



STATE OF IOWA

IOWA DENTAL BOARD

TERRY E. BRANSTAD, GOVERNOR
KIM REYNOLDS, LT. GOVERNOR

PHIL MCCOLLUM
INTERIM DIRECTOR

CONTINUING EDUCATION ADVISORY COMMITTEE

*Updated 3/20/2014

AGENDA

Date/Time: March 26, 2014, 12:00 P.M.

Location*: Iowa Dental Board, 400 SW 8th St., Suite D, Des Moines, Iowa

Members: *Lori Elmitt, Board member, chair; Steven Fuller, D.D.S.; George North, D.D.S.; Marijo Beasler, R.D.H.; Eileen Cacioppo, R.D.H.; Kristee Malmberg, R.D.A.; Jane Slach, R.D.A.*

- I. CALL MEETING TO ORDER – ROLL CALL**
- II. COMMITTEE MINUTES**
 - a. January 21, 2014 – Teleconference*
- III. CONTINUING EDUCATION COURSE APPLICATIONS FOR REVIEW**
 - a. See course materials for list*
- IV. CONTINUING EDUCATION CONTINUING EDUCATION SPONSOR APPLICATIONS FOR REVIEW**
 - a. Oral Surgery Associates*
- V. OTHER BUSINESS**
 - a. Reconsideration of Courses as Requested**
 - b. Proof of Attendance*
 - c. Other items, if any*
- VI. OPPORTUNITY FOR PUBLIC COMMENT**
- VII. ADJOURN**

*Committee members may participate by telephone or in person.

If you require the assistance of auxiliary aids or services to participate in or attend the meeting because of a disability, please call the Board office at 515/281-5157.

Please Note: At the discretion of the Committee Chair, agenda items may be taken out of order to accommodate scheduling requests of Committee members, presenters or attendees or to facilitate meeting efficiency.



STATE OF IOWA

IOWA DENTAL BOARD

TERRY E. BRANSTAD, GOVERNOR
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PHIL MCCOLLUM
INTERIM DIRECTOR

CONTINUING EDUCATION ADVISORY COMMITTEE

MINUTES

January 21, 2014
Conference Room
400 S.W. 8th St., Suite D
Des Moines, Iowa

Committee Members

Lori Elmitt, Board Member
Steven Fuller, D.D.S.
George North, D.D.S.
Eileen Cacioppo, R.D.H.
Marijo Beasler, R.D.H.
Kristee Malmberg, R.D.A.
Jane Slach, R.D.A.

January 21, 2014

Present
Present
Present
Present
Absent
Absent
Present

Staff Members

Christel Braness, Angela Davidson, Phil McCollum

Other Attendees

Michael Hipp, D.D.S., Iowa Dental Association

I. CALL MEETING TO ORDER – JANUARY 21, 2014

The meeting of the Continuing Education Advisory Committee was called to order at 12:04 p.m. on Tuesday, January 21, 2014. The meeting was held by electronic means in compliance with Iowa Code section 21.8. The purpose of the meeting was to review minutes from prior meetings, review requests for continuing education courses and sponsor approval, and other committee-related matters. It was impractical to meet in person with such a short agenda. A quorum was established with five (5) members present.

Roll Call:

<u>Member</u>	<u>Beasler</u>	<u>Cacioppo</u>	<u>Elmitt</u>	<u>Fuller</u>	<u>Malmberg</u>	<u>North</u>	<u>J. Slach</u>
Present		x	x	x		x	x
Absent	x				x		

II. COMMITTEE MINUTES

- *October 25, 2013 – Teleconference*
- ❖ MOVED by CACIOPPO, SECONDED by NORTH, to APPROVE the minutes of the October 25, 2013 meeting as submitted. Motion APPROVED unanimously.

III. CONTINUING EDUCATION COURSE APPLICATIONS FOR REVIEW

- IDHA – “*Dental Sleep Medicine: An Introduction*” – requested 2 hours
- IDHA – “*What’s New in Nutrition? An Update for Dental Professionals*” – requested 1.5 hours
- ❖ MOVED by CACIOPPO, SECONDED by NORTH, to APPROVE the courses as requested. Motion APPROVED unanimously.
- Joyce Nehring – “*Dental Radiography Techniques & Review*” – requested 2 hours
- Joyce Nehring – “*OSHA & Infection Control*” – requested 2 hours
- ❖ MOVED by NORTH, SECONDED by FULLER, to APPROVE the courses as requested. Motion APPROVED unanimously.
- IDPH – “*I-SMILE Coordinator Meeting*” – requested 2.25 hours

Ms. Cacioppo stated that quarter hours for credit are not granted; and recommended that two (2) hours of credit be awarded.

Dr. North questioned the infection control aspect of the course; but was not opposed to awarding credit for the course.

Ms. Braness reported that Iowa Administrative Code 650—Chapter 25 designates credit based on actual clock hours. Ms. Braness reminded the committee that they can recommend what they feel is appropriate for credit; however, there isn’t a specific provision in the rule prohibiting the issuance of a quarter hour for credit.

- ❖ MOVED by CACIOPPO, SECONDED by NORTH, to APPROVE the course for two (2) hours of continuing education credit. Motion APPROVED unanimously.
- Oral Surgeons, P.C. Implant Institute – “*Straumann Digital Workflow & Guided Surgery*” – requested 1.5 hours

Ms. Cacioppo asked the dental members for information regarding Straumann. Dr. North and Dr. Fuller clarified that Straumann is an implant company.

- ❖ MOVED by FULLER, SECONDED by NORTH, to APPROVE the course as requested. Motion APPROVED unanimously.

- Kiess Kraft Dental Lab – “*New Treatment Options for Sinusitis Patients – Balloon Sinuplasty Technology*” – requested 2 hours
- ❖ MOVED by CACIOPPO, SECONDED by ELMITT, to APPROVE the course as requested. Dr. North opposed the motion. Motion APPROVED, 4-1.
- The Madow Brothers – “*The Hats of Dentistry*” – requested 16 hours

Ms. Cacioppo stated that the course content focused on practice management and should be denied continuing education credit.

Dr. North pointed out that their documentation indicates that four hours covered technique, and the remainder applied to practice management.

Ms. Cacioppo stated that the technical applications, based on her review, still focused on the business. For example, of the clinical techniques focused on why providing this service was beneficial to the dental practice.

- ❖ MOVED by CACIOPPO, SECONDED by SLACH, to DENY the course as requested since it was related to practice management. Motion APPROVED unanimously.
- Cancun Study Club – (Multiple Titles) – requested 30 hours
- ❖ MOVED by CACIOPPO, SECONDED by NORTH, to APPROVE the courses as requested. Motion APPROVED unanimously.
- Terri Bradley Consulting – “*Coming Soon to An Office Near You: ICD-10*” – requested 6 hours

Dr. Fuller and Dr. North reported that this course addresses practice management; and would be ineligible for credit.

- ❖ MOVED by FULLER, SECONDED by NORTH, to DENY the course as requested since it focuses on the topic of practice management. Motion APPROVED unanimously.
- Dr. Karl Swenson – “*Orthodontics 101: What to Look for and When to Refer*” – requested 1 hour
- ❖ MOVED by NORTH, SECONDED by FULLER, to APPROVE the course as requested. Motion APPROVED unanimously.
- Town Square Dental Care – “*Mental Health First Aid*” – requested 6 hours
- ❖ MOVED by NORTH, SECONDED by FULLER, to DENY the course as requested. Motion APPROVED unanimously.

- IDA – General Attendance – requested 3 hours
- IDA – Table Clinics – requested 2 hours
- IDA – Table Clinics Presenters – requested 4 hours
- IDA – “*Topics in Oral Pathology – 1st Session*” – requested 3 hours
- IDA – “*Topics in Oral Pathology – 2nd Session*” – requested 3 hours
- IDA – “*BONDing 007th Generation and Beyond*” – requested 3 hours
- IDA – “*The END – to Complications, Sensitivity, Discomfort and Open Contacts*” – requested 3 hours
- IDA – “*Win the Battle Against Biofilm: Leverage the Power of Ultrasonic*” – requested 2 hours
- IDA – “*Assessing Anesthetic Options for Non-Surgical Periodontal Therapy*” – requested 2 hours
- IDA – “*Dental Sleep Medicine*” – requested 2 hours
- IDA – “*Advancements in Digital Impressions*” – requested 2 hours
- IDA – “*Restorative Implant Techniques for the Private Practice – 1st Session*” – requested 2 hours
- IDA – “*Restorative Implant Techniques for the Private Practice – 2nd Session*” – requested 1.5 hours
- IDA – “*Restorative Implant Techniques for the Private Practice – 3rd Session*” – requested 1.5 hours
- IDA – “*Restorative Implant Techniques for the Private Practice – 4th Session*” – requested 1 hour
- IDA – “*Evidence-Based Dentistry: A Clinical Context – 1st Session*” – requested 2 hours
- IDA – “*Evidence-Based Dentistry: A Clinical Context – 2nd Session*” – requested 1.5 hours
- IDA – “*Evidence-Based Dentistry: A Clinical Context – 3rd Session*” – requested 1.5 hours
- IDA – “*Evidence-Based Dentistry: A Clinical Context – 4th Session*” – requested 1 hour

❖ MOVED by NORTH, SECONDED by FULLER, to APPROVE the courses listed above as requested. Motion APPROVED unanimously.

- IDA – “*Am I Using My Practice Management Software to Its Fullest Potential*” – requested 2 hours

❖ MOVED by NORTH, SECONDED by FULLER, to DENY continuing education credit for the course since it focuses on practice management.

Dr. Hipp commented that the Iowa Dental Association would be okay with this decision since it was providing the course based on interest expressed by its members to have information like this made available.

❖ Vote was taken. Motion APPROVED unanimously.

- IDA – “*Flying Under the Radar: Avoiding Problems with Your Patients, Your Colleagues, and the Dental Board*” – requested 2 hours

Ms. Cacioppo stated that this course should be denied credit.

Dr. North disagreed with this recommendation. Dr. North would grant credit based on the communications section of the course. Ms. Cacioppo stated that the portion related specifically to the Iowa Dental Board may be ineligible for credit.

Dr. Hipp reported that Dr. McNurlen approached him about this course after having served on peer review committees and his experience with the Board. Dr. Hipp thought he was working with the Board regarding this course.

Mr. McCollum reported that Dr. McNurlen contacted him regarding this course, and asked Mr. McCollum to go over the course content with him. Mr. McCollum stated that he was open to reviewing the information.

Ms. Cacioppo stated that it could be considered if looked at from the perspective of a jurisprudence course. Ms. Cacioppo indicated that Mr. McCollum may be the better person to present a course like this since he's made these presentations previously.

Ms. Braness reported that board rules do not require that staff be involved in the presentation of a jurisprudence course. The only requirement is that the course be prior-approved by the board, which this course is seeking to obtain.

In light of that, Ms. Cacioppo wondered if the course should be granted one hour of credit, and if they would prefer, they could submit a request for reconsideration with new information. Mr. McCollum stated that the committee could award the course one (1) hour of credit. If the sponsor wishes to request more credit hours, they may always resubmit the course for reconsideration with additional information.

- ❖ MOVED by CACIOPPO, SECONDED by ELMITT, to APPROVE the course for one (1) hour of continuing education credit. Motion APPROVED unanimously.
- IDA – “*A Panel of Lectures on Current Topics in Clinical Periodontics – 1st Session*” – requested 1.5 hours
- IDA – “*A Panel of Lectures on Current Topics in Clinical Periodontics – 2nd Session*” – requested 1.5 hours
- ❖ MOVED by CACIOPPO, SECONDED by SLACH, to APPROVE the course as requested. Motion APPROVED unanimously.
- IDA – “*Considerations for Providing Dental Treatment to the New Geriatric Patient: Medical, Preventive and Restorative Strategies*” – requested 2 hours
- ❖ MOVED by NORTH, SECONDED by FULLER, to APPROVE the course as requested. Motion APPROVED unanimously.
- IDA – “*The Affordable Care Act and the Implications for Dentistry*” – requested 2 hours

Ms. Braness provided an overview of this course, indicating that this is the same course that was submitted previously by the University of Iowa College of Dentistry. The previous submission for this course denied continuing education credit based on Iowa Administrative Code 650—25.3(7)c, which prohibits credit for courses, which focus on government regulations.

Ms. Braness reported that Board staff has discussed this particular course. Given the nature of the change related to health care law, there may be a basis on which to seek a rule waiver should the Iowa Dental Association or the University of Iowa College of Dentistry wish to pursue credit.

Dr. Hipp agreed with the recommendation. Dr. Hipp reported that it was submitted for review so as to have a clear response concerning credit. Dr. Hipp stated that the course information would still be relevant and presented to those who would be interested in attending.

- ❖ MOVED by CACIOPPO, SECONDED by NORTH, to DENY the course as requested since it focuses on government regulations, a topic which is ineligible for credit pursuant to Iowa Administrative Code 650—Chapter 25. Motion APPROVED unanimously.
- IDA – *“Infection Control and Prevention: How to Protect Yourself and Your Patients”* – requested 2 hours
- IDA – *“Radiography Renewal – Intraoral Radiography: Occlusal Techniques Vision and Perception: WYSIWYG or Is It?”* – requested 2 hours
- ❖ MOVED by NORTH, SECONDED by ELMITT, to APPROVE the courses as requested. Motion APPROVED unanimously.
- IDHA – *“Women’s Aging Complexities – The 2014 Oral Health Connection”* – requested 6 hours
- ❖ MOVED by CACIOPPO, SECONDED by SLACH, to APPROVE the course as requested. Motion APPROVED unanimously.
- Oral Surgeons, P.C. Implant Institute – *“Dental Implants”* – requested 3 hours
- ❖ MOVED by FULLER, SECONDED by NORTH, to APPROVE the course as requested. Motion APPROVED unanimously.
- Delta Dental of Minnesota – *“Contemporary Patient Management Challenges in Dental Practice”* – requested 6 hours
- ❖ MOVED by NORTH, SECONDED by FULLER, to DENY the course as requested. Motion APPROVED unanimously.
- Matthew Beattie, D.D.S. – *“Monitoring Nitrous Oxide”* – (hours not specified)
- Joseph Tesene, D.D.S. – *“Taking Occlusal Registrations; Placement & Removal of Gingival Retraction; Taking Final Impressions; Fabrication & Removal of Provisional Restorations”* – (hours not specified)

Ms. Braness explained that these were being forwarded for review based on prior direction given by the Board. Since this committee has been reluctant to review these courses in the past, Ms. Braness indicated that the committee would strictly be making a recommendation for continuing education credit pending approval of the course by the Board.

The committee decided to table the discussion on expanded functions courses and defer review and judgment to the appropriate committee for recommendation, with a final decision being made by the Board.

- Spring Park Dental Implant Club – *“Layering the Foundation for Aesthetic Implant Restorations of Edentulous Patients”* – requested 2 hours
- ❖ MOVED by CACIOPPO, SECONDED by ELMITT, to APPROVE the course as requested. Motion APPROVED unanimously.

IV. CONTINUING EDUCATION CONTINUING EDUCATION SPONSOR APPLICATIONS FOR REVIEW

- *Compliance Training Partners*

Ms. Braness provided an overview of the request.

Ms. Cacioppo questioned the number of courses, which would be presented, and whether sponsor status would be appropriate. Ms. Braness reminded the committee members that there isn't a provision in the rules, which dictates the number of courses that an applicant for sponsor status must present in order to be eligible for sponsor status. Ms. Braness stated that it was up to the committee to make a recommendation concerning the request, and for the Board to make a final decision.

- ❖ MOVED by CACIOPPO, SECONDED by FULLER, to APPROVE the request for sponsor status. Motion APPROVED unanimously.

Dr. Hipp asked about the timing needed to review the course, *“Flying Under the Radar: Avoiding Problems with Your Patients, Your Colleagues, and the Dental Board”* if they should decide to pursue a request for reconsideration. Ms. Braness reported that there would still be time to resubmit for review and get Board approval prior to the scheduled dates of the Iowa Dental Association's May meeting.

- Dr. Hipp left the call following this discussion.

V. OTHER BUSINESS

- *Iowa AGD Request RE: CE Requirements and Acceptance of AGD Transcript*

Ms. Braness provided an overview of the request. Ms. Braness reported that the best way to address the first part of the request, regarding continuing education requirements, would be to

provide them the most recent version of Iowa Administrative Code 650—Chapter 25, rather than review and update a separate document.

Ms. Braness reported that the second part of the request related to whether a formal recommendation should be made as to whether the Academy of General Dentistry (AGD) transcript is acceptable proof of attendance for the purposes of continuing education audit. Ms. Braness stated that the Board office had recommended acceptance of these in the past. In this case, the AGD is asking for a formal decision.

Ms. Cacioppo asked about the AGD and how this transcript is different than a dentist simply listing a courses. Dr. Fuller stated that his understanding is that this is more than just listing courses. Dr. North agreed.

Ms. Cacioppo questioned if this was sufficient. Ms. Cacioppo had concerns about not having enough course information, among other things. Dr. North stated that he did not feel that this was a concern.

Ms. Braness reported that board rules provide some mechanisms, which allow Board staff to address these concerns as needed. If the course content is in question, board staff may ask the licensee/registrants to provide more information, or report additional hours as needed. Ms. Braness clarified the licensees/registrants would still be obligated to comply with Iowa Administrative Code 650—Chapter 25. Simply taking AGD-approved courses does not necessarily mean that someone has met the continuing education requirements for renewal.

- ❖ MOVED by CACIOPPO, SECONDED by FULLER, to recommend acceptance of the AGD transcript as proof of attendance. Motion APPROVED unanimously.

- *Request for CE for Licensees Who Utilize Cerec*

Ms. Braness provided an overview of the request. A licensee has asked that continuing education credit be awarded for the use of CEREC in the practice of dentistry.

Dr. North indicated that the request should be denied since day-to-day work is not the same as education.

Dr. Fuller agreed. Dr. Fuller stated that the committee may want to suggest to the licensee that he is welcome to form a CEREC study club; and to clarify that this would not be the same as providing the service day-to-day.

- ❖ MOVED by CACIOPPO, SECONDED by ELMITT, to DENY the request, and to include a reference in the letter that study clubs would be eligible to seek continuing education credit for continuing education courses offered, whereas day-to-day work would be ineligible. Motion APPROVED unanimously.

VI. OPPORTUNITY FOR PUBLIC COMMENT

No comments were received.

VII. ADJOURN

- ❖ MOVED by FULLER, SECONDED by ELMITT, to adjourn. Motion APPROVED unanimously.

The meeting of the Continuing Education Advisory Committee adjourned the meeting at 12:43 p.m.

NEXT MEETING OF THE COMMITTEE

The next meeting of the Continuing Education Advisory Committee is scheduled for March 26, 2014. The meeting will be held at the Board offices and by teleconference.

These minutes are respectfully submitted by Christel Braness, Program Planner 2, Iowa Dental Board.

Continuing Education Advisory Committee Course & Sponsor List - March 2014

New items added 3/20/2014 are in red

Continuing Education Course Requests

<u>Sponsor</u>	<u>Course Title:</u>	<u>Hrs. Requested</u>
Iowa Valley Continuing Education	<i>Management of Dental Office Emergencies & Minor Maxillofacial Trauma</i>	3
Caitlin Beresford, D.D.S.	<i>Current Scientific Evidence in Endodontic Practice</i>	1
Kiess Kraft Dental Labs/Metro West Dental	<i>Management of Pregnant Patients</i>	2
Levin Group	<i>Vision & Goals, Power Cell Scheduling, Power Scripts</i>	12
Eastern IA Comm. College	<i>Diagnosis & Treatment of Maxillary & Lingual Frenums</i>	2
Eastern IA Comm. College	<i>Periodontal Therapy</i>	2
Iowa Primary Care Association	<i>Nuts & Bolts of Providing Care to Patients Living with HIV</i>	1
Iowa Primary Care Association	<i>Unique Oral Health Needs in Patients with Compromised Immune Systems</i>	1
Iowa Primary Care Association	<i>Case-based Reviews & Discussion</i>	1
Cassaidy Orthodontics	<i>Improving Orthodontics, Improving Lives</i>	1
Biologix Solutions	<i>Proper Prescribing, Medical Errors Prevention, Safe Drug Disposal</i>	2
Biologix Solutions	<i>Management of Medical Emergencies in a Dental Clinic</i>	3
Biologix Solutions	<i>Substance Abuse - Chemical Dependency</i>	3
Biologix Solutions	<i>Impact of Tobacco on Oral Health & Smoking Cessation</i>	3
Biologix Solutions	<i>HIPAA</i>	1
Biologix Solutions	<i>Pain Mangement in Dentistry</i>	2
Biologix Solutions	<i>HIV/AIDS for Dental Healthcare Profesionals</i>	2
Biologix Solutions	<i>Hepatitis Infection - Implications in Dental Practice</i>	3
Biologix Solutions	<i>Nitrous Oxide Sedation & Occupational Safety in Dentistry</i>	2
Biologix Solutions	<i>Ethics & Responsibilities in Dentistry (Rules & Regulations - IAC 650)</i>	2
Iowa Academy of General Dentistry	<i>State of the Art Endodontics for the General Practitioners: Materials, Methods and Guiding Principles</i>	24 hrs total
Universal Therapy Group	<i>Temporomandibular Joint Disorder Evaluation and Treatment and Occupational Hazards Related to Dentistry</i>	2
Great River Oral Surgery Implant Study Club	<i>The Importance of Proper Diagnosis, Treatment for Coding and Reimbursement with ICD-10</i>	4
Kiess Kraft Dental Lab	<i>Peri-Implantits: Etiology and Current Treatment Trends</i>	2
University of Iowa College of Dentistry	<i>Education, Risk Assessment, and Treatment Planning for Patients Enrolled in the Dental Wellness Plan</i>	2
Invisalign - Aligntech, Inc.	<i>Invisalign Clear Essentials II</i>	8
Sarah Bauer	<i>Sugar, Sugar, Sugar: From Carbon to Caries</i>	3
University of Iowa College of Dentistry	<i>Culturally Responsive Health Care in Iowa</i>	6.5
Iowa Dental Hygienists' Association	<i>Implants: Indications, ICAT Scans, Grafts, Instruments for Maintenance and More</i>	2
Iowa Dental Hygienists' Association	<i>Treating the Diabetic Patient in the Dental Office; Nutritional Counseling for the Diabetic and Pre-Diabetic Patient - What to</i>	3
Mercy Cedar Rapids	<i>2014 Spring Cancer Care Update for Dental Health Professionals</i>	2

Continuing Education Sponsor Request(s)

Oral Surgery Associates

Continuing Education Course Request(s) for Reconsideration

Univ of IA College of Dentistry; Iowa Dental Association *The Affordable Care Act and the Implications for Dentistry*
 Iowa Dental Association *Flying Under the Radar*

RECEIVED

JAN 16 2014

APPLICATION FOR PRIOR APPROVAL OF CONTINUING EDUCATION COURSE OR PROGRAM IOWA DENTAL BOARD

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
515-281-5157
www.dentalboard.iowa.gov

Note: A fee of \$10 per course is required to process your request. PLEASE TYPE OR PRINT.

1. Name of organization or person requesting approval: Iowa Valley Continuing Education
Address: 3702 S. Center St Marshalltown, IA 50158
Phone: 641-844-5623 Fax: 641-752-1692 E-mail: Cheryl.Little@iavalley.edu

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
Dental School
Dental Hygiene School
Dental Assisting School
Military
Other (please specify): Continuing Education

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
Home study (e.g. self assessment, reading, educational TV)
Participation
Discussion
Demonstration

4. Course Title: Management of Dental Office Emergencies and Minor Maxillofacial Trauma

5. Course Subject:

- Related to clinical practice
Patient record keeping
Risk Management
Communication
OSHA regulations/Infection Control
Other:

6. Course date: 4-2-14 Hours of instruction: 3.0

* 5401 910
4/3/14
88

7. Provide the name(s) and briefly state the qualifications of the speaker(s):
Dr. John Kazwell, DDS and Dr. Peter Cho, DDS, MS Ames Oral Surgeons.

8. Please attach a program brochure, course description, or other explanatory material.
attached, see enclosures.

9. Name of person completing application: Cheryl Little
Title: Director Health Education Phone Number: 641-844-5623
Fax Number: 641-752-1692 E-mail: Cheryl.Little@iavalley.edu
Address: 3702 S. Center St Marshalltown, IA 50158
Signature: Cheryl Little Date: 1-15-14

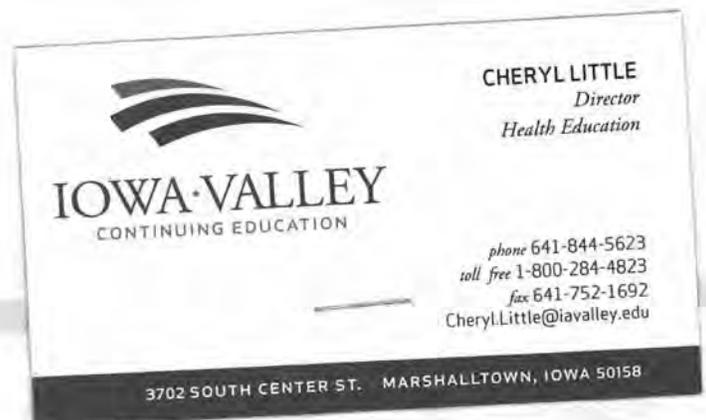
Board rules specify that the following subjects are NOT acceptable for continuing education credit: personal development, business aspects of practice, personnel management, government regulations, insurance, collective bargaining, and community service presentations.

If the course was offered by a Board approved sponsor, you should contact the sponsor directly for approval information, rather than submitting this form. A list of approved sponsors and contact information is available on the Board website at www.dentalboard.iowa.gov. Continuing education guidelines and rules are also available on the Board's website. A course is generally acceptable and does not need to go through this formal approval process if it is directly related to clinical practice/oral health care.

Pursuant to Iowa Administrative Code 650—25.3(5), please submit the application for approval 90 days in advance of the commencement of the activity. The Board shall issue a final decision as to whether the activity is approved for credit and the number of hours allowed. The Board may be unable to issue a final decision in less than 90 days. Please keep this in mind as you submit courses for prior approval.

MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE PER COURSE** TO:

Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687



Management of Dental Office Emergencies and Minor Maxillofacial Trauma

12:30 PM-1:00 PM – check in for Management of Dental Office Emergencies and Minor Maxillofacial Trauma

1:00 PM – 4:00 PM – Management of Dental Office Emergencies and Minor Maxillofacial Trauma

The objectives of this course are to discuss causes, treatments, and prevention of medical and dental emergencies seen in dental practice.

Dr. John B. Kazwell, DDS, Ames Oral Surgeons, PC, and Adjunct Assistant Faculty University of Iowa College of Dentistry will present Dental Office Emergencies.

During his presentation you will learn:

The causes, physiology, diagnosis, treatment, and prevention of

- Syncope
- Myocardial Infarction
- Stroke
- Post Treatment Bleeding
- Asthma Attack
- Instrument Aspiration

He will also discuss what you should have in your dental office emergency kit to care for your patients with these and other emergencies.

Dr. Peter W. Cho, DDS, MS, Ames Oral Surgeons, PC, Adjunct Faculty University of Iowa, and Diplomat, American Board of Oral and Maxillofacial Surgery will present Minor Maxillofacial Trauma.

During his presentation you will learn:

The classification, diagnosis, treatment, definitions, and proper antibiotic therapy in the

- Management of Oral Trauma
 - Dentoalveolar fractures
 - Dental Fractures
 - Soft Tissue Injuries (animal related injuries)
- Management of Facial Bone Injuries
 - Panfacial, ZMC, orbital
 - Mandibular fractures
- Management of Maxillofacial Infections
 - Diagnosis, classifications, definitions
 - Proper antibiotic therapy, surgical treatment

Audience: Dentists, dental hygienists, dental assistants and others who work in dental offices.

Date/Time: Wednesday April 2, 2014 from 1:00 PM – 4:00 PM. Snow/bad weather date April 16, 2014.

Fee: \$19/person which covers materials, refreshments, and CEH recording fee.

CEHs: Submitted to the Iowa Board of Dental Examiners for 3 hours continuing education credit.
100% attendance required for continuing education credit.

Sponsor/Co-sponsor: Iowa Valley Continuing Education and the Marshall County Dental Study Club

Location: Iowa Valley Continuing Education, 3702 South Center, Room 808, Marshalltown, IA

This information can also be found on the IVCE web site at
<http://www.iavalley.edu/ivce/certification/HealthEducation.html>

You May Register and pay online at:

- <https://ivce.iavalley.edu/modules/shop/index.html>, then click Health & Human Services Professionals, then page down to the course HEP 5002.(1).
- **Registration Deadline- 3-26-14**

It is the policy of Iowa Valley Community College District to provide equal educational and employment opportunities without discriminating on the basis of race, religion, color, creed, marital status, national origin, age, disability, sexual orientation, gender identity, or sex, in its educational programs, activities, practices and policies.

Registration-Management of Dental Office Emergencies and Minor Maxillofacial Trauma,
Course # HEP 5002.(1), cost is \$19, time is 1:00 PM-4:00 PM

You will need to provide the following information on the web site or when calling-

Name _____
Home Address _____
City _____ State _____ Zip _____
Home Phone () _____ Work Phone () _____
Cell Phone () _____
Birth Date _____ Email _____
Profession _____ License Number _____

Registrations with 3rd party billing call IVCE at 752-4645.



IOWA·VALLEY
CONTINUING EDUCATION

Dental Office Emergencies

- I. Syncope case
 - a. Present case scenario
 - i. Causes / physiology / diagnosis
 - ii. Treatment
 - iii. Prevention
- II. Myocardial Infarction
 - a. Present case scenario
 - i. Causes / physiology / diagnosis
 - ii. Treatment
 - iii. Prevention
 1. appropriate patient screening
 2. stress reduction
- III. Stroke
 - a. Present case scenario
 - i. Causes / physiology / diagnosis
 - ii. Treatment
 - iii. Prevention
- IV. Post treatment bleeding
 - a. Evaluation
 - i. Adequate access and visualization
 - ii. Patient condition, vitals,
 1. anticoagulated?
 2. systemic disease?
 - b. Treatment options
 - i. Ligate, surgical, gelfoam, collagen, pack
- V. Asthma attack
 - a. Case presentation
 - i. Causes / physiology
 - ii. treatment
 - iii. prevention
- VI. Instrument aspiration
 - a. Case presentation
 - i. Laryngospasm
 - ii. Aspiration
 - iii. Ingestion
- VII. Dental office emergency kit
 - a. ADA requirements?

John B. Kazwell DDS

Education

- 1988 BA molecular biology University Of Wisconsin-Madison
- 1996 DDS University of Illinois College of Dentistry
- 2000 Certificate Oral and Maxillofacial Surgery University of Iowa Hospitals and Clincs

Board certification

- 2002 American Board of Oral and Maxillofacial Surgeons

Employment

- 2004-Present Ames Oral Surgeons
- 2011-Present Adjunct Assistant Faculty University of Iowa College of Dentistry

Membership

- American Dental Association
- Iowa Society of Oral Surgeons (past president)
- American Association of Oral And Maxillofacial Surgeons

Peter W. Cho, DDS, MS
Ames Oral Surgeons, PC
Dipomate, American Board of Oral and maxillofacial Surgery

(Plan for 1.5 hour lecture slot)

Management of Oral Trauma

- Dentoalveolar fractures (Diagnosis, Treatment)
- Dental Fractures (Classification, Diagnosis, Treatment)
- Soft tissue injuries (Diagnosis, Treatment, Trauma related/Animal related injuries)

Management of facial bone injuries

- Overview of maxillofacial bone fractures (Overview of panfacial, ZMC, orbital injuries)
- Mandibular fractures (Diagnosis, Treatment, dental related concerns)

Maxillofacial Infections

- Overview, Anatomy (Diagnosis, classifications, definitions)
- Management (Proper antibiotic therapy, Surgical treatment)

OBJECTIVES: Overview and proper management.

PETER W. CHO

Ames Oral Surgeons, PC
Marshalltown Oral Surgeons, PC
1212 Duff Ave. Ames, IA 50010
Office: 515-232-6830
omsdrcho@gmail.com

EDUCATION

2011 – Now
July 2005 to June 2009

Diplomat, American Board of Oral and Maxillofacial Surgery

University of Iowa Hospitals and Clinics

Department of Oral and Maxillofacial Surgery

Currently a second year Resident in four year DDS, MS program

University of Iowa College of Dentistry, DDS

August 2001 to June 2005

EXPERIENCE

-Academic experience
July 2003 to Present

President elect to **President of National Student Research Group of AADR**

-Research experience
August 2001 to Present

College of Dentistry Dental Research Facility

Mentors: Dr. John C. Keller in OMFS and Dr. Galen Schneider

Funded by **Dental Research Award** from August 2001 to present

University of Iowa Department of Microbiology

Mentor: Dr. Lacy Daniels

Funded by **Howard Hughes Undergraduate Research fellowships**
and **National Science Foundation**

August 1997 to May 2000

-Teaching experience
September 2000 to August 2001

Instructor for DAT course in Kaplan, Iowa City, IA

-Volunteer experience
2010, 2013

IMOM, Iowa Mission of Mercy

PUBLICATIONS

Cho, P., Burton, R., Gratton, D., Cho, J. "Biomechanical study of SonicWeld Rx Pin in Cortical Bone Graft Layering Technique." *J Oral and Maxillofacial Surgery*. Volume 69, Issue 5, Pg 1519-24, May 2011

Cho, P., Roehm, M., Schneider, G., Krizan, K., and Keller, J. "Examination of the Bone-Implant Interface in Experimentally Induced Osteoporotic Bone." *J Dent Res. And J Implant Dentistry* Volume 13, Number 1, 2004

PRESENTATIONS

"The Effect of Induced Osteoporotic like Conditions on Focal Adhesion Assembly and FAK Tyrosine Kinase Activity in Osteoblasts"; Iowa Section of AADR and IADR Honolulu – 2004 (Submitted/Registered Abstract); funded by Dental Research Award

"Examination of the Bone-Implant Interface in Experimentally Induced Osteoporotic Bone"; Iowa Section of AADR and IADR San Antonio – 2003 (#0687); funded by Dental Research Award

"Transcription Analysis of the alpha-Mannosidase Gene Downstream of *fgd* in *Mycobacterium chelonae*"; 1999; at Univ. of Iowa; funded by Howard Hughes Research

"Cloning of the Rv2202c gene from *Mycobacterium bovis* after identifying a possible role for this gene in F420 biosynthesis"; 2000; at Univ. of Iowa; funded by NSF Research

HONORS

- **Omicron Kappa Upsilon for 2005**
- **AAOMS Dental Student Award for 2005**
- **Iowa Society of OMS Dental Student Award for 2005**
- **Hancher Finkbine Medallion Award for 2004**
- **Dean's Leaders Award for 2004**
- **Wesley Collins Darby Award for 2004 from Department of Operative Dentistry**
- **Dr. R.A. Greenawalt Award for 2004 from Department of Periodontics**
- **DRA, Dental Research Award, 2001-Present**

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JAN 21 2014

APPLICATION FOR PRIOR APPROVAL OF
CONTINUING EDUCATION COURSE OR PROGRAM

IOWA DENTAL BOARD

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
515-281-5157
www.dentalboard.iowa.gov

Note: A fee of \$10 per course is required to process your request. PLEASE TYPE OR PRINT.

1. Name of organization or person requesting approval: Caitlin Beesford SWIDA
Address: 320 McKenzie Ave #101 Council Bluffs IA 51503
Phone: 7123225318 Fax: _____ E-mail: Caitlin-Beesford@hotmail.ca

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
- Dental School
- Dental Hygiene School
- Dental Assisting School
- Military
- Other (please specify): _____

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

4. Course Title: Current Scientific Evidence in Endodontic Practice

5. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

6. Course date: 3-27-14 Hours of instruction: 1

#953
\$10.00
1/31/14

7. Provide the name(s) and briefly state the qualifications of the speaker(s):
Jason Bouska DDS, MS University of Iowa
WOD
-Board Certified Endodontist

8. Please attach a program brochure, course description, or other explanatory material.

9. Name of person completing application: Caitlin Beresford
Title: SWIDA President Phone Number: 712 322 5318
Fax Number: _____ E-mail: Caitlin-Beresford@hotmail.com
Address: 4300 McKenzie Ave Suite 101 Council Bluffs IA 51503
Signature: C Beresford Date: 1/9/2014

Board rules specify that the following subjects are NOT acceptable for continuing education credit: personal development, business aspects of practice, personnel management, government regulations, insurance, collective bargaining, and community service presentations.

If the course was offered by a Board approved sponsor, you should contact the sponsor directly for approval information, rather than submitting this form. A list of approved sponsors and contact information is available on the Board website at www.dentalboard.iowa.gov. Continuing education guidelines and rules are also available on the Board's website. A course is generally acceptable and does not need to go through this formal approval process if it is directly related to clinical practice/oral health care.

Pursuant to Iowa Administrative Code 650—25.3(5), please submit the application for approval 90 days in advance of the commencement of the activity. The Board shall issue a final decision as to whether the activity is approved for credit and the number of hours allowed. The Board may be unable to issue a final decision in less than 90 days. Please keep this in mind as you submit courses for prior approval.

MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE** PER COURSE TO:

Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687



320 McKenzie Ave Suite 101
Council Bluffs, IA 51503
Office 712-322-5318
Fax 712-329-6128

To: Iowa Dental Board

From: Courtney for Dr. Bessford

*****Confidentiality Notice*****

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District meeting

Received Time Feb. 6, 2014 3:04PM No. 4128

District meeting

Wed 2/5/2014 5:59 PM

From: Jason Bouska

To: courtney@bluffsfamilydentistry.com, Caitlin Beresford

Hi Courtney,

Dr. Beresford wanted me to send you my topic for the IDA meeting. It is titled "Current Scientific Evidence in Endodontic Practice - Dental Trauma." I will discuss dental trauma and treatment of traumatic dental injuries, focusing on what the current literature shows for treatment options.

Thanks,

Jason

Jason A. Bouska, DDS
Western Iowa Endodontics
320 McKenzie Ave
Suite 207
Council Bluffs, IA 51503
(712) 256-9943

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APPLICATION FOR POST APPROVAL OF CONTINUING EDUCATION COURSE OR PROGRAM

JAN 27 2014

IOWA DENTAL BOARD

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
Phone (515) 281-5157
www.dentalboard.iowa.gov

NOTE: A fee of \$10 per course is required to process your request. PLEASE TYPE OR PRINT.

1. Course Title: Management of Pregnant Patients

2. Course Subject:

- Related to clinical practice
Patient record keeping
Risk Management
Communication
OSHA regulations/Infection Control
Other:

3. Course date: February 5th Hours of instruction: 2 hours

4. Provide a detailed breakdown of contact hours for the course or program:

see attached sheet

5. Name of course sponsor: Metro West Dental, Kiess Kraft

Address: 12110 Port Grace Blvd La Vista NE 68128

6601 S 118th Street Omaha NE 68137

6. Which of the following educational methods were used in the program? Please check all applicable.

- Lectures
Home study (e.g. self assessment, reading, educational TV)
Participation
Discussion
Demonstration

#1493
\$10.00
1/31/14

METRO WEST DENTAL

SPECIALTY GROUP

“Management of Pregnant Patients”

Speaker: *Donald Scheidel, DDS*

Date: February 5, 2014 Wednesday 6 to 8pm (A light dinner will be provided)

2 CE credits

Location: Kiess Kraft Dental lab,
6601 S. 118th St.
Omaha, NE 68137

Please RSVP: Metro West Dental at 402-614-7022

OBJECTIVES:

1. Review of the systemic medical conditions that affect treatment planning for dental treatment.
2. Discusses absolute and potential systemic contraindications and review the current standard of evidence and underlying risk factors for treating the patient with pregnancy.
3. Informs the dental professional regarding potentially compromising systemic factors that may contraindicate dental treatment.

About the speaker:

Dr. Scheidel graduated from Creighton School of Dentistry in 1981 and practiced dentistry in varied settings (private practice, Indian Health Service, prison and developmentally delayed environments) for 10 years. He worked in dental public health prior to entering his teaching career. He taught for 14 years in the University of South Dakota Department of Dental Hygiene and began his Creighton teaching career in 2010. He is an Associate Professor in the Department of Diagnostic Sciences teaching clinical oral diagnosis and treatment planning, lectures junior dental students on Oral Medicine, and teaches in the freshman Dental Materials lab. He has presented “Management of Pregnant Patients”, “The Effect of Frequency on Fatigue Limits of Enamel Bonds”, and “Composite Fatigue Testing-The Clinical Relevance” to the dental profession. Dr. Scheidel co-authored “Effect of Phosphoric Acid Pre-Etching on Fatigue Limits of Self-Etching Adhesives” provisionally accepted for publication in Operative Dentistry.

Sponsored by: Metro West Dental, Kiess Kraft and Village Pointe 3D Imaging Center

APPLICATION FOR PRIOR APPROVAL OF
CONTINUING EDUCATION COURSE OR PROGRAM

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Des Moines, IA 50309-4687
515-281-5157
www.dentalboard.iowa.gov

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FEB 03 2014

IOWA DENTAL BOARD

Note: A fee of \$10 per course is required to process your request. PLEASE TYPE OR PRINT.

1. Name of organization or person requesting approval: Kless Kraft Dental Lab

Address: 6601 S 118th St Omaha, NE 68137

Phone: 402-391-8424 Fax: _____ E-mail: cgmiller@klesskraft.com

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
- Dental School
- Dental Hygiene School
- Dental Assisting School
- Military
- Other (please specify): Dental Lab

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

4. Course Title: Management of Pregnant Patients

5. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

6. Course date: Feb 5, 2014

Hours of instruction: 2

#1150128
\$10 fee 2/3/14

7. Provide the name(s) and briefly state the qualifications of the speaker(s): _____

see attached invitation

8. Please attach a program brochure, course description, or other explanatory material.

9. Name of person completing application: Chris Miller

Title: Lab President Phone Number: 402-391-8424

Fax Number: 402-391-5701 E-mail: ~~cmiller@kress~~ cmiller@kresskraft.com

Address: 6601 S 118th St Omaha NE 68137

Signature:  Date: 1.28.14

Board rules specify that the following subjects are NOT acceptable for continuing education credit: personal development, business aspects of practice, personnel management, government regulations, insurance, collective bargaining, and community service presentations.

If the course was offered by a Board approved sponsor, you should contact the sponsor directly for approval information, rather than submitting this form. A list of approved sponsors and contact information is available on the Board website at www.dentalboard.iowa.gov. Continuing education guidelines and rules are also available on the Board's website. A course is generally acceptable and does not need to go through this formal approval process if it is directly related to clinical practice/oral health care.

Pursuant to Iowa Administrative Code 650—25.3(5), please submit the application for approval 90 days in advance of the commencement of the activity. The Board shall issue a final decision as to whether the activity is approved for credit and the number of hours allowed. The Board may be unable to issue a final decision in less than 90 days. Please keep this in mind as you submit courses for prior approval.

MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE** PER COURSE TO:

Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687

METRO WEST DENTAL

SPECIALTY GROUP

Dr. Taera Kim (Orthodontist) and Dr. Taka Miyamoto (Periodontist) invite you to:

ADVANCED DENTAL EDUCATION SERIES: METRO WEST DENTAL SEMINARS

A Multidisciplinary Approach to Dentistry

“Management of Pregnant Patients”

Speaker: Donald Sheidel, DDS

Date: February 5th 2014 Wednesday 6 to 8pm (A light dinner will be provided)

CE Credits: 2 Credits

Location: Kiess Kraft Dental lab, 6601 S. 118th St. Omaha, NE 68137

Please RSVP: Kim (Metro West Dental) at 402-614-7022

Tuition: Complimentary

The pregnant patient presents several considerations for providing dental treatment. Among these are that there are two persons involved in the dental treatment of a pregnant woman, the woman and the baby. Each presents a different set of problems. Because of the fetus, certain precautions in the use of drugs and radiographs must be taken. Diabetes, hypertension, and anemias are frequently associated with pregnancy and produce a threat to the developing fetus. These diseases, along with any other systemic diseases and infections that pose threats to either the mother or the fetus, are normally detected with good prenatal care.

Objectives:

1. Review of the dental prescription medications that affect treatment planning for the pregnant patients.
2. Discusses and review the current standard of evidence and underlying risk factors for treating the patient with pregnancy.
3. Informs the dental professional regarding potentially compromising dental materials that may contraindicate dental treatment for pregnant patients.

About a speaker:

Dr. Scheidel graduated from Creighton School of Dentistry in 1981 and practiced dentistry in varied settings (private practice, Indian Health Service, prison and developmentally delayed environments) for 10 years. He worked in dental public health prior to entering his teaching career. He taught for 14 years in the University of South Dakota Department of Dental Hygiene and began his Creighton teaching career in 2010. He is an Associate Professor in the Department of Diagnostic Sciences teaching clinical oral diagnosis and treatment planning, lectures junior dental students on Oral Medicine, and teaches in the freshman Dental Materials lab. He has presented "Management of Pregnant Patients", "The Effect of Frequency on Fatigue Limits of Enamel Bonds", and "Composite Fatigue Testing-The Clinical Relevance" to the dental profession. Dr. Scheidel co-authored "Effect of Phosphoric Acid Pre-Etching on Fatigue Limits of Self-Etching Adhesives" provisionally accepted for publication in Operative Dentistry.

Sponsored by: Metro West Dental, Kiess Kraft and Village Pointe 3D Imaging Center



JAN 27 2014

IOWA DENTAL BOARD

APPLICATION FOR POST APPROVAL OF CONTINUING EDUCATION COURSE OR PROGRAM

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
Phone (515) 281-5157
www.dentalboard.iowa.gov

NOTE: A fee of \$10 *per course* is required to process your request. PLEASE TYPE OR PRINT.

1. Course Title: VISION & Goals, Power Call, Scheduling, Power Scripts
2. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

3. Course date: 11/19/13 & 11/20/13 Hours of instruction: 9-12:00, 12:45-4:30; 9:00-1:00
12 CE

4. Provide a detailed breakdown of contact hours for the course or program:
1/1 Scheduling & workshop, Power call, scheduling policies, Power scripts. 1/20 New pt call converter, Scripting workshop, Implementation workshop

5. Name of course sponsor: Levin Group
Address: 10 New Plant Court
Owings Mills, MD 21117

6. Which of the following educational methods were used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

#6807
\$10.
8/13/14

7. Provide the name(s) and briefly state the qualifications of the speaker(s):
Tori Lynch - BS in Finance, B.S. in Management
Information Systems, M.S. in Organizational
Development.

8. Please attach a program brochure, course description, or other explanatory material.
Agenda attached

9. Name of person completing application: Tracy Thompson
Title: Office Manager Phone Number: 563 386 6910
Fax Number: 563 386 6967 E-mail: info@beattiefamilydental.com
Address: 1544 W. Kimberly Rd Davenport IA 52806
Signature: Tracy Thompson Date: 1-24-14

Board rules specify that the following subjects are NOT acceptable for continuing education credit: personal development, business aspects of practice, personnel management, government regulations, insurance, collective bargaining, and community service presentations.

If the course was offered by a Board approved sponsor, you should contact the sponsor directly for approval information, rather than submitting this form. A list of approved sponsors and contact information is available on the Board website at www.dentalboard.iowa.gov. Continuing education guidelines and rules are also available on the Board's website. A course is generally acceptable and does not need to go through this formal approval process if it is directly related to clinical practice/oral health care.

Pursuant to Iowa Administrative Code 650—25.3(6), within 90 days after the receipt of application, the Board shall issue a final decision as to whether the activity is approved for credit and the number of hours allowed.

MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE** PER COURSE TO:

Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687



General Practice Consulting

FOUNDATION STAGE

DAY 1

8:30 am – 9:00 am

Welcome

Continental Breakfast

9:00 am – 12:00 pm

Morning Session

Program Overview and Goals

Scheduling and Scheduling Workshop

12:00 pm – 12:45 pm

Lunch Break (lunch with be provided)

12:45 pm – 4:30 pm

Afternoon Session

Power Cell Scheduling - Meetings

Scheduling Policies and PowerScripts™

Program Note: Morning and afternoon breaks will occur approximately halfway through each session, as determined by your presenter.



General Practice Consulting

FOUNDATION STAGE

DAY 2

8:30 am – 9:00 am

Welcome

Continental Breakfast

9:00 am – 12:30 pm

Morning Session

New Patient Call Converter

Scripting Workshop

Implementation Workshop

12:30 pm – 1:00 pm

End of session

Boxed lunches will be provided

Program Note: Morning break will occur approximately
halfway through each session, as determined by your presenter.

Provider Name: Levin Group
Provider AGD ID #: 207991
Provider Address: Owings Mills, MD 21117

CERTIFICATE OF ATTENDANCE

Participant's Name:

A.G.D. ID #:

State and License #:

Title: Vision and Goals, Power Cell Scheduling, Power Scripts™

Speaker: Tori Lynch

Educational Method: Lecture

Course Date: November 19-20, 2013

Location: Owings Mills, MD

CE Hours: 12

Verification Code: 131120

Authorized Signature: *Michele Cooney*



Approved PACE Program Provider
FAGD/MAGD Credit
Approval does not imply acceptance by any state
or provincial board of dentistry or AGD endorsement.
10/01/2010 to 09/30/2014
Provider# 207991

RECEIVED

entered sponsor note

FEB 05 2014

IOWA DENTAL BOARD

APPLICATION FOR PRIOR APPROVAL OF CONTINUING EDUCATION COURSE OR PROGRAM

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
515-281-5157
www.dentalboard.iowa.gov

Scanned & emailed 2/3/14

Note: A fee of \$10 per course is required to process your request. PLEASE TYPE OR PRINT.

1. Name of organization or person requesting approval: Eastern Iowa Community Colleges
Address: 306 West River Drive Davenport, IA 52801
Phone: 563-336-3447 Fax: 563-336-3451 E-mail: mbriones@eicc.edu

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
Dental School
Dental Hygiene School
Dental Assisting School
Military
Other (please specify): Community College

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
Home study (e.g. self assessment, reading, educational TV)
Participation
Discussion
Demonstration

4. Course Title: Diagnosis & Treatment of Maxillary & Lingual Trenchums

5. Course Subject:

- Related to clinical practice
Patient record keeping
Risk Management
Communication
OSHA regulations/Infection Control
Other:

6. Course date: 3/13/14 Hours of instruction: 2

7. Provide a detailed breakdown of contact hours for the course or program:

SEE ATTACHED

8. Provide the name(s) and briefly state the qualifications of the speaker(s):

MELINDA HOCHGESANG, D.D.S.

SEE ATTACHED RESUME

9. Please attach a program brochure, course description, or other explanatory material.

10. Name of person completing application: MARY S. BRIONES, RN, MS

Title: DIRECTOR HEALTH Phone Number: 563-336-3447

Fax Number: 563-336-3451 E-mail: MBRIONES@EICL.EDU

Address: 306 WEST RIVER DR. DAVENPORT, IA 52801

Signature: Mary Briones Date: 2/3/14

Board rules specify that the following subjects are NOT acceptable for continuing education credit: personal development, business aspects of practice, personnel management, government regulations, insurance, collective bargaining, and community service presentations.

If the course was offered by a Board approved sponsor, you should contact the sponsor directly for approval information, rather than submitting this form. A list of approved sponsors and contact information is available on the Board website at www.dentalboard.iowa.gov.

You will be contacted after the Continuing Education Advisory Committee has reviewed your request. Please allow a minimum of two to three weeks for a response.

MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED \$10 FEE PER COURSE TO:

Iowa Dental Board
Advisory Committee on Continuing Education
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687

Melinda M. Hochgesang

2501 Middle Road

Bettendorf, IA 52722

Cell phone: (309) 230-6278

mindyhochgesang@gmail.com

EDUCATION

Southern Illinois School of Dental Medicine, Alton, IL 2005-2009
GPA: 3.42 Rank: 14/44 Graduation date: June 2009

Indiana University, Bloomington, IN 2001-2005

Major: Bachelor of Science, Biology GPA: 3.93

Minor: Chemistry

LAMP Certificate (Liberal Arts and Management Program)

PROFESSIONAL EXPERIENCE

Byrum Family Dentistry: Bettendorf, IA Feb 2010 – present

- Provide comprehensive dental care to patients
- Proficient at dental extractions, posterior composites, dentures, crowns, bridges, etc

Clinton Family Dental: Clinton, IA Sept 2009 – Aug 2012

- Provided comprehensive dental care to current patients
- Worked for dentist while on maternity leave, during vacations, and injury

Your Dental Office: Kalona, IA Oct 2009 – July 2010

- Provided comprehensive dental care to current patients
- Worked as a solo dentist

Camelot Dental Clinic: Moline, IL Nov 2009 – Feb 2010

- Provided comprehensive dental care to new patients
- Worked as an independent contractor dentist

Jamaica Dental Mission Trip July 2008

- Provided dental care at no cost in Jamaica for children and adults
- Gained experience with multiple extractions
- Performed prophies and educated children and their parents about oral hygiene

PROFESSIONAL MEMBERSHIPS

- American Dental Association (ADA)
- Iowa Dental Association (IDA)
- Davenport District Dental Society
- Scott County Dental Society

PERTINENT CONTINUING EDUCATION

- Breastfeeding and Oral Issues-Identification, Intervention and Referral
 o Speaker: Lawrence Kotlow, DDS, PC Nov 2013
- Observation of 12 frenectomies by Dr. Bobak Ghaheri: ENT in Portland, OR Dec 2013
- 3 day course on Lasers: The Future is Here: CBCT, Lasers, and Internet Marketing Jan 2014
 - o Speakers: Lawrence Kotlow, DDS, PC
 - o Larry Lytle, PhD
 - o Frans Currier, DDS
 - o Bruce Howerton, DDS, MS

Diagnosis and Treatment of the Maxillary and Lingual Frenums (Lip Ties and Tongue Ties)

This course is modeled after a course that Mindy Hochgesang, DMD took by Lawrence Kotlow, DDS who is a pediatric dentist that treats tongue ties and maxillary lip ties frequently in NY. He lectures on the subject and has published several scientific articles. He also lectures at laser seminars. Mindy Hochgesang, DMD has attended one of his courses dedicated to tongue ties and lip ties and one about lasers.

At the completion of this course, the individual should be able to:

- Define ankyloglossia (tongue tie)
- Describe methods of diagnosing tongue tie
- Describe how this oral soft tissue abnormality and its variations affect breastfeeding, dental health and other functions
- Define the term lip tie of the maxillary frenum
- Describe methods of diagnosing lip tie
- Discuss how this oral soft tissue abnormality and its variations affect breastfeeding, dental health and other functions
- Describe surgical corrections of lip ties and tongue ties
- Describe the role and use of lasers in the correction of lip ties and tongue ties
- How to identify all 4 types of tongue tie, lip tie and other structural issues that may cause difficulties
- Describe the responsibilities of the assistant during lip tie and tongue tie surgeries
- Describe the precautions taken when using a laser for lip tie and tongue tie surgeries
- Research and common myths
- Current best practice aftercare

Tongue ties are present in 4.8% of the population and can affect very critical life skills such as eating, speech, and development. This course focuses on the symptoms and diagnosis of tongue ties and lip ties. Course attendants will also be learning how to properly assist with the surgical release (revision) of tongue ties and lip ties. The advantages of revising with a laser will be addressed. Attendants will be encouraged to research further on tongue tie and lip tie and take part in educational endeavors in the future. The attendants should feel comfortable diagnosing lip ties and tongue ties, proficient at noticing related symptoms, be able to guide and direct parents to appropriate providers for solutions and have the knowledge to instruct someone properly on post surgical care.

entered &
NO ~~open~~ fee
sponsor

**APPLICATION FOR PRIOR APPROVAL OF
CONTINUING EDUCATION COURSE OR PROGRAM**

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
515-281-5157
www.dentalboard.iowa.gov

summed
&
emailed
2/13/14

Note: A fee of \$10 *per course* is required to process your request. PLEASE TYPE OR PRINT.

1. Name of organization or person requesting approval: EASTERN IOWA COMMUNITY COLLEGES
Address: 306 WEST RIVER DRIVE Davenport, IA 52801
Phone: 563-336-3447 Fax: 563-336-3451 E-mail: MBRIONES@IACC.EDU

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
- Dental School
- Dental Hygiene School
- Dental Assisting School
- Military
- Other (please specify): COMMUNITY COLLEGE

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

4. Course Title: PERIODONTAL THERAPY

5. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

6. Course date: 4/24/14 Hours of instruction: 2

7. Provide a detailed breakdown of contact hours for the course or program:

SEE ATTACHED.

8. Provide the name(s) and briefly state the qualifications of the speaker(s):

MICHAEL FRANZMAN DDS, MS

SEE ATTACHED RESUME.

9. Please attach a program brochure, course description, or other explanatory material.

10. Name of person completing application: MARY S. BRIONES, RN, MS

Title: DIRECTOR HEALTH Phone Number: 563-336-3447

Fax Number: 563-336-3451 E-mail: MBRIONES@ECC.EDU

Address: 306 WEST RVIEW DR. DAVENPORT, IA 52801

Signature: Mary Briones Date: 2/3/14

Board rules specify that the following subjects are NOT acceptable for continuing education credit: personal development, business aspects of practice, personnel management, government regulations, insurance, collective bargaining, and community service presentations.

If the course was offered by a Board approved sponsor, you should contact the sponsor directly for approval information, rather than submitting this form. A list of approved sponsors and contact information is available on the Board website at www.dentalboard.iowa.gov.

You will be contacted after the Continuing Education Advisory Committee has reviewed your request. Please allow a minimum of two to three weeks for a response.

MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED \$10 FEE PER COURSE TO:

**Iowa Dental Board
Advisory Committee on Continuing Education
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687**

Curriculum Vitae

Michael R. Franzman, DDS, MS

Email: drmike@qcperio.com

Education:

BA – Wartburg College, Biology Major, 2000
DDS – University of Iowa College of Dentistry, 2004
MS – University of Iowa, Oral Science, 2007
Certificate in Periodontics – University of Iowa, 2007
Board Certified Diplomate, American Board of Periodontology 2008

Practice

Quad Cities Periodontics, PLLC
1800 E. 54th St. Suite A
Davenport, IA 52807
563-344-4867

Professional Organizations

- 1 Iowa Society of Periodontology, President, 2008-9
- 2 Member of ADA (American Dental Association)
- 3 Member of AAP (American Academy of Periodontology)
- 4 Diplomate, American Board of Periodontology
- 5 Member of IDA (Iowa Dental Association)
- 6 Davenport District Dental Association, Secretary 2011-2013, Vice President 2013-present
- 7 Scott County Dental Society, President 2010-11
- 8 Adjunct Assistant Professor, University of Iowa, Department of Periodontics 2007-present

Publications

- 1 Franzman MR, Levy SM, Warren JJ, Broffitt B. Dentifrice Use Among Children Age 6-60 Months. *J Dent Res* 82(Spec Issue A):1346, 2003.
- 2 Franzman MR, Levy SM, Warren JJ, Broffitt B. Toothbrushing and Dentifrice Use Among Children Ages 6 to 60 Months. *Pediatric Dentistry* 26(1): 87-92, 2004.
- 2 Franzman MR, Levy SM, Warren JJ, Broffitt B. Fluoride Dentifrice Ingestion and Fluorosis in Early-Erupting Permanent Dentition. *J Dent Res* 83(Spec Issue A):0689, 2004.
- 3 Franzman MR, Levy SM, Warren JJ, Broffitt B. Fluoride Dentifrice Ingestion and Fluorosis of the Permanent Incisors. *JADA* 2006;137:645-52.
- 4 Franzman MR, Burnell KK, Dehkordi-Vakil FH, Guthmiller JK, Dawson

DV, Brogden KA. Targeted Antimicrobial Activity of a Specific IgG-SMAP28 Conjugate Against *Porphyromonas gingivalis* in a Mixed Culture. *Int J Antimicrob Agents* 33(1): 14-20, 2009.

Presentations

Illowa Dental Study Club – 2007, 2008, 2011
Clinton Dental Study Club – 2008, 2009, 2010, 2011
Quad City Dental Hygiene Association – 2009
Quad City Dental Assistant Association – 2008, 2010

Residency – University of Iowa 2004-2007

Residency Research Experience

- 1 Session moderator for local chapter of IADR/AADR meeting, Iowa City, IA Fall 2004
- 2 Max Smith Post Graduate Research Award, University of Iowa, February 2007, 1st Place
- 3 Graduate Student Research Presentation, Midwest Society of Periodontology, Chicago, IL, February 2007, 2nd Place
- 4 Balint Orban Research Competition, American Academy of Periodontology, Washington, DC, October 2007, 1st Place Basic Science
- 5 Master's Thesis: Targeted Antimicrobial Activity of SMAP28 Conjugated to IgG Antibody Mentor: Dr. Kim Brogden

Dental School - University of Iowa, 2000-2004

- 6 President of the Iowa American Student Dental Association 2003-4, President-Elect 2002-3, Treasurer 2001-2
- 9 Student Delegate to the Iowa Dental Association House of Delegates with voting privileges 2002, 2003, 2004
- 10 Chosen as one of two voting student members of the Council on Membership of the Iowa Dental Association 2002, 2003, 2004
- 11 Chosen as a student representative to the Iowa Dental Alumni Association 2002, 2003, 2004
- 12 Member of Iowa Chapter of American Society of Dentistry for Children 2000-2004

Dental School Research Experience

- 13 2002 AADR Research Fellowship Award Recipient. Sponsor: Proctor and

Gamble

- 14 Presentation at AADR Annual Session 2003 in San Antonio, TX and at the Iowa Chapter of IADR meeting. Title: Toothbrushing and Dentifrice Use Among Children Age 6 to 60 Months.
- 15 2003 AADR Research Fellowship Award Recipient. Sponsor: Proctor and Gamble
- 16 Presentation at AADR/IADR Annual Session 2004 in Honolulu, HI and at the Iowa Chapter of IADR meeting. Title: Fluoride Dentifrice Ingestion and Fluorosis in Early-Erupting Permanent Dentition.

Dental Education Awards

- 17 American College of Dentists Outstanding Senior Award 2004
- 18 American Association of Public Health Dentistry Predoctoral Dental Student Merit Award for Outstanding Achievement in Dental Public Health 2nd place 2004
- 19 Frank J. Molsberry Memorial Award, University of Iowa 2004, given to a senior student for excellence in periodontics
- 20 Proctor and Gamble/Crest Dental Student Research Award 2004 1st place
- 21 University of Iowa Research Achievement Award 2004
- 22 University of Iowa Dean's Leadership Award Recipient 2001, 2002, 2003, 2004
- 23 Pierre Fauchard Scholarship 2003
- 24 ADEA/Listerine Preventive Dentistry Scholarship 2003

Professional Organizations

- Member of ASDA (American Student Dental Association) 2000-04
 - ASDA Award of Excellence 2004
 - Elected to the ASDA Board of Trustees for 2002-03 (national position)
 - Member of ASDA's Task Force on State Representation and Council on Governance and Professional Issues 2002-03
- 25 Participant in ASDA/ADEA Dental Student Lobby Day in Washington, DC 2002

Volunteer work

- 26 Participant in March of Dimes Walk America
- 27 Volunteered for presentations at Children's Museum in Coralville, IA and built toothbrushing model displays for children to learn about brushing for the dental clinic area of the museum

Undergraduate Studies – Wartburg College 1996-2000

- Biology major, cum laude
- Dean's list
- Wartburg College Regents Scholar
- LeAnn Aschim Memorial Scholarship for juniors in medical science 1998-99
- 28 Tri-Beta biological honors society
- 29 Division III NCAA Varsity Football 1996-98
- Co-chairperson of homecoming coronation 1999
- Resident Assistant in Founder's Hall two years
- Wartburg Ambassador's, gave tours and interviews to prospective students
- Participant in a spring break 1999 service trip to Georgetown, SC to help build a house for Habitat for Humanity
- Writing/Reading Consultant in the Wartburg Writing and Reading Lab
- Volunteer work for Capitol Hill United Neighborhoods (CHUN) Denver, CO

Pre-Dental Experience:

- Full-time dental assistant 1999 with Gentle Dental PC, Cedar Rapids, IA
- Internship fall 1999 in Denver, CO with Dr. Timothy Adams, DDS, MS, private pediatric dental practice, and Dr. Diana Moore, DDS with the non-profit clinical program Kids In Need of Dentistry (KIND)

Outline for Michael R. Franzman, DDS, MS

PERIODONTAL THERAPY

OUTLINE

THIS WILL BE A TWO HOUR SEMINAR FOR DENTAL PROFESSIONALS HOW TO PREPARE AND CARE FOR THE PERIODONTAL PATIENT. THE DENTAL PROFESSIONAL WILL HAVE A REVIEW OF PERIODONTAL THERAPY INCLUDING PERSCRIPTION THERAPY, CROWN LENGTHENING, GRAFTING, AND DENTAL IMPLANT TECHNIQUES FOLLOW UP CARE FOR OUR PATIENTS

OBJECTIVES

- **REVIEWS OF ETIOLOGY OF PERIODONTAL DISEASE, RISK FACTORS HOST RESPONSE**
- **DIAGNOSIS OF PERIODONTAL DISEASE**
- **NON SURGICAL TREATMENT OF PERIODONTAL DISEASE**
- **SURGICAL TREATMENT OF PERIODONTAL DISEASE**
- **BASIC REVIEW OF TECHNIQUES FOR GINGIVAL RECESSION AND TREATMENT OPTIONS**
- **TRADITIONAL RESPECTIVE CROWN LENGTHENING FOR RESTORATIVE ACCESS AND FULL ANTERIOR ESTHETIC CROWN LENGTHENING**
- **FLAP OF GINGIVAL FOR RESTORATIVE ACCESS AND PATCHING OF EXTERNAL RESORPTION**

CONCLUSION

PARTICIPANTS WILL BE INFORMED ON

- **DENTAL IMPLANT PLACEMENT INCLUDING TOOTH EXTRACTION, SOCKET GRAFTING AND IMPLANT PLACEMENT**
- **SIMPLE ONE STAGE SINGLE TOOTH IMPLANT PLACEMENT**
- **REVIEW OF INCISION DESIGNS AND CLOSURES AND HOW THIS IMPACTS ESTHETIC OUTCOME**
- **BONE GRAFTING WHEN REMAINING BONY RIDGE IS DEFICIENT (5 MIN. VIDEO OF ONE OF MY CASES)**
- **RIDGE SPLITTING AS AN OPTION FOR THE RESORBED RIDGE**
- **POSTERIOR IMPLANT PLACEMENT CONSIDERATIONS INCLUDING SINUS SURGERY AND ANATOMICAL LANDMARKS**
- **IMMEDIATE DENTAL IMPLANT PLACEMENT**
- **MULTIPLE TOOTH REPLACEMENT**
- **DENTAL IMPLANT SUPPORTED DENTURES**

ATTN. *Mary* *Dr. Wink*

336-3457

MEETINGS FOR 2013 - 2014 DENTAL ASSISTING

**ALL MEETINGS WILL BE AT BELMONT CAMPUS
IN THE STUDENT LIFE CENTER 7pm - 9pm
UNLESS OTHERWISE INDICATED**

**(2 CEU) OCTOBER 17, 2013
PEDIATRIC DENTISTRY
DR. ALEX BRANDTNER D.D.S, M.S.**

**(2 CEU) NOVEMBER 21, 2013
ROUNDTABLES
TERRY FITZGERALD**

**(2 CEU) FEBRUARY 20, 2014
INFECTION CONTROL
TINA BALL**

**(2 CEU) MARCH ¹³~~20~~, 2014
CHAIRSIDE DENTISTRY
JODI JORGENSON**

6:30pm

*I believe this is opened.
Now we will try to
get someone!*

**(2 CEU) APRIL ¹⁴~~17~~, 2014
PERIODONTICS
DR. MICHAEL FRANZMAN, D.D.S., M.S**

6:30pm

**CALL MAUREEN MOSSE' @386-8658 OR PATTI
ENSEY @332-7734 WITH QUESTIONS
MAY - STATE MEETING IN IOWA CITY
MANY CEU'S AVAILABLE**

Description	Value
Final Acknowledgements (2)	
Application Signature	<input type="radio"/> Yes <input type="radio"/> No
Application Signature Date	Select Date
Course Hours (2)	
Hours Requested	1
Hours Awarded	Enter Number
Course Details (9)	
Course Subject	Clinical practice
Course Title	Nuts and Bolts of Providing Care to Patients Living With HIV
Course Presenter	Mona Van Kanegan, DDS
Location 1	webinar
Date 1	Mar 26, 2014
Location 2	Enter Text or Number
Date 2	Select Date
Location 3	Enter Text or Number
Date 3	Select Date
Sponsor Details (6)	
Number of Courses per year	Enter Number
Type of Organization	Individual
Name of Sponsoring Organization	Iowa Primary Care Association
Educational Methods 1	Lecture
Educational Methods 2	Participation
Educational Methods 3	Discussion

Iowa Primary Care Association would like to provide live webinar trainings to their dental providers on providing dental care to patients living with HIV. We would like to offer three- one hour webinars that would provide 1 hour of continuing education for each webinar attended.

3 webinar trainings (45 minutes with 10-15 for questions)

Webinar 1

Title: Nuts and Bolts of Providing Care to Patients Living With HIV

Course objectives:

- Identify current trends in the HIV epidemic and their implications for clinical care.
- Describe laboratory tests used to diagnosis HIV and assess a patient's status.
- Holistic health in HIV care includes addressing oral health problems
- Discuss pertinent factors in the medical and laboratory assessment.
- Routine preventive and treatment care plan

Webinar 2

Title: Unique Oral Health Needs In Patients With Compromised Immune Systems

- What are the major dental concerns for people living with HIV?
- Treatment plan, recall intervals and other modifications
- Diagnosis & treatment of common presentations of immune system dysfunction
- Other oral conditions in an HIV patient

Webinar 3

Case Based Reviews & Discussion

- Review submitted cases if any from webinar participants
- Review instructor prepared cases if participants do not provide
- Review common oral health problems in HIV patients

Curriculum Vitae

Name Mona Van Kanegan
Contact Information 815 W. 14th Place
Chicago, Illinois 60608
312-733-7537
mvankanegan@gmail.com

Education

Student
MPH Track Community Health Sciences
Current University of Illinois
School of Public Health
Chicago, Illinois

Doctor of Dental Surgery
1989-1995 University of Illinois
Chicago, Illinois
College of Dentistry
DDS

Masters Degree
1990-1995 University of Illinois
Chicago, Illinois
Department of Biochemistry
M. S. Biochemistry

Bachelor's Degree
1985-1989 University of Illinois,
Urbana, Illinois
B.S. Biochemistry

Career Development

Excell Leadership Program, National Association of Community Health Centers. Through a competitive national application process, 15 community health centers were selected to participate in a one-year leadership development program. Growth opportunities were identified by means of a 360-degree skills and leadership assessment. The identified areas were then addressed through executive coaching and course work.

Professional Organizations

American Dental Association
Illinois State Dental Society
Chicago Dental Society
National Network for Oral Health Access
IFLOSS Coalition

Committee Memberships Past and Present

ISDS Access to Care Committee
Alliance of Community Health Centers, Electronic Health Record System Clinician's Committee
Illinois Children's Healthcare Foundation Advisory Council
Heartland Alliance Cabinet
Heartland Health Outreach Quality Management Team
Daystar School Board, Vice President and Chair of Finance Committee

Professional Experience

6/98 to Present

I am the Dental Director for the Midwest AIDS Training and Education Center. In this role I am responsible for oral health and HIV/AIDS educational programs and support of clinicians in the MATEC six-state region. I lecture widely in the Midwest region on HIV issues to professional groups and at meetings.

7/2002 to Present

Adjunct Faculty, University of Illinois College of Dentistry, Extramural Program. Adjunct faculty at the health center participate in the student's off campus clinical training by providing experiences in the treatment of underserved populations of many cultural backgrounds.

11/05 to Present

Chicago Community Health Center, Dental Consultant
From time to time, I accept dental consult projects that seek to implement, evaluate, improve or expand oral health services at community health centers. Past three projects have included: writing for grants for new funding, implementation of oral health services within the community health center, development of service delivery plan, policies and procedures, equipping of a six-chair comprehensive care clinic, retrofitting existing clinic, recruitment of staff, training existing staff, and development of a quality management plan.

7/08 to Present

Director, Dental Program Development
Heartland Health Outreach

I work to expand dental programs of Heartland Health Outreach and other health center programs through advocacy of infrastructure, capacity and improved efficiency. My work objectives on the Chicago Community Oral Health Forum include 1) improve access to oral health services city-wide, 2) collect community based dental needs data and 3) promote network of public health programs in Chicago.

1/2010 to Present

Dentist, Erie Family Health Center

I worked with Erie Family to design a program that meets the needs of the HIV patient accessing medical care at the health center. Since that beginning, I have worked there as a clinician limiting my oral health practice to meeting the urgent and comprehensive oral health needs of persons with HIV.

1/01 to 6/2008

Director of Dentistry
Heartland Health Outreach
Heartland Spang Center for Oral Health
1010 W Lawrence Ave., 2nd Floor
Chicago, IL 60640
mvankanegan@heartlandalliance.org

Under my direction as the Director of Dentistry for the Heartland Spang Center for Oral Health:

- Service sites increased from two to five fully functional clinics,
- Spang Center received an expansion grant through the Community Health Center program (current budget \$200,000),
- Spang Center obtained new funding through the Health Care for the Homeless program (budget \$450,000),

M. Van Kanegan CV 2011

- Spang Center obtained an \$100,000 increase in Chicago Department of Public Health Title I program (current budget \$388,000,
- Founding and continuing community partner on UIC's Chicago AIDS Network-Dental Outreach grant,
- Spang Center obtained a \$250,000 grant to implement a school based oral health program at Nicholas Senn High School.

The day-to-day functioning of the five Spang Center for Oral Health clinics entail:

- Monitoring progress and maintaining compliance of grants (Ryan White Care Act Title I and Title III, 330-CHC, Health Care for the Homeless and varying numbers of foundation grants),
- Managing our quality and patient grievance programs,
- Supervision of six dentists,
- Recruitment and retention of providers,
- Developing and monitoring clinic budgets,
- Aid in writing grant proposals,
- Negotiating contracts and subcontracts,
- Work with UIC's CAN-DO partnership to prepare dental students for clinical rotations,
- Work with Heartland Health Outreach's Primary Care Services, and Mental Health and Addiction Services to provide integrated care to patients.

I have made numerous presentations at local, state and national meetings on the topics of HIV and homeless patient care, development of partnerships to introduce or expand oral health programs. In addition, I have provided in-services to individual and teams seeking to provide oral health care to HIV positive persons.

5/1996 to 12/2000

Dentist
Heartland Health Outreach
Heartland Spang Center for Oral Health
Chicago, Illinois

As a clinical dentist, I spent most of my time chair side providing comprehensive care. This included: urgent care, general dentistry, and the diagnosis and treatment of oral pathologies. The target population that the Heartland Spang Center for Oral Health clinics serve is HIV/AIDS impacted individuals, homeless and low-income community residents.

9/95 to 4/96

Clinical Associate
College of Dentistry
University of Illinois
Chicago, Illinois

In my position as a Clinical Associate, I worked closely with Dr. Mario Alves providing comprehensive oral health care to the HIV+ patient population which presented to the College of Dentistry. I also worked in the Oral Medicine and Diagnostic Sciences clinic treating urgent care patients.

M. Van Kanegan CV 2011

Folder		People(1)	Info(2)	Fee(2)	Process(2)	Document	Comment	Attachment(2)
+ Add X Delete Save Refresh Expand All Collapse All View								
Description	Value							
Final Acknowledgements (2)								
Application Signature	Yes No							
Application Signature Date	Select Date							
Course Hours (2)								
Hours Requested	1							
Hours Awarded	Enter Number							
Course Details (9)								
Course Subject	Clinical practice							
Course Title	Unique Oral Health Needs In Patients With Compromised Immune Systems							
Course Presenter	Mona Van Kanegan, DDS							
Location 1	webinar							
Date 1	Apr 23, 2014							
Location 2	Enter Text or Number							
Date 2	Select Date							
Location 3	Enter Text or Number							
Date 3	Select Date							
Sponsor Details (6)								
Number of Courses per year	Enter Number							
Type of Organization	Individual							
Name of Sponsoring Organization	Iowa Primary Care Association							
Educational Methods 1	Discussion							
Educational Methods 2	Lecture							
Educational Methods 3	Participation							

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M. Van Kanegan CV 2011

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Description	Value							
▼ Final Acknowledgements (2)								
Application Signature	<input type="radio"/> Yes <input type="radio"/> No							
Application Signature Date	Select Date							
▼ Course Hours (2)								
Hours Requested	1							
Hours Awarded	Enter Number							
▼ Course Details (9)								
Course Subject	Clinical practice							
Course Title	Case Based Reviews & Discussion							
Course Presenter	Mona Van Kanegan							
Location 1	Webinar							
Date 1	May 21, 2014							
Location 2	Enter Text or Number							
Date 2	Select Date							
Location 3	Enter Text or Number							
Date 3	Select Date							
▼ Sponsor Details (6)								
Number of Courses per year	Enter Number							
Type of Organization	Individual							
Name of Sponsoring Organization	Iowa Primary Care Association							
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Educational Methods 2	Participation							
Educational Methods 3	Choose							

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+ Add X Delete Save Refresh Expand All Collapse All View

Description	Value
Final Acknowledgements (2)	
Application Signature	<input type="radio"/> Yes <input checked="" type="radio"/> No
Application Signature Date	01/30/2014
Course Hours (2)	
Hours Requested	1
Hours Awarded	Enter Number
Course Details (9)	
Course Subject	Clinical practice
Course Title	Improving Orthodontics, Improving Lives
Course Presenter	Jordan Poss
Location 1	4611 Morlensen Rd, Ste 108, Ames, IA 50014
Date 1	Apr 17, 2014
Location 2	Enter Text or Number
Date 2	Select Date
Location 3	Enter Text or Number
Date 3	Select Date
Sponsor Details (6)	
Number of Courses per year	30
Type of Organization	Individual
Name of Sponsoring Organization	Cassady Orthodontics
Educational Methods 1	Lecture
Educational Methods 2	Choose
Educational Methods 3	Choose

Dr. Jordan Poss

Dr. Julie Cassaidy

Improving Orthodontics, Improving Smiles

Topics

- * Why braces?
- * Malocclusion basics
- * Digital records
- * Appliances
 - * Metal braces
 - * Ceramic braces
 - * Invisalign™
 - * Lingual braces
 - * Class II correctors
- * Advanced techniques
 - * Lasers
 - * TADs

Why Braces?

- * Braces are almost always elective, however its benefits are numerous
- * Having straight, healthy teeth in proper occlusion:
 - * Easier to clean
 - * Teeth occluding on proper, load-bearing area of teeth which can lessen improper wear
 - * Improve periodontal health
 - * Improve chewing efficiency (Class I>Class II>Class III)
- * Keep in mind that these are the teeth you will hopefully have until you're 120 years old.

Why Braces?

“A smile is the light in your window that tells others that there is a caring, sharing person inside.”

Denis Waitley

“Wear a smile and have friends; wear a scowl and have wrinkles.”

George Eliot

It's about the smile!!

“A warm smile is the universal language of kindness.”

William Arthur Ward

“A smile is a curve that sets everything straight.”

Phyllis Diller

“What sunshine is to flowers, smiles are to humanity. These are but trifles, to be sure; but scattered along life's pathway, the good they do is inconceivable.”

Joseph Addison

“Always keep your smile. That's how I explain my long life.”

Jeanne Calment

Why Braces?

* Smile Studies

- * Baseball cards
- * People's perceptions
- * Judging a date
- * Bullying
- * Self-esteem

Malocclusion Basics



Class I



Class II



Class III

Malocclusion Basics



Crowding



Spacing



Malocclusion Basics



Deep Bite



Open Bite



Posterior Cross Bite



Anterior Cross Bite

Malocclusion Basics



Impacted Canines

Malocclusion Basics



Missing Teeth

Technology

- * Improvement in orthodontic technology, especially in the past 20 years, has made treatment more efficient, predictable, comfortable and affordable.
- * We like to keep things simple. Our entire practice is built around two things: giving patients a great experience and fantastic results. That's it.
 - * If we think a new technology won't help improve a patient's experience or results, we won't use it.

Digital Records



Digital Records

- * Patient with radiation concerns?
 - * Daily background radiation
 - * Actuarial tables



Digital Records

- * iTero Scanner
 - * Almost universally accepted by patients as better than alginate/PVS impressions
 - * Complete scans can be completed in 6-12 minutes by an experienced assistant, which is quicker than alginate/PVS
 - * No lab work!
 - * Immediate (~3 minutes) cloud access



Digital Records



Appliances

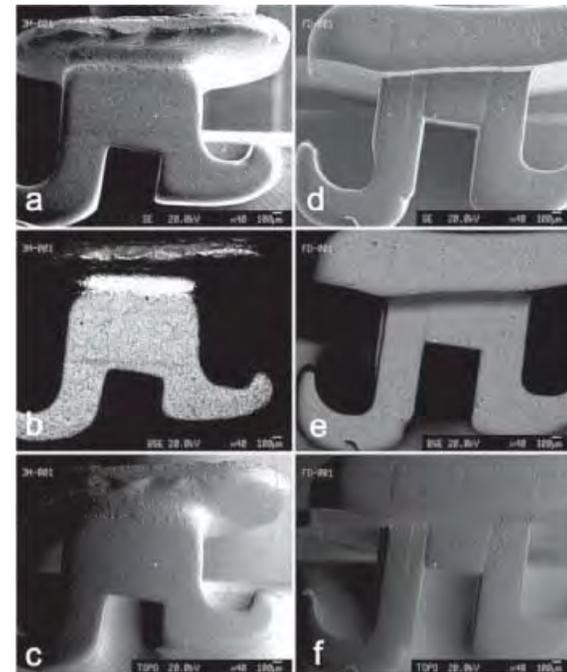
Metal Brackets

- * Metal braces
 - * Most patients have several choices, but metal braces are the appliance most selected by teen patients by a wide margin
 - * Never underestimate how important picking out colors is to patients!



Metal Brackets

- * One of the greatest advances in ortho was the invention of prescription brackets
- * We use 3M™ Victory Series
 - * They are pre-pasted with composite to make bondings faster and help brackets stay on longer
 - * Individually packaged



Ceramic Brackets

- * Ceramic brackets
 - * Now offer basically the same properties as metal brackets
 - * Can still choose any colors
 - * Not on mandibular teeth
 - * We use 3M™ Clarity Advanced™ Flash-Free brackets to give effective, predictable and efficient treatment.



C L A R I T Y™ | **ADVANCED**
advanced ceramic braces

Invisalign™

How Does Invisalign Work?

- Wear each set of Aligners for about 2 weeks.
- Remove only to eat, drink, brush, and floss.
- Teeth will move gradually each week.
- Visit doctor every 6-8 weeks.
- Total treatment time averages 10-18 months.
- Average number of Aligners is between 18 and 30.

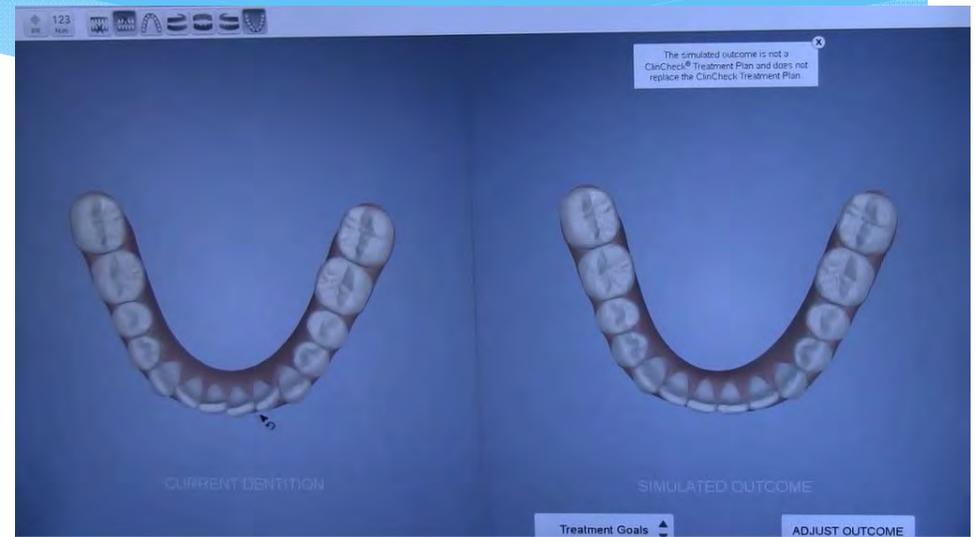


Invisalign™

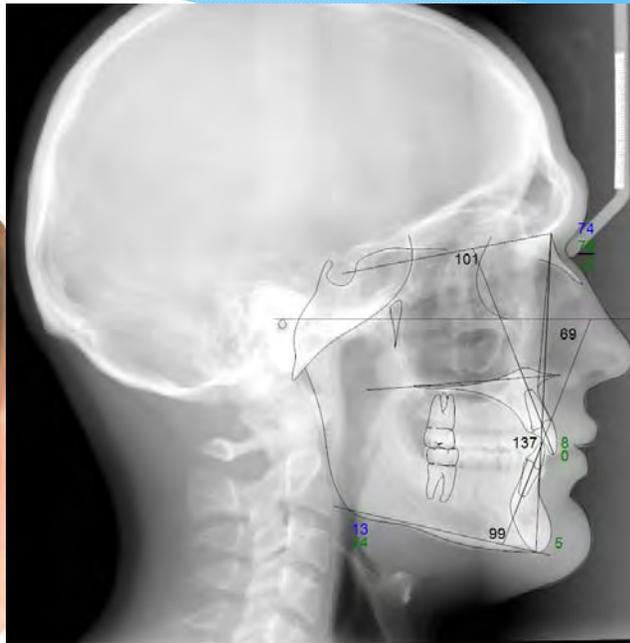
- * Invisalign™ can now treat a majority of patients
- * Invisalign Teen™ has special features geared towards teens

Invisalign™

- * iTero™ and Invisalign™
- * Faster turnaround
- * No impressions
- * New Invisalign™ Simulator



Invisalign™



Invisalign™



Invisalign™



Lingual Braces

- * Braces on the backs of the teeth
- * Great esthetic option
- * High cost
- * We are certified in 3M Incognito™



Incognito™
Hidden Braces

Class II Correctors

- * Headgear
- * Herbst
- * Elastics
- * Forsus™
- * Carriere™
- * Extraction of maxillary first (or second) premolars
- * Surgery

Class II Correctors Headgear

- * Pros
 - * Allows lower jaw to 'catch-up' to top jaw
 - * Wear only at night
 - * No unwanted side effects
 - * Helps fix underlying skeletal problems
- * Cons
 - * Compliance!



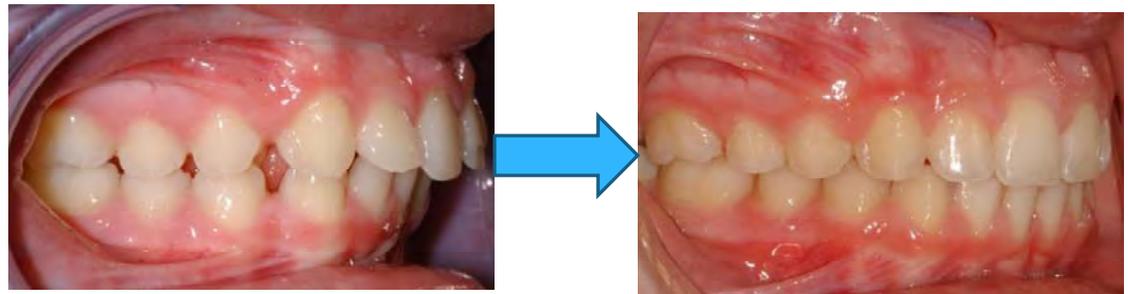
Herbst

- * Pros
 - * Accelerates growth by posturing lower jaw forward
 - * No compliance needed!
- * Cons
 - * Bulky
 - * Can push bottom teeth too far forward



Elastics

- * Pros
 - * Easy
 - * Can be used in lots of different ways
 - * 80-85% patients get at some time
- * Cons
 - * Compliance
 - * Not for large problems



Forsus™

- * Pros

- * Very effective for large discrepancies
- * No compliance needed
- * Done during braces

- * Cons

- * Can push bottom teeth too far forward
- * Can be bulky

Carriere™

- * Pros

- * Allows elastics to be worn before braces
- * Easy
- * Patients are often much more compliant at the beginning of treatment
- * Less time in braces

- * Cons

- * Compliance
- * Not for large problems



4 months



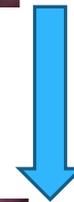
Extraction of Maxillary 1st Premolars

- * Pros

- * Often the most efficient
- * Often the only non-surgical option for adults and some teens

- * Cons

- * Requires extractions



Orthognathic Surgery

- * Pros
 - * Biggest improvements to appearance and bite
- * Cons
 - * Surgical risks
 - * Cost
 - * Only when done growing



Advanced Techniques Lasers

- * In the last 5-10 years diode lasers have got smaller, cheaper and more efficient
- * We use a Picasso™ Lite laser- small, relatively affordable (~\$2500) and enough power for ortho procedures



Lasers

Tooth Exposure



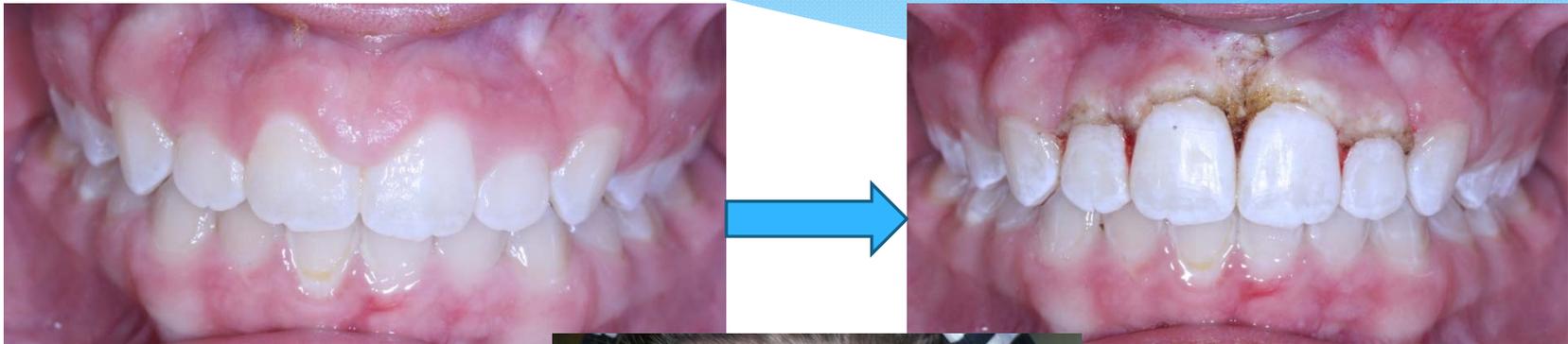
Lasers

Gingivectomy and Frenectomy



Lasers

Gingivectomy and Frenectomy



Lasers

Gingivectomy and Frenectomy



Lasers

Gingivectomy and Frenectomy



Temporary Anchorage Devices (TADs)

- * Have dramatically changed how many patients are treated
- * Newton's 3rd law of motion
- * Provide anchorage to move only the teeth we want to move

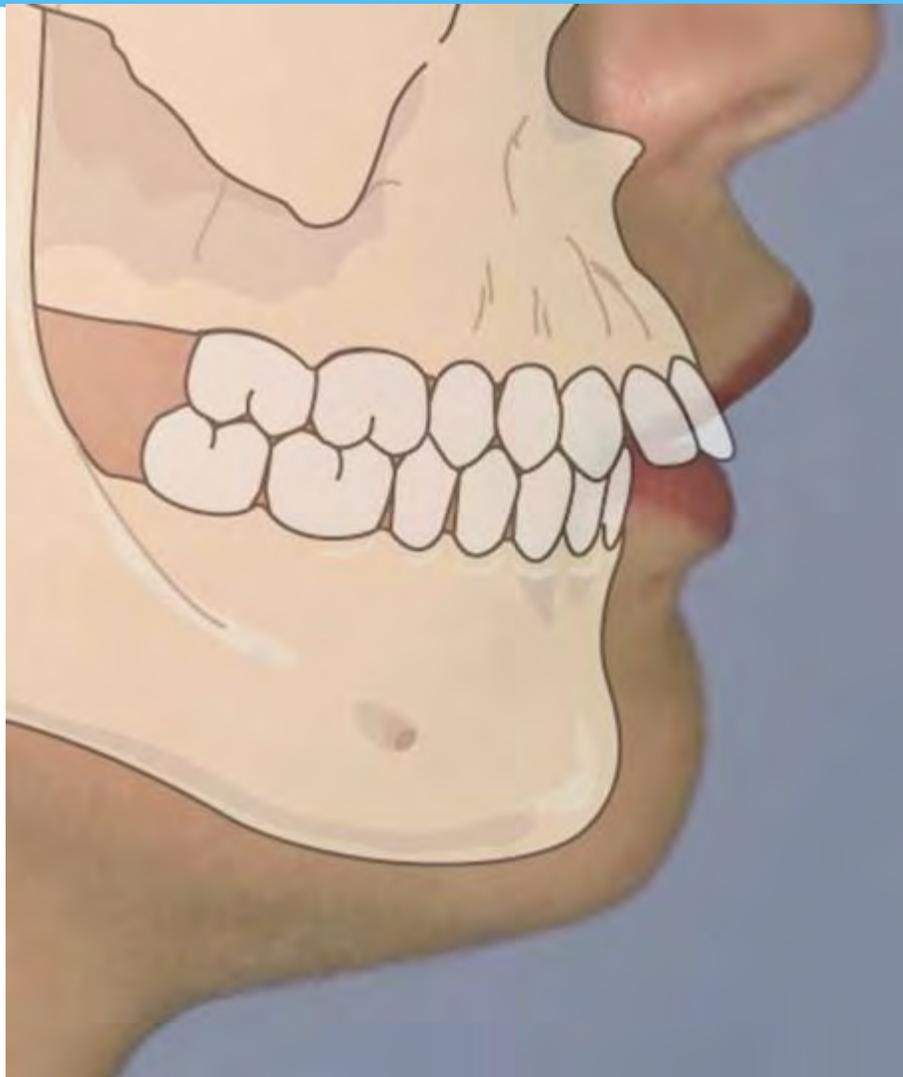


TADs

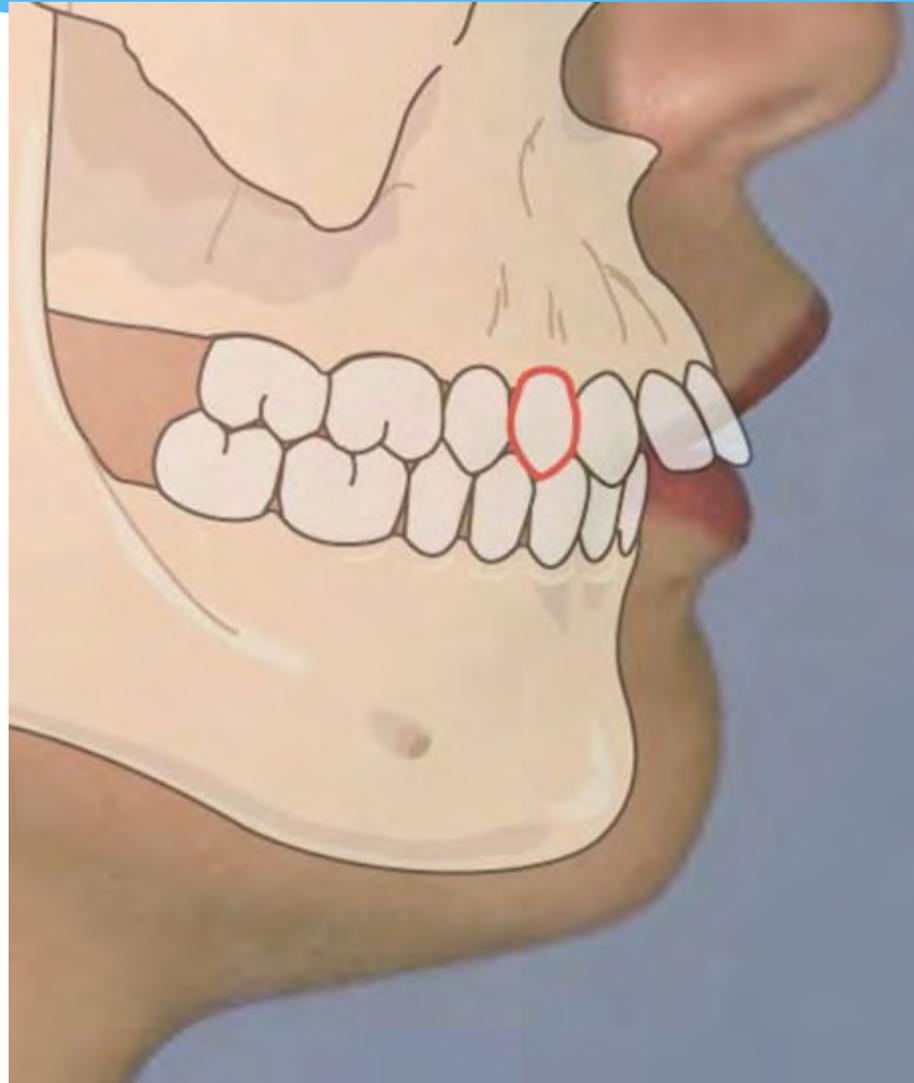
- * Done in office, placement often <5 minutes
- * Similar to lasers, most patients only need a strong topical anesthetic
- * Chlorhexidine used at home to brush around TAD
- * Simply unwind when done to take out



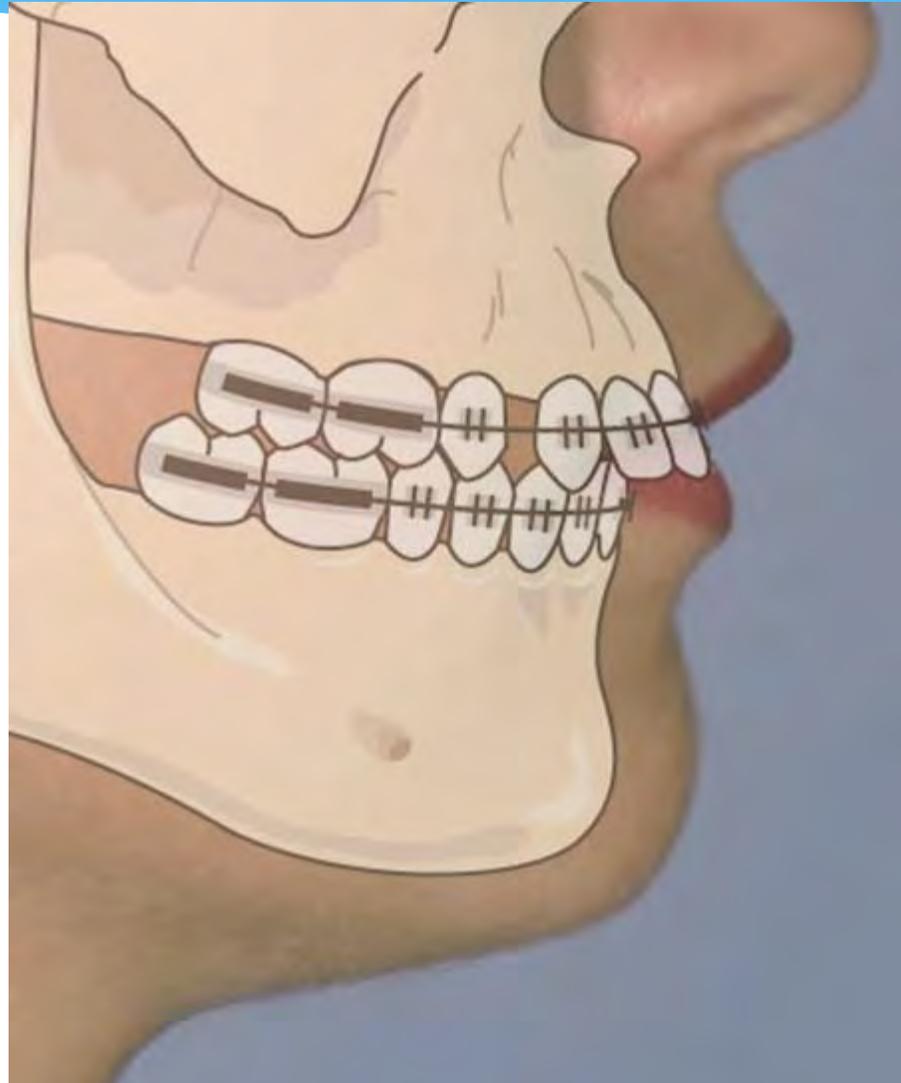
TADs



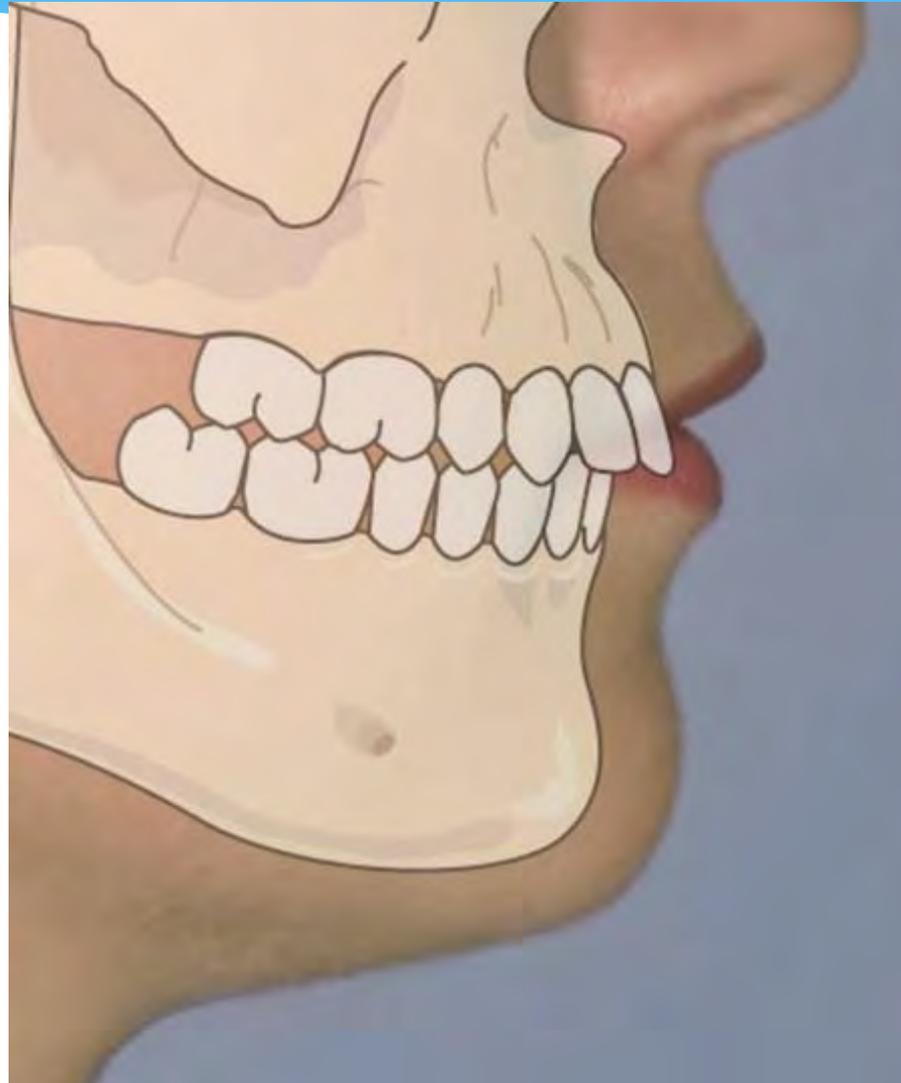
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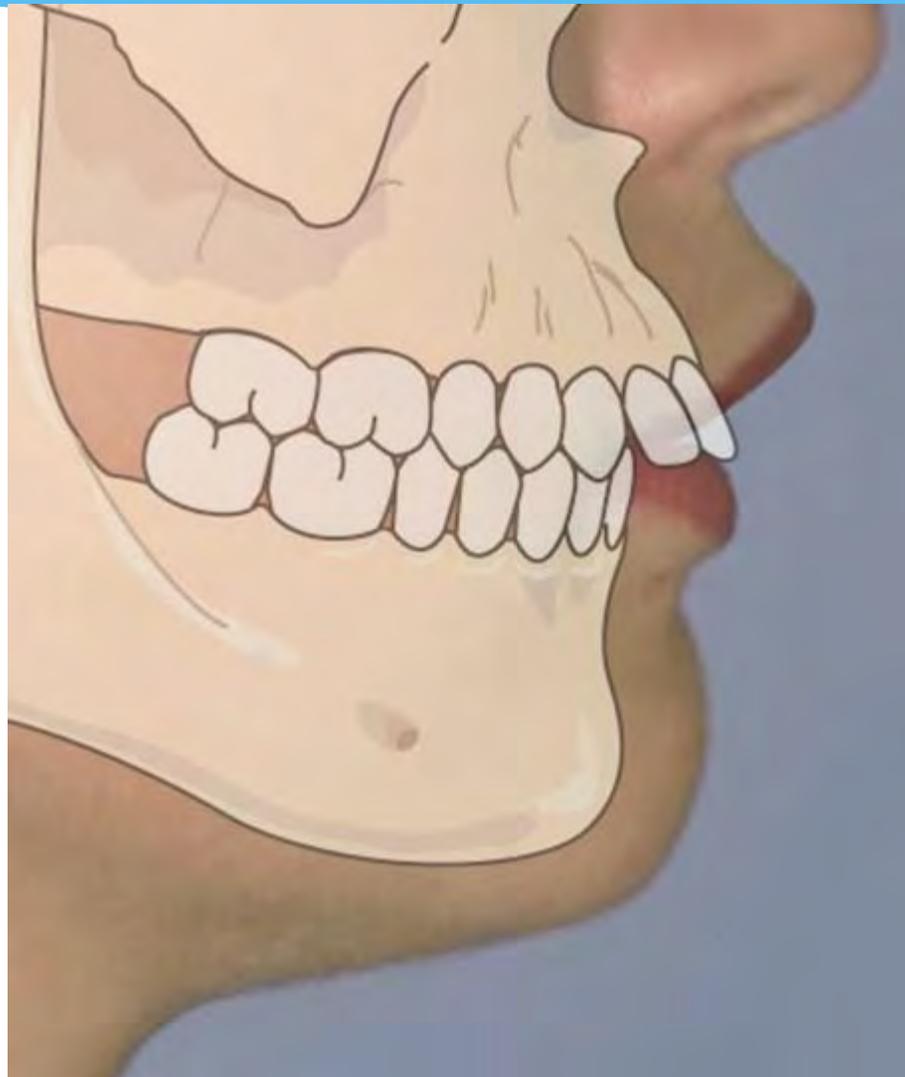
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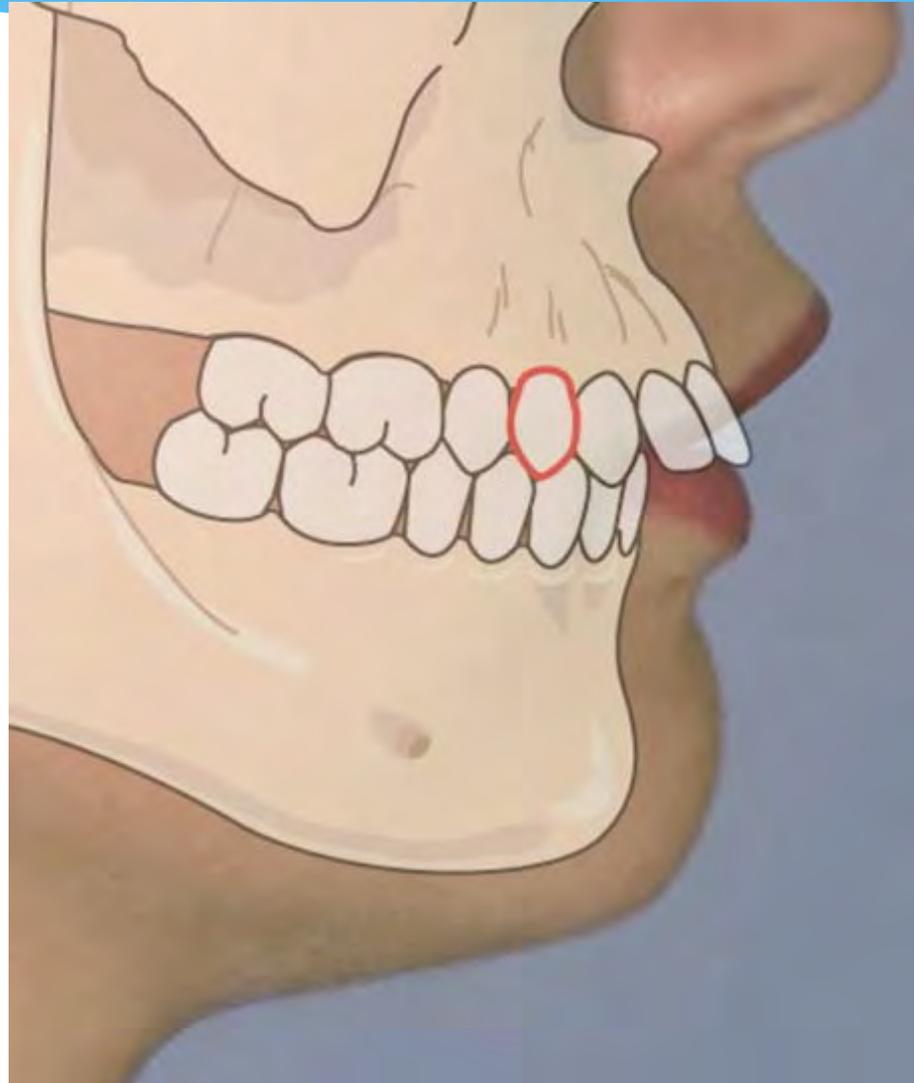
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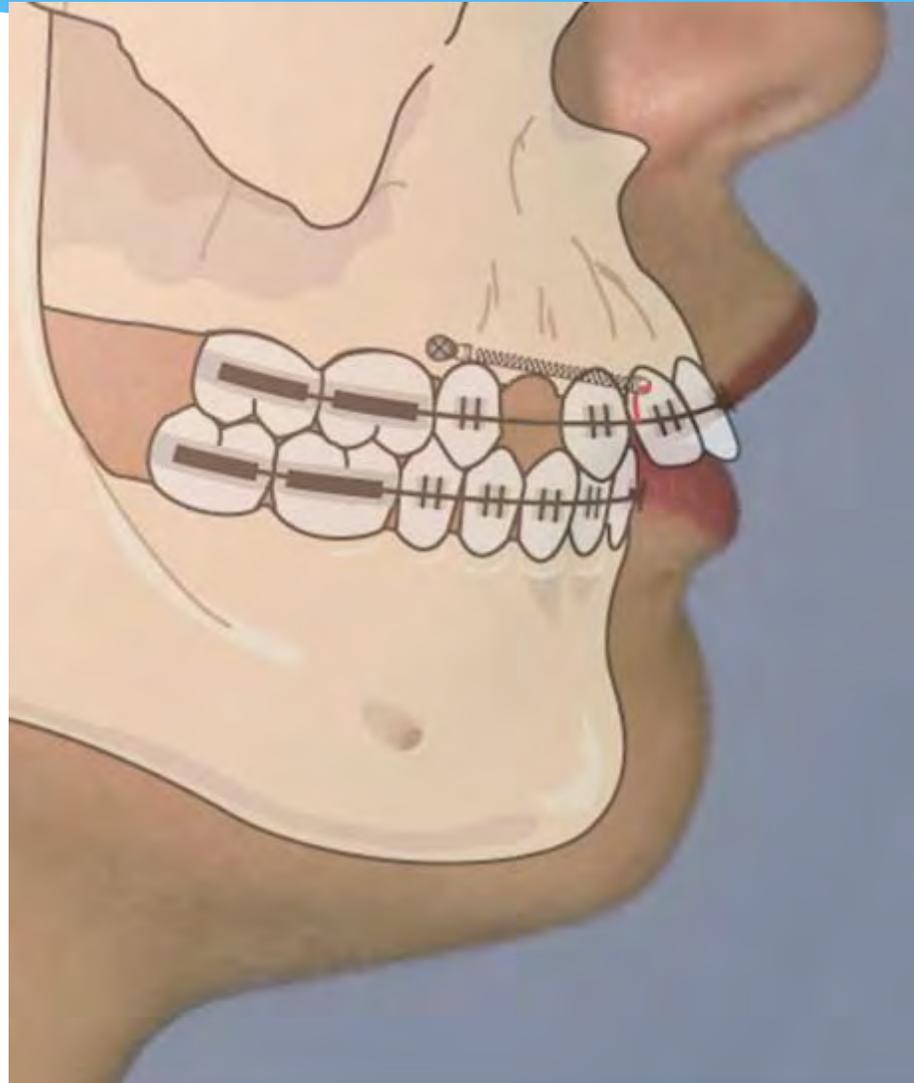
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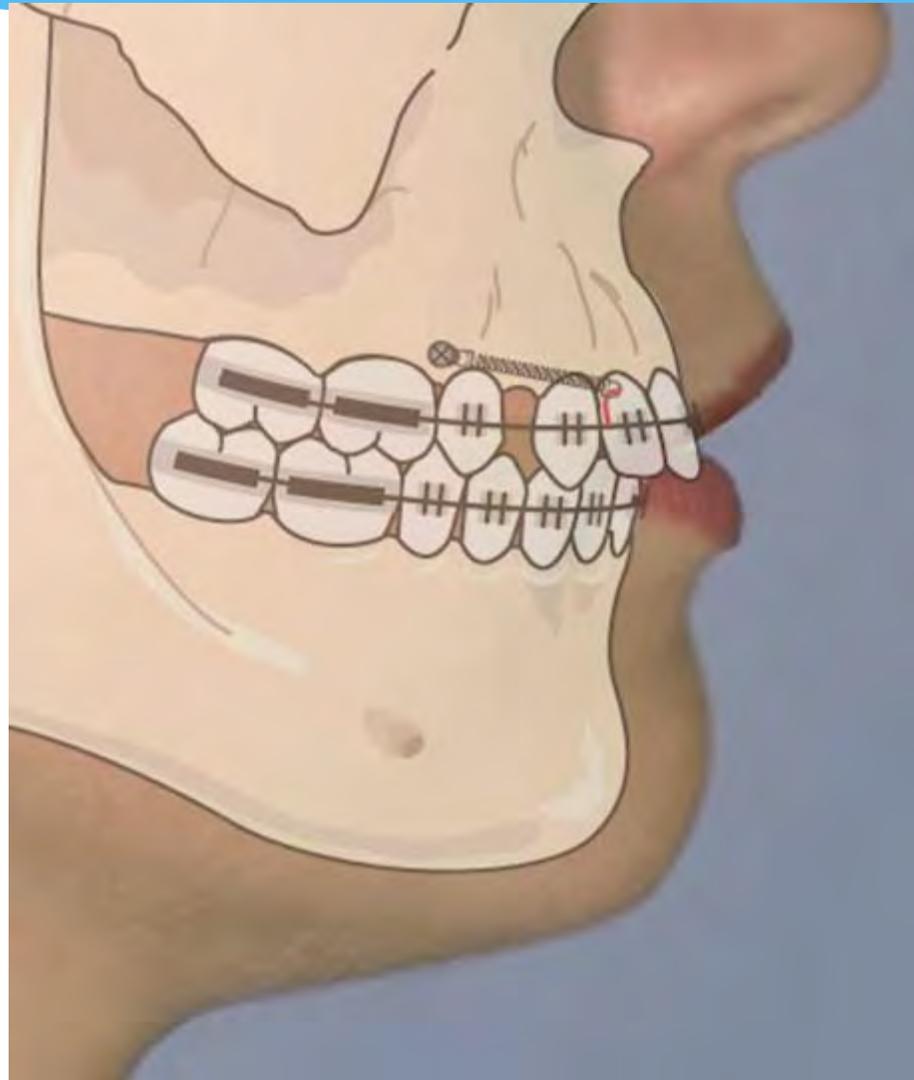
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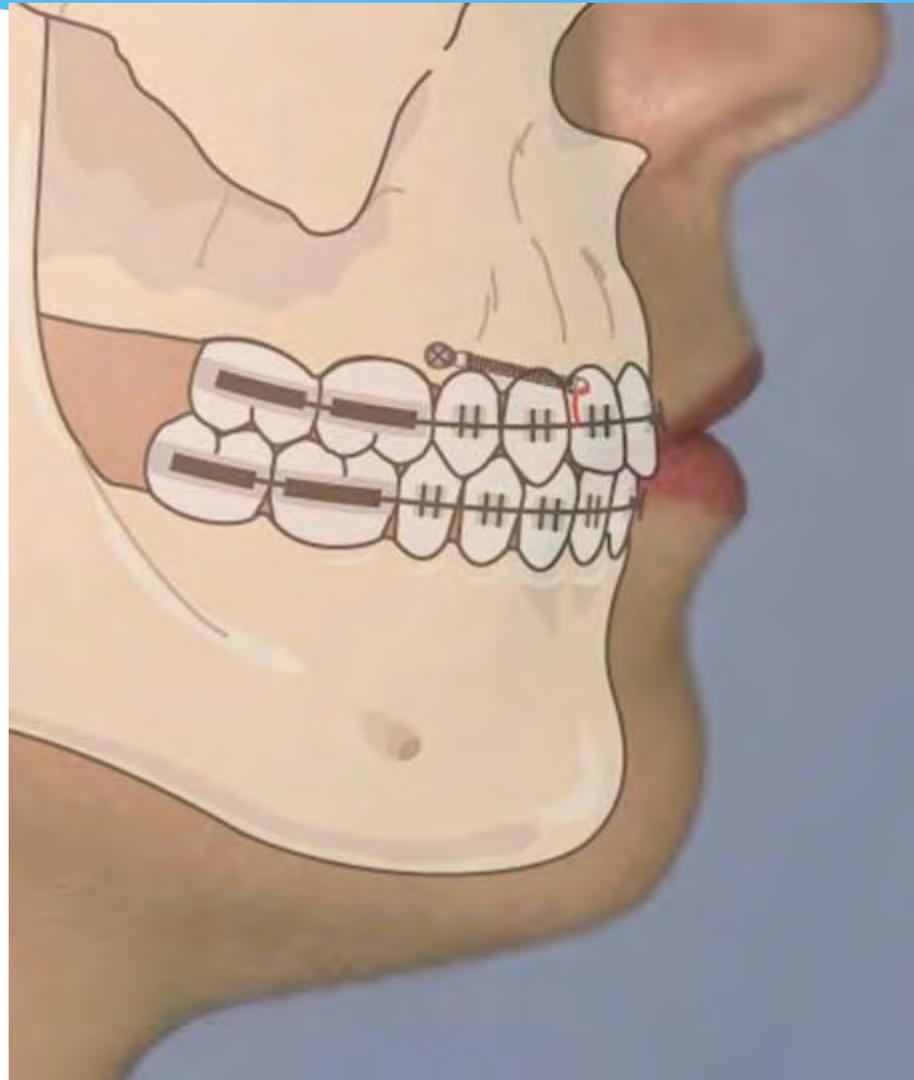
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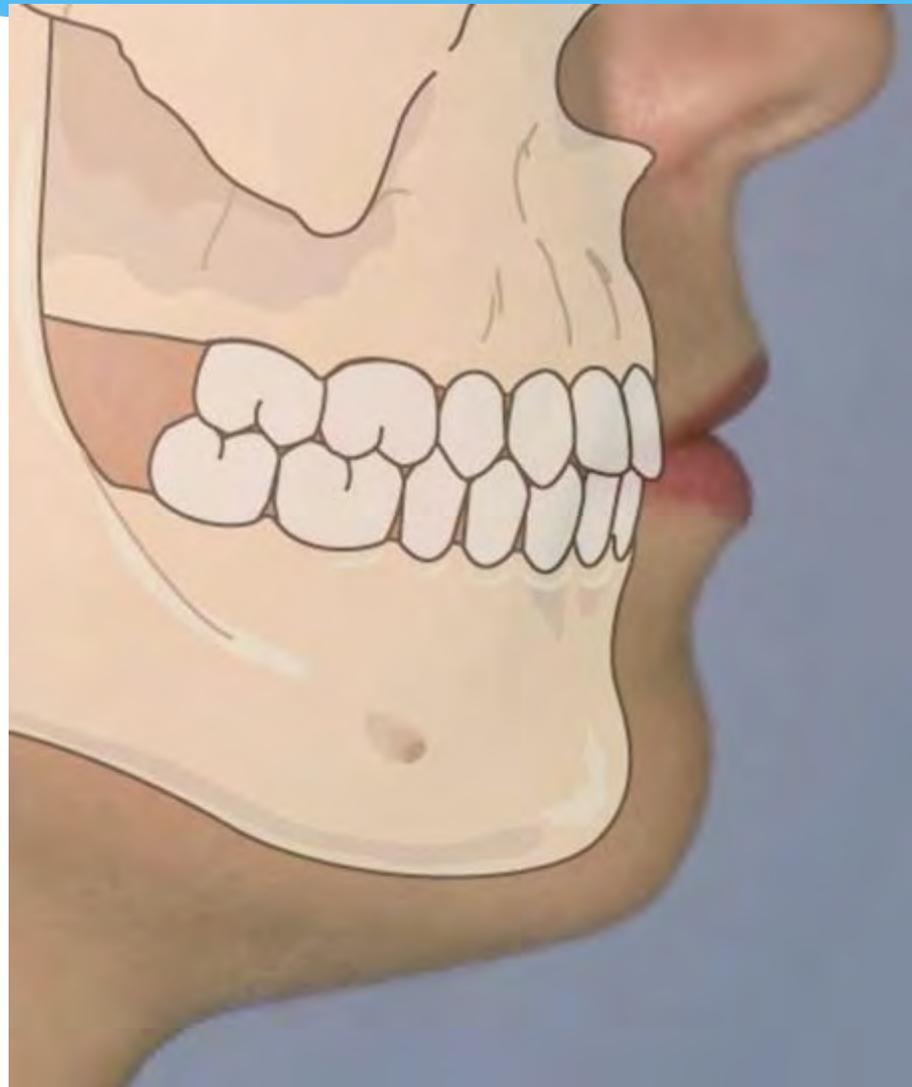
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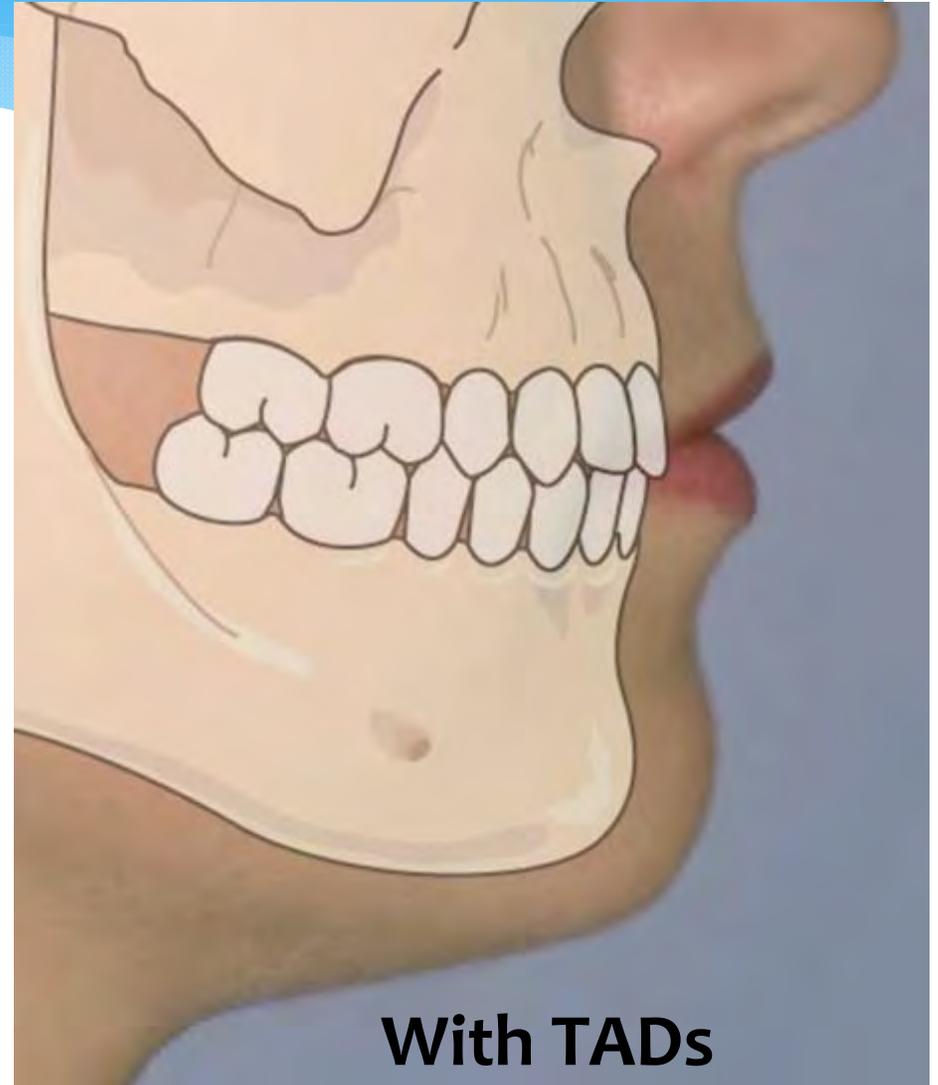
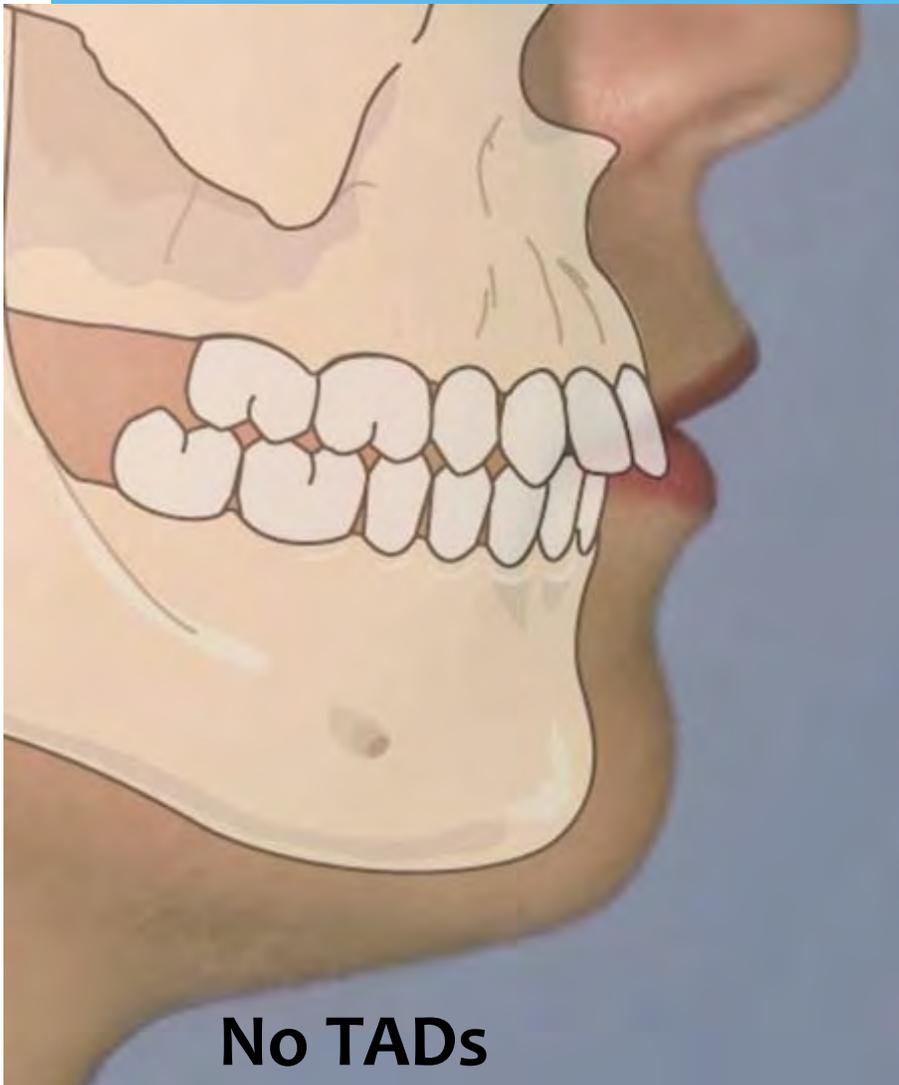
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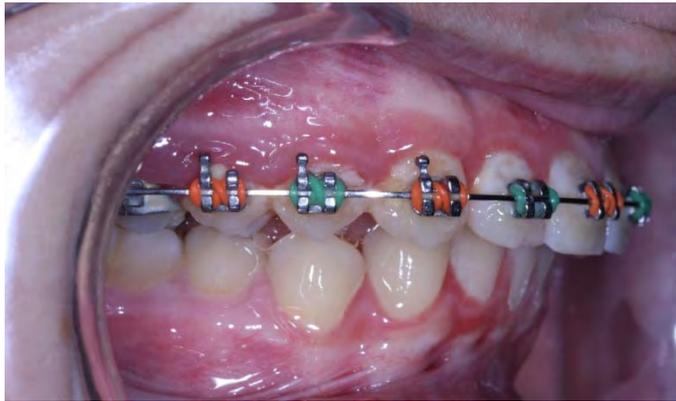
TADs



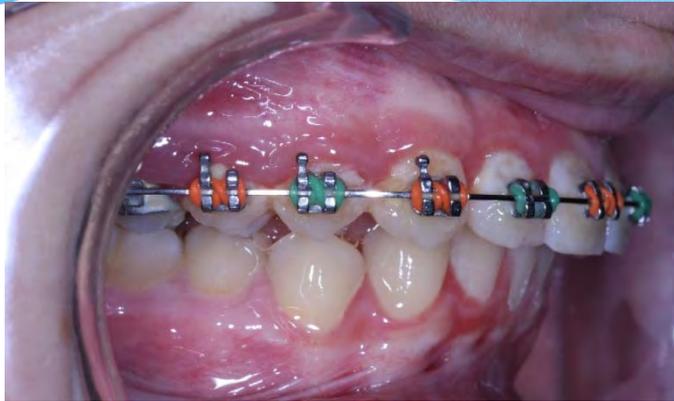
TADs



TADs



TADs



Before



2 months
after
placement



Dr. Jordan Poss

Dr. Julie Cassaidy

Improving Orthodontics, Improving Smiles

JAN 17 2014

IOWA DENTAL BOARD

January 13, 2014

To: Continuing Education Advisory Committee
C/O Christel Branness, Program Planner
Iowa Dental Board
400 SW 8th Street, Suite D
Des Moines, IA 50309-5687

Dear Sir/Madam,

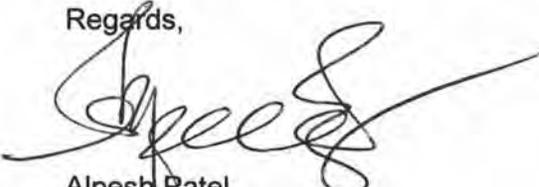
Thank you for the board/continuing education advisory committee's time in reviewing Biologix Solutions LLC's application for sponsor of continuing education courses and programs. In response to board's concern regarding lack of history as a continuing education provider, we would like to submit attached ten courses for advisory commission's approval to establish history of sponsoring continuing education activities.

Course Fee: Please apply \$100 application fee paid for sponsor application towards individual course (10 courses submitted) reviews (as per response letter.)

We are requesting continuing education advisory committee to review attached individual courses for approval in next meeting.

We will appreciate your response in regards to our application.

Regards,



Alpesh Patel
Biologix Solutions LLC



STATE OF IOWA IOWA DENTAL BOARD

TERRY E. BRANSTAD, GOVERNOR
KIM REYNOLDS, LT. GOVERNOR

PHIL MCCOLLUM
INTERIM DIRECTOR

January 10, 2014

Biologix Solutions, LLC
Attn: Alpesh Patel
1201 Alison Ln.
Darien, IL 60561

Dear Mr. Patel:

Your application for approval as a sponsor of continuing education courses and programs was submitted to the Continuing Education Advisory Committee and the Iowa Dental Board for review.

This is to advise you that the Board is unable to approve your request for sponsor status at this time. The Board determined that you may reapply for sponsor status once you have a more established history of sponsoring continuing dental education activities.

Iowa Administrative Code 650—25.4(153) Approval of sponsors.

25.4(1) An organization or person not previously approved by the board, which desires approval as a sponsor of courses, programs, or other continuing education activities, shall apply for approval to the board stating its education history for the preceding two years, including approximate dates, subjects offered, total hours of instruction presented, and names and qualifications of instructors. All applications shall be reviewed by the advisory committee on continuing education prior to final approval or denial by the board.

The Continuing Education Advisory Committee, in making its recommendation to the Board, expressed some concern regarding your lack of history as a continuing education provider in Iowa. There were also some questions regarding the online local anesthesia, and ethics courses, which are subject to regulations established in Iowa Administrative Code 650. In order to ensure that sufficient courses were eligible for credit pursuant to the Iowa Administrative Code 650, the committee made a final recommendation to deny sponsorship status until a history of offering courses in Iowa has been established.

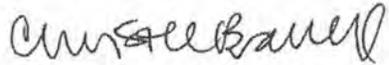
The Continuing Education Advisory Committee indicated that the fee you paid towards your sponsor application may be applied for individual course reviews, if you should choose to submit individual courses for review. Pursuant to Iowa Administrative Code 650—15.8, the fee for prior-approval or post-approval of a continuing education activity is \$10 per course. Submitting individual courses for review will establish a history as a continuing dental education provider.

*Please
Apply
to
Individual
Courses*

I have enclosed a copy of Iowa Administrative Code 650 – Chapter 25, Continuing Education. This will provide you information about subject matters which are eligible for credit.

If you have any questions, do not hesitate to contact the Board office. The staff will certainly do what they can to assist you.

Sincerely,

A handwritten signature in cursive script, appearing to read "Christel Braness".

Christel Braness
Program Planner

/cb

**APPLICATION FOR PRIOR APPROVAL OF
CONTINUING EDUCATION COURSE OR PROGRAM**

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
515-281-5157
www.dentalboard.iowa.gov

Note: A fee of \$10 *per course* is required to process your request. PLEASE TYPE OR PRINT.

1. Name of organization or person requesting approval: Biologix Solutions LLC
Address: 1201 Alison Ln., Darien, IL 60561
Phone: 630-706-0093 Fax: 630-206-2475 E-mail: admin@blxtraining.com

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
- Dental School
- Dental Hygiene School
- Dental Assisting School
- Military
- Other (please specify): Continuing Education Provider

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

4. Course Title: Proper Prescribing, Medical Errors Prevention, Safe Drug Disposal

5. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

6. Course date: Online Independent Self-Study Hours of instruction: 2 Hours

7. Provide the name(s) and briefly state the qualifications of the speaker(s): _____

Dr. Tom Karginis, DMD - Over 25 years of experience delivering comprehensive dental care to both children and adults. Family general dental services included both preventive and major dental treatment. Dr. Karginis has authored many continuing education courses for dental healthcare professionals.

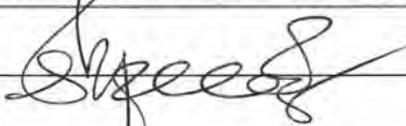
8. Please attach a program brochure, course description, or other explanatory material.

9. Name of person completing application: Alpesh Patel

Title: Continuing Education Program Director Phone Number: 630-706-0093

Fax Number: 630-206-2475 E-mail: admin@blxtraining.com

Address: 1201 Alison Ln., Darien, IL 60561

Signature:  Date: 1/13/2014

Board rules specify that the following subjects are NOT acceptable for continuing education credit: personal development, business aspects of practice, personnel management, government regulations, insurance, collective bargaining, and community service presentations.

If the course was offered by a Board approved sponsor, you should contact the sponsor directly for approval information, rather than submitting this form. A list of approved sponsors and contact information is available on the Board website at www.dentalboard.iowa.gov. Continuing education guidelines and rules are also available on the Board's website. A course is generally acceptable and does not need to go through this formal approval process if it is directly related to clinical practice/oral health care.

Pursuant to Iowa Administrative Code 650—25.3(5), please submit the application for approval 90 days in advance of the commencement of the activity. The Board shall issue a final decision as to whether the activity is approved for credit and the number of hours allowed. The Board may be unable to issue a final decision in less than 90 days. Please keep this in mind as you submit courses for prior approval.

MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE PER COURSE** TO:

**Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687**

PROPER PRESCRIBING, PREVENTION OF MEDICAL ERRORS AND SAFE DRUG DISPOSAL



This online independent self-study continuing education course has been developed for dental settings to provide evidence based information on use, abuse, misuse and disposal of prescription medications in dental healthcare settings. This continuing education course is designed to provide the most current data and strategies to improve safety in health care and avoid prescription medication errors.

Upon completion of this course, you will be able to learn:

- Proper prescribing guidelines for Dentists
 - ⇒ Writing prescriptions, handling requests for medication refills
 - ⇒ Patient evaluation
 - ⇒ Tips for reducing errors
 - ⇒ Electronic Prescription
 - ⇒ Prescription Errors and legal consequences
- Prevalence of misuse and abuse of prescription medications and controlled substances
- Dentists role in the identification of prescription abuse
- Warning signs and screening of substance abuse patients
- FDA guidelines for disposal of prescription medications
- Understand State Prescription Drug Return, Reuse and Recycling Laws

Contact Hours : 2 (Two)

Fee: \$25 Per Student

Authors: Dr. Tom Karginis, DMD, General Dentist

Teaching Method: Online Independent Self-Study Course (Training + Post-Test). Requires Computer, Internet & Adobe Flash Player.

Course Completion Certificate : A Printable (Pdf) Certificate By Email .

AGD PACE Approval: Biologix Solutions LLC is designated as an Approved PACE Program Provider by the Academy of General Dentistry. The formal continuing dental education programs of this program provider are accepted by AGD for Fellowship, Mastership, and membership maintenance credit. Approval does not imply acceptance by a state or provincial board of dentistry or AGD endorsement. The current term of approval extends from **4/20/2013 to 4/30/2017. Provider ID: 352738.**



Cancellation / Refund Policy: By completing your purchase from Biologix Solutions LLC through PayPal, you agree that you are purchasing digital, non-tangible product / service / training courses, and as such are not entitled to a refund once accessed. If you have any questions, please feel to contact us by phone or email before purchasing online course.

**APPLICATION FOR PRIOR APPROVAL OF
CONTINUING EDUCATION COURSE OR PROGRAM**

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
515-281-5157
www.dentalboard.iowa.gov

Note: A fee of \$10 *per course* is required to process your request. PLEASE TYPE OR PRINT.

1. Name of organization or person requesting approval: Biologix Solutions LLC
Address: 1201 Alison Ln., Darien, IL 60561
Phone: 630-706-0093 Fax: 630-206-2475 E-mail: admin@blxtraining.com

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
- Dental School
- Dental Hygiene School
- Dental Assisting School
- Military
- Other (please specify): Continuing Education Provider

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

4. Course Title: Management of Medical Emergencies in a Dental Clinic

5. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

6. Course date: Online Independent Self-Study Hours of instruction: 3 Hours

7. Provide the name(s) and briefly state the qualifications of the speaker(s): _____

Dr. Tom Karginis, DMD - Over 25 years of experience delivering comprehensive dental care to both children and adults. Family general dental services included both preventive and major dental treatment. Dr. Karginis has authored many continuing education courses for dental healthcare professionals.

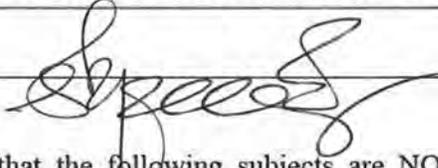
8. Please attach a program brochure, course description, or other explanatory material.

9. Name of person completing application: Alpesh Patel

Title: Continuing Education Program Director Phone Number: 630-706-0093

Fax Number: 630-206-2475 E-mail: admin@blxtraining.com

Address: 1201 Alison Ln., Darien, IL 60561

Signature:  Date: 1/13/2014

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MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE PER COURSE** TO:

**Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687**

MANAGEMENT OF MEDICAL EMERGENCIES IN A DENTAL CLINIC



This online independent self-study course has been developed for dental settings to provide evidence based information on management of common medical emergencies in a dental clinic. The course work is designed by General Dentist with over 25 years of experience in general dentistry.

Upon completion of this course, you will be able to:

- Describe emergency preventive procedures and preparedness in the dental office.
- Explain the importance of obtaining a pretreatment health history from each patient.
- Describe the procedure for obtaining a blood pressure, pulse, respirations, and temperature.
- Demonstrate the initial sequence of patient assessment in an emergency.
- Identify how stress and anxiety can lead to medical emergencies.
- Recognize the signs or symptoms of impending or developing emergencies.
- List the general steps to be taken when a medical emergency arises in a dental office.
- Identify the type of emergency when given a patient situation and describe the necessary emergency care.
- Identify the contents of an emergency kit.
- Describe the medico-legal implications of medical emergencies.

Contact Hours : 3 (Three)

Fee: \$30 Per Student

Authors: Dr. Tom Karginis, DMD, General Dentist

Teaching Method: Online Independent Self-Study Course (Training + Post-Test). Requires Computer, Internet & Adobe Flash Player.

Course Completion Certificate : A Printable (Pdf) Certificate By Email .



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Provider ID: 352738.

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Address: 1201 Alison Ln., Darien, IL 60561
Phone: 630-706-0093 Fax: 630-206-2475 E-mail: admin@blxtraining.com

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
- Dental School
- Dental Hygiene School
- Dental Assisting School
- Military
- Other (please specify): Continuing Education Provider

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

4. Course Title: Substance Abuse - Chemical Dependency

5. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

6. Course date: Online Independent Self-Study Hours of instruction: 3 Hours

7. Provide the name(s) and briefly state the qualifications of the speaker(s): _____

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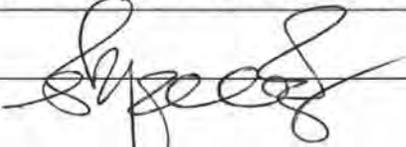
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Title: Continuing Education Program Director Phone Number: 630-706-0093

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Address: 1201 Alison Ln., Darien, IL 60561

Signature:  Date: 1/13/2014

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MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE PER COURSE** TO:

**Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687**

SUBSTANCE ABUSE CHEMICAL DEPENDENCY FOR DENTAL PROFESSIONALS



This online independent self-study course has been developed for dental settings to provide evidence based information on effect of substance abuse or chemical dependency on oral health. The course work is designed by General Dentist with over 25 years of experience in general dentistry.

Upon completion of this course, you will be able to learn:

- Understand difference between substance abuse, chemical dependency, and drug addiction.
- Prevalence of substance abuse in the United States.
- Understand the pathophysiology and neurological aspects of substance abuse and addictions.
- Commonly abused drugs and substances.
- Classification and characteristics of commonly used substances.
- Clinical manifestation of commonly used substances.
- Treatment options for substance abuse or addiction.
- Recognizing drug-abusing behavior of substance abuse and dependency.
- Screening tools available for dental healthcare professionals.
- Substance abuse among oral healthcare professionals.

Contact Hours : 3 (Three)

Fee: **\$30 Per Student**

Dr. Tom Kazgianis, DMD

Teaching Method: Online Independent Self-Study Course (Training + Post-Test). Requires Computer, Internet & Adobe Flash Player.

Course Completion Certificate : A Printable (Pdf) Certificate By Email .



AGD PACE Approval: Biologix Solutions LLC is designated as an Approved PACE Program Provider by the Academy of General Dentistry. The formal continuing dental education programs of this program provider are accepted by AGD for Fellowship, Mastership, and membership maintenance credit. Approval does not imply acceptance by a state or provincial board of dentistry or AGD endorsement. The current term of approval extends from **4/20/2013 to 4/30/2017**.
Provider ID: 352738.

Cancellation / Refund Policy: By completing your purchase from Biologix Solutions LLC through PayPal, you agree that you are purchasing digital, non-tangible product / service / training courses, and as such are not entitled to a refund once accessed. If you have any questions, please feel to contact us by phone or email before purchasing online course.

**APPLICATION FOR PRIOR APPROVAL OF
CONTINUING EDUCATION COURSE OR PROGRAM**

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
515-281-5157
www.dentalboard.iowa.gov

Note: A fee of \$10 *per course* is required to process your request. PLEASE TYPE OR PRINT.

1. Name of organization or person requesting approval: Biologix Solutions LLC
Address: 1201 Alison Ln., Darien, IL 60561
Phone: 630-706-0093 Fax: 630-206-2475 E-mail: admin@blxtraining.com

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
- Dental School
- Dental Hygiene School
- Dental Assisting School
- Military
- Other (please specify): Continuing Education Provider

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

4. Course Title: Impact of Tobacco on Oral Health & Smoking Cessation

5. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

6. Course date: Online Independent Self-Study Hours of instruction: 3 Hours

7. Provide the name(s) and briefly state the qualifications of the speaker(s): _____

Dr. Stephen Lau, DDS - Over 20 years of experience delivering comprehensive dental care to both children and adults. Family general dental services included both preventive and major dental treatment. dental treatment. Dr. Lau has authored many continuing education courses for dental healthcare professionals.

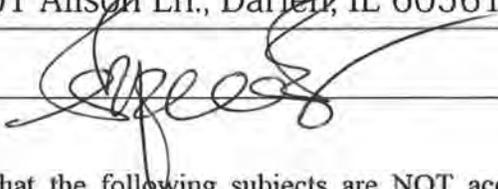
8. Please attach a program brochure, course description, or other explanatory material.

9. Name of person completing application: Alpesh Patel

Title: Continuing Education Program Director Phone Number: 630-706-0093

Fax Number: 630-206-2475 E-mail: admin@blxtraining.com

Address: 1201 Alison Ln., Darien, IL 60561

Signature:  Date: 1/13/2014

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Des Moines, Iowa 50309-4687**

IMPACT OF TOBACCO USE ON ORAL HEALTH & SMOKING CESSATION



This online independent self-study course has been developed for dental settings to provide evidence based information on Impact of tobacco use on oral health and smoking cessation. The course work is designed by General Dentist with over 25 years of experience in adult dentistry.

Upon completion of this course, you will be able to learn:

- The impact of tobacco on oral health, and information on tobacco cessation.
- Prevalence of tobacco use in the US population.
- Impact of tobacco use on oral and systemic health.
- Understand the biochemical and genetic factors associated with tobacco's impact on oral health.
- Health effect of quitting tobacco use.
- Tobacco cessation in a dental practice.
- Tobacco cessation methods and programs.

Contact Hours : 3 (Three)

Fee: \$30 Per Student

Authors: Dr. Stephen Lau, DDS, General Dentist
Sree Muppa, MPH,MBA, Public Health Specialist

Teaching Method: Online Independent Self-Study Course (Training + Post-Test). Requires Computer, Internet & Adobe Flash Player.

Course Completion Certificate : A Printable (Pdf) Certificate By Email .



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**APPLICATION FOR PRIOR APPROVAL OF
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IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
515-281-5157
www.dentalboard.iowa.gov

Note: A fee of \$10 *per course* is required to process your request. PLEASE TYPE OR PRINT.

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Address: 1201 Alison Ln., Darien, IL 60561

Phone: 630-706-0093 Fax: 630-206-2475 E-mail: admin@blxtraining.com

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
- Dental School
- Dental Hygiene School
- Dental Assisting School
- Military
- Other (please specify):

Continuing Education Provider

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

4. Course Title: HIPAA (Health Insurance Portability & Accountability Act)

5. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

6. Course date: Online Independent Self-Study

Hours of instruction: 1 Hour

7. Provide the name(s) and briefly state the qualifications of the speaker(s): _____
Sree Muppa, MPH, MBA

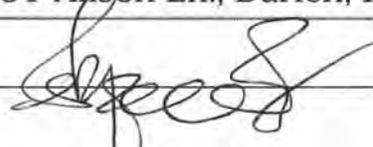
8. Please attach a program brochure, course description, or other explanatory material. *Attached*

9. Name of person completing application: Alpesh Patel

Title: Continuing Education Program Director Phone Number: 630-706-0093

Fax Number: 630-206-2475 E-mail: admin@blxtraining.com

Address: 1201 Alison Ln., Darien, IL 60561

Signature:  Date: 1/13/2014

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**Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687**

HEALTH INSURANCE PORTABILITY & ACCOUNTABILITY ACT (HIPAA)

Protect
Patient
Information



The Health Insurance Portability and Accountability Act (HIPAA) requires all practitioners to ensure the privacy and security of patient information. The Privacy and Security rules went into effect on April 14, 2003, with stiff penalties for those who fail to comply, or who improperly disclose or misuse protected health information.

The HIPAA Privacy and Security Rules dictate that all who may come into contact with a patient's healthcare information go through a training on HIPAA policy, and that there be documentation to prove that the training has been completed. HIPAA training course takes you through several slides which allow you to read about HIPAA, understand current issues in HIPAA compliance, and take mini test/quiz as you move through the program. Upon completion of the course you will receive a Certificate of Completion.

Upon completion of this course, you will be able to learn:

- An overview of the HIPAA Privacy Rule
- Covered entities
- Covered transactions
- Protected health information (PHI)
- Notice of Privacy Practices
- Other Uses of PHI
- Administrative safeguards
- Compliance and enforcement

Contact Hours : 1 (One)

Fee: \$10 Per Student

Authors: Sree Muppa, MPH,MBA

Teaching Method: Online Independent Self-Study Course (Training + Post-Test). Requires Computer, Internet & Adobe Flash Player.

Course Completion Certificate : A Printable (Pdf) Certificate By Email .



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Provider ID: 352738.

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**APPLICATION FOR PRIOR APPROVAL OF
CONTINUING EDUCATION COURSE OR PROGRAM**

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
515-281-5157
www.dentalboard.iowa.gov

Note: A fee of \$10 *per course* is required to process your request. PLEASE TYPE OR PRINT.

1. Name of organization or person requesting approval: Biologix Solutions LLC
Address: 1201 Alison Ln., Darien, IL 60561
Phone: 630-706-0093 Fax: 630-206-2475 E-mail: admin@blxtraining.com

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
- Dental School
- Dental Hygiene School
- Dental Assisting School
- Military
- Other (please specify): Continuing Education Provider

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

4. Course Title: Pain Management in Dentistry

5. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

6. Course date: Online Independent Self-Study Hours of instruction: 2 Hours

7. Provide the name(s) and briefly state the qualifications of the speaker(s): _____

Dr. Stephen Lau, DDS - Over 20 years of experience delivering comprehensive dental care to both children and adults. Family general dental services included both preventive and major dental treatment. dental treatment. Dr. Lau has authored many continuing education courses for dental healthcare professionals.

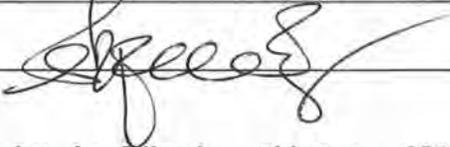
8. Please attach a program brochure, course description, or other explanatory material.

9. Name of person completing application: Alpesh Patel

Title: Continuing Education Program Director Phone Number: 630-706-0093

Fax Number: 630-206-2475 E-mail: admin@blxtraining.com

Address: 1201 Alison Ln., Darien, IL 60561

Signature:  Date: 1/13/2014

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Des Moines, Iowa 50309-4687**

PAIN MANAGEMENT IN DENTISTRY



This online independent self-study course has been developed for dental settings to provide evidence based information on use of analgesics in pain management in dental settings. The course work is designed by General Dentist with over 25 years of experience in dentistry.

Upon completion of this course, you will be able to:

- Review pain definitions and mechanisms. Differentiate acute versus chronic pain.
- Understand the delivery of anesthetic and the management of post procedural pain.
- Recognize the warnings and precautions for analgesic medications.
- List non pharmacological methods of addressing pain.
- Review the management of pain in special populations.
- Recommend the proper dosages for analgesic medications for adult and pediatric patients.

Contact Hours : 2 (Two)

Fee: \$20 Per Student

Authors: Dr. Stephen Lau, DDS, General Dentist

Teaching Method: Online Independent Self-Study Course (Training + Post-Test). Requires Computer, Internet & Adobe Flash Player.

Course Completion Certificate : A Printable (Pdf) Certificate By Email .



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**APPLICATION FOR PRIOR APPROVAL OF
CONTINUING EDUCATION COURSE OR PROGRAM**

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
515-281-5157
www.dentalboard.iowa.gov

Note: A fee of \$10 *per course* is required to process your request. PLEASE TYPE OR PRINT.

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Address: 1201 Alison Ln., Darien, IL 60561
Phone: 630-706-0093 Fax: 630-206-2475 E-mail: admin@blxtraining.com

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
- Dental School
- Dental Hygiene School
- Dental Assisting School
- Military
- Other (please specify): Continuing Education Provider

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

4. Course Title: HIV/AIDS for Dental Healthcare Professionals

5. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

6. Course date: Online Independent Self-Study Hours of instruction: 2 Hours

7. Provide the name(s) and briefly state the qualifications of the speaker(s): _____

Dr. Stephen Lau, DDS - Over 20 years of experience delivering comprehensive dental care to both children and adults. Family general dental services included both preventive and major dental treatment. Dr. Lau has authored many continuing education courses for dental healthcare professionals.

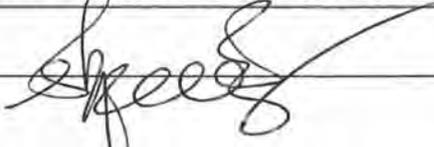
8. Please attach a program brochure, course description, or other explanatory material.

9. Name of person completing application: Alpesh Patel

Title: Continuing Education Program Director Phone Number: 630-706-0093

Fax Number: 630-206-2475 E-mail: admin@blxtraining.com

Address: 1201 Alison Ln., Darien, IL 60561

Signature:  Date: 1/13/2014

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HIV/AIDS FOR DENTAL HEALTHCARE PROFESSIONALS



This online independent study module has been developed to provide a review of HIV/AIDS in United States, modes of transmission, types of HIV tests, prevention, clinical management of HIV/AIDS, and prevention of HIV in dental healthcare settings.

Upon completion of this course, you will be able to learn:

- Definition and differences of HIV and AIDS.
- Epidemiology of HIV and AIDS.
- HIV Risk Behavior & Transmission.
- Clinical & Oral manifestations of HIV/AIDS.
- Testing & Diagnosis of HIV/AIDS.
- Methods of prevention of HIV.
- Medical treatment & side effects of HIV/AIDS Therapy (High Active Anti-Retro Viral Therapy - HAART).
- Management of HIV in the healthcare workplace in accordance with OSHA Bloodborne Pathogens Standard.
- Prevention of HIV in a dental practice.

Contact Hours : 2 (Two)

Fee: \$20 Per Student

Authors: Stephen Lau, DDS
Sree Muppa, MD,MPH

Teaching Method: Online Independent Self-Study Course (Training + Post-Test). Requires Computer, Internet & Adobe Flash Player.

Course Completion Certificate : A Printable (Pdf) Certificate By Email .



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- Dental School
- Dental Hygiene School
- Dental Assisting School
- Military
- Other (please specify): Continuing Education Provider

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

4. Course Title: Hepatitis Infection – Implications in Dental Practice

5. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

6. Course date: Online Independent Self-Study Hours of instruction: 3 Hours

7. Provide the name(s) and briefly state the qualifications of the speaker(s): _____

Dr. Stephen Lau, DDS - Over 20 years of experience delivering comprehensive dental care to both children and adults. Family general dental services included both preventive and major dental treatment. dental treatment. Dr. Lau has authored many continuing education courses for dental healthcare professionals.

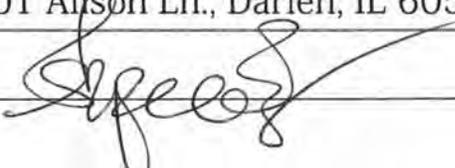
8. Please attach a program brochure, course description, or other explanatory material.

9. Name of person completing application: Alpesh Patel

Title: Continuing Education Program Director Phone Number: 630-706-0093

Fax Number: 630-206-2475 E-mail: admin@blxtraining.com

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Signature:  Date: 1/13/2014

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HEPATITIS INFECTION – IMPLICATIONS IN DENTAL PRACTICE



This continuing education course is intended for all dental healthcare professionals. The risk of cross transmission between dental healthcare workers and patients is considered significant, particularly sharp injuries occur because of a small operating field, frequent patient movement, and the variety of sharp instruments used in dental procedure.. This course will increase awareness and understanding by dental health personnel in the matter of viral hepatitis in terms of clinical and asymptomatic disease, transmission, diagnostic tests, treatment, prophylaxis, and prevention through infection control, with major emphasis on hepatitis B and hepatitis C.

Upon completion of this course, you will be able to learn:

- Define hepatitis and understand the various forms of hepatitis.
- Describe the etiology, transmission, signs and symptoms, diagnosis, treatment, prophylaxis, and precautions for hepatitis A, hepatitis B, hepatitis C, hepatitis D, hepatitis E, and hepatitis Non A-E.
- List and discuss the laboratory markers that are utilized in the diagnosis of various hepatitis virus.
- Identify risk factors for hepatitis virus.
- Discuss the clinical course of hepatitis infection.
- Transmission risks for dental health professionals.
- Infection control recommendation for dental professionals when treating patients.

Contact Hours : 3 (Three)

Fee: \$25 Per Student

Authors: Stephen Lau, DDS
Sree Muppa, MD,MPH

Teaching Method: Online Independent Self-Study Course (Training + Post-Test). Requires Computer, Internet & Adobe Flash Player.

Course Completion Certificate : A Printable (Pdf) Certificate By Email .



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Provider ID: 352738.

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Phone: 630-706-0093 Fax: 631-206-2475 E-mail: admin@blxtraining.com

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
- Dental School
- Dental Hygiene School
- Dental Assisting School
- Military
- Other (please specify): Continuing Education Provider

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

4. Course Title: Nitrous Oxide Sedation & Occupational Safety in Dentistry

5. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

6. Course date: Online Independent Self-Study Hours of instruction: 2 Hours

7. Provide the name(s) and briefly state the qualifications of the speaker(s): _____

Dr. Stephen Lau, DDS - Over 20 years of experience delivering comprehensive dental care to both children and adults. Family general dental services included both preventive and major dental treatment. dental treatment. Dr. Lau has authored many continuing education courses for dental healthcare professionals.

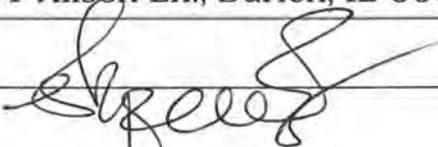
8. Please attach a program brochure, course description, or other explanatory material.

9. Name of person completing application: Alpesh Patel

Title: Continuing Education Program Director Phone Number: 630-706-0093

Fax Number: 630-206-2475 E-mail: admin@blxtraining.com

Address: 1201 Alison Ln., Darien, IL 60561

Signature:  Date: 1/13/2014

Board rules specify that the following subjects are NOT acceptable for continuing education credit: personal development, business aspects of practice, personnel management, government regulations, insurance, collective bargaining, and community service presentations.

If the course was offered by a Board approved sponsor, you should contact the sponsor directly for approval information, rather than submitting this form. A list of approved sponsors and contact information is available on the Board website at www.dentalboard.iowa.gov. Continuing education guidelines and rules are also available on the Board's website. A course is generally acceptable and does not need to go through this formal approval process if it is directly related to clinical practice/oral health care.

Pursuant to Iowa Administrative Code 650—25.3(5), please submit the application for approval 90 days in advance of the commencement of the activity. The Board shall issue a final decision as to whether the activity is approved for credit and the number of hours allowed. The Board may be unable to issue a final decision in less than 90 days. Please keep this in mind as you submit courses for prior approval.

MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE PER COURSE** TO:

**Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687**

NITROUS OXIDE (N₂O) SEDATION & OCCUPATIONAL SAFETY IN DENTISTRY



This online independent self-study course has been developed for dental settings to provide evidence based information on use of Nitrous Oxide (N₂O) sedation and Occupational Safety in dental settings. The course work is designed by General Dentist with over 25 years of experience in dentistry.

Upon completion of this course, you will be able to:

- The history and mechanism of action of Nitrous Oxide as an anesthetic agent.
- The administration process of Nitrous oxide.
- Contraindications for use of Nitrous Oxide in clinical dentistry.
- Patient assessment to evaluate suitability for Nitrous Oxide sedation.
- Post procedural side effects (signs and symptoms) of exposure.
- Nitrous Oxide utilization in a dental practice.
- OSHA/NIOSH workplace monitoring, safety guidelines and recommendations.
- Post-exposure evaluation of employees in a dental office.

Contact Hours : 2 (Two)

Fee: \$20 Per Student

Authors: Dr. Stephen Lau, DDS, General Dentist

Teaching Method: Online Independent Self-Study Course (Training + Post-Test). Requires Computer, Internet & Adobe Flash Player.

Course Completion Certificate : A Printable (Pdf) Certificate By Email .



AGD PACE Approval: Biologix Solutions LLC is designated as an Approved PACE Program Provider by the Academy of General Dentistry. The formal continuing dental education programs of this program provider are accepted by AGD for Fellowship, Mastership, and membership maintenance credit. Approval does not imply acceptance by a state or provincial board of dentistry or AGD endorsement. The current term of approval extends from **4/20/2013 to 4/30/2017. Provider ID: 352738.**

Cancellation / Refund Policy: By completing your purchase from Biologix Solutions LLC through PayPal, you agree that you are purchasing digital, non-tangible product / service / training courses, and as such are not entitled to a refund once accessed. If you have any questions, please feel to contact us by phone or email before purchasing online course.

**APPLICATION FOR PRIOR APPROVAL OF
CONTINUING EDUCATION COURSE OR PROGRAM**

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
515-281-5157
www.dentalboard.iowa.gov

Note: A fee of \$10 *per course* is required to process your request. PLEASE TYPE OR PRINT.

1. Name of organization or person requesting approval: Biologix Solutions LLC
Address: 1201 Alison Ln., Darien, IL 60561
Phone: 630-706-0093 Fax: 630-206-2475 E-mail: admin@blxtraining.com

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
- Dental School
- Dental Hygiene School
- Dental Assisting School
- Military
- Other (please specify): Continuing Education Provider

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

4. Course Title: Ethics & Professional Responsibilities in Dentistry (Rules & Regulations - Iowa Administrative Code 650)

5. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: Professional Responsibility

6. Course date: Online Independent Self-Study Hours of instruction: 2 Hours

7. Provide the name(s) and briefly state the qualifications of the speaker(s): _____

Dr. Tom Karginis, DMD - Over 25 years of experience delivering comprehensive dental care to both children and adults. Family general dental services included both preventive and major dental treatment. Dr. Karginis has authored many continuing education courses for dental healthcare professionals.

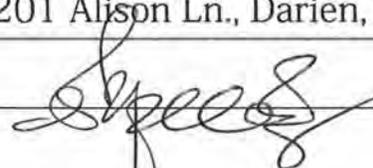
8. Please attach a program brochure, course description, or other explanatory material.

9. Name of person completing application: Alpesh Patel

Title: Continuing Education Program Director Phone Number: 630-706-0093

Fax Number: 630-206-2475 E-mail: admin@blxtraining.com

Address: 1201 Alison Ln., Darien, IL 60561

Signature:  Date: 1/13/2014

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If the course was offered by a Board approved sponsor, you should contact the sponsor directly for approval information, rather than submitting this form. A list of approved sponsors and contact information is available on the Board website at www.dentalboard.iowa.gov. Continuing education guidelines and rules are also available on the Board's website. A course is generally acceptable and does not need to go through this formal approval process if it is directly related to clinical practice/oral health care.

Pursuant to Iowa Administrative Code 650—25.3(5), please submit the application for approval 90 days in advance of the commencement of the activity. The Board shall issue a final decision as to whether the activity is approved for credit and the number of hours allowed. The Board may be unable to issue a final decision in less than 90 days. Please keep this in mind as you submit courses for prior approval.

MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE PER COURSE** TO:

**Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687**

ETHICS, PROFESSIONAL RESPONSIBILITY & LAWS IN DENTISTRY



This online independent self-study course has been developed in accordance with the ADA's *Principles of Ethics and Code of Professional Conduct*, April 2012 in Dental practices. The course work is designed by General Dentist. The course also includes Iowa Administrative Rules that regulates the practice of dentistry, dental hygiene, and dental assisting in the state of Iowa. (Iowa Code chapters 153, 147, and 272C).

Upon completion of this course, you will be able to learn:

- Interpret the principles of ethics and the code of professional conduct
- Understand the term profession and how it relates to ethics in dentistry
- Apply the principles of dental ethics to everyday practice
- Understand the principles of ethical decision making that apply to the code of professional conduct
- Recognize the basic rights of the patients, the ethics of patient relations, delegation of duties and financial arrangements in the dental practice.
- Review Iowa's law that regulates the practice of dentistry, dental hygiene, and dental assisting in the state of Iowa. (Iowa Code chapters 153, 147, and 272C)

Contact Hours : 2 (Two)

Fee: \$20 Per Student

Authors: Dr. Tom Karginis, DMD, General Dentist

Teaching Method: Online Independent Self-Study Course (Training + Post-Test). Requires Computer, Internet & Adobe Flash Player.



Course Completion Certificate : A Printable (Pdf) Certificate By Email .

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**APPLICATION FOR PRIOR APPROVAL OF
CONTINUING EDUCATION COURSE OR PROGRAM**

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
515-281-5157
www.dentalboard.iowa.gov

Note: A fee of \$10 *per course* is required to process your request. PLEASE TYPE OR PRINT.

1. Name of organization or person requesting approval: Julie Berger-Moore
Iowa Academy of General Dentistry
Address: 6331 Tanglewood Lane Lincoln, NE 68516
Phone: 402-436-2321 Fax: same E-mail: juliebergermoore@gmail.com

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
- Dental School
- Dental Hygiene School
- Dental Assisting School
- Military
- Other (please specify): _____

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

4. Course Title: "State of the Art Endodontics for the General Practitioners.
Materials, Methods & Guiding Principles."

5. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

6. Course date: September 19-21, 2014 Hours of instruction: 8 hrs lecture
16 hrs participation

7. Provide the name(s) and briefly state the qualifications of the speaker(s): Dr. Richard Mounce
is a Endodontist with over 20 years of experience. He received
his Endodontic Specialty certification at Oregon Health
Science Univ. His bio is also listed in the brochure.

8. Please attach a program brochure, course description, or other explanatory material.

9. Name of person completing application: Julie Berger-Moore
Title: Executive Director Phone Number: 402-438-2321
Fax Number: same E-mail: juliebergermoore@gmail.com
Address: 6331 Tanglewood Lane, Lincoln, NE 68516
Signature: Julie Berger-Moore Date: 2-19-14

Board rules specify that the following subjects are NOT acceptable for continuing education credit: personal development, business aspects of practice, personnel management, government regulations, insurance, collective bargaining, and community service presentations.

If the course was offered by a Board approved sponsor, you should contact the sponsor directly for approval information, rather than submitting this form. A list of approved sponsors and contact information is available on the Board website at www.dentalboard.iowa.gov. Continuing education guidelines and rules are also available on the Board's website. A course is generally acceptable and does not need to go through this formal approval process if it is directly related to clinical practice/oral health care.

Pursuant to Iowa Administrative Code 650—25.3(5), please submit the application for approval 90 days in advance of the commencement of the activity. The Board shall issue a final decision as to whether the activity is approved for credit and the number of hours allowed. The Board may be unable to issue a final decision in less than 90 days. Please keep this in mind as you submit courses for prior approval.

MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE PER COURSE** TO:

Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687

Form

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General Information

Friday, September 19, 2014

**Lecture course held at Hilton Garden Inn
8600 Northpark Drive, Johnston, IA
515.270.8890**

7:30 a.m. Registration
8 a.m. Course Begins
Noon – 1 p.m. Lunch Hour
1 p.m. Course Resumes
5 p.m. Course Adjourns

* Coffee breaks and lunch will be provided.

HANDS ON COURSE

Saturday, September 20, 2014

8 a.m. – 7:30 p.m.

Sunday, September 21, 2014

8 a.m. – 2 p.m.

Limited Space Available

**Held at the Center for Advanced Dental
Education, 1233 63rd Street., Des Moines, IA**

COURSE FEES

AGD Dentists: Lecture Only \$ 295
Non-AGD Dentists: Lecture Only \$ 595
AGD Dentists: Entire 3 day Event \$1,400
Includes materials, meals and books. Lodging not included.
Non-AGD Dentist: Entire 3 day Event \$1,800
Includes materials, meals and books. Lodging not included
Staff Member/Assistants/Hygienists \$ 60
Dental Students \$ 35
Lab Techs \$ 125

Register by September 1st to avoid a \$45 late fee!

A block of sleeping rooms have been reserved at the Hilton Garden Inn for \$109 until August 28, 2014. Ask for the Iowa AGD rate. To make reservations, call 515-270-8890.

Iowa AGD
6331 Tanglewood Lane
Lincoln, NE 68516



2014 IA
MEETING &

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Hilton G
8600 Northpark I

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SPEAKER
Richard E. Mounce, DDS

Dr. Mounce is currently a practicing endodontic specialist in Rapid City, SD. A graduate of the Northern Dental School, Dr. Mounce is an expert in endodontic treatment. He is currently at Oregon Health Services since 1991. Dr. Mounce has been an extensively practicing endodontic specialist for over 20 years. He has worked on to private practice and is currently the owner of MounceEndo, a dental company based in Rapid City, SD.

AGD-Iowa is designated as an Approved PACE Program under the Academy of General Dentistry. The formal continuing education programs in this program provider are approved by AGD for Fellowship, Membership and membership maintenance credit. Approval does not imply acceptance by the AGD or provincial board of dentistry. The current term of approval extends from 6/1/2013 to 6/30/2017. ID# 219301

“State of the Art Endodontics for the General Practitioners: Materials, Methods and Guiding Principles”

Friday, September 19, 2014

8 hours AGD Credit – IDBE pending final approval

The Friday lecture is designed for the general practitioner to improve their daily endodontic skills. Areas covered will include the latest concepts in diagnosis, case selection, and cleansing, shaping and packing of the root canal system in three dimensions. The course will also include an introduction to the surgical operating microscope, cone beam technology, local anesthesia delivery for endodontic treatment, and will discuss the importance of coronal seal and the role of endodontics in treatment planning versus extraction and implants.

Course objectives for lecture:

- the biologic objectives of root canal treatment
- endodontics in comprehensive treatment planning
- when to extract, when to treat, when to refer
- operator layout and ergonomics in endodontics
- the surgical operating microscope
- use of cone beam technology

- endodontic diagnosis
- general concepts and goals of endodontic instrumentation including working length, working taper and working diameter
- instrumentation for endodontic cleansing and shaping including stainless steel hand files, rotary nickel titanium files, reciprocating nickel titanium files
- general concepts and goals of endodontic obturation including materials, devices and techniques
- coronal seal including indications and contraindications for posts
- endodontic irrigation
- possibilities for endodontic retreatment, including materials, methods, concepts and indications and contraindications.

HANDS-ON TRAINING
Saturday, September 20 & Sunday, September 21, 2014

16 hours AGD Credit – IDBE pending final approval

The weekend hands on course will review instrumentation and obturation to achieve the biologic objectives of root canal therapy. Techniques discussed in the lecture will be demonstrated in both plastic blocks and extracted teeth. Participants will have ample time to practice instrumentation and obturation of canals utilizing the methods and equipment demonstrated.

- intro lecture on the materials and methods for instrumentation the participants will use

- hands on demo for irrigation and obturation using plastic blocks and extracted teeth using
- instrumentation and obturation for the participants using plastic blocks and extracted teeth (parabond, composite, etc.) bring multiple access cavities. 8 teeth. 4 molars. 2 premolars. All must be fully maxillary. No third molars. Participants will insure that all teeth are fully obturated.
- Gutta percha removal techniques
- Gutta percha removal techniques previously obturated
- Discussion on: evidence based treatment success and failure and treatment planning for endodontics (when to retreat, when to refer, case selection), case studies
- concepts in endodontics (achievement of patency, irrigation, removal, canal irrigation)
- possibilities for endodontic retreatment including materials, methods, indications and contraindications
- instruments require retreatment
- diagnosis and management of endodontic events
- obturation and coronal seal retreatment

RECEIVED

FEB 20 2014

IOWA DENTAL BOARD
APPLICATION FOR POST APPROVAL OF
CONTINUING EDUCATION COURSE OR PROGRAM

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
Phone (515) 281-5157
www.dentalboard.iowa.gov

NOTE: A fee of \$10 per course is required to process your request. PLEASE TYPE OR PRINT.

1. Course Title: Temporomandibular Joint Disorder Evaluation and Treatment and Occupational Hazards Related to Dentistry
2. Course Subject:

- Related to clinical practice
 Patient record keeping
 Risk Management
 Communication
 OSHA regulations/Infection Control
 Other: _____

3. Course date: Jan. 14, 2014 Hours of instruction: 2

4. Provide a detailed breakdown of contact hours for the course or program:

Lecture on TMJ anatomy, movements, problems, diagnosis and treatment for 1 hour. Demonstration on live patient from their clinic for 20 minutes on TMD he is experiencing. Lecture on correct posture and exercises to improve career longevity - 20 min. Q & A at end 15 min.

5. Name of course sponsor: Universal Therapy Group

Address: 411 W Agency Rd #1 West Burlington, IA 52655
(319) 752-7727 or (309) 299-4948

6. Which of the following educational methods were used in the program? Please check all applicable.

- Lectures
 Home study (e.g. self assessment, reading, educational TV)
 Participation
 Discussion
 Demonstration

7. Provide the name(s) and briefly state the qualifications of the speaker(s):
Karla Steffensmeier - Physical Therapist
Adam Schefers - Physical Therapist
Both therapists were chosen from their clinic because of their experience with TMJ-related problems

8. Please attach a program brochure, course description, or other explanatory material.
Already sent

9. Name of person completing application: Nathan Heubner
Title: Dental Society President Phone Number: 319-601-9264
Fax Number: 319-754-6770 E-mail: nathan-heubner@hotmail.com
Address: 700 N. 3rd St. Burlington, IA 52601
Signature: Nathan Heubner Date: 2/15/14

Board rules specify that the following subjects are NOT acceptable for continuing education credit: personal development, business aspects of practice, personnel management, government regulations, insurance, collective bargaining, and community service presentations.

If the course was offered by a Board approved sponsor, you should contact the sponsor directly for approval information, rather than submitting this form. A list of approved sponsors and contact information is available on the Board website at www.dentalboard.iowa.gov. Continuing education guidelines and rules are also available on the Board's website. A course is generally acceptable and does not need to go through this formal approval process if it is directly related to clinical practice/oral health care.

Pursuant to Iowa Administrative Code 650—25.3(6), within 90 days after the receipt of application, the Board shall issue a final decision as to whether the activity is approved for credit and the number of hours allowed.

MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE** PER COURSE TO:

Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687

I already sent the check in

Nathan M. Heubner, D.D.S.
President, Des Moines County Dental Society
700 North Third Street
Burlington, Iowa 52601

RECEIVED
JAN 17 2014
IOWA DENTAL BOARD

January 14, 2014

Iowa Dental Board
Continuing Education
400 SW 8th Street, Suite D
Des Moines, Iowa 50309-4686

To Whom It May Concern:

I am writing on behalf of the members of the Des Moines County Dental Society to request approval for two hours of continuing education credit. I currently serve as President of our dental society and am responsible for coordinating continuing education opportunities. Enclosed you will find the educational material discussed and handed out at a class that took place on January 14, 2014 from 6-8 PM in Burlington. The lecture and live patient demonstrations were conducted by Universal Therapy Group based here in Burlington. The main topics were related to the temporomandibular joint and associated disorders, and current treatment modalities.

Please consider approval of the two hours of continuing education for my members. If you have questions or would like more information, please contact me at (319) 752-1840 or nathan-heubner@hotmail.com. I have also enclosed a check for \$10 to cover the standard fee associated with such a request.

Thank you,



Nathan M. Heubner

Des Moines County Dental Society

Certificate of Attendance

January 14, 2014

Location: The Drake Restaurant

Topic: TMJ Diagnosis and Treatment Alternatives

Speaker: Universal Therapy Group

Karla Steffensmeier - PT

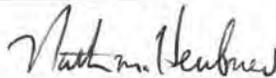
Cindy Villebrun - OT

Continuing Education Credit: 2 CEU

ATTENDEE: _____

Certified by Nathan M. Heubner, DDS

President, Des Moines County Dental Society



Des Moines County Dental Society Meeting Attendance Record

January 14, 2014

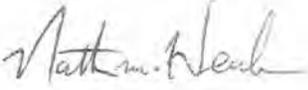
Speaker: Universal Therapy Group

Location: The Drake

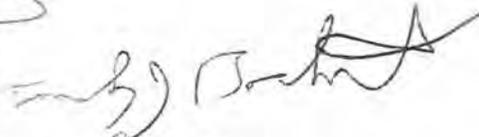
Time: 6-8 PM

CEU: 2

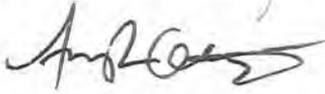
ATTENDEES

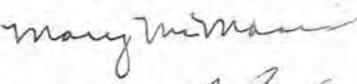
Nathan Heubner 

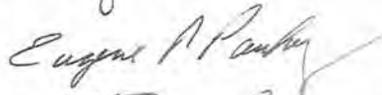
David Camp 

Tim Bockenstedt 

Arnie Sperfslage 

Amy Groeltz 

Mary McManis 

Gene Pankey 

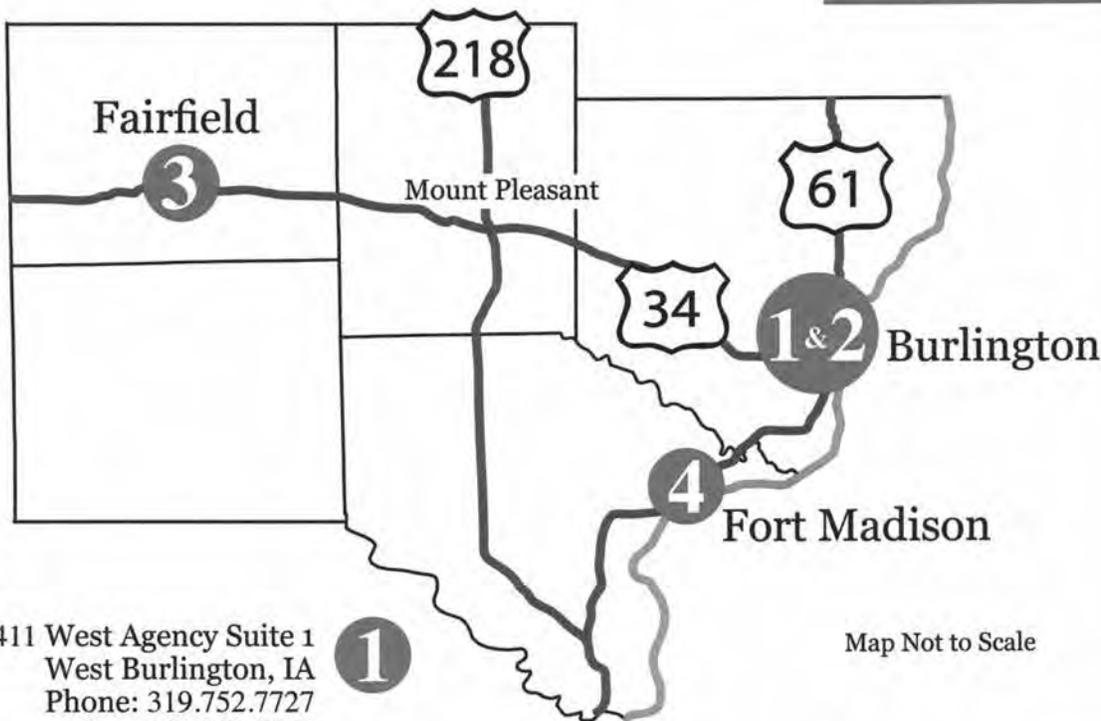
Brad Randolph 
David Courtney 



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1
 411 West Agency Suite 1
 West Burlington, IA
 Phone: 319.752.7727
 Fax: 319.752.7774

2
 903 Oak Street
 Burlington, IA
 Phone: 319.752.7727
 Fax: 319.752.7774

3
 1401 S. Main Street
 Fairfield, IA
 Phone: 641.209.1446
 Fax: 641.209.1447

4
 734 Avenue G
 Fort Madison, IA
 Phone: 319.752.7727
 Fax: 319.752.7774

Map Not to Scale

OUR SERVICES INCLUDE:

- Pre & Post Surgery Rehab
- Orthopedic – Joint Injuries
- Balance/Vestibular Rehab
- Sports Injuries
- Pain Management
 - Dry Needling
 - Hands on Manual Techniques
- TMJ
- Arthritis Prevention & Rehab
- Geriatric Problematic Issues
- Pediatric Therapy
- Hand Therapy & Custom Splints
- Women's Health
- Neurological Disorders
 - Stroke Post Rehab
- Work Conditioning/Rehab
 - Work Comp Injuries

HOURS OF OPERATION:

Monday - Friday
 7:00 a.m. - 7:00 p.m.
 or By Appointment

EMPOWER YOURSELF, CHOOSE UNIVERSAL!





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T M J
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SPORTS
UNIVERSAL
THERAPY GROUP



Joann's Posture Exercise

Place arms into a "field goal" position keeping elbows at a 90 degree angle and hands level with ears. Press hands and elbows into wall. While squeezing shoulder blades together. Slide arms up/down the wall slowly. Keep as much of your back on the wall as you can.

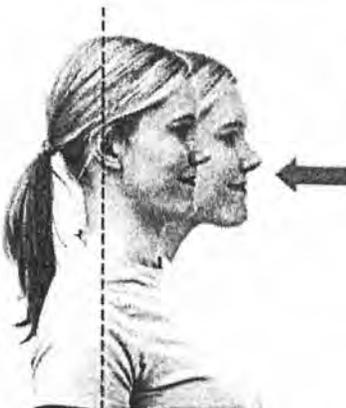
Repeat 10 Times
Complete 2 Sets
Perform 1 Time(s) a Day



Seated Right Upper Trap Stretch

Sit tall on a chair and reach underneath with your right arm and pull down on the seat. Lean your head away from the arm pulling down. Then look over your right shoulder as you are leaning your head away. Hold this and repeat. Perform the same for the other side.

Repeat 5 Times
Hold 30 Seconds
Complete 1 Set
Perform 1 Time(s) a Day



RETRACTION / CHIN TUCK

Slowly draw your head back so that your ears line up with your shoulders.

Repeat 10 Times
Hold 10 Seconds
Complete 1 Set
Perform 1 Time(s) a Day

LEVATOR SCAPULAE STRETCH



Place the arm on the affected side behind your back and use your other hand to draw your head downward and towards the opposite side.

You should be looking towards your opposite pocket of the affected side.

Repeat 5 Times
Hold 30 Seconds
Complete 1 Set
Perform 1 Time(s) a Day



Wrist Flexor Stretch

Gently pull wrist into extension with elbow extended, while keeping shoulder down.

Repeat 5 Times
Hold 30 Seconds
Perform 1 Time(s) a Day

Guidelines To Minimize TMJ Pain

In general, avoid:

- Large bites, "big" food
- Repetitive chewing
- Forceful bites
- Using tongue to remove food from teeth

Specifically, avoid these foods:

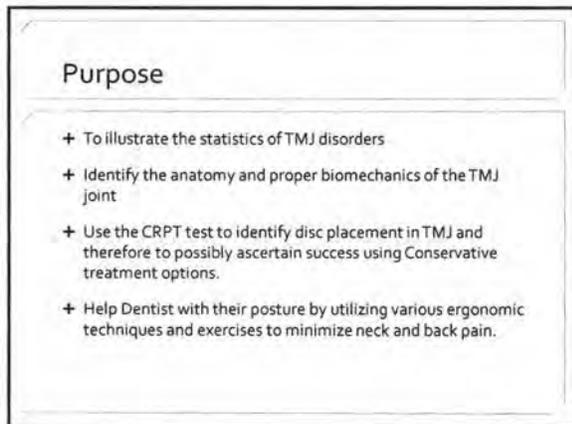
- Gum
- Jaw Breakers
- Popcorn
- Caramel
- Steak
- Pizza
- Bagels
- Chips
- Nuts
- Ice
- Beef Jerky
- Crunchy Fruits & Vegetables
- French Bread
- Hard Cereal
- Lettuce

Other things to avoid:

- Resting chin on hand
- Holding phone with shoulder
- Sleeping on stomach
- "Big" yawns
- Singing
- Yelling
- Nail Biting
- Chewing on inside of cheek
- Biting lip







Why are we talking about the T.M.J?

- + Many patients suffer from T.M.D
 - + 20-25% of population exhibit symptoms of TMD
 - + 30 million Americans are diagnosed each year(new cases)
- + Difficult to Diagnose and Treat
 - + Multiple factors

Definition of TMJ

- + The temporomandibular joint (TMJ) is a freely moveable articulation between the condyle of the mandible and the temporal bone. It is a true synovial joint and, therefore, has much in common with the other synovial joints of the body.



Biomechanics + Anatomy

- + 3 Degrees of Freedom
 - + Each Degree of Freedom on Separate axis of motion
 - + Rotation and Anterior Translation Primary Movements
- + Disc
 - + Disperses Forces of joint motion over broader area
 - + Prevents bone to bone contact
- + Joint Capsule
 - + Ligamentous Support
 - + Anterior/Posterior capsule

Biomechanics and Anatomy

- + Neural impact
 - + Trigeminal Nerve (Altered Bite Mechanics)
 - + Trigemino-cervical Complex
 - + V, VII, VIII, C1-4, Vagus
- + Positions of the Joint
 - + Occlusal Position
 - + Opening
 - + Closing

Biomechanics and Anatomy

Typical Muscles involved

- + Lateral Pterygoid
 - + Lateral Pertrusion
- + Masseter
 - + Powerful Chewer
- + Temporalis
 - + Elevation of Mandible

+ Osseous Structures

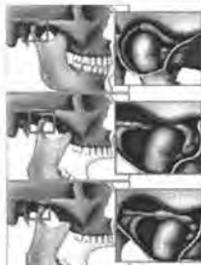
Biomechanics and Anatomy

- + Closed pack position of the joint
 - + 2 closed packed positions
 - + Anterior
 - + Maximum Opening
 - + Posterior
 - + Maximum Retrusion
- + Resting/Open-packed position
 - + No Contact in between max/mandi teeth
 - + Tongue against palate.

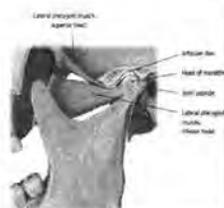
Definition of TMJ Disorder

➤ Temporomandibular disorders (TMDs) refers to a group of disorders affecting the temporomandibular joint (TMJ), masticatory muscles and the associated structures. These disorders share the symptoms of pain, limited mouth opening and joint noises.

➤ Etiology:
TMJ disorders are thought to have a multifactorial etiology, but the pathophysiology is not well understood. Causes can be classified into factors affecting the joint itself, and factors affecting the muscles and joint function.



Closer Look....



Normal TMJ - no sign of TMD



TMJ with anterior disc displacement - has TMJ dysfunction

Professionals Involved With TMJ

Primary referrals are from: Dentists, Orthodontists, Doctors, Oral Surgeons, Psychologists, Neurologists, and Ear/nose/throat specialists.

Treatment can be performed by:

- Physical Therapists (posture, pain management, and)
- Dentists (mouth guards)
- Doctors (medication - primarily muscle relaxers)
- Psychologists (stress reduction and biofeedback)
- Chiropractors



Differential Diagnosis

Facial pain can be a symptom of many conditions:

- Sinus or ear infections
 - Associated with pressure, congestion, ear aches, fever, recent cold/flu, headaches
- Various types of headaches
 - Tension, migraine, sinus
- Facial neuralgias (nerve-related facial pain)
 - Cranial nerve 5 & 7.
- Heart attack
- Mouth breather
- Referring to the Research Diagnostic Criteria for TMD



Symptoms

- Radiating pain in the face, jaw, or neck
- Jaw pain & fatigue and muscle stiffness
- Limited movement or locking of the jaw
- Painful clicking
- Popping or grating in the jaw joint when opening or closing the mouth
- A change in the way the upper and lower teeth fit together.
- Difficulty opening your mouth to eat or talk
- Ringing in your ears
- Dizziness
- Headache

Occurrences & Risk Factors

- 75% of the population has a sign of TMD.
- 33% of the population has one sign that would cause them to seek treatment.
- Women's ages 20-30 are 3X more likely to have jaw problems.
- 79% of patient's with systemic hypermobility go on to develop TMJ problems (EDS)
- Risks: Stressful life, age, sex, clenching & grinding habits, ill-fitting denture or a crown for a long time, diseases like fibromyalgia & arthritis.

Increases of TMD

- Increased stress
- Increased use of computers
- Poor Posture Habits: many of us spend a great deal of time sitting at a desk, where we often hold our head too far forward as we work. But there are many other kinds of bad posture. Sitting in the car for a long commute, working at a checkout station, cradling a telephone receiver against the same shoulder for long periods of time, always carrying your child on the same hip—all can place the head in an awkward position and cause jaw problems. The "forward head position" puts a strain on the muscles, disk, and ligaments of the TMJ. The jaw is forced to "rest" in an opened position, and the chewing muscles become overused.
- Dentists being more aware of symptoms
- Arthritis (Rheumatoid and Osteoarthritis)
- Hormones (increased hormone therapy and contraceptive use)
- Systemic hypermobility

Chronic headaches & Migraines, TMJ can be a significant cause....

When your muscles are relentlessly strained or squeezed, it can result in tension headaches. TMJ headaches can also be caused by a build-up of blood pressure. **When the muscles in your face, head, and neck are strained, they prevent blood from flowing to the correct places.** When this happens, your body attempts to correct the problem by sending more blood to the area, which increases blood pressure. This feeling of pressure around the head (called a vascular headache) can be exceptionally painful.



TMJ headaches are often so painful, severe and frequent that they are often misdiagnosed as migraines. Migraine headaches are mainly on one side of your head and are usually accompanied with visual disturbances and extreme sensitivity to light. The treatment for migraine headaches is much different from headaches due to dislocated joints so it's imperative a trained medical professional make the distinction.

PT Assessment (Handout)

- To identify the cause of the symptoms, the physical therapists will first:
- Review your medical history, and discuss any previous surgery, fractures, or other injuries to your head, neck, or jaw.
 - Conduct a physical examination of your jaw and neck.
 - Evaluate posture and how the cervical spine
 - Examine the TMJ to find out how well it can open and whether there are any abnormalities in jaw motion. The therapist might place his or her hand in your mouth in order to examine your jaw movement.

*The PT will implement a plan to treat your underlying biomechanical problems. If, after the examination, the physical therapist suspects that your pain is a result of the position ("alignment") of your teeth, the therapist will refer you back to your dentist for further examination.

CRPT Test.....



TMD Categories

- + Masticatory Muscle Disorders
- + Arthralgia or Joint Disorders
- + Disc Derangement Disorders



Masticatory Muscle Disorders

Subjective:

- + Reports of pain associated with functional activities such as chewing, swallowing, and speaking
- + Pain is in the face, jaw, temple, in front of the ear or in the ear in the past month
- + Pain can awaken them at night and/or is present in the AM upon awakening
- + Ear symptoms
 - + Ringing/fullness

Masticatory Muscle Disorders

Objective:

- + Painful to palpation over minimum of one site, typically masseter and/or temporalis
- + Pain with maximum unassisted opening
- + Mouth opening is limited (may or may not be painful)

Masticatory Muscle Pain

Treatment:

- + No chew diet
- + Behavioral modification
- + Modalities
 - + Ultrasound, iontophoresis, low level laser therapy, electrical stimulation
- + Intraoral massage
- + Self help

TMD Arthralgia

Subjective:

- + Patient reports pain in face, jaw, temple, in front of the ear or in the ear during the past month
- + Parafunctional activity may increase pain
- + Less ROM in the morning, more throughout the day, tightening again at night

TMD Arthralgia

Objective:

- + Joint palpation to assess lateral collateral ligament tenderness, posterior disc attachments, position of condyle in temporal fossa
- + Joint dynamics may or may not be limited
- + Stethoscope to listen for crepitus sounds versus a discrete "click"

TMD Arthralgia

Treatment:

- + No chew diet
- + Treat masticatory pain if present
- + Controlled mouth opening
- + Control yawn
- + Avoid elective dental work
- + Modalities

Hypermobility

Subjective:

- + Patient report the jaw "goes out" when opening wide
- + Joint noises at end of mouth opening or beginning of mouth closing
- + Jaw catches as closing from fully opened



Hypermobility

Objective:

- + "Jutter" felt at end of mouth opening and beginning of mouth closing
- + Deviation can be present, typically closer to the maximally opened position than that seen with disc derangement disorder

Hypermobility

Treatment:

- + Patient education
- + Control mouth opening
 - + Eat smaller bites of food
 - + Limit mouth opening with dental cleanings
 - + No Jimmy John's subs
 - + Control yawning

Disc Displacement

Classification of disc displacement:

- + Stage 1: Disc Displacement with Reduction (DDWR)
- + Stage 2: Disc Displacement without Reduction with limited opening (DDWoR WLO)
- + Stage 3: Disc Displacement without Reduction without limited opening (DDWoR WoLo)

Factors contributing:

- + Trauma
- + Anterior displaced by muscles (superior lateral pterygoid)
- + Superior retrodiscal lamina becomes elongated
- + Lateral collateral ligament laxity (repetitive, sustained, excessive joint loading)

Disc Displacement

Treatment:

- + Educate patient on popping may continue indefinitely, may experience brief moments of locking (DDWR)
- + Treat other sources of symptoms such as arthralgia, muscle pain, cervical spine pain
- + Manual techniques
 - + Mobilization: long axis distraction, lateral or medially mobilize joint distraction
- + Controlled mouth opening
- + Lateral excursion (2 tongue depressors or hyperboloids)
- + Postural correction program
- + Mandibular isometrics

PT Treatment

- Pain Management: Manual therapy, Electrical stimulation, TENS, and ultrasound
- Posture education
- Improve Jaw Movement
 - Once your therapist gets your neck and jaw joints moving appropriately again, strengthening and stabilizing exercises are prescribed to maintain the new position of the TMJ. These exercises can include upper back and neck strengthening and relaxation techniques to correct postural alignment, range of motion exercises to promote jaw mobility and isometric holding exercise to strengthen the TMJ. TMJ symptoms may present differently between patients, so your therapist will prescribe treatment that is specifically tailored to your needs.

Ways to Prevent this Condition

(Handout for home ex- program)

Maintaining good sitting posture is key to preventing TMJ problems. Your physical therapist will show you how to maintain good sitting posture to prevent future episodes of TMD.

General Tips:

- Avoid repetitive chewing, such as gum chewing
- Avoid smoking
- Avoid opening the jaw too wide
- Avoid eating hard or chewy foods
- Maintain good oral hygiene and tooth health
- Avoid sleeping on your stomach, which forces the neck to rotate to one direction in order to maintain an open airway, increasing stress on the TMJ

At work: Your work should be directly in front of you and not off to the side where you are forced to look in one direction for long periods of time. Use a headset that allows the neck and jaw to remain in a restful ("neutral") position.

There are three types of surgery for TMD

Arthrocentesis. This is a minor procedure performed in the office under general anesthesia. It is performed for sudden-onset, closed lock cases (restricted jaw opening) in patients with no significant prior history of TMJ problems. The surgery involves inserting needles inside the affected joint and washing out the joint with sterile fluids. Occasionally, the procedure may involve inserting a blunt instrument outside of the joint. The instrument is used in a sweeping motion to remove tissue adhesion bands and to dislodge a disc that is stuck in front of the condyle (the part of your TMJ consisting of the "ball" portion of the "ball and socket").

Arthroscopy. Patients undergoing arthroscopic surgery for TMD first are given general anesthesia. The surgeon then makes a small incision in front of the ear and inserts a small, thin instrument that contains a lens and light. This instrument is hooked up to a video screen, allowing the surgeon to examine the TMJ and surrounding area. Depending on the cause of the TMD, the surgeon may remove inflamed tissue or realign the disc or condyle. Compared with open-joint surgery, this surgery is less invasive, leaves less scarring, and is associated with minimal complications and a shorter recovery time. Depending on the cause of the TMD, arthroscopy may not be possible, and open-joint surgery may be necessary.

Open-joint surgery. Patients undergoing open-joint surgery for TMD also are first given a general anesthesia. Unlike arthroscopy, the entire area around the TMJ is opened so that the surgeon can get a full view and better access. There are many types of open-joint surgeries. This treatment may be necessary if:

- o The bony structures that comprise the jaw joint are deteriorating
- o There are tumors on or around your TMJ
- o There is severe scarring or chips of bone in the joint

Compared with arthroscopy, open-joint surgery results in a longer healing time, and there is a greater chance of scarring and nerve injury.

Summary-Case Study

Dental Posture

$$\text{TORQUE} = \text{FORCE} \times \text{DISTANCE to fulcrum} \times \sin \theta$$



Most ergonomic injuries in dentistry result from counteracting torque for prolonged periods of time. Torque or "rotational force" occurs when a system becomes unbalanced (image above).

http://www.dentistry.com/articles/behind/volume_13/issue_4/equipment/the-necessity-of-neck-and-back-pain.html

Posture and Dentists

- + Let's get to the "tooth" of the matter.
 - + Many Dentists retire early due to back and neck pain.
 - + Increased Muscle activity with
 - + Lateral Bending over 30 degrees
 - + Twisting over 15 degrees.
- + Listen to Adam's Mother (and other good activities)
 - + "Joann's Posture Exercise"
 - + Levator Scapulae Stretch
 - + Wrist Flexion Exercises
 - + Chin Retractions



SPINE
UNIVERSAL
THERAPY GROUP

HAND
UNIVERSAL
THERAPY GROUP

BALANCE
UNIVERSAL
THERAPY GROUP

**INDUSTRIAL
REHAB**
UNIVERSAL
THERAPY GROUP

T M J
UNIVERSAL
THERAPY GROUP

SPORTS
UNIVERSAL
THERAPY GROUP

Some of our Services

LOCATIONS

UNIVERSAL THERAPY GROUP

4 Locations

1 Tallahassee, FL
1100 N. Monroe Hwy
Tallahassee, FL 32304
Phone: (904) 487-1111
Fax: (904) 487-1112

2 Gainesville, FL
4000 S.W. 15th Ave
Gainesville, FL 32609
Phone: (352) 336-3333
Fax: (352) 336-3334

3 Orlando, FL
4000 S.W. 15th Ave
Orlando, FL 32809
Phone: (407) 241-1111
Fax: (407) 241-1112

4 Fort Lauderdale, FL
7000 N.W. 44th Ave
Fort Lauderdale, FL 33309
Phone: (954) 575-1111
Fax: (954) 575-1112

Hours of Operation
Monday - Friday
9:00 am - 5:00 pm
Saturday - 10:00 am - 1:00 pm
Not by appointment

Other Services Provided
• Physical Therapy
• Occupational Therapy
• Speech Therapy
• Chiropractic
• Acupuncture
• Massage Therapy
• Pilates
• Yoga
• Tai Chi
• Tai Ji
• Tai Ji Qigong
• Tai Ji Qigong
• Tai Ji Qigong

EMPOWER YOURSELF. CHOOSE UNIVERSAL!

Questions???

RECEIVED

FEB 24 2014

APPLICATION FOR PRIOR APPROVAL OF IOWA DENTAL BOARD
CONTINUING EDUCATION COURSE OR PROGRAM

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
515-281-5157
www.dentalboard.iowa.gov

Note: A fee of \$10 per course is required to process your request. PLEASE TYPE OR PRINT.

1. Name of organization or person requesting approval: Great River Oral Surgery Implant Study Club

Address: 100 Bryant St Dubuque, IA 52003

Phone: 563-557-1440 Fax: 563-557-9652 E-mail: bmoehr@greatriveroms.com

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
- Dental School
- Dental Hygiene School
- Dental Assisting School
- Military
- Other (please specify): Study Club

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

4. Course Title: see attached

5. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

6. Course date: 4-4-14

Hours of instruction: 4

35588
\$10.00 2/25/14

7. Provide the name(s) and briefly state the qualifications of the speaker(s): _____

Terri Bradley - see attached

8. Please attach a program brochure, course description, or other explanatory material.

9. Name of person completing application: Beth Mohr

Title: Clinical Team Leader Phone Number: 503-557-1440

Fax Number: 503-557-9652 E-mail: bmoehr@greatriveroms.com

Address: 100 Bryant St. Dubuque, IA 52003

Signature: Beth E. Mohr Date: 2-20-14

Board rules specify that the following subjects are NOT acceptable for continuing education credit: personal development, business aspects of practice, personnel management, government regulations, insurance, collective bargaining, and community service presentations.

If the course was offered by a Board approved sponsor, you should contact the sponsor directly for approval information, rather than submitting this form. A list of approved sponsors and contact information is available on the Board website at www.dentalboard.iowa.gov. Continuing education guidelines and rules are also available on the Board's website. A course is generally acceptable and does not need to go through this formal approval process if it is directly related to clinical practice/oral health care.

Pursuant to Iowa Administrative Code 650—25.3(5), please submit the application for approval 90 days in advance of the commencement of the activity. The Board shall issue a final decision as to whether the activity is approved for credit and the number of hours allowed. The Board may be unable to issue a final decision in less than 90 days. Please keep this in mind as you submit courses for prior approval.

MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE PER COURSE** TO:

Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687



GREAT RIVER
ORAL & MAXILLOFACIAL SURGERY, P.C.

Great River Implant Study Club Invites you to attend:

The Importance of Proper Diagnosis, Treatment for Coding and Reimbursement with ICD-10

presented by:

Terri Bradley

Terri Bradley's extensive hands on experience (25 years), including management of a multi-doctor Dental practice, laid the foundation for her current success as a practice management speaker and consultant. She keeps her finger on the pulse of current policy updates as she continues to work with dental offices daily. Terri offers presentations for dental audiences across the country. She is a member of the Academy of Dental Management Consultants, Speaking Consulting Network, Directory of Dental Speakers and the Medical Group Management Association. She has a degree in Healthcare Administration from Emmanuel College, and is also a graduate of The Consulting U. She is certified with Bent Erickson & Associates in both Employee Law Compliance and Integrated Performance Management.

COURSE OVERVIEW: The recording of accurate patient information is essential to dentistry. The dental record is the official office document that records all diagnostic information, clinical notes, treatment performed and patient-related communications that occur in the dental office, including instructions for home care, consent to treatment, insurance coding and billing details.

EDUCATIONAL OBJECTIVES:

Discuss content of dental visit (reason for visit, symptoms, diagnosis, conditions). Specific dental procedures may minimize the risks associated with the connection between the patient's oral and system health conditions.

We will conduct a broad overview of the most important ICD-10 topics and guidelines. Attendees can expect to learn about new coding procedures such as laterality, extensions and placeholders as well as the importance of prioritizing the codes on the claim form. Attendees will also learn how to code for comorbidities that can affect not only the patient's oral health, such as diabetes but also the claims processing. Increased code specificity means changes in documentation guidelines for providers. This session will help you and your practice prepare for the many changes that ICD-10 brings.

We will cover the procedures and topics most commonly associated with the medical coding dental offices need to use. Evaluation and management codes, x-rays, oral pathology, appliances, dentoalveolar, dental implants, and trauma related services will be discussed.

COURSE LOCATION:

Grand River Center
500 Bell St, Dubuque, IA 52001
563-690-1334

To register please contact Char Eddy at: 563-557-1440

COURSE DATE:

Friday, April 4th, 2014
Registration 7:30
Time: 8:00 - 12:00pm



Approved for 4 CEU AGD (IA Board Approval Pending)

Approved PACE Program Provider
FAGD/MAGD Credit
Approval does not imply acceptance
by a state or provincial board of
dentistry or AGD endorsement
2/1/2014 to 1/31/2018
Provider ID# 321406
CEU/VB

RECEIVED

FEB 21 2014

IOWA DENTAL BOARD

APPLICATION FOR PRIOR APPROVAL OF CONTINUING EDUCATION COURSE OR PROGRAM

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
515-281-5157
www.dentalboard.iowa.gov

Note: A fee of \$10 per course is required to process your request. PLEASE TYPE OR PRINT.

1. Name of organization or person requesting approval: Kless Kraft Dental Lab

Address: 6401 So. 118 St.

Phone: 402.391.8424 Fax: _____ E-mail: cgmiller@klesskraft.com

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
- Dental School
- Dental Hygiene School
- Dental Assisting School
- Military
- Other (please specify): Dental Lab

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

4. Course Title: "Peri-implantitis: Etiology and current treatment trends"

5. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

6. Course date: 3.21.2014 Hours of instruction: 2

810.00
#1150135 3/3/14
8

7. Provide a detailed breakdown of contact hours for the course or program:

see attached invitation

8. Provide the name(s) and briefly state the qualifications of the speaker(s):

see attached invitation

9. Please attach a program brochure, course description, or other explanatory material. *db*

10. Name of person completing application: Chris Miller

Title: Ceo President Phone Number: 402.391.8424

Fax Number: 402.391.5701 E-mail: cmiller@kiesskraft.com

Address: 6601 south 118 st Ames IA 68137

Signature:  Date: 2.18.2014

Board rules specify that the following subjects are NOT acceptable for continuing education credit: personal development, business aspects of practice, personnel management, government regulations, insurance, collective bargaining, and community service presentations.

If the course was offered by a Board approved sponsor, you should contact the sponsor directly for approval information, rather than submitting this form. A list of approved sponsors and contact information is available on the Board website at www.dentalboard.iowa.gov.

You will be contacted after the Continuing Education Advisory Committee has reviewed your request. Please allow a minimum of two to three weeks for a response.

MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE PER COURSE** TO:

**Iowa Dental Board
Advisory Committee on Continuing Education
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687**

METRO WEST DENTAL

SPECIALTY GROUP

Dr. Taera Kim (Orthodontist) and Dr. Taka Miyamoto (Periodontist) invite you to:

ADVANCED DENTAL EDUCATION SERIES: METRO WEST DENTAL SEMINARS
A Multidisciplinary Approach to Dentistry

“PERI-IMPLANTITIS: ETIOLOGY AND CURRENT TREATMENT TRENDS”

Speaker: Dr. Emilio Argüello,

Clinical Director of Post Graduate Periodontology at Harvard University School of Dental Medicine

Date: March 21st 2014 Friday 1 to 3pm

CE Credits: 2 CE credits

Location: Kiess Kraft Dental lab, 6601 S. 118th St. Omaha, NE 68137

Please RSVP: Kim (Metro West Dental) at 402-614-7022

Tuition: Complimentary

Course Description:

As implants become more common and the standard of care for tooth replacement, clinicians must deal with the consequences of implant longevity. Peri-implantitis is a real and challenging issue, affecting the soft and hard tissues around dental implants. This course will define and review the etiology, diagnosis and disease progression of peri-implantitis. We will look at the relationship between periodontal and peri-implant conditions. The lecture will examine current treatment trends and analyze their success rates. This comprehensive overview of diagnosis and treatment solutions for peri-implantitis will help participants deal with these issues in daily practice.

Learning Objectives:

- Recognize the signs, symptoms and disease progression of peri-implantitis
- Become aware of the scientific literature on peri-implantitis and current treatment solutions
- Learn when to treat and when to remove implants

About the Speaker:

Dr. Emilio Argüello obtained his dental degree, specialty training in periodontology, and Master of Science in Oral Science from Tufts University School of Dental Medicine in Boston, MA. Dr. Argüello is Board Certified and a Diplomate of the American Board of Periodontology. He has conducted extensive clinical and basic science research in periodontology at The Forsyth Institute and Harvard University in Boston. He is the clinical director of post graduate periodontology at Harvard University School of Dental Medicine. Dr Argüello has faculty appointments in universities in the United States, Mexico and Europe. Dr. Argüello is the author and editor of a textbook Interdisciplinary Treatment Planning, which has been accepted for publication.

Sponsored by: Metro West Dental, Kiess Kraft, Village Pointe 3D Imaging Center and Strauman LLC



**APPLICATION FOR PRIOR APPROVAL OF
CONTINUING EDUCATION COURSE OR PROGRAM**

IOWA DENTAL BOARD
 400 S.W. 8th Street, Suite D
 Des Moines, IA 50309-4687
 515-281-5157
 www.dentalboard.iowa.gov

Note: A fee of \$10 *per course* is required to process your request. PLEASE TYPE OR PRINT.

1. Name of organization or person requesting approval: University of Iowa College of Dentistry

Address: 801 Newton Rd. Iowa City, IA 52242

Phone: 319-335-7166 Fax: 319-335-7155 E-mail: penni-ryan@uiowa.edu

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
- Dental School
- Dental Hygiene School
- Dental Assisting School
- Military
- Other (please specify): _____

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

4. Course Title: Education, Risk Assessment, and Treatment Planning for Patients
Enrolled in the Dental Wellness Plan

5. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

6. Course date: To be determined Hours of instruction: 2

7. Provide the name(s) and briefly state the qualifications of the speaker(s): _____

Dr. Michael Kanellis, Associate Dean for Patient Care, The University of Iowa
College of Dentistry

8. Please attach a program brochure, course description, or other explanatory material.

9. Name of person completing application: Penni Ryan

Title: Director of Continuing Phone Number: 319-335-7166

Education and Alumni Relations

Fax Number: 319-335-7155 E-mail: penni-ryan@uiowa.edu

Address: 801 Newton Rd., 346 Dental Science N., Iowa City, IA 52242-1010

Signature: Penni M. Ryan Date: 3/6/14

Board rules specify that the following subjects are NOT acceptable for continuing education credit: personal development, business aspects of practice, personnel management, government regulations, insurance, collective bargaining, and community service presentations.

If the course was offered by a Board approved sponsor, you should contact the sponsor directly for approval information, rather than submitting this form. A list of approved sponsors and contact information is available on the Board website at www.dentalboard.iowa.gov. Continuing education guidelines and rules are also available on the Board's website. A course is generally acceptable and does not need to go through this formal approval process if it is directly related to clinical practice/oral health care.

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MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE PER COURSE** TO:

Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687

Education, Risk Assessment, and Treatment Planning for Patients Enrolled in the Dental Wellness Plan

8. Course description:

Iowa's new Dental Wellness Plan takes a novel approach to patient education, risk assessment and disease management. Patients enrolled in the Dental Wellness Plan are immediately eligible for core benefits that include risk assessment, oral health instruction, diagnostic services, stabilization services and emergency care, and they earn additional dental care by returning for care at specified intervals. This novel approach to tiered benefits of care based on personal responsibility has not been tried before and will present a challenge to both patients and providers.

This course will: 1) instruct providers in how to communicate with their patients about the Dental Wellness Plan, 2) introduce providers to the Previser risk assessment tool that assesses caries, periodontal and oral cancer risk; and 3) provide strategies to optimize their patients' oral health within Dental Wellness Plan guidelines.

RECEIVED

MAR 06 2014

IOWA DENTAL BOARD
APPLICATION FOR POST APPROVAL OF
CONTINUING EDUCATION COURSE OR PROGRAM

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
Phone (515) 281-5157
www.dentalboard.iowa.gov

NOTE: A fee of \$10 *per course* is required to process your request. PLEASE TYPE OR PRINT.

1. Course Title: Invisalign Clear Essentials II

2. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

3. Course date: 10/11/2013 Hours of instruction: 9:00 - 5:00

4. Provide a detailed breakdown of contact hours for the course or program:

Agenda enclosed

5. Name of course sponsor: Invisalign - Align Tech Inc.

Address: Align Technology, Inc. 2560 Orchard Parkway
San Jose, California 95131

6. Which of the following educational methods were used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

#4294
\$10.00
3/6/14

7. Provide the name(s) and briefly state the qualifications of the speaker(s): _____

Dr. Ben Miraglia
qualifications enclosed -

8. Please attach a program brochure, course description, or other explanatory material.

9. Name of person completing application: Michael T. Lindeberg

Title: DDS Phone Number: 515-961-0534

Fax Number: 515-961-0534 E-mail: lindeberg.m@gmail.com

Address: 2000 North 4th Street, Indianapolis, Iowa

Signature:  Date: 3/4/14

Board rules specify that the following subjects are NOT acceptable for continuing education credit: personal development, business aspects of practice, personnel management, government regulations, insurance, collective bargaining, and community service presentations.

If the course was offered by a Board approved sponsor, you should contact the sponsor directly for approval information, rather than submitting this form. A list of approved sponsors and contact information is available on the Board website at www.dentalboard.iowa.gov. Continuing education guidelines and rules are also available on the Board's website. A course is generally acceptable and does not need to go through this formal approval process if it is directly related to clinical practice/oral health care.

Pursuant to Iowa Administrative Code 650—25.3(6), within 90 days after the receipt of application, the Board shall issue a final decision as to whether the activity is approved for credit and the number of hours allowed.

MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE** PER COURSE TO:

Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687



Clear Essentials II Agenda:

9:00 am-1:00 pm: Morning Session

- 1) Introduction*
- 2) Clinical Preferences*
- 3) Treatment Planning*
- 4) ClinCheck Review*
- 5) Case Presentations*

1:00 pm-2:00 pm: Lunch

1:00 pm-5:00 pm: Afternoon Session

- 1) Case Presentations (cont)*
- 2) Treatment Management*
- 3) Monitoring Treatment*
- 4) Auxiliaries*
- 5) IPR Strategies*
- 6) AP Correction*
- 7) Finishing*
- 8) Retention*
- 9) Support*

Please note:

Due to the modular format of this program the sections above may not be covered in the exact order listed

MANAGE MY PATIENTS



Home

My Invisalign Program (beta version)

[Invisalign Clear Essentials I](#)

[Invisalign Clear Essentials II](#)

[Invisalign Clear Principles](#)

[Invisalign Clear Techniques II](#)

[Practice Integration Seminar](#)

[Patient Acceptance Workshop](#)

[Getting to Premier Provider and Beyond](#)

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Event Notification

Sign up to be notified of training events in your area.

Name: *

Email: *

Practice Zip: *

Practice Type

I am a current Invisalign Provider: *

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[View our Privacy Policy](#)

Course Overview:

If you are a dentist looking to enhance and build on your Invisalign case experience, this one day course delivers insights from your colleagues to assist you in gaining clinical confidence with Invisalign, help you achieve great clinical results and enhance your overall knowledge of the Invisalign System. During this course you will review the most common cases that move through a typical GP practice each day.

This course is for doctors only.

Educational Objectives:

At the conclusion of the program the participants will gain information that helps to:

- Treatment plan more effectively
- Treat the most common cases in your practice
- Manage cases during treatment

Prerequisites:

[Clear Essentials I](#)

Course Hours:

Registration & Continental Breakfast
8:30 AM - 9:00 AM

Invisalign Clear Essentials II Program ([Download Program Agenda](#))

9:00 AM - 5:00 PM (Lunch provided)

Continuing Education Hours:

Dentists: 7 CE hours

Tuition/Fees:

The registration fee is \$199.

Course fee waived for Invisalign Premier Provider and Premier Provider Elite doctors.

NOTE: Invisalign providers who attend and complete Clear Essentials II may submit one Full, Assist, or Teen treatment option at an individual treatment price of \$990; the case must be approved within 45 days after course completion. Offer available once per year and cannot be combined with other offers; for more details, read the [full terms and conditions](#).

Clinical training provided by guest speakers reflects their own views and not necessarily those of Align Technology, Inc. Contact your Invisalign Registrar for rules and policies. Schedule, location, pricing, and promotional offers are subject to change without notice.

Please see more details about our [cancellation policy](#)

To register for this course, please visit [the Education tab](#) in the Invisalign Doctor Site (login required)



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1044 Starling Drive

Kingsport, TN, 37660

Phone: 1.800.533.1108

Fax: 423.392.9702

Email: usdinstitute@juno.com**OUR MISSION STATEMENT IS:**

"Empowering doctors and staffs to attain greater success through education."

 Special Invisalign certification

Dr. Benjamin Miraglia

Private Practice

Full time private practice in general dentistry in Mount Kisco, NY since 1994.

**Hospital Affiliations**

- Danbury Hospital, Danbury, CT 1994. Clinical Attending Dentist
- Danbury Hospital, Danbury, CT 1993. General Practice Resident

Education

- United States Dental Institute, 2007
- Residency: Danbury Hospital, Danbury, CT, General Practice Residency 1993-94
- Dental School: University of Buffalo, Buffalo, NY 1989-93 DDS degree
- Undergraduate: Manhattanville College, Purchase, NY 1986-89 BA

Honors

- Westchester County Community Service Award: For providing dentistry to developmentally disabled residents, Westchester, NY 2006
- Omicron Kappa Upsilon Honor Society, University of Buffalo
- Donald T. Kozlowski Memorial Award
- Academy of Operative Dentistry Award
- Victor A. Fumia Award
- George B. Snow Award

Professional Organizations

- American Dental Association
- Academy of General Dentistry
- New York State Dental Society
- Ninth District Dental Society
- The American Association for Functional Orthodontics

Invisalign®

- Presenter - May 2008 Invisalign GP Summit, Las Vegas NV
- Presenter - April 2008, Greater Long Island Dental Meeting
- Member of Aligntech Institute Faculty, 2007
- Treated 130 cases
- Study club speaker for New York and New Jersey
- Main stage speaker at the opening general session of Invisalign's annual National Summit in Las Vegas, NV, June 2007

- 2 cases featured in Invisalign's GP case Gallery, 2006

Contact

Dr. Benjamin Miraglia

280 North Bedford Road, Suite 201

Mount Kisco, NY 10549

Email: staff@brownegoetzmiraglia.com

Phone: 914.241.1191

Fax: 914.241.1254

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CERTIFICATE OF COMPLETION

This letter certifies that the person below participated in the following course given by Align Technology, Inc., continuing Dental Education Program.

Mike Lindeberg

PROGRAM PROVIDER: **Align Technology, Inc.**

Date: **10/11/2013**

COURSE TITLE: **Invisalign Clear Essentials II**

LOCATION: **Omaha, NE**

EDUCATIONAL METHOD: **7 hours Lecture**

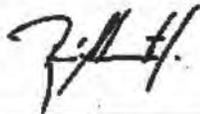
CODE: **Removable Orthodontic Appliances**

CE CREDIT: **7 hours**

Course Completion Code: 07-4809-13091

393811

Instructor: Dr. Ben Miraglia



Dr. René Sterental
Align Technology Professional Education
2560 Orchard Pkwy
San Jose, CA 95131

Please complete and save for your records:

Licensee Name

Signature

Licensee Number

PARTICIPANTS: Continuing education credits issued for participation in the CE activity may not apply toward license renewal in all states. It is the responsibility of each participant to verify the requirements of his/her state licensing board(s).

RECEIVED

MAR 06 2014

IOWA DENTAL BOARD

APPLICATION FOR PRIOR APPROVAL OF CONTINUING EDUCATION COURSE OR PROGRAM

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
515-281-5157
www.dentalboard.iowa.gov

Note: A fee of \$10 per course is required to process your request. PLEASE TYPE OR PRINT.

1. Name of organization or person requesting approval: Sarah Bauer
Address: 1929 Merle Hay Road, Des Moines, IA 50311
Phone: 515-971-5124 Fax: N/A E-mail: sarahbauer@global.com

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
Dental School
Dental Hygiene School
Dental Assisting School
Military
Other (please specify):

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
Home study (e.g. self assessment, reading, educational TV)
Participation
Discussion
Demonstration

4. Course Title: Sugar, Sugar, Sugar: From Carbon to Caries

5. Course Subject:

- Related to clinical practice
Patient record keeping
Risk Management
Communication
OSHA regulations/Infection Control
Other:

6. Course date: 4-5-14 Hours of instruction: 3

Handwritten notes: 4607, 10.00, 3/6/14

7. Provide the name(s) and briefly state the qualifications of the speaker(s):
Sarah Bauer is a dental hygienist who has been practicing for over 9 years. She has presented two previous continuing education courses at the competent level in the past. She is an adjunct instructor at DMACC.

8. Please attach a program brochure, course description, or other explanatory material.

9. Name of person completing application: Sarah Bauer
Title: Dental hygienist Phone Number: 519-971-5124
Fax Number: N/A E-mail: Sarahb@bauerglobal.com
Address: 1929 Merle Hay Rd Des Moines, IA 50311
Signature: Sarah Bauer Date: 3-4-14

Board rules specify that the following subjects are NOT acceptable for continuing education credit: personal development, business aspects of practice, personnel management, government regulations, insurance, collective bargaining, and community service presentations.

If the course was offered by a Board approved sponsor, you should contact the sponsor directly for approval information, rather than submitting this form. A list of approved sponsors and contact information is available on the Board website at www.dentalboard.iowa.gov. Continuing education guidelines and rules are also available on the Board's website. A course is generally acceptable and does not need to go through this formal approval process if it is directly related to clinical practice/oral health care.

Pursuant to Iowa Administrative Code 650—25.3(5), please submit the application for approval 90 days in advance of the commencement of the activity. The Board shall issue a final decision as to whether the activity is approved for credit and the number of hours allowed. The Board may be unable to issue a final decision in less than 90 days. Please keep this in mind as you submit courses for prior approval.

MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE PER COURSE** TO:

**Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687**

Sugar, Sugar, Sugar: From Carbon to Caries

Presenter: Sarah Bauer, RDH BA

Course Description:

- Chemistry of sugar

- History of sugar

- Marketing of sugar

 - Soda and cereal

- Sugar and systemic health

- Sugar and oral health

 - Food journals, CAMBRA, and caries risk assessment

**APPLICATION FOR PRIOR APPROVAL OF
CONTINUING EDUCATION COURSE OR PROGRAM**

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
515-281-5157
www.dentalboard.iowa.gov

Note: A fee of \$10 *per course* is required to process your request. PLEASE TYPE OR PRINT.

1. Name of organization or person requesting approval: University of Iowa College of Dentistry

Address: 801 Newton Rd. Iowa City, IA 52242

Phone: 319-335-7524 Fax: 319-335-7187 E-mail: michelle-mcquistan@uiowa.edu

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
- Dental School
- Dental Hygiene School
- Dental Assisting School
- Military
- Other (please specify): _____

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

4. Course Title: Culturally Responsive Health Care in Iowa

5. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management (decreased risk by better communication with patients)
- Communication
- OSHA regulations/Infection Control
- Other: _____

6. Course date: June 6, 2014

Hours of instruction: 6.5

7. Provide the name(s) and briefly state the qualifications of the speaker(s): _____
See attachment.

8. Please attach a program brochure, course description, or other explanatory material.

9. Name of person completing application: Michelle McQuistan

Title: Associate Professor Phone Number: 319-335-7524

Fax Number: 319-335-7187 E-mail: michelle-mcquistan@uiowa.edu

Address: 801 Newton Rd., 331 Dental Science Bldg. N., Iowa City, IA 52242

Signature: Michelle McQuistan Date: 1/17/14

Board rules specify that the following subjects are NOT acceptable for continuing education credit: personal development, business aspects of practice, personnel management, government regulations, insurance, collective bargaining, and community service presentations.

If the course was offered by a Board approved sponsor, you should contact the sponsor directly for approval information, rather than submitting this form. A list of approved sponsors and contact information is available on the Board website at www.dentalboard.iowa.gov. Continuing education guidelines and rules are also available on the Board's website. A course is generally acceptable and does not need to go through this formal approval process if it is directly related to clinical practice/oral health care.

Pursuant to Iowa Administrative Code 650—25.3(5), please submit the application for approval 90 days in advance of the commencement of the activity. The Board shall issue a final decision as to whether the activity is approved for credit and the number of hours allowed. The Board may be unable to issue a final decision in less than 90 days. Please keep this in mind as you submit courses for prior approval.

MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE PER COURSE** TO:

**Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687**

“Culturally Responsive Health Care in Iowa”
Friday, June 6, 2014
Coralville Marriott Hotel & Conference Center

The goal of this inaugural conference is to improve the delivery of culturally sensitive and responsive health care to increasingly diverse patient populations. The keynote speaker is Joseph R. Betancourt, MD, MPH, Director of Multicultural Education at Harvard Medical School. Attendees will include a wide spectrum of health care professionals across a variety of specialties and disciplines. (Dentists, physicians, nurses, physician assistants, pharmacists, hospital social workers, public health workers.)

The program will be interactive and dynamic, involving the audience in many of the sessions. A patient panel will include individuals who will recount their experiences in the health care system and invite questions and comments from the audience. The learning at lunch session will provide participants with a challenge exercise on diversity issues in the health care system to encourage open discussion among participants. Finally, there will interactive workshops on such topics as cultural humility, microaggressions and their impact on patient/provider communication, and the sensitive care of gay, lesbian, bi-sexual, and transgender (LGBT) patients.

At the completion of this course, participants should be able to:

- Define cultural competency and cultural sensitivity.
- Discuss the importance of cultural competency to the dental team.
- Expand awareness of cultural assumptions and how cultural filters and ethnocentrism affect interactions with patients.
- Identify some of the barriers to culturally competent dentist-patient relationships.
- Provide tools and resources to use with patients to improve culturally sensitive communication between the dental team and the patient.
- Define health literacy and discuss how low health literacy can impact patient-provider communication.
- Identify methods for assessing patients' health literacy.
- Provide tools that the dental team can use to increase patients' health literacy.
- Discuss the importance of utilizing culturally appropriate materials to increase patients' health literacy.

Time	Agenda	Speakers
7:15-8:00 am	Registration and Continental Breakfast	
8:00-8:05	Welcome	Jean Robillard
8:05-8:15	Conference Overview Introduce Keynote Speaker	Sherree Wilson
8:15-9:15	Keynote: Pursuing Value in a Time of Healthcare Transformation: Delivering Quality Care to Diverse Populations	Joseph Betancourt
9:15-10:15	Patient Panel: Real-Life Patient Experiences	Moderator: Linda Kroon 1. Stef Schuster-LGBTQ 2. Megan Schwalm-Cultural Sensitivites 3. Ray Calef-Veterans
10:15-10:30	Break	
10:30-11:30	Interprofessional Provider Panel Experiences & Challenges: What could we have done better?	Co-Moderators: Foad Elahi and Joel Gordon 1. Jane Gressang – Working with interpreters 2. Pamela Wong, Pharmacist 3. Kristin Manges, Nurse 4. Suzanne Witte, Social Worker
11:30-11:50	Cultural Diversity	Valerie Garr
11:50-12:10	Health Literacy	TBD
12:10-12:30	Religious and Ethnic Issues:	Motier Haskins
12:30-1:30	Lunch	Challenge Exercises
1:30-2:30	Literacy	Briana Woods-Jaeger
2:30-2:45	Break	

2:45-3:30pm	Concurrent Workshops 1-Microaggressions 2-Lesbian, Gay, Bisexual, and Transgender Healthcare	1-Linda Kroon 2-Katie Imborek
3:30-3:45	Break	
3:45-4:30	Concurrent Workshops 1-Social Determinants of Health Among Incarcerated Populations 2-Cultural Humility	Anne Gaglioti Denise Martinez
4:30-5:00	Wrap-up and next steps	Joel Gordon
5:00	Adjourn	

Sponsored by the University of Iowa Colleges of Dentistry, Medicine, Nursing, Public Health, and Pharmacy

Speakers' Biographies

Jean Robillard, MD-Vice President for Medical Affairs, University of Iowa

Sherree Wilson, PhD-Associate Dean for Cultural Affairs and Diversity Initiatives, Carver College of Medicine, University of Iowa

Joseph R. Betancourt, MD, MPH

Director, The Disparities Solutions Center

Senior Scientist, Mongan Institute for Health Policy

Associate Professor of Medicine, Harvard Medical School

Director of Multicultural Education, Massachusetts General Hospital

Foad Elahi, MD-Clinical Assistant Professor, Department of Anesthesia, University of Iowa Hospitals and Clinics

Joel Gordon, MD-Professor, Department of Nephrology, University of Iowa Hospitals and Clinics

Jane Gressang, PhD-Lecturer, Department of English as a Second Language, University of Iowa

Pamela Wong-Pharmacist, NuCara Pharmacy, Marshalltown, IA

Kirstin Manges, BSN,RN-Staff Nurse, University of Iowa Hospitals and Clinics

Suzanne Witte-Licensed Social Worker, Family Support Program, University of Iowa Hospitals and Clinics

Valerie Garr-Diversity Coordinator, College of Nursing, University of Iowa

Briana Woods-Jaeger , PhD, Community and Behavioral Health, College of Public Health, University of Iowa

Challenge Exercises:

Michelle McQuistan, DDS, MS-Associate Professor, College of Dentistry + 14 other group facilitators

Linda Kroon, MA-Director, Women's Resource and Action Center, University of Iowa

Katie Imborek, MD-Clinical Assistant Professor, Department of Family Medicine and co-director of GLBTQ Clinic, University of Iowa Hospital and Clinics, University of Iowa Hospitals and Clinics

Anne Gaglioti, MD- Clinical Assistant Professor, Department of Family Medicine, University of Iowa Hospitals and Clinics

Denise Martinez, MD- Clinical Assistant Professor, Department of Family Medicine, University of Iowa Hospitals and Clinics

APPLICATION FOR POST APPROVAL OF CONTINUING EDUCATION COURSE OR PROGRAM

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
Phone (515) 281-5157
www.dentalboard.iowa.gov

NOTE: A fee of \$10 per course is required to process your request. PLEASE TYPE OR PRINT.

1. Course Title: "Implants: Indications, ICAT scans, Grafts, Instruments for Maintenance and More"

2. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

3. Course date: 11-7-2013 Hours of instruction: 2

4. Provide a detailed breakdown of contact hours for the course or program:
1.5 hours - Patient referral experience - view props, visuals, ICAT scans, bone graft material. Post operative care, treatment and healing time, how to prepare the patient.
.5 hours - Discuss and view instruments to use for maintenance, explain proper treatment for homecare and for recall visits, discuss failures and how to avoid them.

5. Name of course sponsor: North Central Dental Hygienists Association / IDHA - approved sponsor
Address: 1490 Kent Ave. (Laurie Abbas, Treasurer)
Kanawha, IA 50447

6. Which of the following educational methods were used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

7. Provide the name(s) and briefly state the qualifications of the speaker(s):
Reda Taleb, DMD, MS - Oral and maxillofacial surgeon and implant specialist

8. Please attach a program brochure, course description, or other explanatory material.
Course notification was sent via newsletter and e-mails to members/non-members.

9. Name of person completing application: Nancy Miller

Title: Continuing Education Chair Phone Number: 641-749-2604

Fax Number: E-mail: dnmiller@myomnitel.com

Address: 1898 Zinnia Avenue, Rockford, IA 50468

Signature: Nancy Miller, RCH, BS Date: 3-13-2014

Board rules specify that the following subjects are NOT acceptable for continuing education credit: personal development, business aspects of practice, personnel management, government regulations, insurance, collective bargaining, and community service presentations.

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MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE PER COURSE** TO:

**Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687**

APPLICATION FOR POST APPROVAL OF CONTINUING EDUCATION COURSE OR PROGRAM

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
Phone (515) 281-5157
www.dentalboard.iowa.gov

NOTE: A fee of \$10 per course is required to process your request. PLEASE TYPE OR PRINT.

1. Course Title: "Treating the Diabetic Patient in the Dental Office"
~~"Nutritional Counseling for the Diabetic and Pre-Diabetic Patient - What to Ask & When to Refer"~~

2. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

3. Course date: 3-1-2014 Hours of instruction: 3

4. Provide a detailed breakdown of contact hours for the course or program:

~~2 hours - understanding diabetes - ask questions in health hx and what to look for in clinical exam, A1c explained, glucometer readings and how to use one, what are acceptable gms of sugar, how do other nutrients affect digestion and oral health, common medications - indications and affects on oral health.~~

~~1 hour - Food labels, healthy diet, communicating relationship of sugar to disease, systemic relationship, risk factors for disease, artificial sweeteners and effect on oral and systemic health~~

5. Name of course sponsor: North Central Dental Hygienists Association / IDHA *approved sponsor*

Address: 1490 Kent Avenue
Kanawha, IA 50447

6. Which of the following educational methods were used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

7. Provide the name(s) and briefly state the qualifications of the speaker(s): _____
 Keith Hargis, RD, LD - Diabetes educator in Mercy Hospital Diabetes Center, Mason City, IA

 Jess Pavlinec, RD, LD - HyVee East Dietitian in Mason City, IA

8. Please attach a program brochure, course description, or other explanatory material.
 Course information sent via newsletter and e-mails to members and non-members.

9. Name of person completing application: Nancy Miller
 Title: Continuing Ed Chairman Phone Number: 641-749-2604
 Fax Number: _____ E-mail: dnmiller@myomnitel.com
 Address: 1898 Zinnia Avenue, Rockford, IA 50468
 Signature: Nancy Miller, RDH, BS Date: 3-13-2014

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MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE PER COURSE** TO:

**Iowa Dental Board
 Continuing Education Advisory Committee
 400 S.W. 8th Street, Suite D
 Des Moines, Iowa 50309-4687**



**HALL-PERRINE
CANCER CENTER**

701 10th Street SE
Cedar Rapids, IA 52403
www.hallperrinecancercenter.org
(319) 365-HOPE (4673)

March 20, 2014

Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687

Dear Sir or Madam:

This is a request of the Iowa Dental Board to approve 2 hours of continuing education credits for dentists, dental assistants, and dental hygienists for this upcoming educational program: 2014 Spring Cancer Care Update for Dental Health Professionals. Enclosed is the conference agenda, bio information on Charles Lynch, M.D., M.S., Ph.D., and the \$10.00 application fee. The program (HPV and Oral, Head and Neck Cancers) is scheduled for April 25, 2014 and will be repeated on April 30, 2014. These identical programs will both be held at Mercy Medical Center in Cedar Rapids, IA, and I am respectfully asking permission to offer continuing education approval for both dates. I apologize for the later notice, but our originally confirmed speaker told us recently that he had to now decline.

The purpose of this program is to offer dental health professionals the opportunity to learn about current issues involved in the care of patients who have a diagnosis of oral/ head and neck related cancer.

I would appreciate your consideration for approval of this continuing dental education application. If you need additional information or have questions, please call me at (319) 221-8771.

Sincerely,

Celeste Barkley, RN, OCN
Hall Perrine Cancer Center
Outreach Coordinator

**APPLICATION FOR PRIOR APPROVAL OF
CONTINUING EDUCATION COURSE OR PROGRAM**

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
515-281-5157
www.dentalboard.iowa.gov

Note: A fee of \$10 *per course* is required to process your request. PLEASE TYPE OR PRINT.

1. Name of organization or person requesting approval: Hall-Perrine Cancer Center
Mercy Medical Center
Address: 701 10th St. SE Cedar Rapids IA 52403
Phone: 319-221-8771 Fax: 319-861-7691 E-mail: cbarkley@mercyCare.org

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
- Dental School
- Dental Hygiene School
- Dental Assisting School
- Military
- Other (please specify): Hall-Perrine Cancer Center - Mercy Medical Ctr.

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
- Home study (e.g. self assessment, reading, educational TV)
- Participation
- Discussion
- Demonstration

4. Course Title: 2014 Spring Cancer Care Update for Dental Health Professionals

5. Course Subject:

- Related to clinical practice
- Patient record keeping
- Risk Management
- Communication
- OSHA regulations/Infection Control
- Other: _____

6. Course date: 4/25/14 *any repeat 4/30/14* Hours of instruction: 2.0 on 4-25-14
2.0 on 4-30-14

7. Provide the name(s) and briefly state the qualifications of the speaker(s): Charles Lynch,
M.D., M.S., PhD Professor, Dept. of Epidemiology
College of Public Health, University of Iowa.
Medical Director & Principal Investigator of the State
Health Registry of Iowa; Leader: Cancer Epidemiology
Program of Holden Comprehensive Cancer Program (Iowa City)
8. Please attach a program brochure, course description, or other explanatory material.

9. Name of person completing application: Celeste Barkley, RN, OCN
Title: Outreach Coordinator Phone Number: 319 221-8771
Fax Number: 319 861 7691 E-mail: cbarkley@mercy care.org
Address: 701 10th St. SE Cedar Rapids, IA 52403
Signature: Celeste Barkley Date: 3-20-14

Board rules specify that the following subjects are NOT acceptable for continuing education credit: personal development, business aspects of practice, personnel management, government regulations, insurance, collective bargaining, and community service presentations.

If the course was offered by a Board approved sponsor, you should contact the sponsor directly for approval information, rather than submitting this form. A list of approved sponsors and contact information is available on the Board website at www.dentalboard.iowa.gov. Continuing education guidelines and rules are also available on the Board's website. A course is generally acceptable and does not need to go through this formal approval process if it is directly related to clinical practice/oral health care.

Pursuant to Iowa Administrative Code 650—25.3(5), please submit the application for approval 90 days in advance of the commencement of the activity. The Board shall issue a final decision as to whether the activity is approved for credit and the number of hours allowed. The Board may be unable to issue a final decision in less than 90 days. Please keep this in mind as you submit courses for prior approval.

MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE** PER COURSE TO:

Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687

Charles F. Lynch
Professor

EDUCATION

Loras College, Dubuque, IA	BS	1974	Chemistry
University of Iowa, Iowa City, IA	MD	1979	Medicine
University of Iowa, Iowa City, IA	MS	1979	General Preventive Med
University of Iowa, Iowa City, IA	PhD	1984	Epidemiology

EMPLOYMENT AND EXPERIENCE

1982-85	Associate (part-time), Dept. of Preventive Medicine and Environmental Health, University of Iowa
1986-87	Associate (full-time), joint appointment, Dept. of Pathology (primary) and the Dept. of Preventive Medicine and Environmental Health, College of Medicine, University of Iowa
1988-93	Assistant Professor, (joint appointment), Dept. of Preventive Medicine and Environmental Health (primary) and Dept. of Pathology, College of Medicine, University of Iowa
1993-98	Associate Professor, (joint appointment), Dept. of Preventive Medicine and Environmental Health (primary) and Dept. of Pathology, College of Medicine, University of Iowa
1998-	Full Professor (joint appointment), Dept. of Epidemiology (primary) and Dept. of Pathology, College of Public Health (1999), University of Iowa
2000-	Associate Head of Research, Dept. of Epidemiology, College of Public Health, University of Iowa

POSTGRADUATE EDUCATION

1979-81	National Research Service Institutional Research Fellow Award, The University of Iowa, supervisor: Robert B. Wallace, M.D.
1980	15th Annual Graduate Seminar Session in Epidemiology, University of Minnesota, Minneapolis, Minnesota
1981-82	Senior Research Assistant, Department of Preventive Medicine and Environmental Health, The University of Iowa
1982-86	Anatomic Pathology Residency, The University of Iowa Hospitals and Clinics

HONORS AND AWARDS

6/79-6/81	National Research Service Institutional Research Fellowship Award, The University of Iowa, supervisor: Robert B. Wallace, M.D.
1987-92	Preventive Oncology Academic Award, National Cancer Institute
1989	Excellence in Teaching Award, Department of Preventive Medicine and Environmental Health, College of Medicine, The University of Iowa
1989	Collegiate Teaching Award, The University of Iowa
1997, 1999	Top individual grant/contract recipient, The University of Iowa
1998, 1999	Dept. of Preventive Medicine and Environmental Health nominee for the John P. Long Teaching Award in the Basic Sciences, College of Medicine, The University of Iowa
2002	Faculty Research Award, College of Public Health, The University of Iowa,
2003	AcademicKeys Who's Who in Health Sciences Education, 2003
2003	Distinguished Service Award, Board in Control of Athletics, The University of Iowa
2004	Outstanding Alumni Award, College of Public Health, The University of Iowa
2006	Member, Alpha Phi Chapter of the Delta Omega Society (an honorary public health society)
2006-07	Special Recognition for Student Teaching in the Introduction to Human Pathology Course, Department of Pathology
2008	Faculty Achievement Award in Community Engagement, Board of Advisors, College of Public Health, The University of Iowa
2009	Distinguished Service Award, Presidential Committee on Athletics, The University of Iowa

2014 Spring Cancer Care Update for Dental Health Professionals
Friday mid-day, April 25, 2014 or Wednesday evening, April 30, 2014
• Mercy Medical Center 701 10th Street SE • Cedar Rapids

4/25/14	<u>Program Agenda</u>	4/30/14
11:30 am	Registration & Light Meal	5:30 pm
12:10 pm	Welcome/Introductions	6:10 pm
12:15 pm	<i>HPV and Oral, Head and Neck Cancers</i> <i>Charles Lynch, M.D., M.S., Ph.D.</i>	6:15 pm
1:15 pm	Break/Desserts	7:15 pm
1:30 pm	<i>HPV and Oral, Head and Neck Cancers (continued)</i> <i>Charles Lynch, M.D., M.S., Ph.D.</i>	7:30 pm
2:30 pm	Evaluation & Adjournment	8:30 pm

Intended Audience

Dentists, dental hygienists, dental assistants and other dental professionals.

Purpose and Objectives

Dental Health Professionals are an integral part of the team involved in the care of cancer patients. The purpose of this program is to offer dental health professionals the opportunity to learn about current issues involved in the care of patients who have a diagnosis of cancer.

Upon completion of this program, participants will be able to:

- Describe HPV-related cancer sites and discuss the role of HPV in oropharyngeal cancer
- Assimilate the importance of increasing dental patient education regarding oral cancer risk factors, including HPV
- Discuss the preventive role of HPV vaccine

Faculty

Charles Lynch, M.D., M.S., Ph.D.

Full Professor (joint appointment):

Department of Epidemiology (primary) and Department of Pathology, College of Public Health,
 University of Iowa

Medical Director & Principal Investigator of the State Health Registry of Iowa

CONTINUING EDUCATION SPONSOR APPLICATION

SCANNED

IOWA DENTAL BOARD

400 S.W. 8th St, Suite D • Des Moines, IA 50309-4687
Phone (515) 281-5157 • www.dentalboard.iowa.gov

FEB 27 2014

Groups or organizations wanting to obtain status as a board-approved sponsor of continuing education must complete this application and enclose the sponsor fee of \$100.

1. Official Name of Sponsor Group: Oral Surgery Associates
Contact Person: Amanda ⁴⁰²⁻³⁹⁰⁻⁰⁷⁷⁰ Phone: 712-328-8892 Fax: 402 390 1074
Address: 201 Ridge Street, #308 E-mail: avisty@omfacialsurgery.com

2. Type of organization (attach bylaws if applicable):
 Constituent or component society Dental School
 Dental Hygiene School Dental Assisting School
Other (please specify): Oral Surgery Practice

3. If applicable, approximate number of active members _____

4. Name of Current Officers TITLE ADDRESS PHONE

Name of Current Officers	TITLE	ADDRESS	PHONE

5. Please provide contact information below. The name you provide will be posted as the contact person for your organization on the Board's website.

Name: Amanda Visty ⁽⁷¹²⁾ Phone: 328-8892 ⁽⁴⁰²⁾ Fax: 390 1074
Full Address: 201 Ridge Street, #308 Ormaiz Pluffs, IA 51503
Internet Address: www.omfacialsurgery.com E-mail: info@omfacialsurgery.com

6. Approximately how many courses, meetings or programs does your group or organization sponsor each year? 20-30

7. Average number of attendees at each course or meeting: 10

8. How many courses, meetings or programs do you anticipate sponsoring this year? 20

9. Which of the following educational methods does your organization use? Please check all applicable.

- Home study (e.g. self assessment, reading, educational TV, internet courses)
- Lectures
- Participation
- Discussion
- Demonstration

#B1565
\$100
2/27/14

10. Course Subjects Offered: (check all applicable)

Related to clinical practice

Risk Management

OSHA regulations/Infection Control

Other: _____

Patient record keeping

Communication

11. List all educational programs or courses offered during the preceding two years. If additional space is needed, please attach a separate listing.

Date	Course Title	Instructor	Location	# Hours
Ongoing	Third Molars	Dr. Heit/Anderson	CB	1
Ongoing	Implants 101	Dr. Heit/Anderson	CB	1
Ongoing	all on 4	Dr. Heit/Anderson	CB	1
Ongoing	Cone Beam CT	Dr. Heit/Anderson	CB	1
Ongoing	Emergencies	Dr. Heit/Anderson	CB	1
Ongoing	Pathology	Dr. Heit/Anderson	CB	1

12. Please attach a program brochure, course description, or other explanatory material to describe a "typical" yearly program sponsored by your organization.

Sponsors must be formally organized and adhere to board rules for planning and providing continuing education. When courses are promoted as approved continuing education courses that do not meet the requirements as defined by the Board, the sponsor will be required to refund the registration fee to participants. Sponsors may offer non-credit courses provided participants are informed that no credit will be given. Failure to meet this requirement may result in loss of approved sponsor status. Subjects are NOT acceptable for continuing education credit include, but are not limited to: personal development, business aspects of practice, personnel management, government regulations, insurance, collective bargaining, and community service presentations.

I understand and agree to follow the Board rules for planning and providing continuing education.

Name of person completing this application: Amanda S. Visty

Address: 301 Bridge Street, Council Bluffs Phone: 712.328.8892

Amanda S. Visty
Signature

IA Feb. 11, 2013
Date

Please note: The sponsor application fee of \$100 must accompany this application. You will be contacted after the Continuing Education Advisory Committee and Iowa Dental Board has reviewed your application.

RETURN TO:

IOWA DENTAL BOARD
Advisory Committee on Continuing Education
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687

The Affordable Care Act and the Implications for Dentistry

Dr. Damiano will provide information about the Affordable Care Act (ACA or Obamacare), what lead to its establishment, the impact it is having in Iowa, and the implications for dentistry.

PETER C. DAMIANO

Peter Damiano is the director of the University of Iowa Public Policy Center and is a Professor in the Department of Preventive & Community Dentistry. He is a health services researcher studying access to and quality of primary care services, including dental care. He is conducting funded studies in the areas of health care reform, maternal and child health, health disparities and health care for underserved populations. He is the author of over 100 journal articles and research monographs and has been principal investigator on over 50 funded research studies. He staffed the Iowa State Health Care Reform Commission in the past and often provides research information to state and federal policymakers. He also provides dental services to patients in the University of Iowa's Faculty Group Practice. He will be talking about the Accountable Care Act, and the implications for oral health and the dental delivery system.

**APPLICATION FOR PRIOR APPROVAL OF
CONTINUING EDUCATION COURSE OR PROGRAM**

IOWA DENTAL BOARD
400 S.W. 8th Street, Suite D
Des Moines, IA 50309-4687
515-281-5157
www.dentalboard.iowa.gov

Note: A fee of \$10 per course is required to process your request. PLEASE TYPE OR PRINT.

1. Name of organization or person requesting approval: Penni Ryan, University of Iowa College of Dentistry
Address: 346 Dental Science N. Iowa City, IA 52242-1010
Phone: (319) 335-7166 Fax: (319) 335-7155 E-mail: penni-ryan@uiowa.edu

2. Type of organization (attach bylaws if applicable):

- Constituent or component society
 Dental School
 Dental Hygiene School
 Dental Assisting School
 Military
 Other (please specify): _____

3. Which of the following educational methods will be used in the program? Please check all applicable.

- Lectures
 Home study (e.g. self assessment, reading, educational TV)
 Participation
 Discussion
 Demonstration

4. Course Title: Regional Dental Public Health Conference/Affordable Care Act and the Impact on Dentistry

5. Course Subject:

- Related to clinical practice
 Patient record keeping
 Risk Management
 Communication
 OSHA regulations/Infection Control
 Other: _____

6. Course date: October 13, 2013

Hours of instruction: 8

7. Provide the name(s) and briefly state the qualifications of the speaker(s):
Dr. Peter Damiano, Director of UI Public Policy Center and Professor at the University
of Iowa College of Dentistry
Janice Kupiec, ADA Manager, Legislative and Regulatory Policy, Federal Affairs

8. Please attach a program brochure, course description, or other explanatory material.

9. Name of person completing application: Penni Ryan
Title: Director, Continuing Ed Phone Number: 319-335-7166
Fax Number: 319-335-7155 E-mail: penni-ryan@uiowa.edu
Address: U of Iowa, College of Dentistry, 346 Dental Science N., Iowa City, IA
52242-1010
Signature: Penni M. Ryan Date: 9/4/13

Board rules specify that the following subjects are NOT acceptable for continuing education credit: personal development, business aspects of practice, personnel management, government regulations, insurance, collective bargaining, and community service presentations.

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MAIL COMPLETED APPLICATION ALONG WITH THE REQUIRED **\$10 FEE PER COURSE** TO:

Iowa Dental Board
Continuing Education Advisory Committee
400 S.W. 8th Street, Suite D
Des Moines, Iowa 50309-4687

**Regional Dental Public Health Conference
Dentistry and Health Care Reform
Affordable Care Act and the Impact on Dentistry
October 13-14, 2013 | Iowa City, Iowa**

The next major implementation steps from the Affordable Care Act will begin on October 1, 2013 through the beginning of the open enrollment period for insurance coverage through the Health Benefits Marketplaces. Dentistry and dental public health could be affected in a variety of ways including through expansions in insurance coverage, implications for care for vulnerable populations through the public and private safety net, and potential financing and delivery system changes.

The goals of the symposium are to improve attendees understanding of:

- the factors driving the health care reform discussion
- the components of the Affordable Care Act and the implications for dentistry
- how the health benefits marketplaces will incorporate dental insurance coverage
- how the Medicaid expansion is or is not being implemented across the Midwest
- the possible inclusion oral health care into Accountable Care Organizations and Health Home development

Questions to be discussed:

- Is dental coverage required as of January 1, 2014 under the ACA?
- What is the dental EHB for children?
- Will limited Medicaid program expansion affect coverage?
- How many additional adults may receive dental benefits under the ACA?
- How many additional Medicaid dental visits will the ACA generate?
- What impact will the ACA have on dental spending nationwide?
- Are state specific projections available?

Agenda

Sunday, Oct 13, 2013 | Holiday Inn Hotel and Conference Center, Coralville, IA

7:00-8:30: Panel discussion about implications of the ACA on dentistry (open to the public with area dentists and all dental students invited to presentations)

7:00-7:05 **Welcome Remarks**

- **David Johnsen**, Dean, UI College of Dentistry

7:05-7:10 **Introductions**

- **John Warren**, Professor, UI College of Dentistry

7:10-7:35 **Overview of the Affordable Care Act**

- **Pete Damiano**, Director UI Public Policy Center and Professor, UI College of Dentistry

- 7:35-8:00 ***The Affordable Care Act and the Implications for Dentistry***
- Janice Kupiec, ADA Manager, Legislative and Regulatory Policy, Federal Affairs

8:00-8:30 ***Panel Discussion***

1.5 CEUs requested

Monday, Oct 14, 2013 | 8:30am – 3:30pm

Holiday Inn Hotel and Conference Center, Coralville, IA

- 8:00-8:30 ***Continental Breakfast & Registration***
- 8:30-8:45 ***Welcome Remarks***
- Steve Levy, Professor, UI College of Dentistry
 - John Warren, Professor, UI College of Dentistry
 - Pete Damiano, Director UI Public Policy Center and Professor, UI College of Dentistry
- 8:45-9:30 ***Maternal and Child Health and the Affordable Care Act***
- Kathy Chan, Associate Director and Director of Policy and Advocacy Illinois Maternal and Child Health Coalition. "Maternal and Child Health Services and the ACA" (30 min present, 15 min questions)
- 9:30-10:15 ***Medicaid Health Homes and the Medicaid ACO and ACA Impact***
- Marni Bussell, Project manager, Iowa Medicaid Enterprise. "Medicaid Health Homes and Medicaid ACOs in Iowa" (30 min present, 15 min questions)
- 10:15-10:30 ***Networking Break***
- Panel Discussions 15 min each presentation, 15 min discussion for the panel***
- 10:30-12:00 ***Dental Benefits in the Marketplace: Medicaid and private insurance and ACA Impact***
- Bob Russell, State Dental Director, Iowa Department of Public Health (moderator)
 - Jeff Russell, President and CEO, Delta Dental of Iowa. "Stand Alone Private Dental Plans in the Health Benefits Marketplace."

- **Sally Nadolsky**, Policy Specialist, Iowa Medicaid Enterprise. "Dental coverage in Iowa's Medicaid Expansion-the Healthy and Well Iowa Plan" (invited)
- **Jessica Meeske**, Pediatric Dentist, Hastings, Nebraska: "How the Nebraska Medicaid Expansion did not happen"
- **MN Delta Dental** (invited)
- **COOPERative Health-A COOP** in the Health Benefits Marketplace (possible)
- **Discussion of insurance issues in the Midwest**

12:00-1:00 **Networking lunch**

- Please pick up your lunch at the buffet table and sit where you would like

1:00-2:15 **Dental homes and other delivery system changes and the ACA impact and other implications**

- **Pete Damiano**, Director UI Public Policy Center and Professor, UI College of Dentistry (moderator)-research on ACOs and health homes
- **Ted Boesen**, Executive Director, Iowa Primary Care Association-community care. "Community Care Team Development"
- **Mary Seieroe**, Staff Dentist, Hennepin County MN Medical Center. "Dentistry's role in adapting to ACOs and risk based payment"
- **Stacey Cyphert**, Assistant Vice President for Health Policy, Senior Assistant Director, UI Hospitals and Clinics. "The UI/Mercy/Genesis Alliance ACO" (invited)
- **Discussion of health system changes in the Midwest**

2:15-2:30 **Networking Break**

2:30-3:45 **Impact of the ACA on the Oral Health Safety Net**

- **Ray Kuthy**, Professor, University of Iowa (moderator). "The Capacity for Dental Care in Iowa's FQHCs"
- **Susan McKernan**, Asst. Professor, University of Iowa. "The Capacity for Dental Care in Iowa's Private Practices"
- **Mary Mariani**, Dental Director, Davenport FQHC, President, Iowa Dental Assoc. "How an Iowa FQHC is adapting to the ACA"
- **Kecia Leary**, Staff Dentist, Jordan Valley Community Health Center. "How a Missouri FQHC is adapting to the ACA"
- **Discussion of safety net issues in the Midwest**

3:45-4:00 **Wrap Up and Suggested Next Steps**

6.5 CEUs requested



P.O. Box 31088
Johnston, IA 50131
(515) 986-5605 or (800) 828-2181
(515) 986-5626 (Fax)
info@iowadental.org (e-mail)

DATE: March 18, 2014

TO: Iowa Dental Board
Advisory Committee on Continuing Education

FROM: Suzanne Lamendola, Convention Coordinator

RE: Second Request for CEU Approval

Please find attached a revised course description for "Flying Under the Radar: Avoiding Problems With Your Patients, Your Colleagues, and the Dental Board". This course will be presented by Dr. Robert McNurlen on May 2, 2014, from 1:00 to 3:00 p.m.

This course has already been approved for one hour of credit. We are re-submitting this revision to obtain a second hour of credit.

Thank you for your consideration.

Flying Under the Radar –

Avoiding problems with your patients, your colleagues, and the dental board

As all of us know, dentistry is a high-stress occupation. We work to achieve perfect results in imperfect mouths. Problems can arise with clinical outcomes, financial issues, interactions between patients and the dentist or his/her staff.

How do we handle patient expectation vs. reality? How do we avoid problems or defuse them once they start? What if the patient contacts the dental board?

If you are contacted by the dental board, what should you do? If records are requested, does this automatically mean you are the subject of an investigation?

What is the dental board “looking for” when they come to your office and/or examine your records?

Dr. McNurlen has served on peer review subcommittees in the Des Moines district for several years and he currently chairs the IDA’s Council on Dental Care. He has testified for the defense as an expert witness in several malpractice trials. This presentation will be prepared in consultation with staff from the Iowa Dental Board.

The material in this presentation will be assembled with the input of current and past Iowa Dental Board members and staff. Topics to be covered include:

Jurisprudence topics

Recordkeeping and consent issues

Appropriate delegation to auxiliaries

Standard of care – what does “clinically acceptable” mean?

What is the Board looking for as proper or improper clinical treatment?

How does communication/miscommunication with the patient lead to Board action?

As a practitioner (dentist, hygienist, assistant), how do you minimize your risk of board action and/or malpractice actions?

Examples of malpractice cases and Dental Board complaints will be given.