

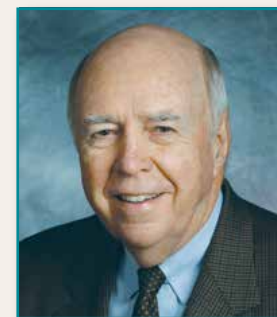
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## A Lifetime of Success, Dr. Peter Dawson

We are privileged to have one of, if not the best known dentists in the world speak to us about some of the transformational moments in his long life and career in dentistry. Dr. Dawson was born and raised in St. Petersburg and heads one of the most influential post-graduate training centers for dentists and their teams ever created. He and the faculty at the Dawson Academy have trained over 50,000 dentists world-wide since its inception. Dr. Dawson will share with us the key factors he has personally found which lead to success in treating patients predictably, dental practice management, and a happy and fulfilling life in dentistry. The list of his accomplishments is long and astounding. One of his greatest accomplishments is being a past president of the Pinellas County Dental Association.



Dr. Peter Dawson

Don't miss this opportunity to hear from our honored friend and college. Staff is invited.

2 CEUs provided

Wednesday, March 1, 2017

6:00 p.m. social / 7:00 p.m. business

Staff is invited to attend for a fee of \$45 to help cover the cost of dinner.

The Club at TI

400 Treasure Island Causeway Blvd, Treasure Island

Please kindly RSVP for you and your staff by February 27<sup>th</sup>.

Send RSVPs and dietary requests/restrictions to  
[smilepinellas@gmail.com](mailto:smilepinellas@gmail.com) or (727) 342-0374.

## Mark Your Calendar 2017

Wednesday, March 1, 2017

**A Lifetime of Success**

Pete Dawson, DDS

The Club at Treasure Island

Staff is invited!

Wednesday, April 5, 2017

**Vendor Fair**

Sponsored in part by Benco

The Club at Treasure Island

Staff is invited!

[View the online PCDA Master Calendar](#)

# President's Message



**Dr. Sandy Worman**

Super Bowl Sunday, most of us sat home in front of our televisions watching one of the greatest football games of all times, Super Bowl LI. The game started out exactly the opposite of what we had expected... it was not a nail biter, not even close, and showed no evidence of drama or excitement. It became however, the perfect demonstration of a team pulling off one of the greatest comebacks in Super Bowl history. A great example of how any large group or association should approach their goals. The Patriots began their rise to greatness not by selecting the number one draft pick, but by building a team one by one. As a matter of fact, Tom Brady was actually a very low 199th overall pick! This organization's success has is a result of years of proper planning, leadership, and of course resilience much as we as a dental society have tried to do year after year. Our organization is not successful because of just one member, executive board member, or even the leaders at the top of the dental associations, but rather a culmination of all these various individuals and groups coming together to build an organization that will respond when needed and adapt to change as is required.

As your board and I sat at the FDA House of Delegates meeting last weekend, I witnessed this first hand as the entire House listened and debated how to handle a developing situation involving the Board of Dentistry. Changes have been approved to reclassify scaling and root planing and the placement of medicaments to general supervision as opposed to indirect supervision. As a result of this meeting, the FDA along with the FAP and the AGD have filed a request for a public hearing to develop a plan on how to approach this issue. As of today, the hearing has been set for Friday, May 19 at the DoubleTree Hilton Orlando.

In the interim, we ask that all of our members think of any patients or situations that have been affected by these procedures in an adverse manner. We are hoping to build a case as to why these procedures should not be done under general supervision and are hopeful that some of your own patients may come forward with their own experiences. We will be posting a template for members to send in written comments as well. If we do not attempt to overturn this resolution, we are allowing hygienists to move even closer to the independent scope of practice that may not be in the best interest of our patients. I am hopeful that many of you can attend the public hearing and show your support.

Lastly, Claudia Rosas from the St. Petersburg Free Clinic is in need of two volunteer dentists for Friday, February 24 at PTEC and Saturday, March 4 at the Pinellas County Health Department from 8:00 am until 2:00 pm at the latest. Please let me know if you are available to help with these important events.

I look forward to seeing you all at our next meeting March 1st.

Regards,

A handwritten signature in cursive script that reads "Sandra A. Worman, DDS". The ink is dark and the background is a light, slightly textured surface.

Sandra Worman, DDS  
PCDA President

## The Bonding of Porcelain Restorations

The bonding of all porcelain restorations can be done in a multitude of ways with varying results. Today Dr. Charlie Ford is giving us his method (mostly from Jimmy Eubanks) for bonding all porcelain restorations. You will not find this to be the fastest or easiest way to bond but in my opinion if you want a great bond with great retention this is a great way to get it.

**Dr. Kenneth Grundset**  
**PCDA Treasurer**

This is a technique for bonding all porcelain restorations taught by Jimmy Eubanks. It is intended for use with etchable porcelains such as feldspathic or lithium disilicate, not zirconium. I have used it for over 13 years with only one debond which was my fault due to salivary contamination. I rebonded the restoration and it has not come off since. It is a very picky and precise technique but pays off in phenomenal dividends.

First I advocate the use of the rubber dam for all molar bondings, which is easy as a great many of these preparations are mostly supragingival. An Ivory W3 clamp will fit over 90% of all molars, and Brinker clamps will fit the remaining ones almost without exception. Do not hesitate to alter the shape of the jaws of the clamp with a green stone to fit the tooth. Be sure to include all adjacent teeth in the rubber dam so that there is no problem with the contacts. There is no such thing as a little salivary contamination. Bonding is like a light switch – on or off (and I mean that literally). There are no such things as a little bit pregnant or a little saliva contamination.

Usually the restoration comes from the lab already etched. Be sure to request that the porcelain is etched a half millimeter past the margin. If necessary, I etch my restorations with Meyer's Super Etch. It is only available to labs, not dentists, as they are afraid of liability if it is used intraorally, so you need to have your laboratory order it for you. After removing the provisional and pumicing the preparation, try in the restoration. I grossly and lightly check and adjust the occlusion but make no attempt to refine it at this time. Remove the restoration, rinse clean by scrubbing with water, then place Ivoclar's Ivoclean on the internal surface for 20 seconds then scrub and rinse. This removes any salivary proteins from the try in. There is no need for a separate step for silane as it is contained within the Clearfil Porcelain Bond Activator.

Now, micro etch the preparation. This gets it beautifully clean and produces a matte finish with a microscopic surface area something like six times greater than the bur scratches. I highly polish my porcelain preparations prior to taking impressions, so I believe this step to be essential. It is also very messy so the use of the rubber dam is appreciated by both the patient and the dental assistant who is trying to clean it all out of the mouth. If gingival bleeding occurs, stop it with repetitive ten second applications of superoxyl with a microbrush, followed by copious irrigation. This also leads to some of the best looking tissue 15 minutes after bonding, my guess being because of the bactericidal action of the superoxyl. Superoxyl on the tooth both kills plaque and opens dentinal tubules, so a predictable bonding technique is essential to avoid sensitivity issues.

Isolate the prep from the adjacent teeth for etching. I find Teflon tape to be very useful. Using Ultradent's 35% Ultra Etch, etch the entire tooth past the margins (except for margins on the root) for 10 to 15 seconds with agitation. Rinse thoroughly and then air dry the preparation. If any areas look to be inadequately etched, including dentin, repeat etching the area for 3 to 5 seconds. Rinse and dry. I realize that drying of the surface is supposed to be taboo, but this problem is overcome in the next step.

Using Clearfil's Liner Bond 2V only, NOT the primer that comes with the Photo Bond kit, place one drop of Primer A in a mixing well. Be sure to have your assistant hold her hand at exactly the same angle for all the drops used and have her watch the drop carefully. If there is an air bubble in the drop, wick it off with a 2 x 2 gauze and try again. This is precise chemistry, not a grab and go approximation. Then add one drop of Clearfil's Porcelain Bond Activator and stir. Then add one drop of Primer B and stir again. This is a water based primer, so the collagen fibers will be rehydrated upon application. While the activator is not necessary if there is no

*(continued on page 4)*

*(continued from page 3)*

composite buildup on the preparation, we always do the exact same steps to insure predictability. Scrub the entire tooth vigorously for 20 seconds, and then allow the primer to remain undisturbed on the prep for 20 more seconds. Now blow dry until you can see ABSOLUTELY NO movement of the primer. This is important as the primer tends to have a greater film thickness than the bonding agent. Now have your assistant place one drop of Photo Bond catalyst (yellow top), then one drop of the Porcelain Bond Activator (always necessary here as it contains the silane) in exactly the same manner as before. Stir and add in the Photo Bond Universal. Stir and apply to all surfaces of the preparation. Blow thin, being sure to keep from pooling in any line angle or box in the preparation. Err on the side of over blowing, as we will correct for that later. Now light cure for at least 20 seconds, more if it takes your assistant longer to do her part.

While you are light curing, have your assistant coat the internal surface of the restoration with the Photo Bond mixture and gently blow it thin. Then have her place the composite cement into the restoration. I use 3M Espe RelyX veneer cement in the translucent shade for most of my restorations to allow the light to pass into the tooth for maximum cosmetic effects. If I am attempting to block out a dark tooth, I will make my own cement from Cosmodent composite in the shade of the restoration by mixing three parts of microhybrid with one part flowable. This is much more viscous cement than the 3M, allowing for greater ease of handling but taking longer using light finger pressure to fully seat the restoration. As a tip, the cements can make handling the restoration quite slippery, so we melt Delar blue bite registration wax on the occlusal or facial aspect of the porcelain and stick the wrong end of a cotton bud into it. You now have what we call “crown on a stick”. I do not use any dual cure cements on all porcelain restorations as the addition of amines in the catalyst can cause color change in the composite over time, allowing the preparation to show through the porcelain.

Before placing the restoration on the tooth, place another coat of the Photo Bond mixture on the tooth and DO NOT light cure it. This will make up for any areas that you removed too much bonding agent and make moot the point of whether you should cure the bonding agent prior to placing the restoration or not. Now place the restoration using finger pressure to exude excess cement. Use a dry brush and dental floss to clear away 95% of the excess. I often use the floss twice as I do not care to saw one of my restorations away from an adjacent tooth. Tack cure for 2 to 3 seconds at a time by waving the curing light rapidly around all parts of the tooth at a distance of several inches. Clean the remaining cement relatively thoroughly, being sure above all to clear the proximals and leaving no big globs of cement anywhere. The cement should not be runny, just kind of waxy. If it is still too runny, quickly light cure for 2 seconds again. Brush on KY jelly (your choice of flavors, but stay away from the heated stuff) and cure for 60 to 120 seconds. Move the light slowly and have your assistant apply a continuous stream of air to minimize heat buildup, which can not only damage the pulp but actually fracture an all porcelain restoration.

All that remains now is for you to refine the occlusion and have your assistant finalize the last of the cement cleanup. I then have her light cure the restoration again for a full 2 minutes with a constant stream of air. I realize that this technique appears quite complicated, so use a cheat sheet your first few times. After a while, it flows very smoothly and, believe it or not, fairly rapidly. I have held the belief for a long time that cementation of restorations is a terribly underemphasized part of crown and bridge procedures. There is a lot of research supporting the etch and rinse technique (essentially the fourth generation total etch technique) that demonstrates vastly superior bond strength over the etch and no rinse technique. While simplicity may be seductive, it may not prove to be the best answer.

A recent area of investigation involves removing the matrix metalloproteinases (MMPs) in the tooth activated by etching dentin, which are believed to be responsible for the degradation of the dentin bond over time. BisCo Cavity Cleanser scrubbed on the preparation for 20 seconds contains 2% CHG which removes the MMPs, so I may be using it in the future following etching and prior to priming. I just kind of hate to mess with what is working so well, but it might allow for longer life for porcelain restorations, particularly those preparations mostly in dentin with minimal enamel. If you are experiencing no problems with your current technique, then please do not alter it. However, if you are experiencing the occasional debond as I did previously, consider this as an alternative. It has been 100% predictable for me, which gives me great comfort. How often can you say that about anything you do clinically? It's no fun to have to go to your office on Saturday night to rebond a central incisor veneer on someone who is not in pain but is having a “cosmetic emergency”.

**Dr. Charles Ford, III**  
**PCDA Member**

# Small Bites



Pinellas County Dental Association representatives attend the Florida Dental Association House of Delegates Session in Tampa.



Dr. Ed Busch was honored for his donation of a Panorex Machine. The machine was originally donated to the St. Petersburg Free Clinic, then recently passed down to the Pinellas Technical College.

## BOD Holds Public Forum on Controversial Changes

On January 17, 2017, the Florida Board of Dentistry (BOD) made public recent changes of deletion and amendment within sections of Rule 64B5-16.006 and 64B5-16.007. These changes altered the level of supervision for two separate delegable procedures dental hygienists are authorized to perform, consisting of (1) root planning and (2) placing subgingival resorbable chlorhexidine, doxycycline hyclate, or minocycline hydrochloride. In a rare move by the BOD, this relaxes some protections to the public. In the case of both delegable tasks, the level of supervision authorized was changed from the existing level of indirect supervision, in which a licensed dentist is on the premises while a given procedure is performed, to general supervision, in which the dentist authorizes the procedure but need not be present, and which may also be performed at a location other than the dentist's usual place of practice. These changes were forwarded by BOD's Council on Dental Hygiene but are in opposition to the FDA and the Florida Association of Periodontists position that was affirmed at the recent FDA House of Delegates. The BOD has agreed to a public forum to hear discussion of this rule change. The public forum will be held in conjunction with the May BOD meeting on, Friday, May 19th at DoubleTree Hilton in Orlando. The public is encouraged to attend.

## Keep Your Profession Strong and Pay Your ADA/FDA/WCDDA Membership Dues Today!

Pay your dues in full or set up a monthly dues installment plan with a credit card. If you are not logged in, you will be required to login using your username and password on file with the ADA.

### [Pay Dues Online](#)

Your username (9-digit ADA number)

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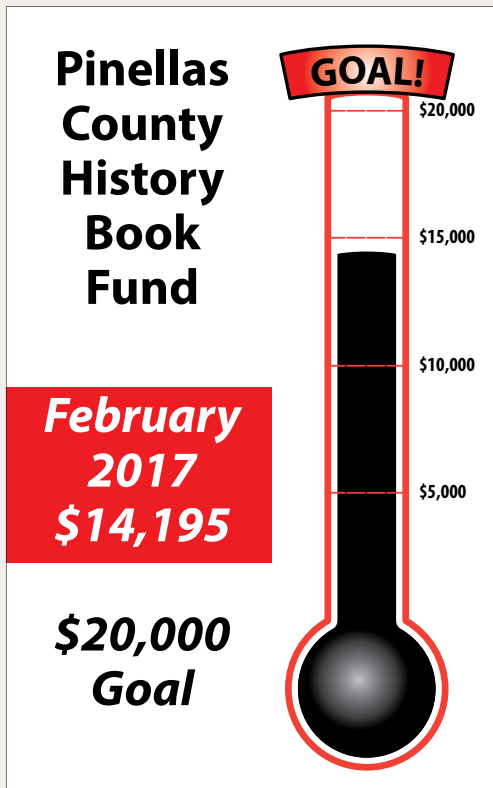
If you have trouble logging in, please contact your Member Relations Team at 1-800-877-9922. Important Note: If you pay your dues "in-full" online, it may take up to three (3) business days for your account to be charged.

[Click here to view alternate payment options.](#)

## Overpaying for Credit Card Processing?

Let me share my story with you how if you are working with Retriever Medical/Dental Payments how you may be paying A LOT more than you should be. I have nothing to gain from this information other than saving you money and not being locked into agreements with a company that is not honest. Direct all inquiries to [maherrashiddmd@gmail.com](mailto:maherrashiddmd@gmail.com).

# History Book Progress



PCDA has funding available for first time attendees to Dentists' Day on the Hill! Contact Kelsey Bulnes at [smilepinellas@gmail.com](mailto:smilepinellas@gmail.com) for more information.

Registration now open: [floridadental.org/ddoh](http://floridadental.org/ddoh)

**fda** florida dental ASSOCIATION

**SHOW ME YOUR SMILE!**

**2017 Dentists' Day on the Hill**

<b>BRIEFING</b>	<b>LEGISLATIVE VISITS</b>
Monday, April 3, 2017	Tuesday, April 4, 2017
Aloft Hotel, Tallahassee	Capitol in Tallahassee

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**ALLIANCE**

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ALOFT HOTEL  
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Phone: 850.513.0313  
Room Block Deadline: March 3, 2017  
(rate: \$229 with complimentary parking)

For more information, please contact the FDA Governmental Affairs Office at 800.325.0051 or [gao@floridadental.org](mailto:gao@floridadental.org).

## PCDA Membership

### Invite a Colleague!

Have you met a new dentist in the area? Invite them to our upcoming meeting on March 1, 2017 at the Club at TI. Potential members will have a great time and quickly learn the benefits of strong organized dentistry! It is important to keep our voices strong and loud so that our politicians have our best interests at heart.

### Become a Member

Please contact Kelsey at [smilepinellas@gmail.com](mailto:smilepinellas@gmail.com) or PCDA Membership Chairman, **Dr. Mike Insoft** at [minsoft@tampabay.rr.com](mailto:minsoft@tampabay.rr.com) for more information about attending a meeting or becoming a member. Membership applications may also be located online at [www.smilepinellas.org](http://www.smilepinellas.org).

# Endo Post

## Seeking Front Desk Receptionist

Needed- Front desk receptionist/insurance person for a temporary 32/hour/week maternity leave replacement. This would start around the end of August or beginning of September depending on baby's delivery date. The spot would last 8 to 12 weeks based on mom's clearance from her doctor. Current hours are M-Th 8-5, nice Seminole office. Please contact Michael Podlusky at 727-393-8912 for more info.

## Seeking a Quality Hygienist

Our progressive general practice has a position available for a quality hygienist four days a week. Quality and team work are essential. Please call Dr. Marquez at 727-345-1774 office or 727-871-2454 cell or fax resume to 727-345-2461.

## General Dentist Looking for an Associateship

I am a general dentist looking for a long term associateship in a solo private practice in the Seminole/St. Petersburg area. I completed an AEGD in St. Petersburg in 2005. I am trained and comfortable with CEREC, rotary molar endo, surgical extractions and implant restoration. Looking for the "right fit" and not opposed to partnership or future ownership. Please contact me at [wendmc78@yahoo.com](mailto:wendmc78@yahoo.com). Wendy M. Terry, DDS, FAGD

## New Dentists Seeking Employment

My name is Vanja Alagic, and I will be graduating from the LECOM SDM June 2017. I am currently on my rotations in an outreach clinic providing comprehensive oral care in DeFuniak Springs, Florida. I have lived in St. Petersburg, Florida since 1998 and it would be my honor to return to the bay area to serve my community. My goal is to find an associate position leading to an opportunity for partnership/ownership. I have a strong belief in life-long learning, and I am looking forward to working in a clinical environment with a dentist who is willing to share their expertise and experience in the world of dentistry. I am comfortable with procedures such as surgical extractions including third molars, molar endos, fixed prosthetics, and implant retained dentures. I earn a great amount of pleasure by completing complicated cases and changing a person's perspective of life. I also have a curriculum vitae and letters of recommendation upon request. My contact information is [727-259-4654](tel:727-259-4654) or [Vanja.Alagic@gmail.com](mailto:Vanja.Alagic@gmail.com)

My name is Sandra Santos, and I am a recent graduate from LECOM School of Dental Medicine Class of 2016. I am currently completing a one-year AEGD residency through NYU Lutheran in Atlanta, GA until July 2017. I was born in Dominican Republic and am a fluent Spanish speaker. I moved to the Tampa Bay area when I was 11 years old and am thrilled to be coming back home to establish myself professionally. I look forward to providing excellent dental services to my community and continuing the academic pursuits that I have *enjoyed* during my residency. My main goal is to provide patients with the treatment they deserve. For more information, CV, or Recommendations please email: [smsantos11@gmail.com](mailto:smsantos11@gmail.com).

## Direct all classified and ad inquiries to:

PCDA/Kelsey Bulnes, CMP:

[smilepinellas@gmail.com](mailto:smilepinellas@gmail.com) or (727) 342-0374

# Other Important Dates

GKAS ..... February 25, 2017  
Mid-County & St. Petersburg Health Dept. Locations

WCDDA's Breakfast Lecture Series. .... March 11, 2017  
Renaissance, Tampa  
*\*New Dentist Event*

FDA Mission of Mercy - FLAMOM. .... March 24-25, 2017  
Pensacola, Florida

FDA's Dentists' Day on the Hill. .... April 3-4, 2017  
Tallahassee, Florida

WCDDA's President's Trip ..... April 28, 2017  
Disney Cruise, Bahamas

WCDDA's Breakfast Lecture Series. .... May 20, 2017  
Renaissance, Tampa  
*\*New Dentist Event*

WCDDA's Summer Meeting ..... August 4-6, 2017  
The Ritz-Carlton, Naples

## Fill a Form, Fill a Chair



**You told the ADA you wanted to see more patients, so this spring, we are launching an enhanced Find-a-Dentist tool to help new patients find you.**

By taking 5 minutes to update your member profile, patients can more easily search by geography, specialty and payment and benefit plans. The new tool also prioritizes completed profiles in the search results, and you will have the ability to track how many views your profile receives.

Complete your ADA® Find-a-Dentist™ profile by **May 1, 2017** to be entered for a chance to win a Mercedes Benz C class sedan or GLC SUV 12-month lease or \$10,000 cash award!\*



Login to complete your profile for the chance to win!

ADA American Dental Association®

\*All active licensed members practicing in the U.S. are eligible to win. Visit [ADA.org/fadrules](http://ADA.org/fadrules) for official rules.



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PRESENTS



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**MARCH 24-25, 2017**

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**ALL U.S. LICENSED DENTISTS MAY PROVIDE CARE IF REGISTERED BY JAN. 15, 2017.**

Licensed dentists and hygienists do **NOT** need their own malpractice insurance to practice at the FLA-MOM. The FDAA's insurance through The Doctors Company will cover licensed dentists and licensed hygienists at FLA-MOM.