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DENTAL TRIBUNE

The World's Dental Newspaper • U.S. Edition

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MINIMALLY INVASIVE, ESTHETIC RESTORATIONS

Dental Tribune Study Club class at the ADA Annual Session demonstrates 'Prep it and fill it' with Shofu.

► page A4



ENDO TRIBUNE AVOIDING BLOCKAGES AND BREAKAGES

Proper cleaning/shaping technique reduces fatigue, increases predictability.

► page B1



HYGIENE TRIBUNE JOB STATISTICS LOOK GOOD FOR HYGIENISTS

But ... new schools are meeting demand and part-time trend continues.

► page C1



Record number of courses at ADA meeting

Event includes live-patient demonstrations and more than 300 workshops and courses

With a record number of hands-on workshops, education-in-the-round live-patient demonstrations, hands-on cadaver workshops and open and clinical science forums, the American Dental Association Annual Session has educational opportunities covering virtually every aspect of dentistry.

The event runs from Oct. 31–Nov. 3 in New Orleans, with some preconference courses also on the agenda.

Attendees can select from more than 300 lectures and interactive learning experiences, including advanced courses, "fast tracks," "Presidential Whistle Stop," "Progressive Perio," "ADA Town Hall," "Social Media Panel" and, of course, unlimited opportunity to exchange ideas with colleagues from across the globe.

There also are learning opportunities on the exhibit hall floor, with "ADA CE Live," which includes hands-on opportunities with some of the industry's latest technology and solutions. The exhibit hall

also includes the new "Health and Fitness Center" and "Dental Office Design Center" making their debut at the 2013 meeting.

Among the most recent courses to be added to the agenda are learning labs and super sessions on "Women in Dentistry" and "Geriatric Patient Care." The learning labs are a new type of interactive course for the meeting, featuring physical tools designed to engage both sides of a participant's brain — with the intent of opening new ways of thinking. Offered for no extra fee, the learning labs enable attendees to gain peer-to-peer insights in small group environments. Spaces are limited, so meeting organizers encourage early sign-up.

In the super sessions, attendees can further the discussion of what was covered in the smaller learning labs. Sketches, audio commentary and photos of the activities in the learning lab will be shared so a

► See COURSES, page A3



ADA Annual Session, Oct. 31–Nov. 3, New Orleans

The American Dental Association's 154th Annual Session and World Marketplace Exhibition, from Oct. 31 to Nov. 3, brings together leaders in dental practice, research, academia and industry to present more than 300 continuing education courses. President Bill Clinton will speak at the opening general session on Oct 31. Photo/By Jeff Anding, New Orleans Convention & Visitors Bureau

► See pages A3–A6

ADA ANNUAL SESSION A3–A6

- Hands-on C.E. and other courses still open for registration
- Dr. Ron Kaminer: Prep it and fill it for minimally invasive restorations
- Dr. Frank Milnar: Immediate dentin sealing and adhesion
- Research presented by world's top student clinicians

MEETINGS A8–A16

- Toronto Academy of Dentistry
- Greater New York Dental Meeting,
- AAIP/ADIS implants courses
- Yankee Dental Congress
- Pacific Dental Conference
- Smiles in the Sun
- Journées dentaires internationales du Québec

INDUSTRY NEWS A17–A47

- OralID oral cancer screening device
- Upgrade your old NOMAD
- New handpieces from NSK
- Biolase offers laser mini-clinics
- Fix insertion path for BruxZir bridge
- Saddle-style stool from Orascope
- Rotograph Evo 3D, 3-in-1 functioning
- BEAUTIFIL Flow Plus in four shades
- R-dental's METAL-BITE earns awards
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Esthetic dentistry may not make patients happier

When assessing patients for esthetic dental procedures, it might be just as important to evaluate mental health as oral health. Recent research suggests that some patients who are dissatisfied with their appearance will feel the same after such dental work, no matter how objectively successful a procedure is.

This is a finding in a study by Sharmila Sarin, supervised by Dr. Koula Asimakopoulou, and colleagues from King's College London. The team presented its research, "In pursuit of the perfect smile: Predictors of satisfaction with esthetic dental procedures," in September at the British Psychological Society's Division of Health Psychology annual conference in Brighton, England.

In the study, 60 participants completed the Slade Body Satisfaction Scale and a

"visual analogue scale" assessing satisfaction with their appearance before and after their dental work. Each also completed a short version of the "Big Five" personality test before his or her procedure.

Happier before means happier after

Irrespective of the dental work performed, people who were happiest about their appearance before receiving esthetic dental treatment were those that were the happiest after treatment; dissatisfaction with one's appearance seen in those measuring high in neuroticism persisted after esthetic dental work.

According to Sarin and Asimakopoulou: "We wanted to establish whether personality and the views that people have about their appearance before receiving esthetic dental treatment would influ-

ence satisfaction with the outcomes of esthetic dental procedures.

"We found that it is in the patients' and dentists' interest to ensure that patients receiving esthetic dental work start from as high a point of satisfaction with current appearance as possible. This will enhance the chances that they will be satisfied with the results of esthetic dental treatment. Neuroticism is also likely to interfere with satisfaction with esthetic dental work."

The conclusion: Dentists need the support of psychologists to enhance patients' satisfaction with their appearance before embarking on esthetic dental procedures.

(Sources: King's College London, The British Psychological Society and Science News Daily)

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Cadaver workshops take learning beyond theoretical

Some registration slots still open for the innovative hands-on training opportunities at the ADA Annual Session

There are still seats available for the ADA's innovative "Hands-On Cadaver Workshops" at the ADA Annual Session, Oct. 31–Nov. 3.

The seven, three-hour cadaver workshops will be held at the Louisiana State University Health Science Center.

"The facility at LSU will allow participants and instructors to maximize all of the teaching tools available in a true clinical learning application," said Dr. Alan W. Budenz, clinical director in 2012, and the presenter of one of the workshops this year. "This is not theoretical information; it is focused on improving your daily practice of dentistry."

The seven workshops are:

- "Crown Lengthening," by Dr. Jon Suzuki, Oct. 31, 11 a.m.–2 p.m. (course 5230).
- "Soft Tissue Grafting with Autogenous and Allogenic Tissue," by Dr. Peter Shatz, Oct. 31, 3–6 p.m. (course 5231).
- "Anatomy of the Masticatory System: Clinical Application and Dissection," by Dr. Henry Gremillion, Nov. 1, 8:30–11:30 a.m. (course 6230).
- "Mini Dental Implants," by Raymond Choi, Nov. 1, 2–5 p.m. (course 6231).
- "Cadaver Dissection of TMJ and Associated Structures," by Dr. Mark Piper, Nov. 2, 8:30–11:30 a.m. (course 7230).
- "Local Anesthesia Cadaver Dissection," by Dr. Mel Hawkins and Dr. Alan Budenz, Nov. 2, 2–5 p.m. (course 7231).

- "Detection and Diagnosis of Oral Lesions for the General Practitioner," by Dr. Bill Carpenter and Dr. Homer Asadi, Nov. 3, 8:30–11:30 a.m. (course 8230).

The advance registration deadline had passed at press time, but the \$795 fee for a cadaver course hadn't increased. Each course includes shuttle rides to and from LSU and light snacks.

Shuttles pick up participants from the convention center 45 minutes before the start time and depart LSU 15 minutes after the end of each workshop.

Other hands-on workshop options at the annual session include:

- "The Ultimate Bonding Experience

Workshop," by Dr. Bud Mopper, Oct. 31, 8–10:30 a.m. (course 5209) or 2–4:30 p.m. (course 5219), \$315 per person.

- "Crown Lengthening Workshop," by Dr. Timothy Hempton, Nov. 1, 9 a.m.–1 p.m. (course 6223) or 2–6 p.m. (course 6224), \$315 per person.

- "Utilizing Laser Technology in a Periodontal Environment," by Dr. Samuel Low, Nov. 2, 8–10:30 a.m. (course 7203) or 2–4:30 p.m. (course 7213), \$315.

Other selected fee and free courses still have openings as well. For information or to register visit www.ada.org/session.

(Source: American Dental Association)



Ernest N. Morial Convention Center. Photo/ Kathy Anderson Photography, New Orleans Convention & Visitors Bureau

◀ COURSES, page A1

broader audience can reflect and continue the dialog.

The ADA Annual Session has ramped up continuing education courses at every level, from intermediate to advanced.

"The education-in-the-round courses, demonstrated on live patients, provide the most current way to do procedures and allow you to see how you can improve yourself," said Dr. Gregory J. Peppes, 2013 annual session program chairman. "Our workshops and cadaver courses are great hands-on learning tools. In 2013, we've expanded the advanced courses to help dentists and dental teams continue to be the best in any setting."

This year's advanced courses include: "An Advanced Course in the Treatment of Snoring and Sleep Apnea," "Interdisciplinary Periodontal, Prosthodontic and Orthodontic Collaboration for Routine and Complex Dental Care," "Cone-Beam CT Course: Level II," "Preparing Patients for Grafting and Guided Surgery with Dental Implants," "Attachments and Implants Workshop," "How to Endodontically Treat Calcified and Curved Canals: What Every Dentist Who Wants to Enjoy Endo Needs to Know" and "Advanced Provisional Fabrication."

For information or to register for the annual session, visit the ADA's meeting website at www.ada.org/session.

(Source: American Dental Association)

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Fig. 1a



Fig. 1b

Figs. 1a, b: Preoperative view shows gold inlay requiring replacement (1a), and postoperative view (1b) demonstrates the use of BEAUTIFIL Flow Plus on occlusal surfaces. Photos/Provided by Dr. Naotake Aldmoto



Fig. 2a



Fig. 2b

Figs. 2a, b: Class V restorations requiring treatment with direct resin restorations (2a) and immediate postoperative view (2b) following placement of BEAUTIFIL Flow Plus. Photos/Provided by Dr. Howard Glazer

New materials: 'If nothing changes, nothing changes'

Ron Kaminer, DDS, uses Shofu products to 'Prep It and Fill It' for minimally invasive, esthetic restorations

In a Dental Tribune Study Club session sponsored by Shofu Dental Corp. at the American Dental Association Annual Session in New Orleans, Ron Kaminer, DDS, will share his experiences with the use of adhesive materials and flow-

able composites in minimally invasive dentistry. Kaminer answered questions posed by Dental Tribune to reveal a few details about what attendees can expect from the session, which will be presented in the annual session's exhibition hall.

DTSC Symposia in New Orleans

Dr. Ron Kaminer presents "Prep It and Fill It: Minimally Invasive Options for Restorative Dentistry," on Thursday, Oct. 31, from 1-2 p.m., in booth No. 3457 as part of the DTSC Symposia. You also can learn more about Shofu's products, current promotions and other offers at the Shofu booth, No. 2251.

RON KAMINER, DDS,

is a 1990 graduate of the State University of New York at Buffalo School of Dental Medicine. He has two New York practices — in Hewlett and Oceanside. An expert in dental lasers, he lectures on lasers and minimally invasive dentistry nationally and internationally. He is director of the masters of laser training program in New York and is a clinical instructor with the International College of Laser Education. He evaluates new dental materials for the Catapult Group and serves as a clinical consultant or adviser for a number of dental industry manufacturers. He has written numerous articles on dental lasers and minimally invasive dentistry and is an associate editor for Dental Product Shopper. He is a member of the Academy of Laser Dentistry, Academy of General Dentistry, International College of Facial Esthetic and American Dental Association. He lives in Hewlett with his wife and three children.



Your session is titled "Prep It and Fill It: Minimally Invasive Options for Restorative Dentistry." Can you provide brief overviews of what you will cover?

Like our medical colleagues' work, dentistry is heading in a minimally invasive direction. As dentists, we must be ready to adapt and investigate different preparation types as well as new materials that lend themselves to this trend. During this session we will cover some advances in tooth preparation for operative dentistry, simplifying posterior contacts and using some new adhesive materials and flowable composites to achieve outstanding esthetic results.

Who should attend this session?

This program is ideal for general dentists and assistants.

If there are just one or two core concepts you'd like attendees of your session to leave with, what are those?

There are many new materials today that make routine dentistry easier and more predictable. Shofu's BEAUTIFIL Flow PLUS is one of those materials. It is super esthetic, wears extremely well, and, because of its chemistry, it is bioactive. Clinically, if we adhere to manufacturers' recommendations, we can achieve lifelike esthetics and sensitivity-free restorations time and time again.

Your session is sponsored by Shofu. How did you end up associated with the company, and what attracted you to its products and services?

As an opinion leader and consultant in the dental profession, my responsibility includes seeking out companies with outstanding, easy-to-use products and fostering long-term relationships with

such companies. Shofu's products are scientifically based, well thought out and stand the test of time. There is not much more a key opinion leader could ask for when working with a company.

What is it that has made you such a big fan of BEAUTIFIL Flow Plus specifically?

BEAUTIFIL Flow Plus is strong (highly filled) but very esthetic. Sometimes it does not even require polishing, as I will show in the presentation. It comes in two viscosities: zero flow, which flows a little, and low flow. So there is something for everyone. If you place it in a preparation, it self-levels and does not run everywhere. And, finally, because of the proprietary GIOMER chemistry, it is bioactive, so it is ideal to use on a high-carries patient.

Any final thoughts?

Anyone can achieve outstanding results just by changing a few products he or she is currently using. Remember: If nothing changes, nothing changes.

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Get predictable restorative results with immediate dentin sealing, powerful adhesives, minimally invasive mindset

Frank J. Milnar, DDS, AAACD, provides guidance on some of VOCO's latest products

By Robert Selleck, Managing Editor

It's hard to resist a company-sponsored presentation featuring an educator who's willing to test anybody's products and promises to never to claim which is best — and instead simply delivers the facts and lets the students come to their own conclusions about what's better or best. Such is the case with two Dental Tribune Study Club presentations sponsored by VOCO at the American Dental Association Annual Session in New Orleans.

The presentations feature Frank Milnar DDS, AAACD, speaking on two topics that naturally flow together: "Immediate Dentin Sealing and Contemporary Adhesive Strategies" and "Incorporating Minimally Invasive Concepts to Ensure Predictable Restorative Results." Milnar agreed to answer a number of questions from Dental Tribune to give attendees a little better idea of what to expect from the sessions.

Would you provide brief overviews of your sessions?

Regarding "Immediate Dentin Sealing and Contemporary Adhesive Strategies," today's dental practices must know when and how to use total etch, selective etch and universal self-etch adhesives.

I'll provide easy-to-understand guidelines for each. Attendees will leave with an understanding of the technologies, greater knowledge about the benefits of immediate dentin sealing and a better understanding of why the adhesive layer is the most important layer of a restoration.

In "Incorporating Minimally Invasive Concepts to Ensure Predictable Restorative Results," I provide information and tips that will help practitioners quickly select products and develop the techniques required to create minimally invasive injectable composite restorations and prevent sensitivity. Attendees will learn how the properties of composite resins affect their longevity — which is critical to the goal of maximizing lifelong preservation of as much natural tooth structure as possible.

I'll also provide simple-to-follow explanations of the chemistry that creates adhesion — and the next generation of injectable composites, with a focus on understanding when and where to use them.

Have there been some recent advancements in immediate dentin sealing products or techniques? Do you cover these in your session?

Yes. First, most clinicians don't know what "immediate dentin sealing" is. I would bet 95 percent have not heard of the concept. Brännström's hydrodynamic theory of 1966 showed that the movement of fluids in the tooth due to trauma promotes dentin sensitivity. Sealing exposed dental tubes prevents movement of fluid, thus

reducing postoperative sensitivity. Immediate dentin sealing also protects the tooth from bacterial invasion. It's often referred to as "sealing for healing."

Cutting into deep, vital dentin creates a portal for bacterial invasion. Also, according to Dr. Franklin Tay, when cut dentin bleeds water — there can be a significant negative effect on the restorative bonding sequence.

Writing about immediate dentin sealing in 2006, Pascal Magne advocates sealing the dentin at the time of the preparation appointment; then the enamel can be bonded at the final appointment of cementation.

How to you determine which new products or techniques you need to be using with your patients — and when?

That goes to adhesion. The adhesion layer is the most important layer in your restoration. Universal dentin bonding agents, or DBAs, are simpler, faster and employ easy-to-understand methods and techniques.

One example is VOCO's Futurabond U (universal) dentin bonding agent. The challenge of determining which of these various products or techniques to use on the patient spills over to the next seminar, which gets into techniques connected to minimally invasive dentistry. The two go hand in hand. First, you have to have materials, adhesion and chemistry that correspond to smaller preparations. Then you need to know how to master the techniques.

Who should attend your sessions?

The entire staff. It's helpful when the entire team understands the chemistry, the preparation, the indications, the contraindications and the proper implementation of all these next-generation products.

If there's just one or two core concepts you'd like attendees of your sessions to leave with, what are those?

When you pre-cure DBAs prior to impressioning, you don't get collapse of the collagen fibers during cementation. Immediate dentin sealing is ideal for minimally invasive preps. Also you seal fresh-cut dentin on the spot, to eliminate the adverse effects of microbiology.

Adhesion, today — in any form — creates repairability. And that's the new gold standard of our time: Preserve as much dentin and enamel as possible, with minimal trauma to the tooth. Immediate dentin sealing really promotes all of this.

Worth noting, too, in terms of other products offered by the sponsor, VOCO: There are various products that support immediate dentin sealing and adhesion by stabilizing the oral environment prior to and following restorative dentistry. An example from VOCO is Remin Pro, which has calcium phosphate fluoride and xylitol. VOCO Pro, Profluorid L and Profluorid

DTSC Symposia in New Orleans

Dr. Frank J. Milnar presents "Immediate Dentin Sealing and Contemporary Adhesive Strategies" on Friday, Nov. 1, from 11:15 a.m.–12:15 p.m. and "Incorporating Minimally Invasive Concepts to Ensure Predictable Restorative Results" on Friday, Nov. 1, from 12:45–1:45 p.m. Both presentations take place in the Dental Tribune Study Club booth (No. 3457) in the exhibit hall as part of the DTSC Symposia at the American Dental Association Annual Session. You also can learn more about VOCO America products, current promotions and other offers at the VOCO booth (No. 1939) in the exhibit hall.

Varnish also are great products to use with immediate dentin sealing and non-invasive dentistry.

Some might argue that "minimally invasive" and "maximum esthetics" can be a "one or the other" decision. Is that ever the case?

Not really. Everything you do has a consequence in dentistry. Short or long term.



FRANK J. MILNAR DDS, AAACD, is a graduate of the University of Minnesota School of Dentistry. He is an accredited member of the American Academy of Cosmetic Dentistry and a board examiner for accreditation. Milnar maintains a full-time practice in St. Paul, Minn., emphasizing appearance-related dentistry. He has published numerous articles about the direct placement of composites, shade selection and porcelain materials and is on editorial review boards for dental journals. He has been voted "Top Dentist" for the last several years in the Minneapolis/St. Paul Magazine. He has been voted by Dentistry Today as one of the top 100 dentists contributing to dental education

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► See SEALING, page A6

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► See STUDENTS, page A8

In New Orleans

Meet the 2013 SCADA student clinician award winners, view their research and earn C.E. credits from 1–4 p.m. Saturday, Nov. 2, at the 2013 ADA Student Research Poster Exhibit, in Hall B, Level One, Room B21, of the Ernest N. Morial Convention Center. Learn more about DENTSPLY in booth No. 2501/2601 in the exhibit hall at the ADA Annual Session.



Last year's six SCADA Student Clinician award winners: Thomas R. Bailey, from left, Peter Yamamura, Sara Hinds, Alexandra Forest, Marc Manos and Moataz Elkasrawy. Photos/Provided by DENTSPLY International

► SEALING, page A5

The good news is, for maximally esthetic results, we now have minimally invasive materials in flowable materials that can ensure we can still be esthetic at the same time. This is a new era. Minimally invasive dentistry is based on emerging science.

What are some of the newer products you're using that make "minimally invasive" and "maximum esthetics" easier to mutually achieve?

We now have new flowable composites that have high fill rates, which means they are enduring. You can actually use these as universal composites for minimally invasive preparations. We can have

a variety of opacities, translucencies and effects, which is to say "enamel effects" in a flowable syringe to achieve esthetics. This is the key to the whole thing. That's why I'm really keen on these new flowables such as VOCO's GrandioSO Flow.

There are two flowable types: heavy body and regular, depending on if you want the material to move or stay in place once put in the preparation.

How to you determine which new products or techniques you should be using?

The essence of this is for the dentist and the auxiliary to determine where you are in the sequence before you prepare.

The minimally invasive dentist understands the product and the chemistries and the preparation guidelines before he or she takes a handpiece and puts it on the tooth. The minimally invasive dentist will focus more on the enamel that can be remineralized — and use that in the preparation instead of simply focusing on removal of decay and much of the enamel around it.

The minimally invasive dentist would stabilize the oral environment using a variety of the aforementioned products, such as Remin Pro or Profluorid, before starting the restorative sequence. Otherwise you are building in an undesirable environment that will decrease the longevity of your work. You must answer the basic question: Are you a physician who diagnoses? Or are you a surgeon who cuts? Those are big questions today. Are you going to be "proactive" or "reactive" in your mindset?

Ultimately, we want to avoid a repeat restorative cycle. We want to keep it minimal, so you can repair. We want to keep the repair small. If you're orthodox, like a surgeon, every time you cut that tooth open again to replace, there's more trauma to the tooth. You want to avoid that. If you conserve the tooth structure, you have more strength surrounding the tooth instead of more vulnerability.

Your sessions are sponsored by VOCO. How did you end up associated with the company, and what attracted you to its products and services?

When VOCO was first coming into this country, I was asked to try its provisional

materials. That's how I got introduced to German chemistry. I published an article about it, and that's when I met the people from VOCO America. I was one of the first teachers in the U.S. for VOCO composites and provisionals. I felt that they had predictable chemistry. They had predictable products that were easy to understand.

I used the products predictably in my office with my assistants. And VOCO is strong on science. I can create artwork when there's strong science supporting it. I am a very creative person. I rely on science to take care of itself (as with immediate dentin sealing). Then, I can mimic nature and create natural esthetics in a very predictable manner.

Any final thoughts?

I try to base much of my thinking on this simple question: "What technique, what preparation, what adhesion would you like in your mouth, doctor?" I don't just teach for VOCO. There are lots of other companies with good products out there.

I cross-train myself on many of them. I don't do detailed scientific analysis on everything. But I watch my assistants to see how rapidly they embrace and adapt to something — and how a product can help us work together.

VOCO's Futurabond U, which is its newest launch, is an example. It does it all. It does all the chemistries. You can use one bottle for every clinical procedure. It's one of many new products in this area in the marketplace.

That's where the industry is today. Everything is universal. One bottle does it all. It's better when your assistants understand the product, can inventory it — can bring it out and dispense it, knowing this is where we are in the preparation sequence. It's better when they know when we're ready for adhesion, whether there's light or no light, whether we have zirconia or resin. These new products make that easier to accomplish.

I won't claim a particular product is "the best." But I'll teach it to you so you clearly understand it — using the Socratic method of questioning and answering. Then, it's up to you to decide.

In summary, these two courses really showcase "adhesion" as the Achilles' heel of restorative dentistry.

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This year's clinical program covers a broad spectrum of topics and includes: an examination of the way digital technology is transforming the workflow in the dental office; demonstrations of cutting-edge tools and equipment; spe-

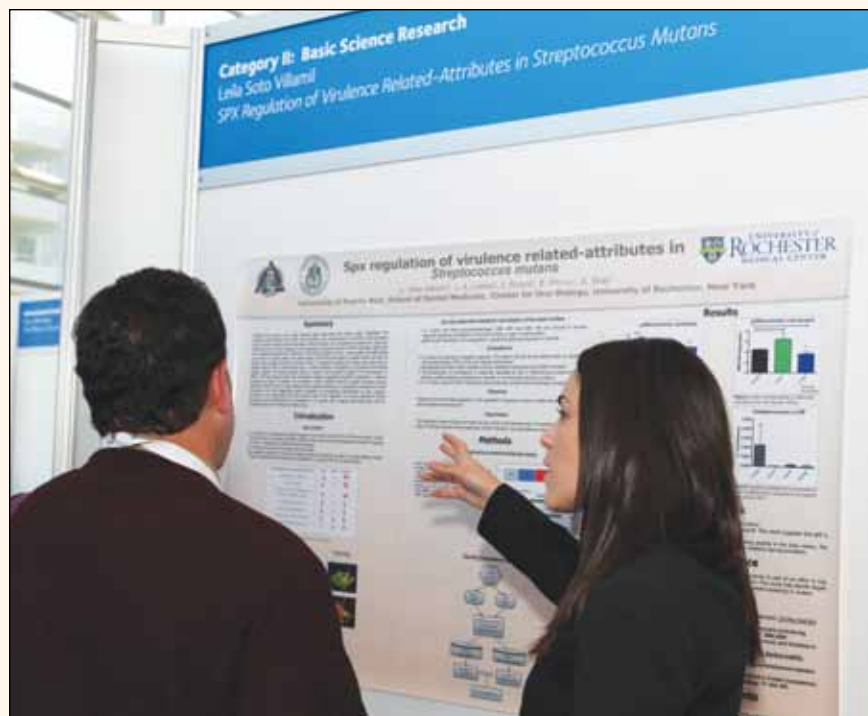
Among the sessions: “Death, Taxes and Other Disasters: A Silver Linings Financial Playbook for Dentists,” “Managing Adverse Outcomes,” “The Future of Practice Values: Good-bye Routine Recall ... Hello Healthy Patient and Practice!” and “To Polish or not to Polish? – That is the Question.” There also are five category-1

For more information or to register, you can call the Toronto Academy of Dentistry at (416) 967-5649, or all the details can be found online at www.tordent.com.

(Source: Toronto Academy of Dentistry)

was first presented in 1959 at the centennial session of the American Dental Association in New York City as a joint venture between DENTSPLY International and the ADA. Thanks to this now global research program, dental students work with fac-

The ADA hosts an SCADA program at each annual meeting as a popular feature of the scientific session in which students at each U.S. dental school are selected by



Leila Soto Villamil shares her research at the 2012 ADA meeting.

"When you look at our researchers, when you look at our department chairs, when you look at our deans, many of them are former [SCADA] clinicians," said Richard Tatum, DDS, MPH, SCADA past president.

Attendees at the ADA Annual Session in New Orleans can meet the 2013 SCADA student clinicians, view their research and earn C.E. credit from 1–4 p.m. Saturday, Nov. 2, at the 2013 ADA Student Research Poster Exhibit, in Hall B, Level One, Room B21, of the Ernest N. Morial Convention Center. For C.E. credit, reference course No. 7399 and verification code No. 9117.

(Source: DENTSPLY International)

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