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Autumn 2023

MASO Journal

Middle Atlantic Society of Orthodontists



Capitalizing on Emerging Technologies



2023 GLAO/MASO Annual Session
September 21-23, 2023
Gaylord National Resort & Convention Center • National Harbor, Maryland





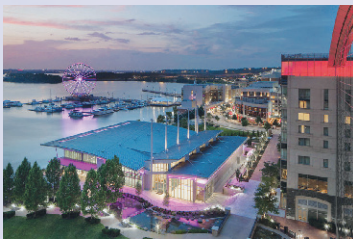
Capitalizing on Emerging Technologies



2023 GLAO/MASO Annual Session

September 21-23, 2023

Gaylord National Resort & Convention Center ■ National Harbor, Maryland



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MASO Journal

Middle Atlantic Society of Orthodontists

Autumn 2023

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The Middle Atlantic Society of Orthodontists, a constituent of the American Association of Orthodontists, shall promote ethical and quality orthodontic care while advocating and providing a voice for our members, components and educational institutions.

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PRESIDENT'S MESSAGE

Dr. David Harmon

Serving as your Middle Atlantic Society of Orthodontists (MASO) President has been a profound honor. We've had a great year so far and would like to finish the year strong.

I wrote about MASO's commitment to prioritizing Diversity and Inclusion early in my tenure. I'm happy that this commitment has remained a focus this year.

We have also added several high-caliber members to our Board and HOD Delegation. Again, our leadership is as diverse as ever and remains a model constituency within the American Association of Orthodontists.

What is very clear is that the success of this organization depends on members like you. MASO needs your participation, and we need your dedication and desire to serve.

Soon my term will expire, and our next leader **Dr. Omid Rajaei** will take the helm of this great organization. I am mindful and confident that members like you will not only continue to support MASO's efforts but will help us carry the torch forward.

If you desire to serve your colleagues, this organization, and this great profession, please step up and let your voice be heard. We would love to hear from you!

Our Spring CE event in March at the Marriott Waterfront Hotel in Baltimore was a great success! We had about 150 doctors and residents from area orthodontic programs in attendance and a great speaker lineup that was well-received.

From September 21 to September 23, MASO will host our Joint Annual Session with GLAO at the Gaylord National Resort and Convention Center in National Harbor, Maryland.

It's an outstanding venue with so much to see and do at the National Harbor complex and nearby in Old Town Alexandria, Virginia, and Washington, D.C. This must-attend event will offer high-quality CE lectures by industry-leading speakers. We are sure you will enjoy this year's session.

So, thank you for your participation and dedication to MASO.

Again, this member-driven organization depends on each one of us to thrive.

I look forward to seeing you all in September! ■



TRUSTEE'S REPORT

Dr. Steven Siegel

The AAO continues to actively advocate on behalf of our members and the public at the federal and local levels. Recently, there were two significant victories on behalf of consumer health and safety as advocated for by the AAO. On Thursday, June 22, Washington, D.C. Attorney General, Brian L. Schwab, announced that SmileDirectClub will be required to release more than 17,000 patients across the United States from onerous provisions in its nondisclosure agreements (NDAs) and change its refund policy for United States patients as part of a settlement resolving a consumer protection lawsuit brought by the Office of Attorney General (OAG) for the District of Columbia.

"SmileDirectClub promised a simple, safe, and affordable way to straighten teeth and touted five-star reviews—but behind the scenes, the company silenced dissatisfied consumers and buried complaints about injuries its products caused. Now, customers will be free to speak out," said AG Schwab.

"Now, because of the effective work of the OAG legal team, SmileDirectClub can no longer use NDAs to silence consumers as a prerequisite for seeking refunds, and thousands of SmileDirectClub customers across the country will be released from gag provisions in agreements they previously signed. This

litigation and settlement sends a clear message to other businesses that using NDAs to silence customer feedback can be an unfair and deceptive trade practice and a violation of DC consumer protection law."

Another AAOPAC release noted that Nevada Governor Joe Lombardo recently signed AB147, Nevada's "modernization of dentistry" bill, into law. AAO landmark teledentistry language was included, thanks to grassroots engagement and policy influence by the AAO Advocacy team, AAO members, and the Nevada State Orthodontic Society (NSOS).

This legislative success in Nevada will be shared with lawmakers in other states as a leading example for protecting patient health and safety when developing teledentistry regulations.

This law makes Nevada the first state in the nation to require **"...an in-person visit before the patient begins using the orthodontic appliance."** The new law also contains other preferred parameters, such as requiring that a patient have a provider telephone number and additional contact information for the doctor supervising their treatment.

AAOPAC is developing Component Advocacy Liaisons (CALs) and AAOPAC Captains for the National Advocacy Network. This will allow AAOPAC to be more proactive and mobilize

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TRUSTEE'S REPORT

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and respond quickly to matters of importance to our members at the local level. Consider supporting our advocacy by contributing to AAOPAC.org.

The Board of Trustees selected **Dr. Enrique Cruz** as our next Trustee at-large, filling the position of **Dr. Dale Anne Featheringham**, who completed her three-year term as Trustee at-large. Dr. Cruz graduated with a dual degree/specialty in Orthodontics and Periodontics from the University of Indiana School of Dentistry. You may know Dr. Cruz as having one of the largest social media followings in orthodontics. His passion for our profession, social media savvy, and longtime AAO advocacy will make him an exceptional addition to the Board. I want to thank Dr. Featheringham, who most recently served as COGA and AAOPAC Co-Board liaison and was invaluable in helping to restructure COGA and AAOPAC to ensure the maximum effectiveness of our advocacy program. I would also like to welcome **Dr. Ken Webb**, our newest elected Trustee from NESO. Dr. Webb recently served on the Committee on Technology and presented at our last AAO Winter meeting.

The Board and senior staff attended a Board Planning Session in Quebec City from June 23 -25. Each year the Board has a planning session to allow the BOT to scan, conduct strategic planning, and discuss a range of global issues that are not part of the regular agenda of ordinary Board meetings. Emphasis is placed on scanning issues that will affect our specialty in the future, with the strategic plan being used as a guide. This year's topics included the Board and social media, Residents and New Orthodontists, AAO Constituents, and the AAO Annual Session. A report on the Board discussion will help guide the Board and staff as we direct our effort to advance the strategic plan. I am pleased to announce that the next Board Planning Session in July 2024 will occur in Baltimore.

The Board will conduct its quarterly meeting on August 18 and 19 at AAO headquarters in St. Louis, MO.

This year I am serving as Secretary/Treasurer of the AAO and MASO Trustee. I chair the Budget and Finance Committee (BFC) in that capacity. In collaboration with our CFO Chris Olden and an outside consultant this past fiscal year, the BFC recommended updating the AAO Reserves Policy. The Board and the House of Delegates approved the proposed new reserves policy. This new policy now defines specific operational and special purpose reserve funds. It will allow the AAO to meet our needs during times of economic stress, as well as maintain physical infrastructure and take advantage of potential opportunities. Our reserves grew during my first seven years on the Board, even though some funds were appropriated for specific programs and projects. This was mainly due to record meeting profit and excellent investment returns. During the two years of the pandemic, the AAO exercised fiscally responsible financial policies while providing much-needed

and valuable programs and support to our members. Wise management, outstanding retention of our members, and the financial aid offered by the Paycheck Protection Program and Employee Retention Tax Credit contributed to the continued financial health of the AAO.

We are now in an inflationary cycle and a depressed financial market. While the last two AAO Annual Sessions continued to be the premier orthodontic meeting events of their respective years, what may be a new post-pandemic normal has affected attendance at our meetings. We may not experience increases in our liquid reserves, now referred to as unrestricted net assets, and may even need to use some of the reserves in the near future. The new reserves policy will allow us to better monitor and make more informed decisions regarding the use of our reserves.

I want to thank our MASO representatives who have completed their service on AAO councils and committees. MASO has been well served by the following volunteer leaders:

Dr. Lara Minahan – Council on Orthodontic Practice (COOP)

Dr. Richa Dutta – Council on Benefits (COB) and the Special Committee on Constituent Collaboration (SCCC). Dr. Dutta will continue to serve as a consultant to COB.

Dr. Luis Toro – Council on Membership, Ethics, and Judicial Concerns (COMEJC)

Dr. Anil Ardeschna – Council on Education (COE)

I am confident that the following new council and committee appointees will do an outstanding job representing MASO and advancing our strategic plan.

Dr. Ty Saini - Council on Membership, Ethics, and Judicial Concerns (COMEJC)

Dr. Madeleine Goodman - Council on Orthodontic Practice (COOP)

Dr. Chris Liang - Council on Benefits (COB)

Dr. Padma Mukherjee - Council on Education (COE)

Dr. Paul Batastini - Special Committee on Constituent Collaboration (SCCC)

Congratulations are in order to our own **Dr. Luis Toro**, nominated by the BOT and elected by the HOD to be the next AAO Speaker of the House of Delegates. His three-year term will begin upon the conclusion of the 2024 HOD meeting in New Orleans.

Dr. Jose Bosio will chair the Council of Scientific Affairs (COSA).

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TRUSTEE'S REPORT

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I commend **Dr. David Harmon**, our MASO President and Special Committee on Inclusion and Engagement (SCIE) representative, for his outstanding leadership and contribution to MASO and the AAO.

It is hard to believe I have completed my seventh year as your Trustee. Last year the House of Delegates approved a change that would reduce the term of a constituent elected Trustee from 10 years to 9 years. This was accomplished by having the President-elect also continue to serve as Trustee. This change affected MASO first and delayed the election of our next Trustee by one year. It is, however, time to think about the selection process since the election will take place at the MASO Annual Session Business Meeting in 2024. I have copied the section from the AAO STANDING RULES/ORDERS policy manual outlining the criteria to be an AAO Trustee.

CRITERIA FOR AN AAO TRUSTEE

Existing Policy Requires

1. A Trustee shall be an active member of this Association of the constituent organization they are elected to represent. Should the status of any Trustee change regarding the preceding qualifications during their term of office, that office shall be declared vacant, and such vacancy shall be filled as hereinafter provided.
2. A Trustee shall be nominated and elected by the constituent organization in accordance with the procedures of such constituent organization.
3. Understands that the Trustee has a fiduciary responsibility to represent the interests of the AAO as a whole over the constituent who elected/appointed the Trustee.

Desired Qualifications

When seeking qualified candidates, the following should be strongly considered by the constituent organizations:

1. That potential Trustees have a demonstrated ability and possess the following basic leadership skills:
 - a. The ability to lead and motivate volunteers; managing is secondary.
 - b. Eight to ten-year horizon in their thinking; should have strategic thinking skills.
 - c. Work within a team setting by looking to the future with a shared vision.
 - d. Ability to inspire and empower both volunteers and staff.
 - e. Build teamwork among peers with different needs and interests.

2. Ability to guide the Association in the future through a shared vision.
3. Understand the difference between “governing” and “managing.”
4. Ability to guide peers from micromanaging to leadership governance.
5. Demonstrated leadership commitment through past or current involvement with orthodontic, dental, and other nonprofit entities, including local community organizations.
6. Relevant expertise in the disciplines of nonprofit management, including branding, fundraising, component/constituent relations, and international and organizational alliances.
7. Possesses sufficient technological expertise, including using social networks, file-sharing programs, email, text, video conferencing, and other electronic communication tools.
8. Supports regular performance feedback by fellow board members and reports of performance to the constituent organization.
9. Understands that the time commitment required includes the following but is not limited to:
 - a. Three meetings per year in St. Louis (two nights, three days in August, November, and February)
 - b. One (1) Board Planning Session held in the summer (three nights, four days)
 - c. Nine (9) days at the AAO Annual Session
 - d. Attendance at the ADA Annual Session (Executive Committee), AAO Winter Conference, Advocacy Conference, and Leadership Conference
 - e. Evening and daytime conference calls as required.
 - f. Subcommittee work using electronic communication tools.
 - g. Attendance at constituent ad interim and fall meetings.
10. Ensure that the views and interests of each party are honestly and accurately communicated between parties.
11. Advocate for the values, intents, interests, and actions of the AAO.

It has been a privilege and a wonderful experience serving as MASO Trustee. The work has been meaningful, and the friendships will last a lifetime. We are fortunate to have many dedicated volunteer leaders within our constituent. I hope some of you will consider running for the position of MASO Trustee to the Board of Trustees. ■



EDITORIAL
Dr. Normand Boucher

Artificial Intelligence and the Orthodontic Profession

Many of us have concluded that AI is the next big thing.

Jeff Hinton, an AI expert, recently sounded an alarm with statements related to the possible extinction of the human race due to AI. He emphasized that it is already widespread in all fields of science and is largely unregulated.

As orthodontists, it would behoove us to understand AI's short- and long-term impact on orthodontics. Significantly, we already have experts trying to unravel this question.

AI is already embedded in the orthodontic space with automatic landmark identification and cephalometric tracing in seconds; diagnosis and treatment planning from an extensive database to make decisions such as when to extract. Recognition AI has been trained to find, outline, and segment teeth on digital models; provide automatic tooth alignment; predict tooth movement; recognize brackets and remove them from digital scans; and help make thermal plastic retainers.

These AI-driven technologies have improved our work life, productivity, and the quality of our outcomes. For better or

worse, it results from large databases of patient information we placed in the hands of large corporate entities.

The leadership of the AAO will be challenged to focus on this issue and help our members better understand the impact of AI on orthodontic education, research, and practice. The AAOF is in a position to support research on AI and ways it can further enhance the practice of orthodontics. A task force on AI charged with developing an action plan directing our orthodontic educators to build expertise in this entirely new field of study is also an option. Shortly, AI content will routinely be part of our continuing education programs.

On a personal note, a close friend who practices law prophesied that AI will have a much more significant impact on his and my profession than we can imagine.

Please note that all articles submitted for this edition of the *MASO Journal* have been proofread with the help of Grammarly. This AI-driven software can improve sentence structure, correct punctuation errors, and as a whole, improve the quality of writing. ■

Editorials represent the opinions of the author(s) and do not necessarily reflect the views of the Middle Atlantic Society of Orthodontists or the American Association of Orthodontists.

WHAT I'M WATCHING



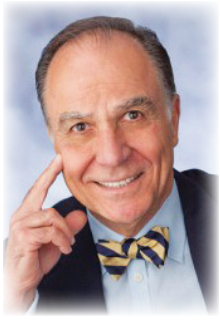
Dr. Francis W. Short
AKA... Whitefish

For most of my adult life, I've viewed fine wine as either pretentious or an overpriced gimmick. However, after watching *Drops of God*, an AppleTV limited series based on a graphic novel that takes place

mainly in France and Tokyo, I've developed a much deeper and more nuanced appreciation of fermented grapes. Despite blind tastings that suggest the democratization of wine, *Drops of God* will excite you with the prospect of

tasting something so delightful that your senses will soar into a crescendo of exaltation. Now, I, too, am a believer. Beyond the magnificent backdrop of exquisite tastes and picturesque sites that wine and vines can provide, you'll enjoy the story of two families and two cultures thrown together for reasons that slowly reveal themselves. So drink, watch, and enjoy. Cheers! ■





Dr. Orhan Tuncay

Norm: Where were you born?

Dr. Tuncay: I was born in Ankara the capital of Turkey. My parents grew up in Istanbul, but my father had moved to Ankara for work. He was one of 40 conseil d'état justices, which is the equivalent of

our Supreme Court. My older brother also studied law and decided on a career in academics.

Norm: What was your childhood like?

Dr. Tuncay: I had a great childhood. I was fortunate that my parents were able to send me to private schools. I went to a bilingual private boys' school. Curriculum was intense – geology, physics, Shakespeare's English, complicated geometry, world history, military education, and many more subjects. I remember in my senior year we had 12 courses all in one semester. Looking back, I appreciate the wisdom of my parents; they never set foot in my school to check up on me. My mother would say, "if you think you're doing fine, we trust you, and we don't have to check up on you. My childhood involved a lot of freedom. My parents would send me to Istanbul to spend the four-month summer holidays with my grandmother, who had a lovely villa by the Bosphorus straight. In a nutshell, I was wet all day long during those summers. We spent our time sailing, fishing, and swimming. Although many of my friends prepared for the next year by reading the curriculum, my mother felt the summer was for relaxation and studies could wait until the fall.

My grandmother was very protective of my brother and me. I found out later, my parents struggled with raising my brother, he was a ball of energy difficult child. When my mother got pregnant with me, my parents debated possibly ending the pregnancy. They consulted my grandmother, who expressed her opinion that it might not be the best choice. Ultimately, my parents elected to go forward with my birth. As a result, my grandmother always felt a responsibility to protect me. As I look back, I felt a sense of total freedom and happiness.

Norm: What led to your decision to pursue a career in dentistry?

Dr. Tuncay: At the time, Turkey, had instigated an aptitude test. If you scored well, you had matched with a desirable field. Although I didn't have any attachment to dentistry but was advised I should consider a career in dentistry. I matriculated in Ankara University school of dentistry. It was a brand-new school at the time. I enrolled in the five-year program immediately after finishing high school.

After graduation, I wasn't sure which direction to take. My parents offered to help set up a private practice, but I decided to buy a one-way ticket to America. I had much admiration for America. I wanted to taste and experience everything America had to offer. To be able to have an extended stay in America, I obtained a student visa to study English even though I already was fully bilingual. I studied at a facility in Washington DC and

very got bored within days. In DC, our biggest entertainment with the friends, was dressing up and crashing the embassy receptions. Back then, security was a non-issue.

One day, a good friend who was a molecular biology researcher at University of Pennsylvania, invited me to visit Philadelphia. We had a conversation about my future, and he suggested that I meet with his dentist at the time, who was Dr. Louis Grossman. I quickly understood that Dr. Grossman was not only a giant in the field of endodontics, but also a wonderful gentleman. Dr. Grossman essentially took me under his wing and introduced me to another legend at the University of Pennsylvania, Dr. Irving Shapiro who was well known in the field of bone. He offered me a position in his research laboratory. At the time we began a study on heavy metals with a focus on the issue of lead poisoning. We designed a study to extract lead from deciduous teeth of children who grew up in West Philadelphia. Surprisingly that study, in 1972, was published in one of science's most prestigious journals, *Nature*. I was hooked. I was going to be a scientist. I was earning \$700 a month. I felt like the richest person in Philadelphia.

The dean of the dental school at the time, Dr. Lester Burkett, hired me as a research associate; essentially a faculty position. I began to meet and develop relationships with other faculty members at the University of Pennsylvania. For instance, Dr. Bob Tisot, a periodontist and restorative dentist, took an interest in my career. He questioned whether I wanted to continue as a basic scientist or move in another direction as a dentist. He suggested orthodontics. I asked Dr. Shapiro if I should consider orthodontics. He offered to contact the chairman of orthodontics Dr. Jim Ackerman. One day, as I was working in my laboratory, Dr. Ackerman came by, introduced himself, and invited me to immediately start the Orthodontic residency program. It happened so suddenly that my immediate response was that I have an obligation to finish the research projects that I've begun here and I would not be ready to start that type of program for at least another year. Dr. Ackerman said that's fine, we will hold your position. Shortly after he left my lab, it hit me: I was just accepted into one of the elite orthodontic programs in the country, and I essentially refused. Fortunately, Dr. Shapiro assured me that Dr. Ackerman was an individual true to his word, and he would honor the invitation to begin the program the subsequent year.

Midway through my residency, the tuition at University Pennsylvania went up and I could not afford it. I concluded that I had to resign from the program. At the end of the day my classmates would come to my apartment for a drink. Over a beer, I let them know this would be our last drinking together. Remarkably, my classmates jumped to help: Dr. Jack Patton and Dr. Bob Boyd, offered to support me through the final year of my program, Dr. Jack Patton paid my tuition and Dr. Bob Boyd gave me a monthly allowance to live on. They literally put through school.

My first position in academia was at the University of Kentucky. It was a new school that had a faculty development program, which taught me the basics of preparing lectures, writing

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TELL ME YOUR STORY

papers, how to run seminars, and the like. As a result, I became a very good teacher as I had learned those skills. As a result, I ultimately became the chairman of that program. I was eventually recruited to chair the Orthodontic department at Temple University.

One of my greatest accomplishments was to start the journals of *Orthodontics and Craniofacial Research* and *Progress in Orthodontics*. Both were recognized as top Impact Factor publications in the world of orthodontics. At Temple, I focused on fundraising and with the help of great faculty and alumni, I raised almost \$3 million at the height of the 2008 financial crisis. We renovated our department. My wife, Agnes, was hired as the architect for the renovation.

Norm: When did you meet Agnes?

Dr. Tuncay: We both lived in a high-rise apartment complex in Society Hill. At the time she was involved with the Philadelphia film society. She did some fundraising. I offered to help her sell tickets for this organization and she invited me to dinner and the rest is history. She has a very successful practice building orthodontic and dental offices all over.

Norm: When did you start your private practice?

Dr. Tuncay: The Dean at the time called me in and indicated that he would reduce my five day schedule to four days a week to let me to practice one day a week to supplement my income. I decided to develop a practice focused on aligner treatment.

I was instrumental in the development of the Invisalign System. It was fun for an academic to see and understand how venture capital organizations function. Later I formed the Align Technology Academic Advisory Board. It led to acceptance of Invisalign by the orthodontic programs. Later, I decided we need to give something to the professor, to profess from. I wrote the first book on Invisalign. It led to many advanced globally.

Norm: How did you become involved with AAOF?

Dr. Tuncay: One day, Dr. Hyun-Duck Nah approached me if I might be interested in serving on the AAOF PARC Committee. When my term came to an end, I joined the Board. It led to my Presidency of the Board. My term came to an end, but I still sit on the AAOF Board of Directors. It is an important organization for the future of orthodontics. I'm proud that since its inception, the Foundation has granted over \$15 million in research aid to orthodontic faculty members.

Norm: What do you see your future?

Dr. Tuncay: When I was younger, I could not register what retirement meant for a person. I interviewed a number of happily and unhappily retired colleagues. They both said: "Don't retire because you are at a certain age or upset with someone. Retire only if you feel it in your heart." So, I am not suited for retirement. These days I enjoy exploring applications of AI and Quantum Mechanics in a number of areas or orthodontics. ■

AWARDS

2023 LIFETIME ACHIEVEMENT AWARD Dr. Richard H Albright Jr.



MASO is pleased to announce **Dr. Richard H. Albright Jr.** as the 2023 Lifetime Achievement Award recipient. Throughout Dr. Albright's distinguished career, he has significantly contributed to his community, patients, and the orthodontic profession. His tireless work and leadership with MASO and the AAO have shaped the thriving orthodontic profession we all enjoy today.

Dr. Albright's story begins in Lancaster County, Pennsylvania, where he was born, raised, and continues to live and practice. At the age of 2, his father was killed in action during WWII, and his mother raised him in the small town of Quarryville. His mother was the first school nurse in southern Lancaster County. She worked hard to care for the children and serviced over 20 one-room schoolhouses in her area. Providing the children of his community with the resources they need to succeed is a legacy Dr. Albright continues today, supporting

youth programs, providing college scholarships, and funding community initiatives through volunteerism and giving.

Dr. Albright's education was fulfilled entirely in Pennsylvania. He graduated from Gettysburg College in 1964 with a bachelor's degree in chemistry. He graduated with highest honors from Temple University School of Dentistry in 1968 with a D.D.S. degree. In 1970 he received his Certificate in Orthodontics from Temple University School of Graduate Orthodontics.

Dr. Albright is a Veteran, having served as Captain in the United States Army from 1970 – 72. After his service, he established his private practice in Lancaster, Pennsylvania. Dr. Albright practices with two of his children; Dr. Kristin Albright Thiry and Dr. Richard H Albright III. Albright and Thiry Orthodontics has grown to 5 locations throughout Lancaster County, Pennsylvania.

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LIFETIME ACHIEVEMENT AWARD

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In 1980, Dr. Albright was the first practicing orthodontist in Lancaster County to achieve the distinction of Diplomate of the America Board of Orthodontists.

Dr. Albright served as Clinical Associate Professor of Orthodontics for Temple University School of Dentistry from 1972 -1979. He was appointed Clinical Professor of Orthodontics in 1990, a position he still holds today. Many of our MASO members have been taught and mentored by Dr. Albright and continue his legacy in the patient care they provide in their practices.

Locally Dr. Albright has been president of the Lancaster County Dental Society, president and delegate to the Pennsylvania State Society of Orthodontists, and president of the Temple University Alumni Association. He has led fundraising efforts for the New Quarryville Library, Albright Family Pool, and the Temple University Graduate Orthodontic Department facility and serves on the AAO Finance Committee. He serves on the AAO finance committee.

He was elected to membership in the North Atlantic Component of the Edward H. Angle Society of Orthodontists. Subsequently, he held the positions of program chair, secretary-treasurer, and president of the Society.

His leadership in MASO began by serving as a Delegate to the AAO. He then served on the MASO Board and ascended to the presidency. He served another eight years as a

Delegate Chair to the AAO House of Delegates, a position his son, Richard Albright III, currently holds.

As chairman of the Council of Communication (COC), Dr. Albright championed the Age 7 early screening campaign. This raised public and dental community awareness of the importance of early screening for severe orthodontic problems. This is one of the AAO's most successful public awareness campaigns.

MASO honored Dr. Albright with the Gerald A. Devlin Award in 2002, and the AAO honored him with the James E. Brophy Distinguished Service Award in 2012.

Dr. Albright enjoys spending time with his wife, Jane, their five children, and 17 grandchildren.

Having spent part of his childhood on a farm near Quarryville, Dr. Albright has always been interested in the preservation of family farming in Lancaster County. When he is not on his family farm, his favorite activities include outdoor sports, exercise, golf, and hunting.

A dedication to his patients, a lifetime of service, and a true passion for the orthodontic profession have earned Dr. Albright the MASO Lifetime Achievement Award for 2023. Congratulations on an honor well deserved.

This year's Lifetime Achievement Award will be presented to Dr. Richard Albright Jr. on Friday, September 22, during the MASO Membership/Business Meeting from 4:30 – 5:30 PM during the 2023 GLAO-MASO Annual Session at the Gaylord National Resort in National Harbor, Maryland. ■

2023 GERARD A. DEVLIN AWARD Dr. Douglas S. Harte



In the late 1970s and '80s, a young **Douglas Harte** was into everything – fencing team captain, bridge club, a sharpshooter in riflery, ultimate Frisbee club, head photographer for the school newspaper and yearbook, a classical pianist who performed at Carnegie Hall, student council representative, Lions Club service organization, an orthodontic lab

technician for his father Larry, emergency room volunteer at St. Barnabas Medical Center. Studying growth and development under Wilton Krogman left a favorable impression on him as he considered his future.

Surrounded by a family of orthodontists and dentists – his father, his grandfather, his grandfather's brother and

uncle, his father's first cousin, and his three nephews – it's no wonder when Doug went to Boston University College of Liberal Arts that his major was biology with the intent to enroll in dental school at the University of Pennsylvania. In the meantime, his love of the water and the wind and his exceptional sailing skills landed him on the varsity collegiate sailing team at Boston University and the United States Pre-Olympic qualifying in Sailing. Ultimately, his loss to sailing was Orthodontics gain.

Congratulations to Dr. Douglas S. Harte, recipient of the 2023 Gerard A. Devlin Award from MASO. The Devlin Award, MASO's highest recognition, is presented annually to one of its members in

CONTINUED ON PAGE 9

GERALD A. DEVLIN AWARD

CONTINUED FROM PAGE 8

recognition of their outstanding contributions to MASO and the specialty of orthodontics.

Doug attended the University of Pennsylvania School of Dental Medicine and received a DMD degree in 1988. He completed externships at Lancaster Cleft Palate Clinic, the Children's Hospital in Pennsylvania, and the Veteran's Administration of Philadelphia. He conducted research under Dr. S. Gary Cohen at HUP and was vice president of the Penn Chapter of the Alpha Omega Dental Fraternity.

He completed a general practice residency and TMD Research Fellowship at Orange Memorial Hospital and received a certificate in orthodontics from Penn in 1991. He has been on the teaching faculty for the last 15 years at the University of Pennsylvania, Department of Orthodontics.

As a member of the American Association of Orthodontists, Doug is a past chair of the Council on Government Affairs; he represents MASO on the AAOPAC and is a MASO Delegate to the House of Delegates.

His 30 years of service to MASO includes being Director, President, Delegate to the HOD, annual session chairman, and speaker, and he is a past winner of the MASO Cup for Golfing Excellence.

He is a member of the American Dental Association and past speaker on TMJ Appliances and Custom Mouth Guards

at the ADA annual scientific session, the New Jersey Dental Association, where he was vice-chair of the State Council on Young Dentists, the Essex County Dental Society, where he is a past president, chairman of Children's Dental Health Month, and on the Board of Governors for the Educational Foundation.

Other memberships include the New Jersey Association of Orthodontists; Tri-County Dental Society; Alpha Omega Dental Fraternity; American Cleft Palate Association; Academy of Sports Dentistry; and the Tweed Society of Orthodontics.

In his community, Doug has been the founder and basketball director for the local Y, a community soccer and baseball coach, on the educational board of Temple Beth Shalom, organizer of the Children's Dental Health Month Program to over 3000 kids per year, and an undergraduate interviewer for the University of Pennsylvania.

Doug is a fifth-generation dentist with two thriving practices in Northern New Jersey, Sparta, and Livingston. His kids are his pride and joy. Daughter Haleigh, a sophomore at The Ohio State University majoring in microbiology, focuses on dentistry as a possible career and would become the sixth-generation dentist/orthodontist in the Harte family. Son Alex recently graduated from Boston University Questrom School of Business, working for Wells Fargo in Investment Banking. Having just celebrated their 25th wedding anniversary, Doug is happily married to Ronni Sue Harte.

What will the next 25 years hold for Douglas Harte? Best prediction – more of the same. ■

2023 WILLIAM S. KRESS RESIDENT RESEARCH AWARD

Dr. Jeremy Dock



Dr. Jeremy Dock is the recipient of the 2023 William S. Kress Research Award for the most outstanding Research Thesis by a graduate resident within MASO's geographical area, as juried by the MASO Education/Research Committee. His thesis is entitled "Three-dimensional Assessment of Virtual Clear Aligner Attachment Removal: A Prospective Clinical Study."

He will receive a \$1,000 check and an award plaque. The Award will be presented during the MASO Membership/Business meeting at the GLAO-MASO Annual Session,

September 21-23, 2023, at the Gaylord National Resort, National Harbor, Maryland.

Dr. Dock obtained his Bachelor of Science in Medical Laboratory Science from the University of Cincinnati and his Doctor of Dental Medicine (DMD) from the University of Louisville School of Dentistry. He recently completed his Master's degree and orthodontic training at the University of Maryland School of Dentistry. He has returned to Cincinnati, Ohio, where he practices alongside his childhood orthodontists.

Congratulations, Dr. Dock! ■

Join Us at the GLAO-MASO Annual Session

September 21 – 23, 2023

Gaylord National Resort & Convention Center, National Harbor, Maryland

“Capitalizing on Emerging Technologies”

A joint Annual Session with GLAO and MASO is being held September 21-23 at the Gaylord National Resort & Convention Center in National Harbor, Maryland. The theme is *“Capitalizing on Emerging Technologies.”*

The meeting starts Thursday with Board of Director meetings for MASO and GLAO, followed by the annual Golf Outing at noon at the Country Club of Woodmore in Mitchellville, Maryland. Spaces are limited, so reserve your spot early by registering for the meeting and selecting the golf outing under Activities. (https://aom.formstack.com/forms/2023_glao_maso_annualsession).

Those who arrive early at the Gaylord can enjoy many family-friendly activities and convenient access to National Harbor, Maryland’s dining, shopping, and entertainment. Take a water taxi, or sign up for a tour through the concierge desk at the Gaylord. Uber to the MGM Grand and check out the casino. Spend the day exploring National Harbor before sessions begin Friday and Saturday.

The annual fun run/Walk is Thursday afternoon from 4:00 - 5:00 PM, along the Harbor.

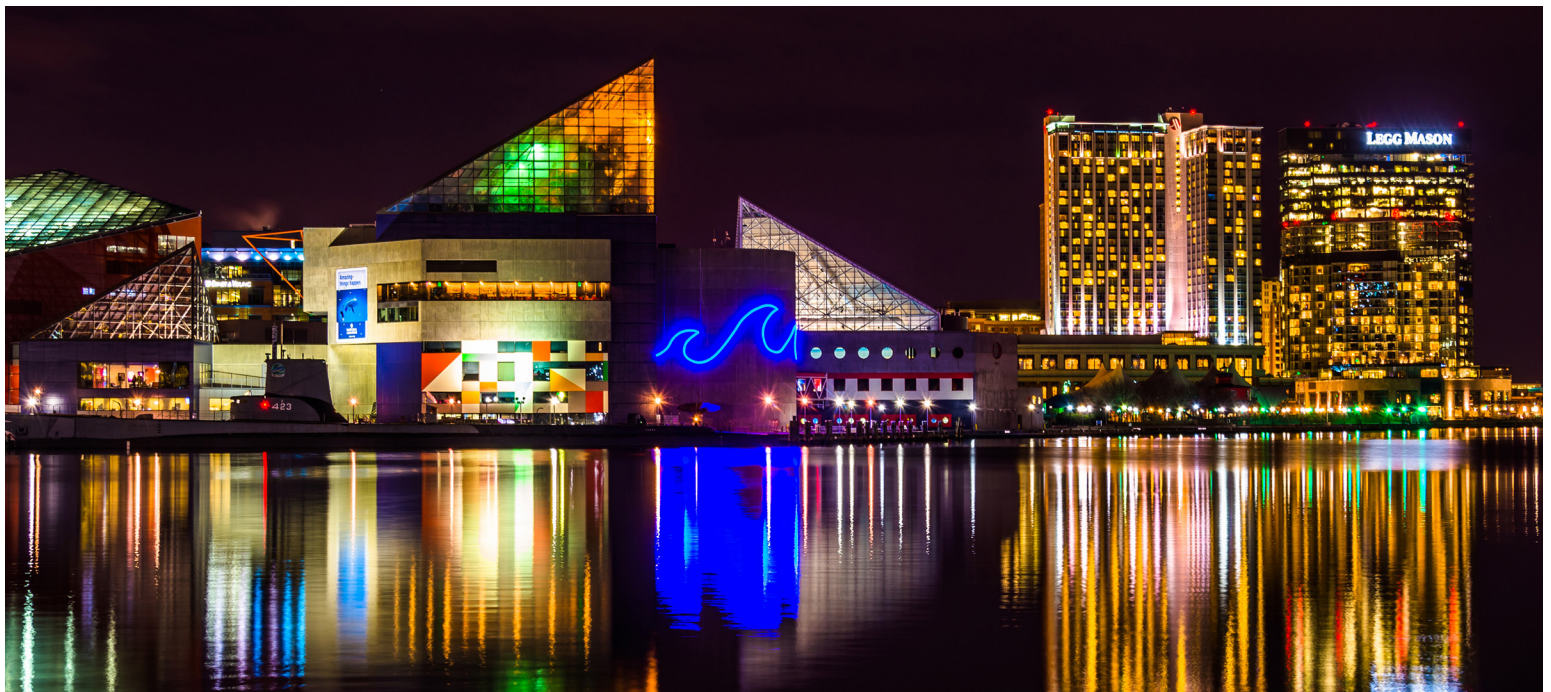
After an AAO-sponsored breakfast, sessions, exhibits, and the Annual Business meetings on Friday, there is “A Taste of Maryland

and DC reception for all in the lower atrium of the Gaylord. For the complete program, hotel, and meeting registration information, visit the MASO website at www.MASO.org.

There are special events for residents at the meeting. A Residents’ Forum on Friday is being coordinated collaboratively by residents from Case Western Reserve University and the University of Maryland. This joint meeting will allow residents to engage with residents from both the GLAO and the MASO regions. Then Friday evening, a resident reception is planned to immediately follow the GLAO and MASO Member Business Meetings. This reception, hosted by the AAO Government Affairs/Advocacy team, will provide residents with information, education, and resources.

Saturday morning there are more sessions and exhibits, and the meeting ends at 2:00

MASO committee members are **Dr. Dave Harmon**, President/Program Co-Chair; **Dr. Paul Batastini**, Sponsorship Co-Chair; and **Dr. Padma Mukherjee**, Scientific Program/Speaker Co-Chair. GLAO committee members include Dr. Marty Palomo, President/Program Co-Chair; Dr. Tasha Hall, Sponsorship Co-Chair; and Dr. Fatima Ahmed, Scientific Program/Speaker Co-Chair. ■



2023 MASO Spring CE and Ad Interim Meeting

The Spring CE was held at the Baltimore Marriott Waterfront on the Harbor East on Friday, March 3. The meeting, organized by President Dave Harmon, was attended by 140 doctors, residents and staff who came to hear speakers: **Dr. Neal Kravitz**, on “Surgical Pearls” and “Professional Growth and Accountability”; **Dr. Jose Bosio**, on “The Reason We Struggle to Keep Open Bite Cases Closed” and “Interproximal Enamel Reduction – When the ‘Saw’ Meets the Crystal”; and **Dr. Grant Coleman**, who lectured on “Efficient Management of Impactions with the Isoglide Eruption Spring.” Six hours of CE credit were awarded to attendees.

Some of the comments from the program evaluations: *Amazing lectures. Nice venue that worked surprisingly well and*

felt intimate; Excellent meeting. Best MASO meeting I’ve been to in a long time. They should all be this good!; Great Program - thank you - makes me proud to be an orthodontist, love seeing all the young people and the residents and thanks for getting them involved.

Friday evening the MASO Board of Directors, the MASO Delegates and AAO Council Representatives from MASO gathered for dinner at The Oceanaire Seafood Room prior to meeting on Saturday for the Ad Interim Board and Delegate meetings. The meetings started at 8:00 AM and adjourned by 2:30 PM. Thank you to the many volunteers who give of their time to tend to the governance of MASO! ■



AAO Leadership Development Conference

The Leadership Development Conference was held on January 26 at the Caesar's Palace in Las Vegas, NV, before the AAO Winter Conference. The MASO delegation included: **Drs. Dave Harmon, Omid Rajaei, Anil Ardeschna, NJ; Natasha Bharucha, MD; Brittney Franklin, PA; Ilana Ickow, MD; Cassandra Kahn, NJ; Chenshuang Li, NJ; Kristi Morris, DC; Sidalia Reed, DC; Eric Torres Perez, PR; Katie Garrett-McCormack, MD; and David Greene, MD.**

The daylong event included an AAO Advocacy update, custom-developed learning opportunities, AAO small group discussions, and networking. The conference was designed to give each participant a high-level AAO experience that will provide the information and opportunity to connect with leadership and learn how to become more involved with the AAO while connecting with peers from across the country. ■



Healthy Lifestyle for Orthodontic Professionals: Ensuring Fitness for a Successful Career



Dr. Sam Kadan

Orthodontics affords us a great life-style. No middle of the night emergencies, no on-call schedules, mainly three-day weekends, and we are primarily working with people who are healthy and want to better themselves.

On the other hand, the demands of the profession can be mentally and physically exhausting, making it critical to adopt practices that promote fitness and overall well-being. Therefore, prioritizing personal well-being and maintaining a healthy lifestyle is necessary.

To that end, healthy components of a healthy lifestyle emphasize:


Adequate sleep: Getting enough sleep is vital for overall health and well-being. It is essential to schedule a sleep routine and stick to it. Orthodontists should schedule 7-8 hours of quality sleep each night. Creating a conducive environment and following a sleep routine can improve energy levels, concentration, and productivity.

Exercise: Regular exercise has been shown to improve physical and mental function. It promotes health at the cellular level and prolongs the process and independence in old age. Allocating at least 30 minutes daily for exercise can reduce stress, improve function, and enhance overall productivity. Some studies show delayed aging with regular exercise. Activities such as Tennis, Running, or brisk walking should be scheduled a few times a week. Strength training is also essential for maintaining muscle mass and should be combined with cardiovascular exercise. Keeping a

solid muscle core will prevent lower back injuries, given the long periods of repetitive posture we sustain while working on patients.

Diet and weight control: A healthy diet rich in fresh vegetables and salad and a good amount of lean protein and whole grains is recommended. Adequate hydration is also vital to maintain optimal physical and mental performance. A healthy diet has been shown to control weight and delay the onset of diabetes and hypertension. Most Americans are overweight. Keeping the weight down by eating a balanced diet, exercising regularly, reducing stress, and maintaining a sleep schedule will help extend our work life and independence in our old age.

Stress management: The orthodontic profession can be demanding, leading to high-stress levels. Exercise helps and alleviates stress. Effective stress management techniques, such as mindfulness meditation, deep breathing exercises, and engaging in hobbies or activities outside of work, can help reduce stress levels and promote work-life balance. Meditation, yoga, and Tai Chi help reduce anxiety and stress and improve body function. Yoga improves posture, which is necessary given our profession's high incidence of lower back and neck issues and the hunched-over postures we maintain working on patients all day.

 Proper ergonomics can help minimize the risk of injuries. Investing in ergonomic chairs and adjustable equipment and taking frequent breaks to stretch can help prevent discomfort and maintain good posture.

Blocking time for activities that promote well-being is essential to getting these activities done. It is a question of priorities. ■



Dr. John L. Hayes discusses the influence of the Carolina Research papers on one- or two-phase orthodontic treatment.

Was the Carolina randomized clinical trial (RCT) of 1998 “science” or “biased opinion”?

The primary conclusion of the Carolina Research follows¹⁻³:

“We conclude that, for children with moderate to severe CL II problems, early treatment [a phase 1 of care] followed by later comprehensive treatment [a second phase of care] on average does not produce major differences in jaw relationship or dental occlusion [than waiting to start later—with 1 phase of care].”²

Given some passage of time, the research conclusion morphed into “all early treatment is a waste of time and money,” and some folks were stirred up enough to call for those who practiced “early treatment” to be shunned—sanctioned—and deprived of insurance coverage.

The research was touted as an actual randomized clinical trial (RCT) from the podium with the reliability and power of a true RCT—“...the first ever RCT for orthodontic CL II research.”⁴

When a true RCT has been accomplished — with a successful intervention — it is the most robust evidence for “science”; (referring to a medical RCT.)⁵ Some orthodontic research, although not meeting the requirements of a true RCT, has been referred to as “RCT research.” Scientists know that just because something is called an RCT does not make it so.

It should be fair to say that the Carolina Research conclusions influenced orthodontic diagnosis, treatment planning, and delivery of orthodontic care more than any such research before or since — and not in a good way, in the opinion of many. For the last quarter-century, the influence of these papers has been immeasurable—reaching beyond orthodontics.

The conclusion of the referenced research was suspect from the outset because the research design and implementation were not consistent with a true RCT.^{5,6,7,8}

An early misstep with the Carolina Research^{1,2,3} is evident from the primary research design: A CL II malocclusion is *not a diagnosis but a symptom of some diagnosis*. The research, as designed, evaluated *CL II symptoms* inappropriately using an RCT as a kind of “umbrella.” RCTs are supposed to be used to assess the efficacy of a treatment regimen addressed against an *etiology*. And *symptoms* are not *etiologies*.

Addressing etiology is part of a “new” phase 1 regimen launched in the early 1990s and later published.⁹⁻¹⁵ It is reasonable to consider a CL II, at least partially, a symptom of “maxillary transverse deficiency” (a strong etiology/prognostic theory... holding for decades now).

A prognostic factor (etiology) for some malocclusions has been identified and tested for decades (successfully passed a

pilot study followed by several thousand successful cases over decades of care in office). Numerous airway studies illustrate an orthodontist’s critical role in phase 1 care for airway-related maladies.^{11,13}

In cases where the maxilla is too narrow about the mandibular skeletal transverse width, the mandible is caused to fit in a CL II retro position during growth. It is well known that phase 1 care can improve the transverse by way of (nonsurgical) skeletal RPE expansion to create room enough for the mandible to grow anteriorly—given average growth potential and an early enough start (usually with help from an indexed Hawley of some type).

The Carolina Research did not investigate, measure, or treat the deficient maxillary skeletal transverse dimensions present with its CL II patients. The transverse dimension differential (maxillary transverse dimension as it relates to the mandibular transverse) is a “confounding variable.” In this instance, it is also a “prognostic factor,” as mentioned previously.⁶⁻⁸

An RCT requires that an etiology be identified and tested with an intervention (and compared with an untested and matched control group) – if the intervention is effective – success!

A mildly maxillary transverse deficient patient would be expected to respond to a good regimen better than a severely deficient patient. The Carolina study had yet to learn which patients were which in the transverse skeletal arena (no handle on the prognostic factor), and thus, the data was muddled with biased results.

More biases: there are six varieties of CL II malocclusions, with possibly six different regimens to best treat each diagnosis¹⁸; given that the patients were then treated in the Carolina study without regard to their specific CL II diagnosis, it would ensure some were treated less appropriately than others — introducing unwanted biases.

We do not believe that anything was done intentionally to present false information by the authors—they may have thought that they were accomplishing an actual RCT. Thus, their misinformation may have resulted from unfamiliarity with the medical RCT design requirements. That does not excuse those relied upon in the peer review process.

Unfortunately, the 1998 Carolina Research did not meet the basic minimum standards to be called a true RCT — which it was touted to do.⁴ Accordingly, the conclusion did not reach

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the “evidential” or “science” level as promoted. At best, it was a biased opinion piece—at worst; it was detrimental to the delivery of orthodontic care. Carolina Research only met one of the 11 RCT characteristics evaluated (prospective design).

The first part of the two-part Carolina research was applying phase 1 care to one group while holding in abeyance a group to be treated later in one phase for eventual comparison.¹⁻³ It has been argued that the phase 1 methodology employed was a setup to place the worst foot forward and did not evaluate some of the most promising CL II regimens available (such as maxillary expansion). The Carolina Research did evaluate both HG and Bionator. However, it should be reasonable to assume that the effectiveness of those regimens was effectively crippled because of the lack of adjunctive help from maxillary expansion.

If the mandible is desired to grow into its CL I potential, the maxillary skeletal width must be wide enough to accommodate the mandible in a CL I posture. After reducing any maxillary transverse deficiency, an indexed Hawley (causing a decrease of untoward pressure on the condyles) can help the mandible of a young patient to grow into the desired CL I posture.^{14,19}

Some have seen the 1998 study’s conclusion as a detriment to young patients, possibly missing out on some lifelong advantages. Some have also seen the study as a detriment to our colleagues—the oral surgeons—whose patients may have experienced unexpected surgical relapse potentially caused by later orthodontic care featuring some *dental* expansion in pre-surgical dental alignments--(as opposed to stable *skeletal* expansion).

There is no doubt that CL II correction is essential. A fair question: how successful are late treatment and non-surgical CL II care? Successful case reports may be out there. One so-called success report revealed several cases that a reasonable person would likely consider failures—there may be long-term stability problems with late CL II care.²⁰ It is reasonable to assume that had the Carolina cases been followed over time, even more, one-phase care patients would have experienced relapse failures due to etiology not being treated.

When to start treatment. The orthodontist’s core beliefs influence a parent’s preference (with either early intervention or later orthodontic care). Trust in the family dentist and advice from an orthodontist can help tip the scale in one direction.

To be clear-- both “later treatment” and “early intervention” are not supported by “science” (by way of a true RCT, which has unattainable feasibility requirements). Good case studies have the potential for valid information when searching for a successful treatment regimen. (Fig. 4)

Many believe there is more than enough excellent case study support for the new phase 1 regimen previously discussed. The new early treatment regimen has also shown promise over decades with long-term stability and lifelong improved health for a growing child and beyond.⁹⁻¹⁵

Phase I Case Studies

Cases 1-5 are examples of phase 1 –no braces treatment with no phase 2 of care. It seems remarkable that some cases with the new phase 1 regimen appear as if they just had their braces removed. Equally surprising is the extraordinary stability demonstrated over time—although watch out for unaddressed wisdom teeth. A lower lingual holding arch for the mandible is also used to help prevent loss of leeway space as time passes. When two (or more) RPEs are used, a “rest” period- in between (of usually five weeks-time duration) is used before restarting with the next RPE. This allows the posterior molar abutments time to relax back to their initial inclinations—avoiding untoward change to the thin buccal plates. Mandibular CAC +5 mm = Maxillary CAC. Case # 6 started with phase 1; later, a phase 2 with braces was necessary.

The new phase 1 regimen is outlined in References #s 11, 13-15. Unlike old phase 1 regimens, this new regimen requires the determination of the maxillary skeletal transverse deficiency in mm that is determined by a new measurement technique (using a caliper) and is not based on dental landmarks. The mandibular skeletal arch is similarly measured.

A transverse differential goal is then applied to determine the amount of RPE expansion needed—no guesswork is necessary. It has been discovered and tested through the scientific method, pilot study, a 10-year “phase 1 only” study, and thousands of cases over 30 years.

If the steps are followed, it is a safe and effective regimen. If a patient is young enough, there will be less work later in phase 2—and it also happens occasionally that a phase 2 may not be necessary.

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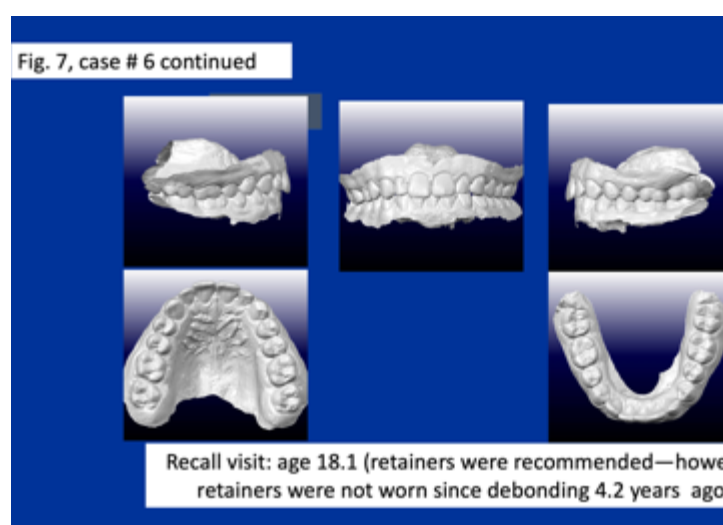
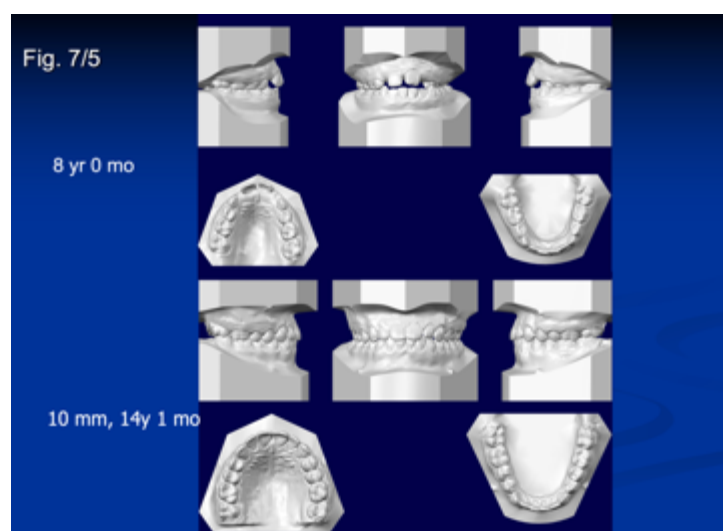
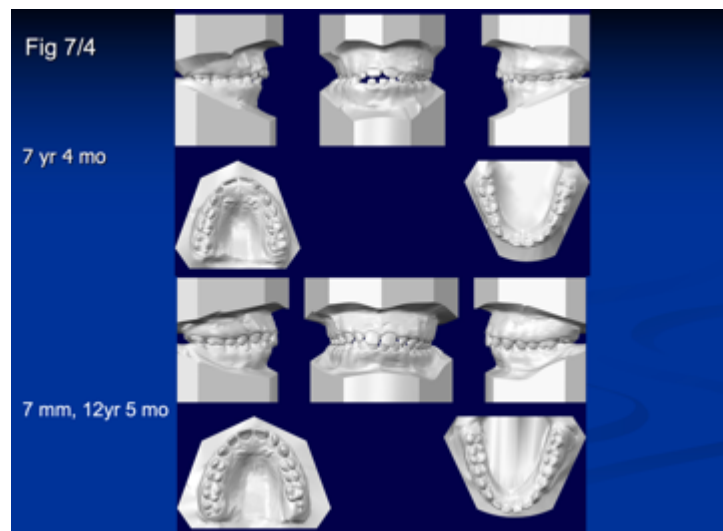
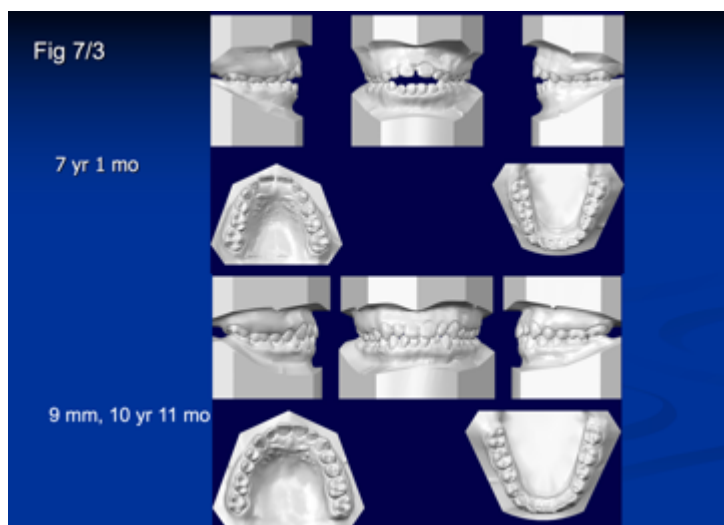
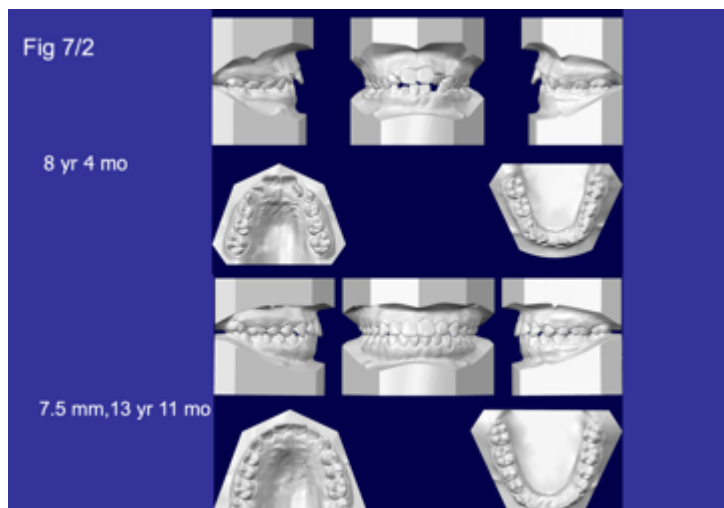
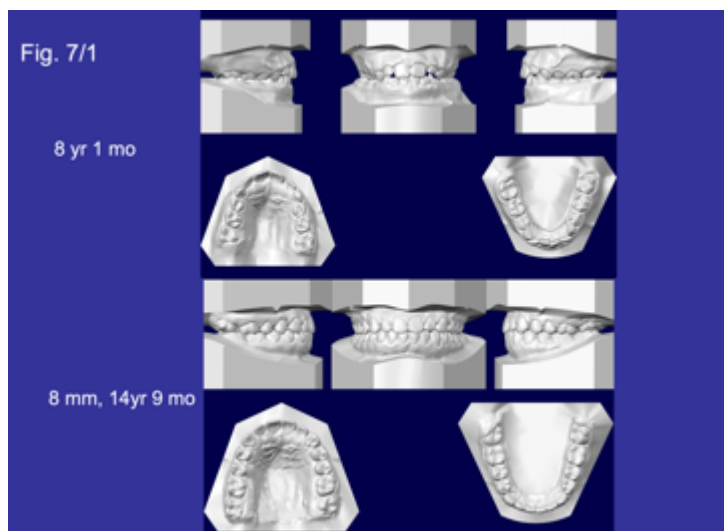
Figure 6. Case Studies - Phase 1 Only (#s 1-5); Phase 1 Followed with Phase 2 (#6)

#	Patient	Age at Start Phase 1	Age at End Phase 1	Age at Recall	Skeletal Transverse CAC Expansion	Initial Findings
1.	00500	8.1 yrs	14.9 yrs	NA	8.0mm	CL I; crowding; impacted #6/11
2.	00530	8.4 yrs	13.9 yrs	NA	7.5mm (RPEs)	CL I; ant. x-bite; OJ; imp. #s6/11
3.	01072	7.1 yrs	10.11 yrs	NA	9.0mm 2	CL II; AOB; IMPACTED #S6/11
4.	01819	7.4 yrs	12.5 yrs	NA	7.0mm 2	CL II; posterior x-bite AOB; #s6/11
5.	04591	8.0 yrs	14.1 yrs	NA	10.0mm 2	CL I;AOB/post x-bite; imp. #s6/11
6.	08668	6.7 yrs	8.4 yrs	13.9 18.1	11.0mm 3	CL II; AOB/post x-bite; imp. #s6-11

↑
Age at end
of phase2

CAROLINA RESEARCH

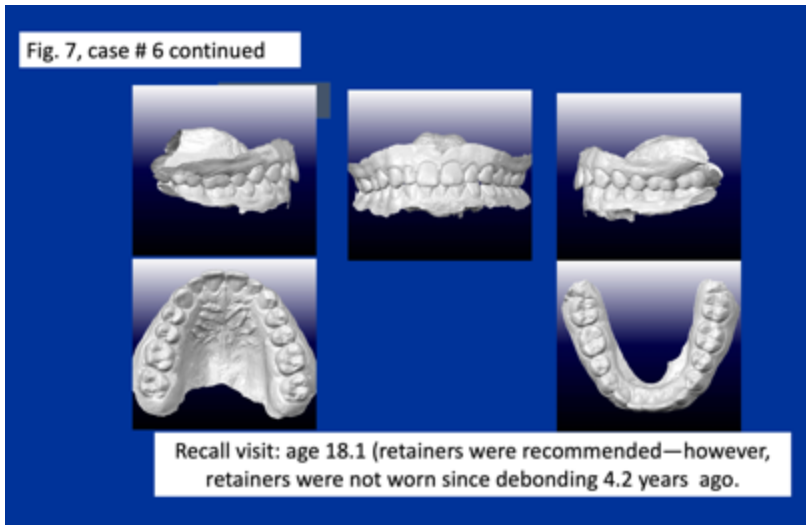
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CAROLINA RESEARCH

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This abridged paper with added case studies is published with permission from Orthodontic Practice US. The whole manuscript is:

Hayes JL. The benefit of early Class II treatment is a treatise on the validity of the 1998 Carolina randomized clinical trial. *Orthodontic Practice US*. 2022; 13(4): 40-43. (The article and the author's other References are available on Google and ResearchGate).

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MASO Poster Boards

MASO residents created the following poster board presentations for the 2023 AAO Annual Meeting. The full presentation can be accessed by scanning the accompanying QR Code.



Force Degradation and Viscoelastic Behavior of Commercially Available Orthodontic Elastomeric Chains

Dr. Anil Ardeschna, Rutgers School of Dental Medicine, Newark, NJ
Janzel Garzon, Rutgers School of Dental Medicine, Newark, NJ
Ki Baek Park, Rutgers School of Dental Medicine, Newark, NJ
Dev Ardeschna, Touro College of Dental Medicine, Hawthorne, NY

Abstract: We compared the viscoelastic behavior and force degradation rate of power chains. Rocky Mountain (RM) Energy Silver and Clear, American Orthodontics (AO) Memory Silver, and Unitek (UK) Alastik Silver and Pink were used for this study. Each chain of five units was stretched to 3 times the original length. Tensile strength was measured at this constant extension at various time points over four weeks. Initial forces ranged from 659 gm (AO Silver) to 996 gm (UK Pink) and, after four weeks, from 303 gm to 424 gm, respectively. Approximately 60% decrease occurred in the first 1-2 hours, after which a slow, gradual decline occurred. RM clear had the lowest percent change, followed by RM Silver. UK Pink and Silver had the highest percent change. More significant changes were seen in the wet group compared to the dry group. The formulation and processing of polymers used to make chains may vary between manufacturers, leading to different mechanical strengths, viscoelastic properties, and performances.

Limitations of Orthodontic Class III Camouflage and the Potential Adverse Effects

Alicia Briscoe DDS, University of Maryland School of Dentistry, Baltimore, MD
Katie Garrett, University of Maryland, Baltimore, MD
Monica Schneider, University of Maryland School of Dentistry, Baltimore, MD

Abstract: While orthodontic Class III camouflage can be used to conceal skeletal discrepancies, obtain acceptable dental occlusion, and improve facial esthetics, it is essential to be aware of its limitations and potential periodontal effects. Twenty-year-old Caucasian female presented to the University of Maryland orthodontic division with a Class III camouflage treatment history despite advice for orthognathic surgery. The patient presented with severe proclination of maxillary incisors and retroclination of mandibular anterior teeth, gingival recessions, and severe root resorption of the maxillary incisors as likely effects of pushing the limits of Class III camouflage. The patient was decompensated, underwent double jaw surgery, and obtained an acceptable result. The maxillary incisors were kept throughout treatment despite severe root resorption in attempts to maintain bone for future implant placement.

Management of a Cleft Lip and Palate Patient Using Functional Appliances

Dr. Tri Le, University of Maryland School of Dentistry, Baltimore, MD
Dr. Jeremy Dock, University of Maryland School of Dentistry, Baltimore, MD
Dr. Kevin Barnes, University of Maryland School of Dentistry, Baltimore, MD
Jose Bosio, University of Maryland School of Dentistry, Baltimore, MD

Abstract: Six-year-old African American male presented for orthodontic treatment referred by the University of Maryland Oral and Maxillofacial Surgery Department. The patient was diagnosed with cleft lip and palate and is currently under the care of an oral surgeon. He was referred to the orthodontics department for comprehensive orthodontic care. The patient presented with a narrow maxillary arch, anterior crossbite, and impaction of maxillary canines. Options were offered for maxillary arch expansion and anterior crossbite resolution. The final treatment plan included using a fan-shaped X-spider expander to expand the maxillary arch, especially the anterior segment. To resolve the anterior crossbite, a facemask headgear appliance was delivered to protrude the maxillary anterior segment. The patient progresses with treatment, and canines and premolars are achieving proper alignment into the arch.

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Management of Severely Impacted Central Incisors on a Mixed Dentition Patient with Anterior Open Bite

Katie Garrett, *University of Maryland, Baltimore, MD*

Jeffrey Jarvis, *University of Maryland, Baltimore, MD*

Abstract: Eleven-year-old African American male presented for orthodontic treatment referred by the University of Maryland Pediatric Department. The patient has a history of previous supernumerary teeth (#58 and #59) in the maxillary midline region. Two years before initial orthodontic records, both supernumerary teeth were extracted by oral surgery, but the maxillary central incisors still did not erupt. CBCT imaging revealed that both centrals were horizontally impacted directly below the floor of the nose. Options were considered for anchorage requirements due to the patient's delayed mixed dentition. The final treatment plan included using a bonded expander, a protraction facemask to address maxillary hypoplasia and bonding of 2x4 fixed appliances. The patient was referred to periodontics for surgical exposure and elastomeric string to move teeth into the arch. The patient is happy with the progress thus far; complete alignment is anticipated for this case.

Multiple Dental Substitutions and Bone-Level Management in the Maxillary Anterior Sextant After Trauma

Dr. Xuan Wu, *University of Maryland, Baltimore, MD*

Matthew Vumback, *University of Maryland, Baltimore, MD*

Ariana Feizi, *University of Maryland, Baltimore, MD*

Jose Bosio, *University of Maryland School of Dentistry, Baltimore, MD*

Abstract: An 11-year-old male patient presented with a history of trauma that resulted in avulsion and reimplantation - with root canal therapy - of the maxillary central incisors and maxillary left lateral incisor. Due to the poor prognosis of the reimplanted teeth and poor bone levels in the anterior maxilla, the maxillary right central incisor and left lateral incisor were slowly extruded to improve bone levels before being extracted during orthodontic treatment. After extractions, the right maxillary segment was mesialized such that the maxillary right lateral incisor replaced the central incisor; the canine replaced the lateral incisor, and so on. The maxillary left segment was similarly mesialized, with the canine replacing the lateral incisor. The left central incisor was maintained. Treatment reduced the number of implants needed to one and improved bone levels, and the patient concluded treatment with a successfully camouflaged anterior sextant and Angle's molar Class II occlusion.

Non-Surgical, Non-Extraction Orthodontic Treatment of a Bimaxillary Protrusive Class III Skeletal Adolescent with Missing Lower First Molars

Dr. Jeremy Dock, *University of Maryland School of Dentistry, Baltimore, MD*

Jeffrey Jarvis, *University of Maryland School of Dentistry, Baltimore, MD*

Abstract: A 14-year-old African American female presented for orthodontic treatment. The patient is bimaxillary protrusive skeletal class III with a 3mm anterior crossbite, moderate maxillary crowding, impacted maxillary canines, transverse discrepancy, lateral open bite, non-coincident midlines, and mandibular spacing from missing lower first molars due to caries. An ideal surgical treatment option was presented; however, the family chose a non-surgical, non-extraction treatment option. This included maxillary expansion, class II and class III elastics with anterior cross elastics to address a midline discrepancy, and space closure with customized stainless steel closed-coil retraction (Pletcher) springs attached to a posted lower archwire. The treatment objectives were successfully met as the patient finished bilateral Angle class I molar, and she was delighted with the result.



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Orthodontic Management of Multiple Impactions

Charmi Shah, *Rutgers, Newark, NJ*
Suhina Kapoor, *Rutgers, Newark, NJ*
Anthony Suriano, *Rutgers, Newark, NJ*
Dr. Padma Mukherjee, *Rutgers, Newark, NJ*

Abstract: Orthodontists commonly encounter impacted teeth. Failure to diagnose malocclusions and possible impactions early could lead to space loss, crowding or root resorption, and possible loss of teeth. This paper reports managing a complex case of impacted teeth with surgical and orthodontic intervention. A 15-year-old female patient presented with the chief complaint, "I want my baby teeth to come out, and I need braces." On clinical exam, she presented with over-retained primary right canines and first maxillary right molar, impacted maxillary right canine and maxillary right first premolar, and impacted mandibular right canine. A multidisciplinary approach was planned to improve the overall function and aesthetics of the patient. Cone Beam Tomography imaging helped plan the case, and surgical exposure was required. The purpose of this article is to review the principles of case management of impacted teeth and emphasize the need for early diagnosis to prevent impactions.

Orthodontic Treatment of Open Bite and CR/CO Discrepancy with Clear Aligners

Dr. Christina Grace, *University of Maryland, Baltimore, MD*
Monica Schneider, *University of Maryland School of Dentistry, Baltimore, MD*
Vicente Telles, *University of Maryland School of Dentistry, Baltimore, MD*

Abstract: Sixty-seven-year-old Caucasian female presented for orthodontic evaluation with a previous history of orthodontic treatment with extraction of maxillary first bicuspid to resolve crowding. The patient reported wearing retainers for approximately five years after treatment concluded and was stable for about forty years. The patient reports she noticed her teeth shift, and her bite began to open, resulting in difficulty chewing and a dual bite. When we manipulated the patient to centric relation, she had an open bite with occlusal contact only on the second molars. The patient was referred for cone beam computed tomography of bilateral temporomandibular joints to examine degenerative joint disease, but the report returned negative. The treatment plan included an occlusal splint for six months to equilibrate the bite, followed by comprehensive orthodontics with clear aligners to close the bite. Full bite closure and proper occlusal relationships were achieved.

Presentation of Mental Nerve Paresthesia During Clear Aligner Treatment

Sabrina Dorfmann, *University of Maryland School of Dentistry, Baltimore, MD*
Christopher Liang, *University of Maryland School of Dentistry, Baltimore, MD*

Abstract: Sixty-six-year-old male with a history of pancreatic cancer & prostatectomy presented to his first Invisalign adjustment visit with paresthesia of the right mental nerve region. Paresthesia appeared three weeks prior near the region of the right mandibular angle and has since traveled anteriorly. The initial panoramic radiograph was unremarkable. However, the CBCT showed an irregular trabecular bone pattern at the inferior two-thirds of the mandible with an eroded, moth-eaten cortical border. Expansion of the right mandibular foramen was also noted, as well as localized areas of expansion and loss of cortication of the inferior alveolar nerve canal extending to the mental foramen. Radiographic findings are consistent with metastatic prostate disease; however, his medical team does not report metastasis. Invisalign treatment has been discontinued, and the patient has been referred to oral surgery and ENT for additional testing and biopsy.



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Prosthodontic and Orthodontic Interdisciplinary Treatment – Case Report

Vicente Telles, *University of Maryland School of Dentistry, Baltimore, MD*
Sami Abu Alhuda, *University of Maryland School of Dentistry, Baltimore, MD*
Sheng Ge, *Frederick, MD*
Jose Bosio, *University of Maryland School of Dentistry, Baltimore, MD*

Abstract: 58-year-old female presents with a CC of “wanting to fix my upper teeth.” She was Class I bimaxillary protrusive, with deep bite, increased overjet, missing U6s and LL7, and extrusion of UL7. A 3-unit bridge from UR1 to UL1 was camouflaging a midline diastema of 6 mm. An interdisciplinary treatment plan with Prosthodontics was presented involving redistribution of maxillary anterior spaces to fabricate new crowns for UR1 and UL1 and mesialization of U7s into U6s spaces. Orthodontic treatment was completed in 28 months with ideal molar and canine relations, with spaces left mesial and distal of maxillary incisors for Prosthodontic rehabilitation. Removable maxillary and mandibular retainers and bonded fixed retainers were fabricated on lower 3-3 and on U5-U7s. Upon reevaluation after orthodontic treatment, UL1 and LL6 had poor prognoses and were extracted and replaced with implants. UR1 was rehabilitated with a new crown. 2-year retention follow-up shows good stability of the results.

The 100 Most-Cited Systematic Reviews and Meta-Analyses Published in the Major Orthodontic Journals in the Last Decade, a Bibliometric Analysis

Dr. Maria Doughan, *University of Maryland, Baltimore, MD*
Jose Bosio, *University of Maryland, Baltimore, MD*

Abstract: Objectives: Identify the 100 most-cited systematic reviews (SR) and meta-analyses (MA) published in the past decade. Methods: SR and MA were published in 2012 in the American J. of Ortho. (AJODO), The Angle Ortho. (AO), European J. of Ortho (EJO), J. of Ortho. (JO) and Ortho. and Craniofacial Res. (OCR) were retrieved from the Web of Science database. The top 100 cited articles were processed using CiteSpace. Results: The number of SR and MA has been increasing yearly, totaling 272, with a minimum of 13 in 2012 and 32 in 2021. Among the top 100 cited reviews, 40% were MA; citations ranged from 19 to 196. The journal with the largest number of cited studies was AJODO (35%), followed by EJO (32%), AO (21%), OCR (10%), and JO (2%). The top 3 thematic fields were Class 2 Malocclusion (13%), Mini implants (9%), & CBCT (7%). Conclusions: This overview can help us appreciate the current activities, find gaps, and determine future research needs.

Treatment of Mandibular Canine Impaction Transposed with a Lateral Incisor and Bilateral Posterior Cross-Bite with Alt-RAMEC Expansion Protocol and Lower Incisor Extraction in a 14-year-old Female - A Progress Case Report

Dr. Kevin Barnes, *University of Maryland School of Dentistry, Baltimore, MD*
Katie Garrett, *University of Maryland, Baltimore, MD*
Jeffrey Jarvis, *University of Maryland School of Dentistry, Baltimore, MD*

Abstract: This progress case report describes a pubertal 14-year-old female with an impacted mandibular left canine transposed with the mandibular left lateral incisor. The patient also presents a Class III skeletal tendency (deficient maxilla), bilateral posterior crossbite, anterior crossbite, and anterior crowding. The treatment plan consisted of bonded RPE, using the Alt-RAMEC protocol to promote anterior advancement and control vertical dimension. After leveling and aligning the mandibular arch, the mandibular left lateral incisor and primary mandibular left canine were extracted, including surgical exposure and bonding of an attachment/chain for the impacted canine. Once the impacted canine is extruded/retracted, the remaining extraction space will be closed by retraction of the mandibular incisors, and the maxillary midline will be aligned with the center of the mandibular central incisor. The patient is happy with the progress, as we anticipate an outstanding outcome.



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Unilateral Blocked Out Canine and Maxillary Transverse Deficiency Correction with T-Rex Appliance

Dr. Lindsay Diaz, *University of Maryland, Baltimore, MD*
David Greene, *University of Maryland, Baltimore, MD*
Dina Sanchez, *University of Maryland, Baltimore, MD*
Dr. Steven Zinn, *University of Maryland, Baltimore, MD*

Abstract: Twelve-year-old Caucasian female presented for orthodontic treatment with a chief complaint of “wanting straighter teeth.” The patient exhibits Angle Class I bilateral molars with ectopic maxillary right canine, crossbites, and maxillary transverse deficiency. Crowding in the maxillary anterior has allowed the maxillary right posterior segment to drift mesially, blocking the maxillary right canine labially and maxillary right lateral incisor lingually. Distalization of the maxillary right posterior segment was planned. T-rex appliance was made and delivered successfully. During expansion, the arm attached to the maxillary right first molar tube was activated, and the molar was distalized 5mm. Arms of both maxillary second pre-molars were cut and allowed to distalize freely in the arch. The patient is very compliant and stated she could do 27 turns on the T-rex appliance, allowing transverse deficiency to be corrected while beginning A-P correction. The patient and parents are very happy.

Use of TADs for Maximum Anchorage in a Bimaxillary Protrusive Patient with Edentulous Posterior and Tongue Thrust

David Greene, *University of Maryland, Baltimore, MD*
David Harmon, *University of Maryland, Baltimore, MD*
Dr. Lindsay Diaz, *University of Maryland, Baltimore, MD*
Dr. Steven Zinn, *University of Maryland, Baltimore, MD*

Abstract: A 66-year-old African American female presented for treatment with a chief complaint of spacing on the maxilla and mandible. Clinical evaluation revealed: severe spacing on the maxilla and mandible, loss of posterior dentition, asymmetric maxillary arch, proclined maxillary and mandibular incisors, and vertical osseous defect at UR1/2 but no active periodontal disease. The patient was unhappy with spacing, had an uneven smile due to the more significant buccal corridor on the right side, and biting efficiency. Due to skeletal and dental protrusion and active tongue thrust, TADs were placed in each quadrant to distalize and retrocline all anteriors while closing spaces. Treatment was finished in 18 months, and memotain bonded lingual retainer on U3-3 and L4-4 with Essix overlays was used for retention.

Using Posterior Bite Plate Appliance to Reduce Anterior Open Bite Before Clear Aligner Treatmentt

Dr. Steven Zinn, *University of Maryland, Baltimore, MD*
David Greene, *University of Maryland, Baltimore, MD*
Katie Garrett, *University of Maryland, Baltimore, MD*
Dr. Lindsay Diaz, *University of Maryland, Baltimore, MD*
Dina Sanchez, *University of Maryland, Baltimore, MD*

Abstract: Clear aligners have been shown to mainly reduce anterior open bites by extruding anterior maxillary teeth. Correcting the malocclusion using clear aligners can increase a gummy smile if a patient with an anterior open bite already has a significant gingival display. To prevent this, an appliance, such as a posterior bite block, can be used earlier in treatment to correct the anterior open bite through posterior intrusion. After the open bite is reduced, clear aligner therapy with posterior bite bumps can correct the remaining malocclusion. These cases illustrate this concept. ■



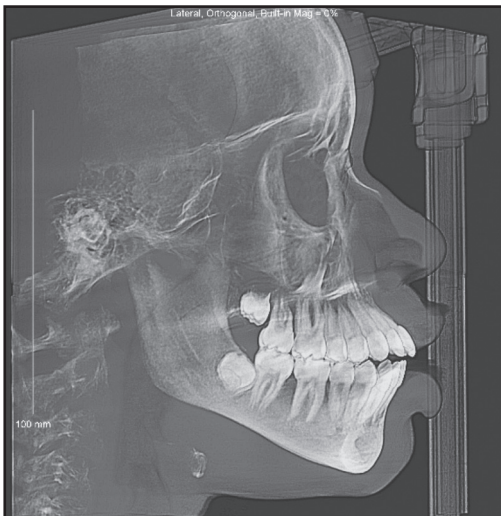
CASE PRESENTATION

CASE PRESENTATION

Dr. Justin Middleberg
from Jefferson Einstein



A 12-year-11-month-old African American female presented to Albert Einstein Medical Center with a chief complaint of “I want straight teeth.” A review of habits revealed a past digit-sucking habit, a current tongue thrust, and a low tongue posture.



The patient had a convex facial profile, acute nasolabial angle, protrusive lower lip, mentalis strain, and a shallow mento labial sulcus. Cephalometric analysis showed a Class I skeletal pattern with a prognathic maxilla and mandible, low mandibular plane angle, divergent occlusal planes, and an adequate maxillary transverse width. Dentally, a full complement of permanent dentition with developing third molars in all four quadrants was present. An anterior open bite spanning from canine to canine ranged from 2-3mm. Maxillary incisors were protrusive and proclined; mandibular incisors were well-positioned and well-angulated.

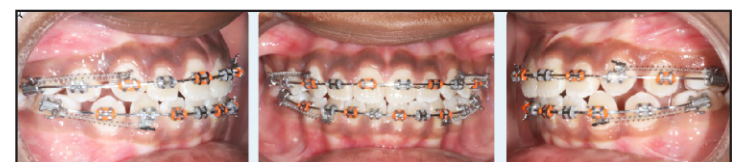
Treatment objectives for this case included closing the anterior open bite, decreasing the maxillary incisor proclination and protrusion, relieving mentalis strain, and improving the overall smile arc and esthetics.

The patient was treatment planned for traditional brackets with maxillary and mandibular second premolars extraction. Second, bicuspid were chosen to allow for some retraction of the incisors while still being able to work around the tongue by protracting the first molars. The incisor goal was to decrease the SNI and IMA up to 10 degrees following extractions while using moderate anchorage and maintaining the class I buccal segments. Before initiating treatment, consent for relapse due to tongue posture and the importance of lifelong retention were discussed. The patient was also educated on tongue exercises.

Initial bonding with 0.022 pre-adjusted appliances with differential bracket placement on the maxillary incisors for extrusion occurred in August 2020. Extraction of maxillary and mandibular second premolars occurred after leveling and aligning.



Space closure was accomplished with 0.016X0.022SS and 0.017X0.022SS wires to preserve incisor angulation. Power-chain and NiTi closed coil springs were used.



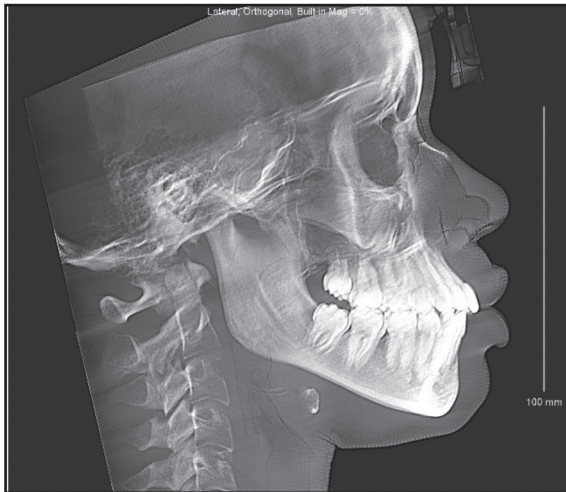
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CASE PRESENTATION

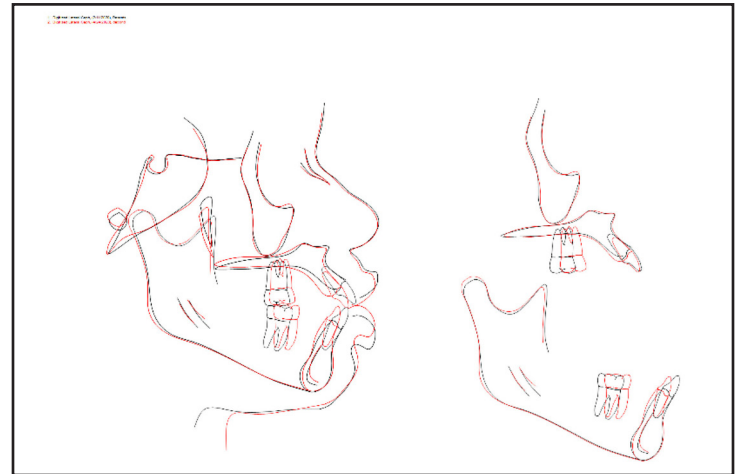
CASE PRESENTATION

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After 31 months of fixed appliance treatment, the patient was debonded, and final records were obtained. Maxillary and mandibular Essix retainers were given to the patient, and full-time wear was prescribed.



The maxilla maintained its position in all three planes, consistent with the patient's growth stage. The mandible was maintained in the transverse dimension and had minimal growth in the sagittal and vertical dimensions, consistent with a late growth stage. The maxillary molar moved mesially about 4mm due to treatment; the incisors were slightly retracted in the AP dimension with a 7.7-degree decrease in SNI. Vertically, the maxillary molars were maintained, and the maxillary incisors extruded about 1mm. The mandibular molars moved mesially about 3mm, and the incisors retracted 4.9mm. The IMA decreased to 9.8 degrees. Vertically, the mandibular molars extruded, consistent with average growth. Facially, the smile display was improved, and the bimaxillary protrusion and mentalis strain were reduced.



Group/Measurement	Initial	Value
Maxilla to Cranial Base		
SNA (*)	94.1	92.8
Mandible to Cranial Base		
SNB (*)	91.0	91.8
SN - MP (*)	30.3	29.7
FMA (MP-FH) (*)	25.2	23.6
Maxillo-Mandibular		
ANB (*)	3.1	1.0
Maxillary Dentition		
U1 - NA (mm)	9.1	7.1
U1 - SN (*)	124.9	117.2
Mandibular Dentition		
L1 - NB (mm)	9.5	4.6
L1 - MP (*)	95.8	86.0
Soft Tissue		
Lower Lip to E-Plane (mm)	7.3	4.9
Upper Lip to E-Plane (mm)	2.9	2.2



American
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AAO Strategic Plan FY2023-2027

Mission	To advance the art and science of orthodontics through education, advocacy and research.				
Vision	We are the most qualified, trusted and accessible resource for delivering excellence in orthodontic patient care.				
Core Values	Our members come first	We embrace diversity and inclusion	We are data-driven	We seek active engagement	We are ethical
Goals and Objectives	PROMOTE AND DEFEND OUR SPECIALTY		<ol style="list-style-type: none"> 1. Increase awareness of the profound health and cosmetic benefits of specialized orthodontic care 2. Mobilize AAO members to actively engage in AAO's advocacy efforts to advance our regulatory, legislative and policy priorities 		
	ENGAGE AND DELIGHT OUR MEMBERS		<ol style="list-style-type: none"> 3. Foster a welcoming membership community through timely and responsive communication, inclusion and trust 4. Deliver offerings that address member needs to position AAO as the provider of choice for education, knowledge and resources for ALL orthodontists 5. Reimagine AAO's governance structure to improve diversity, representation and agility 		
	DRIVE TRANSFORMATION AND INNOVATION		<ol style="list-style-type: none"> 6. Position AAO as the global leader in advancing innovation and technology in orthodontics 7. Explore partnerships, collaborations and investments that can add scale and speed to advancing AAO's mission and vision 		
Initiatives	Public and Member Communications	Advocacy	Inclusion	Discovery and Innovation	

AAO COUNCIL REPORTS

**COUNCIL ON COMMUNICATIONS****Dr. Lawrence Wang**

Best wishes for the fall season to the MASO community. The council members and talented AAO staff have continued engaging and educating parents and patients, strengthening the value of AAO membership. The council will meet face-to-face at the AAO headquarters in St. Louis this September. Please see below for an update on COC activities, and feel free to contact me with any questions or ideas.

Consumer Awareness Program (CAP)

The AAO CAP is the most extensive mass campaign promoting orthodontic treatment by an orthodontist. The CAP is digitally focused, demographically targeted (women aged 30-45 and women aged 30-45 with kids), and behaviorally targeted with digital ads (targeting individuals actively searching for health and wellness topics, including orthodontic treatment). The objective of the CAP is to educate the public by driving them to the AAO consumer website.

FY23 Performance through the end of the fiscal year:

- For the fiscal year from June 2022 – May 2023, we have generated the following:
 - ◆ Over 6.1 million users to the AAO consumer website, representing an increase of 32% to our original fiscal year goal and actuals from fiscal year 2022!
 - ◆ 751 million digital ad impressions
 - ◆ 13.2 million ad clicks
- The CAP continues to leverage Facebook, YouTube, Instagram, paid search, and paid digital ads, which historically have been strong-performing channels.

Digital Strategy Agency

The digital marketing agency that came on board in January continues to exceed expectations. Their accomplishments since coming on board have included the following:

- 57.1% increase in average monthly users, as compared to previous months
- 79.2% increase in Q4 users, as compared to our Q4 fiscal year goal
- 32% increase in our full-year user total, as compared to the original goal

They continue to optimize our media spend and ensure we reach the right target audience on the right channel. Proper oversight is in place, with AAO Staff monitoring performance weekly and monthly reporting to COC.

New CAP Campaign Launched in April 2023

AAO began releasing new content as part of our Straight Talk campaign. The campaign's overall goals are to educate and

inform consumers, dispel myths, answer relevant consumer questions, and provide straight talk about orthodontics. The assets are “bite-sized or snackable” content that is short-form and easy to consume to be distributed through Facebook, YouTube, and Instagram.

New Influencer Program Launched in May 2023

Continuing the influencer marketing strategy this year, the AAO partnered with the Holderness Family. They are internet personalities best known for their Facebook and YouTube channels with over 6 million followers, and their videos have over 1 billion views. The dad, Penn Sr., and the son, Penn Charles, are going through orthodontic treatment together, and they created a fun and engaging video and blog on the importance of seeing an orthodontist. The video launched in May 2023, and to date, we have seen nearly 1M impressions, 190K video views, and over 8K engagement actions. The AAO Staff will continue to promote the Holderness video and blog in social media channels, member emails, and paid social outreach.

Additional Promotions – Coming Soon**Bullying Bites**

- In honor of National Orthodontic Health Month and World Bullying prevention month, the AAO has continued its partnership with Stand for the Silent. This organization helps raise empathetic awareness through education and understanding.
- AAO members and office teams are encouraged to spread the word through social media and at their offices using #BullyingBites.
- Patients are asked to sign a pledge card to take a stand against bullying and are encouraged to share on social media.
- In June 2023, the AAO will mail out Bullying Bites information kits to all member offices to help raise awareness of the program, create excitement, and encourage more offices to get involved.
- Members will have two options for implementing the Bullying Bites program in their offices.
 - ◆ They can purchase a complete kit (starting in July 2023) from the AAO Store, including pledge cards, patient stickers, and in-office signage.
 - ◆ They can download the Bullying Bites assets from the Member Website (starting July 2023) and have them printed locally. These assets will include pledge cards, stickers, in-office signage, and social media post copy and graphics.

Teenage Mutant Ninja Turtles Partnership

The AAO has partnered with Paramount Pictures and the Teenage Mutant Ninja Turtles: Mutant Mayhem for a summer of fun and a chance to spread the news about the importance of visiting an orthodontist. The movie will be released on

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AAO COUNCIL REPORTS

August 2, 2023. In the film, Mikey has braces, and we will use various digital and printed tools to help promote braces care, AAO in general, and the movie launch. This promotion will run from June 25, 2023 – August 18, 2023.

- Digital assets will be available for you and your teams to use on the Practice Marketing Tools page on the Member Website. Add these to your website and social media channels, or print the digital assets with your local printer to use in your office.
- There will also be great opportunities for your patients to engage with the movie release, including sweepstakes, a turtle quiz, and a braces care flyer featuring Mikey. These will be available on the consumer website starting on June 25th.

Member Marketing

The AAO Staff continues to look for opportunities to engage and delight our members through member-centric marketing and communications. We aim to increase engagement, attendance at AAO events, awareness of our Consumer Awareness Program, Advocacy initiatives, and member benefits overall.

Recent Member Marketing and Communication efforts:

- eBulletin: While we consistently see above-average open rates (60-65%), we continue to work on increasing our click-through rates. In May 2023, we launched a new layout and refreshed look. This will help with member

experience and provide the AAO staff with additional analytics to optimize future content based on member interest.

- Social Media: We are continuing the social media strategy launched in January 2023 to increase the frequency of posts across our AAO-owned channels (Facebook, LinkedIn, Twitter, Instagram). Posts will primarily focus on member information but will also include consumer-focused content.
- SMS Texting: We have ~2,600 people opted in to receive texts from the AAO and are continuing to find ways to increase opt-ins while finalizing our strategy for the texting program (frequency, content, etc.)
- Member Influencers: In June 2023, the AAO is launching a new member influencer program, the Member Minute. The goal is to leverage influential members in the AAO community to help build connections with other members and highlight AAO initiatives and benefits. Plus, we are asking these members to share on their social media, as well as within the private Facebook groups, to extend the reach of the AAO outside of our existing marketing channels.
- Member Website: Content audit started in June 2023, to be completed in FY24, to ensure that AAO member website content is valuable, current, and searchable.

Thank you, as always, for your membership in the American Association of Orthodontists and the Middle Atlantic Society of Orthodontists. ■



**COUNCIL ON
GOVERNMENT AFFAIRS**
Dr. Jean Edouard Asmar

2023 continues to build on the Council on Government Advocacy's (COGA) growth and influence for AAO member advocacy priorities. We are making data-driven strategic decisions in coordination with AAO staff to determine AAO policy opportunities in Washington, DC, and nationwide at the state level. Key issues include workforce challenges, small business issues, student loan debt, and patient health and safety relating to mail-order orthodontics. Our joint COGA-AAOPAC meeting in Washington, DC, took place in concert with AAO's 2023 Professional Advocacy Conference, where we conducted more than 60 meetings on Capitol Hill and connected directly with 19 Members of Congress at AAOPAC's reception and dinner at the Hamilton Hotel—congratulations to AAOPAC for an all-time, record-breaking fundraising year. Over \$427,000 was raised in FY 22-23 with your help, and those dollars help fuel our advocacy priorities at the Federal level and in states across the country.

Your grassroots engagement continues to be the key to our advocacy success, and the newly created National Advocacy Network provides opportunities to play even more of a volunteer leadership role in collaboration with COGA. If you want to get more involved, please text the word "NAN" to the number 52886. AAO Member influences through grassroots advocacy helped create policy momentum through several state initiatives this spring where AAO Advocacy staff and lobbyists played offense and successful defense on telemedicine legislation in states like Florida, Texas, Nevada, Illinois, and Alabama. More details will be shared in the June/July publication of the Orthodontic Advocate arriving in your mailbox this summer. Advocacy continues to be the number one issue for AAO Members, and we appreciate your interest and engagement on those issues and your essential contributions at AAOPAC.org.

The DC component was very well represented at the Annual Session of the AAO in Chicago. It was wonderful to meet up with so many friends and colleagues. As usual, our next in-person meeting will be at a luncheon scheduled at our MASO annual session meeting at the National Harbor, Maryland.

Thank you District of Columbia Society of Orthodontists. ■

AAO COUNCIL REPORTS



COUNCIL ON MEMBERSHIP, ETHICS & JUDICIAL CONCERNS

Dr. Luis Toro

2022-23 was a hectic and productive year for COMEJC. At the 2023 AAO Chicago HOD, the following council resolutions were adopted or referred to:

1. The Council submitted an AAO Bylaws amendment regarding the Association's requirement to be an ADA member at the time of initial membership application.
 - a. Article III. - Membership - B. Eligibility, c. ADA Membership – the AAO wishes to continue encouraging our members to join the ADA. The exact wording was used where necessary in all the other membership categories:
 - i. *“American Dental Association Membership: Be a member in good standing of the ADA on the date of initial application for membership if practice or residence is in the United States or one of its possessions, unless the dentist is an AAO member within another membership category, and except those active academic applicants involved only in teaching or research, who are unable to obtain ADA membership because they are not engaged in the practice of dentistry in the United States and do not possess a license to practice dentistry in their respective states, are exempt from this requirement. (An active member who was a member of this Association on May 4, 1983, but not a member of the ADA on that date, is exempt from this ADA membership requirement.) Continued membership in the ADA is strongly encouraged.”*
2. AAO Bylaws amendment to the Retired membership category. 06-23 COMEJC (S3-MASO) (S4-MASO) Substitute for Bylaws Amendment - Article III. - Membership, B. Eligibility, 6. Retired Members a. Status:
 - a. The Council's goal in submitting this resolution was to more accurately define the requirements to move from active or life-active membership to retired status.
 - b. The House decided to refer the resolution back to COMEJC for more study. There was no House consensus on the verbiage to define when an orthodontist is or is not retired from active practice.
 - c. In addition, MASO wished to add the necessary words that would not limit or risk the member's retired status

if they volunteer or work part-time as a teacher or investigator after active practice.

d. A new resolution is expected for the 2024 AAO HOD.

3. An amendment to the AAO Financial policy document correcting how the AAO Service member's annual membership dues. Line A of subsection four needed to be clarified. From now on, the dues of all Service members are \$300.00 annually.
 - a. 13-23 COMEJC – Amendment to Part 1, Article I. Dues, B. Annual Dues, 4. Service Members (Financial Policy): 4. Service members: \$300.00
 - a. ~~Service members in the first three years of membership: \$300.00.~~
4. After all the natural disasters that we have gone through (Hurricane Maria, COVID-19), the AAO Board of Trustees asked COMEJC to define our Waivers Financial Policy further. The underlined words were the additions approved by the HOD this past April:
 - a. 16-23 RC (original 16-23 COMEJC) - Amendment to Part 1. Article III. Waivers Financial Policy):

RESOLVED that Part 1, Article III. Waivers (Financial Policy) be amended as follows:

III. WAIVERS

- A. Members may apply for a waiver of dues and assessments for any of the following reasons:
 1. Significant financial hardship due to a force majeure or other similar events beyond the member's control.
 2. Significant financial hardship due to a debilitating medical condition.
 3. The orthodontist has an immediate family member, such as a parent, spouse, child, or sibling, who requires the orthodontist to be the primary caregiver, and the orthodontist significantly reduces their practice time.
 4. Significant financial hardship due to activation from reserve status to active military duty for the U.S. or Canadian government.
 5. Significant financial hardship due to civil unrest or acts of military authority.
 6. A “limited practice” waiver of 50% of total active member dues and assessments may be requested by Active or Life Active members with at least 30 cumulative years of membership (excluding student membership) and practice no more than 416 hours per year.

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7. Doctors in full-time humanitarian service may request a Humanitarian Service waiver of full dues and assessments. Waivers for humanitarian assistance are not subject to the three-year limitation.
8. Waivers for membership dues are to be considered for individual members' circumstances. They may not be granted for events or occurrences that significantly impact the vast majority of the AAO membership.
- B. Applications for waivers are required and shall be made to the Association except when sections III.A.4. or III.A.5. are applicable.
- C. The Association may grant a waiver of 50% or 100% of dues and assessments, provided such member is also exempt from paying the member's constituent organization's corresponding dues and assessments, as determined by the Association in its sole discretion.
- D. The final decision of the Association shall be made by the Council on Membership, Ethics, and Judicial Concerns and is final and may not be appealed.
- E. A waiver may be granted for only the current year's dues and assessments.
- F. A waiver may be granted for the same condition for up to three consecutive years and a maximum of three (3) years for a single event. A "limited practice" waiver may only be used for a maximum of three (3) years.
- G. Three three-year maximum may be waived if a member has a permanent disability that prevents them from practicing and is not yet eligible for retired status.
- H. Only individuals who are members in good standing may apply for dues waivers.

As required by AAO policy¹, through the office of the AAO General Counsel, COMEJC hired Pillsbury Winthrop Shaw Pittman LLP, outside counsel to review the AAO Principles of Ethics and Code of Professional Conduct. The following resolutions were submitted following Pillsbury's recommendations:

1. 07-23 COMEJC Bylaws Amendment - Article XVII - Disciplinary and Membership Proceedings
 - a. The AAO Disciplinary and Membership proceedings were currently included in two AAO documents; the

AAO Bylaws and the AAO Principles of Ethics and Code of Professional Conduct. The attorneys at Pillsbury recommended that the proceedings should only be printed once. Since it is a document that requires constant revision as we learn by experience, it should be excluded from our Bylaws. By definition, any bylaws need a high voting threshold to be amended.

- b. The adopted resolution deleted Article XVII – Disciplinary and Membership Proceedings from our AAO Bylaws. The Disciplinary and Membership Proceedings will be found in our Code of Ethics and Disciplinary Proceedings.
2. 18-23 COMEJC – Amendment to Policy – Disciplinary Proceedings, D. Resignation (Principles of Ethics)
 - a. The Principles of Ethics, Code of Professional Conduct and Advisory Opinions of the AAO, page 17, lines 708-712 was amended and now reads as follows:

DISCIPLINARY PROCEEDINGS DISCIPLINARY AND MEMBERSHIP PROCEEDINGS

D. RESIGNATION:

If a member who is the subject of a complaint or other disciplinary or membership action by this Association resigns or is terminated for non-payment of dues at any time during the proceeding, the matter will continue its disciplinary course with a recorded final decision. If the member reapplies for membership in the Association in the future, the Council's disciplinary decision will be imposed. (The underlined words are the additions to the policy.)

On April 4, 2023, COMJEC, with the help of the AAO General Counsel's office and the continuing education department of the AAO, presented the webinar called Ethical Considerations for Orthodontists. It is a fascinating panel discussion on the everyday ethical situations we might face as private practice orthodontists at some point during our careers. The webinar can be easily found on the AAO member's website under education and search for ethics.

I wish to thank my fellow Council members and AAO staff for all the work produced this year. I also want to thank the MASO membership for allowing me to represent you. With your new MASO representative to COMEJC, **Dr. Ty Saini**, I leave you in great hands. ■

¹It is an established AAO policy that all governing documents and policy is required to be reviewed at least once every three years.

AAO COUNCIL REPORTS



COUNCIL ON NEW AND YOUNGER MEMBERS

Dr. Lauren Wiese

The Council on New and Younger Members is excited to begin another year!

First, we welcome our newest members: BOT liaison Dr. John Callahan, Dr. Kaitrin Kramer, and our resident representatives Dr. Sepideh Noruziaan and Dr. Michelle Skelton. Congratulations to Dr. Kevin Kurtzner, our new council Chair for the year.

CONYM members convened in person, with a few members joining virtually, for our annual meeting on Saturday, February 4th, 2023, at the AAO Headquarters. At this meeting, council members discussed the following undertakings and considered new and upcoming endeavors.

Every year, CONYM members support the AAO's membership renewal efforts by outreach to colleagues within their constituent regions who have not renewed their AAO memberships. As of February 2023, approximately 96.6% of Active Members had renewed, including 95.2% of new and younger members.

Regarding innovation and transformation, CONYM members brainstormed suggestions for what they want to see within a mobile app. These included: integration of the AAO credit card, eBulletin notifications, CE manager, podcasts, list of upcoming meetings, member directory to allow members to connect, and a badge scanning feature for AAO meetings. Mindi Brothers, AAO Vice President of Strategy and Innovation, is working tirelessly on this initiative.

Topics and issues that CONYM plans to focus on this year include the following:

- **Resident Engagement:** CONYM feels it should be more heavily involved in engaging with orthodontic residents, including serving as presenters for the AAO Resident Vitals program and collaborating with the Resident Champions. CONYM also discussed the struggles facing some schools with on-campus presenters. A suggestion was made to incentivize AAO membership with part-time faculty, often program gatekeepers.
- **Communication Means:** CONYM believes the AAO should find more tech-friendly ways to help communicate the value of membership with new and younger members, as emails get lost. Ideas include the mobile app, as mentioned above, and posting more on social media (especially Instagram). Suggestions were to keep content short and digestible.

- **More Programming for NYMs:** CONYM feels that new and younger members, especially recent graduates, get overlooked in AAO programming. Networking and social events are one example, as orthodontic residents have their reception at the Annual Session. It was suggested to look for more social opportunities, similar to the networking event for new and older doctors at the SAO/SWSO meeting. Panel discussions with new and younger members on financial topics would also be valuable.
- **Student Debt:** The Student Debt Superstars program was initiated in 2017, and it was discussed how to move the agenda forward and present content in the most effective way, with helpful tips and case studies. CONYM will also develop a list of student debt pearls to share with other members and residents to help minimize their debt burden.

During the AAO Annual Session in Chicago, CONYM hosted the New Orthodontist and Resident Conference on Saturday, April 22nd. The event featured TED-style presentations by Dr. Chris Teeters, who presented on orthodontic clinical pearls, and Shannon Patterson, who discussed "how to get the job you want." The conference finished with roundtable discussions on various career and business topics. Lunch was provided, the event was well-attended (sold-out ticketed event!) and provided valuable information to residents and new orthodontists.

CONYM also discussed the new persona tracks for the Annual Session and suggested creating a channel specifically for New and Younger Members at future Annual Sessions. A motion was made to evaluate the potential for this, but ultimately the BOT determined that persona tracks at the Annual Session are experience-based rather than demographic-based. However, feedback is being taken to CCon to determine how the Annual Session can cater more to NYMs.

CONYM continues to represent the AAO at the annual GORP and ASDA meetings. During GORP, a council member presents to resident attendees on the CONYM initiatives and how the council represents their interests. At the ASDA Annual Session, a council member represents the AAO at an exhibit booth with an AAO staff member. Dr. Lauren Todoki, a former Resident Champion and NYM, along with AAO CONYM staff liaison Kathy Langenfeld, attended the ASDA Annual Session in Seattle February 17-19, 2023. Dr. Darshit Shah will represent CONYM at the AAO booth/table at GORP this summer and give a 15-minute presentation on behalf of CONYM. The council looks forward to continuing its representation at these conferences.

CONYM members will meet virtually for conference calls before our next in-person annual meeting early in 2024. We welcome your outreach anytime with any questions, comments, or suggestions. ■

AAO COUNCIL REPORTS


**COUNCIL ON
ORTHODONTIC PRACTICE**
Dr. Madeleine Goodman

GENERAL: I am honored to be MASO's new representative to COOP! Many thanks to Dr. Lara Minahan for her outstanding contributions over the past six years as our COOP liaison and the guidance and help she's given me as I settle into the new role.

OFFICE DESIGN SERIES: As a friendly reminder, the AAO is proud to have released its efforts on an entirely new approach to the AAO office design webpage. Its infrastructure is supported by the professional contribution of orthodontic design and business field experts: <https://www2.aaoinfo.org/practice-management/office-design-for-the-orthodontist/>

AAO PRACTICE MANAGEMENT FORMS: To best serve the membership and their clients, informed consent forms on various topics are available on the AAO website. I am confident there is something there that you may not have considered for your practice – please take time to visit. Most recently, a TAD implant-supported expander form was added to the repertoire. COOP welcomes all member recommendations to modernize AAO forms and share subject suggestions (or example consent forms used in your practice) perhaps not yet broached by the AAO. Please note: a review of material or a new subject or modification does not confirm future use by the AAO. Significant vetting and legal review is required; however, we thank you for any contribution to the membership.

NATIONAL EATING DISORDERS ASSOCIATION (NEDA) collaboration: The new partnership between AAO and NEDA will be valuable for our membership and their clients, staff, and beyond. A COOP subcommittee aims to provide educational resources for the membership to prompt the recognition of eating disorders (EDs) and avoid triggering behaviors and language that may exacerbate

the illness. More information can be found on the AAO website.

AAO-SPONSORED WEBINARS: COOP embraces coordinating topics for AAO webinars throughout the year. A new topic was recommended by COOP, paving the path to a webinar addressing sensitive issues that clinicians face. The upcoming 2023 webinar schedule is as follows:

ORTHODONTIC STAFF CLUB (OSC): Doctors are encouraged to continue promoting the Specialized Orthodontic Assistant program and clarify the benefits of membership online (website access, fee discounts, and the like). The OSC Facebook page has been transformed into a valuable education resource, encompassing team training, bolstering member business acumen, clinical pearls, etc. Please join us: <https://www.facebook.com/groups/AAOstaffclub>

PRACTICE TRANSITION PORTAL: This committee will review, improve, and update the Practice Transition Portal as needed. Stay tuned for more updates!

SUSTAINABILITY SUBCOMMITTEE: We are starting a new committee within COOP that I will be leading. We are excited to begin working on resources that will help us limit our environmental impact as practitioners and as an organization—more updates to come.

COUNCIL TRANSITIONS: This 2023 summer, the COOP Council will be experiencing the transition of two of its members from PCSO and MASO. The new PCSO representative will be Adam Wilmerink from Nevada. Enrique Cruz will now serve as our Board of Trustees Co-Liaison from SWSO/Texas.

The next COOP meeting will be held in person in St. Louis on the weekend of December 9th.

I welcome you to contact me with questions, comments, or suggestions I may share with the Council throughout the year. I look forward to serving MASO in this capacity over the next few years! ■

AAO COUNCIL REPORTS



COUNCIL ON SCIENTIFIC AFFAIRS

Dr. Jose Bosio

MEETINGS

During the 2022-2023 year, the council met via Zoom on January 6, 2023. The council met again at Annual Session on April 21, 2023, in preparation for COSA activities. Also, COSA will meet via Zoom on January 5, 2024.

The following items were discussed during the meetings:

- There were no HOD recommendations sent to COSA in 2022.

ISSUED CONSIDERED

A. Hellman, Sicher, Graber Research Awards

1. Applications for Hellman, Sicher, Graber Awards
A total of 22 applications were received for consideration. Entries were discussed, and the council agreed on the selection of award recipients. See Attachment 1 for a list of the recipients. This year none were from the MASO region.
2. Hellman, Sicher, Graber Application
The 2024 Hellman, Sicher, and Graber application will be online. The deadline to apply is October 2, 2023.

B. Applications to Present Oral Research Lectures

A total of 64 applications to present Oral Research lectures were received. The Council accepted 27 applications for presentation. Thirty-seven applications were not accepted for an Oral Research lecture but were taken to give an E-Poster.

C. Applications to Present Table Clinic

A total of 30 applications to present Table Clinics were received. All were accepted for presentation.

D. Applications to Present E-Posters

Two hundred ninety-nine applications were received, and 299 were accepted for presentation.

An E-Poster lounge was in the exhibit hall at the 2023 Annual Session. E-Posters were available for viewing during Annual Session and on the AAO website until July 31, 2023.

E. Dr. William R. Proffit Resident Scholar Award

A total of 27 applications were received, and 26 were accepted for presentation at Annual Session with excellent attendance.

E. COSA's Program at Annual Session Ad-Hoc Committee

- The ad-hoc committee was formed in response to AAO President Dr. Nagel's request that councils rethink the council's work and sunset any programs that are no longer needed. COSA is working.
- Another AdHoc committee was formed to investigate how the COSA Oral Research program can enhance its awareness. The committee comprises **Drs: Jose A Bosio** (chair), Kelton Stewart, and J. Martin Palomo. A survey was developed and will be distributed to the SOE soon.

STRATEGIC PLAN REFERENCE

- Initiatives: Discovery and Innovation
- Goals and Objectives: Deliver offerings that address member needs to position AAO as the provider of choice for education, knowledge, and resources for all orthodontists.

BUDGET

- The proposed budget for the 2023-24 year is as follows:

Council Meetings	\$15,759
Miscellaneous	3,000
Attendee Interactive	14,840
Award Expense/Reception	6,930
Research Awards	18,000
Table Clinic Plaques/Awards 2023	2,965
Reviewer Honoraria	1,000
AAO Resident Scholar Award	46,700
TOTAL	\$109,194

RESOLUTIONS

No resolutions were presented to the 2023 House of Delegates from the Council on Scientific Affairs.

During the meeting on April 21, 2023, the following topics were discussed:

1. The Board approved the following members to serve on COSA: Dr. Marilia Yatabe (GLAO), Dr. Eser Tufekci (SAO), and Dr. Helder Jacob (SWSO)
2. The Board approved that Dr. Birte Melsen be named the 2024 Lifetime Achievement Award in Orthodontic Research.
3. There were no HOD recommendations sent to COSA.

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2023 American Association of Orthodontists Research Awards Council on Scientific Affairs

MILO HELLMAN RESEARCH AWARD

Anabolic response of intermittent parathyroid hormone and alendronate on the osteochondral tissue of TMJ
Po-Jung Chen, DDS, MDS, MDentSc
University of Nebraska

HARRY SICHER RESEARCH AWARD

The long-term effects of unloading on the transdifferentiation of condylar chondrocytes
Abbey Janssen, DDS, MS
Texas A&M University

THOMAS M. GRABER AWARDS OF SPECIAL MERIT

Novel machine learning algorithms for prediction of treatment decisions in adult patients with Class III malocclusion
Samim Taraji, DMD, MS
University of Illinois - Chicago

Comparison of mechanical properties of 3D printed and thermoformed orthodontic aligners
Nicholas J. Shirey, DMD, MS
University of Michigan

In-vivo evaluation of artificial intelligence-driven remote monitoring technology during orthodontic treatment
Karen Homsy-Przybylo, DMD, MS
University of Illinois - Chicago

Longitudinal microbiome changes in supragingival biofilm transcriptomes induced by orthodontics.
Taneisha Livingston Brown, DDS, MS
University of North Carolina – Chapel Hill



AAOF UPDATE
Dr. Orhan Tuncay

- We invite all AAO members to support the foundation by donating annually.
- The [Resident Education Program](#) was utilized by those orthodontic residents who attended the Chicago meeting. The AAOF saw over 400 orthodontic residents in the exhibit hall and will mail out the \$400 checks this summer to those who completed the process.
- The AAOF Awards Program will host a virtual workshop for those interested in applying for funding in 2024. The workshop is scheduled for Friday, June 16th, from 11 am – 1 pm central time. For more information about this funding program, please visit our [website](#).

AAOF COMMITS ADDITIONAL FUNDING TO THE CRANIOFACIAL GROWTH LEGACY PROJECT

The AAO Foundation committed an additional \$540,000 to the Craniofacial Growth Legacy Collection project - a complimentary website and database of nine collections from the U.S. and Canada of longitudinal craniofacial growth records in untreated children and adolescents. Under the direction of the steering committee led by Dr. Heesoo Oh, Dr. Mark Hans, Dr. James

McNamara, and Sean Curry, Ph.D., the newly committed dollars will fund the next phase – making the project one of the most highly recognized resources for orthodontic research. “The collection has significantly contributed to expanding knowledge on human development by giving access to 842 subjects and over 18,900 radiographs of irreplaceable longitudinal growth records. Our committee is grateful for the AAOF’s continued support of this historic project,” said steering committee chair Dr. Heesoo Oh.

DONATED ORTHODONTIC SERVICES (DOS) IS LOOKING FOR VOLUNTEERS

DOS is looking for volunteers to participate in this program. To learn about this program, please visit our [website](#). For more information, please email us at [dos\[at\]aaortho.org](mailto:dos[at]aaortho.org).

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DOS | **AAOF**
Donated Orthodontic Services | American Association of Orthodontists Foundation

VOLUNTEER

Help a child in need access a healthy smile by donating your time and services in your community.

AAO FOUNDATION DOES THE BEHIND THE SCENES WORK TO QUALIFY APPLICANTS IN NEED.

CONTACT US:

 jstocks@aaortho.org

 314.292.6582

 <https://www.aaofoundation.net/volunteer>

Thank you to those who have already volunteered through the DOS program. We appreciate your continued support.

REMEMBER THE AAO FOUNDATION IN YOUR CHARITABLE GIVING

Did you know that the AAO Foundation can accept donations online and via stock transfer as well? Please consider donating to the foundation in 2023. If you want to become a monthly donor, consider joining the Century Club. This is for donors who give a minimum of \$100 a month. Sign up for this option on our [website](https://www.aaofoundation.net/volunteer) or by calling the office directly.

Also, remember the AAO Foundation as you create your estate plans. If you have the AAOF in your will, as a beneficiary on your retirement plan or life insurance, mentioned in your trust, etc., please notify the AAOF staff office so we can adequately steward your donation as a [Keystone Society](#) member.

AAOF AWARDS PROGRAM

Since the inception of the AAOF Awards Program, the AAOF has given back over \$15 million to the orthodontic specialty through research and educational support.

Dr. Maysaa Oubaidin's proposal was chosen in 2022 for funding by the AAOF Board of Directors. Learn more about her project in the graphic below.



2022

Orhan C. Tuncay
Teaching Fellowship Award

This project is a survey-based study looking at adverse orthodontic outcomes due to closures of practices during COVID-19. The findings will enable practitioners to better prepare for a future wave of pandemics as well as lay a framework for how disruptions in continuity of care can influence treatment outcomes.

This award will give me the support to update myself with the latest developments in clinical orthodontics, become familiar with latest developments in research, technology, and their applications in clinical orthodontics to serve as an effective teacher

MAYSAA OUBAIDIN
University of Illinois, Chicago



AAOF **AAC**
Advancing the Specialty | American Association of Orthodontists

[aaofoundation.net](https://www.aaofoundation.net)

FOR MORE INFORMATION

If you have any questions or concerns, please get in touch with Jackie Bode, AAOF Senior Vice President, at 314-292-6546 or [jbode\[at\]aaortho.org](mailto:jbode[at]aaortho.org). We look forward to seeing you this fall on Amelia Island. ■



AAO HOUSE OF DELEGATES

Dr. Richard H. Albright, III

I want to thank the MASO delegation to the AAO for a successful meeting of the House of Delegates at the AAO annual session in Chicago. The delegation worked hard to represent our diverse membership during the policy and governmental workings of the AAO. The resolutions and the [2023 HOD Final Action Chart](#) can be reviewed on the AAO Member website.

The AAO remains a thriving association with strong membership retention and a stable financial foundation. Various actions were taken during the HOD to promote the association's future success. Some highlights are listed below. A new Financial Reserve Policy was adopted to guide future financial policy and asset allocation. The Consumer Awareness Program (CAP) was funded at the current level, following the recommendation of the COC. A task force was created to review the CAP funding level, method of funding, and member billing. The Clinical Practice Guidelines have been amended. The HOD voted to maintain the requirement for ADA membership at the time

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of the initial AAO membership application. The Speaker of the House selection process was further amended as the HOD transitioned from a constituent-based selection process to a merit-based one. Various other actions and referrals were made and can be found on our AAO Member website.

We are honored to represent MASO at the AAO House of Delegates. Please get in touch with your delegates with comments or questions that you may have. ■

MASO delegation at the AAO 2023 Annual Session in Chicago.



AAO PAC UPDATE

Dr. Doug Harte

RECORDS KEEP BREAKING... WINS KEEP COMING!

The AAOPAC had a year to remember.

The AAO Political Action Committee (AAOPAC) reached its Fiscal Year 2022-23 aspirational goal of \$400,000 by the May 31 deadline, raising \$427,851 after having broken the record earlier in the spring by surpassing \$373,775 in annual AAOPAC contributions.

AAOPAC begins the 2023-24 fiscal year under new leadership as Deborah Lien begins her term as Chair for the AAOPAC Board of Directors. Dr. Lien is the first woman to serve in this role since the PAC's founding in 1994. She takes over for Dr. Clark Colville, who did a phenomenal job this last year.

Our goals are to keep the number of new donors rising, ask more of those who have given regularly, and prove to our new residents and young practicing doctors that the AAOPAC has superior value they can't ignore. We need all our AAO members to donate, not just the 4% carrying the financial burden of AAO advocacy.

In that light, let me share with you some quick numbers. MASO had a total number of 74 contributors – our most ever. Last year they donated \$42,333. That still puts us behind MSO, PCSO, SAO, and SWSO but ahead of NESO,

GLAO, and RMSO. I am very proud of our contributors and our contributions.

I look forward to carrying this momentum into the Fiscal Year 2024!

The percentage of eligible members who gave last fiscal year was 5.4%. I know MASO can do better, and I will challenge each of us.

Now let's review some of our wins recently:

1. The AAO and the Nevada State Orthodontic Society Political Action Committee helped create a landmark Tele-dentistry Law passed and signed by the Governor of Nevada. Nevada is the first state to require an in-person exam before orthodontic treatment. This legislative success will now be shared with lawmakers in other states as a leading example for protecting patient health and safety when using tele-dentistry.
2. The AAO secured in the Florida budget for a Dental Student Loan repayment program. This big win can be shared with other states as a model program while presenting a solution to orthodontists working in medically underserved rural and urban areas of Florida to help pay down student debt loans up to \$250,000.
3. On June 22, the DC attorney general announced that Smiledirectclub would be required to release more than 17,000 patients across the US from onerous provisions in its nondisclosure agreements (NDAs) and change its refund policy for US patients as part of a settlement resolving a consumer protection lawsuit. The DC complaint alleged that the CPPA prohibited SDC conduct.

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- a. Having consumers sign NDAs to receive refunds
- b. They suppress negative reviews and information about harm allegedly caused by SDC aligners.
- c. Distorting online reviews
- d. Stopping consumers who claim SDC harmed them from reporting problems to government officials and law enforcement.

Patient protection, including protection from potentially deceptive contract practices, has long been a focus of the advocacy efforts of the AAO. The AAO advocacy team has

raised concerns with many attorney generals, the FDA, and FTC.

The AAO is involved in many states around the country, doing these sorts of things weekly and monthly. Your AAO team in St. Louis is doing a fantastic job.

These are some of the current wins and reasons we must remain vigilant in protecting our patients and the public. WE NEED YOUR CONTINUED SUPPORT. PLEASE CONSIDER GIVING TO THE AAOPAC. Every little bit helps. Every dollar amount is just the right size. Dig deep to protect our profession. ■



ABO CONSTITUENCY REPORT

Dr. Roberto Hernandez-Orsini

The ABO is committed to upholding our mission to elevate the quality of orthodontic care for the public by promoting excellence through certification, education, and professional collaboration.

ABO Yearly Update

Board certification allows orthodontists to lead the way together as we collectively showcase our dedication and accomplishment to our peers and patients. Please view this [video](#) created for use by board-certified orthodontists to effectively communicate the importance of using a specialist.

The ABO proudly announces that 61% of AAO orthodontists are board certified.

The steps to become board certified are as follows:

- **Step 1 - Successful completion of the ABO Written Examination** (which, once successfully passed, never expires). Applicant must have graduated or enrolled in an advanced specialty education program in orthodontics and dentofacial orthopedics in the United States or Canada, accredited by the Commission on Dental Accreditation (CODA). Orthodontic residents must have completed at least 18 months of their program by the Written Examination date to be eligible to take the Written Examination. The exam comprises 240 multiple-choice questions on subject areas outlined by CODA, divided between 4 modules. It is administered at Pearson-Vue Testing Centers in the United States and Canada. The 2023 Written Exam Practice Questions and several archived reading lists are available on [The ABO Website](#) for exam preparation.
- **Step 2 - Successful completion of the ABO Scenario-based Clinical Examination.** This exam is composed of four domains created with ABO-provided

patient cases. The questions are designed to objectively evaluate an orthodontist's knowledge, skills, and critical thinking ability. The Scenario-based Clinical Exam is administered worldwide at Pearson-Vue Testing Centers. To ensure accuracy and consistency, all Scenario-based Clinical Examinations are scored by multiple ABO examiners on a pass/fail basis. Exam preparation resources are available on [The ABO Website](#), including a study guide, examinee orientation and introduction to the exam format, sample cases, and videos. Additionally, orthodontists are advised to review their patients' cases to strengthen critical thinking skills and practice objectively analyzing facts to form their judgments. Tools previously created to assess case outcomes will continue to be used within the examination process, including the Case Management Form, Cephalometric Superimposition Technique and Interpretation, and the Cast Radiograph Evaluation form.

- **To Remain Active:**
Certification Renewal must be completed every ten years. As a demonstration of commitment to lifelong learning, board-certified orthodontists must complete certification renewal every ten years. The process may be started 36 months before a certificate's printed expiration date. Currently, two options are available for completing certification renewal. Only one of the following two should be completed: A multiple-choice Online Board Case Examination; A Mail-In Case Report Examination. Both options also require the submission of Continuing Education Credits. Detailed information about Certification Renewal can be found on [The ABO Website](#).

The ABO staff is available to answer any question regarding board certification! Please contact:

Written Examination Certification Coordinator:
Nicole Huson | [Nicole\[at\]AmericanBoardOrtho.com](mailto:Nicole[at]AmericanBoardOrtho.com)

Clinical Examination Coordinator:
Kim Koch | [Kim\[at\]AmericanBoardOrtho.com](mailto:Kim[at]AmericanBoardOrtho.com)

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Written Examination Update:

- The 2023 ABO Written Examination was administered to 450 examinees on April 4, 2023, at Pearson-Vue Testing Centers in the United States and Canada. The examination had a 97% pass rate.

The next Written Examination is scheduled for April 2, 2024, with online registration to open later in 2023.

Clinical Examination Update:

- The ABO recently conducted the February 2023 Scenario-based Clinical Examination at Pearson-Vue Testing Centers Worldwide. A total of 165 orthodontists were certified during the 1st and 2nd Quarters of 2023, including the February examination, which had a 74% pass rate. In addition, 26 orthodontists completed their 10-year certification renewal requirements. Please visit the [ABO website](#) for a complete listing of names by constituency for this period.

The next Clinical Examination is scheduled for February 22-23, 2024, with online registration available thru October 20 (or until all available slots are filled). A second examination will be offered on September 17, 2024; registration opening is scheduled for November 1, 2023. These examinations will be held worldwide in Pearson-Vue Testing Centers. As a reminder, travel to St. Louis, Missouri, is no longer required with this testing format.

In 2025, The ABO will transition to offering one Scenario-based Clinical Exam per year. The scheduled date for the 2025 exam is September 9, 2025.

Educational Update:

- Beginning in 2024, The ABO will no longer incorporate the e-CRE (Electronic-Cast Radiograph Evaluation) in our Clinical Examination as we have done during past exams. The CRE is a vital outcome assessment tool, and we will continue using it in our scenario-based clinical exam. Critical thinking questions related to the CRE (Cast Radiograph Evaluation) will remain on the examination. It is recommended that residents and orthodontists continue using this tool for outcome assessments. New sample questions demonstrating how the CRE will be tested in future exams are currently available on The ABO Website.
- We continue working towards a fair, reliable, and valid exam and constantly evaluate all the statistics with our psychometrician. We recently started developing a Practice Analysis Project. A panel of board-certified orthodontists and an additional oversight group have been established to conduct a Practice Analysis with the ABO psychometrician for all three examinations. Practice analysis studies serve as the bedrock for defining the essential components of credentialing programs. They are the primary evidential link between the responsibilities of the professional role and the certification requirements. Thus, practice analyses are critical in establishing and safeguarding a credentialing examination's practice relevance, content validity, and legal defensibility.

- The ABO conducted focus group interviews with key stakeholders as a component of research for developing an updated brand style guide and marketing strategy.
- During recent evaluations of the ABO Advocacy Program, it was determined that program enhancements are necessary to meet future examinees' needs adequately. The ABO has partnered with an instructional design firm and is currently in the design and discovery phase of developing a new ABO Ambassador Program. The ABO anticipates a 2024 launch of this exciting new update and will release additional communications as more information becomes available. The ABO greatly appreciates the dedication and work of the many Advocates that have guided residents through the board certification process over the years.
- The ABO's 2023 Educators Symposium will be titled "Critical Case Analysis," with Dr. Peter Buschang as the honored guest lecturer. Orthodontic Department Chairs, Program Directors, AAO Trustees, CDABO Council, and ABO Emeriti are invited to participate.
- Find and follow the ABO on Social Media: Instagram: [@americanboardorthodontics](#); Facebook: <https://www.facebook.com/americanboardoforthodontics/>
- [The ABO Portal](#) is an excellent resource for all board-certified orthodontists. Users can track CE credit hours through the dashboard, print a complimentary verification letter, access the "It Takes A Specialist" video and dedicated toolkit, shop The ABO Store, download items from The Educational Toolkit, and so much more. The ABO Store and Educational Toolkit are under the Resources tab on the top right side of the screen. The Educational Toolkit includes many complimentary downloads: customizable consumer brochures, patient/team materials, sample website copy, sample press releases, the ABO logo & seal designs in multiple file formats, and a Brand Standards Guide for using The ABO branding assets. The ABO Store has many items, like duplicate certificates and pins, brochures, window clings, and more.

2023-2024 ABO Directors:

The ABO Directors for the 2023-2024 year are as follows:

Dr. Timothy Trulove, President, representing the Southern Association of Orthodontists; Dr. Jae Hyun Park, President-Elect, representing the Pacific Coast Society of Orthodontists;

Dr. Roberto Hernandez-Orsini, Secretary-Treasurer, representing the Middle Atlantic Society of Orthodontists;

Dr. P. Emile Rossouw, Director, representing the Northeastern Society of Orthodontists; Dr. Anthony Puntillo, Director, representing the Great Lakes Association of Orthodontists;

Dr. Daniel J. Rejman, the Director, representing the Rocky Mountain Society of Orthodontists;

Dr. Patrick Foley, Immediate Past President, representing the Midwestern Society of Orthodontists.

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The AAO House of Delegates confirmed Dr. Minnie Vishwanath as the new 2023-2024 ABO Director representing the Midwestern Society of Orthodontists.

Due to unforeseen circumstances, the Director position for the Southwestern Society of Orthodontists (SWSO) is currently open, with nominees being solicited directly from the constituency. Please contact the SWSO now if you are interested in applying for this Director position.

ABO at the 2023 AAO Annual Session

- The ABO was pleased to recognize the 2023 award recipients during the ABO 2023 Awards Night in Chicago, IL. Congratulations to the following individuals:

Dr. Lawrence Andrews – Albert H. Ketcham Memorial Award
 Dr. John Grubb - Dale B. Wade Award of Excellence in Orthodontics
 Dr. Henry Fields - Earl E. and Wilma S. Shepard Distinguished Service Award
 Dr. Frans Currier - O.B. Vaughan Special Recognition Award

- The award recipients for 2024 were announced to include the following individuals who will be recognized during next year's 2024 AAO Annual Session in New Orleans, LA. Congratulations!

Dr. Peter Greco – Albert H. Ketcham Memorial Award
 Dr. Allen Moffitt - Dale B. Wade Award of Excellence in Orthodontics
 Dr. Eladio DeLeon - Earl E. and Wilma S. Shepard Distinguished Service Award
 Dr. Leslie Will - O.B. Vaughan Special Recognition Award

- The ABO hosted the following events during the 2023 AAO Annual Session in Chicago, IL:

- ♦ ABO Emeriti and Examiner Breakfast
- ♦ Newly Board-Certified Orthodontists Welcome Reception—to celebrate orthodontists who achieved board certification since the 2022 AAO Annual Session.
- ♦ The ABO Booth was located outside the entrance to Exhibit Hall. ABO Directors and staff were available to answer questions, promote board certification, and receive feedback. ■



SOCIETY OF EDUCATORS Dr. Michael Roth

This year's Society of Educators Meeting was held at the AAO meeting in Chicago. This year's keynote speaker was Dr. Henry Fields, the Chair of Orthodontics

at Nationwide Children's Hospital and a Professor of Orthodontics at The Ohio State University College of Dentistry. He earned his Dental Degree and masters in pediatric dentistry at the University of Iowa and then completed a masters in Orthodontics at the University of Washington. He then joined the Pediatric Dentistry and Orthodontics departments at the University of North Carolina School of Dentistry. Dr. Fields has served as Dean of The Ohio State University. His scholarly works have included

papers and chapters in books, and he is a reviewer for several journals, including Pediatric Dentistry, the Angle Orthodontist, and the AJODO.

Dr. Fields shared his varied experiences in practice and education and provided advice on interviewing residents. He suggested looking for things not on a CV and asking residents what they know about us. He also has a committee dedicated solely to verifying the credentials of applicants.

Additionally, we were brought up to date on the ABO scenario exam. The Society of Educators meeting is held annually during the AAO meeting and is open to any educators, either full-time or part-time. Many graduate programs have a faculty membership, or one may apply individually for membership. It is a worthwhile meeting and a great way to network with other educators. ■

How to Choose the Right Credit Card for You

Controlling costs and reducing them where possible is just good business practice. Considering your expenses, considering how you pay for them is also a good exercise. There are a variety of business credit cards with different types of perks, including cash-back offers.

If you still need to compare your current card to the new AAO business credit card, it may save you hundreds or even thousands of dollars. The AAO Business credit card was designed specifically for orthodontists and offers several benefits, including 5% cash back on AAO purchases, AAO

dues, and AAO endorsed and affiliate partners, 2% on all dental category purchases, and 1% on everything else.

Review your past purchases and do the math to understand your potential savings.

With AAO membership renewals and upcoming AAO meetings, now is the perfect time to compare. Learn more at aaocard.com. ■





Strategic Plan 2029-2023

GOAL	Enhance Communications to Members
OBJECTIVES	<p>MASO will use a variety of communication methods to convey the value of membership.</p> <p>MASO will tailor communications to members to make them more meaningful.</p>

GOAL	Engage Members and Provide Value
OBJECTIVES	<p>MASO will understand what members want and need from the organization.</p> <p>MASO will continue to offer strong support to Residents.</p>

MASO MISSION STATEMENT

The Middle Atlantic Society of Orthodontists, a constituent of the American Association of Orthodontists, shall promote ethical and quality orthodontic care while advocating and providing a voice for our members, components and educational institutions.

GOAL	Elevate Member Knowledge and Expertise
OBJECTIVES	<p>MASO will provide quality educational content to members in ways that meet member needs.</p>

GOAL	Advance Organizational Effectiveness
OBJECTIVES	<p>MASO will utilize its governance structure to become more effective and responsive to members.</p>



NOMINATING COMMITTEE REPORT

Dr. Francis Picon

The slate was presented to the Board by the Nominating Committee Chair, Dr. Francis Picon, during the MASO Board Meeting Conference Call June 7, 2023 and was approved by the Board. Dr. Picon will confirm appointments to be posted in the MASO Journal, which is to be circulated to the membership and available on the MASO website. The slate will be presented to the general membership during the MASO Member/Business Meeting at 4:30 PM on Friday, September 22 at the Gaylord National Resort during the GLAO-MASO Annual Session.

The Nominating Committee consists of eight (8) members: The Immediate Past President, the prior immediate past president, and six members, one from each MASO component. The President of each MASO component, or a designee, is given preference for this position. The senior Past President is Chairperson of the Committee. Each is to serve for one year.

Nominating Committee Members for 2023-24

1. Dr. Francis Picon, Prior (senior) Immediate Past President, Chair
2. Dr. Maddy Goodman, Immediate Past President
3. Dr. Jean Asmar, representing DC
4. Dr. Chris Scott, President MD
5. Dr. Hillary Oweisy, President DE
6. Dr. Michael Perillo, President NJ
7. Dr. Brunilda Ortiz, President PR
8. Dr. Jake Ortiz-Guiliani, President PA

Elections are held at the Annual Session during the General Membership meeting. (Term year: Annual Session to Annual Session) Directors, in general, will serve for a total of six years (two three-year terms) before becoming eligible for the position of President-Elect. Under special circumstances, a Director/Officer may continue on the Board for one additional year to maintain the order of succession

EXECUTIVE COMMITTEE

	<u>Term:</u>
PRESIDENT: Dr. Alireza Omid Rajaei (MD)	2023-24
PRESIDENT ELECT: Dr. Sana Augustus (DC)	2023-24
	NOMINEE
SECRETARY: Dr. Paul Batistini (NJ)	2022-24
TREASURER: Dr. Lynette Garcia (PR)	2023-25
IMMEDIATE PAST PRESIDENT: Dr. Dave Harmon (MD)	2023-24
TRUSTEE: Dr. Steven Siegel (MD)	2022-24

DIRECTORS

As a result of the newly adopted Bylaws, Directors now serve two three-year terms:

	<u>Term:</u>
1. Dr. Tejy Thomas (PA)	2023-26
	(Will be starting the 1st year of his second 3-year term)
2. Dr. Brienne Flagg (DE)	2021-24
	(Will be starting the 3rd year of her first 3-year term)
3. Dr. Vanessa Morenzi (NJ)	2022-25
	(Will be starting the 2nd year of her first 3-year term)
4. Dr. Jose Bosio (MD)	2023-26

NOMINEE

DELEGATES (6)

Six (6) delegates are elected to the AAO for a two-year term; no more than three (3) consecutive terms may be served; past delegates are required to wait one (1) year before being re-nominated.

1. Dr. Richard Albright III (PA)	2022-24
	Dr. Albright is completing his 1st year of his 3rd two-year term.
2. Dr. Douglas Harte (NJ)	2022-24
	Dr. Harte is completing his 1st year of his 3rd two-year term.
3. Dr. Kathy Marshall (DC)	2021-23
	Dr. Marshall is completing her 2nd year of her 2nd two-year term.

RE-NOMINATE

4. Dr. Richard Isaacson (NJ)	2022-24
	Dr. Isaacson is completing his 1st year of his 2nd two-year term.
5. Dr. Ty Saini (MD)	2022-24
	Dr. Saini is completing his 1st year of his 2nd two-year term.
6. Dr. Jean McGill (PA)	2022-24
	Dr. Saini is completing his 1st year of his 2nd two-year term.

ALTERNATE DELEGATES (4)

Alternate delegates are elected to serve a one-year term; no more than two consecutive terms may be served before an individual is either elected as a Delegate or removed from the delegation. The MASO President will serve as the First Alternate and the MASO President-Elect as Second Alternate.

1. Dr. Alireza Omid Rajaei (MD) (As required by MASO MOP)	2023-24
	(MASO President)
2. Dr. Sana Augustus (DC) (As required by MASO MOP)	2023-24
	(MASO President Elect)
3. Dr. Lara Minihan (MD)	2023-24

NOMINEE

4. Dr. Jake Orozco (PA)	2023-24
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NOMINEE

MASO COMMITTEES

I. Communications/Publications

Consists of the MASO Editor and four (4) at-large members elected for a 3-year term.

1. Dr. Normand Boucher (PA) Chair/Editor	2022-25
2. Dr. Ryan Tamburrino (PA) 724-601-1547	2020-23
3. Dr. Robert Laraway (MD)	2021-24
4. Dr. Lillian Height (MD)	2022-25
5. Dr. Anh Dao (MD)	2023-26

NOMINEE

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NOMINATING COMMITTEE REPORT

CONTINUED FROM PAGE 36

II. Education/Research (Should be a full- or part-time educator)

Consists of three (3) members elected for a 3-year term.

1. Dr. Jose Bosio (MD) 410-706-7908 **Chair**2021-24
2. Dr. Lobat Zainali (DC)2022-25
3. Dr. Brunilda Ortiz-Giuliani (PR)2023-26
NOMINEE

III. Government Affairs

Consists of six (6) members, two to be elected each year, for a 3-year term.

NOTE: Chair to be elected by the Nominating Committee

1. Dr. Padma Mukherjee (NJ) **Chair**2021-24
2. Dr. Daniel Diaz Rubayo (PR)2021-24
3. Dr. Jennifer Morrison (NJ)2022-25

4. Dr. Andrew Pedersen (PA)2023-26
5. Dr. Elise Tigani Endres (DC)2023-26
NOMINEE
6. Dr. Briana McRae (MD)2023-26
NOMINEE

IV. Member Services: Membership/Ethics/Practice Transition

Consists of five (5) members elected to a 5-year term

1. Dr. Courtney Rubin (PA) 516-428-51732020-25
2. Ambar Mier Lopez (PR)2021-26
3. Dr. Natalie Miller (MD)2022-27
4. Dr. Catherine Campbell Worthington (MD)2022-27
5. Dr. Anthony Suriano (NJ)2023-28
NOMINEE ■



GOVERNMENT AFFAIRS COMMITTEE REPORT

Dr. Padma Mukherjee, Chair

The 2023 AAO Advocacy held its meeting in Washington, D.C., on April 5th and 6th, with a record number of residents in attendance. Representatives from the national and regional levels of the AAO visited Capitol Hill to help address this. They brought up legislative concerns that affect our profession. These included but were not limited to:

1. Workforce shortages since COVID
2. Protecting flexible spending accounts through the support of the RAISE Act
3. Supporting small businesses through tax reform
4. Reducing student debt through the student loan refinance act

5. Health and Safety concerns for our patients due to mail-in order Orthodontics

The MASO Governmental Affairs committee comprises six (6) members, one from each component society. At each Annual Session, two (2) members are elected for three (3) years. The current Government Affairs Committee members are:

Dr. Padma Mukherjee, Chair
Dr. Daniel Diaz Rubavo
Dr. Jennifer Morrison
Dr. Andrew Pedersen

MASO encourages its members to be active in their state's efforts and should consider contacting their state legislators. It's an honor to serve as committee chair, and I encourage you to contact any of our members with questions and feedback. ■

COMPONENT NEWS



Maryland Society of Orthodontists Dr. Chris Scott

The Maryland State Society of Orthodontists (MSSO) had two virtual seminars in Spring 2023. The first featured Dr. Ashley Hoders, a dual-trained periodontics/ prosthodontics clinician, with her incredible lecture entitled "Phenotype Driven Treatment Planning." The second was given by Dr. Michelle Neal, who talked about pre-surgical orthodontic treatment using aligners.

The current board members are President Chris Scott; Vice President Monica Schneider; Secretary-Treasurer, Moshe Stern; Director Natalie Miller. We also have a newly appointed administrative team consisting of Abby Bernhardt and Hanna Gauss.

Updating our website, increasing our communication amongst members, and developing an online job opportunity posting has been our main focus this year, aside from hosting seminars.

A fall 2023 seminar is in the works for October and will be a very informative lecture for all members! ■



New Jersey Association of Orthodontists Dr. Michael Perillo

Greetings from the Garden State! After completing our third meeting in the last series as an in-person event with Dr. Tom Baron and Dr. Chris Feldman in April of 2023, we are planning our subsequent continuing education sessions for the 2023-24 cycle. It was the first year since the pandemic that all three continuing education sessions were in person!

Dr. Sal Carcara, our Continuing Education Chair, and the executive board continue bringing the best and brightest speakers to our great state! We have asked our members for input for the upcoming cycle before finalizing our lecture schedule. We sent an online survey to better meet the needs of our members. Once the survey is completed, the executive board will develop the slate of speakers doing our best to meet the needs of the NJAO members and their staff.

Dr. Cassie Kahn, current executive board Treasurer, represented the NJAO at the Annual AAO Leadership Conference 2023 in Las Vegas. Cassie brought great ideas to our organization as we plan future goals and continuing education.

Regarding recent changes to the NJAO, we are excited to have the addition to Drs. L Bui and Khushali Shah to the Executive Board.

Dr. Bui currently practices at Innovative Orthodontics with Dr. Dan Bills, which has three locations in NJ. After graduating from the DMD Program at the University of Pennsylvania in 2018, she completed her Orthodontic Certificate from the University of Pennsylvania in August 2020.

Dr. Shah currently practices in North Bergen, NJ. She graduated from the New York University College of Dentistry with a DDS. Dr. Shah then completed a one-year General Practice Residency at NYU Langone in Brooklyn. Afterward, she went on to complete a 3-year residency program in Orthodontics at St. Barnabas Hospital in New York City.

Drs. Bui and Shah serve as the Co-Chairs of the New Members Committee for the NJAO and will bring new insight and positive change to attract young members and recent graduates to our organization.

We will keep you updated with our upcoming continuing education schedule and any exciting and new changes to our organization. See you at the shore! ■



Pennsylvania Association of Orthodontists Dr. Jacob Orozco

The Pennsylvania Association of Orthodontists (PAO) Board Members met again this past spring at the Hotel Hershey in Hershey, PA. The Board members discussed a continued focus on spreading awareness about the PAO and the benefits of membership and involvement in organized dentistry, as well as expanding the role of the

Board in offering support and guidance to PAO members on current trends and topics facing orthodontists today, such as CBCT regulation.

We are planning informational lunch and learns at the Pennsylvania residency programs. A member happy hour is in the works for Pennsylvania orthodontists attending the September 2023 MASO/GLAO meeting in Washington, D.C.

Please don't hesitate to reach out with any questions or ideas. We are all better when we're working together. I look forward to seeing everyone at the MASO/GLAO joint session this fall. ■



**ALBERT EINSTEIN
MEDICAL CENTER**
Dr. Vanessa Morenzi

Resident Activities

Our rising second-year residents, **Drs. Jessica Azer, Alison Novakovic, and Seung (Hannah) Yu** enthusiastically welcomed those who entered our program on June 26, 2023. They are:

- **Dr. Ana Maria Gonzalez** completed an AEGD at Texas A&M and practiced in Texas before moving to Philadelphia.
- **Dr. Alexander Stanco** completed an AEGD at the Winslow Indian Health Care Center through NYU Langone Hospitals and practiced dentistry in Arizona before returning to the east coast.
- **Dr. Nicoletta Venturini** completed a GPR at NY-Presbyterian Brooklyn Methodist Hospital and was practicing in Florida before relocating to join her classmates at Einstein Ortho.

We extend our gratitude to the members of the Selection Committee – **Drs. Alan Borislow, Peter Greco, Kathleen Pale, Michael Roth, Adam Weiss** and the residents for graciously serving on the selection committee. We also sincerely thank each of our **volunteer and part-time faculty** for their invaluable support and dedication to the program and the education of our residents. Without the valued commitment of the part-time faculty, it would be almost impossible to provide a quality educational experience. We are indebted to each of our community-based clinicians who give their time to teach and mentor our residents.

As a 3rd year resident, **Dr. Mordechai (Mordy) Fried** presented his research at the Albert Einstein Medical Center's Research Recognition Week in May 2023 alongside the other medical disciplines within the hospital. His research was entitled "Pediatric Sleep Disordered Breathing and Non-Nutritive Sucking Habits." Dr. Fried also presented his research to the Dental Department as part of Fogel Grand Rounds in June 2023. In February 2023, Dr. Fried submitted a clinical case report to the Albert Einstein Medical Center Case Report Competition that spanned many disciplines and departments within the hospital.

As a 3rd-year resident, **Dr. Justin Middleberg** presented his research in poster form as part of the Albert Einstein

Medical Center's Research Recognition Week in May 2023. Dr. Middleberg was also selected as a peer reviewer for this research competition. His research was titled "Investigation of Temporary Anchorage Device Use and its Predisposition to Failures" in the Albert Einstein Medical Center patient population. The information gathered by Dr. Middleberg was also used as a Division-wide outcomes assessment of TAD use within our Department. (While there's always room for improvement, the results were much better than anticipated.) Dr. Middleberg also presented his research to the Dental Department as part of Fogel Grand Rounds in June 2023. In February 2023, Dr. Middleberg submitted a clinical case report that involved the participation of multiple dental specialties and disciplines to the Albert Einstein Medical Center Case Report Competition.

Dr. Madeline Pitz submitted her "Early Orthodontic Intervention for Maxillary Left Central Incisor Impaction" case report as part of the Albert Einstein Medical Center Case Report Competition in February 2023. Her submitted case treatment involved multiple dental specialties and disciplines. Dr. Pitz's research project was titled "A Comparison of Digitally Calculated Bolton Analyses using Invisalign, uLabs, and OrthoCad." She presented her research in poster form as part of the Albert Einstein Medical Center's Research Recognition Week in May 2023. Dr. Pitz also presented her research to the Dental Department to celebrate The Maxwell S. and Anna K. Fogel Memorial Conference on Dental Medicine in June 2023.

The Class of 2025, **Drs. Azer, Novakovic, and Yu** were happy to participate in the Tweed Foundation Course in Tucson, Arizona, in April 2023. Based on their feedback to program leadership, this experience was very beneficial. They gain a tremendous boost in confidence because of their greatly enhanced ability to manipulate archwires. These reinforced wire manipulation skills will be clinically relevant as these residents assumed the transfer of patient care from their graduated partners.

Program Graduate Activities

For our most recent graduated Class of 2023, **Dr. Mordy Fried** has entered private practice in northern and central New Jersey. **Dr. Justin Middleberg** has joined a private practice in Philadelphia. **Dr. Madeline Pitz** has entered private practice in Brooklyn, NY. Due to their many teaching and mentoring talents, Drs. Fried, Middleberg, and Pitz have each been invited to join the teaching staff at Einstein Medical Center in the Division of Orthodontics. The Class of 2023 is grateful to their faculty and teachers for their unending and generous efforts in preparing them to enter the orthodontic profession.

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Faculty Activities

We wish to offer our heartfelt thanks and heartiest congratulations to our decades-long faculty member, **Dr. Ross (Rusty) Long, Jr.**, on his recent retirement from teaching. Our program, our residents, and our graduates shall miss his dedication, insight, humor, and humility in guiding them through the processes of research, clinical care, cleft and craniofacial growth and development,

orthognathic surgery, and navigation into our wonderful profession. We wish Rusty all the best for many years to come.

All are welcome to come and visit us at Albert Einstein Medical Center. We are proud of our legacy and the residents we educate today who will become tomorrow's clinical and professional leaders. ■



CTOR ACADEMY

Dr. Mani Alikhani

I am honored to introduce you to CTOR Academy in Hoboken, NJ. We received CODA accreditation in Spring 2022 and enrolled our first class of six students in July 2022. They are now PGY2s, and our new PGY1s are just beginning their journey toward joining us as specialists. We are also deep into the 2024 application cycle, which will give us a full roster of 18 students in our 36-month program. This is a fascinating time for all of us at CTOR Academy.

We look forward to sharing our commitment to educational excellence in Orthodontics and Dentofacial Orthopedics with you through MASO.

Current Residents

We now have 12 students enrolled in our program. Our current PGY2 students will always hold a special place in CTOR Academy's history as our inaugural class. They are an exceptional and diverse group that brings a wealth of experience to the program.

- **Shamelly Diaz, DDS** - PUC in the Dominican Republic
- **Hala Elsamna, DMD** – Rutgers University
- **Eric Halejian, DDS** - University of Maryland
- **Dayoon Lee, DDS** – New York University
- **Khalil Lion, DDS, MPH** - The Syrian Private University in Damascus, Syria
- **Maria Muñoz, DMD, MS** – University of Puerto Rico



Likewise, our PGY1s are outstanding students who were our first class selected through PASS and the National Dental Match programs. They were chosen from 148 applicants and were among our top-ranked candidates.

- **Bassam Butto, DDS** - UCLA
- **Vincent DeMaio, DDS** – Columbia University
- **Jenna Heitzler, DDS** – SUNY Buffalo
- **Maxwell Herszage, DDS** – Columbia University
- **Chie Hung (Alain) Hu, DMD** – Midwestern University
- **Leelah Weitz, DDS** – Columbia University

CTOR Academy Faculty

We are also fortunate to have a roster of 8 full-time and over 20 part-time faculty members. They are dedicated academicians with broad clinical, research, and teaching experience. We continue recruiting faculty committed to improving patient care by training future specialists who will rely on evidence-based, patient-centered care protocols in their private practice, academia, industry, leadership, or other chosen career paths.

Our full-time faculty are:

- **Mani Alikhani, DMD, MS, PhD** – Dean, Professor
- **Jeanne Nervina, DMD, MS, PhD, ABO Diplomate** – Program Director, Professor
- **Mona Alikhani, MD, MS** – Associate Dean of Student Affairs, Assistant Professor
- **Fanar Abdullah, DDS, MS** – Clinic Director, Assistant Professor
- **Chinapa Sangsuwon, DDS** – Assistant Professor
- **Marcos Giovanetti, DDS, MS, PhD** – Professor
- **Andreina Reimpell, DDS** – Assistant Professor
- **Zahra Khalid, BDS, MS** – Assistant Professor

Fellowships and Continuing Education

In addition to our CODA-accredited Orthodontics and Dentofacial Orthopedics Program, we offer Clinical and Research Fellowships for individuals interested in first-hand experience in basic, clinical, or translational orthodontics research. These fellowships range from 3 months to 3 years and provide clinicians with hands-on experience in various orthodontics techniques.

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GRADUATE PROGRAM REPORTS

For clinicians who want to learn more about orthodontics but cannot commit extended time to a fellowship, we offer CE courses in Advanced Orthodontics and Mechanotherapy.

While training future generations of orthodontists is our primary mission, CTOR Academy recognizes that another education mission extends beyond our specialty. This is why we offer an array of Continuing Education Courses in general dentistry and practice compliance.

In Closing

Thank you for this opportunity to introduce you to CTOR Academy. We look forward to reporting to you on our progress as we grow. And, of course, our faculty and students will see you at MASO and AAO meetings, where we can exchange ideas on academia and research to improve Orthodontics and Dentofacial Orthopedics for the benefit of our patients. ■

HOWARD UNIVERSITY

Dr. Kathy L. Marshall



We congratulate those who started our program in July 2023 as we say farewell to our outgoing graduates.

The research thesis of our graduating residents are as follows:

Dr. Brionna Anthony, *The Patterns of Skeletal and Dental Malocclusions in Black Orthodontic Patients*

Dr. Natasha Bharucha, *A Retrospective Study: To Determine the Relationship Between the ABO Discrepancy Index (DI) and the Medicaid Handicapped Labio-lingual Deviation (HLD) Index and Barrier to Care*

Dr. Samuel Harris, *Elastic Colors and Psychology: Its Implications and Effect on a Patient's Emotion, Feeling, Mood and Its Effects on Treatment Compliance*

Dr. Jillian Pailin, *Smile Aesthetics and the Midline Diastema Dilemma in Relation to Orthodontic Correction*

Dr. Brandon Thompson, *In Vitro Measurement of Tensile Stress and Strain in Passive Self Ligating Bracket/Wire Interface (Network)*

Dr. Rochelle Watson, *Evaluating the Effects of Prolonged Rinsing of the Oil Extract from Nigella Sativa on the Constituents of Saliva*

Graduate **Dr. Javen Durham**'s research, *Treatment of Enamel White Spot Lesions with Fluoride*, with preceptor **Dr. Indra Mustapha**, our Postdoctoral Research Director, will be presented at our upcoming research meeting. Congratulations, Dr. Durham!

We are supremely grateful to Howard University Faculty and our generous HU Orthodontic Alumni Association for their tremendous response to the needs of our residents and the program.

Congratulations to our alums who have achieved ABO Diplomate status and those who have recertified. ■

MEDSTAR WASHINGTON HOSPITAL CENTER

Dr. Linda Hallman



The MedStar Washington Hospital Center Orthodontic Department is pleased to submit a departmental update. Thank you for the opportunity. We have had another exciting and successful year at WHC.

We will say goodbye to our Chief residents, **Drs. Marshall Carroll** and **Jeremy Vistica**. Dr. Carroll will return home to South Carolina, where he will assume ownership of a private practice. Dr. Vistica will move to Huntington Beach, CA, where he will join a private practice. We are proud to send these two outstanding orthodontists into the community to practice and become leaders in their respective communities.

As our Chief Residents graduate, we are pleased to promote our PGY1 residents, **Drs. Logan Cash** and **Carlos Galvez**, to PGY2 residents, where they will assume the responsibilities of Chief Residents. Dr. Cash received his dental degree from the University of Kentucky. He also served as an officer in the US Air Force. He completed his AEGD Program at the US Air Force Academy. Dr. Galvez completed his dental degree at Columbia University, New York. While at Columbia, he was and remains active in the Hispanic Dental Association.

We welcomed our incoming class of residents in June 2023. **Dr. Madison Moore** graduated from Southern Illinois University Dental School, where she received the Dean's Student Research Fellowship Award. **Dr. Hannah Rothback** received her dental degree from the University of Maryland. In addition to receiving multiple academic

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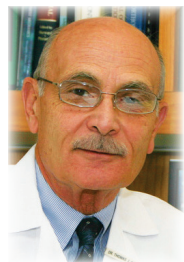
GRADUATE PROGRAM REPORTS

accolades through dental school, she is an accomplished violinist and holds a Black Belt in Tae Kwon Do. We were very excited to welcome both outstanding individuals to join our staff. We continue to be blessed with exceptional residents, an asset for the profession's future.

We are proud to announce that **Dr. Sheira Ramos Velez** has accepted the position of Clinical Director at our affiliate educational facility. She has been an outstanding addition

to our faculty, and we look forward to her leadership in this new position.

And as always, as we look back on the past year, we appreciate how fortunate we are at MWHC to work together with excellent and committed faculty, outstanding residents, and a strong commitment from our institution, Medstar Washington Hospital Center, as well as Children's National Medical Center. ■



RUTGERS SCHOOL OF DENTAL MEDICINE

Dr. Thomas Cangialosi

I wish to congratulate **Drs. Yasmine Aboud, William Buchbinder, Benjamin Anderson, Suhina Kapoor,** and **Brandon Smith** graduated from the Rutgers program on May 15, 2023. All received both the certificate in Orthodontics and the Master of Dental Science degree. I also want to especially thank **Dr. Brandon Smith**, our Chief Resident during the past year, for representing his fellow residents so well and for his help in advancing technology in our department with intraoral scanning and 3-D printing.

I also wish to welcome five exceptionally well-qualified first-year residents, **Drs. Athena Fu** from Rutgers, **Hyori**

Kim from Boston University, **Rumyana Lazarova** from Columbia, **Kellie Lee** from UCLA, and **Ashley Tran** from the University of Texas El Paso, who entered the program on July 5, 2023. They are all busy with record gathering, Diagnosis and Treatment Planning, and wire bending as they embark on their careers in our great specialty.

We are in the process of hiring two additional part-time faculty members who will work with our pre-doctoral students as well as residents in the clinic. Both are ABO certified, enhancing our mission to have all our graduates become Board Certified.

Finally, I would like to thank our full-time and part-time faculty for all their dedication and hard work and our Alumni and Alumnae for supporting our Department. ■



TEMPLE UNIVERSITY

Dr. Jeffrey H. Godel

Temple University Kornberg School of Dentistry, Department of Orthodontics, continues to enjoy the excitement and terrific achievements of the past several months.

Meanwhile, the **Class of 2023** is eagerly working on completing their MS degree and their patients in anticipation of their graduation in August 2023. These young professionals are looking forward to their future as orthodontists and to carry on our wonderful profession. They are **Daniel Chenman, James Henderson, Michael Kirshblum, John Nuveen, Carolyn Serio,** and **Caroline Terry**.

Also, the **Class of 2024** is excited and thrilled to fulfill their role as second-year residents. They are **Katie Alexander, Corey Moletsky, Nina Golojuch, Jenna**

Herr, Amanda Noyek, and **Daniel Seebold**. They look forward to embracing their roles as "big sibs" and guiding the new class of 2025.

In addition, our residency program received well over 233 applications this year. We invited 33 candidates for an interview and matched six great residents for the **Class of 2025, Daniel Markel** and **Jordyn Middleberg** from Temple University, **Rayanne Farah** from St. Joseph University (Lebanon), **Hyangseong "Sophie" Jo** from Columbia University, **Jessica Ho** from Pittsburg University and **Matthew Wittstein** from University of Connecticut. We are incredibly thrilled with our success. The Class of 2025 looks forward to attending and meeting all MASO members at the upcoming meetings and is enthusiastically preparing for the TWEED course next year in Arizona.

In addition, we continue with our focus on innovation and technology. The Podray Clinic has two new 3-D Printers and ten digital intraoral scanners. We take special pride in our solid clinical focus and advanced technology. Our residents

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are excited and looking forward to continued engagement in digital orthodontics.

Finally, our department would like to express our appreciation to the outstanding group of adjunct faculty and alums that helped make this year's graduation celebration

possible for the Class of 2023. Their continued enthusiasm and dedication to participate in our residents' education and our program's success are remarkable.

We hope to see everyone at the 2023 MASO meeting in National Harbor, Maryland. ■



UNIVERSITY OF MARYLAND
Dr. Jose Bosio

Hello from the University of Maryland School of Dentistry Orthodontic Division.

I proudly report that all UMSOD orthodontic residents presented an abstract and an e-poster during the 2023 AAO Annual Meeting in Chicago. Furthermore, **Jeremy Dock** (3rd year) represented our program in the AAO Resident's Scholar Award. I am also proud to announce that Dr. Dock has received the prestigious *2023 William S. Kress Research Award* from MASO for his Master's Thesis research. Congratulations Jeremy. It had been a while since the last time an orthodontic resident from our institution received this award. I am even more proud that **Drs. Jose Bosio, Flavio Copello**, and **Maria Doughan** mentored him.

Our 1st-year residents (**Alicia Briscoe, Christina Grace, Tri Le, Steven Zinn**) have completed most of their core courses and have been assigned nearly 80 new patients, with a few more to come before they receive more transfer patients from their graduating classmates.

I am also proud of our 2nd-year residents (**Kevin Barnes, Lindsay Diaz, Vicente Telles da Silva, Emily Wu**) who had the opportunity to take 11 days from the clinic to study for the ABO written examination. They all passed the exam and are working on their master's thesis research.

All 3rd-year residents (**Jeremy Dock, Sabrina Dorfmann, David Greene, Katie Garrett-McCormack**) successfully defended their Master's thesis in late March and passed their comprehensive oral examination in May. Thank you to the examiners: **Drs. Phil Markin, Fred Preis, Flavio Copello, Maria Doughan**, and **Jose A. Bosio**). Jeremy is heading back to Cincinnati, where he will join the

practice of my two former Buckeye classmates, **Drs. Alex Casinelli** and **Shiva Shanker**. Sabrina is debating if she should go to Ohio or stay in Philadelphia. David is heading to Dallas/Fort Worth, Texas, and Katie is moving to Nashville to open a practice with her husband. David and Katie loved attending the AAO Winter Meeting in Las Vegas, and they happily shared information on new technologies with their classmates.

In March, our current MASO president and UMSOD faculty, **Dr. David Harmon**, held the MASO Spring CE meeting at the Marriott Inner Harbor in Baltimore. There were lectures by two other UMSOD faculty members, **Dr. Neil Kravitz** and **Dr. Jose A. Bosio**. There was also a lecture by **Dr. Grant Coleman**.

Drs. Jeff Jarvis and **Edwin Morris** continue serving as the Ortho Alumni and UMSOD administration liaisons. We thank them for giving valuable feedback to the program. **Dr. Dina Sanchez** has reduced her dedicated time to the school to 60% while she continues as Director of the undergraduate program. **Dr. Flavio Copello** delivered a pilot aligner course to dental students and published an article in the JOCR. **Dr. Maria Doughan** will attend the ADEA Academy of Academic Leadership program. **Dr. T. Scott Jenkins** continues serving as the Angle Society North Atlantic president. **Dr. Farnaz Younessian** gave an oral research presentation at the AAO in Chicago.

Drs. Jeff Jarvis, Gordon Groisser, Eung Pae, Saul Burk, Chris Liang, Steven Tigani, Byron Bonebreak, Monica Schneider, Viney Saini, Ty Saini, Steven Siegel, Phil Markin, Fred Preis, and **Jeff Posnick** continue supporting our orthodontic residents in our clinic and also with lectures. We are also happy to announce that **Dr. Erin Mahoney** will join us as a Dean's faculty Clinical instructor in July. And **Dr. Stuart Sheer** will return to teach in the clinic. **Dr. Saul Burk** continues encouraging colleagues and friends to contribute to the endowment fund he created in honor of Dr. Wanda Flinn. He also delivers a theoretical/clinical course on interceptive orthodontics. THANK YOU ALL. ■



**UNIVERSITY OF
PENNSYLVANIA**
Dr. Chun-Hsi Chung

We are happy to announce the following awards, which were presented to faculty and residents:

- **Dr. Peter Greco:** Recipient of the ABO 2024 Albert H. Ketcham Memorial Award
- **Dr. Chenshuang Li-** 2023 ADEA Leadership Institute Phase V Leadership Development Tuition Scholarship (American Dental Education Association)
- **Dr. Chenshuang Li** - International Orthodontic Foundation Young Research Grant. \$15,000.
- **Dr. Chenshuang Li-** American Association of Orthodontists Foundation Orthodontic Faculty Development Fellowship Awards. \$30,000.
- **Dr. Mary Cruz Contreras Salas:** 2023 American Association of Orthodontists Foundation (AAOF) Research Aid Awards (\$6,000) Mentor: Dr. Jeon
- **Dr. Min Yang:** 2023 AAO William R. Proffitt Resident Scholar Award Clinical Research- 1st Place. Mentor: Dr. Li
- **Dr. Min Yang:** 2023 AAO Annual Session Oral Research Presentation. Mentor: Dr. Li
- **Dr. Jia-Hong Lin:** 2023 AAO Annual Session Poster Research Presentation. Mentor: Dr. Li

Our comprehensive clinic and didactic Orientation Program will begin on July 10, 2023, as we welcome our new incoming class of 2025.

26 Month Certificate Program

- Jamie Guberman, Penn 2023
- Sarah Horne, Rutgers, 2023
- Jessica Kang, Penn 2023
- Lucy Kim, Penn 2023
- Binglan Xue, Penn 2023

3-year MSOB/Ortho Program

- In-Wong Chang, UCLA 2023
- Leandra Garcia Jorge, University of Puerto Rico, 2021

5-year DScD/Ortho Program (Non-Match)

- Fahad Almutairi
King Saud University, Saudi Arabia, 2018
- Perio/Ortho Program
Anas Baghareeb, Riyadh Elm University 2020

Dr. Jia-Hong Lin will complete the three-year combined Orthodontic Certificate/MSOB program. He has defended his thesis and will receive his certificate in Orthodontics and Dentofacial Orthopedics as well as the Masters's in Oral Biology diploma in June 2023.

On June 21st, our graduates will present their research presentations to the faculty:

Dr. Nicolette Almer, *Evaluating the Alveolar Boundary for Orthodontic Tooth Movement in the Maxillary Anterior Region Within the Class II Population with Different Vertical Patterns*
Faculty Advisor: **Dr. Chenshuang Li**

Dr. John Davies, *Prevalence of peg laterals, congenitally missing laterals in orthodontic patient population*
Faculty Advisor: **Dr. Chenshuang Li**

Dr. Herta Granado, *Effect of Carriere in Class II Correction Combined with Invisalign*
Faculty Advisor: **Dr. Hyeran Helen Jeon**

Dr. Grace Nguyen, *Variability in the determination of the FALL line based on clinical experience*
Faculty Advisor: **Dr. Normand Boucher, Dr. Paul Batastini**

Dr. Jamie Silverberg, *CBCT Analysis of the Maxilla in Osteogenesis Imperfecta*
Faculty Advisor: **Dr. Hyun-duc Nah-Cederquist**

The second-year resident Mock Board Exam will take place on August 8th. This will be an in-person exam with each resident submitting four cases + one case in the new ABO format (Scenario-based Clinical Examination). **Dr. Hyeran Helen Jeon, Dr. Chenshuang Li, Dr. Guoqiang Guan, and Dr. Michael Perillo** will be the examiners.

On August 25th, the 2023 graduation ceremony for our 26-month postdoctoral certificate program in Orthodontics and Dentofacial Orthopedics, will take place.

Orthodontic 26-Month Certificate Program

- Nicolette Almer, DMD
- John Davies, DMD
- Herta Granado, DMD
- Grace Nguyen, DMD
- Jamie Silverberg, DMD

We wish them all the best and continued success in their future endeavors.

Our J. Henry O'Hern annual Orthodontic Alumni Day will be held in person on Friday, October 27th, at Penn Dental Medicine. The speaker will be **Dr. Barry Glaser** from Invisalign. CEU credits will be available.

Additional program information and registration will be available online sometime soon. Keep checking the PDM Alumni website <https://www.dental.upenn.edu/alumni/> for more details regarding Penn Dental Medicine.

As always, we would be privileged to have you visit with us at UPENN! ■

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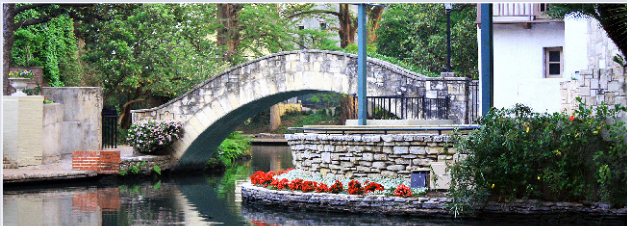


**UNIVERSITY OF
PUERTO RICO**
Dr. Jose Morales-Diaz

Greetings from Puerto Rico. Much activity has taken place in our program during the past months. On February 3rd, our senior residents, **Dr. Natalia Llaurador** and **Christina Cushman**, traveled to beautiful California to attend the Clear Aligner Advanced Resident Education Workshop by Align Technology. All residents and most of the faculty participated in March 2023 in our local orthodontist's society continuing education course entitled: "Digital Workflow and Invisalign Utilization for all your Patients," lectured by Dr. Bart Iwasiuk. In April, we went to Chicago, Illinois, to the AAO annual convention where the program residents demonstrated cases at the CDABO case display, and **Dr. Roberto Hernandez-Orsini**, the speaker, presented his excellent lecture: "Long Term Stability of

Orthodontic Cases Treated with Pressure Site Decortication Procedures." **Dr. Nicolle Reyes** presented her thesis proposal: "Comparison of the Shear Bond Strength of a Composite Resin Adhesive vs. an Expired Composite Resin Adhesive to Bond Orthodontic Stainless-Steel Brackets." The second-year residents, **Drs. Nicolle Reyes** and **Nikaury Guzman**, recently completed the ABO written examination. Congratulations! In June, **Drs. Samuel Ramos** and **Dr. Maria Teresa Rodriguez**, the new second-year residents, will travel to Tucson, Arizona, to participate in the Tweed Foundation Course. The following graduate residents, **Drs. Christina Cushman** and **Natalia Llaurador**, successfully defended their thesis; "Association Between Lateral Incisor Root Angulation and the Impaction of the Adjacent Canine" and "Association Between the Sella Nasion Plane Inclination and the SN-FH and SN-GoGn Angles" respectively. Finally, we welcome our incoming residents, **Drs. Osmell Gonzalez** and **Carimar Soto**. ■

UPCOMING EVENTS



JANUARY 26-28, 2024
AAO Winter Conference
SAN ANTONIO, TX



MARCH 8-9, 2024
Spring CE Meeting and Ad Interim Board Meeting
HOTEL DUPONT, WILMINGTON, DE



MAY 3-7, 2024
AAO Annual Session
NEW ORLEANS, LA



OCTOBER 18-20, 2024
GLAO-MASO Annual Session
WESTIN FISHERMAN'S REEF, ST. THOMAS, USVI

Dr. Normand Boucher, Editor

Ms. Jane Treiber, MASO Executive Director
400 W. Wilson Bridge Rd, Ste 120
Worthington, OH 43085



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