



Letter from the Editor:

Rumi, a famous Persian poet, once wrote that we should let ourselves "be silently drawn by the strange pull of what we really love."

As dental students we work so hard studying, practicing for summative exams and preparing for patients that we sometimes forget to tend to our favorite pastimes.

Thus, as we embark upon this New Year take a moment to relax your weary bodies and minds and reconnect with the things you really love. After all, Rumi did say that what you really love will never "lead you astray."

Sammy Gill, DMD 14

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The Mid-Level Provider Debate

By Eric Weinberg (DMD 14)

Access to dental care is a pertinent issue. Socioeconomic factors are major players and the implementation of midlevel providers is a strategy being considered to resolve the perceived shortage of dentists.

A midlevel provider, as defined by the American Student Dental Association (ASDA), is a person who administers irreversible procedures on patients despite not having received four years of dental training after college.

ASDA and the American Dental Association (ADA) state that midlevel providers are problematic for the patients that they treat. ASDA's stance is that only a trained dentist should be able to treatment plan, do irreversible procedures, and prescribe medication. The ADA believes that trained dentists are critical to the system, because they are more aware of the costs, outcomes, and consequences of the work they perform, and use this knowledge to minimize any negative effects on patients' health. A



GSDM students on the team "Angry Burs" ended the 2011 floor hockey intramural season by bringing home the championship.

Back row (left): Michael Richler (Post-Doctoral Pediatric Dentistry 13), Sarah Courtney (DMD 12), Caitlin Reddy (DMD 13), Joshna Quimby (DMD 13), Milissa Smith (DMD 13), Aadil Shamji (DMD 13), Shina Monga (DMD 13) and Dany Shum (DMD 13)

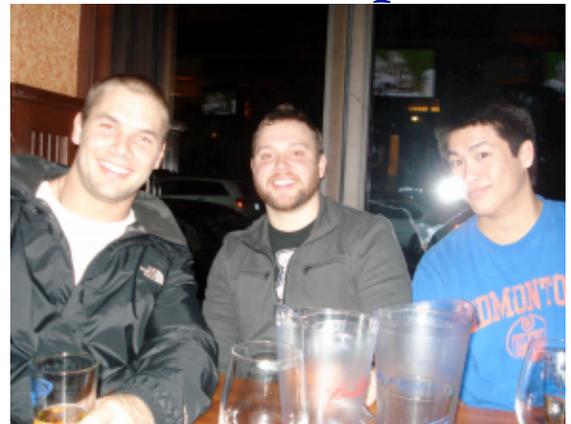
major reason why the dental community is unsupportive of the midlevel provider model is that midlevel providers claim to perform "simple" procedures; the ADA and ASDA, however, argue that these providers lack the training necessary to distinguish between a simple and complex procedure. [Continued on page 3]

The Maze of Post Graduation Options

By Sammy Gill (DMD 14)

Weaving through the maze of one-year post-graduate programs can be a daunting task. General Practice Residencies (GPR) and Advanced Education in General Dentistry (AEGD) programs are offered all over North America. Therefore, it's important to find a program that suits an individual's needs.

One-year programs were not always such a hot topic; however, in the last ten years their popularity has been mounting. [Continued on back page]



Greg Hein (DMD 14), Nate Hawes (DMD 14) and Nathan Ng (DMD 14)



Medicare and the Dentist

By Dihren Agrawal (AS 13)

Organized healthcare at times puts dentistry on the backburner. However, dental care is an integral portion of the overall health and well being of the patient. It should be considered as an integral part of the healthcare system.

If we look over the past few years most states have either dropped or reduced dental coverage in its Medicaid program. Moreover, major federal healthcare programs like Medicare do not cover routine dental services.

The first generation of baby boomers is turning sixty-five in 2011, and the number of people covered under Medicare is expected to increase steadily until 2029. It is critical for the dental community to act since once this

population retires they will consequently lose the dental insurance provided by their employers. Hence, the cost associated with dental care will be an absolute responsibility of the patient. This will adversely impact accessibility to care.

Uninsured patients may become reluctant to schedule routine check ups, which could lead to the deterioration of preventive dental healthcare. Covering dental services under Medicaid helps patients maintain both dental health and overall health. Further, extensive and expensive future dental procedures could be prevented.

“Moreover, major federal healthcare programs like Medicare do not cover routine dental services”



Dean Hutter and Danielle Fernandez (DMD 14) joined GSDM alumni from the class of 91 during a presentation to the class about upgrades and plans for a new facility.

ASDA Members Save Money

By Lindzy Goodman (DMD 14)

Did you know that all BU dental students are automatically members of ASDA? Everyone appreciates the great work that ASDA does, like those killer socials and Lunch and Learns, but as automatic members you are also entitled to some great discounts to help save that “hard-borrowed” money!

Regardless of your level of involvement in ASDA you can use your ADA member number found on your ADA card to retrieve discounts. Don’t know your number? Call 312-440-2500. Here are just some of the perks.

- ADA Disability and Life Insurance is free! Sign-up with your class rep.
- T-Mobile: Waived activation fee, 10% off monthly plans.
- Geico: 8% off automobile insurance
- Kaplan Test Prep: 10% off courses and services (including NBDE test preparation!)
- GL Advisor: Free personalized assessment for managing student debt
- Hawaiian Airlines: 5% off flights
- Car Rentals: Up to 25% off rentals from Alamo, Enterprise, and National Car Rental.

“Regardless of your level of involvement in ASDA you can use your ADA member number found on your ADA card to retrieve discounts”



Nine Year Olds Take DMD 15's to Class

By Julian Camastra (DMD 15) and Ingy Alhelawe (DMD 15)

Dental Student: Does anyone know how many times a day you should floss your teeth?

4th Grader #1: Two.

Dental Student: Well actually, it is recommended to floss at least once per day.

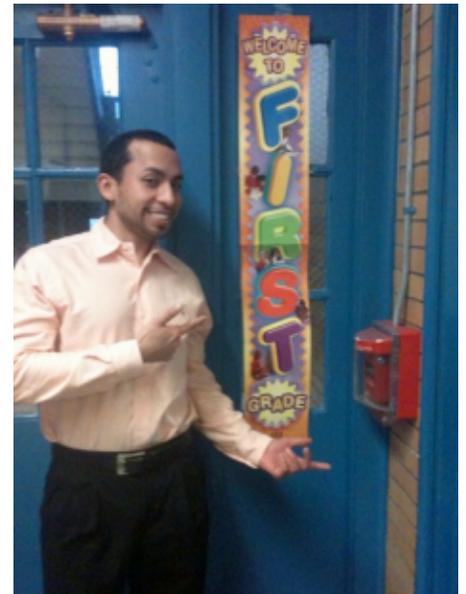
4th Grader #1: Awe, you know... I was gonna say one!

4th Grade #2: Yeah? Well you said two!

This was just one of the priceless episodes of comedy that the DMD 15 class experienced during the service learning activities this fall. For one day, first-year dental students were able to trade-in their biochemistry and anatomy textbooks for toy puppets and giant teeth, in an effort to teach elementary school children about the importance of oral health.

For many, this day will stand out as one of the most memorable days during the early months of dental school. However, the children were not the only ones who learned an important lesson. In many ways they actually took the dental students to school! Teaching children proved to be a wonderful opportunity. It was challenging, but also enlightening to witness how intelligent children can be. For instance, one nine-year-old astonishingly made a connection between oral and systemic health.

Above all, spending a day teaching children was refreshing. It is not often that dental students escape the perimeter of the Boston University Medical campus, making the experience all the more unforgettable.



John Westres (DMD 15) visited Orchard Gardens School along with other first years to give presentations about oral health care.

The Mid Level Provider Debate

[Continued from page 1]

Many midlevel provider models have been purposed, for example the Advanced Dental Hygiene Practitioner (ADHP), Dental Therapist (DT), and Advanced Dental Therapist (ADT). At this time the Dental Health Aide Therapist (DHAT) is the only midlevel provider program being practiced in the United States. It was passed in Minnesota.

However, congress voted to discontinue DHAT's funding effective September 30, 2011. DHAT was directly linked to the University of Washington's medical school and the model's creators worked with dentists who watched over their oral health care initiatives. The other programs do not currently have government support. No model has the support of either the ADA or ASDA.

The ADA has tried to promote the importance of appropriately trained dentists by establishing a Community Dental Health Coordinator (CDHC) model-training program. Since 2006, the CDHC program has made an effort to

provide care to patients in communities that need it more than others. CDHC's are intended to be community health workers with some dental background, who concentrate on educating and promoting prevention. If run correctly, CDHCs can provide limited treatment, and can help underserved patients find a dentist who can fulfill the rest of their oral health needs.

Many Americans can afford to receive care from private dental clinics, but the lack of access to care by underserved populations is a focal point of major political debate. Underserved populations are defined by a slew of socioeconomic factors. Further, the reduced distribution of dentists in rural areas is another valid issue. Midlevel providers may be working towards an admirable goal however; reduced patient care is too high of a cost.



GSDM students at the 2011 Yankee Dental student reception. Lindzy Goodman (DMD 14), Danielle Fernandez (DMD 14) and Allison Sheffield (DMD 14).



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The Maze of Post Graduation Options

[continued from page 1]

Some believe it may be attributed to students feeling slightly unprepared in the vast scope of procedures general dentistry has to offer, while others wish to introduce new skill sets not offered at their accredited institution.

Regardless of what is driving this surge in popularity, these programs are here to stay. In fact, New York State requires students to complete a one-year program to become licensed, while California gives the option of foregoing licensure exams in lieu of one.

The difference between General Practice Residencies (GPR's) and Advanced Education in General Dentistry (AEGD) programs seems to lie in the types of patients they serve, trauma or restorative, and the setting in which the care is provided. GPR's expand on general anesthesia techniques and oral surgery in a hospital environment and residents usually work alongside oral surgeons. On the other

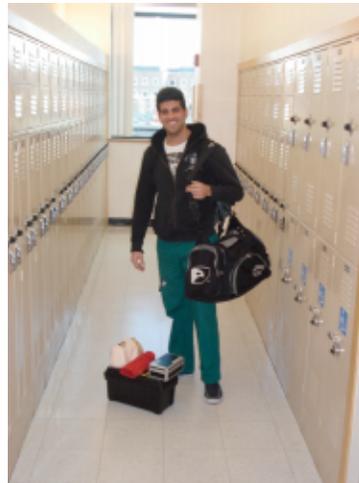
hand, AEGD's focus on prosthodontic treatment plans in a school setting.

The stipend associated with programs varies considerably. Some also charge a tuition resulting in students breaking even or coming out in debt from footing the bill for living expenses.

When considering one-year programs it is wise to visit the facilities at the locations you are interested in and meeting with their program directors. There are a variety of measures that one should consider when sifting through programs, including breadth of procedures, location and past student experiences.

Special Edition Style Report

Fashion Editors: Erik Harriman (DMD 14) and Wyatt Traina (DMD 14)



Wyatt: Arif Mamdami, DMD 14, is really showing off how to accessorize with matching man purse, sweatshirt, and toolbox. Watch out ladies!

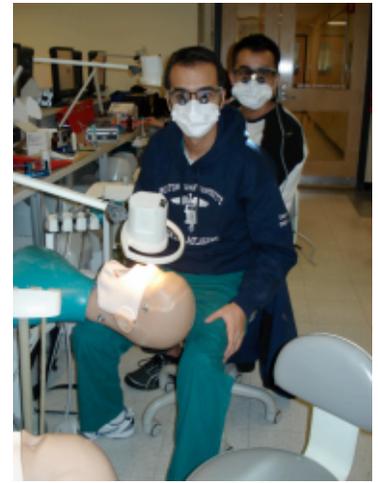
Erik: Arif is ready to fill your cavities sporting his classic casual black hoodie over "Band you have never heard of or don't like any more."

His green scrub bottoms say, "Hey I'm an educated professional, but I like to be comfortable."



Erik: Meghan Graham, DMD 14, shows everyone in the SLC that an afternoon of dentistry can be classy, casual, and cute. Track vests are always in if you can wear them like this.

If you are in dental school and don't have at least 2 pairs of boat shoes; you might not be in the right place. It shows all the other young professionals that when you're not doing dentistry, you're sailing from yacht club to yacht club.



Wyatt: Cameron Shahbazian, DMD 14, or should I say Dr. Shahzam is caught with Arsalan Elahi, DMD 14, while wearing a GSDM Hoodie: a rare mash-up of comfort and class.

Erik: How can anyone deny how trendy navy blue is going to be this year when they see how hot it looks on these two future doctors?