That is what some people call the personal “paycheck.” Volunteering experiences are challenges outside my comfort zone that allow me to better meet the next challenge that comes my way.





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By Kenneth J. Armstrong, DDS, PhD

This July, I travelled to Uganda with a team from Impact Nations (impactnations.org) providing medical/dental care and distributing mosquito nets and water filters to residents. We also built homes for widows on recently purchased land.

There were 29 members on our team from the U.S., Canada, Australia, Scotland, England, Ireland and Belgium. I was the sole dentist and my wife was one of our two physicians. The rest of our team consisted of one accountant, one nurse, one psychologist, teachers, caregivers and businesspeople. We held four clinics in villages around Mubende, our base city. Our local contacts were village pastors.

In earlier trips to Uganda, I performed extractions, but in my last two trips I concentrated on preventive care. I applied fluoride varnish to each patient's teeth and, where there was decay, I first applied silver nitrate. By using disposable mirrors and applicators I treated close to 400 patients. I brought 500 toothbrushes, and we gave one to each treated patient and also one to each villager waiting in line at the close of the clinic.

Every patient I saw needed treatment from a hygienist. Some patients had large amounts of calculus on their lower anteriors. I wished I had an ultrasonic scaler! There were almost no previous restorations on any of the patients, although a good number of them had teeth extracted. We worked with translators and one of them had a few amalgam fillings and another was having work done on a root canal. About 30 percent of the patients had no observable decay. The rest of the patients had the usual

mix of some decay to rampant decay. We dispensed acetaminophen or ibuprofen to several patients and also antibiotics where appropriate. We advised patients with serious problems to go to the dental clinic, although the clinics were some distance away and quite expensive.

Getting to the villages was a challenge. Crews in Uganda are building two-lane highways to connect the country's major towns. When turning off these paved roads to get to different areas of the town or to a village, the connecting roads are unpaved. Our team and supplies traveled on two buses; our bus drivers were amazing. The drivers got our buses into areas that I thought were impassible. When we arrived in a village, scores of children would crowd the buses; jumping up and down and wanting to touch us. Some of our team organized games and activities for the children while we were there.

On days that we were not having our clinic in a village, we distributed mosquito nets to residents. We showed each person who received a net how to use it and, since entire families slept under the net, the health benefit of each net was multiplied. We distributed 1,000 nets which will protect almost 3,000 children from malaria.

As some of us distributed mosquito nets, others went through the village handing out Sawyer water filters and two plastic buckets for each filter. We showed the villagers how to use the filters and how to back flush the filter to clean it when necessary. This simple technology can provide thousands of gallons of clean drinkable water. The water is even safer to drink than bottled water.

Two of the major health issues in Uganda are malaria and waterborne diseases. Last year, we returned to a village where we had distributed nets and water filters on a previous trip. We found a greatly reduced number of sick residents and closed the clinic early. The local pastor met his doctor in town and the doctor commented that he had not seen him in a while. The pastor said he was not sick anymore because he was drinking clean water and was even putting on some needed weight!

We spent two weeks in Uganda. Our hours at the clinic were long and after closing we held evening meetings in the village. Afterwards, the team was tired but the work was very satisfying. Many people who go on these journeys have found them life changing and that has been certainly true for me.



You can contact the Impact Nations U.S. office at 505-695-1433 | 877-736-0803, info@impactnations.com or 4830 Pan American Fwy NE, Albuquerque, NM 87109.

Note: Special thanks to Dentsply for providing fluoride varnish and Henry Schein for donating toothbrushes.

PHOTOS FROM THE 2015 NEW MEXICO DENTAL ASSOC

PARIS AND THE HEART OF NORMANDY - JULY 10-17, 2015

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- Albuquerque
- Eastern
- Northwest
- Southwest
- West Central

The American Dental Association, the New Mexico Dental Association and local societies have a tripartite membership structure. Therefore, final approval of your application provides you with membership at all three levels of your professional associations: local, state and national. Your application will be processed and considered by the New Mexico Dental Association.

Please let us know if you need additional information regarding our application procedures, membership dues or the Bylaws and the Principles of Ethics and code of Professional Conduct of the ADA and the New Mexico Dental Society, which govern the professional conduct of members.

To download a membership application go to www.nmdental.org/home/member-information and click on the Join Now and Download the Tripartite Membership (PDF).

Tripartite Membership Application

Thank you for your interest in becoming a member of organized dentistry. The American Dental Association and your state and local dental societies have a tripartite membership structure. Therefore, final approval of your application provides you with membership at all three levels of your professional associations: local, state and national. Your application will be processed and considered by your state or local society, which will provide you with additional information regarding the specific application procedure. Please apply to the society where you practice or all districts in which you practice. For additional information regarding the ADA which governs the professional conduct of members, please visit ADA.org/consumerservices or a list of state dental societies complete this application.

Please complete all sections of this application. Print or type all information.

Personal Information

Name (Last, First, Middle Initial) Male Female

ADA ID Number (if known) State of Birth (select state) Date of Birth (MM/DD/YYYY) State

Primary Office Address City State Zip Phone (Home and work) Fax (Home and work) Email Address Home Address City State Zip Please indicate if you prefer to have mail sent to: Home Office Please indicate if you prefer to have mail sent to: Home Office

Special Name Options (to appear on card) No Yes (Last, First, Middle Initial) (Last, First, Middle Initial) (Last, First, Middle Initial)

If an ADA member encouraged you to join, please indicate Name State

Biographical

Dental School Country Graduation Date (MM/DD/YYYY)

Advanced Education Program (Postdoctoral) Completion Date (MM/DD/YYYY) Certificate Degree

Do you have a degree in an ADA recognized specialty? No Yes, which specialty? Endodontics Pediatric Dentistry Periodontics Public Health Orthodontics Orthodontics and Maxillofacial Surgery Oral & Maxillofacial Pathology Oral & Maxillofacial Prosthodontics Oral & Maxillofacial Radiology Oral & Maxillofacial Surgery

Some societies offer assistance in locating specific situations. Contact your local dental society for information regarding their services.

Please indicate if practices are in: Solo Group Partnership Association Clinic Faculty Federal Dental Service Other

If practicing in other than a solo practice, please indicate the group or practitioner's name and location.

Name State Zip

Please indicate if licensed: Dentistry License pending (If licensed, please list license number(s), date, year and state(s)). Please indicate specialty license information if applicable.

Tripartite Membership Application

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Please complete all sections of this application. Print or type all information.

Personal Background

Have you ever been denied a dental license? No Yes (If yes, in which state? If yes, why?)

Have you ever had your dental license suspended or restricted? No Yes (If yes, in which state? If yes, why?)

Have you ever been censured, suspended or restricted by a dental regulatory organization? No Yes (If yes, please describe (include dates, offenses and penalties):

Have you ever been convicted of a felony or criminal offense involving dishonesty or the influence of alcohol or drugs, but excluding minor traffic violations and parking tickets? No Yes (If yes, please describe (include dates, offenses and penalties):

Applicant Signature

I hereby apply for a tripartite membership to the American Dental Association and request to abide by the Bylaws and Principles of Ethics and Code of Professional Conduct if accepted into membership. If I have paid by credit card below, my signature authorizes payment. Review the Bylaws and code at ADA.org/consumerservices.

Signature (Last, First, Middle Initial) Title

To Be Completed By Society

This society will contact you if payment is required. Do not send payment now.

Component	Date Received (MM/DD/YYYY)	Approval Name	Approval Signature
Consent			
Local Society			
State			
National			

Check Section

Item	Amount	Method of Payment	Security Code
ACA	\$	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express	
Consent	\$	Credit Card Number	
Title	\$	Expiration Date (MM/YY)	
Compassion	\$	Name on Credit Card	
Total Check Owed	\$		

Tripartite Membership Application

Thank you for your interest in becoming a member of organized dentistry. The American Dental Association and your state and local dental societies have a tripartite membership structure. Therefore, final approval of your application provides you with membership at all three levels of your professional associations: local, state and national. Your application will be processed and considered by your state or local society, which will provide you with additional information regarding the specific application procedure. Please apply to the society where you practice or all districts in which you practice. For additional information regarding the ADA which governs the professional conduct of members, please visit ADA.org/consumerservices or a list of state dental societies complete this application.

Please complete all sections of this application. Print or type all information.

ADA State Dental Societies

State	Address	Phone	Fax	Website
Alabama Dental Association	334 265 1684	800 681 3629	800 681 3629	www.aladental.org
Arizona Dental Association	334 262 8218	800 681 3629	800 681 3629	www.azadental.org
Arkansas Dental Association	507 543 3033	800 681 3629	800 681 3629	www.arkadental.org
California Dental Association	907 476 9777	800 681 3629	800 681 3629	www.caladental.org
Colorado Dental Association	807 543 3033	800 681 3629	800 681 3629	www.coladental.org
Connecticut Dental Association	860 464 2777	800 681 3629	800 681 3629	www.ctadental.org
Delaware Dental Association	302 378 3000	800 681 3629	800 681 3629	www.deladental.org
District of Columbia Dental Association	202 342 1212	800 681 3629	800 681 3629	www.dcadental.org
Florida Dental Association	305 464 2777	800 681 3629	800 681 3629	www.fladental.org
Georgia Dental Association	404 543 3033	800 681 3629	800 681 3629	www.gaadental.org
Hawaii Dental Association	808 543 3033	800 681 3629	800 681 3629	www.haadental.org
Illinois Dental Association	618 464 2777	800 681 3629	800 681 3629	www.iladental.org
Indiana Dental Association	317 464 2777	800 681 3629	800 681 3629	www.inadental.org
Iowa Dental Association	515 543 3033	800 681 3629	800 681 3629	www.iwadental.org
Kansas Dental Association	913 464 2777	800 681 3629	800 681 3629	www.knadental.org
Kentucky Dental Association	502 543 3033	800 681 3629	800 681 3629	www.knadental.org
Louisiana Dental Association	504 464 2777	800 681 3629	800 681 3629	www.ladental.org
Maine Dental Association	603 464 2777	800 681 3629	800 681 3629	www.madental.org
Manitoba Dental Association	204 464 2777	800 681 3629	800 681 3629	www.madental.org
Married States Dental Association	800 681 3629	800 681 3629	800 681 3629	www.marriedstatesadental.org
Massachusetts Dental Association	617 464 2777	800 681 3629	800 681 3629	www.massadental.org
Michigan Dental Association	313 464 2777	800 681 3629	800 681 3629	www.michadental.org
Minnesota Dental Association	612 464 2777	800 681 3629	800 681 3629	www.minnadental.org
Mississippi Dental Association	601 464 2777	800 681 3629	800 681 3629	www.msadental.org
Missouri Dental Association	314 464 2777	800 681 3629	800 681 3629	www.moadental.org
Montana Dental Association	406 464 2777	800 681 3629	800 681 3629	www.mtadental.org
Nebraska Dental Association	402 464 2777	800 681 3629	800 681 3629	www.neadental.org
Nevada Dental Association	702 464 2777	800 681 3629	800 681 3629	www.nvadental.org
New Hampshire Dental Association	603 464 2777	800 681 3629	800 681 3629	www.nhadenental.org
New Jersey Dental Association	908 464 2777	800 681 3629	800 681 3629	www.njadental.org
New Mexico Dental Association	505 464 2777	800 681 3629	800 681 3629	www.nmdental.org
New York State Dental Association	914 464 2777	800 681 3629	800 681 3629	www.nysadental.org
North Carolina Dental Association	919 464 2777	800 681 3629	800 681 3629	www.ncadental.org
North Dakota Dental Association	701 464 2777	800 681 3629	800 681 3629	www.ndadental.org
Ohio Dental Association	614 464 2777	800 681 3629	800 681 3629	www.ohioadental.org
Oklahoma Dental Association	405 464 2777	800 681 3629	800 681 3629	www.okadental.org
Oregon Dental Association	503 464 2777	800 681 3629	800 681 3629	www.oregonadental.org
Pennsylvania Dental Association	610 464 2777	800 681 3629	800 681 3629	www.padental.org
Rhode Island Dental Association	401 464 2777	800 681 3629	800 681 3629	www.rhidental.org
South Carolina Dental Association	803 464 2777	800 681 3629	800 681 3629	www.scadental.org
South Dakota Dental Association	605 464 2777	800 681 3629	800 681 3629	www.sdadental.org
Tennessee Dental Association	615 464 2777	800 681 3629	800 681 3629	www.tnadental.org
Texas Dental Association	817 464 2777	800 681 3629	800 681 3629	www.txadental.org
Utah Dental Association	801 464 2777	800 681 3629	800 681 3629	www.utadental.org
Vermont Dental Association	802 464 2777	800 681 3629	800 681 3629	www.vermadental.org
Virginia Dental Association	804 464 2777	800 681 3629	800 681 3629	www.vadental.org
Washington State Dental Association	360 464 2777	800 681 3629	800 681 3629	www.wadental.org
West Virginia Dental Association	304 464 2777	800 681 3629	800 681 3629	www.wvadental.org
Wisconsin Dental Association	608 464 2777	800 681 3629	800 681 3629	www.wisadental.org
Wyoming Dental Association	307 464 2777	800 681 3629	800 681 3629	www.wyadental.org

Please send your completed application to:
 Kansas K. Begaye, NMDA Director of Membership
 9201 Montgomery Blvd NE, Ste 601, Albuquerque, NM 87111
 505-294-1368 | Fax 505-294-9958 | kbegaye@nmdental.org

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By Joe Gherardi, DDS—Albuquerque, NM

Lately, there has been much discussion and buzz around the NMDA and new membership. Much of the talk began with the generation of dentists who have been involved with the NMDA for years and have seen the fruits of what our local and state dental associations have done for their careers and for the practice of dentistry. I am excited to report that this talk is not one-sided. It has evolved into a dialogue met with just as much excitement from our new generation of dentists.

The New Dentist Committee was reformed in 2015 and is actively seeking new dentists by showing potential members the benefits and appeals of an NMDA membership. With the varied practice settings offered to young dentists, this generation of new dentists can easily be thrown into situations where they may feel disconnected or isolated from the rest of the profession. Whether practicing in private, public, or corporate dentistry, at the end of the day we are all dentists providing great skill

and care to the people of New Mexico. It is our responsibility as an association to reach out and connect with new dentists and show them how being involved with the greater community of dentistry can improve their lives and careers; helping to circumvent hardships when faced with difficult situations that weren't discussed in dental school, and also having fun in the process.

New dentists need to know that the NMDA will help them. We are a valuable resource—doing things behind the scenes—so that they can focus on the day-to-day practice of dentistry. For example, we fight third party intrusion into our doctor/patient relationship. The NMDA is searching for ways to incentivize new dentists who join our association by helping to relieve some of their financial burdens. The NMDA is our direct connection to Washington, D.C.—where the ADA is our voice in ensuring that legislation will not negatively affect our ability to provide what is best for our patients.

The New Dentist Committee has planned many gatherings—both social and educational. It will provide topical CE opportunities throughout the year, aimed at young dentists. Additionally, new dentists will be able to network with other new dentists, as well as seasoned dentists that can draw on their generational wisdom. We even plan to designate meetings to connect young dentists with dentists who are looking either to sell their practice or with new associate dentists. We are planning a social meet and greet late in September as well as a new dentist function after the NMDA's sponsored CE course on October 9.

So be on the lookout for more events and spread the word to new dentists around the state that we are here for them. We do not want them to miss out on the value that the NMDA and New Dentist Committee can provide to them. ✚

To join the Committee on New Dentist or for more information contact Joe Gherardi at (505) 293-6125.





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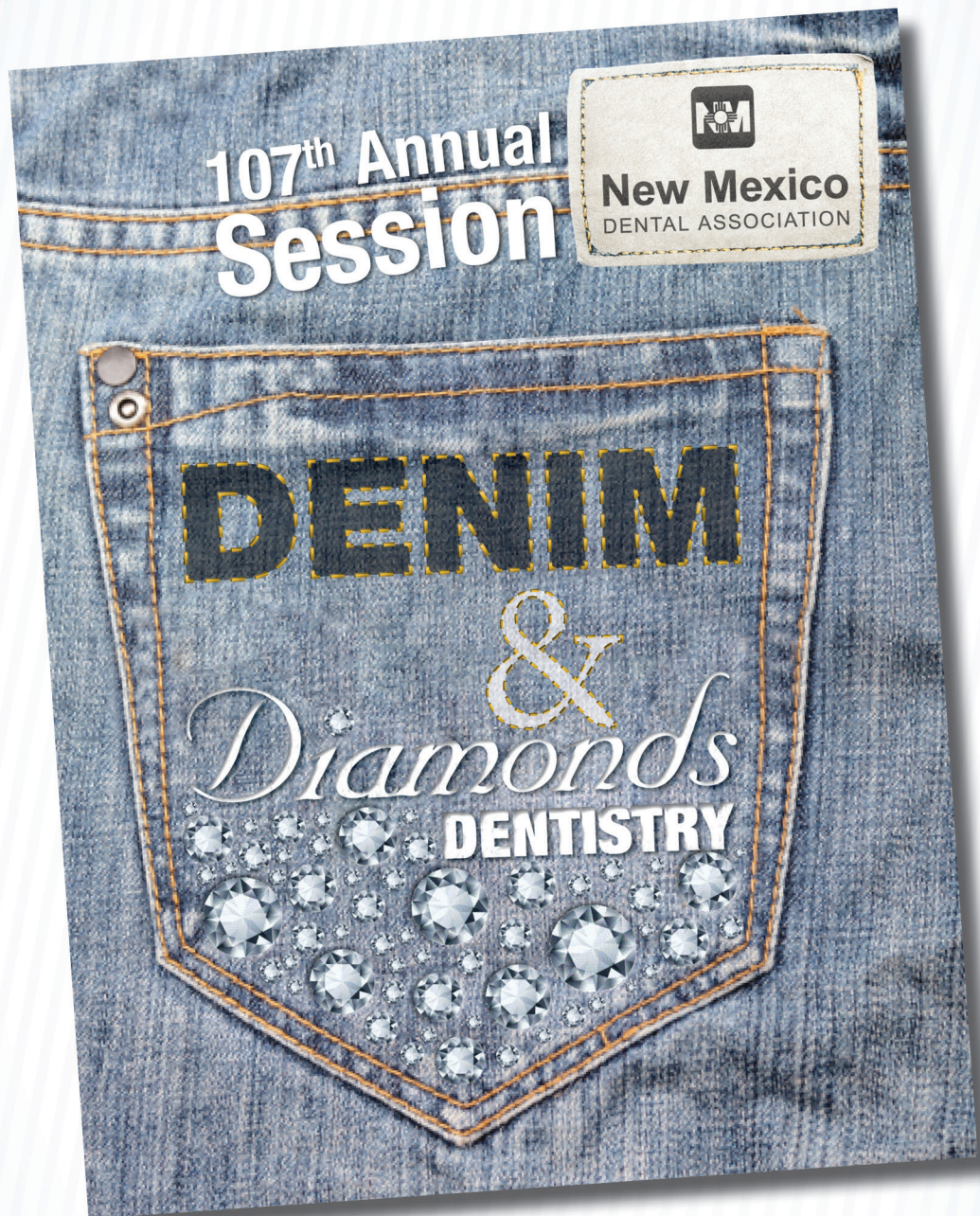
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A Message From Your Dental Board

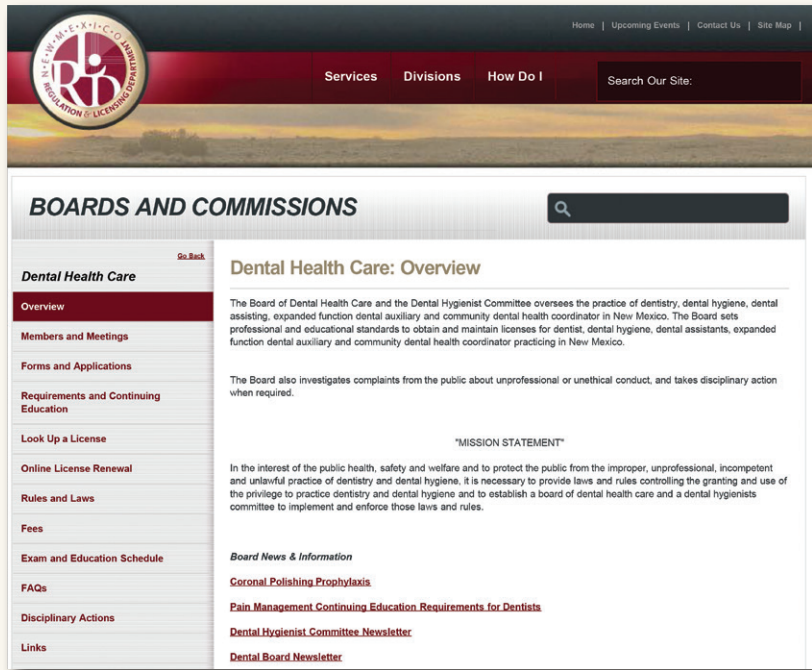
L. Paul Balderamos, DDS, MS—Vice Chair New Mexico Board of Dental Health Care

Please visit the New Mexico Board of Dental Health Care website.
www.rld.state.nm.us/boards/dental_health_care.aspx

There is a lot of useful information available on our website.

- Contact Information
- Board Members
- All Forms
- Continuing Education Requirements
- Licenses
- and much more

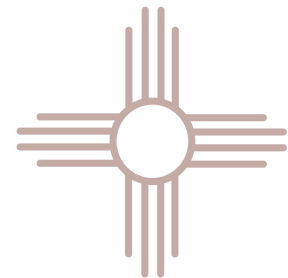
Keep yourself informed.



The Board meets four times a year. These meetings are **open to the public** except for the executive session. You are welcome to attend and there is a section for public comment if you wish to comment.

Next Regular Board Meeting/
Rule Hearing scheduled for
October 16, 2015 in Santa Fe.

Please use the **Prescription Monitoring Program (PMP)** as a resource when prescribing opioids. Your prescriptions are monitored by the Board of Pharmacy. Please keep your DEA information and Prescription Pads in a safe place. You may wish to run a PMP report on yourself to see if your DEA prescription information has been compromised.



For your information

On the next page is a flowsheet for compliance with a complaint process and the NMBDHC. **Please respond in a prompt fashion** to all requests from the Board. Failure to respond to requests from the Board will result in disciplinary action. Please make sure that you inform the NMBDHC of any address changes.



NM Board of Dental Health Care

Compliance

- Complaint Process
 - Received sworn complaint from Complainant (Must be signed and notarized) & (This must be received in the mail, need original signatures).
 - Create paper and electronic file for this complaint with case number.
 - Send notice to Complainant that their complaint was received.
 - Send letter to Respondent asking for response within 10 days (Send copy of complaint, this must be sent via certified mail to track).
 - Once response and documentation is received, a Complaint Committee Report is filled out and meeting is scheduled. Complaint Committee reviews this case and file and recommends action to the Board.
 - Take case to Board with Complaint Committee recommendation.
 - If case is dismissed, send Complainant and Respondent letters of dismissal.

Or.....

- Submit NCA referral to AGO (Attorney General's Office)
 - NCA sent to compliance from AGO, then sent to Board Chair for signature and approval. (This is then sent to Respondent via certified mail to track.)
 - Respondent has 20 days to request a hearing, if this is not done by the deadline then case is taken to the Board for Default Order.
 - If a Settlement Agreement is made between the Prosecutor from the AGO and Respondent, agreement is taken before Board for approval and then agreement compliance is monitored by Compliance Officer. Case is usually closed after compliance is met.
 - Hearing must take place within 15 to 60 days of request. After hearing has taken place by Board approved hearing officer, report is sent to the Board so that a Final Decision can be made on the case. (Compliance is then monitored if needed and case is closed upon completion.)
- Once disciplinary action is taken, this becomes public record and is reported to:
 - RLD Website
 - MLO Licensing System
 - Federal Data Bank

New Mexico Department of Health Strategic Plan 2014-2016

By Rudy Blea—OOH Program Director

The Department of Health (DOH) employs over 3,200 individuals throughout the state with a budget in excess of \$540 million delivering public health services to frontier, rural and urban communities and 222 sovereign tribal nations. The DOH Strategic Plan for 2014-2016 is a roadmap for the agency on how to remain a vital part of an effective health system today and into the future. In order to achieve this purpose, DOH must commit to doing all that can be done to ensure an adequate and competent workforce and that we are collaborating with our partners to create a community environment that promotes healthy lifestyles and the prevention of injury and disease.

The NMDOH Strategic Plan is intended to be a practical, descriptive document designed to reflect our priorities and demonstrate how we are applying our resources to improve the public's health.

The process of selecting health priorities began in the spring of 2011. Staff began researching national health publications comparing states on health issues (Kaiser Health Facts, Kids County Data Book, Healthy People 2020 Health Objectives), and brought community members and partners to the table to solicit their input. After considerable review of the literature, reviewing NM health data, and input from our partners, it was decided to concentrate on a number of health objectives.

Oral health was selected as one of the ten health objectives: Increase access to preventive and dental care services. National studies reveal that Hispanics and American Indians have a higher rate of tooth decay among all populations. Hispanic and Native American adults are less likely to have a dental visit and experience high rates of extractions. Middle aged and older adults tend not to have dental insurance or Medicaid.

The Office of Oral Health mission and objectives are to prevent tooth decay and other disease through oral health education and preventive agents such as the application dental sealants and fluoride varnish; and to provide access to treatment services for those who are uninsured or low-income.

To meet its mission and objectives, the following strategies have been developed and identified in the NMDOH State Health Plan:

- **Increase the number of preventive and treatment services to the uninsured and low-income.**
- **Increase oral health education public service announcements throughout the state.**
- **Increase the number of children receiving preventive services.**
- **Increase the number of residents consuming fluoridated water.**

NMDOH and the Office of Oral Health encourage the NM Dental Association (NMDA) members and other private dentists and dental hygienists to support the Department's oral health mission and that of NMDA. Each dental provider can: increase oral health education at the chair by all providers while seeing a patient especially parents of young children; increase the use of dental sealants and fluoride varnish especially for children, teens, and young adults; and public support of community water fluoridation and the consumption of fluoridated water

For further information please view:

<http://nmhealth.org/publication/plan/?size=3&page=1>



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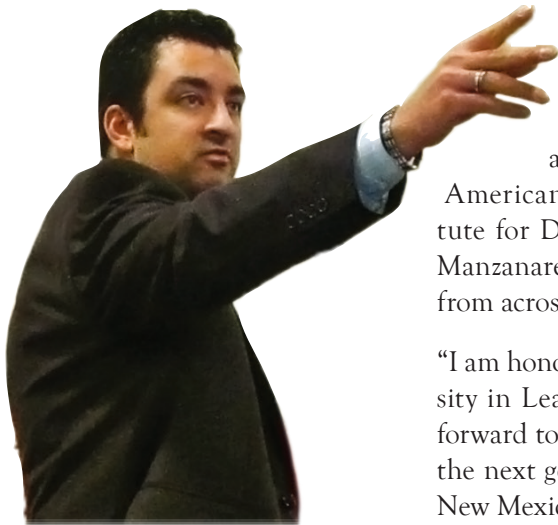
BUYING A DENTAL PRACTICE? WE WILL:

- Offer consultation on matching the practice and buyer
- Assist in securing a fair deal
- Assist in securing financing

Membership Matters

Dr. David Manznares accepted into the prestigious ADA Institute for Diversity in Leadership

By Michael Moxey—Director of Communications and Government Advocacy



New Mexico Dental Association Secretary/Treasurer Dr. David Manznares of Albuquerque has been accepted into the prestigious American Dental Association “Institute for Diversity in Leadership.” Dr. Manznares was one of only 16 dentists from across the nation to be admitted.

“I am honored to be a part of the ‘Diversity in Leadership’ program, and look forward to sharing my experiences with the next generation of dentists here in New Mexico,” stated Dr. Manznares.

The program was created in 2002, and has admitted a total of 161 dentists. The goal of the Institute is to foster lasting relationships with minority dentists, mentor future leaders, and strengthen community stakeholder alliances. The agenda for the year long program will include an individual leadership project, faculty seminars at ADA headquarters, and conference calls with faculty and other advisors.



The New Mexico Dental Association was happy to assist in the efforts of a local Albuquerque student in his efforts to provide oral health supplies to homeless citizens. Roman Romero, a 5th grade student at Manzano Day School, undertook a volunteer project at St. Martin’s Hospitality Center to collect toothbrush and toothpaste kits to distribute through the Center’s outreach team.

In total, Roman was able to present St. Martin’s with 1060 toothbrushes and 663 tubes of toothpaste. The NMDA is honored to have helped Roman by providing supplies to his cause. Additionally, Roman raised \$1,185 in donations to help the Center.

Roman expressed his gratitude in a letter to the NMDA offices, stating, “Thank you for believing in the power of kindness in building a better community.”

NMDA Executive Director Mark Moores stated, “We were inspired by the initiative shown by this enterprising young man, and are honored have helped him in his goal to bring oral health kits to the homeless.”



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Sarah Oppel-Brown

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Dr. Arthur Thomas Matte

OBITUARIES

Arthur Thomas Matte

1926 – 2015

Dr. Arthur Thomas Matte died early Wednesday morning, July 1, 2015, surrounded by his children and grandchildren after battling esophageal cancer. Art was born in Gallup, NM, on Election Day November 2, 1926 and was named after the Democratic incumbent Arthur Thomas Hannett. He grew up on the rough and tumble streets of Gallup's north side to Italian immigrant parents and he was slinging newspapers at six years of age.

He served on the *U.S.S. Pensacola* as a laundryman until the war's end, returned to New Mexico upon discharge, and then attended Highlands University in Las Vegas, NM. In 1950, Art married the love of his life, Edith Mae Fattor, and together they moved to Omaha, NE, where he enrolled in Creighton University's Dental School. When Art graduated in 1954, he and Edye made the decision to move to Albuquerque to make a life for themselves and their young family. He loved telling stories of his growing up tough during the Depression, his high school triumphs, his Navy days, in addition to his college and dental school shenanigans and exploits. He was most proud of teaching his grandkids and great-grandkids to say "Papa" as their first word.

Art was instrumental in getting over 50 New Mexican students into Creighton undergrad and/or dental school. He was very proud that six of his nine children attended Creighton. In 1990, Dr. Matte was awarded the Alumni Merit Award for the School of Dentistry. His wife, all nine kids and their spouses traveled to Omaha to watch him accept the prestigious honor. Some years later he initiated an endowed scholarship for New Mexico students to attend Creighton undergrad.

Dr. Matte is survived by his nine children and their spouses. In lieu of flowers, the family requests, if you so desire, a donation in Art's memory to El Ranchito de los Niños Foundation, PO Box 2400, Los Lunas, NM 87031, or to Creighton University, Development Office, "Matte Family Endowed Scholarship", 2500 California Plaza, Omaha, NE 68178, or to Right to Life, 2413 Wyoming Blvd NE, Albuquerque, NM 87112.





Dr. William L. Matthews, Jr.

William L. Matthews, Jr.

1947 – 2015

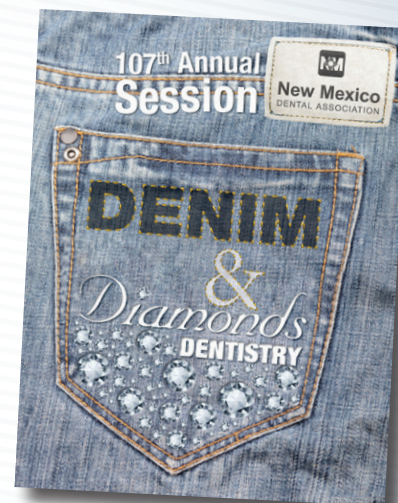
William L. “Bill” Matthews, Jr., DDS, 67, of Albuquerque, NM, formerly of Indianapolis, lost his second battle with cancer on January 16, 2015. He was born July 14, 1947, in Portsmouth, VA, to the late Capt. William L. Matthews, Sr. and Nina M. Schrepfer Matthews. Bill received his Bachelor of Science from the University of Evansville and his Doctor of Dental Surgery from Indiana University. He served as Captain in the United States Air Force from 1973–1975 and continued as a reserve for several years thereafter. Bill was an avid tennis and bridge player and enjoyed collecting vintage vehicles. He was a member of Woodstock Country Club. Bill volunteered his dental services frequently and generously. He served the Albuquerque, community for many years as a dentist with a non-profit dental group that cared for the underserved populations of Albuquerque, including Native American families and the homeless.

Bill is survived by his daughter, Anne D. Carter (Brandon) and grandchildren, Ava Jane Carter and Samuel Eliot Carter of Watkinsville, GA; sisters, Marcia M. Hocker (David) of Owensboro, KY and Joann E. “Joni” Matthews of Evansville, IN and Atlanta, GA; brother, James E. “Jim” Matthews of Evansville, IN; niece Nina Mather Zickler (Christoph) of Neenah, WI; nephews Robert E. Zoss of Boulder, CO, L. Laurent Zoss (Sheri) and Banning M. Zoss of Denver, CO; cousins, John F. Becker (Denise) and Thomas A. Becker of Kirkwood, MO. A son, William L. Matthews, III, preceded him in death.



Save the Date

**Albuquerque
Convention Center
June 2–4, 2016**



Save The Date—Event Calendar



Meetings

2015

November 13 6–9:30pm
NMDAF Pre-Dental Dinner
Embassy Suites Hotel, Albuquerque



2016

January 8 8:00am–2:00pm
NMDAF Board of Directors Meeting—
NMDA Offices

January 9 8:00am
NMDA Board of Trustee Meeting—
NMDA Offices

March 12 8:00am
NMDA Board of Trustee Meeting—
NMDA Offices

April 7–10

2016 NM Mission Of Mercy—
Santa Fe Convention Center
Register to *Volunteer*
www.nmdentalfoundation.org

June 1–3

2016 NMDA House of Delegates
Northeast Building
Albuquerque Convention Center

June 2–4

2016 NMDA 107th Annual Session
“Denim & Diamond Dentistry”
Hall 4, Albuquerque Convention Center

June 25–July 2

14th NMDA Annual CE Gateway
7 Nights Greek Isle & Turkey

Component Society Meetings



For information on ADDS events,
call Dr. Mary Rose Twohig at 505-881-9767.

November 12 6:00pm
ADDS Seminar—Seasons Grill
2031 Mountain Rd NW, Albuquerque



For information on NWDDS events,
call Dr. Jennifer Thompson at 505-327-6233.

November 12 6:30pm
NDDS Seminar—St. Clair Winery
5150 E Main St, Farmington



For information on SWDDS events,
call Dr. Marianne Day at 575-523-5589.



For information on WCDDS events,
call Dr. Jared Montano at 505-863-4457.

December 4 6:30pm
Balloon Rally Seminar—Elks Lodge, Gallup
Dr. Marc Gladney is presenting
“Overview of Pediatric Dentistry;
Tips and Techniques”
Dr. Kent Mangleson is presenting
“How Dentists Become Invincible to Lawsuits
and Can Save Thousands on Taxes”
Call Dr. Jeffrey Hughey at 505-722-4727
for reservations. Space is limited.



For information on EDDS events,
call Dr. Tim Price at 575-622-3300.



For information on SFDDS events,
call Dr. Kristine Ali at 505-992-1600.

We invite all dental groups to submit their events to this calendar.

Email them to narenas@nmdental.org

or fax to NMDA, Attn: Nancy 505-294-9958.

Also visit our NMDA Facebook page to see upcoming events.

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GENERAL DENTIST OPPORTUNITIES.

Dental Dreams desires motivated, quality-oriented Associate Dentists for our offices in IL, LA, MA, MD, MI, NM, PA, SC, TX, VA & DC. 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. Compensation: Higher of guaranteed base pay or 30% of adjusted production, starting minimum guaranteed base compensation of at least \$120,000, and average annual compensation of full-time dentists in excess of \$230,000. Benefits: Medical coverage, Dental coverage for associates and immediate family members, malpractice insurance, three weeks vacation, and Visa and permanent residency sponsorship assistance. Clinical Practice: Complete freedom over treatment planning, efficient front desk staff and office managers, state of the art dental equipment & supplies, and discretion over dental supplies and instruments. Please contact us for more information: For IL, MI, & SC, contact Danielle Tharp, ph: 312-274-4524, email: dtharp@kosservices.com; For MA, MD, PA, TX, VA, LA, NM & DC, contact Juliette Boyce, ph: 312-274-4520, fax: 312-803-1869, email: jboyce@kosservices.com.

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IF YOU ARE CONSIDERING transitioning your practice or buying a practice, please call or email Bill Valentine, DMD at 505-266-4418 or valentinedmd@aol.com. As a retired analyst for AFTCO, the largest and oldest transition organization in the US, I can advise you and refer you to the appropriate individuals who will do the best job. Visit our website at AFTCO.net.

TAOS, NM GENERAL PRACTICE for sale: General dental practice for sale in Taos, NM. 2014 collections just shy of \$470k. 4 ops in multi-tenant building. Nearly 1,200 FFS/PPO patients. No Medicaid or capitation plans. Taos, located 2.5 hours north of Albuquerque, offers year round recreation. E-mail becky@paragon.us.com for more details. Ref #NMONBEAN.

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GENERAL DENTAL PRACTICE FOR SALE located NE Heights Albuquerque, NM. Four operatories, dentrix and dexis throughout. Most equipment less than eight years old. Please call for details 505-681-6201.

RURAL, NM general practice for sale. Less than 2 hours from Albuquerque is a well established rural practice. 2014 collections were \$785k, open 4 days/wk. 4 ops, digital x-rays/Pano in a stand-alone building. Excellent cash flow on 1,800+ PPO/FFS patients with fantastic rate of return on your investment. To learn more about this opportunity and the benefits of rural ownership e-mail becky@paragon.us.com. Ref #NMONBEAR.

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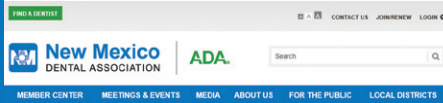


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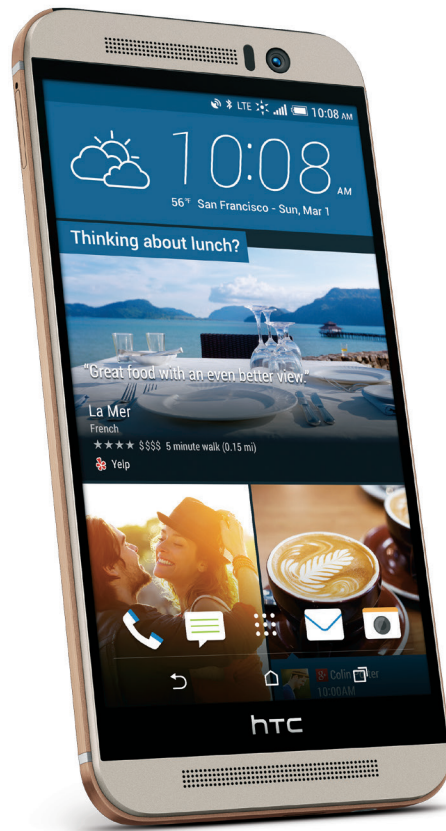
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