MESSAGE FROM THE CHAIR

Welcome to our second newsletter of 2013. The need to communicate with faculty, students and staff has never been greater and this point was driven home during the Dean’s Plenary Council held this past September. Communication was an obvious cornerstone where the College could have some improvement. Well, as with many things, the Department of Cariology and Comprehensive Care has been leading the way! We have had an ongoing series of meet with the Chair programs held three times annually where we get to sit and speak about issues in the Department, College and other current events. We hold our annual Department dinner with over 100 attendees where we celebrate each other and the wonderful friendships we have made at the College. Last spring we launched our newsletter to further extend our communication with the Department.

Well, since the last newsletter many things have grown and developed here at the College and our entire Department has contributed to our success. We have had another outstanding performance on the Part 1 National Boards with 100% of the Class of 2015 passing (Congratulations to the Class!), a 99.7% pass rate on the Part 2 National Boards for the Class of 2013 (Congratulations to the Class!) and just this month a 94% pass rate on the manikin section of the Northeast Regional Boards for the Class of 2014 (Congratulations to the Class!). So individually this looks like the Classes should receive the kudos...but we know better! Three outstanding results like these do not occur by the student’s hands alone (and they are outstanding!). They are made possible by an OUTSTANDING faculty. This is the product of your hard work in the classroom, laboratory, clinic, 7 am seminars, oral exams and endless hours of one-to-one teaching to help them grow and understand. It is the product of a faculty who serve as role models helping nurture and these students into the best practitioners possible! Read these pages with pride...they represent just a sampling of the innovative teaching curriculum and faculty who you represent! Thanks for all you do and enjoy! Once again I would like to thank Jim, our editor and all of you, for your contributions!

Mark
About the Department:

New Faculty

As promised the department has hired 14 new full time Clinical Educators in recognition of the increased number of freshman that started in August. This will maintain and in fact improve the faculty student ratio as we are teaching smaller numbers of students per 2 hour session in the pre-clinic. These new faculty are targeted for a variety of different teaching assignments depending on their availability and the needs of the department. Our new Clinical Educators are as follows:

- Viviana Avta-Gnau
- Eugene Bass
- Patrick Bivona
- William Bongiorno
- Iryna Branets
- Steven Fisher
- Ellen Lee
- Kay Oen
- George Raymond
- Barbara Slaska
- Nicholas Vernice
- Coleen Watson
- Jo Wong
- John Rathbauer
Message from the Editor
Dr. James Kaim

I would like to thank you for the great feedback and positive response to our first issue. I especially want to thank Ms. Elaine K. Bajana for her hours in editing and designing the newsletter. Getting the opportunity to sit and meet many of the new faculty has been very rewarding. I would urge everyone who thinks they may have something of interest to contribute to please contact me. I am always looking for articles of interest.

Jim Kaim

Our Offices
DEPARTMENT OF CARIOLOGY AND COMPREHENSIVE CARE

345 East 24th Street
New York, NY 10010
- Mark Wolff
- David Hershkowitz
- Elaine K. Bajana

423 East 23rd Street
Veteran’s Administration
16th Floor, North Wing
New York, NY 10010
- Kenneth Allen
- Patricia Montalbano
- Alex Hernandez
- Vera Vangler
- Carine Joseph
- Gabriel Galindez

423 East 23rd Street
Veteran’s Administration
2nd Floor South
Dental Library
New York, NY 10010

380 2nd Avenue
3rd Floor, Suite 301 and 302
New York, NY 10010
- Andrew Schenkel

250 Park Avenue,
6th Floor,
New York, NY 10003
NEW PROGRAM FOR SENIORS

In collaboration with the medical school and nurse practitioners, 84 senior dental students were selected to provide demonstrations to second-year medical students on how to do a head and neck examination. What was unique was that our dental faculty acted as observers standing outside the room but able to see and hear the seniors perform the demonstration on live patients. The medical students and nurse practitioner students taught our students how to perform cardiovascular and pulmonary examinations. The response was overwhelmingly positive. NYUCD again is embarking in leading the way to transition dental students to be truly oral health care providers and educators and to become an equal partner in the total health care of our patients. This program was conducted in the NYSIM Center located at Bellevue Hospital and is designed to improve medical/dental education through simulation. This inter-professional was made possible by a HRSA grant that Dr. Judith Haber from the College of Nursing received with the assistance of Dr. Kenneth Allen (who is a co-Investigator).

FACULTY CALIBRATION AND STANDARDIZATION

With some growing pains the first phase of the faculty calibration and standardization is on line. As reported faculty calibration is a requirement for all faculty to complete. We are working getting you the documentation for the CE credits that you will receive. I have had a few responses and suggestions about the training questions and have addressed each of those individually with the faculty who provided me with the information. Mark and I have heard your request for teaching modules to become available for review perhaps prior to taking the future calibration exercises. The good news is that we are currently working on these and hope to roll these out as we complete them. Some of the modules to look for include: Slot preparations, liners and bases, rubber dam application, indirect pulp caps, the detection of occlusal caries, when to treat surgically versus medically, etc. Each of these will be followed by a series of questions related to that module.

We are pleased to announce that the first module, Rubber Dam, is completed. It will be on-line shortly. With the help of many individuals especially Dr. Meeker and Dr. Lopresti, we hope you will find this informative. Rubber dam isolation is mandatory in the clinics for BOTH the preparation and restoration when performing surgical dentistry. It is also required that if rubber dam cannot or should not be placed that this be documented in the progress notes PRIOR to starting the procedures. Documentation must indicate the reason and must be initialed prior to starting the procedure.
SAD NEWS

In memory of

We recently lost a dear long time member of the faculty Mitchell Pines. Mitch was a constant in the Biomaterials department. He will long be remembered for his humor and kindness and his love for teaching. A recent publication in Dentistry and Oral Health had an article where Mitch was the consultant: The article is entitled “Cost-Saving Treatment Alternatives”

From left to right:

Dr. Robert Seminara, Dr. Neil Lawner, Dr. John Calamia, Dr. Martine Mandracchia, Dr. Ken Magid, Dr. Angela DeBartolo, Dr. Bill Bongiorno
What’s New at NYU?

Innovation and program development have been a hallmark at NYU. Mark with the support of our administration has led the way in so many areas. Not too long ago we were the first school to identify a department dedicated to Cariology and have become a national leader in this discipline.

The Department was instrumental in creating programs in smoking cessation distributing nearly 500 regimens of nicotine replacement annually.

The Department has introduced, under the guidance of Rima Sehl, a program of risk assessment in nutrition utilizing an in-house registered dietician to aid students in referrals and counseling not only for caries but for management of obesity, expanding our education to reflect not just nutrition as relates to the oral cavity but to the body as a whole.

This year the Department has introduced a comprehensive oral exam program. This program presents students with the diagnostic data from actual patients and asks the senior students to prepare a treatment plan and, upon questioning of a faculty, describe the rationale for care. Junior and senior students participate. Junior students act as observers and evaluators of a senior’s performance. A senior student is presented a case 20 minutes prior to the interview. The student reviews a simulated chart that contains all the necessary diagnostic data. The senior student is then asked to sit with two faculty and answer questions that may relate to the conditions presented, and/or justifying treatment, explaining procedures, perhaps treatment planning the case, offering alternative treatment plans. Students are evaluated based on their knowledge and also their communication skills. Any faculty interested in participating in the program please contact Dr. Allen.

The Department has expanded our communications program. This past year, under the leadership of Amy Slep, Rick Heyman, Anne Erlanger and Danielle Mitnick we introduced training in motivational interviewing to all our students in the D2 year. This includes small group exercises in the use of motivational interviewing. This expands on Hillary Broder’s D3 program in which actors present themselves to students with scripted ailments and students were required to demonstrate their knowledge and communication skills in dealing with these patients. These actors were then able to provide an evaluation and assessment of a students’ performance. These programs are in addition to Staci Ripkey’s program on cultural competency. Combined, the students receive communication education over two years, are observed both in the admissions and general clinics and are evaluated in two communications competencies prior to graduation.

The Department introduced a program in conjunction with the nurse practitioners and the medical students where our D4 dental students teach the medical students how to perform a comprehensive oral examination utilizing patient actors and our students learned the fundamentals of pulmonary and cardiovascular examinations. We hope this is the beginning of a growing partnership between dental medicine, nursing and general medicine.
What’s New at NYU?

D4 Urgent Care Rotation

The Urgent Care Clinic is now included in the department of Cariology and Comprehensive Care. D4 students are immersed in a week long rotation where development of their differential diagnostic skills coupled with meeting the urgent care needs of patients is of central focus. Four hour long seminars are presented weekly covering: Diagnosis and Triage, Pain Control and Management, Oral Manifestations of Systemic Diseases, and Urgent Care Intervention for Traumatic Dental Injuries. Round table discussions are held spotlighting any questions or concepts that are requested by the students. Each student is required to successfully complete a clinical competency during their week of rotation. Each Friday, an OSCE (Objective Structured Clinical Examination) is administered where students are expected to successfully diagnose and document their plan for urgent care treatment of both clinical cases presented. The Urgent Care Clinic provides a seamless transition for patients who are seen as emergencies to then enter the main stream of NYUCD for their future dental care. Every patient treated in the Urgent Care Clinic now leaves with a follow up appointment on the patient roster of the D4 student who provided their treatment. This allows for successful continuity of treatment for each patient. The pace and broad spectrum of clinical scenarios allow for an exciting and fulfilling week.

Dr. Laurie R. Fleisher received both her DMD degree and her Certificate in Endodontics from the Boston University Goldman School of Dental Medicine. Dr. Fleisher was previously a Clinical Instructor at Boston University Goldman School of Dental Medicine, and a Clinical Assistant Professor at the University Of Michigan School Of Dentistry. At NYUCD she is currently a Clinical Assistant Professor in the Department of Cariology and Comprehensive Care and is the Director of Urgent Care. Dr. Fleisher also holds a position of Clinical Assistant Professor in the Department of Endodontics at the college. She is a member of the faculty council leadership board, student mentor, a peer assessment facilitator, student club faculty advisor, and interviewer for the admissions committee. She is the founder of the NYUCD Endodontic Study Club for predoctoral students at the dental college. She was the primary investigator for research entitled Incidence of Vertical Root Fracture in Endodontically Treated Teeth: A Prospective Study, which is being prepared for publication. Dr. Fleisher serves on the editorial board for the International Journal of Experimental Dental Science. Dr. Fleisher is currently the President of the Endodontic Section of ADEA. She has presented Endodontic continuing education for international dentists and has presented nationally. Dr. Fleisher maintains a practice at the New York University Dental Faculty Practice where she specializes in endodontic therapy, endodontic retreatment, the diagnosis of complex dental pain, and the treatment of dental traumatic injury.
What’s New at NYU?

Outreach

The Department has dramatically expanded our local community outreach program with faculty led events around the city and metropolitan area. Over the past year under the direction of Dr. Andy Schenkel in his new position in Community Based Dental Education, the students have participated in 34 separate events and have provided oral cancer and dental screenings, oral health and general health education for over 2000 individuals.

Over 1500 of the screening participants were invited back to the College for comprehensive oral health care. These screening events range from small neighborhood street fairs to large interprofessional health expos in places like the Javits Center and Giant's Stadium and everything in between. Many departmental faculty have participated with Gene Sherwin and Wini Montouri supervising more than half of these events. Participation in these outreach events allows the students opportunity to interact with a diverse group of individuals in the community. Many of these individuals may not have given any thought to their oral health in a very long while. Students have also visited a number of senior centers around the city to provide multi-language PowerPoint presentations and oral health information to those in attendance and have participated in conference calls for homebound individuals to provide the same information.

The Department is responsible for dental care delivered by the Dental Van and welcomes Ms. Constance Turner and Ginette Lamarre to our Department.
Students are now participating in our elective mini-residency program housed at Gouverneur Health Services, an outpatient facility of the City Health and Hospitals Corporation on the lower east side of Manhattan. 54 students are presently spending half the year on site one full day per week, providing comprehensive dental care to the underserved population who seek treatment at Gouverneur. Students have the opportunity to treat patients living in Gouverneur’s skilled nursing facility on the premises as well. Plans are in place to expand this program to other locations and make the rotation a required part of all students’ education.

Early this summer five classes of 2014 dental students participated in an elective Interprofessional Physical Assessment Course also coordinated by Andy Schenkel. Each student joined the nurse practitioners in their practice one day a week for 10 weeks in late May through early August. The students performed medical and oral assessments of patients presenting to the Nursing Faculty Practice alongside nurse practitioner students. The students prepared for this elective by taking the entire Advanced Physical Assessment across a Lifetime course required for the nurse practitioner students at the College of Nursing. This intensive course consisting of didactic, seminar and lab portions and included patient actors serving as models and instructors for the GYN and GU portions of the course.

The College is presently expanding our community based programs with a new relationship with the Forestdale Foster Care facility to provide comprehensive dental care to 500 of the foster children enrolled in their programs. Our dental van will be spending one day every other week on site for comprehensive care and students will spend two full days per week on site providing preventive and simple restorative care in a dental suite equipped with portable equipment.

The College is also entering into a relationship with the Yukon-Kuskokwim Health Corporation in Bethel Alaska. Two students will spend 1-2 months working in their medical facility providing comprehensive dental care to their community consisting of Native American families. This unique arrangement may serve as a model for expanding our community based dental education initiatives.
What’s New at NYU?

"Assessment Skills toward Professional Growth."

The school has recognized that our size and diversity offers us the opportunity to advance patient centered-care as the driving force in the education of our students. Developing good communication skills between professionals as well as with patients is paramount if we are to improve patient health outcomes. With that focus in mind starting this year we introduced several new first year courses.

In their very first days at NYUCD, students began a new course called "Assessment Skills toward Professional Growth." This is a 4 year course with goals and objectives specific for each year. The significance of "Assessment Skills toward Professional Growth" is that it teaches students the tenets of self-assessment and peer assessment. These skills are essential for a health care provider as he/she objectively evaluates both their own effectiveness in communicating with a patient and the quality of their patient health outcomes, whether surgical or nonsurgical. An ethical oral health care provider, who is able to accurately access her/his performance, is a competent practitioner who is now better able to recognize if and/or when a procedure or treatment is not acceptable or a patient needs to be referred to another practitioner. One objective of the course is to eliminate the student automatically saying to their faculty, "What do you think about my cavity preparation?" How often do you encounter a fourth year student on the clinic floor who still cannot explain to you whether his treatment is acceptable? We want all our students, starting with day one, not only to learn how to do the procedure but to have self-assessment become part of their everyday protocol. The course will also focus on peer assessment where a group of students from the same Group Practice, provide an objective review and feedback on the performance of randomly selected students in their group. The 4 year goal of this course is to, “Introduce the students to the philosophy of peer assessment at NYUCD and develop in the students the skills to work in teams and to offer constructive, culturally sensitive commentary to team members “

A second, multi-disciplinary course gives the students an early introduction into the clinic and interaction with real patients starting in the freshman year. The course is titled Multi-disciplinary Experiences in Patient Assessment. Students will have assigned rotations working with faculty and upperclassman doing patient interviews, oral exams including caries risk assessment and periodontal evaluations, learn record keeping requirements, OSHA and HIPPA requirements and other non-invasive opportunities. This program should certainly excite first year dental students as they truly will have extended clinical opportunities and will immediately understand the relevance and significance in what they are asked to do in the simulation lab and should also provide them insight into the importance in learning and understanding the relationship of basic sciences to the clinical sciences.

The freshman class has increased to 366 students. This coincides with the final class of Advanced Placement students that were accepted this year. (See separate report on the last AP class). Dr. Bucklan has made the necessary arrangement in adjusting the program. The good news he has now an assistant course director Dr. Klaczany. The other good news is the class will be divided into 4 groups reducing each classroom group from the previous 3 sections of 124 each to 4 groups of about 90. This will allow for additional seating for non-assigned students to have access to the lab for non-instructional practice but more important the number of faculty previously assigned to cover the 124 students will remain the same dramatically improving the student faculty ratio. Also exciting is that the freshman students in the lab will be seated by groups practice so that they can interact with each other as a group from day one thereby immediately developing the team concept.
"What’s going on with D2?"

The second year course D2 General Dentistry Simulation II Restorative directed by Dr. David Glotzer started July 8th. He has an especially large class of 373 students. The 126 Advanced Placement students from June 2013 joined the former D1 students. In addition about 9 sophomores were required to repeat the sophomore year in order to retain their matriculation. I think that speaks to the emphasis the school is placing on maintaining academic standards while supporting these students in their efforts to become the best dentists possible. New for this year are small group breakout sessions. During the last hour of the lab session the course director works with an assigned group of about 20 students who meet to discuss critical areas of learning from the day’s lesson and from general issues confronting the practitioner in deciding appropriate care, clarify any issues, ask questions etc. These small group sessions provide the director the opportunity to learn firsthand whether the students are actually learning and the complex operative dentistry concepts. This is another example how we are able to provide small group learning opportunities despite our large class size.

This year, the second year Esthetics course will be directed by Dr. Josephine Lomangino-Cheung this year. Dr. Cheung has taken over this responsibility from Dr. Klaczany. This is a very exciting course as it is specifically geared to "esthetic procedures." Students learn the principles and techniques of Porcelain Veneers and Cast Tooth colored restorations. The course requires a significant level of technical competence and understanding. A unique part of the course is the opportunity to be educated in the indications and techniques necessary for the fabrication of CEREC CAD-CAM restorations.

Students are trained in the preparation techniques, video capture of the preparations and the computer-aided-design and computer-aided-manufacture (CAD-CAM) of onlay restorations for a prepared ivorine tooth. Dr. Estafan who has had led her CAD-CAM group of faculty in the clinic performs several hundred procedures each year and is available to all students who schedule a procedure with her in the clinic. There is also a cadre of faculty that has completed a faculty calibration course that are also able to work with students. Anyone interested in joining this group should contact Dr. Estafan directly. She would be more than happy to provide you training to become a member of her CAD-CAM team. This year the College will acquire, through the generous support of a grant from Sirona, 10 of the latest generation blue cam acquisition units.

The last class of 126 advanced standing students was admitted in late May. These students undergo an intensive and extensive program covering nearly all the subject areas of the freshman program. The Cariology and Operative dentistry review for which I am the program director meets daily for three consecutive weeks for 3 hours. Since these students are dentists from all over the world, we experience various levels of knowledge and abilities. It is amazing and exciting to work with this group, as they are extremely hardworking, dedicated to learning, extremely cooperative and always pleasant. I have enjoyed working with this group over the years and generally get extremely positive reports from Dr. Glotzer who continues with them almost seamlessly into the D2 course.
New Faculty & Staff Introductions

“14 new faculty have been hired as full time educators. They each have many years of clinical experience and many have significant amounts of teaching experience as well. Many come from very diverse backgrounds. Here are a few highlights about some of our new faculty”

Dr. George Raymond: George received his DDS from NYU in 2002. In fact was a student of mine during the time I was chairperson of Operative Dentistry. He subsequently completed a general practice residency at Lincoln Hospital Medical Center 2002-2003 and was in private practice until 2012. What is truly interesting, and probably very unique about George, is his career before dental school. When you meet George be very careful he could be dangerous?? You see he could kill you?? Believe it or not from 1990-1998 he was a police officer, walking the beat and in a patrol car, for the New York Police Department. A work related injury caused him to leave the NYPD on a disability and I guess, but don't know how or why, dental school seemed like the natural fit. I heard he came to the interview, gun in hand which may have been how or why he was admitted. Well in addition to being able to kill you, he could also bury you!! What are you talking about?? Well prior to the police force from 1988-1992 George was a licensed NEW YORK STATE FUNERAL DIRECTOR. I guess there is a natural or perhaps unnatural transition from funeral director to police officer to dentist????? George is currently a faculty member in the 3CD clinic.

Dr. Patrick Bivona: Pat originally joined our faculty in 1988. During my tenure as chair of Operative Dentistry, Pat was the Director of Cariology in the Operative Dentistry Department. Pat left NYU in 2003 for more fertile grounds in California. He obviously missed NYU and returned to be with us in June of 2011. Pat works in both the preclinic and different modules and we welcome him back. Pat can help you manage your money too! Pat is also a CFP (Certified Financial Planner) and would be happy to meet with you after clinic hours to help you manage your finances. What most of you don't know about Pat is that in 2001 while still at NYU he was the National Champion Twenty-four Hour Centurion Racewalker at El Cajon California. He became the 58th American to race-walk over 100miles in 24 hours. I guess you can figure out that these competitions involve race-walking for 24 hours straight and the winner is the one that accumulates the most miles. Achieving 100 miles makes you a centurion. From 1995 to 2001 placed first in 5 out of the 8 competitions he entered and collected two second place and one third place finish. If you ever get to go out to lunch with Pat and you think he is moving quickly he is just practicing for the next event.
### Faculty Accomplishments

#### AWARDS/COMMITTEES

- **David Glotzer** - was a reviewer for a publication *Local Planning for Terror and Disaster: From Bioterrorism to Earthquakes* by Leonard A. Cole and Nancy D. Connell Wiley-Blackwell, 2012

- **Jodie Cheung** - promoted to clinical associate professor

- **Ivy Peltz** - has been appointed by ADEA (American Dental Education Association) as the New York University College of Dentistry advocate for the MedEdPORTAL.

- **Ivy Peltz** - was co-presenter of an educational workshop at the ADEA meeting: “Workshops/Seminars/Small Group Discussions. TLC-67. Evidence-Based Dentistry: Where do we go from here?”

- **Ivy Peltz** - co-presenter of a poster: (Evidence-Based Dentistry into Curricula in U.S. Dental Schools.

- **Ronald I Maitland** - published an article; “Debatable evidence for the adverse drug reactions to local anesthetics” in the journal Evidence-based Dentistry 2013 14(2): 51-51

- **Gerald Klaczany, Patricia Corby and Mark Wolff** on the publication, In vivo effects of a new dentifrice containing 1.5% arginine and 1450 ppm fluoride on plaque metabolism. J Clin Dent 2013; 24 (Spec Iss): A45-54.

- **Meir Kozlovsky** - had his MedEdPORTAL Showcased at the ADEA meeting in March in Seattle; “Tooth #19 Full Cast Crown Preparation Chamfer”.

- **Richard Kosofsky** - co-presentation at ADEA Tech Expo March in Seattle; “Web-based image editing software for publications without cost and effort”. the NYUCD Academy of Distinguished Educators Showcase.

- **Seung-Hee-Rhee** - became President of NYS Academy of General Dentistry


- **Ellen Lee** - First Place Award for Educational Scholarship for the NYUCD Academy of Distinguished Educators Showcase.

- **Ellen Lee & Gene Sherwin & Arthur Goren & Lisa Antonoff** published “Enhancing Performance in the Simulation Laboratory” Dentista Moderno


- **Pat Bivona** - was one of two race walkers completing over 50 miles in 12 hours at Snelling Lake in Minnesota on June 2, 2013. Received the Fern Anderson Memorial Award as the Most Inspirational Walker. Received GOLD medal at the New Jersey State 5K Race Walking Championships May 2013.

- Congratulations the following faculty who were inducted into the International College of Dentists this October.
  - Angela DeBartolo
  - William Bongiorno
  - John Calamia
Featured Faculty:

BRUCE BRANDOLIN, D.D.S.

Dr. Bruce Brandolin is a full time member of the college. His nickname is the PIT BOSS. He is well known among all the full time faculty in the modules as an extremely hard working educator and administrator. I was alerted by Dr. Wolff to the unique hobby of this faculty member hence the pit boss. He and his son and three other associates of his son are involved in an organization called CHUMPS. Well what is Chump? Chump is an amateur car racing association in which only amateurs compete throughout different race tracks in the United States. Although the pit boss does not race himself, he acts as the crew chief making sure the cars are fit for racing.

Chump racing involves endurance on a 2-4 mile road course and is not your typical oval track racing. These races are either 7-12-14 or even 24 hours depending on the venue. Believe it or not having a high powered expensive car works to your disadvantage. What? In this race you are allowed to have a car with a street resale value of NOT MORE THAN $500. Thus most groups such as the YODA RACING TEAM drive a 1990 Toyota. If you drive cars valued higher, for example putting a newer engine into the car such as a 2005 engine, this could raise the value to $1000. For each amount over $500 you receive penalty points which are lap deductions. Since the object of the race is to complete as many laps in the set time as possible, slow and steady is better than as fast as you can. For safety when you pull into the pits to change drivers, gas up, or gas out (you know what I mean) you have to remain in the pits for 5 minutes.

LAST ISSUE I HAD THE PLEASURE OF HIGHLIGHTING DR. RICHARD KIMAN. WHAT A JOY TO BE ABLE TO SIT AND TALK WITH THIS MOST INTERESTING INDIVIDUAL. THIS ISSUE WE ARE HIGHLIGHTING A VERY UNIQUE INDIVIDUALS IN WHAT HE DOES ESPECIALLY OUTSIDE THE COLLEGE. HE IS A RELATIVELY NEW FULL TIME INDIVIDUAL WHO I HAD THE PLEASURE OF SITTING AND INTERVIEWING ABOUT A MOST INTERESTING HOBBY.
prevents the frantic in and out that you see in most professional racing. Meet the Pit Boss Dr. Bruce Brandolin group practice director on the second floor. Bruce is the crew chief in the pits for his son and 3 friends. The race team (Yoda Racing). Bruce’s son and three friends are equal partners in this venture and they take turns driving the car around the track. Oh, in case you think you would like to take a drive you have to become certified at an accredited race track and present you papers prior to each race. Oh yes you also need a car that is properly outfitted with roll cage, fire suppression equipment, stripped bare of your CD player, air conditioner, etc. You must be properly dressed just like in the clinic. Well not just like the clinic! Fire resistant racing suit and shoes, helmet and gloves must be worn during the race. The car has only one seat so you can’t even take along a guest. I urge you to go speak with Bruce and learn about this fascinating motor sport.
DID YOU KNOW?

WHAT CAMERA SHOULD I GET

As editor of the Newsletter I am always on the lookout for articles that I think would be interesting, and relate to not only what we do as educators and dental practitioners but also could be helpful in our everyday lives. Using the knowledge and expertise of members of our own faculty, I believe, I have found such a person for this edition. I have had the pleasure of knowing William Bongiorno for over 25 years. He was first a faculty member with me in the 80’s and now again as a full time faculty member in our department. Bill is truly a techie. Perhaps a new camera or some other high tech device a week is Bill’s motto. I asked Bill, as have many others, what camera should I buy? I have asked Bill to put together an article for us which he has done. Enjoy and send Bill an e-mail if you have any questions or just to say thanks. If any other faculty have interesting specialties they would like to share please let me know.

How about a great bargain vacation spot near or far????

When asked the question “What camera should get?” Bill’s answer is always “what do you want to do with it and how much do you want to spend”? People are sometimes fooled by manufacturers when they quote the “megapixel” size. This is not the most important camera feature because the size of the sensor chip which accepts the image can be very small or can be very large yet contain the same number of pixels. The simple analogy would be if I compare a fire hose to a garden hose. If I cut them into sections and stand the sections on end, I can fit more garden hoses on the chip, than the fire hose on the same size chip the fire hose pieces. Thus depending on the size of the pixels (hose size) determines how many can fit on the same size sensor chip. It is not always the number of pixels that may be important but the size of the pixels. Large pixels (think of the fire hose) have larger lumens which are called light wells. The larger the lumens or light wells the more light sensitive the pixels are and the more information and detail they are able to collect. This allows the larger pixel camera to take pictures in lower light. Pixel size also plays into sharpness when magnifying or enlarging the picture. Thus if you take a picture and want to make a large print you will get poorer resolution or clarity using a small pixel camera versus large pixel camera. Take two uninflated balloons one half the size of the other. Assume these balloons represent the sensor chip. Imagine I have pixels taped to the outside of each balloon. Now I blow both balloons up to the same inflated size. I have to stretch the smaller balloon twice as much as the larger balloon to wind up with the same inflated size. I now have greater space between pixels with the smaller balloon. The space between the pixels is called noise or loss of clarity. We often hear the term pixelated which means the same thing. Thus the prints of the same size or enlarged pictures would be less clear with the smaller pixel camera versus the larger pixel camera all other things being equal.

Some other terms that you may encounter as you look at cameras is SLR or DSLR. SLR- Single Lens Reflex which means when you focus on an image you actually are looking through the lens of the camera and not at a screen and actually seeing exactly what the camera will shoot. DSLR just means Digital and basically does the same thing. When you consider cameras you need to determine are you going to take action shots such as sports events or are all or most of your picture going to be still photography. Most of the DSLR cameras have larger chip sensor sizes equivalent to the size of 35mm slide film. These cameras are very expensive at $1000 or more. In some cases you may be better off buying two lower end cameras one for action photography and one for still photography including intraoral. How about an all-purpose camera they do exist.
The 50 mm lens pass a smaller targeted image to the sensor chip while a 100mm lens passes a larger target image when viewing an image at the same distance. The use of the 100mm lens would be good to shorten the distance from the camera to object (zoom lens) making it appear twice the size as the same picture taken at the same distance with at 50mm lens. All cameras have a crop factor of anywhere from 1.6 to 2.0mm. The crop factor actually takes a 50mmm lens and with a crop factor of 2.0 in essence makes that 50mm lens a 100mm lens.

Finally in the camera world SIZE DOES MATTER. The larger cameras can have more technology enclosed within, such as larger sensors, but certainly may make them less portable. Before Bill recommends specific cameras he needs to make it clear that he has no vested interest in any one particular brand or camera. “There are many companies that make great cameras including Sony, Canon, Nikon, Olympus just to name a few. If you know what you want certainly buying on line is probably the way to go. However, if you want to touch and feel the cameras before you buy and get input from your salesperson, stores such as B&H is probably a more valuable buying experience. Editor’s comment:: Or you can just ask Bill! We would also refer you to the August issue of consumers report on cameras.

BBBB AKA Bill Bongiorno’s Best Buys

One of the best all-around cameras:

**Olympus tough 2**

Small pocket size- take from operatory to operatory and to school. Good for intraoral and all around camera.

Another good all-around camera but not as good with intraoral photos. is the **Sony Rx 100 20**

Large size: for intraoral photograph

The Canon EOS 700D, EOS Rebel or Nikon D5200 all with a 60 or 50mm Macro lens and a ring light (Canon or Nikon) T5i (both cameras usually comes with an 18-55 zoom lens for general photography), Sigma, Tamron and Tokina can be added for intraorai Large size versus easy to carry.

I want to express my thanks to Bill. We spent a number of hours putting this article together.
If you have any questions or need more advice don’t hesitate to get in touch with Bill, wb319@nyu.edu
The Department of Cariology and Comprehensive Care has had continued with its success in research. These 9 months we have added another million dollars in research to the Department’s successful portfolio.

Congratulations to the researchers and their teams!

<table>
<thead>
<tr>
<th>Name</th>
<th>Project Description</th>
<th>Funding Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arthur Goren</td>
<td>Effect of IMaging Devices Scatter on Origins of the H&amp;N of a female anthropomorphic phantom</td>
<td>Dental Imaging Technologies Corporation</td>
</tr>
<tr>
<td>Amy Slep, Richard Heyman, Mark Wolff</td>
<td>&quot;Sandy Supplement: Planning Parental/Motivational Interventions to Prevent Early Childhood Caries&quot;</td>
<td>National Institutes of Health</td>
</tr>
<tr>
<td>Richard Heyman, Amy Slep</td>
<td>&quot;Developing FAP Maltreatment Trainings&quot;</td>
<td>United States Department of Agriculture</td>
</tr>
<tr>
<td>Victoria Raveis</td>
<td>“The Role of Social and Behavioral Factors on Disaster Planning in Home Care”</td>
<td>National Institute of Nursing Research</td>
</tr>
<tr>
<td>Victoria Raveis</td>
<td>Attitudes toward Cognitive Health, Cognitive Impairment, and Caregiving: Identifying Attitude Questions and Measures for Public Health Practice”</td>
<td>Centers for Disease Control</td>
</tr>
<tr>
<td>Victoria Raveis</td>
<td>Centers for Disease Control to conduct “Attitudes toward Cognitive Health, Cognitive Impairment, and Caregiving: Identifying Attitude Questions and Measures for Public Health Practice”.</td>
<td>Patient Centered Outcomes Research Institute</td>
</tr>
</tbody>
</table>

Funding received for the current period: $1,200,000
Total funding for the life of these grants $1,500,000
*see brief description
Received funding from the Patient Centered Outcomes Research Institute for a three-year project, “CASA: Care And Support Access Study for implementation of a palliative approach with HIV treatment”. The project, conducted in collaboration with Dr. Carla Alexander, University of Maryland-Baltimore, will refine, deliver and determine the acceptability and applicability of an interdisciplinary professional education program to prepare a multidisciplinary health care team to deliver patient-centered care integrated with on-going outpatient HIV care; describe and measure the impact of implementation of early integration of the palliative approach upon YMSM relative to improving their mental health and quality of life, increasing retention in care and treatment adherence; and describe and measure the impact on staff of the early integration of palliative care.

Funding has also been received from the Centers for Disease Control to conduct “Attitudes toward Cognitive Health, Cognitive Impairment, and Caregiving: Identifying Attitude Questions and Measures for Public Health Practice”. The goal of this one-year study is to conduct a scoping review of the research literature to identify validated questions and measures about the public perceptions regarding attitudes towards cognitive health, cognitive impairment and caregiving, creating a compendium of questions and measures and critical gaps and identifying differential issues in this broad area of research for vulnerable and disparate older population groups.

In a joint collaboration with Dr. Robyn Gershon at the University of California-San Francisco, a two year National Institute of Nursing Research grant, “The Role of Social and Behavioral Factors on Disaster Planning in Home Care” will support an examination of the preparedness planning of elderly home care recipients living in two high disaster risk major metropolitan areas in the U.S. (San Francisco and New York City) and determine and compare recipient expectations for disaster response assistance with actual home care agencies and response agencies capabilities.

"We were awarded a subcontract to develop standardized trainings for the United States Air Force Family Advocacy Program. These trainings will reflect the state of the science with respect to family maltreatment. Pilot materials will be developed and piloted to get feedback from likely trainers and likely trainees. Final materials will then be developed and provided for distribution.

"We received a supplement for our R34 Clinical Planning Grant for Couple CARE for Parents of Healthy Newborns, to offset some of the setbacks of Superstorm Sandy. This project is the first to employ a time period when couples are maximally open to intervention in the service of oral, physical, and psychological health (i.e., after the birth of a child). It is the first to intervene with new parents on three hypothesized social determinants of ECC simultaneously: (a) noxious family environments, (b) daily oral health behaviors/promotion for children, and (c) regular, recommended child dental check-ups. This project will compare an efficacious couples intervention — Couple CARE for Parents, boosted by a proven, compatible, efficacious oral health intervention (brief motivational interviewing [MI]) — to MI-alone and an inexpensive treatment-as-usual oral health education approach. Testing both the interventions and the effect on hypothesized mechanisms, the resulting randomized controlled trial will add considerably to scientific knowledge, technical capability, and clinical practice.
Once again the Department had an awesome presence at the ADEA meeting!
Our faculty are officers in six different sections and leaders throughout ADEA

ADEA March 2013

Presentations

LCD-003 Getting Your Research Published: A Panel Discussion with Top Journal Editors (F, 0-3 years)
Presented by the ADEA SIG on Career Development for the New Educator, ADEA Sections on Community and Preventive Dentistry, and Orthodontics
Presenter(s): Maria Therese Galang-Boquiren, D.M.D., M.S., University of Illinois at Chicago; Vincent Kokich, D.D.S., M.S.D., University of Washington; Nadeem Karimbux, D.M.D., M.M.Sc., Tufts University; Mary Northridge, Ph.D., M.P.H., New York University

LCD-004 Life-long Leadership Learning (A, 4-9 years)
Presenters: Denise Stewart, D.D.S., M.H.S.A., Oregon Health & Science University; Karl Haden, Ph.D., AAL; Elise Eisenberg, D.D.S., M.A., New York University

TLC-63 Diversity Defined: Is Your Institution Ready? (F, 0-3 years)
Presenters: Anthony Palatta, D.D.S., M.A., ADEA; Hans Hsu New York University; Michelle McQuistan, D.D.S., M.S., AEGD, University of Iowa

TI-008 Computer-based Risk Assessment of Oral Diseases: Best Practices and Challenges (F, 4-9 years)
Presenters: Presented by the ADEA Sections on Dental Informatics, Oral Diagnosis/Oral Medicine, Periodontics, Cariology and Community and Preventive Dentistry. Thankam Thyvalikakath, D.M.D., M.D.S., M.S., University of Pittsburgh; Mark Wolff, D.D.S., Ph.D., New York University; John Featherstone, M.Sc., Ph.D., University of California, San Francisco; Gerardo Maupome, B.D.S., M.Sc., D.D.P.H. R.C.S. (E), Ph.D., Indiana University

TLC-020 Ten Things Every Dental Educator Should Know (F, 0-3 years)

TLC-104 Teaching and Learning with Emerging Technologies and Informatics: Short Talks (F, 4-9 years)
Presenters: Presented by the ADEA Sections on Dental Informatics and Educational Research, Development, and Curriculum, and ADEA SIGs on Teaching and Learning with Emerging Technology and Scholarship of Teaching and Learning. Elise Eisenberg, D.D.S., M.A., New York University; John Killip, D.D.S., University of Missouri - Kansas City; Muhammad Walji, Ph.D., The University of Texas School of Dentistry at Houston; Linda Behar-Horenstein, M.A., Ph.D., University of Florida

TLC-110 The Challenge of Assessing Students’ Performance in a Clinical Setting (F, 4-9 years)
Presenters: Debra Ferraiolo, D.M.D., FAGD; Analia Veitz-Keenan, D.D.S.; and Silvia Spivakovsky,

TLC-67 Evidence-Based Dentistry: Where Do We Go From Here? (F, 4-9 years)

TLC-72 How to Teach Students to Effectively Communicate with Transgender Patients (F, 4-9 years)
Presenter: D. Culotta, D.D.S., New York University

TLC-94 Our Journey Toward Meaningful Assessment (F, 4-9 years)

TLC-022 Updating Dental Anatomy—Teaching in an Integrated and Interactive Environment (F, 4-9 years)

TLC-93 Oral Health Workforce: Professional Partners to Extend Access to Care (F, 4-9 years)
Presenter: Michael Monopoli, D.M.D., M.P.H., M.S., DentaQuest Foundation; Caswell Evans, D.D.S., M.P.H., University of Illinois at Chicago; Tracy Garland, National Interprofessional Initiative on Oral Health; Anita Glicken, nccPAHealth Foundation; Judith Haber, Ph.D., APRN, B.C., F.A.A.N., New York University
PO-03 Public Health Surveillance of Broadcast Information Regarding Dental Pain (E)
Christina Diep and Jennifer L. Gibbs, Ph.D., D.D.S., M.A., New York University, Barbara Gerbert, University of California, San Francisco

PO-04 DIVERSITY: The Emergence and Evolution in Dental Education (E)
Janet Park, New York University

PO-05 Anatomy of a Course Evaluation: Guiding Principles to Optimize Accurate and Useful Feedback (E)
Paul Lazari and Mitchell Lipp, D.D.S., New York University

PO-16 Building a Pipeline: Dental Career Program for Underprivileged Middle-School Children (W)
Hans Hsu and Mitchell Lipp, D.D.S., New York University

PO-18 Case Study: Can Additional Assessments Improve Student Achievement on Competencies? (W)

PO-21 A Model for Teaching Critical Thinking in Dental Education (W)

PO-23 Scoping Up Dental Education to Address HPV-Related Oropharyngeal Cancer (E)

PO-24 Difficult Conversations: Entering the Sensitive Areas (W)
Heather Zanon, Jacqueline Dikansky, Frederick More, D.D.S., M.S., New York University

PO-33 Assessing the Long-term Impact of a Dental Faculty Development Program: A Comparison Study (E)

PO-41 Mastering CAD/CAM Technology in Improving Student Skills in Simulation Laboratory (E)

PO-48 Surveying the Emergent Care Landscape: Preparing Students for Emergency Patients (N)

PO-56 Re-Fertilizing the Landscape: Connecting Science to Technique Prior to Performance (N)

PO-82 Teaching Prescription Writing Skills: A Challenge for Every Profession (E)
Marc Henschel, D.D.S. and Debra M. Ferraiolo, D.M.D., New York University

PO-85 Learning with Digital Games: The Future of Dental Education? (W)
Mitchell Jay Lipp, D.D.S. and Hans Hwa-Pen Hsu, B.A., New York University

PO-87 Innovative Internship Opportunities in a Baccalaureate Dental Hygiene Curriculum (N)
PO-87 Innovative Internship Opportunities in a Baccalaureate Dental Hygiene Curriculum (N)

PO-90 Helping Dental Students to Combine New Digital Technology with Traditional Technology to Fabricate Single Crowns (E)

PO-114 Incorporation of Evidence-Based Dentistry into Curricula in U.S. Dental Schools (E)
Ivy O. Peltz, D.D.S., M.S.Ed., New York University; and Diane C. Hoelscher, D.D.S., and Michelle A. Wheetar, Ph.D., University of Detroit

PO-139 The Effect of Dedicated Competency Examinations on Licensing Examination Pass Rates: A Two Year Comparison (E)

PO-149 The Effectiveness of an On-line Tutorial on Domestic Violence Awareness for Dental Professionals (E)

PO-151 Teaching Dental Students Evidence-Based Best Practice Through Case Selection (E)
Peter Mychajliw, D.D.S., New York University

TE-01 Teaming Students Together To Evaluate Each Other’s Cavity Preparation Using CAD/CAM Technology

TE-02 Using CAD/CAM Technology to Evaluate Preparations in the Clinic

TE-03 Cultivating the Use of Laser Technology in Undergraduate Dental Students

TE-06 Combining CAD/CAM Technology with Traditional Hands-on Characterization for Single Crowns

TE-07 Challenging Students with CAD/CAM Technology...Going Beyond the Comfort Zone of Senior Students

TE-11 Web-based Image Editing Software for Publications without Cost and Effort

TE-16 Assessing the Long-term Impact of a Dental Faculty Development Program: A Comparison Study

MedEdPORTAL Showcase
Tooth # 19 Full Cast Crown Preparation Chamfer
Dr. Meir Kozlovsky, New York University College of Dentistry
Publications and Abstracts

Our faculty continues to be world leaders in developing and disseminating the science, as well as teaching the science. Below is a listing of just some of the articles published (or soon to be) that our faculty have authored. Impressive!

Publications


2. Apltauer JJ, Silver F, Friedman LJ, Resnick SJ, Berkowitz LI, Rochlen GK, Blye JS, Hershkowitz DH and Berkowitz GS. “Use of a visible light-cured periodontal dressing material as a temporary restoration for inlay/onlay preparations” General Dentistry May/June 2013 e17-20


5. P. Blanchard, Y Jo Wong, A G Matthews, D Vena, R Craig, F Curro, V Thompson Restorative variables and post-operative hypersensitivity in class I restoratives: PEARL Network findings, Compendium, dentalaegis.com/cced/2013


9. Congiusta MA and Veitz-Keenan A. Evidence-Based Dentistry Commentary:


Publications and Abstracts


29. Maitland, RI, Debatable Evidence for Adverse Drug Reactions to Local Anesthetics, Evidenced Based Dentistry (2013) 14, 51


34. Peltz, I.D., Evidence lacking to determine whether preoperative analgesic use reduces post dental treatment pain for children. Evidence-Based Dentistry. 2012 13(4):104-104 (# 271882) [Comment]


Publications and Abstracts


40. Raymond, George; Maloney, William J. "La batalla de Sigmund Freud contra el cancer oral [Sigmund Freud’s battle with oral cancer]". Dentista y paciente. 2013;14(8).


46. Wong YJ and Veitz-Keenan A Systematic nucleoside antiviral agents may be effective in prevention of recurrent herpes labialis. Evidence - based dentistry, 14.2 (2013):54,

Book Chapters:


That's nearly 50 articles and text Chapters in 9 months!!!
Way to go TEAM!!!
As you can see the newsletter has grown in size which directly reflects all the wonderful programs that we are fortunate to have within our department and the dynamic faculty that make us so successful. As the most senior full time member of the faculty, having been at the college for nearly 40 years and because of my experience with other schools and faculty around the country, I know that because of the leadership of our chairperson Dr. Wolff our department is not only the largest department anywhere but we have become the leader in dental innovation and education in the United States. On a personal note speaking about growing in size since the last newsletter I have doubled the number of grandchildren.

Hope everyone enjoyed the second edition!!!

James Kaim