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Lobby for B<u>U</u>, 2001

By Ariel Bales-Kogan, BU ASDA Legislative Liaison & Mike Davey, PEN

March 22, D.C.: Lobby Day, each year, is intended as a method for regional leaders to confront their respective representatives and inform them of issues that concern dental students as a group. This year, of course, constitutes a fresh start, in a sense, as the Senate and House of Representative are composed of some new members. As well, the new Bush administration has made education a top priority, and with this in mind, it was our goal to inform our congressmen of educational issues that are close to our hearts.

The issue that applies to most students is Student Loan Interest Deduction Legislation, commonly known as SLID. Current legislation allows students to deduct only up to \$2500 per year, limited by a 5-year deductibility time frame and a gross income no more than \$60,000. Clearly the restrictions on this benefit becomes almost void for most graduating dental students. With an average of over \$100,000 of educational debt, the new dentist much search for financial opportunities that disqualify participation in the current legislation. As such, a new House Action (H.R. 436) introduced in the House Ways & Means Committee on February 6, 2001, proposes new limits that favor dental students better. Should this new bill pass, it would eliminate the cap of deductible interest as well the time limit for deductions. The new income limitation would also be raised to \$100,000. H.R. 436 is a republican bill, and it's democratic rival H.R. 678 proposes similar changes, but does cap the deductible interest to \$5,000 per year. Clearly, however, both bills represent a significant improvement from current legislation. Similarly, the Senate bill S. 152, passed by the Senate Finance Committee on March 13, 2001, deals with similar changes. The senate bill is less generous with its changes however, still capping the single filer at \$65,000 and maintaining the cap on current interest deduction to \$2,500 per year. It does eliminate the 5year limit on deductibility,

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Concerns Over the Upcoming Changes in Predoctoral Clinic

By Farshad Bakhtyari, BU ASDA First Delegate & Omid Farahmand, DMD 2002

As we all know, BU Goldman School of Dental Medicine has been undergoing many changes in the DMD curriculum throughout the past few years. We are sure the changes won't stop here. As a matter of fact, the new Department of General Dentistry is trying to introduce a new way in which the 5th floor clinic is going to be run. The changes basically

include breaking up the clinic into four groups, whereby students would work with more or less the same number of instructors throughout their dental education. Other changes include having the front desk book all the appointments for all the students. These changes alone, in addition to others will have a major impact on the clinical

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ASDA Eastern Tri-Regional Meeting

By Ariel Bales-Kogan, BU ASDA Social Chair, Lily Ghafouri, BU ASDA Second Delegate, & Talar Guldalian, BU ASDA Secretary and ASDA Research Extern 2000

Local ASDA leaders from Region 1, 2, and 3 met on February 22-25, 2001 in Hartford, CT for the annual Eastern Tri-Regional meeting. ASDA leaders were able to discuss and share ideas about the organization in order to promote the mission of the student run group. Guest speakers, various leaders from the three regions, and representatives form other dental related organizations and companies, were among the many highlights of the weekend.

Guest speakers were invited to discuss currents concerns. In the dental field, Dr. Edwin Mehlman, a Boston University trained endodontist who is currently the ADA District 1 Trustee, presented concerns that were discussed during the ADA Annual Meeting in Chicago. He expressed his concern about the shortage of faculty at dental schools nationwide. Presently there are four hundred unfilled positions due to the large income differentiation between teachers and private practitioners. Furthermore, he noted that schools that have closed down have experienced lack of faculty salary and research funding. He encouraged us to consider academics in our future dental career. Dr. Mehlman ended his presentation by discussing the movement of the dental field towards evidence-based dentistry.

Dr. Michael Eagan, delegate from the Connecticut State dental Association, spoke about the benefits of organized dentistry. Among those benefits, he mentioned: access to continuing education courses, and opportunity to interact with colleagues, community benefits from activities and ensuring the protection of Oral Hygiene (advocacy).

Various consultants presented updates of current national issues pertaining to ASDA. Consultant of Membership Marketing, Blaire Bradford, focused on the lack of diversity in ASDA. He recently met with the ADA council who expressed a lack of connection between diverse groups such as the Hispanic Dental Association and the Women's Dental Association and the ADA. He encouraged all ASDA chapters to improve the relations between ASDA and minority student organizations. As well, he also focused a presentation on the benefits of starting local student pre-dental chapters. In addition, ASDA Vice-President Dan Bills, a member of the taskforce on licensure reform, gave an update on his efforts in speaking with the chairmen of the NERB's. Today there are a number of states that have accepted the NERB Exam as a requisite to practice dentistry in

their state. There are currently only 9 states that accept all four licensure examinations, being: Connecticut, New Hampshire, Vermont, West Virginia, Kentucky, Illinois, Missouri, Kansas, and Utah (see figure on opposing page).

A second issue of the taskforce is to pursue the ethical issue behind using live patients for the NERB examination. The taskforce's efforts in New York State have already rallied a support in the state house for eliminating the use of live patients. Behind this issue lie many points that validate the lack of normalization, of patientreliance, of realistic 'ideal' lesions, and more. The taskforce continues their effort in making the Part II Board exam nationally acceptable.

The Consultant on Legislation, Sayeed Attar, and Regional Legislative Liaison, Mike Davey (BU 2001), spoke in detail about current student issues in the Senate and in the House of Representatives. However, this issue will be covered in detail in the ASDA Lobby Day 2001 report.

The Speaker of the House of Delegates, Kevin Rencher, spent a few hours explaining the rules of the house as well as

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ASDA Eastern Tri-Regional Meeting ...

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how to properly exchange dialogue in the house. We went through all the motions as well as rules of speaking in the house, and Kevin's passion in this field made the learning very entertaining. This was followed by a mock house, so that we could practice our new skills. The purpose of this session was to prepare all delegates for the formal house meeting in Orlando, Florida, in August of 2001.

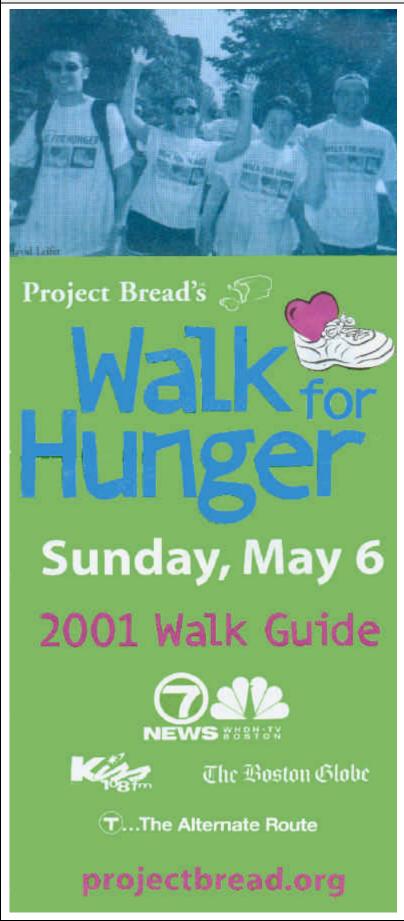
Much time was devoted to give each school's leaders an opportunity to present a chapter update.

This activity gave all participants a method to communicate a few ideas for future activities. For example, Tufts has been focusing on pre-dental student recruitment. University of Connecticut has been selling scrubs with the ASDA logo. Other schools have created care packages that parents can purchase for their children during examination time. Harvard University, always known for its charity events, was recently

involved in Toothprints in association with the Massachusetts Dental Society. This program is intended to compile prints of children's teeth and fingers for identification purposes.

After three days of meetings and sleeplessness, everyone went back to their schools filled with updates and new ideas to make their branch of ASDA a stronger and closer organization. In general, people left with an energized mood, ready to make a difference at their local chapters and spread the ASDA spirit.

CLINICAL LICENSURE EXAMS ACCEPTED BY YOUR LICENSING JURISDICTION* WAS MTO SD • Ø CAC NVO AZ (3) NM ® AHO TXO GA B SC B LAD CRDTS NERB DISRIA **⊗ WREB** STATE EXAM



Thousands of Children Need Your Help!

This is a chance to make a difference! In our lives, we are all relatively fortunate to at least have the necessities for living. In Massachusetts alone there are nearly half a million people who struggle to put food on the table. Even more shocking, one in five children in this state under the age of 12 is hungry or at risk of being hungry.

As BU ASDA's continuing effort to help the community in which we live, we hope to raise funds for this worthy cause. Also, we hope to increase awareness within our school, and in Boston in general.

We're all students, and our budgets too are limited. We ask that you give as much as you can. Every cent will make a difference collectively.

We also encourage you to participate in this fundraiser. The Walk for Hunger, now in it's 32nd year, is one of the oldest and biggest events of its kind. The 20 mile walk takes you through an array of sights in Boston, Brookline, Newton, Watertown, and Cambridge. There will be free snack at the halfway point, and a finish line celebration on the Boston Common that you don't want to miss. Walk one mile, or all 20, it's up to you!

Contact Ariel Bales-Kogan at abales@bu.edu if you are interested in participating or if you wish to make a pledge.

Together we can help make a difference, and ensure that the young children building our future grow up strong and healthy

young children building our future grow up strong and healthy. Show the world that Boston University's Goldman School of Dental Medicine cares about the community!

ASDA Happy Hour

By Negar Nasseripour, BU ASDA International Students Representative

It was time to leave the stress behind. Forget midterms and assignments, preps and root canals... It was a time to have a party!

This March 30, BU ASDA hosted "Happy Hour" at the Wonderbar venue. Located in the depth of Allston, this charming little bar has a hidden basement with many disco-balls. On the main floor, everyone was welcomed to grab a table and enjoy the live Jazz music while conversing with friends. Downstairs was a dancing fiasco of semisober dental students and Bostonians alike.

There was a great showing from all three dental schools, which made it all the better.

The next "Happy Hour" will be hosted by Harvard in the Fall, 2001.



Thanks for freezing!

Perhaps we cursed the morning hour, when we gathered at pre-dawn time to board the bus. Boston still asleep, no sign of life except our breathes in the cold morning air. Then, that was all made better by the luxury bucket seating! Yet, arriving at Mount Killington, Vermont, on this February 11th held another surprise! Slight gusts of wind, with sub-zero temperature at the peaks excited us in ways we didn't imagine.

Skiing was great, as usual, even though it is not exactly the recommended sport of choice for dentists to be. However, seeing the temperature, we did spend a considerable amount of time in the chalet chatting up with our neighboring Harvard and Tufts dental colleagues.

The runs were grrrrreat, once you got used to the occasional sheet of ice. Overall, it was an amazing trip. Lots of fun!!

Sure to be repeated next year, so stayed on top of your emailing, for your next opportunity to freeze along with us.

Sorry, no pictures were snapped. The apertures would have probably frozen. At any rate, we were more concerned with keeping our fingers warm under two pairs of gloves.

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Lobby for B<u>U</u>, 2001...

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and hence still offers an improvement from current legislation.

The second issue of debate was tax credits for establishing a practice in an 'underserved' area. The high student debt fact has been an issue in providing dental care to underserved areas. The average cost for starting up a dental practice ranges between \$100,00 and \$150,000, and signifies an additional debt incurred by the new dentist wishing to set up an office in an area otherwise underserved. This forces a majority of new dentists to localize in larger central communities, where financial benefits are higher and aid in the repayment of incurred educational loans. Yet, testimonials indicate that there are dental students who wish to move into small communities, whether it is in order to return to their hometowns or as a means of providing much needed services. These individuals would be left to bear the financial constraints of such decisions under current legislation. Senate bill S. 569 would provide a 60-month \$1.00 per month tax credit for all primary health care providers establishing practices in 'underserved' areas. The intent of such actions would aid in covering the initial expenses and mortgage payments incurred by building a practice from the foundation up. Clearly, such measures would make it more possible and feasible for underserved areas to be services

The third and last main issue discussed was Federal Loan Repayment Programs. Current proposals suggest increasing federal support of existing loan forgiveness programs to dental and other health professions pursuing a career in academia and research, and servicing health professions shortage areas (HPSAs). Briefly, current programs include a variety of for-

giveness methods. The Faculty Loan Repayment Program pro-

vides up to \$20,000 a year for two years towards repaying student loans for qualified individuals. It is proposed that the current annual funding for this program be doubled from \$1 million to \$2 million. The National Health Service Corps awards loan repayments to dentists and dental hygienists who work at HPSAs for a minimum of 2 years. The two-year contract would award a selected individual with \$25,000 per year, with a possible one-year extension for a maximum of \$35,000 per year. It is proposed to increase funding for these awards by 15% from \$129.4 million to \$150 million. The U.S. Public Health Service's Inidan Health Service Dental Loan Repayment Program aims to provide oral health care to Native Americans and Alaska Natives. In exchange for a full-time position at one of the current 280 hospital sites located in 25 states, dentists receive up to \$20,000 per year towards loan repayment in addition to a salary (range of \$46,000 to \$82,000). It is hoped that a 5% increase to this program from \$4 million to \$4.2 million will continue to help provide dental services in such regions. Lastly, the National Institutes of Health hopes to provide opportunities for medical professionals to conduct biomedical research, for which each individual would be awarded \$35,000 per year in student loan repayment, for a minimum of 2

years. This new proposal requires a \$2.5 million investment in order to offer such programs. Currently, there are 400 vacant faculty positions at the 55 U.S. dental schools, representing a crisis in the recruitment and retention of dental educators and researchers. Since such academic positions don't offer a competitive financial earning, these programs would provide incentives for new dentists interested in academia to pursue their goals. Dental education costs are continuously on the rise, while academia positions simply cannot compete with the needs of new graduates to repay student loans. It is imperative that such programs continue to be funded. We met with three individuals in congress, being Senator Hillary Clinton's office (Democrat-New York), Senator Edward Kennedy's office (Democrat-Massachusetts), and Representative Edward Markey (Democrat-Massachusetts). It was our goal to convey the above issue to the offices and request for sponsorship of current and future bills pertaining to these issues. The BU ASDA chapter wishes to extend a very warm appreciation for the generous financial support of the Dean's office in this event. We hope that the school's participation in such future programs will continue to help students find leadership opportunities and make a difference in the lives of all dental students.



From left:

Mike Davey (BU 2001), Joshua Fry (Tufts 2004), House Representative Edward Markey (Democrat-Massachusetts), Ariel Bales-Kogan (BU 2003), Trisha Krause (Tufts 2003).

Concerns Over the Upcoming Changes in Predoctoral Clinic...

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aspect of each student's education at BU.

After discussing the subject to many students who are in clinic already, there are naturally some concerns. The first and most major concern has to do with the clinic being broken up into different groups. As we all know, there is a luxury of having numerous doctors on the floor to obtain opinions and instructions from. If the changes were to occur as discussed, this luxury will no longer be available as freely as it is now. Students will be limited, for the most part, as to whom they can go to for guidance; and this will result in students being exposed to only

one or at most a few ways of dealing with clinical issues.

The next major concern for students is the handling of patient appointments. The way it is run now, a student can make an appointment for their "A" and "C" priorities, which gives the patient more opportunities to come in. However, with the new changes there are many limitations. For example, student "A" priorities (guaranteed chair time) often do not match the times when their patients can come in. It is true that we will be able to swap "A" priorities with other students in our group, however, that creates many complications if we're supposed to make the patients' next appointment at the end of a session

as directed. How could a switch be made at that point in time if the other involved student is not present? There are many of these little issues that we hope will be worked out before the system is implemented.

It is natural to have these concerns when we are paying so much tuition to the school. It is the student's main concern to get the most out of their dental education, as this will follow them the rest of their careers. As a whole, we believe these new changes, as they currently stand, will need to be looked over closely and revised so as to eliminate any potential problems. We are sure that the school is trying as hard as they can to provide us with an optimal education; and we are sure that they will recognize and address future concerns due to the implementation of this system.



The Artistic Dentist!

A dental education is a very scientific process. Although neverending, it does lack that certain ability to allow us to express ourselves in different ways. This section is intended to demonstrate that dentists, too, have artistic and creative sides worth exploring. If you wish to contribute to this section, please feel free to submit your material.

Voices within

The waves intensified, the thrust of its forces On reaching the shores. The shore bore it all. Missing them, As tides receded, waiting for them to come again In pain was pleasure.

Home sweet home isn't it earth?
Belongs to no one and yet to everyone.
Knowingly claims no one
Have the trees, river and streams, which know no distinction
Does no preaching just practicing
No expectations just duty
Why not learn?
Before it's too late and all that's left is a devastated land

With no Life, is that what's called prospering?

In an endless pursuit of land and boundaries, Why kill?

Ami Shah (amishahs@bu.edu)

Changes that Change

A stethoscope to my ears,
Listening to my own heart.
Wondering; does this beat
Lead to a chosen path?
The thumping of my chest
Reveals none of my heart's pains,
But how else can I hear what it has to say?
How I saw things, and
How things may turn out,
Seem to be very distant by the beating of my heart.
How could I have predicted?
How could I hurt the ones I love?
By changing what I am in their eyes.

And right below my heart, There lies a heavy weight. One which has been placed Only recently, yet it stays.

Then I start to realize, it may never go away, But what I have to do, is the hardest to explain. Will it relieve the suffering I feel inside me now, Or will it bring more weights to bear,

More torture, and more cries.

I only hope that one thing stays,

With all that's about to change. The person who I thought I was

Will hopefully stay the same.

Anne Onimousse



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