



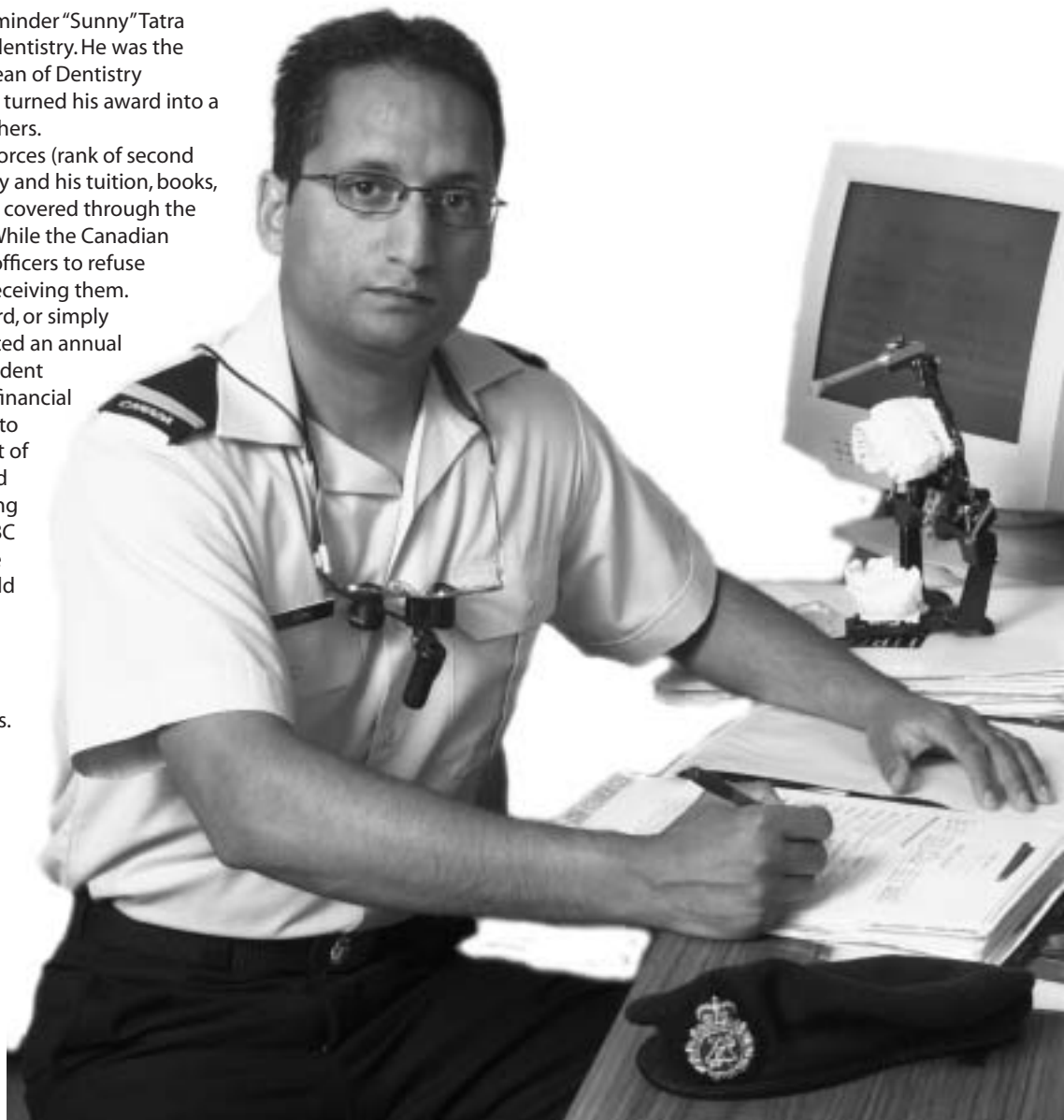
Fourth Year Student Establishes Bursary

Fourth year DMD student Gurminder "Sunny" Tatra recently established an award in dentistry. He was the inaugural recipient of the \$900 Dean of Dentistry Scholarship in 2001/2002 and has turned his award into a gift that will keep on giving—to others.

As an officer in the Canadian Forces (rank of second lieutenant), Sunny receives a salary and his tuition, books, instruments, and cost of living are covered through the Dental Officer Training Program. While the Canadian Forces does not formally require officers to refuse awards, the Forces frowns upon receiving them.

Rather than declining the award, or simply donating the money, Sunny initiated an annual bursary of \$1,000 to support a student entering UBC Dentistry who is in financial need. Sunny said, "I was fortunate to have had the military pay for most of my university education. I received the Dean's scholarship, while seeing the cost of dental education at UBC rise. I felt it was best to donate the money to support those who could perhaps benefit the most."

The faculty wishes to thank Sunny Tatra for his very generous support of his fellow classmates and future professional colleagues. We are proud to have him as a donor!



Donor and dental student Sunny Tatra in uniform.



Dean's Message

Clinician Educators: Welcome

By Ed Yen

For years we have listened to our graduates recount how invaluable certain part-time clinical faculty were to the quality of their dental education. In response, we have introduced a new type of faculty member: the clinician educator.

Clinician educators are dentists from private practice who have shown dedication and excellence in clinical supervision. They are prepared to devote at least 50% of their week to the faculty. They will not be alone; the clinics will still depend upon the expertise of the "regular" part-time faculty who teach about one-half day per week. But, the new clinician educators will bring the advantages of clinical experience built on the realities of private practice, while they enhance the continuity of patient care and provide students with increased access to approvals and advice. Clinician educators will become fluent with the restrictions of our academic environment while ensuring quality care and professional ethics.

Most importantly, students will have a dependable, accessible faculty member who will be familiar with their skill level and goals for their stage in the educational process.

This may be an important opportunity for those in private practice. How often have private practitioners told me that they would love to teach students what they really need to know? Yet there is a huge challenge of educating the novice by those who have forgotten the trials and tribulations of the dental student: new materials, new techniques, obsolete equipment, two-handed dentistry, multiple approval steps, challenging patients, multiple care providers and so on.

The clinician educators will offer a new platform to further bridge the best of private practice and students' healthy thirst for knowledge. This platform will challenge students to strive for excellence and at the same time will expose established practitioners to the critical thinking of new learners who are not afraid to ask "why".

We welcome our first three clinician educators and hope to welcome many more in the years ahead.

Read more about the new clinician educators on page 6.

Scenes From Undergraduate Dean's Night



Dawn Gibson and Patty Scrase from Scotiabank with Bank of Nova Scotia Award in Dentistry recipient Lucien Bellamy.



Fourth years enjoying their last Undergraduate Dean's Night are Stephanie Song, Lucien Bellamy, Stephanie Stinson, Andrew Seebaran, Matthias Hammer, Silke Gumplinger, Mike Melo, Andrea Csiszar, Mahmoud Ektefaie and Kimiko Kika.

Undergraduate Dean's Night

Once again Dean Yen was the gracious host of Dean's Night on September 10. Faculty, staff, students and donors were invited to join in an evening of celebration to welcome all of our students to a new academic year and honour the many award winners.

Thanks to the generous support of our donors, many students walked away with awards at the end of the evening. The big winner of the night was Paramvir Bhalla who was this year's winner of the Dentsply Student Clinician Research Competition (details in Our Dental Family on page 11).

Congratulations to all of the award recipients and a warm welcome to our new students!



All smiles at Undergraduate Dean's Night are 1st years Sherri-Ann McDaniel, Iris Wong, Nao Nakatsuka, and Yasamin Shirazi.

We are pleased to present interesting cases for your enlightenment. We invite dental practitioners to submit intriguing cases by contacting the editor.

The Case

By Dr. Ian Matthew

History

A 73-year-old male presents for a routine dental examination, and mentions that he has a slowly developing painless lump. He thinks the lump has been present for around 18 months.

He is in good health. A few months previously, his family physician felt that the lesion did not warrant further investigation.

On examination, you notice a solitary mass at the right angle of the mandible, approximately 2 cm in diameter. The mass is non-tender on palpation, and is mobile within the tissues. The mass is also non-pulsatile and there is no bruit on auscultation. The patient denies any clenching or bruxing habit.

Questions

1. What is the differential diagnosis?
2. How would you investigate the lesion further?
3. What special investigations might aid in the diagnosis?
4. What might be the outcome if this lesion is neglected?

See page 9 for the conclusion of this case.



The patient mentions a lump on his neck.

Faculty Profile: Dr. Clive Roberts



Dr. Clive Roberts

Dr. Clive Roberts is an associate professor in dentistry, and an associate member of UBC Medicine. As a cell biologist/biochemist, he has a strong interest in undergraduate education, and chairs DENT 410, the faculty's introduction to clinical dentistry course for 1st years. He is a member of the Canadian Institute for Health Research-Dental Sciences and the Arthritis Society Bone, Joint and Cartilage grant review panels.

Dr. Roberts was educated at Cambridge and London in the UK. His graduate work was a study of how macrophages use proteinases to damage tissues in inflammation. Macrophages move from the blood to the tissues as amoeba-like orchestrators of inflammation, including the body's immune reaction to foreign bodies, microorganisms or abnormally proliferating cells in early cancers.

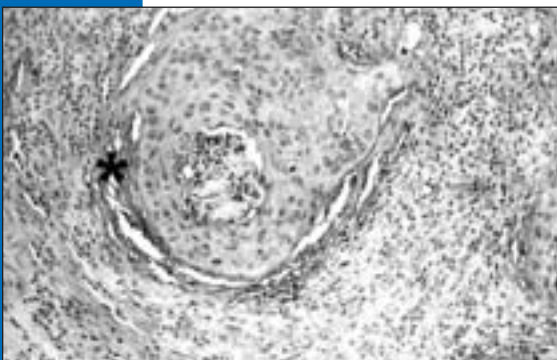
Dr. Roberts went on to McGill to investigate how enzymes released in chronic inflammation degrade cartilage proteoglycans, contributing to joint destruction in arthritis. What he intended as a short visit to McGill led to a stay of more than three years, and the development of a research career focused on the changes in extracellular matrix that are a consequence of chronic inflammation.

Aggrecan, the cartilage proteoglycan, is a member of a family of very large molecules that are generally thought to contribute to tissue biomechanics (in cartilage) but may also have profound effects on cell behaviour in development. Dr. Roberts discovered that a member of this family, called versican, is an essential component of the matrix around proliferating fibroblasts in wound healing in the human respiratory system, apparently contributing to the disease/repair process in the seven most common severe remodelling human lung diseases. Similarly versican is associated with abnormally proliferating connective tissue cells in transplant rejection.

Along with UBC Dentistry's Dr. Lewei Zhang, Dr. Roberts has recently found that expression of versican is associated with proliferating oral cancer cells. Dr. Roberts' original work with human tissue samples suggests that degradation of versican at the cell surface, by proteinases, may trigger programmed cell death in normal wound healing, and that this process is abnormal in fibrosis, tissue hypertrophy and cancer. It seems that the cells that normally are involved in this regulated process are macrophages, so he has come back to his originally favourite cell, the macrophage, and its repertoire of proteinases, but with far better tools than were available when he was a PhD student.

With his colleague, Dr. Chris Overall, Dr. Roberts is investigating the interactions between macrophages and proteoglycans, using engineered parts of human proteoglycans, and using engineered protein-degrading enzymes. Parts of human genes are manipulated to allow the manufacture of large amounts of proteins of interest, whose function can be studied in cell culture or in the test-tube.

Dr. Roberts' lab has been supported since 1992 by continuous grants from The Canadian Institutes of Health Research and The BC Lung Association, and he has held two 5-year CIHR scholar and scientist awards. Dr. Roberts and Dr. Overall were two members of the group of 10 major applicants recently awarded \$14 million by the Canadian Foundation for Innovation for a new multidisciplinary research centre at UBC, The Centre for Blood Research.



A tissue section from human squamous cell carcinoma showing versican deposited around cancer cells (asterisk).



A human fibroblast in culture. The cell is stained to show a cell surface protein-degrading enzyme called MT1-MMP.



A molecular model used to determine which parts of versican are likely to bind to cell surfaces.

UBC Emergency Dentistry at REACH

By Dr. Lance Rucker

The REACH Centre (Research, Education, and Action for Community Health) first introduced its dental services to the Grandview Woodlands area in East Vancouver in 1973. A local meeting ground to discuss public health strategy and community-based delivery of health care to this area, the REACH clinic soon became the site of a unique and important student-managed program for UBC dental students.

Every week since then UBC dental students have volunteered to see emergency dental patients at REACH under the careful supervision of Vancouver-area dentists. These dentists, including UBC graduates and faculty members, also volunteer their time and energies for this extremely valuable service.

The clinic is open every Tuesday from 7 pm to about 11 pm and takes in about ten patients per night. Students attend to emergency patients only, the primary goal being to get people out of pain. On average, about nine out of ten patients will actually receive treatment.

The procedures are almost always extractions or endodontic accesses ("open and drain" procedures). Pulp preservation procedures are referred to the daytime clinics, and complex clinical cases are referred to specialized centers, such as VGH or oral surgery at UBC. All emergency cases are discussed with the supervising dentist before any procedures are started. The protocol for the triage procedures is, as nearly as possible, the same as the protocol followed in the clinics at UBC. The chairman of oral surgery at UBC, Dr. Ian Matthew, is available for consultations to the REACH student group, and has worked especially hard in recent months to support the quality and consistency of student treatment at REACH.

For over two decades students have taken it entirely upon themselves to organize their schedules, times, and supervisors, and have maintained ongoing links with staff at the REACH clinic, who recommend the service for patients who are not on assistance and cannot otherwise afford private practice treatment. A patient fee of \$7 for each emergency treatment visit helps offset the cost of supplies and materials.

Legions of UBC graduates have commented upon their sense of indebtedness to REACH and to the student-organized

program for valuable early experiences in triage management.

Fourth year UBC dental student Lucien Bellamy was a REACH clinic student coordinator this past year, successor to a long line of proud student service. The role of student REACH coordinators includes scheduling dentists, ensuring quality control protocol management, communication with regular REACH clinic staff, organization of student volunteers, training assisting staff (instrument clean-up), and communication with faculty.

Student clinicians for REACH are continually recruited from 3rd and 4th year, although the clinic is operated primarily by a core group of 3rd years. Second year students start to attend the evening emergency clinics during second term. Although students from any of the dental classes may participate, changes in the UBC curriculum during the past six years have increased pressure on 4th year students to be present for the more difficult procedures for which undergraduates might be expected to perform.

While student attendance is on a volunteer basis, the program has thrived upon the commitment of about 60-70% of each class, and the program's great success and longevity continue to be a testament to their dedication and determination.

Scores of supervising dentists from the community have formed the foundation of this program's success. Most of the supervising dentists graduated from UBC within the last ten years. Among recent graduates who have volunteered are Brian Baird, Gavin Forsythe, Paul Goncalves, Rudy Salo, and Ellen Wong. About 15 local dentists currently comprise the REACH "regulars". In addition, the GPR (General Practice Residency) program sends one resident per month to REACH.

Clearly, for most UBC graduates of the past two-and-a-half decades, working in the REACH clinic has been one of the most unifying experiences and one of the most memorable community service opportunities of their undergraduate program.



A typical Tuesday night at the REACH clinic.

Clinic Impressions

Clinician Educators: New Model for DMD Part-Time Teaching

By Dr. Joanne Walton



Dr. Joanne Walton, Associate Dean,
Academic and Student Affairs.



A part-timer patiently shares his expertise with a dental student.

It is well known that the quality of an educational program is directly related to the quality of the people teaching in it. At UBC, we are fortunate to have a committed and caring cadre of part-time faculty who contribute immeasurably to the education of our DMD students.

Wouldn't it be great if we could support and develop a select few outstanding part-time faculty members who could commit even more time to the program? They could bring their wealth of clinical experience, teaching expertise, enthusiasm, and time, to enhance the consistency and quality of our teaching program. Thus we created a "super part-timer," more officially referred to as a clinician educator.

Several part-timers, identified by students and colleagues as being excellent teachers and who had indicated an interest in taking on increased teaching responsibilities, were invited to focus group meetings to discuss the concept of the clinician educator. The job description evolved to include part-time faculty who have shown exemplary professionalism and outstanding skills in teaching and clinical demonstration, and who are prepared to commit to at least two full days per week of teaching in areas where they are needed in the DMD curriculum.

The clinician educators' responsibilities include problem-based learning (PBL) and other small group tutoring in both the combined medical-dental and the dentistry-only portions of our program, classroom and clinical teaching, and managing clinical group practices. Clinical teaching may involve simulation modules in prosthodontics (fixed, removable partial denture and complete denture), operative dentistry and pediatric dentistry, and the patient care setting in integrated care clinics. In fact, the broader the exposure of the clinician educator to various teaching situations and contexts, the greater the benefit to the consistency of the program and the understanding of the "big picture" of our unique curriculum.

For this academic year, three exceptional part-time faculty members have accepted our invitation to become pioneer clinician educators: Drs. Leandra Best, Alan Kilstoff and Jim Richardson. We thank them for their commitment and look forward to their increased participation in the education of our DMD students.

UBC Dentistry's First Clinician Educators



Dr. Jim Richardson

Born in Vancouver, Dr. Richardson graduated from UBC Dentistry in 1984. Ever the starving student, in 1982 he entered into the Dental Officer Training Program, much to the satisfaction of his student loan officer.

Upon graduation, he was posted to CFB Comox and practiced in a three-dentist clinic. While in the Armed Forces he availed himself of the service air flights visiting exotic locales such as Trenton, Winnipeg and Edmonton (no one had heard of Kandahar in the 80s!) The real perks of his military experience included an intensive periodontal surgery for the GP program, adventure training on the West Coast Trail and meeting his future bride, Cynthia Bedard.

After completing military service he joined a group practice in South Surrey and became the coordinator of emergency dental services for Peace Arch Hospital. In 1988 he became a part-time clinical instructor at UBC. He participated in study clubs and served on the college peer review committee.

In 1998, after 14 years of general practice, his clinical path was suddenly derailed by a severe dermatological reaction to several dental materials. Unable to return to clinical dentistry, and after much soul searching, a chance meeting with classmate David Tobias offered him a new direction. Working initially as group manager and ICC instructor, Dr. Richardson now also assists the prosthodontic division in dental technical services, the preclinical prosthodontics modules and others.

Dr. Richardson said, "I find working with the students always stimulating. In clinic I try to pitch in and provide constructive help--something we rarely received in the "old" curriculum."

An outdoor enthusiast, he enjoys skiing, mountain biking, windsurfing, and camping and hiking with his wife and two sons.



Dr. Alan Kilistoff

Though you would not know it by appearances, Dr. Kilistoff is the old-timer among the three clinician educators; he graduated from UBC Dentistry in 1976. While studying and after graduation he worked with Dr. Ravi Shaw on his cleft palate research.

Dr. Kilistoff has two busy practices in Surrey which he has been running for over 20 years. He is interested in all aspects of dentistry, though he has a particular interest in temporo-mandibular disorders. A couple of years ago, Dr. Michael Macentee asked Dr. Kilistoff to help out with the fixed prosthodontics clinic. He loved the work and must have made a great impression as he was invited to become a clinician educator.

He has five children and three grandchildren and is looking forward to teaching his eldest son when he enrolls (admissions decision notwithstanding) in the faculty next year! When he's not in the clinic or his private practice you can find Dr. Kilistoff playing with his grandchildren or in his workshop building his home-made wooden furniture.



Dr. Leandra Best

Soon after graduating from the University of Saskatchewan in 1985, Dr. Best and her husband moved to Vancouver to establish their careers. While practicing clinical dentistry for many years, Dr. Best had an ongoing desire to get involved in teaching. She started at UBC as a part-time instructor in fixed prosthodontics which led to her present involvement in many components of the four-year dental curriculum.

She found her experiences with the students and faculty not only enjoyable but personally rewarding and educational. Dr. Best said, "I feel deep gratitude to Dr. Joanne Walton for her inspiration and encouragement in helping my aspirations to teach become a reality. I am most excited to be in this learning environment where there's a constant opportunity to increase my knowledge and where I hope to play a positive part in the educational growth of students. It is a joy to teach and to be in contact with so many knowledgeable faculty and staff."

Outside of dentistry, Dr. Best is involved in medical office management. She cherishes the time spent with her husband and their two daughters. Vancouver's setting allows them to enjoy cycling, hiking and swimming, while she personally also enjoys music, dancing and painting.



The 25th graduating class of the Orthodontic Module.

CDE Impressions

Orthodontic Module: 25 Years

By Donna Dainius

This year, Continuing Dental Education was proud to see the 25th graduating class of the Orthodontic Module for Certified Dental Assistants and Registered Dental Hygienists, held at the Faculty of Dentistry in June. Since 1979, approximately 1500 participants have graduated from this program.

The Orthodontic Module was initiated by the British Columbia Society of Orthodontists (BCSO) which worked with the College of

Dental Surgeons of BC to develop the competencies for an expanded role for auxiliaries in an orthodontic practice. UBC's Continuing Dental Education and the BCSO developed the educational program.

The contribution of many members of the professional dental community over the years has resulted in an excellent program that is now recognized throughout the world. In 1985, the course manual was translated into Japanese and published by

Quintessence, Tokyo. The Orthodontic Module was piloted in 1996 at the University of Bristol, Great Britain. A report was written with the recommendation that the UBC module be used as a framework for all courses to train orthodontic assistants in Great Britain.

In May, at the AGM of the BCSO, a presentation was made to Jane Wong, former Director of Continuing Dental Education, for her significant role in the development of the module.

New: frequent attendee program

We are pleased to introduce our frequent attendee's program. We have developed a program for frequent attendees to acknowledge professionals who support our program. Anyone who registers for two courses within an academic year (September to April) may attend a third course at a \$50 reduction.

Check out our courses at www.dentistry.ubc.ca, click on Continuing Education and then Calendar of Courses.

Case Discussion

Continued from page 3

1. What is the differential diagnosis?

- Parotid neoplasm
- Masseteric hypertrophy
- Enlarged lymph node
- Lipoma

2. How would you investigate the lesion further?

The general dentist has a key role to play in excluding an odontogenic cause for an oro-facial swelling such as this. A thorough oral examination of the teeth and soft tissues will be required, together with palpation of the cheeks bilaterally to identify the extent of medial spread.



Surgical excision of the mass.

3. What special investigations might aid in the diagnosis?

- Plain films
- CT scan
- MRI scan
- Sialography
- Diagnostic ultrasound
- Isotope scanning
- Biopsy

4. What might be the outcome if this lesion is neglected?

The mass can change from a benign lesion to a malignant variant, e.g. squamous cell carcinoma arising within a pleomorphic adenoma.

Treatment

Your patient attends the office of an oral surgeon, who arranges surgical excision of the mass. The histopathology report confirms a pleomorphic adenoma of the right parotid gland. The mass is completely excised.

Discussion

At least 75% of all parotid neoplasms and more than 50% of all submandibular salivary gland neoplasms are benign pleomorphic adenomas. This neoplasm is poorly encapsulated; a breach of the capsule allows the neoplastic cells to escape into surrounding tissues. It is difficult to eradicate microscopic spillage of neoplasm cells. If this happens the patient will be prone to local recurrences. However, if there is skin infiltration or ulceration an open biopsy is indicated to provide a preoperative diagnosis.

Open surgical biopsy of intrinsic neoplasms of the major glands is contraindicated. Fine needle aspiration is safe compared to open biopsy of a major gland. The needle gauge used is 18 gauge or less; with this size, there is no risk of seeding neoplastic cells. With this technique an experienced clinician can achieve high accuracy and specificity; in inexperienced hands there is a risk of sampling error.

Sialography is rarely indicated to investigate such a lesion. However, the appearance of this patient's lesion, a space-occupying mass within salivary tissue, is of a space defect (as shown).

Diagnostic ultrasound has become a key investigative tool in the management of salivary neoplasia, with characteristic patterns for lesions of different densities.

For parotid and submandibular salivary gland neoplasms, CT or MRI scans are indicated. Both types of scan are helpful to identify the proximity of the mass to adjacent structures, such as blood vessels, muscles and mandible. These scans accurately define the limits of the neoplasm and show if it is circumscribed (probably benign) or diffuse and invasive (probably malignant). CT and MRI scans cannot image the VIIth cranial nerve and thus cannot be used to determine the relationship of the neoplasm to the nerve. But, the course of the VIIth nerve is constant from the stylomastoid foramen.

Postscript

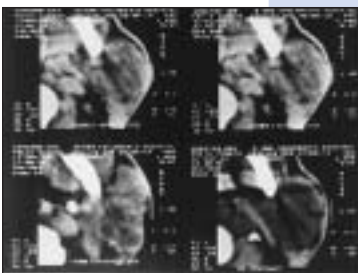
Your patient remains on follow-up, and after three years shows no sign of recurrence.



Sialography is rarely indicated but appropriate in this case.



Diagnostic ultrasound is an important tool.



CT scan of the lesion.



At Tokyo DisneySea with Nippon Dental University students.

Japan Exchange 2002

By Stephanie Song and Cheryl Walker (Class of 2003)

We were the 14th group from UBC Dentistry to visit the Nippon Dental University (NDU) in Japan. NDU has two campuses: Tokyo and Niigata. In both cities, we were greeted by six Japanese dental students, their mentor, and many faculty members and hospital staff.

Traditionally, six UBC students and one mentor spend a week in each city to experience dental education and culture. Our group included our mentor, Dr. Sandra Fastlicht, and six 3rd year students: Jim Chen, Steve Huang, Silke Gumplinger, Stephanie Song, Raymond Tsai, and Cheryl Walker. The anticipation of the Japan exchange program helped us get through 3rd year.

As everyone knows, Tokyo is the capital of Japan and one of the most modern cities in the world. On the other hand, Niigata is a small oceanfront city. Therefore, it's not surprising that our experiences in each city were unique.

Our exchange began in Tokyo. On our first day we toured the dental university and hospital. Unlike at UBC, dental school in Japan consists of six years of post-secondary education. Undergraduate dental students are involved in patient care only as assistants, not as primary operators. In order to enrich the experience, Japanese students learn to handle lab cases by themselves and, following graduation, they work as dental residents at a university hospital for one year.

NDU dental hospital has 8 floors, organized by specialty. They recently converted one floor to an integrated patient

care clinic, where patients can receive multiple disciplines of dentistry in one chair without having to visit different floors for different procedures.

We visited various tourist attractions in Tokyo. We were always escorted and entertained by six Japanese students, and soon we became very close friends. We watched a spectacular sunset from the top of a Tokyo tower and we enjoyed the luxurious shopping malls, tall buildings, busy streets, and complicated network of well-organized public transportation. Our dining in Japan also exceeded our expectations. Mt. Fuji provided a stunning backdrop to a lakefront Japanese-style BBQ. We even spent a fun day at Tokyo DisneySea.

When we arrived in Niigata, we encountered a whole new experience. We visited a hot springs in Japanese style—naked! We were part of a group that carried a one-tonne Mikoshi (miniature shrine) for three hours in traditional costume. We were thrilled to wear kimonos and participate in the Niigata Dance Festival with hundreds of people parading up and down the city streets. As foreigners, we were noticed by reporters and spotlighted in the local newspaper.

Our overall impression of Japanese people was of their politeness, courteousness, punctuality, and incredible hospitality. In the end, what we brought back to Vancouver was a cultural Japanese experience, lots of souvenirs, group spirit, new friendships, and memories that will last forever.



NDU and UBC Dentistry exchange students and faculty assemble before attending the Niigata Dance Festival.



Dr. Sandra Fastlicht, mentor for UBC students, receives a certificate in honour of completing the exchange program.

Our Dental Family

Alumni, Students, Faculty, and Staff,
See your name in print in *Good Impressions*.
Send us your news about: new baby, marriage,
an award, a new job, an achievement, etc.
Email tstgroup@interchange.ubc.ca.



Barry Balla, 3rd year



Laisheng Lee Chou

Graduate/Postgraduate Studies

The University of British Columbia, Faculty of Dentistry
2199 Wesbrook Mall, Vancouver, B.C. V6T 1Z3

Applications are invited for admission to the following graduate and postgraduate programs:

MSc and PhD in Dental Science

These graduate programs are research-oriented and do not include clinical training. The MSc degree normally requires two years full-time study, and can also be taken part-time. The PhD degree requires a minimum of three years. Both offer research training in various oral and dental sciences. The deadline for applications is March 1.

Combined MSc (Dental Science) and Diploma Program in Periodontics

This program offers an MSc degree and a diploma in graduate periodontics. The three-year program is recognized by the American Dental Association. The deadline for applications is October 1.

Oral Medicine and Oral Pathology Postgraduate Program

This postgraduate residency training in oral medicine and oral pathology is offered in conjunction with university-affiliated teaching hospitals. It consists of a three or four-year hospital-based, stipended residency in one of three pathways: oral medicine, oral pathology, or both specialties combined. The deadline for applications is November 30.

General Practice Residency Program

This one-year dental residency program is offered in conjunction with university-affiliated teaching hospitals. These residency positions include one opening in pediatric dentistry. The deadline for applications is November 1.

For more information regarding these programs, visit www.dentistry.ubc.ca or contact:

**Graduate Periodontics,
MSc and PhD in Dental Science
OMOP Programs:**
Viki Koulouris
Email: vickybk@interchange.ubc.ca
Tel: (604) 822-4486

**General Practice Residency
Program:**
Dorothy Stanfield
Email: dstanf@unixg.ubc.ca
Tel: (604) 822-0345

Goings

Academic support staff member, **Silver Anderson**, has moved on to join the development team in the Faculty of Commerce.

Jason Congdon, from the admissions office, is now working in marketing at UBC Press.

Awards

Associate Dean of Academic and Student Affairs, **Dr. Joanne Walton**, is the winner of the first annual 3M-ESPE National Dentistry Teaching Award. The award is adjudicated by the Association of Canadian Faculties of Dentistry from submissions by dental schools across Canada. Dr. Walton will be presented with the award at the Canadian Dental Association's "Dental Summit" conference in November.

Barry Bhalla, a third year dental student, represented the faculty at the Canadian Dental Association / Dentsply Student Clinician Program in Montreal in May. He won the First Place Award for a poster entitled "An Upper Airway Cephalometric Comparison Between Upright and Supine Body Positions in Obstructive Sleep Apnea Patients" based on a project he completed under the supervision of **Dr. Alan Lowe** in the division of orthodontics. The results of Barry's efforts have been accepted as a manuscript and will be published in the journal *Sleep and Breathing*. As a guest of Dentsply, he will represent all 10 Canadian dental schools at the American Dental Association meeting to be held in New Orleans in October.

Dr. Laisheng Lee Chou, a 1997 PhD graduate in oral biology received Boston University's highest teaching award. He was the 29th recipient of the Metcalf Cup and Prize at commencement ceremonies in May.

Dr. Laisheng Lee Chou is a professor and director of the division of oral medicine in the School of Dental Medicine. A world renowned expert lecturer in bone tissue engineering, molecular biocompatibility of implant materials, and HIV-associated oral lesions, Dr. Chou also is a professor in the departments of restorative sciences/biomaterials and director of its oral AIDS clinic. He developed new courses and an array of new methods of instruction since joining the faculty in 1994, and holds patents for a number of biomedical inventions, including one for scaffolds for bone tissue engineering. A tireless teacher, clinician, researcher and administrator, he is famous within the School of Dental Medicine for his clarity when teaching state-of-the-art, complex material.

As a true testament to his teaching excellence, Dr. Chou has



Jaskamal Girm, 3rd year, married Navraj Heran.

left a legacy of students who have incorporated his organized methods and compassionate attitudes in classrooms and labs where they now teach or in treating patients in their dental practices. "Smart but down-to-earth," says a former student, "Dr. Chou is exceptional because he is not just a star; he makes new stars and helps them shine."

Before joining the Boston University faculty, Dr. Chou was a fellow at both the Medical Research Council of Canada and the University of Chicago, principal investigator for the oral pathology division of the University of California's School of Dentistry in San Francisco, and taught at both Shanghai Railway Medical University and Shanghai No. 2 Medical University in China. He received his doctorate of dental medicine in 1978 from Shanghai No. 2 Medical University, postdoctoral diplomas in oral pathology and oral medicine from the University of California, and his Ph.D. in oral biology from the University of British Columbia. (Reprinted with permission by Boston University.)

Marriages

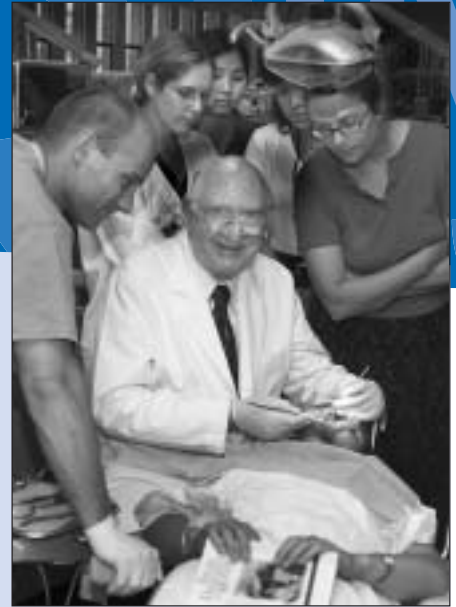
July 27 was a big day for dental student weddings. Second year student, **Jennifer Hermesmann** (formerly Martin) married metals and materials engineer, Chris Hermesmann. And 3rd year student, **Jaskamal Girm**, married Navraj Heran in a traditional ceremony.

Congratulations to all!

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Join Us

Calendar

November

- 1 UBC Alumni Toronto annual event with President Martha Piper
- 2 CDE: Violent crimes from a dental perspective: arguing for the dead, Dr. David Sweet
- 7 CDE: Oral radiology: pitfalls and interpretation, Dr. Colin Pricet
- 16 CDE: Advanced rotary nickel titanium instrumentation, Dr. Jeff Coil, Dr. Bob Augsburger*
- 22 CDE: Internet for dental auxiliaries, Christine Wyatt
- 23 CDE: Predictable esthetic adhesive dentistry for the entire mouth, Dr. Chris Hooper
- 30 CDE: Keeping the periodontal skies sunny: improving forecasts for the dental team, Dr. Cary Galler, Lisa Supeene

December

- 3 UBC Alumni Kelowna Canadian Club Lunch with President Martha Piper
- 6 Vancouver and District Dental Society Midwinter Clinic
- 7 CDE: Incorporating dental microscopy in your practice, Dr. Jeff Coil, Dr. Glenn Van As*

* Limited enrollment.

† Thursday evening lecture series for dental hygienists.

To register for UBC Dentistry CDE courses, call (604) 822-2627 or visit www.dentistry.ubc.ca and click on Continuing Education and then Calendar of Courses. The above calendar of courses is subject to change.

Correction

Please note that the Vancouver & District Dental Society's Midwinter Clinic is scheduled for December 6 and not November 6 as listed in the summer issue. For more information contact the VDDS at (604) 683-5730 or www.vdds.com. Good Impressions regrets the error.

Advance Notice

The Richard V. Tucker Symposium September 25-27, 2003

In recognition of Dr. Tucker's exceptional contribution to dentistry at UBC, in North America, and throughout the world, International Education at UBC Dentistry is honoured to announce the The Richard V. Tucker Symposium.

**An exciting program of current topics in dentistry
with world-renowned speakers.
Watch for detailed information in the new year.**

Dr. Richard Tucker continues his vital contributions to the field. In August, he presented his 24th clinical course on cast gold restoration for continuing dental education at UBC.

He is also the mentor of six study clubs, clinical operating groups that meet monthly to learn his techniques in gold restoration. The study club movement began in Vancouver with the Richard Tucker Cast Gold Study Club #1, which he continues to mentor. The Academy of Richard V. Tucker Study Clubs was established in 1991 and there are currently 49 groups with approximately 600 members in Canada, the United States and Europe.

www.dentistry.ubc.ca

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