



THE CENTRAL GROOVE



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The Role of Psychology and Communication in Dental Treatment

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One of the significant challenges to the dental practitioner is developing an appreciation for fine dentistry in the mind of the patient. Unpleasant past experiences, preconceived notions, and even bad press contribute to negative patient attitudes, relegating dental treatment to secondary status and subsequent compromise; for example, a patient might choose amalgam when full coverage is the treatment of choice. This presents an opportunity to apply elemental principles of psychology and communication, thereby influencing the patient to accept preferred dental therapy.

While most dentists lack advanced education in psychology and communication, these disciplines should be applied during every patient encounter. Based on former experience or hearsay, anxiety is common in a dental setting and must be resolved in order to deliver a high-level of care. In essence, the issue is one of establishing a relationship of

trust and confidence, typically accomplished by: (1) recognizing the patient's emotional and physical needs, (2) good communication, and (3) instrumentation proficiency, such as painless administration of local anesthetic. Invariably, when the dentist is seated at eye level with the patient, listens attentively, and demonstrates sincere concern, anxiety will be diminished.



Not infrequently an adult presents for dental care following a lapse of many years. Early on the dentist must establish a welcoming environment; a possible approach might be, "We are glad you have come; be assured we will do our utmost to make this a positive experience. Would you be willing to share the reason for having postponed a visit to

the dentist?" Almost without exception the response begins with, "Well, when I was a kid ..." and they go on to relate how a previous dentist treated them harshly, initiating a negative attitude toward dentistry. A psychological barrier was effected which took a long time to confront. The patient will respond to empathy, expressed by a few

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The Dean's Den

I LEARN SOMETHING MORE ABOUT IT EVERYDAY...




It seems no matter where I've been these past several months, people are talking about access to dental care. I'm certain that much of that has to do with the places I go and the meetings I attend. But even when taking that into account, the number of people who bring up the topic is something quite astonishing to me.

Although conversations often start with the state legislature's initiative to create a new member of the dental team – the midlevel provider –

they quickly turn into a broader discussion about a host of issues directly or indirectly related to dental access challenges. At first, I was somewhat ill-prepared to comment, in part because I have not experienced the circumstances of many in our state. Fortunately, no one in my immediate family has been out of work for an extended period of time or been unable to pay for their basic needs. My first dental visit was to a dentist who knew my family, not to a hospital emergency

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NOVEMBER 2008

SUN	MON	TUE	WED	THU	FRI	SAT
2	3	4	5 LNL & VENDOR FAIR	6 LEADERS MEETING	7	8
9	10	11	12 LNL	13	14	15
16	17	18	19 LNL	20	21	22
23	24 NO SCHOOL D3-D4	25 NO SCHOOL D3-D4	26 NO SCHOOL D3-D4	27 	28 NO SCHOOL D1-D4	29
30	1	2 LNL	3 LNL	4 LEADERS MEETING	5	6



SCHEDULE OF EVENTS

- ◆ Nov 5 - Listerine LNL & Vendor Fair at the Radisson
- ◆ Nov 6 - ASDA Leaders Meeting
- ◆ Nov 12 - ND Dental Assn. LNL
- ◆ Nov 19 - 3M LNL
- ◆ Dec 2 - Colgate LNL
- ◆ Dec 3 - SD Dental Assn. LNL



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President's Minute

Welcome to the Presidential minute. I would like to start off my sixty seconds by thanking all of you for participation



and membership in ASDA this past year. ASDA is only as strong as its membership and we have set the bar high at Minnesota at above 95% membership for the past several years. Starting on Oct. 7th, we will be holding our membership drive for 2009. This is an opportunity for you to again join ASDA and enjoy the countless benefits that the association affords us. During this time, please ask us what your ASDA membership means and how you can enrich your dental school experience through your membership.

In the past year, we have made several improvements in communication in our chapter. As you are obviously aware, we have resurrected the *Central Groove*, our chapter newsletter. We received national recognition for this publication at ASDA Annual Session this past August and we are very proud of how it has progressed. Also, if you haven't already done so, you need to check out our revamped chapter website, www.mnasda.net. This is a tremendous resource for all ASDA members in that you can check the calendar for upcoming events, find out who to contact if you are interested in getting involved, see pictures from recent events, or catch up on any other news related to our chapter among the many other fun and useful features. Thirdly, we hope to establish a regular ASDA update to be distributed via e-mail. This will help to further disseminate and clarify the important information you need to know about our

chapter such as committee meeting times, upcoming events, or pertinent legislative updates.

Finally, as always, I encourage each of you to find a way to get involved in ASDA. This could mean joining a committee, running for an elected position, or simply helping out with an event. There truly is something for everyone. For all of you commitment-phobes, I am happy to note that there is no minimum obligation. You might be encouraged to hear that there are countless opportunities within ASDA for you to share your talents without feeling like a lame-o. I think you will be surprised by how much fun you will have by getting together with your classmates in working to enhance our dental school experience and further our future profession.

*Humbly Submitted,
Mike Lee (D3) President*

Mouths in Motion 5K a Resounding Success

"On your marks.... Get set... squeeceak." Beyond the faulty air horn cuing the start of the race, the inaugural ASDA Mouths in Motion 5K jumped off the starting line without fault. Held on Saturday, September 6, 2008, the walk/run was created to take place of the Open Wide Open golf tournament in hopes that it would provide the opportunity for more individuals to get



involved. With over fifty finishers and nearly twenty volunteers this year, this objective was undoubtedly met.

Walkers and runners alike finished a two-loop course beginning and ending in front of Coffman Union. The closing of much of the Washington Avenue pedestrian bridge provided an unexpected challenge, yet the race came and went without any collisions or tripping. Due to the curvy nature of this year's



course, alternate routes such as that on the U of M Les Bolstad Golf course are being investigated for next years race. (No, this is not an attempt to appease the golfers.)

Drum roll please...the winners this year in the female and male divisions were D1's, leading me to suspect that Dr. Madden is not working them hard enough in the pre-clinic. Bart Johnson led the dental dashers and finished in 16:53. Neil Olson took up second place close behind. Meanwhile, Cindy Blen-dermann blew away the female competition finishing in 19:55. Rachel Uppgaard took second for females. Around the hour mark, a dedicated group of walkers crossed the finish line and rounded off the tail end of the race. An awards ceremony and raffle followed where over twenty prizes were presented to either fast or lucky recipients.

Please join ASDA in acknowledging the following people and organizations that made the Mouths in Motion 5K a great success this year.

- Dr. Mike Madden, Dr. Paul Schulz, and Dr. Gary Smisek. All three ran a great race and provided extraordinary support!
- To all those students who put in time before, during, and after the race. Your help was invaluable! Thank you!

And finally, thanks to our sponsors: TDIC, Proctor & Gamble, A-Dec, Dyste-Williams, Lunds, Rainbow Foods, Purple Onion, and Great Harvest Bread Co.

The 2009 Mouths in Motion 5K will be held in early September. If you are interested in volunteering or planning it, please attend the activities committee meetings throughout the year. We hope to double our numbers next year and donate even more to benefit oral cancer research. Be part of the experience!

~Jen Dylla (D2) Secretary



Patient Communication Continued...

simple words like, “I regret that you had such an unpleasant experience; we respect your concerns and will make a determined effort to give you a satisfying dental experience.”

Occasionally, in spite of one’s finest efforts, a crown is inadequate and has to be remade. How might one inform the patient so the trust/confidence relationship is not diminished but actually strengthened? It is important not to disparage oneself or the lab technician, but to accept responsibility, emphasizing the manageability of the problem. Looking directly at the patient, tell them you have set for yourself high professional standards and will do whatever necessary to effect a superior outcome. Note that guarantees of any kind are not recommended. Thank them for their assistance, i.e., their time, their cooperation (assuming a new impression), and whatever else they may have done to expedite the process. As a result, the patient’s dental and psychological needs will be satisfactorily met, their respect for the dentist will be reinforced, and all of this in spite of a mishap! It helps to explain to the patient that a crown (or whatever) is a “precision instrument” which demands strict attention to detail and in many respects must be carefully “engineered.”

Now consider the opposite extreme, i.e., a crown or other restoration (fixed or removable) that fits accurately, meeting all criteria. How might one communicate so the patient looks upon the dentist as the best of the best? Having seated the crown, face the patient, look them in the eye, use

their name, and tell them the new crown is a “quality instrument” that will render complete satisfaction, hopefully exceeding their expectations. As they are leaving, suggest if they have family or friends who need dental care, you would be very pleased if they would mention your name and that you would extend the same courtesies and personal attention.

It is very important to communicate to the patient in ways which reveal your concern for them. Following a complex procedure phone them that evening and simply inquire as to how well they are getting along, avoiding the word “pain.” Most people will relate they are doing fine; others will say they are having discomfort but that they are okay, not to worry!! The amazing observation is how much better people feel when they know someone cares!! They always express gratitude and usually confide that never before has anyone called to check on them as you have done.

The purpose of this article is to remind the reader of the fundamental nature of a dynamic patient-dentist relationship, the ultimate objective being the establishment of trust, confidence and respect in conjunction with the finest care. Educate the patient; the more they understand, the less their apprehension and the greater their appreciation of dentistry and the provider. Recognition of the patient’s emotional (psychological) needs in tandem with good communication together lay the foundation for a gratifying experience for both patient and practitioner. Congratulations on becoming the best of the best!

“Educate the patient; the more they understand, the less their apprehension and the greater their appreciation”

Dean’s Den

room for a toothache. In a word, I wasn’t able to empathize with those whose experience was different from mine.

So, I began to listen to people’s stories. Some were the stories of dentists in our state who care for the underserved. Others were told to me by our students working in one of our outreach clinics -- Hibbing, CUHCC, our mobile dental unit or the Willmar clinic. I also learned much by reading, with the closest of attention, articles that described the difficulties people have finding a dentist and paying for dental care here in Minnesota and around the country.

Of all the things I learned, nothing is more significant than the insight that there’s no single solution – and certainly no easy or inexpensive quick fix – to the access challenges some Minnesotans face. It’s truly a complex and convoluted issue,

requiring the intellect, ingenuity, resources, and commitment of everyone – the public, communities, the legislature, all health care professionals, the insurance industry, and health science schools like ours.

As Minnesota’s only dental school, we have a unique responsibility in helping address these challenges. What we do and how we respond influences how others react. Some things we do have an immediate impact, like caring for public program patients in our school-based and outreach clinics. Other initiatives will pay off in a few years – like encouraging rural and underrepresented youth to consider careers in dentistry and educating the public about the need for scholarships and loan forgiveness programs for professionals who practice in workforce shortage areas. No matter whether the impact is sooner or later, everything we do makes a difference and will in no small way help to address the state’s access to care challenge.

“Of all the things I learned, nothing is more significant than the insight that there’s no single solution”

Students and Dentists Tackling Professional

The Minnesota Dental Association (MDA) held its annual House of Delegate meeting September 18th thru the 20th at the Minneapolis Airport Marriott Hotel, in Bloomington. It is at this meeting that the MDA debates, discusses and sets policies on current issues facing the profession.

Playing a crucial role by representing the future of the dental profession is the Student district. Delegates for our district included Amy Troung, Mary Truchon, Mike Lee, Brett Moore, Sheena Eken, Jen Dylla, Elissa Dommer, and myself. The

MDA holds the opinions of the students with the highest regard and encourages them to voice the concerns of the student body. This was probably most evident during the introduction of the ADHP (now OHP) legislation.

As a result of the heavily monitored legislative events of the past year, it was no surprise that many of the resolutions focused on issues such as mid-level providers, the roles of dental auxiliaries, and membership.

The hottest topics seemed to be related to



membership. The house adopted the resolution allowing a new membership category that includes non-practicing

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ASDA's Caribbean Cruise in Scottsdale, AZ

Students from dental schools throughout the nation gathered at the ASDA Annual Session August 27-31, 2008 in sunny Scottsdale, Arizona. Attendees from Minnesota included Tim Anderson, Bryan Behm, Andy Bohnsack, Elisa Dommer, Jen Dylla, Sheena Eken, Anna Kenney, Mike Lee, Brett Moore, and Amy Truong. Students voted on ASDA- and dental-related resolutions in the House of Delegates; elected the Board of Trustees; discussed issues important to dentistry and dental education; and socialized with dental students.

Panels were compiled in order to enlighten issues important to dental students, and one session, entitled "Required Additional Clinical Training Beyond Dental School", answered the question "Do dentists need an additional year of clinical training, or are new graduates adequately trained to enter practice upon graduation?" A fifth year is suggested in order to address access to dental care, eliminate the board



licensure exam, obtain additional clinical experience in an independent



setting and allow for a gradual transition between school and practice.

Of these, access to care is a major motive for adding a fifth year. The panel called to mind, however, that this proposal results in the largest population of patients with the most complex needs being treated by individuals with the least amount of experience. Additionally, it gives the sense that access to care can be addressed solely by this body of fifth-year students when, in fact, this task should be shared amongst the dental community. This is a multi-factorial problem that needs to be addressed through multiple solutions.

An additional year of dental school could result in adverse consequences. This extra year would cause students to accumulate additional debt, which may lead to a smaller application pool and less minority applicants. A large application pool

is necessary in order to ensure that each school is training the best future dentists possible. Furthermore, it is unknown if there is funding to support an additional year since this may require additional employment of faculty, of which many schools are currently at a shortage.

When considering the viability of a fifth year, the current dental curriculum must first be studied and critiqued. While some are suggesting that new graduates are not adequately trained, there is no proof that the current curriculum is producing ill-efficient graduates. Many dental students are attracted to post-graduate education in order to fine-tune



skills necessary for private practice that are not emphasized at their school. These skills may not be practiced in a community-based dental clinic or at their current school, and there is concern that the additional year would simply be a repeat of the fourth year. The panel indicated that more research is necessary before a fifth year of dental

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MDA House of Delegates Continued...

dentists. This new category, which is already recognized by the ADA, would allow faculty of dental schools, who are currently non-practicing dentists, membership. Another interesting resolution related to membership, that was not adopted, suggested adding full membership and benefits to members of the entire dental team. Other areas of discussion included the MDA's adoption of resolutions focusing on defining "Access to Care", an alternate Oral Health Practitioner proposal, and policies related to the MDA's journal, Northwest Dentistry. This vast spectrum of topics at this years

House of Delegates showcased the diversity within the profession as well as the role of organized dentistry in the future of healthcare.

Although the meeting included mostly business, there was time for students to socialize with MDA dentists and staff. Dean Lloyd gave a very informative presentation on the events at the school and the activities of the midlevel oral health provider initiatives. The meeting also included a section for awards where the student district was once again recognized for the largest increase in atten-

dance at the Star of the North. Last on the three day agenda was introduction of the new Board of Trustees and Executive Council. The student district elected Mike Lee as the trustee for the student district. The meeting concluded with an emotional speech by out going MDA president, Dr. Jamie Sledd where she introduced the new president. Dr. Lee Jess. His introduction speech left all of those in attendance with confidence that the MDA is in good hands and excited for how organized dentistry with shape the future of oral healthcare.

~Tim Anderson (D2) President-Elect

Scottsdale Annual Session Continued...

school is mandated across the nation.

We said good-bye to Wayne Stephen's ASDA presidency with a Caribbean-themed reception and dinner dance. ASDA students wore their best tropical attire and showed off their limbo skills. Our very own Bryan Behm wore a coco-

nut bra and grass skirt!

The new ASDA Executive Committee is comprised of Mike Meru (Southern California), President; Matt Davis (Nebraska), Vice President; and Anuska Refai (Southern Illinois), Vice President and the Speaker of the House is Wesley Shute (Buffalo). We are especially excited to have Matt Davis represent District 8. Amy Truong (Minnesota, D4) passed off the District 8 Trustee torch to Justin Schlaikjer (Creighton). Thank you to Amy for doing such a wonderful job representing Minnesota on the national level. We are excited to welcome Justin's leadership as our new District 8 Trustee. On a final



note: Congratulations, Minnesota, for winning three awards: Ideal ASDA Chapter for Advocacy, Most Improved Newsletter and Honorable Mention: Overall Ideal ASDA Chapter. Thank you to everyone for lending a hand in these accomplishments!

~Elisa Dommer (D2) Membership



Something to Sink your Teeth Into...

Grammy Tammy's Potato & Corn Chowder

This soup is excellent for those cool fall evenings. It is quick and easy enough for any dental student to throw together! It was a favorite in my family for many years. Its great served with muffins.

- 4 potatoes, peeled and cubed
- 2 cups water
- 1 medium yellow onion, chopped
- 1 can cream style corn
- 1 can evaporated milk
- 1 tbsp. butter
- Salt & Pepper to taste

Boil the potatoes, water and onion until potatoes are tender. Do not drain. Mash potatoes slightly. Add rest of ingredients and heat through (don't boil). *Optional: top with cheddar cheese and/or bacon pieces.*



Recipe submitted by Anna Kenney, D3