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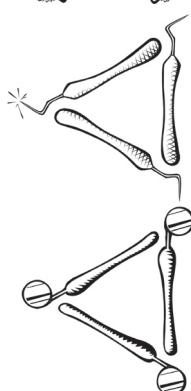
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READY FOR A
RIDE?



IN FOCUS: THE NEW
REGIONAL INITIATIVES
IN DENTAL EDUCATION
PROGRAM EXPLAINED

ALSO INSIDE:

Dental education around the world, a look at TMJ disorders, volunteer possibility - community clinics, interview tips, and the specialties in dentistry.



PARIS
SCHMITT

EXPANDING YOUR DENTAL KNOWLEDGE:
**TEMPOROMANDIBULAR JOINT
DISORDER**

Fact: More than 15% of American adults suffer from chronic facial pain. The pain could be related to the facial muscles, the jaw or temporomandibular joint, located in the front of the ear.

Explanation/ Symptoms: The temporomandibular joints connect your lower jaw to your skull. There are two matching joints, one on each side of your head, located just in front of your ears. TMJ literally refers to the joint but is often used to refer to any disorders or symptoms of this region. Symptoms range from earache, headache, tenderness of the jaw, toothaches, reduced ability to open or close the mouth, popping sounds of the jaw, and biting or chewing difficulty or discomfort.

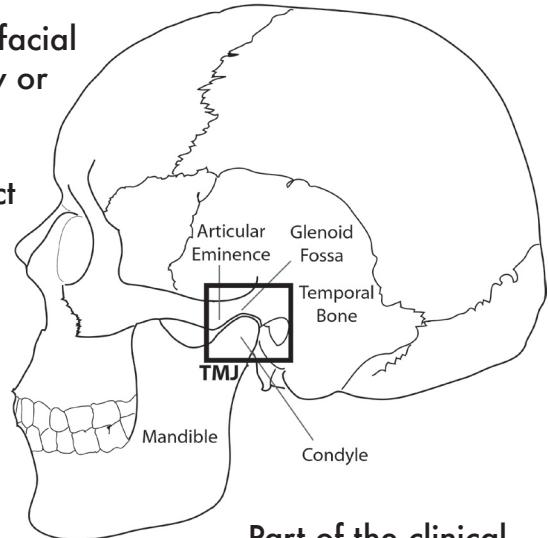
Diagnosis: Diagnosis is an important step before treatment. examination includes checking the joints and muscles for popping or difficulty moving. Complete medical history may be reviewed and dental office records must be updated. X-rays or impressions may be taken to see how the bite fits together. Referral to a physician or another dentist may be necessary.

Causes: Some TM problems result from arthritis, dislocation, and injury. All of these conditions can cause pain and dysfunction. Muscles that move the joints are often subject to injury and disease. Injuries to the jaw, head or neck, and diseases such as arthritis, might result in some TM problems. Other factors that relate to the way the teeth fit together (the bite) may cause some types of TMD. Stress is thought to be a factor. TMD affects women of childbearing age more than men, or older men and women.

Treatment: Simple, gentle therapies are usually recommended first. Make a habit of relaxing your facial and jaw muscles throughout the day. Avoid eating hard foods, like nuts, candies, and steak. These include stress reducing exercises, muscle relaxants, or wearing a mouth protector to prevent teeth grinding (bruxism). If those don't work, more aggressive treatments may be considered. Orthodontics may be recommended to re-align your teeth. Reconstructive surgery of the jaw is considered as a last resort because it is a non-reversible treatment method and permanently alters your bite. Muscle relaxant medications may also help. Nonsteroidal anti-inflammatory medications (NSAIDS) help reduce inflammation in the jaw stemming from arthritis or other causes of inflammation. However, there is always the risk of chronic pain patients developing addictions to prescribed medications.

As a final note, it is inevitable that as an entering dental professional, you will be exposed to facial pain patients and it helps to begin exploring associated disorders as well as developing a working vocabulary of issues within the field.

*Most TMD/ TMJ information collected from the American Dental Association and National Institute of Health web-sites. For a full list of references, contact pariss@u.washington.edu.



Part of the clinical tenderness, clicking,

THE RIDE PROGRAM

MIKE
GARRETT



The state of Washington is facing a dental care crisis as our population expands and the current generation of dentists moves towards retirement. According to the Washington State Department of Health (unpublished data, 2001), more than half of Washington State's dentists will retire by 2013. The shortage has been compounded by the fact that the UW School of Dentistry class size has not increased to keep up with the state's population. As the demand for dental care exceeds the capacity of Washington's dentists, even more Washingtonians will go without dental care and the oral health disparity between upper and lower classes will widen. This lack of access to dental care will be felt the hardest in rural and underserved areas, where existing dentists are already rare and the cost of care is an obstacle to a majority of the population. To address this need, the UW School of Dentistry has developed the Regional Initiatives in Dental Education, or RIDE, program.

If approved, RIDE will place eight additional UW dental students in Spokane, Washington in the fall of 2008. For their first year, the dental students will share several classes with UW medical students, take advantage of Eastern Washington University (EWU) dental hygiene faculty for other courses, and solicit help from the Spokane Dental community for instruction in the remaining dental courses at Spokane's Riverpoint Campus. Instructors will include basic science faculty from Washington State University (WSU), dental faculty from EWU Department of Dental Hygiene, and community dentists from the Spokane area who are affiliate UW faculty. RIDE students will spend the majority of their second and third years at the School of Dentistry in Seattle, and return to the Spokane area for part of their fourth year. During this year they will rotate through a variety of settings, where they will be exposed to diverse populations in underserved locations where dentists are needed most. The RIDE curriculum has been designed to provide the same quality of dental education as the traditional dental school, but with much more community experience and exposure to treating underserved populations. The hope is that RIDE graduates will practice in rural or underserved communities in eastern Washington, which over time will help alleviate the current and anticipated shortage. The program will be approved by the American Dental Association Commission on Dental Accreditation, and students will still receive their DDS degree from the UW School of Dentistry.

RIDE will be tightly integrated with and based upon the successful WWAMI (Washington, Wyoming, Alaska, Montana, and Idaho) program in which students of the UW School of Medicine study in remote areas in these northwest states. Concurrently with the development of RIDE, an extension of WWAMI is being planned in Spokane to address the shortage of physicians that will also affect the region. If both programs are approved, eastern Washington should see a steady stream of young health professionals entering their respective fields in a few short years.

How should you know if the RIDE program will be a good fit for you? I spoke with RIDE Program Director Wendy E. Mouradian, MD, MS, to find the answer to this question and others relevant to the potential applicant. Dr. Mouradian participated in the WWAMI program during her own pediatrics residency and is a strong advocate for community-based education. She is an expert on the interface between medicine and dentistry and a nationally-recognized leader in bringing attention to the importance of oral health to the medical community. While many of the details of the application process and curriculum are yet to be decided, the following information should be helpful to students applying to the School of Dentistry with the hopes of participating in the RIDE program.

What qualities make a student a good candidate for RIDE: Many of the same qualities preferred in all UWSOD applicants, like strong academics and community service. RIDE students will need to express an interest in filling the needs of underserved populations in Washington, and be willing to spend time in Spokane, but they need not be from Spokane or the surrounding area. However, they must be Washington residents. They should also be comfortable with distance learning and technology. Another important quality preferred in RIDE students is excitement to be doing something new. "For the first few years, we'll actually recruit excited people who are groundbreakers," Dr. Mouradian said. "That's not for everybody." If you are looking for a very traditional 4 years of dental school, RIDE might not be the best option. The hope is that the very small class size (which results in a better faculty to student ratio) and emphasis on clinical strength will make RIDE very attractive to many students.

How will students apply: Prospective students interested in the RIDE program will apply to UW through the Associated American Dental Schools Application Service (AADSAS), the organization that supervises all dental school applications in the U.S. Students invited for interviews will have a secondary application with a place to indicate their interest in the RIDE program or in community dental health in general, which will aid the application committee at UW in identifying interested RIDE candidates.

When will we find out if the program will begin as planned in 2008: Although the outlook is very positive, we'll have to wait until the end of the Washington state legislative session in April to know if funding for the RIDE/WWAMI extension in Spokane has been approved. One of the most encouraging factors in this process is that Governor Christine Gregoire included funds for the RIDE/WWAMI expansion in her 2007-09 operating and capital budget proposal in December. There has been strong support from UW, WSU, EWU, the Washington State Dental Association, and the community of Spokane in general. Funds for the planning phase have been augmented by resources from the Robert Wood Johnson Foundation Pipeline to Practice grant and the American Dental Association Foundation. The vision in Spokane is that the expansion will be integrated into the area's existing Riverpoint campus, community clinics, and hospitals, improving the network of health care for the future. Because this program would be so beneficial to the city's welfare, Dr. Mouradian noted that "The community of Spokane is really working hard to make this happen."

RIDE is an exciting program for those looking for an even stronger clinical experience from the UW School of Dentistry. It is a great choice for groundbreakers who are motivated to get the most out of their 4 years of dental school. While the program may not be a good fit for every student, it offers flexibility and some enriching opportunities to begin contributing to your community while still in school. Hopefully, this article has given you a good idea what RIDE is all about. Look for an update about the results of the legislative session in next quarter's DDS newsletter, and for more information, go to RIDE's website at www.dental.washington.edu/ride.



A motorcycle rider from Spokane. May 19, 1946.
<http://www.fortlangley.ca/pepin/JRMC19may46.html>

DENTAL SCHOOLS THROUGHOUT THE WORLD

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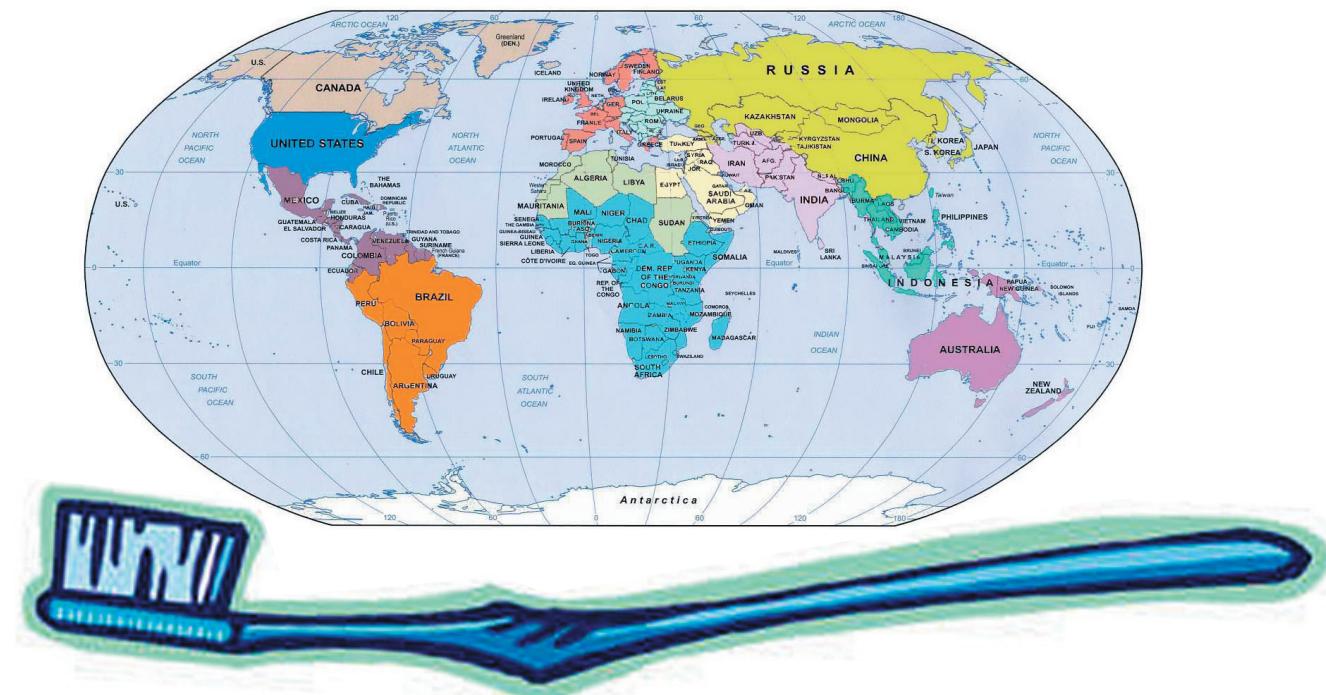
Most pre-dental students generally require four to five years in order to attain a bachelor's degree. Adding this to the four years of dental school, eight or more years of higher education is required to become a general dentist in the U.S. This process is quite different from many other countries.

U.S. dental schools award either a D.D.S. (Doctor of Dental Surgery) degree or D.M.D (Doctor of Dental Medicine) degree. There is no difference between the two and all state boards of dentistry equally recognize both. However, in many other countries, such as the U.K, Italy, and Australia, a B.D.S (Bachelor of Dental Surgery) degree is awarded after only five years of undergraduate study. Nonetheless, pre-dental students in these countries experience similar competition to what many pre-dents experience here in the U.S.

In the U.K., pre-dental students must take the UKCAT. The UKCAT (U.K. Clinical Aptitude Test) is similar to the DAT in that many schools use it as a selection factor when choosing their students. However, unlike the DAT, it does not contain any science content and, instead, is a general aptitude test taken by all students interested in any sort of health science, including medicine.

In many other countries such as Costa Rica, Iran, China and the Philippines, dental school lasts six years post secondary school and a D.D.S or D.M.D degree is issued upon graduation. Despite the similar degrees, foreign-trained dentists cannot easily begin practicing in their newly adopted countries. Most countries require that a foreign-trained dentist attend dental school again. In the U.S., international dental programs usually last two to three years and are highly competitive. For acceptance, an applicant must have a certified dental degree and high TOEFL and NDB (National Dental Board) scores in addition to the typical personal statement and letters of recommendation.

From local to global, dental schools are united in their aspiration to produce dentists that will go on to improve the quality of life throughout the world community.





Esther Ra
President

Delta Delta Sigma

Winter Quarter 2007

University of Washington School of Dentistry

Carrie Huttenlocher

Traveling Warrior with a Passion for the Needy

Special points of interest:

- 1st Year Dental Student
- Poised Communicator
- Talkative Enthusiasm
- Love the Outdoors
- Father is a Medical Doctor

About Me:

I was born in Bethel, Alaska but moved to Seattle for high school and college.

Education:

I graduated from UW in 2003 with a degree in economics. However, I did spend my freshman year at the University of Virginia.

Favorites

Food:

I'm not a picky eater at all. I eat just about everything :)

Superhero:

Superman. He's a classic + I love his blue tights.

Color:

Since I'm a husky – Purple & Gold all the way.

Tarter or Mayo:

Whatever tastes better on what I'm eating.

Fun Facts:

I like to travel and spend lots of time in West Africa. During college, I rowed competitively for both the University of Washington and the University of Virginia.



Carrie on one of her many expeditions to Ghana.

SPOTLIGHT ON:

COMMUNITY CLINICS



What many of us might take for granted – access to dental care – proves to be a much bigger issue for others. Lacking dental insurance, many low-income U.S. residents have trouble affording dental care and members of minority groups are often hesitant to visit a dentist due to the language barrier. As a result, each community brings with it a unique set of challenges, whether it is mobility issues when dealing with elderly or disabled patients, or relying on non-verbal expression to communicate with minority patients who do not speak English.

The good news is that many public health and nonprofit community dental clinics in Seattle and King County are working together to increase access to dental care for these at-risk and underserved populations.

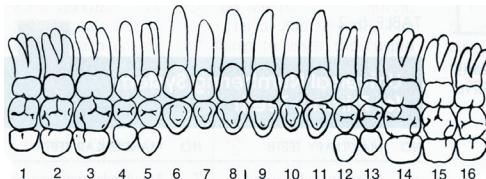
We thought it would be worthwhile to present you with a quick overview of amazing community clinics in the local area to spark your interest in community-based dental issues!

All these community clinics are dedicated to serving the working poor, homeless, underserved children, and young adolescents who do not have the means to pay for dental care. These clinics often turn out to be inspiring and rewarding places to volunteer because they expose students to multiple facets within the field of dentistry.

Oftentimes, volunteer dentists work in these clinics. Therefore these places commonly promote teaching while treating so that volunteer students can get hands-on experience in a real practice atmosphere. Students also say these clinics are a great opportunity for them to find out if a career in the dental profession is what they really want.

Public Health and Community Clinics:

Name and Address	Phone	Quality for Care	Sponsor
Central Area Dental Clinic 2101 East Yesler Way, Suite 213 Seattle 98122-5933	206-461-7801	Serves 17 and under King-County Residents. Cleanings, bridges, crowns, fillings, root canals and simple extractions	Puget Sound Neighborhood Health Centers
Community Health Access Program	800-756-5437 206-284-0331	Referrals to private dentists who accept children and adults with DSHS.	Washington Health Foundation
Children's Hospital & Regional Medical Center 4800 Sand Point Way NE Seattle 98105-3901	206-987-2243	Ongoing care for medically compromised children	Children's Hospital
Columbia City Dental Clinic 4400 37th Ave. So. Seattle 98118-1609	206-296-4625	18 and under Pregnant women receiving public health services Cleanings, bridges, crowns, fillings, root canals, simple extractions and x-rays	Seattle King County Dept. Of Health
Eastgate Public Health Dental Clinic. 14350 SE Eastgate Way Bellevue 98007-6458	206-296-9726	18 and under King County Residents Only Pregnant women and women who are 2 mo. Post partum Cleanings, x-rays, fillings, and simple extractions	Seattle King County Dept. Of Health
45th St. Dental Clinic 1629 N. 45th St. Seattle 98103-6701	206-633-3350 ext. 3021	18 and under only	Puget Sound Neighborhood Health Centers
Georgetown Dental Clinic 6200 13th Ave. So. Seattle 98108 - 2706	206-461-6943	All ages. Bridges, cleanings, crowns, exams Fillings, root canals, simple extractions and x-rays.	Puget Sound Neighborhood Health Centers



High Point Medical and Dental Clinic 6020 35 th Ave SW Seattle WA 98126	206-461-6966	19 and under Bridges, cleanings, crowns, exams Fillings, root canals, simple extractions and x-rays. Adult emergency services	Puget Sound Neighborhood Health Centers
Indian Health Board 611 12th Ave. S. Seattle 98144-2007 For more information, visit http://www.sihb.org	206-324-9360 ext. 2301	18 and under; aims to provide medical and dental care to American Indians and Alaskan Natives but also to non-native populations in the surrounding area	Seattle Indian Health Board
International District Clinic 720 8 th Ave S #100 Seattle, 98104-3033	206-461-3235 ext. 4	All ages. Bridge, cleaning, crown, exams, & x-rays. Root canal and extractions are on a case by case situation. Emergencies as schedule allows	International Community Health Services
Kent Community Dental Center 403 E Meeker St. Kent, 98031-5904	253-796-4071	Children 19 and under and their parents. Proof of income for sliding fee, Fillings, simple extractions, cleanings and x-rays	Community Health Centers Of King County
North Seattle Health Dept. 12359 Lake City Way NE Seattle, 98125-5401	206-205-8580	18 and under. Pregnant Women with DSHS. 60+ yrs. Fillings, cleanings, x-rays, simple extractions, limited root canals on anterior (front) teeth only Dentures on a case by case	Seattle King County Dept of Health
Odessa Brown Children's Clinic 2101 E. Yesler Seattle 98122-5933	206-987-7210	14 and under Infant and toddler dental examinations welcome	Children's Hospital
Sea- Mar 8915 14th Ave. So Seattle 98108-4807	206-762-3263	All ages. Emergencies. Cleanings, exams, fillings and simple extractions; committed to providing care ranging from medical treatment to mental-health counseling to migrant housing to diverse communities, especially the Latino population	Seattle Community Health Center
Sea-Tac Smiles 18010 8 th Ave S Burien WA 98198	206-433-2242	Children and Families. Dental exams/cleanings. Fluoride varnish & Sealants. Space Maintainers. Fillings. Emergencies.	Occupational Skills Center/Division of Sea-Mar Clinics
Seattle Health Department 2124 4th Ave. Seattle 98121-2308	206-205-0577	18 and under. 60+ yrs. Adults between the age of 18 & 60 with Med. Coupon or homeless King County Residents Only	Seattle King County Dept. Of Health
Southeast Family Dental Clinic 3800 So. Myrtle Seattle 98118- 3500	206-461-6981	All ages. Cleanings, crowns, dentures, fillings, x-rays, simple extractions and anterior (front) Root Canals.	Puget Sound Neighborhood Health Centers
Union Gospel Mission 318 2 nd Ave S Seattle WA 98101	206-621-7695	Homeless staying at the mission or other local rescue missions. Cleanings & fillings for existing clients. Non-clients will be seen for: extractions, dentures, partials, flippers	Seattle Union Gospel Mission

For a more comprehensive list of local community clinics and their contact information, please email us at dental@u.washington.edu or feel free to drop by our office hours!

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INTERVIEW TIPS & ADVICE

Hello Pre-Dental Students,



I wanted to give another recapitulation of the dental school interview. First of all, receiving an interview is an accomplishment in itself. It is a giant step in the right direction. Dental schools receive numerous applications and grant interviews to a select number of applicants. Therefore, you have cleared one hurdle and are one step closer to being admitted into dental school.

The interview is an essential part of the application process and is required by all dental schools. The interview is a fantastic opportunity for you, as an applicant, to express yourself, get to know the school, and to impress the admissions committee. The dental school application limits how much detail you can include. The interview is an opportunity to elaborate on your experiences and really show the admissions committee you want to attend their school.

Preparation is essential. To begin, upon receiving an interview notice, you should seek out the interview schedule, i.e. when does it start, what does it entail, when does it end, etc. Most schools will email or mail you this information. Next, it is prudent to book flights and hotel accommodations early; this will save you lots of money. Some schools will offer the opportunity to sleep in the student dormitories with the dental students. This is an excellent opportunity for you to experience the living conditions and lifestyle at the particular school.

There are many ways to prepare for the actual interview itself. The UW Center for Career Services offers mock interviews and also has flash-cards to aid in your preparation. Other invaluable resources include <http://studentdoctor.net>, the school's website, and students who have interviewed before. The most important preparation for an interview is knowing yourself and your application: personal statement, coursework, dental experiences, extracurricular activities/volunteer/community service, work experience, research experience, and anything you write for the secondary application (if applicable). Again, the interview is an opportunity to express yourself. However, you must also be able to defend or elaborate on anything you put down in your application. Below are examples of some common interview questions:

Tell me about yourself.

Why do you want to be a dentist?

Why this school?

What are your strengths? Weaknesses?

How would your friends describe you?

What do you do in your spare time?

Why should we choose you over other applicants?

Is there anything you would like me to tell the admissions committee?

For the interview, dress professionally. This is an absolute necessity and shows both courtesy and professionalism. Be sure to get a proper night's sleep; it will be hard due to anxiety and possibly jetlag, but do try. Also, eat breakfast and drink some coffee/tea before the interview. It is a long day and you want to have enough energy to make it through. Arrive at the interview 30 minutes before. Account for traffic beforehand. Needless to say, it would reflect very poorly to arrive late to an interview. During the interview, relax. The interview is not meant to be stressful. The school wants to know you and wants you there. Maintain a positive attitude and make eye contact with the interviewer. Know yourself and be decisive with your answers. Be prepared with your answers but do not make it sound rehearsed. Following the interview, write a thank you note to the interviewer. This is a respectful gesture and could be something that the interviewer will remember. For your interview, do not wear excessive makeup, perfume, or cologne. Do not second guess the interviewer and do not talk too much. It should be an interactive conversation and not completely one sided. Again, be decisive and genuine with your answers and don't ramble. Also, do not forget your interviewer's name. Write it down, do anything, but DO NOT forget your interviewer's name. Finally, remember to have fun and smile. The interview is about you, so be honest and be confident. Good luck!

Sincerely,
David Zhu



IRANG
PHOM

SPECIALTIES IN DENTISTRY

For many of us who are interested in dentistry, it is important to become familiar with the different specialties that exist in this vast field. This knowledge allows us to explore different options and interests in a particular sector that best suits us. In addition to the general dentistry, the American Dental Association (ADA) recognizes nine different specialties. Each specialty requires an additional two to six years of residency beyond dental school training. Below are the specialties and their "official" definitions as defined by the ADA:

Dental Public Health: Dental public health is the science and art of preventing and controlling dental diseases and promoting dental health through organized community efforts. It is that form of dental practice which serves the community as a patient rather than the individual. It is concerned with the dental health education of the public, with applied dental research, and with the administration of group dental care programs as well as the prevention and control of dental diseases on a community basis.

Endodontics: Endodontics is the branch of dentistry which is concerned with the morphology, physiology and pathology of the human dental pulp and periradicular tissues. Its study and practice encompass the basic and clinical sciences including biology of the normal pulp, the etiology, diagnosis, prevention and treatment of diseases and injuries of the pulp and associated periradicular conditions.

Oral and Maxillofacial Pathology: Oral pathology is the specialty of dentistry and discipline of pathology that deals with the nature, identification, and management of diseases affecting the oral and maxillofacial regions. It is a science that investigates the causes, processes, and effects of these diseases. The practice of oral pathology includes research and diagnosis of diseases using clinical, radiographic, microscopic, biochemical, or other examinations.

Oral and Maxillofacial Radiology: Oral and maxillofacial radiology is the specialty of dentistry and discipline of radiology concerned with the production and interpretation of images and data produced by all modalities of radiant energy that are used for the diagnosis and management of diseases, disorders and conditions of the oral and maxillofacial region.

Oral and Maxillofacial Surgery: Oral and maxillofacial surgery is the specialty of dentistry which includes the diagnosis, surgical and adjunctive treatment of diseases, injuries and defects involving both the functional and esthetic aspects of the hard and soft tissues of the oral and maxillofacial region.

Orthodontics and Dentofacial Orthopedics: Orthodontics and dentofacial orthopedics is the dental specialty that includes the diagnosis, prevention, interception, and correction of malocclusion, as well as neuromuscular and skeletal abnormalities of the developing or mature orofacial structures.

Pediatric Dentistry: Pediatric Dentistry is an age-defined specialty that provides both primary and comprehensive preventive and therapeutic oral health care for infants and children through adolescence, including those with special health care needs.

Periodontics: Periodontics is that specialty of dentistry which encompasses the prevention, diagnosis and treatment of diseases of the supporting and surrounding tissues of the teeth or their substitutes and the maintenance of the health, function and esthetics of these structures and tissues.

Prosthodontics: Prosthodontics is the dental specialty pertaining to the diagnosis, treatment planning, rehabilitation and maintenance of the oral function, comfort, appearance and health of patients with clinical conditions associated with missing or deficient teeth and/or oral and maxillofacial tissues using biocompatible substitutes.

As pre-dental students, now is the perfect opportunity to seek volunteer positions in clinics to gain experience in the field that excites you. While you are in dental school you will also have the chance to rotate through clinics consisting of different specialties, therefore, it is not necessary to know what you want to do yet. However, it is still important to have exposure on what this career has to offer. For more information on specialties and dentistry, visit <http://www.ada.org/prof/ed/specialties/>.

Smile!



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*SOPHIE
HAMBERG*