



Photos: Steve McClelland Photography

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Fresh Concepts in Dental Design

Recently celebrating its one-year anniversary, the USC School of Dentistry Oral Health Center serves as a model facility designed to attract quality faculty, increase student enrollment and take the anxiety out of going to the dentist.

A waterfall, stylish wood paneling, indirect lighting and concierge greet visitors to

the center that delivers dental care to approximately 150 patients a day.

According to USC Dean Harold Slavkin, DDS, the 12,500 square-foot facility "looks like today, not yesterday."

Slavkin came to USC with a grand design to recruit and retain top faculty by providing a private-practice environment offering high-quality care focused on restorative and cosmetic dentistry. An equal goal was to create a

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model center for the highest level of care and make it accessible to the surrounding community as well as the university community.

According to Slavkin, there has been a conceptual shift in the way dentistry is practiced today. In the past, dentists were trained to diagnose quickly and spend significant time on treatment. Now, an ounce of prevention goes a long way.

"We take a very careful, detailed approach to health promotion, risk assessment, disease prevention, diagnostics, treatment and therapeutics, and outcomes assessments," Slavkin said. The 21st century is about health outcomes. To ensure the best outcomes, facilities need state-of-the-art equipment, optimal patient experience and proper technology to support administrative management.

To support a vision of this scale, the school of dentistry needed a more appropriate venue to house both a group faculty practice and an Advanced Education in General Dentistry teaching clinic under one roof. What's more, the center would function in concert with the current teaching and learning agenda of the school of dentistry, which includes health promotion, risk assessment and disease prevention.

The challenge was to turn an ordinary space into an aesthetically beautiful and nurturing environment, yet make it functional enough to house 24 operatories, diagnostic equipment and a planned Center for Dental Technology.

Slavkin's directive was to "design a state-of-the-art faculty dental practice with the ambiance and service of a Ritz-Carlton Hotel."

The Neiman Group, a Los Angeles-based architectural firm, was selected to bring Slavkin's vision to life. The firm's influence led the university down a new stylistic path,



which reinterprets the campus' traditional design in a modernist way favoring exploration of new materials, ample space, fresh color palettes and seamless integration of technology and beau-

ty. To create an optimal patient experience, the designers dedicated special attention to creating inviting visual elements, soft lighting, acoustics and visual privacy.

A large concern was to alleviate patient fear that can be aggravated by shrill noises and pungent odors. Care was given to lowering patient anxiety through design elements such as strategically placed fountains, vaulted ceilings, soft lighting and textured walls.

Directing the new center is former CDA President Jack Broussard, DDS. Former CDA Speaker of the House Sig Abelson, DDS, is practice administrator. These individuals bring more than 60 years of combined practice management experience and leadership skills to the center.

"Our patients are in awe of the beauty of the center," Broussard said. "Our faculty, residents and staff are committed to becoming a valued asset to our community and to our university."

The center includes features such as digital imaging equipment, digital radiography, microscopes and intra-oral cameras. Current data on caries prevention and strategic design focused on patient relaxation are all touches expected to help attract quality faculty as well as increase student enrollment and enhance the equity of the downtown Los Angeles area.

"In just one year, the center has increased its practicing faculty from 13 to 27 individuals," Abelson said. "Some of the finest clinicians in the world have joined our faculty practitioners."

The center opened its doors in January 2003 and has successfully integrated into the Los Angeles health-care community.

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Successfully Terminating the Dentist-Patient Relationship

Ending a dentist-patient relationship carries the same cautions about refusing treatment to a new patient. In either case, the dentist must be careful to avoid potential legal claims, said Keith Kerns, Ohio Dental Association director of Legislative and Legal Services, in January's issue of *ODA Today*.

The dentist, in ending the relationship, must not abandon the patient. If they do so, the dentist can be held liable for abandonment by their failure to give adequate notice to the patient and refusal to provide treatment proximately causes injury.

Kern recommended not terminating the relationship during the patient's course of treatment and giving them plenty of notice. For example, do not send a termination let-

ter one week before the scheduled treatment.

In the letter, the dentist also must offer to provide emergency care for a "reasonable period" such as 30 to 90 days following the notice of termination, and inform the patient they have the right to view or obtain a copy of dental records including impressions and X-rays. Additionally, the dentist should offer to forward the documents, upon the patient's written request and authorization, to the new dentist.

It is helpful, Kern said, to recommend the patient contact the local dental society in obtaining a referral to another dentist. The letter should be sent via certified mail. Following these simple guidelines, Kerns said, can reduce the dentist's exposure to liability.



Bridging the Billing Gap for Bridgework

A technique has been developed in Michigan that may help dentists meet their patients' request to bill part of a bridge in the last months of one year and for the remainder in January of the following year.

In the Kalamazoo Valley District Dental Society's *Gutta Percha Clarion*, Keith Konvalinka, DDS, suggested that in placing a three-unit bridge instead of preparing both teeth, a dentist might prep one and send it off. Rather than having the usual crown made, the lab can create a bridge abutment with the female portion of an MS attachment. The dentist may then request the lab fill the slot with acrylic so in the interim it doesn't become a food trap. The dentist can cement it in, bill it as an abutment with precision attachment and be finished for the year.

At the beginning of the next year, the other abutment can be prepped. This time, an impression should be taken with attention to capturing the entire cavity of the female attachment by syringing impression material into the slot fully. Or, if the lab prefers, using an abutment, pontic and the male end of the MS attachment.

Insurance annual maximums often times do not cover the price of a full bridge. This leaves patients seeking to eliminate or reduce their portion of the cost. Dentists typically are forced to explain that bridgework has to be billed to insurance as one unit. By utilizing this technique, Konvalinka said, a dentist can successfully bill two halves of a bridge in two insurance cycles.



Pacific Awarded Recruiting Grant

The W.K. Kellogg Foundation and American Dental Education Association Access to Dental Careers grant of \$100,000 has been awarded to the University of the Pacific School of Dentistry to assist with the recruitment of under-represented minority and low-income students.

"This award is a great complement to the applicant recruitment, community education and curriculum enhancement aspects of Pacific's Pipeline program," said Paul Glassman, DDS, associate dean for information and educational technology and principle investigator for the Pipeline program and Access to Dental Careers grant.

The award enhances Pacific's current \$1 million grant project, the California Initiative Dental Pipeline program, which in addition to recruiting under-represented and low-income students also strives to provide dental students and residents in community clinics with more experiences in helping underserved populations.

Not only will the Access to Dental Careers grant make available low-cost loans to select students and enhance Pacific's recruiting activities including identifying and recruiting applicants at colleges and universities with populations of pre-dental, under-represented and low-income students, it will provide counseling to applicants with the hope of improving their qualifications either in the pre-dental stage or at the start of the application process.

Pacific is committed to addressing the shortage of dentists from underserved and low-income populations, a major issue facing California as well as throughout the U.S. By recruiting more students from these communities and helping them succeed will benefit the diverse areas within the state as well as across the country.

UNIVERSITY OF THE
PACIFIC
School of Dentistry

C.E. Credits Online

The University of Colorado School of Dentistry, in partnership with the Journal of the American Dental Association, has developed an online continuing education module.

The module, which will offer up to two CE credits each month, provides complete online testing, submission, grading and secure payment for the program. Members of ADA will receive a discounted rate of \$15 per submission. The cost for non-members is \$20 per submission.

For more information, visit: <www.ada.org/goto/jada>www.ada.org/goto/jada and click the hyperlink "JADA CE Program."

Ross Award Nominations Due by June 1

The deadline to nominate a dentist for their strides in periodontics, orthodontics, oral pathology, oral and maxillofacial surgery as well as other clinical research areas is June 1.

The Norton M. Ross Award for Excellence in Clinical Research recognizes those who have notably improved the diagnosis, treatment and/or prevention of craniofacial-oral-dental diseases.

Last year's winner, periodontal researcher Robert Genco, DDS, PhD, won for his work on the link between oral disease and cardiovascular diseases.

Selection is based upon the scope of research completed with its impact on clinical dentistry, and the nominee's publications in refereed journals. The winning researcher receives a plaque and \$5,000 during an ADA Board of Trustees dinner in August in Chicago.

Nominations must include a letter describing the nominee's accomplishments in the context of the award objectives and

explicitly describe the influence of the research on clinical dentistry. A curriculum vitae with a list of published articles must be included. Send the nomination to Marcia Greenberg, American Dental Association, 211 E. Chicago Ave., Chicago, Ill., 60611. For more information, call the ADA at (800) 621-8099, Ext. 2535.

The Ross award is sponsored by the American Dental Association through the ADA Foundation, with support from Pfizer Consumer Healthcare. It is awarded in memory of Norton M. Ross, a dentist and pharmacologist who contributed significantly to oral medicine and dental clinical research.



Upcoming Meetings 2004

April 27-May 2 American Academy of Cosmetic Dentistry's 20th annual Scientific Session, Vancouver, British Columbia, www.aacd.com.

June 24-26 ADA 18th annual New Dentist Conference, San Diego, (312) 440-2779, www.ada.org/goto/newdentconf

Sept. 8-11 International Federation of Endodontic Association's sixth Endodontic World Congress, Brisbane, Queensland, Australia, www.ifea2004.im.com.au.

Sept. 10-12 CDA Fall Scientific Session, San Francisco, (866) CDA-MEMBER (232-6362).

Sept. 30-Oct. 3 ADA Annual Session, Orlando, Fla., (312) 440-2500.

2005

April 6-9 Academy of Laser Dentistry 12th annual Conference and Exhibition, New Orleans, (954) 346-3776.

To have an event included on this list of nonprofit association meetings, please send the information to Upcoming Meetings, *CDA Journal*, P.O. Box 13749, Sacramento, CA 95853 or fax the information to (916) 554-5962.