

ALUMNI ANCHOR

2015 | 2016

DECAY DETECTORS

Dalhousie
faculty set to
test an early
dental decay
tool



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LAUNCHES NEW ERA
OF EXCELLENCE



**Qualifying
Program**

Dalhousie students
top Table Clinics



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IN THIS ISSUE

- 4 Dean's Message
- 5 Letter to the editor
- 6 Qualifying Program students top Table Clinics
- 9 Dental hygiene through the years
- 10 Cover story: Dal researchers testing dental decay detection tool
- 12 A trip down memory lane
- 14 Clinic renewal launches new era of excellence
- 16 Annual Giving Report
- 18 Remembering Dr. Precious
- 19 Bachelor of Dental Hygiene students spread smiles at Mount Hope
- 20 The Utah connection
- 22 Dalhousie Dentistry Community Contacts Program
- 23 Ergonomics in the clinic
- 24 Student research corner
- 26 From the archives
- 27 Upcoming events
- 28 Dean's List
- 30 Clinical tip



10



20



26



28



On our cover: Drs. Blaine Cleghorn and Ferne Kraglund are two of the Dalhousie faculty members working on a research project to test a new early dental decay detection tool. The first trials start in the fall. See the story on page 10.

Photo: Steve Jess

DEAN'S MESSAGE



Greetings from your Faculty of Dentistry Family. This past year has been a difficult one for our faculty, staff, students and you, our alumni. We

are committed to building a stronger, more inclusive community, and there is a lot of work already underway.

The challenges we have encountered this year are part of a larger societal issue that has touched our Faculty community deeply, and we fully accept our active leadership role to ensure that this important conversation continues. To this end, we have established The Next Steps Committee, which is a Faculty-led initiative comprised entirely of Dalhousie Dentistry faculty and staff. The committee's mandate is to foster an environment where every student, faculty, staff member and patient feels safe, included and represented within our community. The committee's goal is to create and sustain positive cultural change within the Faculty over the next 12 months and into the future. The committee is building on the work of

the Restorative Justice process, which addressed the conduct of some of the fourth year DDS students in their private Facebook group. The Restorative Justice process successfully concluded its efforts with a report in May 2015. I would strongly encourage you to review this document, which is available at www.bit.ly/1eLmDnv.

The Restorative Justice process was a challenging and very meaningful experience for all involved: students, faculty, staff, representatives from organized dentistry and members of the community. Hundreds of hours were dedicated to examining and learning from this experience.

As you may have heard, it was determined that the former Facebook group members successfully remediated their behaviour and met the professionalism standards required for graduation. For additional details, please visit www.dal.ca/cultureofrespect.

The Next Steps committee is taking comprehensive action to strengthen culture, policies and curriculum around professionalism, diversity and inclusiveness. Please visit our Commitment to Change website (www.bit.ly/1Fm5JBw) for updates, including the Faculty of Dentistry's ongoing action concerning the Facebook incident, the Belong Report (Strategic

Direction Charter 5.2), the Restorative Justice Process report, Professor Constance Backhouse's external Task Force Report, and more. These reports have brought forward many recommendations for the Faculty of Dentistry and Dalhousie University as a whole, many of which are already being actioned.

As always, we appreciate your comments and suggestions. Please contact us at alumni.dentistry@dal.ca with your thoughts.

I hope you enjoy the various features in this year's *Alumni Anchor* magazine as we celebrate the many successes of our alumni, students, staff and faculty and the update on our clinic renewal project.

I wish each of you a safe and happy summer. I leave you with this quote from Flora Edwards: "In helping others, we shall help ourselves, for whatever good we give out completes the circle and comes back to us."

Most sincerely,

Thomas L. Boran (DDS'78)
Dean, Faculty of Dentistry

Maillet elected DAC Chair



The Dentistry Alumni Committee is pleased to announce that **Peggy Maillet (DipDH'74)** has been elected as the new Chair of the Dentistry Alumni Committee. She is the first female and first dental hygiene alumna ever appointed to the position.

She will serve a two-year term from 2015–2017. Outgoing Chair **Dr. Lee Erickson (DDS'81)** will serve as Vice-Chair of the DAC, and **Shauna Hachey (DipDH'04, BDH'12)** has been reappointed to the role of DAC Secretary. **Dr. John Christie (DDS'71)** will continue to serve as Past Chair (ex-officio). *

CALL FOR NOMINATIONS

The primary function of the Dentistry Alumni Committee is to enhance connections between and among our alumni and students.

If you are interested in making a difference, please email alumni.dentistry@dal.ca or call 902-494-1674.

LETTER TO THE EDITOR

I would like to congratulate the editor and staff of the most recent edition of the *Alumni Anchor* for what I feel was one of the best editions to date. Every day, we as dentists are all besieged by dental journals and publications to read. The *Anchor* gets added to this pile and, unfortunately, it sometimes only gets a brief scan and therefore does not get the attention it deserves.

The latest edition was an exception. All the articles were interesting and informative. I especially enjoyed "The benefits of going global" by Ben Lawlor, describing the trip by third- and fourth-year dental students to Guatemala to help assist with the dental needs of the people in a community there. It was truly inspirational. Also the story by Jon Bruhm, "Dentistry students get pumped," regarding second-year students Meghan Dunphy and Jill Obritsch and how they found "training helped them to sleep and think better" was great advice. I wish they had been in my dental class 35 years ago to offer those words of wisdom and their recommendations!

Finally, it was nice to see another old dinosaur like myself, my classmate Dr. Art Spencer, pass on some suggestions in the article Alumni Feedback Inspires Curriculum Renewal for Faculty of Dentistry.

Dr. Paul J. Coady (DDS'82)
Annapolis Royal, NS



In last year's *Alumni Anchor*, we featured a story on a partnership between the School of Dental Hygiene and the Immigrant Services Association of Nova Scotia (ISANS). This new program provides students with the opportunity to help bring oral health care to immigrants in need.

We are pleased to announce that due to generous donor support, the program is now able to run year-round. This year, we've treated over 60 ISANS patients and are looking forward to continuing to serve our community.

To find out more about how you can help support our community initiatives, contact Development Officer Victoria Colpitts at 902-494-6170 or victoria.colpitts@dal.ca.



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Qualifying Program students top Table Clinics

By Chad Klassen

Our 2015 Table Clinic event made history when three students from Dalhousie's Qualifying Program for foreign-trained dentists placed first, second and third consecutively in the competition for the first time. This annual event, which involves dentistry and dental hygiene student presentations, is part of the Student Clinician Research Program. The program was introduced by Dentsply International and the American Dental Association in 1959 and now takes place in over 40 countries. Third-year students, as well as first-year Qualifying Program students, must each take the spotlight in a clinic cubicle to present their research with their colleagues, family and friends and, of course, the judges. Student presenters are judged up to three times by dentists chosen from the community and are eligible to win prizes in various categories. Second-year dental hygiene students have recently switched from the traditional tabletop format to small team presentations that explore a range of important topics.

The top dentistry and dental hygiene presentations receive cash awards and/or prizes. Meanwhile, the top original research presenter receives an all-expenses-paid trip to present his/her research at the Canadian Dental Association's National Conference, leading to global recognition, membership to the exclusive Student Clinicians of the American Dental Association Annual Session, and an opportunity to compete internationally at the American Dental Association Annual Session. The 2015 recipient of the research award is Laura Rose MacDonald. See page 25 for more on her research about toothpaste dosing for pediatric patients.

It's not just about winning, as Dr. Richard Price, Chair of Table Clinics explains: "The purpose of Table Clinics is that it gives the students an opportunity to be the experts in the room."

Despite not expecting such a triumph, the top three finishers in



Left to right: Sharieh Faghihi, Tarun Dass and Yaser Issa.

2015 —Tarun Dass, Sharieh Faghihi and Yaser Issa—each acknowledged that their ability to clearly convey information and confidently answer questions was likely their strength. The judges obviously agreed! ★

FIRST PLACE: Tarun Dass | Implant (Restorative/Endo-Osseous) Site Preparation With Orthodontics; Hope With Hopeless Teeth.

Dass completed dental school and a Master of Dental Surgery in Orthodontics and Dentofacial Orthopedics in India. He practiced craniofacial orthodontics, often for cleft lip and palate, in a public hospital setting. Dass describes coming to Halifax to study at Dalhousie as an "amazing decision" and had a wonderful experience participating in Table Clinics. He enjoyed working with Dr. Stephen Roth, getting up to date with the literature and the challenge of delivering his message to a diverse audience in a short amount of time. In the future, Dass may revisit his research through a surgical lens or possibly pursue orthodontics again. For now, he is looking forward to practicing general dentistry and spending more time watching cricket with his family—that is, once his wife completes her MSc (Periodontics) on the West Coast.

SECOND PLACE: Sharieh Faghihi | The Efficacy Of Subgingival Chlorhexidine As An Adjunct To Nonsurgical Periodontal Therapy

In Iran, Faghihi earned a DDS and MSc (Periodontics) at the Tehran University of Medical Sciences. After school, she worked in private practice and education, helping establish a dental centre for disabled children in need. Faghihi and her family landed in Toronto in 2011, where she was part of a support community for troubled women. Later that year, she made the move to Halifax to join the Qualifying Program. She is thrilled to have been able to study at this point in her career and says that Dalhousie has broadened her vision and given her a second chance to practice general dentistry. For this project, it was Dr. Cynthia Andrews who kept Faghihi motivated while she worked diligently to draw conclusions from mounds of non-specific systematic reviews and break it down for students and dentists. Faghihi admits that initially communicating with people from a professional position, and as a new resident, was challenging. She is now fully enjoying the rich history, culture and tranquility of the East Coast.

THIRD PLACE: Yaser Issa | Nanomechanical Properties Of Bulk Fill Resin Composites Post-Curing With A Polywaves Light-Curing Unit

Issa completed his undergraduate dental training and MSc (Fixed Prosthodontics) in Syria, and PhD (Fixed Prosthodontics) at the University of Manchester (U.K.). He practiced in Syria, England, and Saudi Arabia before moving his family to Halifax in 2011 due to Syria's ongoing civil war. Settling in Canada and going back to school meant great sacrifices. Drs. Daniel Boyd and Richard Price provided the space, equipment and materials including a nano-indenter—equipment that is very sensitive to vibrations—which meant working undisturbed before 7:00 a.m. or after 9:00 p.m. "You don't get tired when you're getting results because you feel like you're creating something," Issa says. There have been discussions around developing this project or even pursuing prosthodontics again, but right now Issa's priority is restoring his family situation and getting back to some of his hobbies, like swimming and fishing.

FUN FACT

Chad Klassen is a third-year dentistry student. In January 2016, he will present his Table Clinic research, entitled "The Use of Mid-level Dental Providers to Increase Access to Care for Underserved Canadians." His faculty advisor is Dr. Greg Jones.

DENTAL HYGIENE WINNERS

FIRST PLACE – Tobacco alternatives: Water Pipe and Electronic Cigarettes
• Sara Elliot, Holly Evans, Brooke Kinden, Steven Laureijs

SECOND PLACE – A client presents: Tobacco Use
• Ashley Broome, Shelby DeVan, Brittany Dunlop, Laura Leger

THIRD PLACE – A client presents: Elder Abuse
• Brittany Crossman, Lindsay MacDonald, Rachael Bittar, Rae-Lynn MacLean

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Dental hygiene through the years

By Suzanne Rent

From direct supervision to self-regulation, the practice of dental hygiene has evolved over the years.

Cara Tax, Heather Doucette and Shauna Hachey are faculty members at Dalhousie's School of Dental Hygiene. According to Tax, who studied dental hygiene at the University of Manitoba and has been teaching at Dalhousie since 1992, dental hygienists do more than just clean teeth. "We do full periodontal assessments and non-surgical full periodontal therapy.

Shauna Hachey graduated from Dalhousie in 2004. In 2011, she came back to complete the Bachelor of Dental Hygiene program and now teaches at Dal while working part time in a private practice. She also is pursuing a Masters in Health Studies.

She says one of the biggest changes she's seen in the practice of dental hygiene is the ability to provide local anesthetic to her patients.

"For me, working in a periodontal clinic, being able to give my own anesthetic has changed my practice drastically," she says. "It keeps you on time and it keeps your patients comfortable."

Doucette says there has also been a change in the way hygienists practice. For example, there were plenty of jobs in the market when she graduated from Dalhousie in 1994. These days, new hygienists often work more than one job in more than one clinic.

"I think now in order for hygienists to fill their days, that's quite common," says Doucette, who was working with two different dentists a couple of days per week at the end of her practice.

She says the dental hygiene curriculum is changing to meet needs in the job market. For example, students now learn more skills related to managing a business and understanding the market.

But one of the biggest changes has been in the way dental hygienists have practiced, moving to self-regulation

and working independently. When Tax first started practicing in the 1970s, a hygienist had to be under the direct supervision of a dentist. That has gradually changed over the years.

"We truly believed, as a profession, we had the background and the education to provide care to those underserved communities without the direct supervision of a dentist," she says.

Although many dentists initially feared hygienists would open practices en masse, that wasn't the reality. Many independent practices focus on finding patients who need care, such as those in long-term facilities or who are shut in their homes. That, she says, was the real motivation behind self-regulation.

"Dental hygienists are still figuring out the best way to make a living following the changes to the practice," Tax says. "The people doing this are very passionate about providing care for the public and getting to the people who need it."

Reaching out into the community now starts at the school level. Students at Dalhousie's School of Dental Hygiene, for example, work with immigrant populations via a program with the Immigration Services Association of Nova Scotia (ISANS) or the North End Community Health Centre (NEHC).

"It does make a difference in the richness of their education," Doucette says. "It gives them experience with patients who are more difficult cases than those they see in the clinic."

During her studies, Hachey spent time at the former Motherhouse at Mount Saint Vincent University, Stadacona and Camp Hill Veteran's Memorial Hospital, where she now takes her students. She says during these rotations, students often get exposure to a clientele that they normally wouldn't see in the clinic. During her BDH year, she provided hygiene services at the NEHC.



Dental hygiene has gradually changed since the 1970s.

"It was an excellent experience," she says. "An eye-opening experience because, up to that point, I was working downtown... you learn to respect every individual who comes to your chair, regardless of their situation."

The curriculum is now catching up to the need for alternative practices, such as in long-term care facilities and outreach care in the community. That, Tax says, is the future of dental hygiene. "It's coming and it's going to be upon us before we know it."

There is also a focus on prevention in oral health rather than just treatment. It's the hygienists who are on the frontlines of prevention. Students' knowledge is now much more focused on prevention and how overall health and oral health are connected.

"We are the preventive side," Hachey says. "We are educators who teach patients how to prevent disease. That is a huge role in oral health."

"In the end, it's going to save money," adds Tax. "It's a lot less expensive to treat preventively." ★

Dal researchers testing dental decay detection tool

By Suzanne Rent



LEFT: Drs. Ferne Kraglund and Blaine Cleghorn are among the Dalhousie faculty and staff members who will be testing a new early dental decay detection tool.

Starting in the fall, researchers at the Dalhousie's Faculty of Dentistry will test a new dental tool designed to detect early tooth decay.

Dr. Blaine Cleghorn first pitched the idea when he was on the faculty at the University of Manitoba. He was taking part in a brainstorming session with the National Research Council, which was looking for ways to connect with the university community. He suggested a diagnostic tool that would be more accurate in finding caries. "We traditionally use a mirror, explorer, good light, examination and radiographs," Cleghorn says. "They are not as accurate as we'd like them to be."

The tool works with a combination of optical coherence tomography (OCT) and polarized Raman spectroscopy. "Nothing out there right now gives us the sensitivity and the specificity that we would like,"

Cleghorn says. "We believe this is a tool that will help us diagnose dental caries at the earliest, beginning stage. And we want to make sure, on the other side, we are not incorrectly diagnosing caries when they are not there."

The researchers are now recruiting 100 volunteers for the clinical trial. Some of those volunteers will come from the Dalhousie community, including dental students or staff. Volunteers will visit the clinic four times over the one-year period.

The volunteers will represent the age 18-to-30 demographic, the group where caries are most common. "We are looking at diagnosing caries early and also monitoring, if we have larger lesions, whether we can implement some preventive measures and reverse them," Cleghorn says.

Cleghorn, along with Dr. Ferne Kraglund, three faculty dentists and

three faculty hygienists, will be working on the project for the next year. Once the volunteer portion is completed, the data will be evaluated and published. Cleghorn says the tool could be available for commercial use within five years.

The device will be tested against two other commercial devices, as well as against traditional methods of radiographs and visual examination. Patients will also be assessed for their risk for caries.

The tool is a handheld device that is non-invasive and pain-free for the patient. The version being used in the clinical trials is much larger than one that could eventually be sold on the market.

The research is not without its challenges. Cleghorn says it's been difficult trying to put two kinds of spectroscopy into a probe that is not too large. The device was developed and built by a team of researchers at the National Research Council Institute for Biodiagnostics (NRC-IBD) in Winnipeg and NRC Boucherville, led by Dr. Mike Sowa and Dr. Guy Lamouche.

The size of the tool and its ease of use are crucial for success in the commercial market. "[Dentists] love gadgets and tools and we're very technology savvy," Kraglund says. "We love doing anything that is new and fun. It has to be something that is very user-friendly that the patient will easily accept."

Cleghorn says the device would have to be smaller for commercial use. He'd also like to see a simple system of lights that would make using the tool easier for dentists: a green light signifies no caries, yellow indicates an early reversible carious lesion, and red means a carious lesion that needs a restoration.

“The focus should be more on a medical model in which we regard dental caries as a disease process.”

“It has to be efficient in practice, too,” Cleghorn says. “If it takes three hours to use in an examination, it’s a failure right from the get go.”

Cleghorn says during his research he’s learned that in spite of the dental industry being around a long time, there aren’t highly accurate tools available to diagnose caries. This tool could change that. “What we are essentially doing is trying to change dentistry. We are trying to shift from surgical to preventive dentistry,” he says. “By diagnosing caries early, it will be better off for the patient in the end as fewer fillings will be necessary.”

According to Kraglund, this tool could change the curriculum at dentistry schools, with a change in the focus to prevention rather than treatment.

“We are trying to change the mindset of new dentists as well as our faculty and the profession that we should be more prevention-oriented,” she says. “The focus should be more on a medical model in which we regard dental caries as a disease process. This approach involves identifying and managing risk factors of the disease early on through prevention strategies rather than simply filling a hole in a tooth.”

The U.S. National Institutes of Health (NIH)—specifically the National Institute of Dental and Craniofacial Research (NIDCR)—funds the research project. *

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A trip down memory lane

By Jon Bruhm

"The road to success is always under construction." – Arnold Palmer

Long-awaited construction has finally begun in Dalhousie's Dentistry Building. Over the next few years, the current layout will begin to change. The dental clinic will evolve into a group practice model. A state of the art simulation lab will be constructed. Classrooms will be renovated. Needless to say, things will look very different around here in the near future.

This is certainly not the first time the Faculty of Dentistry has undergone a major metamorphosis. The Maritime Dental College (the precursor of the Faculty of Dentistry) first opened its doors in 1908 in the southwest corner of the main floor of Dalhousie's Forrest Building. The Dentistry Building opened in 1958, undergoing a significant expansion in 1982 when the current facilities were constructed.

On the eve of this latest major modernization, there are few people around who can vividly remember fully experiencing the three previous incarnations. One of them, however, has never strayed very far away.

After graduating in 1950, Dr. Edward Spracklin spent four years in private practice in northern New Brunswick before pursuing a specialization in orthodontics at the University of Toronto. He returned to Dalhousie to teach in 1960, and legend has it he seldom left the premises for the next 30 years.

Although he retired from the Faculty more than 20 years ago, we asked "Uncle Ed" to stop by and revisit the dentistry school as he remembered it when he started class in 1946. Now a spry, spirited nonagenarian with a loud baritone voice, his memory remains acute.

"When we were here, dentistry, law and medicine were all in this building," he said, ascending the Forrest's stone

stairwell leading into the main entryway below its trademark four-sided pyramid spire. "It was an old building then, with a lot of wood paneling. I remember it feeling like a home that had dental things thrown in it."

Today, the building houses Dalhousie's Schools of Nursing, Occupational Therapy and Physiotherapy.

He continued through the main doors and headed to the left, peering into an office. This was where his first class was held with 10 other students in a 50-seat theatre that has since been partitioned into offices. Just ahead, he recalled the old dental clinic where he treated his first patient, as well as the business office. Today, it is a large simulation lab for nurses-in-training.

"My chair was right there," he stopped, pointing to a spot in the middle of the room. "My roommate, Ian MacDonald, took a practice mold of my mouth with alginate. He had it mixed too thin, to the consistency of cream. It went in and I had to spit it right out. I remember that well."

He headed up the aged wooden stairwell to the second floor, each step creaking as he ascended. The elevator was not for student use back then, and he was not about to start. At the end of the hallway, he approached a large classroom.

"This was a huge room for all of the dentistry students," he said, pointing at the closed door. "48 of us, or something like that. There were four long benches, one for each class, so all four years could be here together and work at the same time. The technician was in here. He was our real teacher. We called him 'The Boss.' He had his lab at one end and when we made dentures and removable parts, he supervised us."

He returned to the stairwell and



made his way up to the third floor, where the anatomy department's cadaver lab was formerly located. Many outsiders are surprised to hear that, for many years, dentistry students have studied dead bodies in order to gain an understanding of the human body's functionality. Some dentistry students even obtain summer jobs dissecting cadavers to produce specimens for the following year's anatomy class.

"With the cadavers, we worked mainly on the face," Spracklin recalled, peering into the former lab, but quickly backing away as he saw a class in session. Walking back toward the stairwell, he remarked: "They tore this place apart and redid it at the same time they were doing the first dental school. All of our stuff was taken out and stored in here. It's funny—I was never interested in exploring this building before. Now I'm getting a chance."

He then headed down to the basement level, recalling a small break room and canteen run by a local school for the visually impaired. Today, the

brick-adorned area houses nursing offices and a long corridor connecting the Forrest Building with both the Dentistry and Burbidge Buildings, the home of Dalhousie's College of Pharmacy.

He headed to the right toward the Dentistry Building, stopping to peer into a small, glassed-in dental museum featuring historical equipment not unlike what he used when he began practicing on his own in 1950. On the wall, he spotted a diploma parchment that once belonged to one of the Faculty's inaugural graduates from the Class of 1912, Dr. Alden Faulkner.

"Dr. Faulkner was my dentist when I was growing up," he said. "I can remember him mixing amalgam with his hands. He taught at the school and was very pleased when I got into dentistry. He often phoned up my parents and told them how I was doing."

After stopping for a coffee at "Fillings," a small café located just inside the main doors of the Dentistry Building, he headed to the fifth floor with the intention of visiting some old friends in the Dean's Office. On his way down the hall, he stopped in front of one of the class composite photos adorning the hallway, adjusting the angle of the Class of 1950 frame.

"You could fit our whole dental school into half of the top floor of this building," he said, nostalgically. "The dental school has changed. My, how it's changed." ★



Dr. Spracklin, pictured top right, in his Class of 1950 composite photo. The Forrest Building is pictured bottom centre.

This article contains content from a project in which Jon chronicles a year of dentistry school through the experiences of a selection of students. Look for more about this in a future issue of the *Alumni Anchor*.



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CLINIC RENEWAL LAUNCHES NEW ERA OF EXCELLENCE

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FOR MORE THAN A CENTURY,

Dalhousie's Faculty of Dentistry has set the standard for the delivery of oral health education and community outreach programs in North America. Now, the School has embarked on an ambitious clinic renewal that promises to raise the bar on both fronts over the next 100 years.

"Our goal has always been to provide the best possible education for our students and prepare them for practice while delivering comprehensive patient care," says Dr. Blaine Cleghorn, professor and assistant dean with the Faculty of Dentistry.

"We do an excellent job of that now, but through this renewal, we have an opportunity to really build on that with a more focused approach to program delivery and patient care."

Over the next four years, the Faculty will introduce a bold new layout and invest in state-of-the-art equipment, ushering in a new era of excellence in research, education, training and dental care. Perhaps the most exciting change is the decision to break from the traditional clinic format and create four concentrated group practice areas that will reside on the clinic's second level.

"Each one will be a unique entity right down to its own reception area,"

Dr. Cleghorn explains. "These clinics will more accurately simulate a group practice environment by having our dental and hygiene students work together under the close supervision of Group Practice Leaders. That will help make the students' transition from an education setting into the profession more seamless."

Dr. Cleghorn notes that each practice will be overseen by a dedicated team of dentists from the faculty. "They'll have more ownership over each area and greater control over patient care, which is important. The more consistency we have in the supervision of patient care, the better the care we provide will be."

To that end, the second level will also feature a relocated elder care clinic, an upgraded and expanded surgical suite and Graduate clinics in periodontics, surgery and a general practice residency program. "This way, we'll have our most highly trained people all working in close proximity in the event of an emergency."

With the relocation of the elder care clinic, the first level will feature the Discipline and Oral Diagnosis and Screening clinics, classroom facilities and an expanded and upgraded Medical Device Reprocessing (MDR) unit. "We're currently a Class C healthcare facility, and as such, the standards are high. The new MDR will

be a hospital-grade facility." Dr. Cleghorn adds that the Faculty may introduce a student rotation through the facility under very close supervision and with appropriate training.

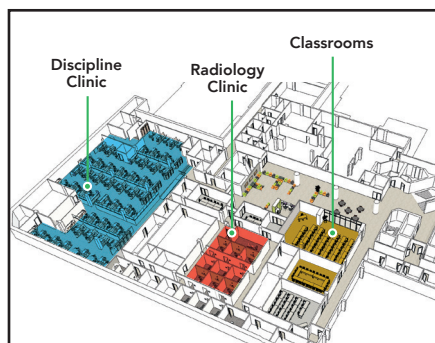
As for the clinic's third level, it will be dedicated to pre-clinical experiences. An expanded Bench lab will take over the current microbiology space, a dedicated Simulation lab – the Faculty's first – will be installed in the existing bench lab space and there will be a new pre-clinical dispensary.

"It's an ideal location because these labs will be in close proximity to each other and, together, they'll give dental and dental hygiene students more opportunities to practice their skills and build confidence with their psychomotor skills before they start seeing real patients."

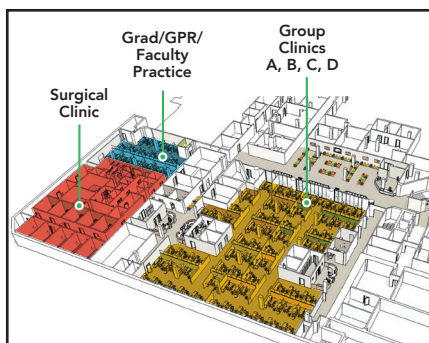
The renewal is scheduled to be completed in August 2019 and Dr. Cleghorn says alumni support for the project has so far been phenomenal. "They're really thrilled to be a part of this and they can't wait to see it completed. With their help, we're keeping pace with rapid changes in technology and teaching, and ensuring that our students are always well prepared for clinical practice."

**FOR MORE INFORMATION ABOUT
THE CLINIC RENEWAL, EMAIL
ALUMNI.DENTISTRY@DAL.CA.**

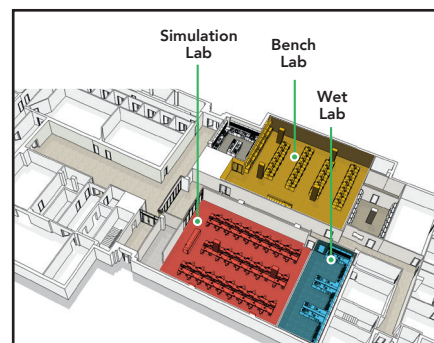
LEVEL ONE



LEVEL TWO



LEVEL THREE



Annual Giving Report

The Faculty of Dentistry is extremely grateful for the generosity of our alumni, friends, and organizations that support our Faculty and Dalhousie University. The following is a list acknowledging those who have made financial contributions between April 2014 and March 2015. We sincerely appreciate your support. We would also like to thank our donors who requested to remain anonymous.

Class participation percentages, based on original class numbers, are listed next to graduating year.

DENTISTRY CLASS GIVING

1941 – 17%

Leonard S. Goldberg

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1953 – 8%

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1959 – 18%

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1960 – 6%

Yosh Kamachi

1961 – 31%

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Roger J. Paturel
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1962 – 14%

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Doug Chaytor

1963 – 29%

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Melvin Brown
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A. John Linfield

1964 – 10%

Joseph E. Grasso

1965 – 35%

Theresa D. Chiang
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Dan Macintosh
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Harold S. Wood
G.S. Zwicker

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W.E. Thompson

1969 – 14%

Joseph P. Elias*
David S. Precious*
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1970 – 17%

James A. Hanson
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Floyd V. Jackson
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1971 – 14%

John S. Christie
Howard W. Horsman
Carl Tilley

1972 – 13%

David Moore
Robert G. Murray
Vincent T. Shannon

1973 – 17%

Thomas V. Disney
Eric G. Easton
Harold F. Johnson
Peter F. Manson

1974 – 14%

Ronald A. Bannerman
Mary M. Hurst
Wayne & Peggy Maillet
David C. Wade

1975 – 16%

Gary R. MacDonald
Marie M. McKnight
Ray Wenn

1976 – 29%

Burton Conrod
Connie Conrod
Anil Joshi

John W. Miller
Paul R. Nauss
Jim Roxborough
C. Terrence Shaw
V. Michael Zed

1977 – 28%

H. Wayne Garland
Barbara B. Harsanyi
J. Gregg Hood
Jim Inglis
Donald C. Lobban
J. Stephen O'Brien
Michael R. Roda
Leigh G. Smith

1978 – 38%

Tom Boran
Thomas H. Boyle
Kwai-Leung H. Chong
Alfred W. Dean
Ian Doyle
Gary M. Foshay
R. Dwight Greene
Brian A. Rinehart
Janet I. Stewart
Richard A. Vickerson

1979 – 19%

Peter Baltzer
Carl F. Canning
Reg Goodday
Brien W. Stackhouse

1980 – 32%

Val Biskupski
Brian S. Budovitch
Richard A. Copeland
Marlene E. Mader
Rory L. McLean
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1981 – 12%

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Lee Erickson
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1982 – 12%

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Archie Morrison
Anne Young

1983 – 30%

Janet Bailey Buckley &
Ronald Buckley
Paul J. Bourque
Robert C. Dunphy
Gary M. Henderson
Douglas & Kathryn
Musseau
Brian H. Smith
Keith D. Snelgrove
Deborah N. Stymiest

1984 – 9%

M. Anne MacDonald
Marjorie L. MacDonald

1985 – 28%

Simone Abbass
Terry Ackles
Tim Chaisson
Terrie Logue
Peter J. MacDonald
Greg & Cheryl MacDonald
Duncan A. McMaster
Daniel M. Tam
Joseph Westhaver

1986 – 25%

Chris Cottle
Judith Flecknell
James Francis
Ursula H. Lozowski
Kenneth Ngan
Chris Petropolis
Donald A. Stewart
Lary Trites
Jeff Williams

1987 – 12%

Eric L. Haley
Dan McKenna
Caroline Pavlin
Thomas H. Raddall III

1988 – 13%

Heather Carr
D. Scott Clark
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J. Peter Thomson
Cheryl A. Wenn

1989 – 32%

Daniel Albert &
Kilby Townshend
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Paul Cameron
Terry Foreman
K. Stacey Hughes
Randall W. Morine
Gordie Rudolph
Tim Silver
Joanne Thomas
Warren Tompkins

1990 – 15%

Claire Karst
Dean Miller
Mark Simon
Kevin Walsh
Mary Ann Wiseman
Ernest R. Wotton

1991 – 15%

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Michelle M. Moller
Carolyn Palmer
Kilby Townshend &
Daniel Albert

1992 – 18%

Jeffrey A. Clark
David V. Craig
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David B. Quigley
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P. Yliheikkila
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1993 – 19%

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J. Scott Green
Pat Redmond
Alan Robinson

1994 – 10%

P.J. Murphy
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Janice E. Wilson

1995 – 3%

Paul Hurley

1996 – 10%

Kelly A. Crawford
Neena Sidhu
Maureen E. Wiseman

1997 – 12%

David A. Clifford
Todd A. Dakin
Nada Haidar
Kelly Hatt

1998 – 18%

Nancy Browne
Natasha Campbell
Jeff Hockley
Kent Orlando
Joel E. Powell

1999 – 3%

Krishna Mahabir

2000 – 9%

Travis Murphy
Jason J. Noel
Michelle Zwicker

2002 – 14%

Sarah L. Feeley Coffin
Julie Labbe
Francis X. MacNeil
Mark Ripley
Sherrie Wills

2003 – 7%

Danny Lawen
Dan MacLellan

2004 – 3%

Natasha Garnett

2005 – 18%

Wade Abbott
Michelle Belliveau
Natalie Brothers
Sandy Crocker
Thora Hunter
Hugo Ruiz
Colette Vallee

2006 – 10%

Vijayanjan
Arumugakadavul
Kostyantyn Bulavintsev
Leila Ebrahimpoor
Jon King
Jillian Moore
Anna M. Shieh
Wasan Taki
Bill Taylor

2007 – 16%

Charanpal Ahluwalia
Susan Bourque
Carolyn De Amicis
S.J. Fitzpatrick
Andrew Halford
Tetyana Lundyak
Karen Martinez

2008 – 7%

Travis Q. & Holly L. McLean
Robyn Ramsay
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2009 – 2%

Nancy Kennedy

2010 – 2%

Gaurav S. Mahar

2011 – 2%

Ian A. MacAskill

2012 – 7%

Melissa Brobst
Ahmad Fayad
Karla Short

*Deceased

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1966 – 11%

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1967 – 17%

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1968 – 9%

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1969 – 30%

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Lynne Grant
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1970 – 8%

Winnie MacDonald

1971 – 17%

Jean V. McGinis
Rose Anne Penney
Suzanne E. Sheaves

1972 – 10%

Anna Marie Jensen
Gorham
Deborah (Turner) Richard

1974 – 6%

M. Pauline Murphy Sutow

1975 – 11%

Rena Demone
Anne V. Dorey

1977 – 6%

Susan Matheson

1978 – 12%

M. Jeannette Laba
Wendy Swinemar Wilkins

1979 – 6%

Barbara McCain
Lois R. McLean

1980 – 11%

Laura R. Copeland
Lori J. Cyca

1981 – 12%

Ann MacDonald Alexander
Norma (MacKinnon)
MacIntyre

1983 – 4%

Donna E. Pascher

1984 – 4%

Shari L. Brennan

1985 – 4%

Kim Haslam
Sylvia M. Van Gogh

1986 – 7%

Michele M. Chioielli
Lesley Des Noyers

1987 – 6%

Vicky Garland
Corinna Recker

1988 – 5%

Cindy Holden
Denise E. Snow

1989 – 3%

Erin E. Panzarasa

1990 – 3%

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1991 – 5%

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1992 – 6%

Joanne M. Clark
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1993 – 3%

Jennifer Bower

1998 – 3%

Sonia Malik

1999 – 3%

Andrea D. McAllister

2001 – 6%

Angela D. Brady
Wendy Stewart

2007 – 3%

Marianne Williams

2009 – 2%

Deanna Way

DENTAL HYGIENE CLASS GIVING – BACHELOR

2010 – 10%

Janet A. Munn

2012 – 3%

Shauna Hachey

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people who have
remembered the Faculty of
Dentistry in their wills:*

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Deborah C. Matthews
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Bruce & Susan Moxley
Rory & Lois McLean
Kenneth C.L. Ngan
David* & Elizabeth
Precious
Thomas H. Raddall II

*Deceased

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Joseph P. Elias, DDS'69
A Lewis Kelland, DDS'54
Vaclava J. Meilus, DDS'60
Debra L. Mitton, DDH'78
David T. O'Connell,
DDS'74
David S. Precious, DDS'69

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donating to the Gifts and
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dentistry/alumni-friends/
give-now.html](http://www.dal.ca/faculty/dentistry/alumni-friends/give-now.html).*

Remembering Dr. Precious

On February 3, 2015, Dr. David S. Precious, CM, Dean Emeritus and Professor of Oral and Maxillofacial Surgery, passed away in Halifax, N.S. at the age of 70.

Dr. Precious arrived at Dalhousie in 1961 from Ottawa, Ontario, enrolling in undergraduate science courses and playing on the varsity football team. He was accepted into the Doctor of Dental Surgery program in 1965, graduated in 1969 and was immediately accepted as the first resident of the University's Master of Science in Oral and Maxillofacial Surgery program, which he completed in 1972.

Shortly thereafter, he returned to Dalhousie to begin his career as an educator, and also had the opportunity to train with his cleft surgery mentor Prof. Jean Delaire in Nantes, France in the early 1980s. He served as Dalhousie's Chair of the Department of Oral and Maxillofacial Sciences from 1985-2004 and was promoted to the rank of Professor in 1987. In 2003, he was appointed Dean of the Faculty of Dentistry, serving a five-year term before being named Dean Emeritus in 2008.

"When the selection committee announced that they had chosen me as Dean, so many people asked me if I was out of my mind and why I would do it," he once said. "Frankly, my experience was remarkable. I just cannot express how kind the senior administration of the University, faculty colleagues and students were to me. It was a totally positive experience and I enjoyed it immensely."

An internationally recognized leader in the field of oral and maxillofacial surgery, Dr. Precious was widely renowned for his humanitarian outreach missions to countries such as Vietnam, Tunisia, Brazil and India. There, he and his team performed free corrective surgery on children with congenital cleft lip and palate, and trained local practitioners to provide treatment themselves.

Over the course of his career, Dr. Precious contributed to hundreds of scholarly journals and publications, and delivered lectures across the globe. In recognition of his achievements, he was honoured as a Fellow of the Royal College of Dentists of Canada, the Academy of Dentistry International, the International College of Dentists, the American College of Dentists, and the Royal College of Surgeons of England.

Dr. Precious received dozens of significant accolades, including the American College of Oral and Maxillofacial Surgeons' Henry Archer Award (2005), the Order of Canada (2007), Dalhousie's A. Gordon Archibald Award (2009), the Canadian Dental Association's Medal of Honour (2011), the Queen Elizabeth II Diamond Jubilee Medal (2012) and honorary degrees from Université Laval (2011) and Dalhousie University (2013). In recognition of his outstanding service to the profession of dentistry, Dalhousie's University Medal in Dentistry (an honour he received himself in 1969) was renamed the Dr. D.S. Precious University Medal in Dentistry in 2012.



Although he received numerous offers and opportunities from universities across the continent, Dr. Precious never genuinely considered leaving his alma mater.

"I really love the atmosphere at Dalhousie and the Maritime way of life," he once said. "I knew that advancing oral and maxillofacial surgery at an academic healthcare centre would require diligence and persistence. My assessment was that the environment here was much more conducive than at any other major university that I've visited in Canada or in the United States. That absolutely cemented in my mind why I wanted to stay at Dalhousie. My father once asked me if I thought I'd stay at Dal and, yeah, I did. I found a home."

Dr. Precious will be greatly missed by his wife, Elizabeth, children Susan and Bruce, and his entire Faculty of Dentistry family. ★



FACULTY OF DENTISTRY

Dentistry Mentorship Program

Supported by



Nova Scotia
Dental
Association

In 2014-15, the Dentistry Mentorship Program facilitated 40+ connections between Dalhousie dentistry students and oral health professionals.

Participating students expressed interest in everything from general practice, specialization, career transition, to the business of dentistry and more.

If you would like to share your knowledge and experience with a Dalhousie dentistry or dental hygiene student, email alumni.dentistry@dal.ca or call **902-494-1674**.

The Faculty of
Dentistry is pleased to
recognize the recipient
of the Dalhousie
Alumni Association's
Volunteerism Award



Dr. Ian Doyle (DDS'78)

Congratulations!

Join us as Dr. Doyle is recognized at
the Dalhousie Alumni Dinner on
October 15, 2015 in Halifax.

Details and ticket information
are available at

www.dal.ca/homecoming

or by calling **902-494-2807**.

Do you know Dalhousie alumni who
deserve to be recognized? Email
alumni.dentistry@dal.ca for details.



2016 OUTSTANDING ALUMNI AWARDS

The Outstanding Alumni Award
is presented, when merited, to
graduates of Dalhousie University's
Faculty of Dentistry who have
made special and/or distinctive
contributions to their community,
profession, or to the Faculty.

For more information and
nomination guidelines, please visit
www.dal.ca/dentistry/alumni,
email alumni.dentistry@dal.ca
or call **902-494-1674**.

Nomination deadline: June 1, 2016

Bachelor of Dental Hygiene students spread smiles at Mount Hope

By *Katie Ciavaglia*

Sometimes we find happiness in the smallest, simplest things. As Katie Miller finished up treatment on her hygiene patient from the Nova Scotia Hospital, she couldn't help notice the joy in his eyes. He was so grateful that someone was taking the time to provide him with oral health care.

Katie Miller completed the Bachelor of Dental Hygiene (BDH) program at Dalhousie Dentistry in 2015 and was one of two students who participated in a weekly rotation at the Nova Scotia Hospital (Mount Hope) as part of her Alternative Practice Settings course.

One of Miller's most memorable patients was a 51-year-old man with Huntington's disease, an aggressive neurodegenerative disease that causes slurred speech and severe involuntary movements of his extremities.

"He was just so happy I was doing this for him, and when I finished treatment he went around showing every single one of the nurses his new shiny white teeth," recalls Miller. "I can't say I have ever had an experience so rewarding. Providing someone dealing with such a tragic and devastating disease a few minutes of happiness meant the world to me."

As part of the Alternative Practice Settings course, students are placed in different facilities to provide oral hygiene treatment to underserved populations. The course gives students a wide range of experiences and helps them learn about diversity and inclusiveness through treating marginalized populations. Students chronicle their experiences in weekly journals and present research presentations on specific cases they have worked on.

Miller and fellow BDH student Kayla Leary were placed at Mount Hope, a psychiatric hospital that sees patients with conditions such as schizophrenia, depression and bipolar disorder. Although they saw over 25 patients during their eight-month rotation, they initially weren't sure how many patients would agree to treatment.



Kayla Leary and Katie Miller

"Kayla and I did not expect such a positive response," says Miller. "We anticipated that dental fear or phobia would be a large barrier to treatment. However, this turned out to be the case in only a few instances."

Many of the patients hadn't seen an oral health professional in years and it was evident to Miller that there was a high demand for their services.

"There are teams of professionals in place at Mount Hope that target physical and mental well-being, but none [aside from BDH students] who target oral health," says Miller. "Medical conditions often require patients to be on medications which, without proper oral hygiene care, place this population at an increased risk for periodontal disease and caries. They need our help to treat existing oral health conditions as well as to be educated on preventive measures."

Although a very rewarding experience, Katie admits that there were definitely some challenges during the eight-month rotation.

"A lot of the patients are medically compromised and have a lot to deal with in terms of their physical and mental health and adding a third component, oral health, can seem overwhelming for a patient," says Miller. "We try to involve the nursing staff in the patient's oral health care as much as possible to mitigate the stress."

Miller cherished her time spent at Mount Hope and would welcome the opportunity to volunteer there down the road.

"I found it to be a fascinating, educational and incredibly rewarding experience and would do it again in a heartbeat." ★

The Utah connection

By Jon Bruhm



Our Utah family photo in 2009.

The vast majority of students throughout Dalhousie Dentistry's 107-year history have hailed from across Atlantic Canada. Small concentrations of students have come from other Canadian provinces, New England and international locales such as Kuwait and Malaysia. However, one of the more unique connections has been the annual pilgrimage of students from the state of Utah.

Since the first two Utahan students—Shad Ingram and Brent Suisse—travelled the nearly 5,000 kilometres between their magnificent mountains and our scenic shorelines in 2001, a total of 25 students from the Beehive State have graduated from the Faculty, with 10 more currently enrolled in the program.

In recognition of the 10th anniversary of Ingram and Suisse's graduation, we decided to look back at how the Utah connection began.

Throughout the 1990s, the Faculty began looking for ways to increase its international enrolment. In 2001, then

Assistant Dean of Students Dr. Don Cunningham decided to take advantage of a website listing service by the American Association of Dental Schools (now the American Dental Education Association). Within a few weeks, he received a call from Ingram, a member of the Weber State University Pre-Dental Club of Ogden, Utah, who inquired on behalf of himself and Suisse.

"His main question was: Are you folks for real?" said Cunningham. "They had no dental school in Utah at the time and he was going to have to go out of state to go to dental school somewhere. We invited them for an interview after seeing their grades and told them we'd love to have them, so they came back in September with their families. They were some of the nicest and hardest working students we ever had go through the program."

"Dalhousie was the only school that seemed to be willing to talk to prospective students and not do the runaround," Ingram recalled. "They told me exactly what to expect and let me

know where I needed to focus more attention. It made the process easy. I was excited because of the small class size, the early clinical experience and the chance to adventure out and explore a new part of the world. Finding that we had a Latter Day Saints temple nearby made it even that much better."

Cunningham and Manager of Academic Affairs Nancy Webb subsequently began travelling to Utah on an annual basis to visit universities and interview prospective students. Since then, the Faculty has had a steady stream of Utah-based applicants each year. Of course, word of mouth has helped as well.

"Brent and Shad fed back to their friends and that just opened all kinds of doors for us," said Cunningham. "We expanded to several other schools, which have bent over backward to make us feel at home and to make sure their students knew we were coming. I think they found it was a win-win situation, and the word has obviously passed down through the ranks over time."

Although both Ingram and Suisse returned home to Utah upon graduation, they look back fondly at their time at the Faculty. They regularly attend the Faculty's annual reception for prospective students and alumni during the Utah recruitment trip. This year's reception will be held at Ingram and Suisse's "other" alma mater, Weber State University, on September 17 where alumni will be invited to share their experiences with potential future Dalhousians.

"It is a great privilege to have pioneered such a wonderful program," said Ingram. "It is hard to believe that it has been 14 years, but it isn't surprising to me that it is still going because I feel that Dalhousie is such a great fit for most of us from Utah. It is a great location for families, the school standards are set high and it is a great work ethic taught throughout the course of study." ★

PETERSEN WINS BIG

In the spring of 2015, Utahan alumnus Dr. Luke Petersen (DDS'10) participated in a Bodybuilding.com competition. Although he did not win the grand prize, he managed to lose 72 pounds and 22 per cent of his body fat over the course of the 12-week competition.

"I'd gotten so out of shape that I knew I needed to do something about it," he said. "My family didn't realize I had that much weight to lose until they saw my pictures. I guess I hid it well."

In addition to enjoying the health benefits, Peterson was voted the People's Choice Award winner and walked away with a \$40,000 prize—which he hopes to use as a down payment on a dental practice.



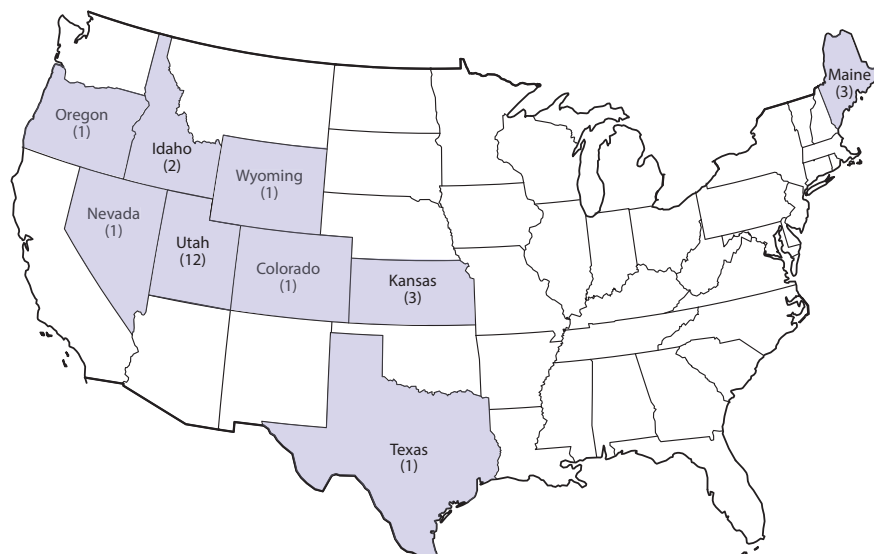
Martha & Shad Ingram (DDS'05) with Tom Austad (DDS'06), Mark Redd (DDS'09), Luke Petersen (DDS'10), and Don (DDS'08) and Karlee Allred at the Utah alumni reception in 2014.



Guests at the Faculty's Utah alumni and prospective student reception in 2014.

WHERE ARE THEY NOW?

According to our records, our 25 Utah alumni are currently located in the following areas:



Dalhousie Dentistry Community Contacts Program

In 2014, the Faculty of Dentistry rolled out a new program to help connect students and recent alumni with established alumni in various parts of Canada and the United States.

The Community Contacts Program is not a job-finding service. Rather, it is an opportunity to help our students and alumni to grow their professional networks. One participant put it best when she said: "It's sort of like LinkedIn for Dalhousie Dentistry and Dental Hygiene students."

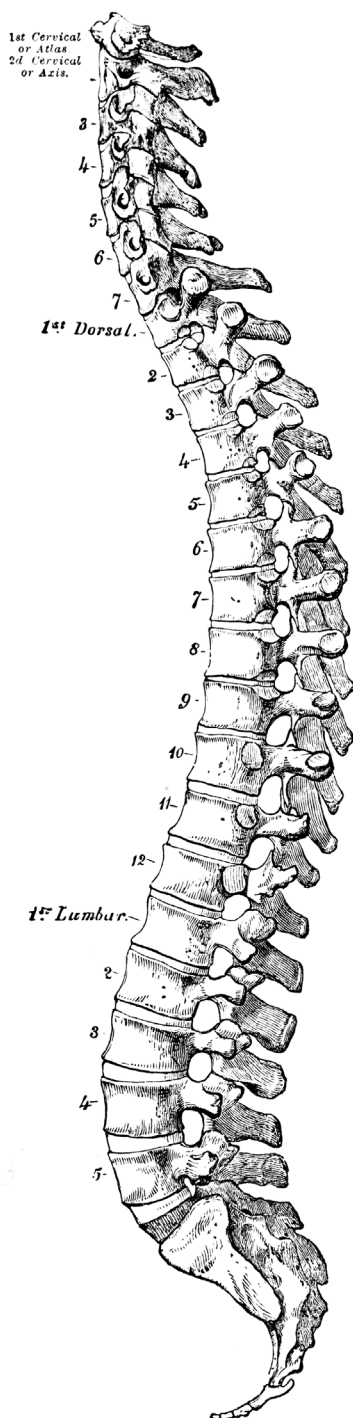


If you are interested in being a part of this initiative, please email alumni.dentistry@dal.ca or call 902-494-1674.

Ergonomics in the clinic makes a difference for students, practitioners

By Suzanne Rent

Fig. 88.—Lateral View of the Spine.



A dental salesman first pointed out to Dr. Linda Cochrane that she might want to check her posture while she worked on patients.

"I was a little bit offended," recalls Cochrane, who retired as an instructor in the Department of Dental Clinical Sciences in 2015. "It's something you don't notice, but it happens."

But after 20 years in practice, Cochrane was having issues with her posture. "I was going regularly to massage therapy to get all these knots out," she says. When she started teaching periodontics at Dalhousie's Faculty of Dentistry, she discovered methods that could help with her posture and her health.

With periodontics, a lot of the work is done with hand instruments. Clinicians are also working on more than one area of the mouth and moving around often. "You should be moving your patient and moving yourself, so you're always in the right position to be ergonomically seated," Cochrane says. "You're eliminating a lot of the strain you'd be getting on your back, arms and even your legs."

She took those methods back to practice. "I thought this was something I could be doing," she says. "And the massage therapist didn't see me anymore."

When Cochrane studied dental hygiene and then dentistry at Dalhousie, she says ergonomics weren't part of the discussion. She recalls one instructor telling students she had a larger glove on her working hand because the muscles were far more developed. "Nowadays, that would be totally frowned upon because students are told not to use just their fingers," she says.

Cochrane says students are now taught from their first days of class how to position themselves and position the patient, so "they can meld together to be in the right position," she says.

"The ones who do sit properly, by the end of the day, they aren't so tired."

Assistant professor in Dental Clinical Sciences, Dr. Cynthia Andrews, who started practicing in 1992 and started teaching at Dalhousie in 2001, recalls having back issues. She also knew colleagues who often received massage or laser therapy or visited a chiropractor. Like Cochrane, she doesn't recall ergonomics as part of the curriculum, but says teaching prevention is key. Students now learn about body positioning and how to operate, depending on the instrument, procedure and even the tooth being worked on.

Andrews says students are also taught about holding their instruments with a modified pen grasp. "They've never held a dental instrument, and so it's analogous to learning to golf," Andrews says. "If you're learning to golf, you don't know how to hold the club, the experts can show you the technically correct way to hold the club, so you don't have the chance to develop bad habits."

The instrument being used makes a difference, too. Most repetitive-stress injuries are caused by using hand instruments, which require more manual labour and exertion compared to electric-powered instruments.

Students are also fitted for dental loupes, which measure the distance between the dentist's eye and fingertip when operating. "That distance has to be perfect with proper ergonomic position," Andrews says.

The issue is also on the students' minds. Andrews says one of her students did a research project on repetitive-stress injuries, which found the incidence of injury and stress was just as frequent among dentists as it is with hygienists.

Ultimately, practicing good ergonomics works for everyone. "If we can prepare the clinicians for the most stress-free experience for them, and still produce the highest-quality product for the patient, then it's a win-win," Andrews says. ★

Student Research Corner

NAME: Shahrzad S. Daneshvar

PROGRAM: Master of Periodontics

TITLE OF RESEARCH: *Success and Survival Rates of Dental Implants Restored at an Undergraduate Dental Clinic: A 13-year Retrospective Study with an Average Follow-up of 5.8 years*

WHAT IS YOUR RESEARCH ABOUT? We asked patients who had their dental implants restored at the Dalhousie undergraduate dental clinics between 1999 and 2012 to complete a questionnaire and to come in for an examination. We examined the implants to see if they were still in place and whether there were any problems with them.

MOST INTERESTING THING YOU'VE LEARNED? The Dalhousie Dental School is very successful in dental implant treatment, placing and restoring. We found that 97 per cent of implants were still in place and patients were very satisfied with them.

Figure 1. Patient satisfaction: Appearance.

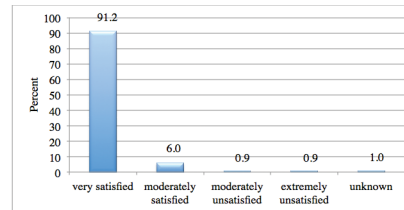


Figure 2. Patient satisfaction: Chewing.

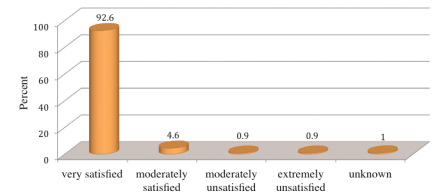


Fig. 3. Implant survival rate.

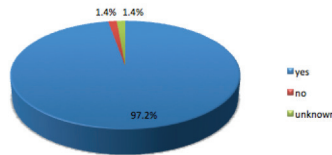
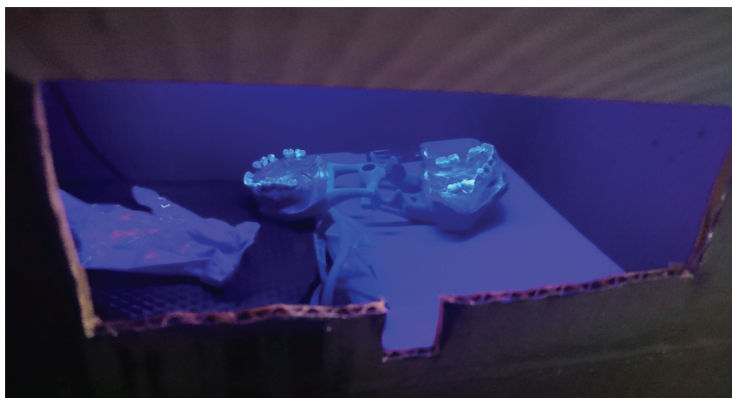
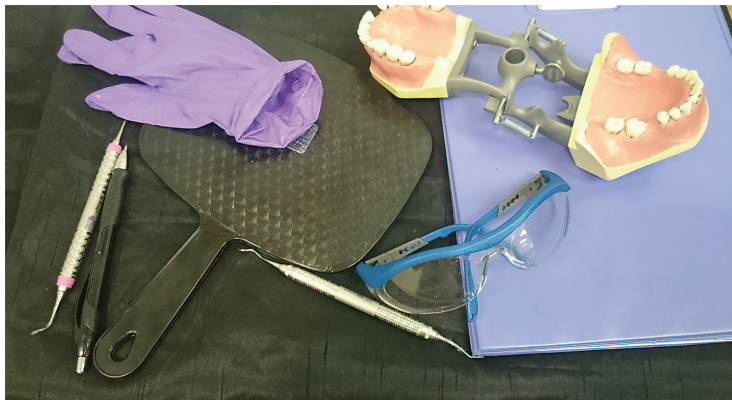
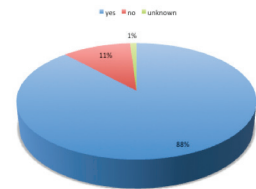


Fig. 4. Implant success rate.



NAME: Amanda Lee and Katie Miller

PROGRAM: Bachelor of Dental Hygiene

TITLE OF RESEARCH: *Assessment of Infection Control Practices and Intervention in Dental Hygiene Students at Dalhousie University*

WHAT WAS YOUR RESEARCH ABOUT? We observed second-year dental hygiene students to see whether they were following proper infection control procedures when treating patients. We also developed a training module and tested to see whether it improved students' infection control adherence.

MOST INTERESTING THING YOU'VE LEARNED? We learned what areas of infection control cause the most problems for students (patient charts) and we developed some suggestions to improve adherence to proper infection control. We also learned how to organize and conduct a randomized control trial study.

NAME: Laura Rose MacDonald

PROGRAM: Doctor of Dental Surgery

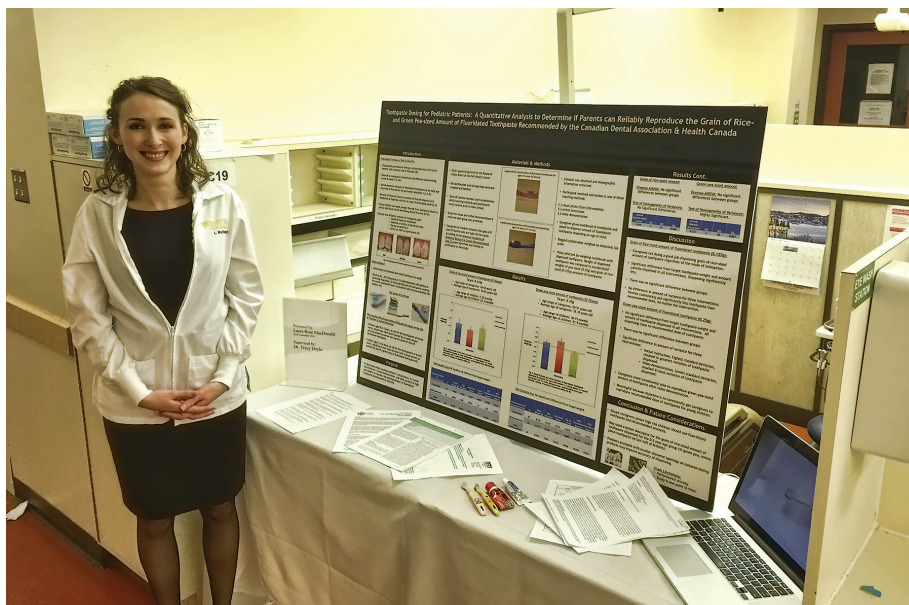
TITLE OF RESEARCH: *Toothpaste Dosing for Pediatric Patients: A Quantitative Analysis to Determine if Parents can Reliably Reproduce the Grain of Rice- and Green Pea-Sized Amount of Fluoridated Toothpaste Recommended by the Canadian Dental Association & Health Canada.*

WHAT WAS YOUR RESEARCH

ABOUT? My research with Dr. Tracy Doyle through the IWK Paediatric Dental Clinic was about finding the best teaching method: video demonstration, verbal instruction or visual photo, to allow parents to most accurately dispense the recommended amount of fluoridated toothpaste for their young children between the ages of zero to three years and three to six years.

MOST INTERESTING THING YOU'VE LEARNED?

The most interesting thing I've learned from this research is that there are a lot of parents who are unaware that if their child is at high risk of developing caries they should be using fluoridated toothpaste. Also, it was interesting to see how many parents did not know about the recommended grain of rice-sized amount of fluoridated toothpaste that should be used for children between the ages of zero to three years, in comparison to the better-known green pea-sized amount of fluoridated toothpaste for children between the ages of three to six years. Parents were more consistently able to reproduce the recommended green pea-sized amount of fluoride toothpaste after watching a video demonstration showing them exactly how much fluoridated toothpaste to dispense on their child's toothbrush. This is important to note for dental practitioners when educating their patients about the appropriate amounts of toothpaste to use for their young children. ★



FUN FACT

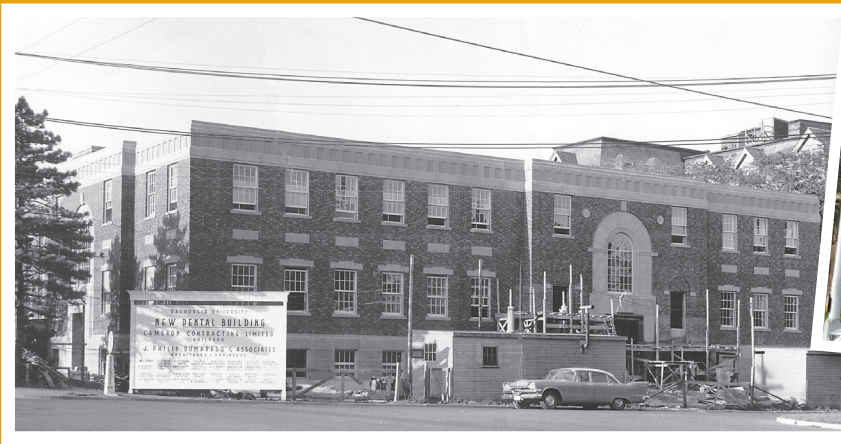
Laura Rose's research was funded by the Dr. Ivor M. Hamilton Summer Research Studentship Fund.



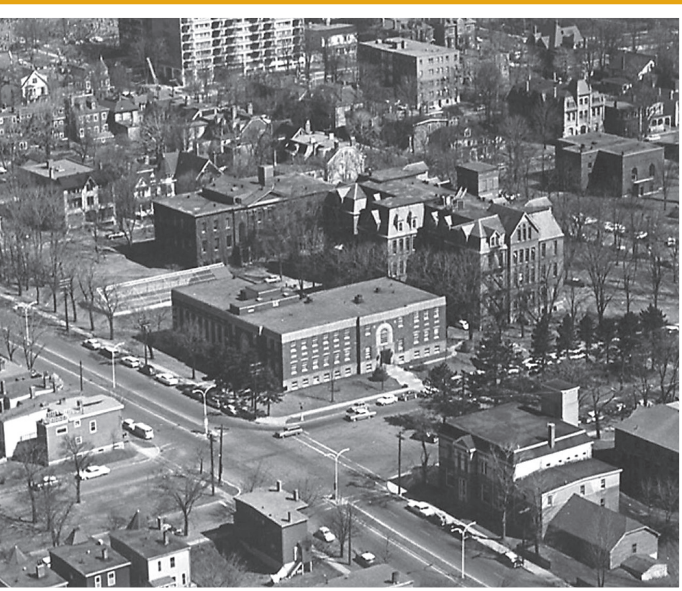
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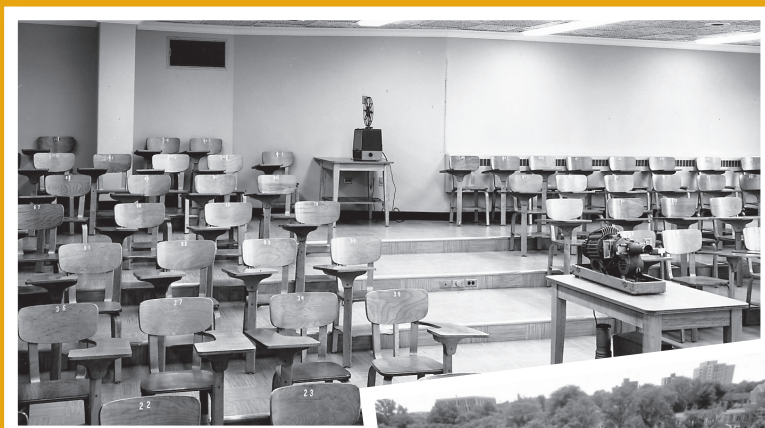
University and Robie Street view, New Dental Building under construction, 1956 and Dentistry Building Clinic Renewal, 2015



Dental Building, 1956, aerial view



State of the art dental clinic, 1956



Well-equipped Dentistry Lecture Theatre, 1960 (now Room 4116)

Construction, 1979



Museum dental chair, 1900



Modern Student Preclinical Lab, 1960



Upcoming Dentistry Alumni events

August 28, 2015

CDA Alumni Reception
St. John's, NL

September 19, 2015

Dr. Harold Brogan Memorial Golf
Classic
Hammonds Plains, NS

October 2, 2015

Dr. John Laba Memorial Dinner
Wolfville, NS

October 15-17, 2015

Dalhousie Homecoming
Halifax, NS

October 16, 2015

JD McLean Lecture
Halifax, NS

October 22, 2015

Dentistry Alumni Lecture Series &
Reception
Charlottetown, PE

November 19, 2015

Dentistry Alumni Lecture Series &
Reception
Toronto, ON

January 16, 2016

Dentistry Winter Ball
Halifax, NS

January 29, 2016

Table Clinics
Halifax, NS

February 15, 2016

Dalhousie Alumni Award Nomination
Deadline

March 18, 2016

PDC Alumni Reception
Vancouver, BC

June 1, 2016

Dentistry Outstanding Alumni Award
Nomination Deadline

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DEAN'S LIST

Congratulations to our alumni, faculty and staff who continue to receive awards and recognition for their work, and contribute to the advancement of the fields of dentistry and dental hygiene. If you have any news or story ideas to share, please submit them to alumni.dentistry@dal.ca.

*Denotes alumni who are also faculty members

ALUMNI

Arwa Al Sayed (PG Perio'90) and **Crawford Bain** (DDS'75) caught up at the 6th United Gulf Week for Oral and Dental Health in Riyadh, Saudi Arabia. Al Sayed is a head of periodontics and dental implant sections at the Prince Sultan Military Medical City, Riyadh. Bain is a professor of periodontology and director of the PG perio programme at Hamdan Bin Mohammed College of Dental Medicine (Mohammed Bin Rashid University) in Dubai, U.A.E.



Marcia Boyd (LLD'12) was appointed to the Member of the Order of Canada in July 2014 for her contributions to the field of dentistry. She

also received the Callahan Memorial Award from the Ohio Dental Association in September 2014.

Heather Carr (DDS'88) received the Nova Scotia Dental Association's Award of Excellence in June 2015.



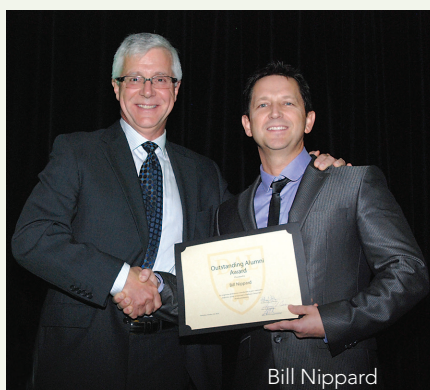
Elaine Gordon Cragg (DDS'69) received a Progress Women of Excellence Award in the field of health and wellness in September 2014.

Sara Gordon (DDS'85) was appointed Associate Dean of Academic Affairs at

the University of Washington's School of Dentistry in Seattle, WA.

William MacInnis (DDS'70) received the CDA Honorary Membership Award in April 2014.

Susan Matheson (DipDH'77) received the CDA Distinguished Service Award in April 2014.



Bill Nippard (DipDH'88) received the Faculty of Dentistry's Outstanding Alumni Award in October 2014.

Jenine Arab O'Malley (DDS'90) received International Cosmetic Accreditation status with the American Academy of Cosmetic Dentistry in May 2015.

Peter Pronych (DDS'68) co-wrote and self-published *Painless Parker: This is my story* in March 2015 through Apple iBooks. The book is based on the life of the pioneer dentist who challenged the dental establishment with flamboyant and blatant advertising. Find an accompanying video, narrated by Pronych, at youtu.be/KBGcQ25QXAs

Fred Ross (DDS'65) received the American Cleft Palate Association's Honours of the Association Award in April 2015.

Steve Saxon (DDS'90) and **Tim Silver** (DDS'89) received the Nova Scotia Dental

Association's Volunteer Award in June 2015.

Marina Sexton (DDS'80) will receive the Faculty of Dentistry's Outstanding Alumni Award in August 2015.

Kevin Walsh (DDS'90) received the Nova Scotia Dental Association's Community Service Award in June 2015.

FACULTY

Daniel Boyd (Applied Oral Sciences), co-founder and Chief Scientific Officer with ABK Biomedical, was awarded a \$2,140,000 Atlantic Innovation Fund investment to support further development and commercialization of new biomaterials that will simplify and enhance the delivery of chemotherapy and radiotherapy for patients.

Blaine Cleghorn (Assistant Dean, Clinics) received the 2014 Canadian Dental Association Distinguished Service Award in April 2015.

***Linda Cochrane** (DipDH'67, DDS'77, Dental Clinical Sciences) received the 2015 WW Wood Award for excellence in dental education in May 2015.



***Shahrzad Daneshvar** (MPeri'15, Dental Clinical Sciences) received the CADR-NCOHR Student Research Award in the Senior Clinical Research Category of the Canadian Association of Dental Research (CADR) and Network for Canadian Oral Health Research (NCOHR) Student Award Competition.

***Ian Doyle** (DDS'78, Dental Clinical Sciences) received the Nova Scotia Dental Association's P.S. Christie Award for outstanding service to the profession in June 2015. He will also receive the Dalhousie Alumni Association's Volunteerism Award in October 2015.

***Lee Erickson** (DDS'81, Dental Clinical Sciences) will be inducted into the International College of Dentists in August 2015.

Mark Filiaggi (Applied Oral Sciences) received the 2014 Ambassador Award from Destination Halifax in the life science category.



Wayne Garland

***Wayne Garland** (DDS'77, Dental Clinical Sciences) received the Dr. Wayne Garland Award from the DDS Class of 2015. This award is presented to a faculty or staff member for outstanding dedication and commitment to providing a quality pre-clinical education.

Jack Gerrow (Professor Emeritus) received an Award of Distinction from the University of Toronto's Faculty of Dentistry in March 2015.

Mark Knechtel (Dental Clinical Sciences) received the Dr. Gorman Doyle Award

from the DDS Class of 2015. This award is presented to the full-time clinical instructor who has contributed the most to student education in clinical dentistry.



Terrie Logue

***Terrie Logue** (DDS'85, Dental Clinical Sciences) received the Outstanding Teacher in Graduate Periodontics Award from the Dalhousie Master of Periodontics Program students in May 2015. She also received the 2015 Skate Canada Section Officials Award from Skate Canada Nova Scotia.

Debora Matthews (Assistant Dean, Research) received the Student Life & Community Improvement Award from the DDS Class of 2015. This new award is presented to the faculty of staff member who has shown an effort to improve the dental school experience inside and/or outside of regular clinical activities.

***Carl McDermott** (DDS'81, Dental Clinical Sciences) received the Part-Time Clinical Instructor Award from the DDS Class of 2015. This award is presented to the part-time clinical instructor who has contributed the most to student education in clinical dentistry.

***Mary McNally** (DDS'92, Dental Clinical Sciences) has been awarded a CIHR Pathways Implementation Research Team Grant. The purpose of the Pathways funding program is to develop a better understanding of how to implement and scale up interventions and programs that address Aboriginal health inequities. The award will fund the project *Tui'kn (Passage) to Oral Health: A community-*

led research partnership to improve oral health in Unama'ki (Cape Breton).

***Rick Raftus** (DDS'86, Dental Clinical Sciences) was appointed to the Dalhousie Alumni Association Board in June 2015, and will represent the Faculty of Dentistry.

***Grahame Usher** (DDS'82, Dental Clinical Sciences) received the CDA Award of Merit in April 2014.

STAFF



Jon Bruhm

Jon Bruhm (Alumni) graduated with his Master of Fine Arts in Creative Nonfiction, a new joint program between Dalhousie and the University of King's College.

Nancy Webb (Academic Affairs) received the Gladys Littler Award in June 2015. This annual award recognizes a staff member who exemplifies a high level of commitment, high standards of performance and outstanding service of the Faculty of Dentistry at Dalhousie University. Nancy also received the Nova Scotia Dental Association's Don Pamentier Friend of Dentistry Award for outstanding service to the dentistry profession by a non-dentist.



Nancy Webb

Photo: Kylie Duncan

7 A's of Dementia

By Dr. Mary McNally (DDS'92)
Associate Professor, Faculty of Dentistry

Over the next 25 years, approximately three per cent of Canadians will be affected by dementia. People with dementia are likely to need assistance in many areas of their care, including oral health.

Some of the behaviours that are associated with dementia have historically been characterized as “challenging.” We often think of dementia patients as being difficult and non-cooperative. However, the more we learn about dementia, the more we are coming to understand that these behaviours actually represent “responses” to the environment and/or to stimuli that people with dementia are experiencing.

In order to provide better care for patients with dementia, it is important to understand that there are characteristic “losses” associated with dementia that go beyond memory loss. One helpful way to consider the way in which people with dementia may be experiencing the world around them is to consider the “7 A's of dementia.” And further, what implications might the 7 A's have when providing care.

The most familiar “A” is **Amnesia** or *loss of memory*. Always introduce yourself and the task you intend to perform. Don't assume familiarity.

Anosognosia is when someone has *no knowledge of their illness or disease*. People with dementia may appear to be angry with caregivers who are trying to provide oral care, not appreciating that they need assistance.

Aphasia refers to *loss of language*. Speaking slowly and providing visual cues to indicate what is about to take place will help to minimize the use

of language, which may be confusing to a patient with dementia. Be consistent and use positive supportive communication through body language and a calm tone of voice. A response of “no” may simply mean that they do not understand.

Agnosia characterizes a *loss of recognition of people, objects and sounds*. A person may no longer recognize you as their dentist nor the environment of a dental office. As a result, they may appear defensive. It is important to put yourself and what you are doing into context for them if at all possible. For example, demonstrate the use of an object such as showing them a toothbrush and model of teeth that may help trigger recognition.

Apraxia refers to *loss of purposeful movement* that may have key implications for someone's ability to perform even the most routine personal oral hygiene. For instance, caregivers must be aware that it is most effective to provide simple instructions—break down and demonstrate each step, initiate tasks such as brushing the teeth and minimize distractions.

Altered Perception refers to loss of accurate visual perception and can manifest *in the way a person walks or sits and misinterprets objects in their environment*. It is likely a key source of resistant responses or behaviours. For example, if a patient will not enter your office, they may be perceiving your welcome mat as a puddle of water or ditch that they don't wish to step into. It is important to orient to the context to the extent possible, minimize distractions and try to understand how altered perception may be resulting in a responsive behaviour from the perspective of the individual.



Apathy is a *loss of initiation* where there is lost motivation to interact or participate. However, if an activity is initiated, a person with dementia will often engage. It is important to maintain engagement through the use of simple explanations and verbal cues.

Everyone experiences dementia differently and there is no set strategy that works for everyone. Here are some general tips for providing oral care to patients with dementia:

- A) Identify yourself and what you plan to do
- B) Use visual and verbal cues, short sentences and simple words
- C) Maintain a calm and quiet atmosphere
- D) Use positive reinforcement like nodding your head or giving thumbs up
- E) Provide care when a care recipient is known to be most content and cooperative
- F) Distract the care recipient by singing or giving them something to hold (like a toothbrush or a facecloth)
- G) Remember that behaviours are likely “responsive” behaviours and not intentionally resistive

Because dentists see many of their patients on a regular and even frequent basis, we may also be in a unique position to identify early changes associated with dementia. It is important to understand what characterizes dementia to know the signs when we see them. For more information, see www.alzheimer.ca/en. ★

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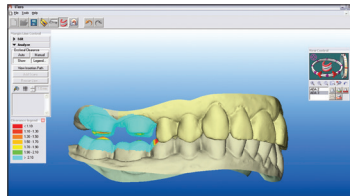
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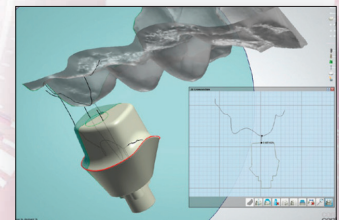
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