

GLAO News

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Fall 2008

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2008 GLAO/MASO Joint Annual Session
October 10 - 13 • Gran Meliá Puerto Rico

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PRESIDENT'S REPORT



MARY K. BARKLEY, D.D.S.

Greetings to the members and supporters of the Great Lakes Association of Orthodontists! I hope that you've all had wonderful summers, as we approach the changing of the seasons.

The AAO Annual Session in Denver seems long ago, rather than just in May. For those of you who have served

in the House of Delegates, you know what a challenge it is to prudently determine the course of our organization during a few days of meetings and votes. I'd like to thank Dr. Richard Marcus for serving as GLAO delegation chair to the 2008 House of Delegates. Richard devoted many hours of hard work to ensure that our delegation was articulate and well organized at the House meetings.

As temperatures start to drop, please plan to attend the GLAO annual meeting October 10-13 in lovely Puerto Rico. This is a joint meeting with the Middle Atlantic Society of Orthodontists. The conference will be held at the Gran Melia Resort, about 40 miles east of San Juan. Dr. Gene Roberts has arranged an excellent scientific program for doctors, and Dr. Steve Siegel has scheduled a great staff program. The course schedule is arranged to leave time for the golf course, beach and touring. Visit www.glao.org to register now!

I hope to see you in Puerto Rico!





JOHN MONTICELLO, D.D.S., M.S.

Research and scientific evidence based therapies, coupled with market pressures have modified orthodontic practice and kept it a dynamic health care service over the last century. We all know the history of appliance design changes from removable to banded to bonded, to technique changes from single-stage to multi-phased therapies, functional growth modification strategies to orthognathic treatment. By no means is this list all inclusive, but only demonstrative of the changes in orthodontic health care delivery over the years. Each focus represents a technique or appliance that appeared to be superior to previously used therapies either in efficiency of treatment completion, improvement of final occlusion, bite correction stability, practice management flow, office productivity, or all of the above. That is how the free market system and orthodontic health care works.

The AAO Principles of Ethics were written, and have been amended over the years, with this in mind. Every

year at the AAO Annual Scientific meeting, manufacturers introduce their newest and best; the best practice management software, best orthodontic appliance system, best digital x-ray machine, best adhesive or cement, etc. etc. As a specialty we welcome this innovation and improvement to our practice. The AAO Principle of Ethics were written not to discourage this, but to encourage the continuous improvement of orthodontic treatment. The defining part of the AAO Principles of Ethics, which impacts us now, is how we as individual providers hold ourselves out to the public compared to our peers. The manufacturers do not have Bylaws or Principles of Ethics to follow and cannot be reprimanded. They can make claims that are not justified by scientific evidence and be very selective on what part of a record to display to make their case. Some manufacturers have carried it even further and promoted their products to our referral sources with the same questionable evidence that suggests poor quality of treatment if the specialist is not using their product.

As a new Delegate at the AAO in Denver, I saw where this was going. Throughout the meeting I overheard numerous member complaints about undocumented advertising. There were several resolutions introduced to the 2008 House of Delegates by other Constituencies calling for severe consequences for any AAO member that used terms in their advertising that promised superior care with “shorter treatment times,” “fewer appointments,” “better results,” and “no expansion appliances.” Although no specific manufacturers were named, these resolutions were gener-

ated by members who felt they had to defend their evidence-based treatment plans to general dentists that had been subjected to colleagues' claims of superior treatment with a specific appliance. None of the resolutions were passed, but were referred to the Trustees without prejudice for further study and re-introduction to the 2009 House. I believe this is not going to go away. There will likely be a resolution next year dealing with this issue. The AAO Principles of Ethics are specific that a member cannot hold oneself out to the public as better than his/her peers in treatment provided.

My message to the GLAO Constituency is...be forewarned. Re-visit your printed advertisements, internet web-pages and presentations and claims to general dentists. Your colleagues will be watching and in a struggling economy, friendship can only go so far. Be certain that studies you reference are indeed truly independent and not manufacturer sponsored. Review the AAO Bylaws and Principles of Ethics and follow them. If you need a copy they are available from the AAO. I hope this message is read and understood by all.

On another note, please see the article in this edition of the GLAO Newsletter highlighting the orthodontic residency at the University of Michigan. This is certainly one of the leading institutions on orthodontic research and evidence-based treatment protocols. With Dr. Sunil Kapila as the new Graduate Orthodontic Professor and Chair, it promises to continue its international leadership and renown. Have a great fall and I hope to see a big crowd of doctors and staff in Puerto Rico in October!

AAO TRUSTEE REPORT



JOHN BUZZATTO, D.M.D., M.D.S.

The Board of Trustees met May 12-14 and 21, 2008 in Colorado Springs and Denver, Colorado. Following is a brief review of the highlights of the May 12-14 Board Meetings.

Council on Communications: The Board approved: (1) Entering a relationship with Alton Brown to serve as the celebrity chef for National Orthodontic Health Month 2008 (\$60,000). (2) That five consumer/patient education brochures updated during the 07/08 fiscal year be translated into Spanish: All About Orthodontics, Looking Good, Feeling Good, The Importance of Clean Teeth, Your Child's First Orthodontic Check-up and Adult Orthodontics (\$2,000). **Bob Good** – GLAO member

Council on Informational Technology: The Board asked the Council to review the current AAO website in consultation with the staff content working group and advise the Board and the extended AAO family on all matters concerning the consideration, exploration, adoption and implementation of technology related issues. **Joe Janowski** – GLAO member.

Council on Orthodontic Education: The Board approved collaborating with AAOMS (Oral surgeons) and AAP (Periodontists) on a request for the Joint Commission on National Dental Examinations to reconsider its adoption of pass/fail on National

Board Exams and that it retain its quantitative nature and that the AAO consider a resolution to the ADA House of Delegates encouraging the Commission to retain its quantitative nature and that this resolution be submitted as a joint resolution from the specialties. **Gene Roberts** – GLAO member.

Council on Scientific Affairs: Drs. Sheldon Baumrind, Sunil Kapila and Glenn Sameshima have been nominated to serve on the AAOF PARC. **Mike Riolo** – GLAO member.

Committees: The Board approved: (1) New guidelines for AAO Members' use of AAO marketing materials and communications materials by constituents, components, groups or individual members. The new policy essentially reduces many barriers to using AAO marketing materials. (2) Video Conferencing may be used by councils in lieu of second or additional council meetings provided the council meets face-to-face at least once during a year and further that a majority of the council members approve meeting via video conferencing. All rules that apply to council meetings will apply to video conferencing meetings. Councils that meet via video conferencing must follow the AAO video conferencing protocols. (3) That COIT develop a protocol for the use of video conferencing by councils containing standards for the technical aspect of the meeting, such as the host program, image size, lighting, etiquette and any other standards that will maximize the quality of the video conference. (4) That staff develop an improved workflow model for AAO staff and volunteer leadership that better utilizes the abilities of the SharePoint collaborative instrument as well as the new association management system and document imaging system. (4) That there be a moratorium on substantive changes to the SharePoint collaborative instrument for the 2008-09 AAO fiscal year. Recommendations for enhancements, changes and deletions be provided to the AAO during the year by the Board, staff

liaisons, councils, HOD members, committees and task forces. Any constituent and component users should report suggestions to their constituent executive directors. (5) That the AAO appropriate \$500,000 of Unrestricted Net Assets as a self-insurance fund in the event of a cancellation or curtailment of any upcoming AAO Annual Session.

Other Recommendations: The Board approved: (1) The AAO sponsor a pre-conference, full-day program for international orthodontic students/residents on Friday, February 5 at the 2010 World Federation of Orthodontists Annual meeting in Sydney, Australia. (2) An ad hoc committee consisting of the two most immediate past presidents review the Annual Session Operations Manual. (3) That a committee of the Board recommend the most effective method of protecting AAO volunteer leaders from ethics complaints for work that they do on behalf of the association (\$10,000). (4) That ITI Staff Training Programs be endorsed subject to final contract negotiations.

Future Meetings: The Board approved the following sites and dates for future AAO Annual Sessions pending contract negotiations: May 3-7, 2013 Philadelphia, PA April 29-May 3, 2016 Orlando, FL April 21-25, 2017 San Diego, CA

Surveys: The Board approved the survey by the New York State Society of Orthodontists.

Meetings: The following is a list of meetings that I have attended since the February Board Meeting: February 29, 2008 – SNODENT conference call; March 8, 2008, GLAO ad interim meeting, Ann Arbor, Michigan; April 3, 2008 – Ontario Association Orthodontists meeting; Toronto; April 4-6, 2008 – Philadelphia site visit; April 11, 2008 – Leadership Conference conference call; April 14, 2008 – AAO conference call; April 19-21, 2008 – Orlando site visit; May 6, 2008 Code committee meeting with payers – Phoenix, Arizona.

Summary of the 2008 AAO House Resolutions

DR. JOHN BUZZATTO

The 108th Annual Session of the American Association of Orthodontists was held May 16-19, 2008 in Denver, Colorado under the leadership of President Bill Gaylord. A summary of the actions from the House of Delegates which met Friday May 16th and Monday May 19th follows.

Budget: The projected budget at the conclusion of the House showed \$20,872,211 in total revenue and \$24,990,558 in total expenses for the fiscal year ending May 31, 2009. This results in a \$3,227,347 deficit. Included is an assessment of \$550 for all active and affiliate members, except active academic members, to fund a new 3 year Consumer Awareness Campaign. The House decided to fund the entire deficit from the \$3,163,950 in excess reserves.

Consumer Awareness Campaign: As noted above the campaign will run for 3 years and the assessment will be levied during FY 2008-09, 2009-10 and 2010-11 for the purpose of continuing a Public Awareness Campaign. Actual spending for FY 2008-09 will be \$830 per active and affiliate member with the difference, \$280 to be funded from reserves. COC will present a report to the 2011 House of Delegates on the effectiveness of fulfilling the original goals of the campaign.

American Board of Orthodontics (ABO): The House approved both the "Qualifications and Characteristics of a Director of the ABO" and a new "ABO Director Selection" process.

Bylaws Amendments: The House approved: (1) International members being allowed the option of their dues being paid in one lump sum for a 3 year period at the exchange rate in effect for the year in which the option

is exercised; (2) December 31st as the date of termination if dues or assessments are not paid in full; (3) Allowing international student membership to World Federation of Orthodontists qualified members enrolled as a full time student leading to an advanced degree at an accredited educational institution; (4) Allowing student membership to those orthodontists engaged full-time in a formal fellowship program.

House Policy: The House approved: (1) Revisions to the Schedule of the House of Delegates; (2) All Non-Bylaws resolutions should to be presented to the Board of Trustees 30 days prior to the AAO Annual Session, less than 30 days will require 2/3 support of the House to be considered.

Referrals to Councils: (1) "Investigation of Ethics Courses in North American Graduate Orthodontic Programs" to COE; (2) "Development of payment plan options for the payment of dues and or assessments" to COMEJC; (3) "Dues and assessment relief for active members who are employed full-time as hospital/institution staff" to COMEJC; (4) "Composition (private practice-educators) of the Council on Orthodontic" to COE; (5) "Promotion of any specific orthodontic product or technique through claims that such product or technique involves faster treatment, fewer extractions, or less painful treatment, when such claims are not supported by scientifically reliable evidence" to COMEJC.

Referrals to House Committees: Monitoring the content and accuracy of the promotion of orthodontic appliances directly to the public by manufactures with advice to the manufactures and the public as is

deemed appropriate

Strategic Plan: The House approved amendments to the Strategic Plan by including "Support the concept of Health Savings Accounts and health reimbursement accounts, such as Direct Reimbursement".

Task Force on Recruitment and Retention of Faculty: This Ad-hoc task force was directed to: (1) Augment by \$30,000 the salaries of a maximum of 10 new junior faculty hired in 2008-09 to teach orthodontics in accredited postgraduate orthodontic residency programs in the U.S. or Canada (\$300,000); (2) Continue the Full-Time Faculty Teaching Fellowship Program for 2008-09 (\$600,000); (3) Study dues and assessment relief for active and affiliate members who are employed at least 2 full days per week in a faculty position.

The GLAO was instrumental in the extremely successful 108th Annual Session in Denver. GLAO delegates/alternate delegates included: **Mary Barkley, Steve Belli** (Committee on Rules and Order), **Jeff Berger, Dale Anne Featheringham, Ron Good, Don Hayes** (Reference Committee #1), **Jerry Hickman, Richard Marcus** (Delegation Chair), **John Monticello, Bob Portenga** (Reference Committee #3), **Gene Roberts** and **Michael Sherman**. **Tom Ahman** presided as the Speaker of the House and as usual did an excellent job.

Jim McNamara received the 2008 Albert H. Ketcham Memorial Award. This prestigious award is presented to an individual who, in the judgment of the ABO, has made a notable contribution to the science and art of orthodontics. **Kate Vig** was announced as the 2009 recipient of the Ketcham Award.

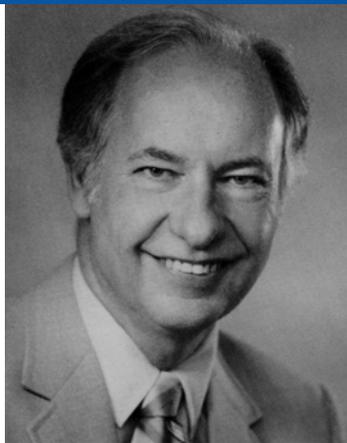
In Memoriam

Dr. Robert R. McGonagle

Dr. Robert R. McGonagle, Past President of the Great Lakes Association of Orthodontists and Past President of the American Association of Orthodontists (1980-81), passed away March 11, 2008. A memorial service was held in Gates Mills, Ohio on April 5, 2008, with a eulogy given by friend and colleague, Dr. Terry Wenger. Bob is survived by his wife Miriam, daughter Melissa Hammond, seven grand children and 17 great-grandchildren.

Born in Salineville, Ohio, Bob matriculated to Ohio State University in the fall of 1939 and in two years found himself a member of the Army Special Training Program. This program established by Congress during World War II converted the then four year dental school program to a three year program to provide dentists for the Army. The dental students, as well as medical students, were given the rank of private first class, issued uniforms, lived in a converted female dorm, and marched to and from classes in order to study. This program was adopted by other educational disciplines in various colleges through out the country.

Following active duty in Staten Island, New York he entered the



University of Illinois graduate department of Orthodontics headed by Dr. Alan G. Brodie. While there he met and married nurse Miriam Good of Chicago. He was a contemporary of the late Drs. Robert Murray Ricketts, Robert Kinkaid, and Eb King according to Dr. Ben Williams. He started his practice in Euclid and participated in the Cleveland Society of Orthodontists, the Angle Society and became GLAO president. He later served on the Board of Trustees of the American Association of Orthodontists culminating in President in 1981.

Bob was a forward thinker and urged the AAO House of Delegates to pass the first assessment to promote the specialty of orthodontics to the public. It was not an easy sell to the BOT, but it proved to enhance the image of our specialty. Those who worked closely

with Bob in those years included: John E. Aldrich, Walter Buchsieb, Dave Hamilton, John Lindquist, Terry Pracht, Morris Stoner, Dale Wade, Don Woodside, B. Holly Broadbent Jr., and David Haas.

The humor of Bob McGonagle was legendary. While in College he lived and worked in the fire house of Upper Arlington, Ohio, a suburb of Columbus. A story he loved to tell was that he jumped onto the fire truck and asked, "Where are we going?" and the driver said, "2021 Arlington Avenue." Bob said, "That's the Fire House!" Someone had seen a fire starting in the back and called the dispatcher. When addressing the members of the Cleveland Society of Orthodontists to give a report, the members were always ready for a story and with a twinkle in his eye, he always delivered. On more than one occasion, when a delay in an AAO function occurred, he would supply the gathering with 45 minutes of impromptu entertainment.

Bob and Miriam enjoyed their 57 years of marriage together, especially their summer time on Cape Cod, Massachusetts. He will be missed.

Department of Orthodontics and Pediatric Dentistry The University of Michigan School of Dentistry

SUNIL KAPILA, BDS., MS., PhD.

ROBERT W. BROWNE, ENDOWED PROFESSOR AND CHAIR
DEPARTMENT OF ORTHODONTICS AND PEDIATRIC DENTISTRY
DIRECTOR, GRADUATE PROGRAM IN ORTHODONTICS

The Orthodontics section at the University of Michigan School of Dentistry undertakes both the teaching of dental and graduate students. More recently, a proactive role has been adopted in seeking out individuals who wish to combine PhD training and orthodontics in preparation for careers in full-time academics. The program and its faculty provide an excellent clinical and academic education in these areas of responsibility. As discussed later we have received a substantial donation from a grateful family to establish a fellowship training program in Craniofacial Anomalies. In addition, we have enhanced the outreach to our alumni with our biannual Orthowire Newsletter and occasional one-on-one meetings with our graduates. We continue to receive substantial moral and monetary support from our alumni as we build for the current and future needs of the program. Finally, besides teaching, our faculty remain actively involved in professional organizations, perform competitive research and have received several awards and recognitions. Below I provide further insights into all these areas of accomplishments.

Our Students Educational Experiences
The dental students get several courses on growth and development, etiology and management of malocclusions, laboratory exercises in wire bending, impression taking and cephalometrics, a minor tooth movement and space maintenance clinic and perform initial clinical intake exams on some of our new patients. The objectives of these experiences are

to prepare the student to recognize developing and established malocclusions, to perform appropriate diagnoses and to refer patients to a specialist where appropriate. This experience also gives those dental students who are interested in pursuing specialty training in orthodontics a solid background in the field and makes them well prepared for any residency program. In keeping with the dean's vision for the school, we hope to expand this undergraduate curriculum to offer orthodontic electives on a competitive basis for dental students in which they undertake longer-term treatment of patients in the clinic. This we expect this will make these students even more competitive and better prepared for orthodontic residency training.

Our graduate program continues to remain highly competitive and visible in the national and international orthodontic communities. Over the past few years, we have made several modifications to the didactic curriculum, and the clinics. The curriculum has undergone several changes including the introduction of formal courses in Practice Management, ABO Board Preparation, Adolescent Psychology, Biology of Tooth Movement, and Imaging. Additionally, several courses including Biomechanics, Biomaterials, Surgical Anatomy, Orthognathic Surgery, and Management of Temporomandibular Disorders have been modified.

Within the clinics, we have gone to a "paperless clinic" with the entering class of 2007. This is a culmination of

a three-year effort and marks the achievement of a major milestone for the program and the school. The enthusiasm with which this project has been embraced by our residents, faculty and staff has been key to ensuring its success. We continue to add additional features to the electronic charting, including a move towards automated calling for patient appointments, and enhancements in communication with other providers and patients. Additionally, the business practices of the graduate clinic continue to be refined in order to serve our patients better.

We enroll seven graduates into our program from a large group of highly competitive applicants from all over the country as well as a few from Canada and some international applicants. By the time they graduate, the students have taken several examinations in individual courses, passed two comprehensive exams in the first and second years, been evaluated for clinical performance on a regular basis, undergone two formal evaluations of cases, sit their ABO Phase II exams and defend their MS thesis. This is a tall order, but our students have risen to it. We are in the process of incorporating a structure that will help the students get adequate numbers and types of cases to sit their ABO Phase III exams shortly after graduating. In all, our students have performed well during their training and leave us as very competent clinicians.

CONTINUED ON PAGE 8...

The University of Michigan

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Faculty: Introducing Recent Additions and Faculty Awards

Despite the national shortage of faculty, we have been fortunate to recruit two outstanding full-time faculty, Dr. Nan Hatch and Dr. Scott Conley to the department over the past several years. Dr. Hatch obtained her dental degree at Harvard School of Dental Medicine and her Orthodontic education and PhD from the University of Washington, Seattle. She joined the department in late 2005. Much of her time has focused on developing an independent research portfolio on the biology of craniosynostosis. Dr. Hatch is responsible for the Research Curriculum and the Biology of Tooth Movement Courses.

Dr. Conley obtained his dental degree from the University of Pennsylvania, and did his Orthodontics training at Vanderbilt University. He served as a full-time faculty member at Vanderbilt University for six years before being recruited to the University of Michigan. He brings an exceptional background in management of orthognathic surgery cases. His research focus is in this field as well as in obstructive sleep apnea and biomechanics. Besides a heavy teaching load in graduate orthodontics, Dr. Conley serves as Clinic Director of Graduate Orthodontics.

The past few years have been highly successful for the program faculty who received significant recognitions and awards from organized dentistry and research institutions. Dr. Lysle E. Johnston Jr. was awarded the Louise Ada Jarabak Memorial Orthodontic Teachers and Research Award at the 2006 Annual AAO meeting. This prestigious award recognizes an individual who has made significant contributions to orthodontic education and research. Dr. Kapila was awarded

the first Outstanding Alumnus Award from the Department of Orthodontics at the University of Oklahoma during their 2007 graduation activities. Dr. Kapila is also currently serving as the President of Craniofacial Biology Group of the International Association for Dental Research. Dr. Scott Conley was awarded the 2007 Edward H. Angle Research prize for the most outstanding paper published in the Angle Orthodontist in 2006. Dr. James McNamara was awarded the 2007 World Prize from the Italian Society of Orthodontists and the 2008 Ketcham Award from the American Board of Orthodontics. Finally, as described later several faculty also received various research awards. (photo composite here).

Our Research Enterprise

The quality and quantity of research performed by our faculty and residents remains one of the many strengths of the program. This is demonstrated by our record of research publications, research awards and grant funding. Our faculty perform research in several areas of importance to the profession that include treatment outcomes using traditional and 3D imaging methodologies, psychosocial aspects of orthodontics and applied and basic research in craniofacial development, craniosynostosis, TMJ disorders and bone biology. Several of these projects are funded by the National Institutes of Health (NIH) and the AAOF. Thus, Dr. Kapila's studies are supported by two NIH grants with a total budget exceeding 2 million dollars over five-years to study the biologic basis by which female hormones cause TMJ degeneration and the basis for bone degeneration in periodontal disease. Dr. Nan Hatch's research is funded by the AAOF's Robert E. Gaylord Teaching Fellowship Award from the AAOF, which

she received in 2006 and the AAOF's Postdoctoral Fellowship Grant awarded in 2007 for two years.

Further evidence for the quality of research being performed in the program is provided by the research awards won by our faculty and students. In 2006, Dr. Nan Hatch was awarded the most prestigious dental research award, the Hatton Award from the American and International Associations for Dental Research. For this competition, Dr. Hatch presented her work on the contribution of specific factors to the premature fusion of cranial sutures that may cause craniosynostosis. This year, Dr. Wei Wang, a researcher in Dr. Kapila's laboratory, received the Sarnat Award from the Craniofacial Biology Group of the IADR for his work on the role of estrogen receptors in TMJ diseases. Finally, our faculty continue to publish significant research in journals that cover the entire range of clinical to basic science journals. Many of these publications are from M.S. studies performed by our graduate students.

Alumni Organization, Events and Endowment Support

After serving as the president of UM Orthodontic Alumni Association for two and a half years, Dr. Don Burkhardt (Class of 2000) has decided to hand over the baton to new leadership. Don has single-handedly done an excellent job at the helm of the organization. Under his leadership we have had successful AAO Alumni receptions and Biennial Alumni meetings as well as the continued evolution of the strong relationship between the program and the Alumni Association. A new team for the Alumni Association will work under the leadership of Dr. Greg Hummon (Class of 1992), and will include Dr.

Laura Edwards (Class of 2003), Dr. Ron Lints (Class of 1989) and Dr. Don Burkhardt.

Dr. Greg Hummon and the board members have already settled into organizing this year's University of Michigan Orthodontics Alumni Meeting. This meeting will be held on October 24, 2008. Our featured speaker for the morning and afternoon CE course is Dr. David Sarver. We will have an alumni dinner that evening and a tailgate party with the residents on October 25. It is likely that by the time you receive this magazine, you will have received the mailing for this meeting and dinner.

As most of our alumni probably know, we have introduced a biannual alumni newsletter to keep our graduates well informed about the program. If you do not receive these newsletters, then it is likely that we do not have your correct mailing address. I request those of you in this situation to please e-mail Ms. Miriam Iglesias at alcira@umich.edu to update your mailing address. (picture of alum at an AAO reception)

I am proud to report that with the support of our alumni and friends, we have been able to bring the James Harris Endowed Collegiate Professorship to completion. Additionally, the Lysle E. Johnston Jr. Endowed Collegiate Professorship, which was launched in 2006, continues to receive strong support from many of Lysle's former students, colleagues, and friends. We are continuing to raise funds in order to bring this endowment to maturity. These endowments will help us maintain our competitiveness in recruiting and retaining top-notch faculty in this era of faculty shortages. I thank the many loyal alumni who continue to support us in these times of dwindling state support.

This year has also seen the launching of a novel endowment by a grateful family of a patient of Dr. Katherine Kelly. A gift from the Michael and

Suzanne Coghlan Family Foundation will establish a new craniofacial anomalies program within our graduate orthodontics program. The \$500,000 donation will be matched with \$250,000 from U-M President Mary Sue Coleman's Donor Challenge program, which leverages gifts of up to \$1 million with a contribution of 50 cents for every dollar gifted. This endowment will provide financial support to orthodontic residents who want to extend their training by one year to specialize in the treatment of patients with craniofacial anomalies. It is expected that this will improve both the quality and access to care for this underserved population of patients. (picture of CFA clinic).

GORP and Other Key Activities

One of the key reasons for the high visibility of the University of Michigan Orthodontics program is its active contribution to the profession and individual orthodontists through the many activities we organize. One of such event is the Graduate Orthodontics Residents Program (GORP), which originated at University of Michigan in 1989. It has grown in popularity

and participation since its inception. This meeting of residents from most US and Canadian programs is held every even-numbered year in Ann Arbor and involves close to 500 participants including graduate students, vendors and speakers. Once again, this year we will be hosting nearly 400 individuals not only from the US and Canada but some from as far as Europe. An exceptional array of speakers has been selected by our students to present at this meeting

Our flagship nationally and internationally renowned symposium, the Moyers Symposium continues to maintain great momentum covering current topics with talks given by top experts in specific fields. This and our other CE courses are well attended by alumni and non-alumni who find the offerings very beneficial.

In summary, our orthodontics program has a rich history and great tradition, and together our faculty, residents and staff continue to build on this strong foundation.

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Dr. Scott Conley (seated) demonstrates the use of electronic charting and digital radiographs to orthodontic graduate students Dr. Annelise Preslan and Dr. Greg Stock.

The University of Michigan

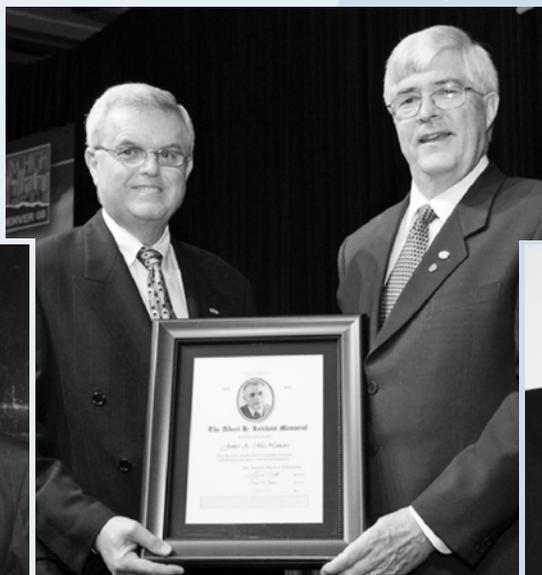
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Graduate students, Drs. Brett Brown, Brett Johnson and Jason Charnley socialize with alumni Heather Zablocki (2005) and Jason Hall (2005) at the 2008 AAO Alumni Reception.



Dr. Katherine Kelly, Adjunct Clinical Assistant Professor who directs the craniofacial anomalies curriculum, designs an appliance for a patient with graduate student Dr. Brett Brown during one of the Craniofacial Anomalies clinics.



Faculty receiving awards. (From left to right); Dr. Kapila accepts the Outstanding Alumnus Award from Dr. Frans Currier (right); Chair of the Department of Orthodontics at the University of Oklahoma; Dr. James McNamara receiving the Ketcham Award from Dr. Allen Moffitt, the immediate past President of the ABO; Dr. Nan Hatch receives the AADR and IADR award from Dr. Steven Bayne (right), president of the IADR and Mr. Marco Botarelli

Council on Communications

DR. ROBERT F. GOOD, II

AAO Consumer Awareness Campaign Renewed Through 2010 – 2011

The Consumer Awareness Campaign, a national campaign that is overseen by the COC, will continue through 2010 – 2011 with U.S. active and affiliate members being assessed \$550 per year. The campaign educates the public about orthodontists' unique qualifications through print, TV and Internet messages, and encourages them to visit the AAO's public Web site, www.braces.org.

New and Revised Consumer Education Brochures

The Council created and/or revised the following brochures that are now for sale at the Online Store on www.AAOMembers.org:

Temporary Anchorage Devices (*new*)
All About Orthodontics (*revised*)
Adult Orthodontics (*revised*)
Keeping Your Teeth Clean (*revised, formerly The Importance of Clean Teeth*)
Show Your Smile (*revised, formerly Looking Good, Feeling Good*)
Your Child's First Orthodontic Check-Up (*revised*)

Translations of www.braces.org, Consumer Education Brochures

During the 2008-2009 fiscal year, the Council will work in union with the Communications Task Force to

translate www.braces.org into Spanish and French. Additionally, the Council will have the following brochures translated into Spanish and uploaded to www.AAOMembers.org: Temporary Anchorage Devices, All About Orthodontics, Adult Orthodontics, Keeping Your Teeth Clean, Show Your Smile, and Your Child's First Orthodontic Check-up. The brochures will be available to members for free download.

General Dentist Survey

The Council forwarded a survey via Zoomerang to active, affiliate and associate AAO members in the U.S. and Canada to quantify members' attitudes about dentists, determine whether the AAO should create informational and educational resources for dentists, determine whether such resources should be distributed to dentists by the AAO or by AAO members, and determine whether AAO members have used existing AAO materials to communicate with and educate dentists.

Results of the survey appeared in the July 2008 edition of The Bulletin.

National Orthodontic Health Month 2008

The public relations firm Weber Shandwick will provide strategic

direction and media relations support for National Orthodontic Health Month (NOHM). In 2008, AAO members in key markets will participate in TV interviews and will promote key NOHM messages.

National Facial Protection Month 2008

A recap of results from the 2008 National Facial Protection Month campaign follows:

Radio News Release: estimated audience of 8,744,976

Radio Media Tour: estimated audience of 8,127,734

Radio News Release Spokesperson: Dr. William C. Gaylord

Radio Media Tour Spokespersons: Drs. Donald Joondeph, Robert Bray, Michael Rogers, Gayle Glenn, Lee Graber, and Raymond George, Sr.

Communications Action Plan

The deadline for the completion of the Communications Action Plan components has been set for May 31, 2009. The Communications Task Force is comprised of Dr. Myron Guymon (COC), Dr. Richard Savage (COIT), Dr. David Turpin (BOT), and Dr. Bob Bray (BOT).

Council on Orthodontic Practice

DR. MARY K. BARKLEY

The Council on Orthodontic Practice (COOP) is sponsoring the first regional Orthodontist as CEO conference in New York City, November 14-15, 2008. The 2002 and 2006 midwinter Orthodontist as CEO conferences were very well received. Speakers John McGill, Paul Zuelke and Randall Berning will detail strategies to optimize the orthodontic practice's potential. Space is limited — visit the AAO member site to register.

At the 2008 AAO Annual Session in Denver, COOP sponsored the Practice Transition Seminar, the Staff Training and Retention seminar, and the Staff Presentation Competition. The winners of the Staff Presentation Competition were Sandra Issiac of Kennesaw, GA, "Converting New Patients into Production – A Team Effort"; Edwina Wood of Amarillo, TX, "Is Your Overhead Under Control?"; and Kristin Schroeder of Omaha, NB,

"Embracing Special Needs: Providing Orthodontic Care for the Disabled."

The Council would like to remind all members that many useful forms and illustrations are available free of charge on the AAO member web site. In the left margin of the home page, click on "Practice Resources". Be sure to check out "Patient Education" and "Office Management."



Council on Government Affairs

DR. M. DONALD HAYES

The AAO Council on Governor Affairs and AAOPAC met in Washington D.C. June 23-June 25, 2008. Over the course of the meeting the councils met with six congressmen discussing the Washington D.C. legislative environment and issues of importance to the American Association of Orthodontists. Our lobbyist in Washington Kevin O'Neil with the firm Patton Boggs, shared with us some predictions regarding the electoral process later on this year. He indicated the majority of new Democrats elected to Congress are called "Blue Dog Democrats" as much as they are much more conservative than most Democrats are usually considered to be. He further indicated that it is likely the Democrats are to increase their lead in both the House and the Senate again with "Blue Dog Democrats". In the presidential election the Americans have real choice between senators John McCain and Barack Obama. The political stakes are high and the outcome of the congressional and presidential elections will likely have a very significant effect on the debate next year on healthcare.

In an election year the legislative action on major policy goals is typically modest; this year is proving to be no exception with a combination of this fall's Congressional elections and a major Presidential election. While there are a few must pass items that are expected to move before the end of the year, including an emergency war supplemental spending bill, Medicare physician fee fix, etc. The focus will remain on the election and subsequent agenda setting for the new year. The outcome of the election will undoubtedly impact the healthcare policy agenda next year, but there are a number of issues brewing that will emerge next year in policy discussions and potential congressional action. One such issue is healthcare reform.

With increasing number of uninsured Americans coupled with rising high cost of healthcare services, there is a growing consensus that the healthcare systems in the United States must be fixed. Healthcare spending currently comprises more than 15% the U.S. economy, will rise to 22% of the gross domestic product by the year 2020 and will make up 50% of the federal spending by 2050. Republicans and Democrats agree that something must be done to address spending, access, quality and cost, but thus far have been unable to agree on how to reach the goal. Growing pressures on the economy however have spurred enhanced activity on both sides of the isle creating different approaches to healthcare. Presidential candidates, members of Congress, non-profits, and private groups all have a plan, which has kept the debate alive and driven some bipartisan discussions. The Democratic approach to health reform is largely driven by the belief that all Americans must be covered, while Republicans believe that to accomplish that you must look to the free market and offer the choice of private health insurance plans. There is a growing consensus, however, that a combination of these ideas is likely the best solution: all Americans must have health insurance through a public-private partnership with private plans competing with government plans. A major overhaul of the healthcare system will likely be expensive and complicated, so it remains to be seen whether or not the political will exists to support such an effort. Studies have proven that most Americans prefer incremental change as apposed, to revolutionary change.

In conclusion the upcoming Presidential and Congressional elections will undoubtedly drive the healthcare agenda for 111th Congress, but there is growing pressure to address specific

reform efforts rather than simple patches and fixes that punt these problems into the future. The souring economy coupled with rising healthcare costs and increasing numbers of uninsured Americans has the potential to create the political will necessary to address whole scale health reform. In the meantime, it's expected this 111th Congress will address incremental health reform efforts.

The Presidential Candidates' health care reform proposals offer different philosophical approaches to healthcare. Senator Obama, the Democratic Presidential nominee, proposes to cover the uninsured, but without a mandate. Senator Obama's plan would create a new public health plan with guaranteed eligibility, similar in design to Federal Employees Health Insurance Benefit Program (FEHBP). Employers would be required to offer employees health benefits or contribute to the cost of the new public program. This proposal would also create the National Health Insurance Exchange through which small businesses and individuals without access to other public programs or employer-based coverage could enroll in the new public plan or in the new plan or in approved private plans. Senator Obama would also expand Medicaid and SCHIP and require all children to have health insurance. He is also focusing on preventing chronic illness by promoting disease management, providing better care coordination, as well as quality and patient safety. He has promised National Health Insurance by the end of a first term as President.

In contrast Senator McCain, the Republic Presidential nominee, has proposed a health agenda that reiterates some of the Democrats' cost

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Council on Insurance

DR. JERRY R. HICKMAN

The AAO Council on Insurance has conducted two meetings this year. The first meeting in January, was attended by insurance company representatives, council members and our AAO Trustee; Dr John Buzzatto. At our second meeting in June, the Trustees were represented by Dr. Hugh Phillis.

According to the AAO bylaws, the duties of the Council on Insurance shall be to:

- Act on behalf of the association as a liaison between the association and its insurance carriers.
- Study, evaluate and make recommendations on the association endorsed insurance plans and programs.

At each meeting the Council reviews with the insurance carriers the individual AAO endorsed insurance programs. Do they meet the needs of our members? Are they financially stable? What can we do to make them better? How can we best communicate and market these products to our members?

Life, Disability & Medical

Highlighting the most recent meetings has been the review of the New York Insurance Master Policy. This policy covers the AAO Endorsed Term-Life, Long-Term Disability, Professional Overhead Expense and Major Medical coverage. The review is to ensure the policy is in compliance with the recent New York State's investigation into insurance companies. It will also help determine the appropriate reserving levels and administrative expenses charged to the plan.

At the June meeting the Council recommended that the Board of Trustees (BOT) approve a 6% increase on all Major Medical Plans, effective October 1, 2008. There has not been a rate increase in the Major Medical Plan since April 1, 2007. Historically, due to continued inflationary costs in the medical industry, there is a need to continually increase the rates in the

Major Medical Plans. The Council works very hard to minimize these increases yet maintain financial stability.

The AAO continues to promote Health Savings Accounts (HSA's) which can provide significant tax advantages to the members. Amounts contributed to an HSA belong to the insured and are completely portable. Every year the money that is not spent stays in the investment account and can gain interest tax deferred, just like an IRA. Unused amounts are available untaxed after age 65 if allocated for other health care costs or qualified medical expenses. Among its many benefits, the HSA puts the individual more in control of their health care expenses.

AAO Business Office Package and Employee Practices Liability Insurance

AAO Business Office Package (BOP) participation continued to increase this past year. St. Paul/Travelers offers very competitive rates across the country with a 10% discount for AAO members. If for some reason St. Paul/Travelers is not competitive in an area Aon/JLT will provide additional quotes and coverage with other carriers. The BOP can also include workman's compensation coverage and an umbrella endorsement. Property coverage should include wind and flood damage if appropriate. Business Interruption Insurance provides coverage for loss of income if an event would close down the practice. Not all policies cover these endorsements. I continue to recommend each member review their BOP policy to update their coverage on a yearly basis at the time of renewal.

The AAO Council on Insurance is currently looking at other carriers for Employment Practice Liability Insurance (EPLI). Presently, the AAO endorses an EPLI policy underwritten by St. Paul/Travelers. This insurance protects against suits brought on by allegations of discrimination, harassment, wrongful termination, failure to

promote and other practice related incidents. The AAO EPLI plan includes legal coverage with a variety of plan options depending on the size of the practice and has excellent risk management benefits. This type of liability exposure is not generally covered under other office policies and the exposure can be significant.

Professional Liability

The AAO endorsed Professional Liability Plan as of December 31, 2007, reached another milestone with over 4200 insured, representing well over 50% of the AAO membership. This represents a 7% growth increase and new business this past year.

AAOIC is currently marketing a unique opportunity for our members who do not have their professional liability coverage with AAOIC. As of July 1st, for a limited time only, a 25% rate discount is being offered to first time buyers with AAOIC (this does not apply to new graduates). It is time again to compare your current policy with the AAO's because of the potential savings and to evaluate the many benefits offered having a liability policy overseen by your peers.

The COI continues to stress the need to educate our members on risk management. At the AAO annual session in Denver, a mock trial was held for the benefit of the members. Issues frequently seen in the claims handled by AAOIC were presented. Over 400 members attended allowing them to receive a 10% discount on their next year premium. Given the success of this program, similar programs at future AAO sessions will certainly be planned.

For information regarding any AAO endorsed programs go to our AAO member's only website, www.aomembers.org or directly to www.aao-insurance.com. You may also contact the Endorse Insurance Office at (800)622-0344.

Council on Orthodontic Education

DR. W. EUGENE ROBERTS

AAO Deans Luncheon

Over the last three years the luncheon has experienced a progressive increase in the interest of dental school deans and other administrators. Two changes in the protocol appear to be associated with the positive response: 1. Topics are more carefully tailored to the interest and needs of dental school administrators, and 2. COE members are offering personal invitations to their deans and accompanying them at the luncheon. The topic for the 2008 luncheon meeting at the ADEA meeting in Dallas was craniofacial anomalies and special needs (CFA&SN) fellowships. The emphasis was on the advantages and disadvantages of hospital compared to dental school-based programs. In general, the hospital-based programs tend to be larger and better funded because of a broader clinical revenue base and Graduate Medical Education (GME) funds. CFA&SN fellowships are seen as an excellent means for training educators to teach these concepts in all graduate programs. COE has proposed that the AAO directly fund three of these fellowships per year.

AAO Annual Education Leadership Conference

The conferences have emerged as the leading orthodontics educators meeting in North America. Opening the conference to international educators will increase the impact throughout the world. Mentoring and authoring were selected as the themes for the 2008 T.M. Graber Education Leadership Conference in Denver. COE will strive to broaden the appeal of these conferences to meet the interest and needs of all orthodontics educators. Starting in 2009, COE has proposed that AAO Annual Session feature a series of lectures, seminars and interactive conferences directed toward education, specifically those considering entering an academic career.

Pass/Fail Scores for National Board Exams

COE and a number of other dental specialties are concerned about the recent decision to report national board scores as pass or fail. The actual score is important for the ranking of applicants by graduate admissions committees. Graduate records exam (GRE) scores are required by many programs but they do not assess the specific dental knowledge of applicants. In consultation with the other specialties, it appears there may be interest in developing a graduate admissions exam that could be used by all dental specialties.

Graduate Program Clinical Requirements

The ABO has the responsibility for setting and maintaining clinical standards in orthodontics. Directors of accredited programs are responsible for ensuring that the minimal proficiencies prescribed by the ABO for early certification are achieved by each graduate. COE feels that all programs should achieve the same minimal clinical competencies. It is proposed that the graduation requirement for each orthodontics student should be the current standards specified by the ABO for early board certification.

Student Loan Dilemma

At many institutions the annual increase in tuition for dental education has greatly exceeded the rate of inflation for many years. Students exhaust the low cost, federally insured loans during dental school and must depend on private loans (currently about 8.5%) for graduate training. Because of the current credit crunch and the restrictions on profits for lending institutions, many lenders have left the market and the remaining lenders are having difficulty raising adequate funds which can be lent to

students at favorable rates. This problem is expected to drive up the debt of graduate students dramatically in coming years. COE will investigate ways of decreasing costs for students. One means is to emphasize tuition-free hospital-based programs with an expanded clinical revenue base and graduate medical education (GME) funds. The other avenue is to investigate a sponsored bank loan program supported by the AAO, AAOF and/or alumni associations. Loma Linda University has a very successful, low cost student loan program that may be an appropriate model to investigate.

Student Financial Problems

Many orthodontics students are borrowing hundreds of thousands of dollars for educational, living and lifestyle expenses while they are in school. There is concern among the educators that this debt problem is accelerating out of control. Many students appear to be unaware of the consequences of assuming such heavy debt. Future financial problems may unfavorably impact their professional practice choices and their ability to remain members of professional organizations like the ADA and AAO. The AAO should develop a program for financial counseling that helps students control their debt and effectively manage its repayment.

Match Program

There are currently 74 graduate orthodontics programs in the United States and 63 of the programs participate in the Match. Following an interview, if required, the applicant ranks all programs to which they applied in the order of their preference. Likewise, the program ranks the applicants in preferential order. All of the rankings are submitted to a computer service in Canada which analyzes the data. The rank order lists

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Council on Orthodontic Health Care

DR. ROBERT BROWN

Key Initiatives:

- The AAO's endorsement of the Virginia Brown Community Orthodontic Partnership Smiles Change Lives (SCL) Program continues. As the result of COHC's review of program financial statements, the program has made several key suggested business operational changes. Dr. Robert MacLean continues to represent the AAO on the SCL National Advisory Board.
- COHC representatives Drs. John Harrison and Paul McKenna, along with Trustees Drs. John Buzzatto and Morris Poole, continue to work as the AAO BOT appointed Code Committee responsible for representing AAO interests with Current Dental Terminology (CDT) coding. In order to provide continuity in coding expertise, Dr. Stephen Robirds, COHC Code Committee representative, will be attending the proceedings at the ADA Code Revision Committee meetings as well. Code Committee representatives attended the Code Revision Committee meeting hosted by the ADA in Chicago on February 7-10, 2008.
- In an effort to interface more with insurance payers and to stay abreast of dental industry trends and technology, COHC received BOT approval for AAO representatives to attend the American Association of Dental Consultants

(AADC) Spring Workshop to be held in Scottsdale, AZ on May 8-10, 2008 and host a pre-conference Roundtable discussion and reception with payers. Representing the AAO will be Drs. John Buzzatto, Morris Poole, John Harrison, Paul McKenna and Stephen Robirds.

- The Dental Benefits Member Advisory Hotline continues to be sponsored by COHC. Hotline callers are assisted with third party reimbursement issues, limited practice management issues, and CDT coding questions. The council has continued to work jointly with the ADA, utilizing the ADA Insurance Payer Complaint form. The Council has developed and implemented an AAO version of a complaint form that allows the AAO to log member complaints against payers. In addition to AAO use, the form will be submitted to the ADA for action as well. Both the AAO and ADA versions of the form are used for reporting payer problems to any other appropriate entities and as talking points during face-to-face discussions with payers.
- The Council identified that the majority of Hotline calls relate to coding issues. Orthodontic staff members repeatedly express the desire for code related educational opportunities. The Council, in conjunction with COOP, presented AAO first webinar entitled Navi-

gating the World of Insurance Coding on March 27 and April 1, 2008.

- The Council will continue to identify viable opportunities for AAO members to actively participate in quality access to care initiatives and will work to spotlight access to care efforts already being undertaken by AAO members to serve as examples for our AAO members. A comprehensive guide outlining access to care opportunities has been prepared, is undergoing minor revisions and will be presented to the AAO BOT for approval and website distribution.
- The council has submitted a request to the AAO Foundation Planning and Awards Review Committee (PARC) that a Call for Proposal (CFP) be issued to address suggested access to care solutions in conjunction with their Biomedical Research Award.
- COHC is working to identify ways to better quantify and measure the amounts and types of pro bono work being done by AAO members. COHC representatives will be working within the AAO to help address orthodontic lifetime maximum benefits issues, denial of payments from secondary insurers (coordination of benefits), Pay for Performance, electronic filing of patient's records and to revise the Clinical Practice Guidelines published by AAO.



Visit the Great Lakes Association of Orthodontists website at

www.GLAO.org

for the most current information on GLAO activities.

Council on Scientific Affairs

DR. MICHAEL L. RIOLO

The Council on Scientific Affairs (COSA) met on May 16, 2008. Participating were Drs. Greg Huang, Chair; Shannon Owens; Michael Riolo; Bhavna Shroff; Thomas Southard; and David Turpin, Trustee Liaison. Also present was Ms. Jackie Hittner, AAO Staff Liaison.

Update on Current Summary Statement

Is topical fluoride treatment effective for preventing demineralization/white spot lesions in orthodontic patients? COSA members reviewed the report and data Ms. Hittner will also perform a search on the topic, and then a final list of articles will be distributed to COSA members for their independent review.

Evidence Based Orthodontic Research and Bisphosphonate Website

There are 89 article citations in the EBOR website and 71 article citations

in the Bisphosphonate website.

Evidence Based Orthodontic Information in Lay Terminology

The following recommendation was discussed:

- That the AAO charge the Council on Scientific Affairs, in consultation with the
- Council on Information Technology, to research, design and produce content for www.braces.org (AAO public website) that allows visitors to read reviews concerning areas if evidence-based orthodontic treatment and that the content be presented in lay terms and include a link to the supporting articles with search and navigation functions being employed to make this information easy to find and access, and that this feature be active before the 2009 AAO Annual Session.

COSA members agreed that orthodon-

tic information written for the lay person should appear on the AAO public website.

Some ideas for developing plain-language orthodontic information include:

- Poll COSA members to develop a list of 5 to 10 topics that COSA could generate plain-language evidence-based content to be housed at braces.org.
- Write a parallel plain-language statement for braces.org each time COSA writes a summary statement for the AJODO.
- Review all AAO patient brochures to determine if any of the information in them is evidence-based and suitable for the AAO public website.

Next Meeting

COSA will meet on Friday, January 9, 2009 via video conferencing and teleconferencing.

Council on Membership, Ethics and Judicial Concerns

DR. RICHARD MARCUS

COMEJC met in January 12, 2008 at the AAO office in St. Louis.

At COMEJC's request, AAO General Counsel **Jim Bowlin** prepared an article for the *SOTW* and *The Bulletin* concerning the effect on ethics when members utilize vendors' advertising claims. These articles can be found at aaomembers.org.

COMEJC discussed and will pursue disseminating ethical content to residents and members through *SOTW*, *The Bulletin*, AAOIC risk management presentations, and biennial orthodontic program presentations. The Council is contacting specific AAO members qualified to write or respond to ethical

issues to assist in the initiative.

Several bylaw changes for dues were recommended and approved at the May HOD. In addition, some membership related issues have been referred to COMEJC for additional investigation with the report back date for the May 2009 HOD.

Dues collected for constituent and component organizations will be remitted to the appropriate constituent/component organization monthly for July through December, and then periodically through May each year. Dues for constituent and component organizations will be billed at the same time as AAO dues. Constituent and component

organizations shall notify the central office of any changes in dues no later than April 1 each year.

The COMEJC International Member Sub-committee was reactivated to investigate ways to better serve the AAO international community.

The next COMEJC Annual Meeting will be on January 17, 2009 at the AAO headquarters in St. Louis.

I have just recently assumed the role of GLAO representative to COMEJC from Jeff Gilmore. The GLAO and AAO are fortunate to have had Jeff serve COMEJC with such diligence and dedication over these past years.

Council on Government Affairs

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containment strategies, but with a heavier focus on tax incentives. His plan would remove the favorable tax treatment of employer-sponsored insurance and provide a tax credit to all individuals and families to increase incentives for insurance coverage. Senator McCain would also promote insurance competition, and contain costs through payment changes to providers, tort reform and other measures. He also proposes to increase access to the uninsured, focus on chronic disease prevention, and increase transparency on prices, outcomes, quality and costs.

For the last several years the AAO has grown accustomed to working in a legislative environment that is closely aligned with the association's general political inclinations. The AAO's conservative legislative agenda and political philosophy was a popular theme in both the Administration as well as Congress. With the recent Democratic takeover of Congress, the likelihood of even wider Democratic margins in the next congress, and a potential Democratic President in Barack Obama in 2009, that dynamic is undoubtedly changing. The AAO is preparing to work successfully in the new political environment and is in the process setting a clear agenda for the new year for healthcare advocacy. We are endeavoring to tailor our message to Congress to suit the new Democratic audience, and demonstrate that we as an association can deal effectively with a Democratic majority.

The American Association of Orthodontist is very concerned about the impact of government on your practice. Whether that comes in the form of workers compensation taxes and rules, regulations on how you use gloves and other personal protective equipment, employment taxes and

regulations, how frequently you retrain your staff on OSHA and other regulations, business taxes regulations regarding how you sterilize and package your instruments, regulations on what kind of chairs your staff sit in to work, how your employees are trained to lift, other ergonomic regulations, income taxes, whether you or the government decide how your employees are to be trained, taxes on your investments, taxes on the sale of your practice and myriad of other taxes, fees, regulations, and mandates from our government. Like it or not, government involvement in our practices is an issue we deal with every day whether we want to think about it or not.

The Council on Government Affairs with the assistance of our Washington D.C. lobbyist Patton Boggs helps us monitor the political will of the House and Senate. The AAOPAC assists in advocating our issues with policy makers in Congress. In Washington the impact we have on members of Congress and the Senate is directly related to the size of the AAOPAC contributions.

If we are to be effective, we must raise more money so that larger and more eye-opening significant contributions

can be made. Small contributions get lost in the shuffle, larger ones stand out. The only way the AAOPAC is able to do that is with voluntary member contributions.

It is important for every orthodontist to be involved in our political process, that is to say to be aware of the healthcare debate in Congress, and make contributions that the AAO can best look out for our long term best interest as healthcare professionals in the insuing healthcare debate. It would be naïve to believe that in the insuing debate on healthcare reform, that our profession will not be involved in one way or another. For that reason every Orthodontist should contribute to the AAOPAC. To learn more on how you can help, visit the Legal & Advocacy section of the AAO member website.

Get involved, contribute to the PAC, become a key contact and make your voice heard in helping formulate policy articulated on your behalf to Congress. GOCA and the AAOPAC will next meet in January 26-28, 2009 in conjunction with an AAO Professional Advocacy Conference in Washington D.C.

Get involved, volunteer to attend!





SCOTT A. JAMIESON, D.D.S., M.S.

New Director

Dr. Eladio DeLeon, Jr. of Augusta, GA was installed as the new director replacing Dr. Allen Moffitt from the Southern Association of Orthodontists. Dr. DeLeon has been a Diplomate of the ABO since 1994 and is the Goldstein Chair of Orthodontics, Director of the Graduate Orthodontic Program and Assistant Professor at the Medical College of Georgia. Dr. DeLeon is serving on the ABO's Written Examination Committee, Technology Committee and the Legal Committee and Review Panel as well as an Orthodontic Consultant to the ADA Council on Dental Education and Licensure and Commission on Dental Accreditation. Dr. DeLeon is also serving along with Dr. Scott A. Jamieson as Liaison to the College of Diplomates of the American Board of Orthodontics. Dr. DeLeon will become the ABO President in May 2015.

Ketcham Memorial Award

The Board will honor Dr. Katherine W. Vig in Boston as recipient of the 2009 Albert H. Ketcham Memorial Award. This prestigious award is presented annually to an individual who, in the judgment of the ABO, has made a notable contribution to the science and art of orthodontics.

Dale B. Wade Award of Excellence

The Dale B. Wade Award honors an exemplary senior clinician who

demonstrates exceptional dedication to orthodontics through clinical excellence and/or devoted teaching in the image of Dr. Wade. The 2009 Dale B. Wade Award of Excellence in Orthodontics will be given to Drs. Richard G. Alexander, Richard P. McLaughlin and R. William McNeill.

The Earle and Wilma S. Shepard Distinguished Service Award

This award recognizes an individual for outstanding dedication and advancement of the ideals and mission of the ABO. The 2009 Shepard Award will be presented to Drs. John W.M. Carter, John S. Kanyusik and Richard E. Ridgley.

Special Recognition Award

This award is given to individuals who have significantly contributed to orthodontic education and furthered the ideals of the ABO. The 2009 Special Recognition Award will be granted to Dr. Andrew J. Haas.

2008 ABO Written Examination

The 2008 Written Examination was given at PearsonVue Testing Centers during the week of April 21 – 25, 2008. The Written Examination was taken by 362 candidates and 342 passed yielding a 94 percent pass rate. The reliability of the 2008 Written Examination was 0.85.

Gateway Offer

The American Board of Orthodontics has received over 3100 new Diplomates via the Gateway Offer. As a result, we are proud to state that 52% of all AAO orthodontists are Diplomates of the ABO. In its 79 years of existence, the ABO has not exceeded 28% of AAO orthodontists and has averaged approximately 24%. All Gateway Diplomates must present six cases within five years to maintain Diplomate status.

First Recertification Examination

Although Gateway certified orthodontists have five years to complete the First Recertification Examination, the ABO encourages these Diplomates to

take the First Recertification Examination as soon as possible. It is important to note that prompt completion of this examination will reduce the term of the Diplomate's certification. There were 26 orthodontists who passed the First Recertification Examination in February.

Beginning Certification

If an educationally qualified orthodontist passes the Written Examination but does not take the Initial Recertification Examination (ICE), he/she may take the clinical examination at any time. The exam is referred to as the Beginning Certification Examination and has the same criteria as the First recertification Examination.

Initial Recertification Examination (ICE)

The Board is currently surveying the Orthodontic Chairpersons and/or Program Directors with questions regarding the expected success rate of their residents in achieving certification through ICE. This survey results will be discussed at the upcoming Educators Symposium.

Educators Symposium

Another Educators Symposium will be held on November 2, 2008 at the St. Louis Airport Marriott Hotel. Each orthodontic program will be asked to send two representatives.

Clinical Examination

Electronic submission of case report forms will continue for the 2009 Clinical Examination. Specifically, the Synopsis of Case Reports and the Three Measurement instruments (DI, CE, CMF) will be submitted electronically. In addition, these paper forms will not be included in the case report notebook assembly as of the 2009 examination. Optional worksheets for download are provided on our website for preparation of the electronic submission of these case reports. The electronic submission process will be available after October 1, 2008. Exam registrants will receive instructions prior to that time.

Beginning with the 2009 examination, additional radiographic documentation is required for adults 18 years of age or older as well as for all periodontally-involved adolescents if treatment was initiated on or after March 1, 2007.

Occlusal photographic views are recommended for the 2009 examination. Beginning with the 2010 examination, maxillary and mandibular occlusal views are mandatory in each photographic series if treatment is initiated on or after March 1, 2008.

2008 – 2009 Board of Directors

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President & PCSO Director

Dr. Peter M. Greco
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GLAO Director

Dr. Marvin C. "Buddy" Kastrop
RMSO Director

Dr. Paul T. Castelein
MSO Director

Dr. Eladio DeLeon, Jr.
SAO Director

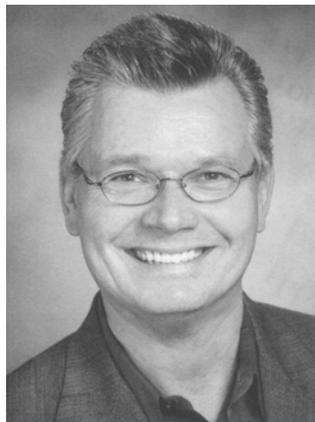
Dr. Allen H. Moffitt
Immediate Past President

Diplomates as of July 8, 2008

Active Diplomates:	5192
Retired Diplomates:	829
TOTAL Diplomates:	6021

The American Board of Orthodontics

401 N. Lindbergh Blvd., Suite 308
St. Louis, MO 63141
Phone: 314 / 432-6130
Fax: 314 / 432-8170
info@americanboardortho.com
www.americanboardortho.com



STEPHEN E. HERSHEY, D.D.S., M.S.

2008 Awards Program

At our March meeting the Directors approved 18 Orthodontic Faculty Development Fellowship awards, 3 Biomedical Research Awards and 1 Center/Planning Grant; collections.

Five of the funded proposals were from GLAO.

Faculty Development Fellowships:
Sunjay Suri; University of Toronto
Maria Tassopoulou-Fishell; University of Pittsburgh

Post Doctoral Fellowship:
Zongyang Sun; Ohio State University

Biomedical Research Awards:
Sarandeep S. Huja; Ohio State University
Do-Gyoon Kim; Ohio State University

A total of \$ 585,000 of funding was approved.

2009 Awards Program

At the March meeting of the AAO Foundation Board of Directors, the Directors approved the following as the 2009-2010 Awards Program:

Aggregate of \$450,000

Post-Doctoral Fellowship Awards, Orthodontic Faculty Development Fellowship Awards, and Biomedical Research Awards — according to the number and quality of proposals.

Center Award/Planning Grant: Collections – \$80,000, assuming the previously supported proposal applies for a second round of funding and demonstrates sufficient progress to warrant additional support.

Call for Proposal: Access to Care – dollar amount to be determined, e.g., funding may be available through AAO.

Awards Materials for 2009 are expected to be available on the Foundation's web site no later than the first of July, and the proposal deadline is Monday, December 15, 2008 at 5:30 p.m. CST. Any proposals received after that time, or any incomplete proposals, will be returned without comment.

Awards Program Summary

Since 1994, the AAO Foundation Awards Program has contributed to orthodontic education and research as follows:

\$6.9 million in funding, primarily in support of Junior Faculty, including:

123 Fellowship Awards

144 Research Awards

Over 1,000 Gifts in Support of orthodontic residencies.

At the 67 graduate orthodontic residency programs in the US and Canada, there are 15 Department Chairs and/or Program Directors who have been directly supported by the AAOF early in their academic careers.

80% of Junior Faculty supported by the AAOF remain in full-time academics after five years.

On the AAOF web site, there are Final Reports from more than 200 peer-reviewed, funded proposals.

Endowment Campaign

As of July 1, 2008, the AAO Foundation Endowment Campaign, A CASE

CONTINUED ON PAGE 20...

FOR THE FUTURE, has realized \$31.6 million in pledges, of which \$22.1 million has been redeemed. These pledges have come from Constituent and Component Societies, AAOF Corporate Partners, and Friends of the Specialty (including AAO staff and constituent society staff), but by far the vast majority of pledges have come from AAO members. AAO members, in fact have pledged 80 percent of all funds realized to date.

Much of the credit for the campaign recent success can be attributed to those individuals who have pledged at the Regent (25,000) level, the Fellow (\$50,000) level, the Founder (\$100,000) level or higher. Their combined pledges account for more than one-third of all pledges received.

The focus of the campaign is three-fold, i.e., Participation, Regents, and Planned Giving.

Participation – one-third of all AAO members have pledged A CASE FOR THE FUTURE, i.e., the amount of a full treatment case, usually redeemed over three to five years. This includes 945 members of the Foundation’s Vanguard Society, i.e., those individuals who pledge while orthodontic residents.

Regents – AAOF Regents are those persons who pledge a minimum of \$25,000 over as many as 10 years, i.e., the equivalent of a case every two years. While representing only 8% of all pledges, the 502 AAOF Regents

account for some 40% of all dollars pledged.

Planned Giving – AAO members are asked to consider including orthodontics in general and the AAO Foundation in particular in their estate plans. Those individuals who inform the Foundation that they have made the commitment to the Foundation are considered members of the AAOF Keystone Society. Currently 217 individuals have made this commitment.

**Grateful Patient/
Professional Courtesy**

Many AAO members who have pledged A CASE FOR THE FUTURE of orthodontics are redeeming their pledge through a Grateful Patient/ Professional Courtesy arrangement.

An example of how this works often involves a referring dentist whose children are being treated by the orthodontist and where neither party is comfortable with a completely gratis, nor a typical fee, arrangement.

Treatment is provided in the usual manner, but the check is made payable not to the orthodontist but to the AAO Foundation. The orthodontist and the grateful patient should discuss the tax aspects of this form of payment with their financial advisors.

For More information go to the AAOF website (www.aaofoundation.net)

Research and Marketing Plan

In early 2007, the AAOF Directors and an equal number of non-Directors met for the purposes of revising the fundraising portion of the Foundation’s overall Strategic Long-Range Plan (SLRP). One of the outcomes of this process was the call for the creation of a new Research and Marketing Plan that would ultimately lead to re-focussing/re-branding the current campaign, A Case for the Future. The Board is scheduled to receive a preliminary report on this at our meeting in March 2008, with full implementation expected by this fall’s PCSO meeting.

Donor Advised Fund

The Board has taken steps to create a donor-advised fund to benefit primarily the specialty of orthodontics and the profession of dentistry. Similar in design and function to a community foundation, i.e., this planned giving alternative allows a donor to take an immediate charitable deduction for the amount of the funds provided for the establishment of such a fund and yet over time has some considerable say in which direction the actual distributions are made. There will be a brief program on this new offering at the Foundation Breakfast on the Monday of the Denver Annual Session, and more information will be available at the PCSO meeting in Palm Springs.

If you should have any questions, please call Robert Hazel, AAOF EVP, at (800) 424-2841, ext. 546, or me, at your convenience.

Thanks

to the GLAO Delegates and Alternate Delegates that represented the GLAO at the 2008 AAO House of Delegates...

- | | |
|-----------------------------|------------------------|
| Dr. Mary K. Barkley | Dr. Jerry Hickman |
| Dr. Stephen J. Belli | Dr. Richard M. Marcus |
| Dr. Jeff Berger | Dr. John F. Monticello |
| Dr. Dale Anne Featheringham | Dr. Robert S. Portenga |
| Dr. Ronald S. Good | Dr. W. Eugene Roberts |
| Dr. M. Donald Hayes | Dr. Michael W. Sherman |



Fend Off Reimbursement, Coding Woes

AAO can help you resolve issues with third-party payers

If you are encountering problems with third-party payers or have coding and practice-management questions, call on the AAO's Dental Benefits Advisory Service Hotline for assistance. The Dental Benefits Advisory Service Hotline is sponsored by the Council on Orthodontic Health Care (COHC) and is administered by staff members that have more than 20 years of experience in dealing with insurance payers, clinical aspects of orthodontic practice and office management. Hotline staff will discuss the issue with your office to determine the nature and extent of the problem. If the matter is easily resolved, hotline staff will offer strategies to handle the situation. If your issue is more complex or has become a chronic problem, you may be requested to complete an AAO Member Third-Party Payer Complaint Form. If the issue is critical, hotline staff will

contact the payer for immediate relief.

AAO's Council on Orthodontic Health Care has identified that the majority of calls received by the Hotline are related to dental coding issues. As a service to AAO members, the council developed the AAO At-A-Glance Guide (AAG) to CDT-2007 Version Orthodontic Codes. This sheet has extracted the most routinely used codes in an orthodontic practice from the complete CDT Manual, and the AAG is a quick reference tool for your coding staff.

Callers often need help locating codes for submitting dental procedures to medical insurance payers. The Hotline staff has access to and can provide you with the ICD-9 and CPT codes that are required for medical claims filing.

Hotline staff must stay abreast of dental industry trends and are able to

offer information on current topics of interest, such as the recently mandated National Provider Identifier (NPI) initiative, and technological issues, such as Electronic Data Interchange (EDI) or electronic claims filing.

Contact the Hotline
For help with payer issues, contact Ann Sebaugh at 800-424-2841, ext. 582, or send an e-mail to asebaugh@aaortho.org.

Quick Click Tip

Download the AAO Third-Party Payer Complaint Form or the AAO At-A-Glance Guide. www.AAOMembers.org, > Practice Resources > Office Management > AAO Member Third-Party Complaint Form or AAO At-A-Glance Guide

Council on Orthodontic Education

...CONTINUED FROM PAGE 14

are compared and the applicant is matched to the highest ranked institution in the order of the programs rank order. This is the system that has long been used for selecting medical interns and residents.

Faculty of 11 orthodontics programs do not participate in the Match for a variety of reasons: too costly, difficult to arrange the balance of students preferred, feel that the match fails to

deliver the desired balance of students, competitive schools are not in the Match etc. Most orthodontics programs favor the Match as a relatively fair but imperfect system.

However, all programs must participate and play by the rules: there can be no preMatch acceptances or other "deals." If programs continue to leave the Match, there is concern about returning to the previous "free-for-all"

that was deemed unsatisfactory overall.

It has been proposed that only Match schools be eligible for AAO and AAOF grants or other financial assistance. After a conference call with an Ad Hoc Committee, the BOT is planning to survey all graduate programs for input before making a recommendation as to how to proceed.

COMPONENT UPDATES



Indiana Association of Orthodontists

DR. ARON DELLINGER

2009 Annual Meeting

Date: February 27, 2009

Location: Lucas Oil Stadium

City: Indianapolis, IN.

Speaker: Jason Cope,
TADs in Orthodontics

2010 Annual Meeting

Location and Date: TBD

City: Indianapolis

Speaker: Dr. Maurice Salama,
*Multidisciplinary Treatment
and the Esthetic Zone*

President

Dr. Ronal Miller

2000 E. 116th St. #201
Carmel, IN '46032-3581

President Elect

Aron Dellinger

1120 E. Dupont Rd.
Fort Wayne, IN '46825

Secretary Treasurer

Jeff Roberts

8260 Skipjack Dr.
Indianapolis, IN 46236

Past President

John Pritchett

9602 E. Washington St.
Indianapolis, IN 46229



Michigan Association of Orthodontists

DR. GREG OPPENHUIZEN

The Michigan Association of Orthodontists is well under the current leadership of President Ludia Kim who moved into office at our annual session in Lansing, Michigan in May 2008.

The annual meeting in Lansing featured Charlene White. Her practice management presentation was directed to both orthodontists and also to orthodontic staff. Over the last several years the MAO has invited orthodontic suppliers to display their products and services at the annual session. The presence of suppliers has contributed to the financial success of our meetings.

The MAO is doing well financially. Along with the financial gains from the annual session the MAO also has gained from the State of Michigan for our involvement in the State of Michigan Orthodontic Specialty licensing examination. These two items together have produced our current financial well being.

In the governance arena, the MAO and the Michigan Council of Dental Specialists have been working with the State Board of Dentistry to update the licensing rules in the state. This process has been going on for quite some time.

Over the last several years the MAO has been instrumental bringing together all elements of the dental community for legislation favorable to dentistry in Michigan. This year the Michigan Dental Association under direct, intimate supervision from the American Dental Association has moved away from this congeniality to divide the dental community. The fear of the dental association is the independent practice of dental hygiene which has not been an issue in Michigan. The ADA has proposed a new level of dental provider called the Community Dental Health Coordinator. The ADA would like to create the CHDC in Michigan. The CDHC curriculum is an unaccredited program that would graduate minimally trained individuals without board certification or a license who would practice dentistry under the sole purview of an affiliated dentist. The proposed CDHC scope of practice would even minimize the influence of the Michigan State Board of Dentistry. The purported benefit is to provide more dentistry to the underserved.

The Michigan Association of Orthodontists is opposed to any effort to diminish the caliber of dentistry or sensible oversight in Michigan and is working to defeat this legislation. It is our hope that we can work together in the future to heal the division caused by the American Dental Association.

The Michigan Association of Orthodontists remains actively involved in promoting and advancing the practice of orthodontics in Michigan.



Ohio Association of Orthodontists

DR. PHIL J. BECKWITH

The Ohio Association of Orthodontists (OAO) will hold its annual meeting in conjunction with the Ohio Dental Association Annual Session. This gives Ohio orthodontists a chance to socialize with their general practice colleagues and take advantage of all the benefits of the ODA meeting. Registration for the full-day OAO meeting will include Dr. Vince Kokich's two half-day seminars and a lunch presentation by Dr. Kokich. By registering for Course Code O70, Orthodontists will receive tickets to the two half-day seminars and the luncheon and will support the OAO.



Ontario Association of Orthodontists

DR. JEFF BERGER

President:

Dr. Jim Posluns
402 Summerhill Ave.
Toronto, ON M4W 2E4
416-925-7300
416-925-0415
james.posluns@utoronto.ca

Vice President

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Secretary-Treasurer
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Past-President:
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905/873-1538 FAX
str8smiles@sympatico.ca



Pennsylvania Association of Orthodontists

DR. J. RICHARD PFEFFER

The Pennsylvania Association of Orthodontists held their annual meeting June 12-15th at the Sands Resort in Rehobeth, Delaware. The main speaker was Dr. Jeffrey Okeson who spoke on TMD disorders. Dr. Okeson runs a pain clinic at the University of Kentucky School of Dental Medicine. Also speaking was Dr. John White from Case Western Reserve. He spoke on the same subject. The meeting was very well attended and thanks go to our past president Dr. Nate Cole for a great job.

Our new president, Dr. Matt Stacey from Pittsburgh promises a very interesting meeting next year. We will be traveling to Jupiter, Florida and staying at the Jupiter Beach Resort. This meeting will be held in April and promises to be an exceptional meeting at an exceptional venue. It should be a great late winter/early spring get-away for us winter-weary folk. Anyone interested in attending, please contact me at (814) 943-5521.

The Pennsylvania Association of Orthodontists continues to be a strong component organization. We have a good board and participation from across the state. A very encouraging sign is the active role many of our young orthodontists are playing in the organization.

GLAO Calendar of Events

2008

October 10 – 13
GLAO/MASO
Joint Annual Session
Gran Meliä Resort
Puerto Rico

2009

March 21 – 22
GLAO Ad Interim Board Meeting
Niagara-on-the-Lake
ON, CANADA

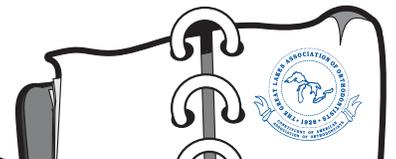
October 30 – November 1
GLAO Annual Session
Sheraton Centre
Toronto, ON, CANADA

2010

September 30 – October 3
GLAO/MASO
Joint Annual Session
The Breakers
Palm Beach, FL

2011

September 15 – 18
GLAO/MASO
Joint Annual Session
Hilton Pittsburgh
Pittsburgh, PA





Directors

INDIANA

Dr. Aron E. Dellinger
1120 E. Dupont Road
Fort Wayne, IN 46825

MICHIGAN

Dr. Gregory Oppenhuizen
205 W. 29th Street
Holland, MI 49423

ONTARIO

Dr. Jeff Berger
600 Tecumseh Road E #241
Windsor, ON N8X 4X9
CANADA

OHIO

Dr. Phillip J. Beckwith
829 Eastwind Drive
Westerville, OH 43081

WESTERN PENNSYLVANIA

Dr. J. Richard Pfeffer
508 Logan Blvd.
Altoona, PA 16602

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Columbus, Ohio 43215
www.GLAO.org

GLAO Membership

	July 2008
Active	942
Affiliate	5
Academic/ Foreign Trained	3
Honorary	2
Life	134
Retired	302
Total	1388

AAO Council Representatives

Council on Communications	Dr. Robert F. Good, II
Council on Government Affairs	Dr. M. Donald Hayes
Council on Information Technology	Dr. Joseph Janowski
Council on Insurance	Dr. Jerry Hickman
Council on Membership, Ethics, and Judicial Concerns	Dr. Richard M. Marcus
Council on Orthodontic Education	Dr. W. Eugene Roberts
Council on Orthodontic Health Care	Dr. Robert J. Brown
Council on Orthodontic Practice	Dr. Mary K. Barkley
Council on Scientific Affairs	Dr. Michael L. Riolo
Council on New and Younger Members	Dr. Scott Schulz

2008 – 2009 GLAO Ballot Results

PRESIDENT

Dr. Richard M. Marcus

PRESIDENT-ELECT

Dr. Ronald S. Good

VICE PRESIDENT

Dr. Robert F. Good, II

SECRETARY-TREASURER

Dr. Michael W. Sherman

TRUSTEE

Dr. John F. Buzzatto

DELEGATES

Dr. Jeff Berger
Dr. Robert F. Good, II
Dr. Ronald S. Good
Dr. Richard M. Marcus
Dr. John F. Monticello
Dr. W. Eugene Roberts
Dr. Michael W. Sherman

ALTERNATE DELEGATES

Dr. Stephen J. Belli
Dr. Jerry Hickman
Dr. Gregory Oppenhuizen
Dr. Christopher A. Roberts

New Active Members

*Below are the New GLAO members
since March 2008...*

John W. Ballrick
Shari Borsuk
Bridget Bushon-Miller
Hema Patel
Tracie Michelle Prevatte
Zongyang Sun
Ali Tassi
Mark Tesseyman

Newly Retired Members

William S. Manos
Ashland, OH
Michael D. Schamp
Cincinnati, OH
Joseph J. Shadeed
Bucyrus, OH

Recently Deceased Members

Faber D. Little
Dagsboro, DE
James R. Robertson
Findlay, OH
Howard F. Webb
Sarasota, FL



SCHEDULE-AT-A-GLANCE

2008 GLAO/MASO Joint Annual Session

October 10-13

Gran Meliá Puerto Rico

Friday, October 10th

11:00am – 8:00pm Registration/ Exhibitor Set up
 12:00pm – 6:00pm **GLAO/MASO Golf Outing**
Trump International Golf Club

Saturday, October 11th

7:30am – 2:00pm Registration/Exhibits Open
 8:00am – Noon **STAFF SESSIONS:**
Tina Byrne – Team Smarts...Does Your Staff Have It?
Sponsored by Ortho II Computer Systems, Inc.
 8:00am – 8:30am **Award Presentations:**
MASO Devlin Award & GLAO B. Holly Broadbent Sr. Memorial Lecture Award
 8:30am – 12:30pm **DOCTOR SESSIONS:**
Dr. Frank E. Cordray
 A three-dimensional Analysis of models articulated in the SCP CR Port II: A comparison of deprogrammed asymptomatic and symptomatic populations: A prospective study.
Dr. W. Eugene Roberts
 A 25-Year Perspective on TADs: Back to the Future?
Dr. Birte Melsen
 Mini Screws Benefits, Risks and Failures
Sponsored by American Orthodontics
Dr. Robert Vanarsdall
 The Periodontal Perspective of TADs
PANEL DISCUSSION:
 Q & A featuring Drs. Cordray, Roberts, Melsen and Vanarsdall
 12:30pm – 1:30pm Refreshments in Exhibit Hall
 12:45pm – 1:45pm ABO/College of Diplomates Luncheon
 2:00pm – 3:30pm MASO Board Meeting
 2:00pm – 5:30pm GLAO Board Meeting
 3:30pm – 5:30pm MASO Delegates Meeting
 6:30pm – 7:30pm **PRESIDENTS' WELCOME RECEPTION**
 Entertainment sponsored in part by the Puerto Rico Society of Orthodontists





SCHEDULE-AT-A-GLANCE

2008 GLAO/MASO Joint Annual Session

Continued

Sunday, October 12th

7:00am – 8:00am	MASO Business Meeting
7:00am – 8:00am	GLAO Business Meeting
7:30am – 2:00pm	Registration / Exhibits Open
8:00am – Noon	STAFF SESSIONS: Lori Garland Parker – Embracing the Challenge Debbie Best – The Numbers Game
8:30am – 12:30pm	DOCTOR SESSIONS: Dr. Michael Williams – Orthodontic Expansion in Non-Growing Patients <i>Co-sponsored by DynaFlex</i> Dr. Robert Vanarsdall – Periodontal Concerns with Maxillary Expansion Dr. Birte Melsen – Sutural Response to Maxillary Expansion in Adults <i>Sponsored by American Orthodontics</i> Dr. Michael Williams – Class III correction in Children and Adults <i>Co-sponsored by DynaFlex</i> PANEL DISCUSSION: Q & A featuring Drs. Williams, Vanarsdall, and Melsen
12:30pm – 1:30pm	Refreshments in Exhibit Hall
1:30pm	RAFFLE PRIZE DRAWING in Exhibit Hall (MUST BE PRESENT TO WIN)
12:30pm – 2:00pm	GLAO Past Presidents' Lunch (<i>Invitation Only</i>)
12:30am – 2:30pm	COE Luncheon (<i>Invitation Only</i>)
2:30pm – 3:30pm	MASO Committee Meetings
5:45pm – 6:45pm	New and Younger Member Reception
7:00pm – 10:00pm	BEACH PARTY <i>Sponsored by 3M Unitek</i>

Monday, October 12th

6:30am – 7:30am	Fun Run
7:45am – 8:45am	MASO Board Meeting
9:00am – Noon	DOCTOR/STAFF SESSIONS: Lori Garland Parker & Debbie Best – Bridging the Front & Back Divide Dr. Christian Sander – Biomechanics: the Team Perspective <i>Sponsored by Forestadent USA</i>

Thanks

**to all of those sponsors
who provide support
for the
2008 GLAO/MASO
Joint Annual Session:**

PLATINUM LEVEL
3M Unitek

SILVER LEVEL
Ormco

BRONZE LEVEL
Dentsply GAC International, Inc.
Orthotrac/Practiceworks, Inc.
Rocky Mountain Orthodontics, Inc.





Registration Now for the 2008 GLAO/MASO Joint Annual Session!

You can register online at
www.GLAO.org or at www.MASO.org

CHECKLIST

for Annual Session in Puerto Rico

Meeting Registration

Submit your on-line registration and payment by **September 10th** to receive the discounted rate. Confirmation will come to you via e-mail. Your name badge can be picked up at the registration desk in Puerto Rico, and must be worn for entrance to all events.

MEETING REGISTRATION INCLUDES:

admission to doctor and staff sessions, panel discussions; Presidents' Welcome Reception, admission to exhibit hall, and beverage breaks in the exhibit hall. GLAO/MASO Gran Meliá all-inclusive guests also receive the following at no additional cost: Admission to the Sunday evening Beach Party, all meals, and house alcoholic beverages.

Hotel

Make your hotel reservations by **September 1st** to receive the all-inclusive group rate! Visit www.GLAO.org or www.MASO.org for the Hotel Room Reservation form. Reserve room(s) with the Gran Meliá by completing the hotel form and faxing it to 787/657-1055. Obtain a confirmation number directly from the hotel before arriving. If you have questions, call 787/657-1040 or 787/657-1026 and ask for group reservations. Tell them you're with GLAO/MASO!!

Activity/Tour Registration

Activity/Tour Registration

Visit www.GLAO.org or www.MASO.org for the activity/tour reservation form. Reserve tours by **September 19th**. GLAO/MASO has worked with "Destination Puerto Rico" to offer catamaran, snorkeling, shopping, rainforest, and bioluminescent bay tours. Sign-up for tours directly with Destination Puerto Rico, and they will send confirmation directly to you. E-mail questions to tours@destinationpuertorico.com.

Travel

Make your travel arrangements! Most airlines fly into San Juan – the airport code is SJU (San Juan), Luis Martin International Airport. Gran Meliá is 22 miles southwest of the airport. The Gran Meliá airport shuttle is recommended for travel to the resort and these arrangements can be made on the hotel reservation form.

Passport

A U.S. Passport is NOT required for U.S. residents. However, a passport is required for all non U.S. residents.

Exhibitors

(as of July 25th)

3M Unitek
American Orthodontics
AOA
Benco Dental
Boyd Industries, Inc.
Dental Marketers
Dentsply GAC International
Dolphin Imaging & Management Solutions
DynaFlex
Familia Tuccini Orthodontic Lab
Forestadent USA
Great Lakes Orthodontics, Ltd
Imaging Sciences International: i-CAT
IMS Specialty Systems Inc.
Invisalign
Little Big Microimplant Corp.
MASEL
National Precision Instruments
Opal Orthodontics
Ormco
Ortho II
Ortho Technology
ORTHOBANC
Orthobyte Digital Technology
Orthopli Corporation
OrthoSynetics, Inc.
Orthotrac/PracticeWorks Inc.
Paradise Dental Supplies
Planmeca, Inc.
Reliance Orthodontic Products, Inc.
RMO, Inc.
Sesame Communication
Sirona Dental Systems
SPEED System™
Springstone Patient Financing
TeleVox
The Ortho Club/Honeysuckle Creations
topsXtreme Software



The Great Lakes Association of Orthodontists
17 South High Street, Suite 200
Columbus, OH 43215-3458

BE SURE TO MARK YOUR CALENDARS!

October 30 – November 1, 2009



GLAO Annual Session
Sheraton Centre Toronto
Toronto, ON, Canada

September 30 – October 3, 2010



GLAO/MASO Annual Session
The Breakers
Palm Beach, Florida