



SPRING/  
SUMMER  
2017

# PROBE

THE SOUTHWEST SOCIETY OF PERIODONTISTS

# SAVE *the* DATE

Summer 2017  
Meeting Event:

July 21-23, 2017

**Alan Scott  
Douglas**

at the  
Omni Barton  
Creek Resort  
& Spa

[www.swsp.org](http://www.swsp.org)

## PRESIDENT'S MESSAGE



### **Becoming an Advocate for the Profession**

Just the other day I went online to our SWSP.org web site and read through our

Mission Statement and Goals:

The Mission of the Southwest Society of Periodontists is to serve its members in their specialty for quality health care and professional development.

The SWSP has established the following goals to guide our activities:

1. To be a premier resource for quality professional information and continuing education.
2. To facilitate membership growth, involvement and professional interaction.
3. To be a financially secure and efficiently managed and stable organization.
4. To be an advocate for the profession.

I feel quite confident the Society has been successful in the first three goals, but the last goal I needed to read again. Not because I hadn't seen it before; in fact, I was there when we held our last strategic planning session where these Goals were formulated. I had to read it again because it reminded me of what has transpired in Texas and across the country in

the last few years and it got me thinking: what is our Society's role in advocating for our profession? Are we advocates for the science? For our patients?

The Oxford English Dictionary defines advocacy as the "public support or recommendation of a particular cause or policy." The word that I think trips most of us up is "public" because public implies the political. So maybe then the question is: are we willing to participate in a process that is by and large political in nature to advocate for our profession, our patients, and our practices?

By now all of us are aware of the lawsuits and challenges to the traditional definitions of specialization in dentistry. The very meaning of the word "specialty" is being diluted. In Texas, our scope of practice, whether it is dental implants or sedation, seems to be under constant challenge, yet the number of people willing to stand publicly and/or financially to truly be advocates for Periodontics are alarmingly few, and nationally our Academy doesn't see political advocacy as part of its Mission. I think this is a big mistake.

At the ADA level, representation by periodontists is minimal, while other specialties flood the House of Delegates to influence scope of practice definitions and proficiency standards. In state legislatures,

continued on page 3

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## Save The Date

2018 Winter Meeting  
January 26 – 28, 2018  
Marriott Las Colinas, Dallas

2018 Summer Meeting  
July 20 – 22, 2018  
– Eilan Hotel & Spa, San Antonio

Visit [www.swsp.org](http://www.swsp.org) to stay updated on the details!



The beginning date listed for the meetings is the date preceding the opening day of the General Session. Registration and a welcome reception for ALL MEMBERS, as well as the Board of Directors meeting, are held on that date.

PRESIDENT'S MESSAGE continued from page 1

specialties with much deeper pockets and a multi-tiered local-state-national political agenda shower money and misinformation on key legislators to push agendas focused on limiting competition, rather than real science or genuine concerns regarding patient safety.

I've heard many times and I probably still say it myself sometimes, that politics just isn't "my thing." But I have come to realize that isn't true. We all have families to take care of and practices to maintain. If you care about those things, you are already "political." The question is if you can take action.

This year alone several of us in Texas have taken time from our practices to meet with state legislators and their truly wonderful, hard-working staff on several occasions due to proposals affecting our profession. Along with other like-minded stakeholder groups, we have pushed for transparency, common goals, data, and science to guide decisions by our legislators that will impact our patients and practices. I am happy to report that to date, thanks to extraordinary efforts by a committed group of people, transparency and science are having their day.

I can assure you that not one of us is a political science major nor a lobbyist, but we continue to work at it because our practices depend on it. Your practices depend on it. Advocacy requires that all of us participate as if our practices depend on it because they do.

So then what is the SWSP's role in advocating for our profession? Certainly it is in the quality of our continuing education, our support of ongoing research, and mentorship of our members through committees

and Board functions. It is definitely in the excellence of the work our members do in their communities.

But the SWSP also has an Ad-Hoc Committee on Governmental and Regulatory Affairs and an Ad Hoc Committee on Sedation that I believe are underutilized given today's challenges. Going forward, I would like the SWSP Board to look into ways to expand the work of these Committees. Perhaps they can serve as an important repository of knowledge that members in our component states can use to learn from each other in order to advocate more effectively for our profession.

In the meantime, continue to be the leaders that you are in your communities. Continue to be proud members of the Southwest Society. Join your state periodontal society and contribute regularly to their efforts. Develop and maintain relationships with your state and local representatives and senators. I have been pleasantly surprised at how welcoming and open they are to hearing from us, especially when we come from a place that values science and data to guide us.

Engaging in the process should not be viewed as something outside of what we do; it is education, applying science, data and building relationships. Look again at those first three goals. It's exactly what we do.

As this is the last President's Message of my tenure, let me say that it has been the privilege of my professional life to serve the Society. To think that I have sat in the same chair occupied by so many of my friends and mentors is truly humbling. I am proud to be a Periodontist, to be your colleague, and to be a member of this distinguished Society.

# SUMMER MEETING SPEAKER INFORMATION

REGISTER NOW at [www.SWSP.org](http://www.SWSP.org)

July 21-23, 2017 – Omni Barton Creek Resort & Spa, 8212 Barton Club Drive, Austin, Texas 78735

## Technology Advancing Dental Implant Cases



Alan Scott Douglas  
Program Director,  
Department of Veterans Affairs

**Presentation Abstract:**  
Patient Specific CAD/CAM/VAD Abutment: As patient esthetic demands increase, it is important to understand how a patient specific abutment system can increase the long term success and final esthetic result. This lecture will discuss the

advantage of patient specific (CAD/VAD/CAM) abutments, the simple procedural steps to use CAD/VAD/CAM abutments, and the improved long term maintenance of CAD/VAD/

CAM abutments. A detailed work flow for partially edentulous and fully edentulous cases will be presented to ensure a successful case.

**Educational Objectives:**

- Patient Specific CAD/CAM/VAD Abutment
- Patient Specific Conus Abutment
- Patient Specific Abutment CAD/CAM ISUS substructures
- Patient Specific CAD/CAM/VAD Abutment

**Bio:**

Dr. Alan Scott Douglas is a 1989 graduate of The University of Texas Dental School at San Antonio. Following graduation, Dr. Douglas completed a one-year residency in Advanced Education in General

Dentistry at The University of Texas Dental School at San Antonio. Dr. Douglas then completed a General Practice Residency at The Audie L. Murphy Memorial Veterans Hospital. He is currently the program director for the AEGD residency program at the VA hospital, a position he has held for the past 27 years. Dr. Douglas has participated in numerous implant and dental materials studies, including a focus implant research project, an overdenture implant research study, a ceramic abutment study, a study on the 3.0mm implant, and a study on a fixed but removable telescopic prosthesis. He has published numerous abstracts on his dental materials research.

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**REGISTRATION IS NOW OPEN!**

JOIN US!

SWSP Summer Meeting Event – July 21 – 23, 2017

Omni Barton Creek Resort & Spa, Austin, Texas

REGISTER NOW: <https://swsp.memberclicks.net/2017-summer-meeting-registration>

	Early Bird Price Ends June 23, 2017	Regular Reg. Rate June 24-July 14, 2017	Onsite Reg. After July 14, 2017
SWSP Members	\$295	\$330	\$360
SWSP Student Members	\$0	\$180	\$210
Non-Member Periodontist	\$475	\$530	\$560
Non-Member Dentist	\$350	\$400	\$430
Non-Periodontist			
Graduate Student*	\$200	\$235	\$265
Dental Student*	\$75	\$100	\$130
Dental Hygienist	\$210	\$250	\$310
Dental Assistant	\$210	\$250	\$310
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Active Member Guest**	\$0	N/A	N/A

\*Include letter from Program Director with Documentation of Program

\*\*This category is available only for the first meeting attended by a Potential New Active Member Periodontist who will be attending the meeting with a SWSP Member. Please note the name of the Active Member who invited you on the registration form.

# SUMMER MEETING AGENDA

REGISTER NOW at [www.SWSP.org](http://www.SWSP.org)

July 21-23, 2017 – Omni Barton Creek Resort & Spa, 8212 Barton Club Drive, Austin, Texas 78735

## SCHEDULE OF EVENTS

### FRIDAY July 21, 2017 Location

4:30 PM – 6:00 PM	Board of Directors Meeting	Capitol Room
6:00 PM – 7:00 PM	Welcome Reception and Meeting Registration	Hill Country Veranda

### SATURDAY July 22, 2017

6:30 AM – 7:30 AM	Exhibitor Set-Up	Barton Creek Room
7:30 AM – 8:30 AM	Committee Meetings	Rayburn
7:30 AM	Meeting Registration and Breakfast	Forum Lobby/Barton Creek Room
7:30 AM	Exhibits Open	Barton Creek Room
8:30 AM - 10:00 AM	<b>GENERAL SCIENTIFIC SESSION BEGINS</b> Guest Speaker: Dr. Alan Scott Douglas <b>“Technology Advancing Dental Implant Cases”</b>	Forum
10:00 AM - 10:30 AM	Break with Exhibitors	Barton Creek Room
10:30 AM - 12:30 PM	<b>GENERAL SCIENTIFIC SESSION CONTINUES</b>	Forum
12:30 PM - 1:00 PM	Break with Exhibitors	Barton Creek Room
1:00 PM - 2:30 PM	Luncheon and SWSP Member Business Meeting	Pavilion
3:00 PM - 5:00 PM	New Member and Resident Social	Barton's Lounge

### SUNDAY July 23, 2017

7:30 AM – 9:00 AM	Board of Directors Breakfast Meeting	Capitol Room
7:30 AM	Meeting Registration and Breakfast	Forum Lobby/Barton Creek Room
7:30 AM	Exhibits Open	Barton Creek Room
9:00 AM - 10:30 AM	<b>GENERAL SCIENTIFIC SESSION CONTINUES</b> Guest Speaker: Dr. Alan Scott Douglas <b>“Technology Advancing Dental Implant Cases”</b>	Forum
10:30 AM - 11:00 AM	Break with Exhibitors	Barton Creek Room
11:00 AM - 12:30 PM	<b>GENERAL SCIENTIFIC SESSION CONCLUDES</b>	Forum

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## THANK YOU TO OUR EXHIBITORS

Many, many thanks to the Exhibitors who supported the Southwest Society of Periodontists by exhibiting at the Winter 2017 Meeting at the Dallas Marriott Las Colinas. We appreciate your kind comments and look forward to welcoming you to our future meetings.

**ACE Surgical Supply Company**

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Implants



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DENTISTRY & THE LAW:  
New Challenges in Risk  
Management and Ethics

Robert M. Anderton, D.D.S., J.D., LLM



Evidence Based Material Selection  
for Hard and Soft Tissue Regeneration  
and Dental Implant Therapy

E. Todd Scheyer, D.D.S., M.S.



Evidence-Based Alternatives for Autogenous  
Grafts: Outcomes, Attachment and Stability

Michael K. McGuire, D.D.S.

## Winner – Clinical Sciences Category

### John F. Prichard Prize for Graduate Research

## “Histological Evaluation of Healing Following Ridge Preservation using a Combined Cortical/Cancellous Mineralized Freeze-Dried Bone Allograft”

Blaine Calahan, The University of Texas Health Science Center San Antonio



Blaine Calahan

**Purpose:** Ridge preservation following tooth extraction is a commonly performed procedure in the modern era of dental implant therapy. The procedure,

aimed at the maintenance of alveolar bone height and width, can be successful using a variety of available grafting materials, with freeze-dried bone allografts (FDBA) being some of the most prevalent. FDBA products available on the market include 100% cortical grafts, 100% cancellous grafts, and combination 50/50% cortico-cancellous grafts. Native human bone is made up of cortical and cancellous components, yet there is no available evidence to guide the dental surgeon whether the use of a combined cortico-cancellous allograft is advantageous during ridge preservation. Therefore, the primary objective of the current study is to evaluate vital bone formation histologically, while the secondary objective is to evaluate ridge dimensional changes clinically using a combined 50/50% cortico-cancellous FDBA compared with a 100% cortical FDBA.

**Materials and Methods:** Forty-four patients requiring extraction and ridge preservation were randomized into two equal groups receiving either a 100% mineralized cortical FDBA or a 50/50% mineralized cortico-

cancellous allograft obtained from a single donor. At the first surgery, the tooth was extracted and alveolar height and width measurements were made using custom plastic stents. The alveolus was then filled with the randomized graft material, the orifice covered with a dense polytetrafluoroethylene (dPTFE) membrane, and replaced flaps secured with dPTFE sutures. Each non-molar study site underwent an 18-20 week healing period which included removal of the membrane at the 1-month post-operative visit. At the second surgery, a core biopsy was harvested of grafted bone, clinical measurements were repeated using the stent, and a dental implant was placed in the correct restorative position. Histomorphometric analysis allowed determination of the tissue contents of each core biopsy including the percentage of: vital bone, residual graft particles, and connective tissue/other.

**Results:** Forty of 44 individuals completed the study. Histologic analysis of the 100% cortical control group revealed the following mean tissue percentages: 24.54% vital bone, 28.14% residual graft, and 47.32% CT/other. In comparison, the 50/50% cortico-cancellous test group analysis revealed the following: 26.40% vital bone, 23.37% residual graft, and 50.23% CT/other. Between the groups, no significant mean differences were observed for percentage of vital bone ( $p=0.614$ ), residual graft ( $p=0.216$ ), or CT/other ( $p=0.429$ ). There were no statistically

significant correlations observed between the percentage of vital bone and smoking status, anterior vs. posterior tooth position in the arch, maxilla vs. mandible, presence vs. absence of dehiscence. There were no significant changes in buccal or lingual ridge height or ridge width between surgical time points for either group with exception of a significant change in ridge width in the 50/50% cortico-cancellous group ( $-0.90\text{mm}$ ,  $-9.37\%$ ,  $p=0.002$ ). There were no significant differences in dimensional changes between groups: change in buccal ridge height ( $p=0.779$ ), lingual ridge height ( $p=0.717$ ), or ridge width ( $p=0.495$ ). No significant correlations were observed between initial buccal plate thickness and change in ridge width, nor for percent vital bone versus change in ridge width, buccal ridge height, or lingual ridge height.

**Discussion and Conclusion:** This study provides the first histologic evidence of a 50/50% cortico-cancellous FDBA in a ridge preservation application. Our findings conclude that there is no distinct advantage or disadvantage for use of a 50/50% cortico-cancellous FDBA versus a 100% cortical FDBA with regards to the percentage vital bone formation or maintenance of ridge dimension. All subjects were able to have implants placed in the proper restorative position with favorable primary stability regardless of graft material used.



## Winner – Basic Sciences Category

### John F. Prichard Prize for Graduate Research

#### “In Vitro Analysis Of Antimicrobial Activity Between An Amnion-Chorion Membrane As Compared To A Collagen Membrane”

Haroon Ashraf, UoC



Haroon Ashraf

amnion-chorion membrane (ACM).

**Purpose:** The purpose of this study is to evaluate wound biomodification by assessing antimicrobial properties present within a human derived composite

**Methods and Materials:** Membranes analyzed were the human derived ACM BioXclude® (Snoasis Medical) and the porcine derived collagen membrane BioGide® (Geistlich). Paper discs served as a positive control along with paper discs containing tetracycline (TCN) at a minimum bactericidal concentration (MBC) of 62 µg/mL as a negative control. *Aggregatibacter actinomycetemcomitans* (A.a.), *Streptococcus mutans* (S.m.), and *Streptococcus oralis* (S.o.) were chosen for study. The same number of colony forming units per milliliter (CFU/mL) for each bacterial species was inoculated on each membrane and control disc in triplicate for three separate trials. Samples were grown over brain heart infusion (BHI) agar medium under optimal conditions. Discs from each group were removed at 12 and 24 hours and sonicated to remove the bacteria off the membranes. A serial dilution was performed to quantify bacterial growth by counting the CFU/mL present. A Wilcoxon signed-rank test was performed to compare any differences between growths.

**Results:** Three in vitro trials were conducted for a total of thirty-six data points at each time frame to determine median microbial counts (Table 1). The ACM inhibited growth at all time points, with all bacterial strains, identical to the negative control TCN discs. The collagen membrane and positive paper controls did not inhibit growth of any of the bacterial species throughout the 24-hour study period.

**TABLE 1: MEDIAN MICROBIAL COUNTS**

Species and Initial Inoculation	Time (Hours)	Collagen (CFU/mL)	ACM (CFU/mL)	Positive Control (CFU/mL)	Negative Control TCN (CFU/mL)
A.a.	12	4.3 x 10 <sup>5</sup>	0*	2.0 x 10 <sup>5</sup>	0*
1.8 x 10 <sup>6</sup> CFU/mL	24	1.4 x 10 <sup>7</sup>	0*	1.4 x 10 <sup>7</sup>	0*
S.m.	12	5.0 x 10 <sup>6</sup>	0*	4.4 x 10 <sup>6</sup>	0*
2.4 x 10 <sup>4</sup> CFU/mL	24	7.4 x 10 <sup>7</sup>	0*	1.4 x 10 <sup>7</sup>	0*
S.o.	12	7.0 x 10 <sup>6</sup>	0*	5.8 x 10 <sup>6</sup>	0*
2.3 x 10 <sup>5</sup> CFU/mL	24	2.2 x 10 <sup>7</sup>	0*	6.0 x 10 <sup>7</sup>	0*

\* P < 0.05 for microbial growth on ACM or negative control vs. either collagen membrane or positive control.

**Discussion:** The membranes used in the study have different properties that can be advantageous to clinical application. Specific to ACM is an antimicrobial component. This is a noteworthy finding as the inhibition of bacterial growth may enhance regenerative outcomes. DNA synthesis within epithelial cells increases between 12-24 hours followed by epithelial migration at a rate of 0.5 mm per day. Furthermore, it has been seen that the epithelial tissue can repair between 3-5 days. At this time a protective junction between incised tissues can form a barrier to outside pathogens. If ACM can decrease microbial viability during the initial healing time post-surgery, then it may prove to be efficacious in the healing process as it may limit the number of bacterial pathogens and subsequent inflammatory mediators that may delay healing.

**Conclusions:** This is the first study to demonstrate antimicrobial properties present within a regenerative membrane. ACM was proven to be as bactericidal as paper discs inoculated with TCN at its MBC. The collagen membrane does not appear to have antimicrobial properties due to its support of the bacterial growth similar to the positive control discs. The findings from this study provide the clinician with important information to enhance surgical outcomes.

## Presenter – John F. Prichard Prize for Graduate Research

### “Wound Healing After Tooth Extraction and Ridge Preservation with Combined Cortical/Cancellous versus 100% Cancellous Mineralized Freeze-Dried Bone Allograft”

Randy Demetter, The University of Texas Health Science Center San Antonio



Randy Demetter

**Purpose:** In preparation for dental implant placement, ridge preservation following tooth extraction has been a common practice for many years. The goal of

ridge preservation is to minimize the dimensional changes in the alveolar ridge following tooth extraction. While a number of different materials are available, mineralized freeze-dried bone allografts (FDBA) are commonly used and have produced successful results. FDBA comes in several varieties, including allograft derived from 100% cancellous bone, 100% cortical bone and a combination of 50/50% cortical/cancellous bone. Most published literature reports on results obtained using a 100% cortical FDBA. There is minimal data available regarding 100% cancellous FDBA or 50/50% cortical/cancellous FDBA. The primary goal of this study is to evaluate new vital bone formation following ridge preservation when 100% cancellous FDBA is used in comparison to 50/50% cortical/cancellous bone. Histologic analysis is the primary objective, while the secondary objective is a comparison of the dimensional stability between the two groups.

**Materials and Methods:** A total of 44 patients were recruited for enrollment in the study. Each patient required extraction of a single-

rooted tooth planned for restoration with a dental implant. At the time of extraction, each patient was randomized into one of two groups for ridge preservation: 100% cancellous FDBA or 50/50% cortical/cancellous FDBA. At the time of extraction, dimensional measurements were made using a custom-fabricated acrylic stent. Ridge preservation was then performed using one of the aforementioned grafts. A dense polytetrafluoroethylene (dPTFE) membrane was placed over the grafted area and gingival flaps were secured with dPTFE sutures. Following a healing period of 18-20 weeks, a dental implant was placed at the study site. Using the same custom stent, clinical measurements were repeated and a core of bone was harvested during the preparation of the osteotomy that was later processed for histologic analysis of vital bone, residual graft and connective tissue/other.

**Results:** Of the original 44 individuals enrolled in the study, 39 patients completed treatment and had bone cores harvested for analysis. In the 100% cancellous group, histologic analysis produced the following results: 28.81% vital bone, 18.82% residual graft and 52.37% connective tissue/other. The 50/50% cortical/cancellous group produced the following results: 26.40% vital bone, 28.14% residual graft and 47.32% connective tissue/other. No statistically significant differences were found between groups in any of the three categories included in histologic analysis (vital bone:

$p=0.585$ , residual graft:  $p=0.193$ , connective tissue/other:  $p=0.544$ ). With regard to the secondary objectives, no statistically significant differences were found between the groups when comparing change in ridge height at the lingual aspect or change in ridge width. With regard to change in ridge height at the buccal aspect, however, the 100% cancellous group produced a mean loss of 1.00 mm whereas the 50/50% cortical/cancellous group produced a mean gain of 0.10 mm. This difference was found to be statistically significant ( $p=0.036$ ). No correlations were noted in examining buccal plate thickness, presence or absence of a dehiscence at time of extraction, smoking status, location in the arch or placement in the maxilla vs. the mandible in either histologic or dimensional analyses.

**Discussion and Conclusion:** This study is the first of its kind to provide evidence of 50/50% cortical/cancellous FDBA vs. 100% cancellous FDBA when used in alveolar ridge preservation. Our findings indicate that there is no statistically significant difference in histologic parameters, specifically, vital bone, residual graft and connective tissue/other, between the two groups. The only statistically significant difference in dimensional analysis was found in change in ridge height at the buccal aspect where the 100% cancellous group lost significantly more ridge height than did the 50/50% cortical/cancellous group. Implants were placed successfully in all patients irrespective of graft material.

## Presenter – John F. Prichard Prize for Graduate Research

### “Role and Mechanism of Bone Morphogenetic Protein-2 in the Differentiation of Periodontal $\alpha$ SMA+ Stem Cells into Components of the Periodontium”

Rebecca Neitzke, U.S. Air Force Postgraduate Dental School and The University of Texas Health Science Center San Antonio



Rebecca Neitzke

#### **Purpose:**

Periodontitis is the most common cause of tooth loss, and the search for a predictable regenerative approach to preserve periodontal

tissues is an on-going effort. Identification of key genes that are necessary for the proper differentiation of stem cells into mature cells of the periodontium could lead to new regenerative modalities. It is hypothesized that bone morphogenetic protein-2 (BMP2) is required for the differentiation of  $\alpha$ -smooth muscle actin-positive ( $\alpha$ SMA+) stem cells into periodontal ligament (PDL) fibroblasts, alveolar bone osteoblasts, and cementoblasts. The purpose of this study was to determine the role and mechanisms of the BMP2 gene in the differentiation of  $\alpha$ SMA+ stem cells into the cellular components of these different periodontal tissues.

**Methods and Materials:**  $\alpha$ SMA+ cells were lineage-traced in vivo to components of the periodontium in the presence and absence of the BMP2 gene. Colocalization of markers specific to alveolar bone osteoblasts (dentin matrix protein-1, DMP1), periodontal ligament fibroblasts (Scleraxis, Periostin), and cementoblasts (DMP1) with the lineage marked  $\alpha$ SMA+ cells (tdTomato+) was quantified using Fiji ImageJ software. An in vitro  $\alpha$ SMA+

periodontal stem cell model with the BMP2 gene knocked out (BMP2cKO) was also used to characterize the PDL and mineralizing regions in vitro by immunocytochemistry. Half of the BMP2cKO PDL stem cells were treated with recombinant human BMP2 with untreated cells serving as the control. Cell growth was stopped at various time points in order to observe mineralization and the spatial and temporal expression of periodontal markers. Lastly, the BMP2 gene was selectively deleted in vitro with Adenovirus-expressing Cre recombinase. Cell cultures were again stopped at various time points and stained with Von Kossa and Van Geisen stains to evaluate mineral matrix production. Full genomic transcriptome analysis was also performed at early and late stages with RNA-seq methods. Network and pathway analysis was carried out using the R program, weighted gene co-expression network analysis (WGCNA), and the associated gene ontology tools.

**Results:** In the absence of the BMP2 gene in vivo,  $\alpha$ SMA+ periodontal stem cells showed a 50-70% reduced capacity to differentiate into Scleraxis+ mature PDL cells and DMP1+ mature cementoblasts and osteoblasts. Deletion of BMP2 in the in vitro model also qualitatively demonstrated reduced mineral matrix formation. This finding was quantified when BMP2 was deleted using Adenovirus-CMV-Cre. There was a 70-80% reduction in organized mineral formation using this model, and this phenotype could partially be rescued by addition of human recombinant

BMP2. Full transcriptome analysis at the undifferentiated state and at the fully differentiated state identified 9,107 genes that were significantly regulated during these processes. Key pathway and network analysis indicate that in the absence of the BMP2 gene, there is a reduction in expression of DMP1 and osteocalcin, as well as changes in several genes associated with collagen formation and maturation.

**Discussion:** The importance of BMP2 in the growth and development of bone and cartilage is well established. BMP2 deletion decreases the progression of periodontal stem cells into various tissue components, as seen by the reduced capacity to form mature osteoblasts, both cellular and acellular cementoblasts, and PDL fibroblasts. By removing the BMP2 gene, a set of interconnected gene expression modules further elucidates potential pathways for the differentiation of cells involved in periodontal regeneration. Understanding the basic lineage properties and gene regulatory networks of these highly regenerative cells can lead to new knowledge that can be applied to periodontal regeneration on an individual patient level.

**Conclusions:** Expression of BMP2 is required for proper lineage progression of  $\alpha$ SMA+ periodontal stem cells to PDL fibroblasts, cementoblasts, and alveolar bone osteoblasts. When BMP2 is deleted, there is altered expression of cellular markers in these tissues in vivo as well as decreased mineralization and altered gene expression in vitro.

## Presenter – John F. Prichard Prize for Graduate Research

### “Case Selection and Treatment Protocol for Immediate Dental Implants in the Esthetic Zone: A Controlled Clinical Trial”

Catherine Tatum, The University of Texas Health Science Center San Antonio



Catherine Tatum

**Purpose:** The trend in implant dentistry is directed toward predictable esthetic outcomes with a decrease in treatment time. Immediate implant

placement is an acceptable option for clinicians to achieve esthetic outcomes for their patients with less surgical appointments and less healing time. However, recession of the midfacial mucosa is a risk factor of immediate implant placement. The objective of this study is to compare the hard and soft tissue changes and esthetic outcomes of immediate implants placed in the esthetic zone of patients with thick or thin tissue phenotypes.

**Materials and Methods:** Thirty-one patients were diagnosed with a non-restorable maxillary first premolar, canine or incisor and were treatment planned for extraction and replacement with a dental implant. All patients were over the age of 18 years old, systemically healthy and smoked less than 10 cigarettes a day, if current smoker. The patients were determined to have a thick or a thin tissue phenotype by testing the visibility of a UNC dental probe tip through the soft tissue. The surgical procedure consisted of a minimally traumatic extraction and evaluation of the remaining socket for four bony walls for inclusion in the study. Titanium dental implants with a hydrophilic

surface of adequate length and of 3.3mm or 4.1mm diameter were placed in a restoratively driven position. Bony measurements were made in relation to the platform of the implant. Freeze-dried bone allograft (FDBA) was used to graft the remaining socket as well as over the facial plate to overcontour. A resorbable collagen membrane was placed over the bone graft. The surgical procedure for the groups were identical with the exception of the addition of a connective tissue graft harvested from the palate and placed over the collagen membrane for the thin tissue phenotype group. The flap was coronally advanced and sutured. Hard tissue measurements were made following implant placement and after 3 months of healing during the uncover procedure. The soft tissue was digitally measured based on pictures that were imported in a software (Gingival Status) of casts prior to the extraction, following the prosthesis delivery and at the 3 months follow-up. Radiographic interproximal bone measurements were made using standardized periapical radiographs taken at the time of crown placement and after 3 months. Clinical parameters and esthetic score (PES/WES) evaluations were completed using photographs taken prior to the extraction and at 3 months following prosthesis placement.

**Results:** A total of 31 patients (21 female, 10 males) were enrolled in the study. Seventeen and fourteen patients had a thick and thin tissue phenotype, respectively. Midfacial marginal tissue changes were not

different between the two phenotype groups (Thick group: 0.18mm+/-1.13mm vs. Thin group: 0.65+/-1.09mm (p=0.25)). There was no significant difference in the interproximal radiographic bone level changes between the two groups. Clinical acceptability was defined as PES + WES  $\rightarrow$ 12 and there was no significant difference between treatment groups (p=0.24). All but one bony measurement was not significantly different between the groups. All clinical measurements in both groups were indicative of healthy peri-implant tissue.

**Discussion and Conclusion:** This study suggests that immediate implant placement with proper placement with bone contour grafting can achieve favorable esthetics irrespective of the soft tissue phenotype provided that a connective tissue graft is added in patients with a thin tissue phenotype. While encouraging, these results need to be confirmed by subsequent long term follow up data.

# Recipients – John F. Prichard Prize for Graduate Research Award

<b>Name</b>	<b>Organization</b>	<b>Date</b>
Dr. Thomas W. Mabry	LSU School of Dentistry	February 9, 1985
Dr. Jeffrey M. Snitzer	LSU School of Dentistry	February 8, 1986
Dr. Jon E. Piche	UTSHSCA and Wilford Hall USAF Medical Center	February 7, 1987
Dr. Robert Sabatini	UTSHSCA and Wilford Hall USAF Medical Center	February 6, 1988
Dr. David E. Deas	UTSHSCA and Wilford Hall USAF Medical Center	February 4, 1989
Dr. Brian L. Mealey	UTSHSCA and Wilford Hall USAF Medical Center	February 17, 1990
Dr. Martha L. Garito	UTSHSCA and Wilford Hall USAF Medical Center	February 9, 1991
Dr. Karl Allen Smith	UTSHSCA and Wilford Hall USAF Medical Center	February 8, 1992
Dr. Dennis M. Anderson	UTSHSCA and Wilford Hall USAF Medical Center	February 6, 1993
Dr. Sarah D. Shih	Baylor College of Dentistry	February 5, 1994
Dr. Janet Y. Martin	UTSHSCA and Wilford Hall USAF Medical Center	February 11, 1995
Dr. William C. Stentz, Jr.	UTSHSCA and Wilford Hall USAF Medical Center	June 21 1996 for February 3, 1996 (February Meeting was Cancelled)
Dr. Michael P. Najera	Baylor College of Dentistry	February 1, 1997
Dr. Paul J. Ezzo	University of Texas at San Antonio School of Dentistry	February 7, 1998
Dr. Edward A. Shinedling	Baylor College of Dentistry	February 6, 1999
Dr. Theodore C. Weesner	University of Texas at San Antonio School of Dentistry	February 5, 2000
Dr. E. Todd Scheyer	University of Texas at San Antonio School of Dentistry	February 24, 2001
Dr. Michael McConnell Perry	Baylor College of Dentistry	February 9, 2002
Dr. Elizabeth M. Tandy	UTSHSCA and Wilford Hall USAF Medical Center	February 8, 2003
Dr. Edithann J. Graham	UTSHSCA and Wilford Hall USAF Medical Center	February 8, 2003
Dr. Dwight L. Johnson	UTSHSCA and Wilford Hall USAF Medical Center	February 5, 2005
Dr. Scott M. Dowell	University of Texas at San Antonio School of Dentistry	February 4, 2006
Dr. Scott Gruwell	UTSHSCA and Wilford Hall USAF Medical Center	February 10, 2007
Dr. Brently A. Grimard	University of Texas at San Antonio School of Dentistry	February 9, 2008
Dr. Amy S. Kauvar	UTSHSCA and Wilford Hall USAF Medical Center	February 7, 2009
Dr. Tina M. Beck	University of Texas at San Antonio School of Dentistry	February 13, 2010
Dr. Peter M. Pedalino	UTSHSCA and Wilford Hall USAF Medical Center	February 12, 2011
Dr. Andrew W. Baker	UTHSCSA and U.S. Air Force Postgraduate Dental School	February 11, 2012
Dr. Ryan S. Holbrook	UTHSCSA and U.S. Air Force Postgraduate Dental School	February 9, 2013
Dr. Stacy Renay Beltran	Texas A&M University Baylor College of Dentistry	February 7, 2014
<b>Clinical Sciences Research Category:</b>		
Dr. Tyler D. Borg	University of Texas at San Antonio School of Dentistry	February 7, 2015
Dr. John W. Thousand IV	University of Colorado School of Dentistry	January 30, 2016
Dr. Blaine Calahan	University of Texas at San Antonio School of Dentistry	January 27, 2017
<b>Basic Sciences Research Category:</b>		
Dr. Eirleen Y. Hyun	UTHSCSA and U.S. Air Force Postgraduate Dental School	February 7, 2015
Dr. Erin Wyrick	UTHSCSA and U.S. Air Force Postgraduate Dental School	January 30, 2016
Dr. Haroon Ashraf	University of Colorado School of Dentistry	January 27, 2017

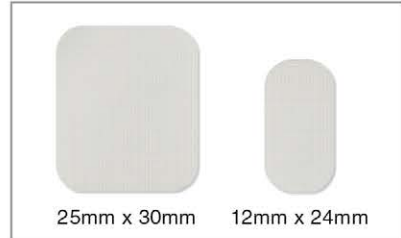
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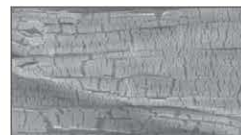


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# SOUTHWEST SOCIETY OF PERIODONTISTS BUSINESS LUNCHEON MEETING MINUTES

Saturday, January 28, 2017 – 12:30 pm – 1:00 pm

## **CALL TO ORDER:**

Dr. Eduardo Lorenzana, President – Called the meeting to order at 12:52 PM and welcomed members and guests. Dr. Lorenzana welcomed the residents from the various programs. Dr. Lorenzana recognized Dr. Alan Moritz who has retired from dentistry and withdrew from the Society.

## **INVOCATION:**

Dr. Bill Reeves. – Also announced the recent passing of Dr. Tim Moore, Past President of the Society from 2003-2004 and the Society observed a moment of silence.

## **SPONSOR/EXHIBITOR RECOGNITION:**

Dr. Lorenzana – Expressed the Society's appreciation to the Sponsors and Exhibitors and their continued support of the Society. In absence of Dr. Jeff Pope, Dr. Eduardo Lorenzana thanked and welcomed the Sponsors and Exhibitors. Dr. Lorenzana extended recognition to the meeting Sponsors, Dentsply, Geistlich and Implant Direct. Dr. Lorenzana asked all Sponsor and Exhibitor representatives to provide a brief introduction.

## **SECRETARY'S REPORT:**

Dr. Pilar Valderrama – Thanked the supporters of the Prichard Competition, Proctor & Gamble. Dr. Valderrama congratulated the residency directors, research mentors and judges, and all of the participants in the competition and distributed certificates.

Approval of Minutes from the July 23, 2016 Business Meeting

– Dr. Lorenzana asked if all in attendance had reviewed the minutes of the previous meeting left for review during the luncheon.

Motion to approve the minutes by Dr. Brian Mealey and seconded by Dr. Brad Crump. There was no discussion and the motion passed.

**TREASURER'S REPORT:** Dr. Sara Bender – No report

**CENTRAL OFFICE REPORT:** Debbie Peterson – No report

**PROBE EDITOR'S REPORT:** Dr. Brian L. Mealey – No Report

**WEBMASTER'S REPORT:** Dr. David Yu – No Report

## **STANDING COMMITTEE REPORTS:**

**ANNUAL MEETINGS COMMITTEE:** Dr. Josh Chapa  
– Thanked the Sponsors once again and reminded everyone about the upcoming Summer Meeting in Austin.

## **BUDGET AND FINANCE COMMITTEE:**

Dr. Guy Huynh-Ba – No Report

## **CENTRAL OFFICE COMMITTEE:**

Dr. Bradley Crump – No Report

## **EXECUTIVE COMMITTEE:**

Dr. John J. Dmytryk – No Report

## **MEMBERSHIP COMMITTEE:** Dr. Natalie Frost

– The Membership Committee presented the Members Petitioning for Active Membership or Change in Status. Motion by Dr. Natalie Frost to accept the Membership Committee Report. The motion was seconded by Dr. Bradley Crump. The motion passed.

## **NOMINATING COMMITTEE:** Dr. Scott Dowell

– Reported on the slate of Board of Director nominations: President- Scott Dowell  
President Elect - Cora Marsaw  
Secretary Elect - Sara Bender  
Treasurer Elect - David Yu  
Member at Large - Kristi Soileau  
Member at Large - Taka Miyamoto  
Dr. Scott Dowell made a motion to accept the nominations. Dr. Pilar Valderrama seconded the motion. Motion passed.

## **SCIENTIFIC AFFAIRS COMMITTEE:**

Dr. Pilar Valderrama – No Report

## **AMERICAN ACADEMY OF PERIODONTOLOGY:**

Dr. Stephen Bass – Reported on American Academy of Periodontology (APP) conference updates and introduced Board of Trustees candidates, Secretary/Treasurer candidates.

## **SCIENTIFIC AFFAIRS COMMITTEE:**

Dr. Charles Powell – No Report

## **STRATEGIC LONG-RANGE PLANNING COMMITTEE:**

Dr. Bradley Crump – No Report

## **SEDATION COMMITTEE:** Dr. Todd Scheyer/Dr. Chuck Rader

In Dr. Chuck Rader's absence, Dr. Todd Scheyer reported on behalf of the Texas Society of Periodontists (TSP) on the recent legislative victory. Dr. Scheyer noted the need for SWSP members to join the TSP meeting today and to become involved as a TSP member to carry Texas State advocacy efforts forward during this critical time.

## **AD HOC COMMITTEE REPORTS:**

No Ad Hoc Committee Reports

## **EXHIBITOR COMMITTEE REPORT:**

Dr. Jeff Pope – In the absence of Dr. Jeff Pope, Dr. Eduardo Lorenzana again thanked all of the exhibitors for their support.

## **GOVERNMENTAL AND REGULATORY AFFAIRS COMMITTEE REPORT:**

Dr. John J. Dmytryk – No report

## **BY-LAWS, POLICIES AND PROCEDURES REPORT:** Dr.

Brian Mealey – No report

**OLD BUSINESS:** No old business

**NEW BUSINESS:** No new business

continued on page 16

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<sup>1</sup>Ishikawa-Nagai S, Da Silva JD, Weber HP, Park SE. Optical phenomenon of peri-implant soft tissue. Part II. preferred implant neck color to improve soft tissue esthetics. Clin. Oral Impl. Res. 18, 2007; 575-580.

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Business Luncheon Meeting  
continued from page 15

**ADJOURNMENT:** Dr. Eduardo Lorenzana asked for a motion to adjourn. Motion to adjourn made by Dr. Stephen Bass. The motion was seconded by Dr. Kristi Soileau. The meeting was adjourned at 1:47 PM.

**NOMINATING COMMITTEE REPORT:**

The Nominating Committee is please to recommend the following Officers for consideration by the General Assembly at the Business Meeting to be held in conjunction with the Summer Meeting 2017:

President Elect Dr. Cora Marsaw  
Secretary Elect Dr. Sara Bender  
Treasurer Elect Dr. David Yu

**Board Members at Large:**

Member at Large Dr. Kristi Soileau (2017 – 2021)  
Member at Large Dr. Taka Miyamoto (2017 – 2021)

## ANNOUNCEMENTS

**ATTENTION OFFICERS, BOARD MEMBERS AND COMMITTEE CHAIRS**

Please note that the Board of Directors Meeting will begin at 4:30 pm on Friday, July 21, 2017. Officers, Board members and Committee Chairs are encouraged to attend.

The Board of Directors Breakfast meeting is scheduled to begin at 7:30 am on Sunday, July 23rd. **Since new Officers, Board members and Committee Chairs take office at the end of the Saturday Business Luncheon meeting, the new Officers, Board Members and Committee Chairs should plan to attend the Board of Directors Breakfast meeting on Sunday morning.**

**ATTENTION COMMITTEE CHAIRS**

Please remember that as the Committee Chair, it is your responsibility to contact your committee members and encourage them to attend the Southwest Society of Periodontists meetings and to participate in the Committee Meeting on Saturday morning at the SWSP meetings. The Committee Meetings at the 2017 Summer Meeting are scheduled from 7:30 – 8:30 AM on Saturday, July 22nd. The committee members are listed in this issue of the PROBE. Please contact your committee members and encourage them to attend this very important meeting.

**INCREASE IN REGISTRATION FEES**

In an effort to ensure the Society can continue to provide educational programs of exceptional quality with world renowned speakers, the Board recently adopted a modest increase in registrations fees which are effective for the Summer 2017 Meeting. The Society's mission to serve its members in their specialty for quality health care and professional development depends on ensuring the highest quality programs for our members as well to ensure the Society's financial security and an efficiently managed and stable organization.

## STUDENT MEMBERS ATTEND SWSP MEETINGS AT NO CHARGE

The SWSP Board of Directors invites Student Members of the SWSP to attend the Summer 2017 Meeting of the SWSP at No Charge for Early Registration. Please register online at [www.swsp.org](http://www.swsp.org).

We value you as Student Members and this offer is made to encourage you to attend the meetings of the SWSP and become Active Members upon completion of your Graduate Program.

## 46th Annual Arthur H. Merritt Memorial Lecture in Advanced Periodontics

The Department of Periodontics at Texas A & M University Baylor College of Dentistry is pleased to invite you to be our guest at the 46th Annual Arthur H. Merritt Memorial Lecture in Advanced Periodontics. Our distinguished lecturer this year is Dr. Tom Van Dyke and his presentation will be "Inflammation, Periodontitis and the link to Systemic Diseases".

Thomas Van Dyke, D.M.D., Ph.D., is Vice President for Clinical and Translational Research, and Director of the Center for Clinical and Translational Research at the Forsyth Institute in Cambridge, MA.

SPEAKER: Dr. Tom Van Dyke  
DATE: Saturday, August 5, 2017  
PLACE: Beasley Auditorium  
TIME: 7:30 AM – 1:30 PM  
Baylor Scott & White Hospital

Arthur Merritt Lecture attendance is by invitation. Its purpose is to provide new information on recent developments and concepts related to the specialty of Periodontology. The Arthur H. Merritt Memorial Lectureship is supported by a small endowment from the Merritt family and corporate sponsors. This annual event has never charged a registration fee; however, this year a small fee will be required to facilitate the continuation of this premier event. We appreciate your support and continued attendance.

Contact Ms. Debbie Roberts for questions at [droboterts@tamhsc.edu](mailto:droboterts@tamhsc.edu)  
Registration Link:  
<https://46thamerritt.eventbrite.com>



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# WELCOME NEW MEMBERS

Michael Goodwin	Associates in Periodontics, Implantology, & Endodontics 1005 Long Prairie Rd #100 ..... Flower Mound, TX
Srinivas Ayilavarapu	University of Texas at Houston School of Dentistry..... 7500 Cambridge St, Rm-6423 ..... Houston, TX
Claudia Millan	Rhoades Dental Clinic 2940 Stanley Rd ..... San Antonio, TX
Elio Reyes Rosales	Periodontics and Oral Implantology ..... 3112 Lubbock Ave
Gregory F. Shanbour	American Academy of Periodontology, Oklahoma Dental Assoc... 8117 S. Walker ..... Oklahoma City, OK
Flavia Lakschevitz	University of Texas at Houston School of Dentistry..... 7500 Cambridge St. Suite 6486 ..... Houston, TX
Ted Ling	Texas Dental Association..... 6423 Tranquilo APT 2007 ..... Irving, TX
Joseph McCombs	US Air Force Postgraduate Dental School ..... 2133 Pepperrell St..... San Antonio, TX
Samuel Ellsworth	Lakewood Periodontics, P.L.L.C ..... 6333 E. Mockingbird Lane, Suite 254 ..... Dallas, TX
Karen Marino	Periodontal and Implants Surgeons of Houston ..... 2600 S Gessner, Suite 304 ..... Houston, TX
George Hilal	Periodontist..... 1508 N. Grandview ave ste 1 ..... Odessa, TX
Pedro Trejo	CC Trejo DDS PA ..... 2600 South Gessner, Suite 304 ..... Houston, TX
E Drew Moore	Village Periodontics & Implant Dentistry..... 2820 Village Parkway, Suite 630 ..... Highland Village, TX
Cynthia Trajtenberg	Trajtenberg Periodontics and Implant Surgery ..... 2159 University Blvd..... Houston, TX
Aloysio Junqueira	Dr. Junqueira ..... PO Box 188 ..... San German, PR
Heather Ridgway	Cool Springs Periodontics & Dental Implants..... 8119 Isabella Lane #102..... Brentwood, TN
Walt Blumenfeld	SWSP ..... 2820 Naples DR ..... Hurst, TX
Marina Protopopova	University of Colorado School of Dentistry..... 13065 E. 17th Ave., MS F850 ..... Aurora, CO
Jenny Herman	LSU School of Dentistry ..... 1100 Florida Avenue..... New Orleans, LA
Phillip Crum	LSU School of Dentistry ..... 1100 Florida Avenue..... New Orleans, LA
Afarin Arghami	LSU school of Dentistry ..... 1100 Florida Avenue..... New Orleans, LA
Theodoros Katsaros	LSU School of Dentistry ..... 801 Newton Rd. DSB, S447 ..... Iowa City, IA
Chetan Patodia	University of Colorado School of Dentistry..... 13065 South 17th. Ave., MS F850 ..... Aurora, CO
Lauren Metzger	University of Colorado School of Dentistry..... 13065 South 17th. Ave., MS F850 ..... Aurora, CO
Kyle Losin	University of Colorado School of Dentistry..... 13065 South 17th. Ave., MS F850 ..... Aurora, CO
Paul Johnson	University of Nebraska School of Dentistry..... 4000 East Campus Loop South ..... Lincoln, NE
Erica Jasa	University of Nebraska School of Dentistry..... 4000 East Campus Loup South ..... Lincoln, NE
Jessica Gradoville	University of Nebraska School of Dentistry..... 4000 East Campus Loop South ..... Lincoln, NE
Bryan Saunders	University of Nebraska School of Dentistry..... 4000 East Campus Loop South ..... Lincoln, NE
Zackery Krei	University of Nebraska School of Dentistry..... 4000 East Campus Loop South ..... Lincoln, NE
Aaeshah Alkanderi	University of Oklahoma School of Dentistry ..... 1201 N. Stonewall Ave, Room 253..... Oklahoma City, OK
Prashan Shanthakumar	University of Oklahoma School of Dentistry..... 333 NW 5th Street, Apt. 1206 ..... Oklahoma City, OK
Debbie Lee	US Air Force Postgraduate Dental School ..... 2133 Pepperrell St..... San Antonio, TX
Trevor Kanack	Texas A&M Univ. College of Dentistry ..... 6630 Shiloh Rd..... Midlothian, TX

## It's Not Too Late to Renew Your Membership!

If you have not yet had a chance to renew your SWSP Membership, there's still time to submit your renewal. SWSP is happy to provide your login credentials to renew via the website or simply contact us at [info@swsp.org](mailto:info@swsp.org) and we'll be glad to assist by taking payment over the phone or sending you an invoice. Members receive discounted meeting registration rates as well as the PROBE Newsletter.



## Update Your Contact Information!

If your contact information, including email address has changed, please notify the SWSP Central Office at [info@swsp.org](mailto:info@swsp.org) so that you will not miss out on SWSP information and reminders.

# OFFICER & COMMITTEE ROSTER

## Board Members

President	Dr. Eduardo Lorenzana
President-Elect	Dr. Scott M. Dowell
Secretary	Dr. Pilar Valderrama
Secretary-Elect	Dr. Cora Marsaw
Treasurer	Dr. Sara A. Bender
Treasurer-Elect	Dr. Guy Huynh-Ba
Past President	Dr. John J. Dmytryk
Member at Large	Dr. Takanari Miyamoto
Member at Large	Dr. Natalie Frost
Member at Large	Dr. Kristi Soileau
Member at Large	Dr. Matthew Steffer
Member at Large	Dr. Daniela J. Zambon
Member at Large	Dr. Gary DeWitt

## Special Designations

Editor of the PROBE Newsletter	Dr. Brian L. Mealey
Incoming Editor of the PROBE Newsletter	Dr. Kayleigh Eaves Temple
Webmaster	Dr. David H. Yu

## CMP Management

Account Manager	Sabrina Irsay
Event Manager	Amber Waddell
Association Executive	Debbie Peterson

## Standing Committees of the General Assembly

### Annual Meetings Committee

Chair	Dr. Josh R. Chapa
Vice-chair	Dr. Matt Steffer
Committee Member	Dr. Sara A. Bender
Committee Member	Dr. Ellen Hall
Committee Member	Dr. Nicole Litizzette
Committee Member	Dr. Steve Britain
Committee Member	Dr. Todd Keller
Committee Member	Dr. Kristi M. Soileau
Committee Member	Dr. Todd Scheyer
Committee Member	Dr. Brent Grimard
Liason from Board Directors	Dr. Brian Mealey

### Central Office Committee

Chair	Dr. Bradley Crump
Vice Chair	Dr. John J. Dmytryk
Committee Member	Dr. Sara A. Bender
Committee Member	Dr. Brian Mealey

### Membership Committee

Chair	Dr. Natalie Frost
Vice-chair	Dr. Takanari Miyamoto
Committee Member	Dr. Gary DeWitt
Committee Member	Dr. Guy Huynh-BA
Committee Member	Dr. Takanari Miyamoto
Committee Member	Dr. Daniella Zambon
Committee Member	Dr. Chris Bingham
Committee Member	Dr. Ali Sajadi
Student Member	Dr. Blaine Calahan
Dallas - Chair	Dr. Aline Speer
Committee Member	Dr. David Deas
Committee Member	Dr. Tyler Borg
Committee Member	Dr. Gina Bonaventura
Committee Member	Dr. Cuong Ha
Committee Member	Dr. Stacy Beltran
Committee Member	Dr. Lorenzo Mordini

## Nominating Committee

Chair	Dr. Scott M. Dowell
Board Member	Dr. Natalie Frost
Board Member	Dr. Bradley Crump
Board Member	Dr. Pilar Valderrama
Committee Member	Dr. Scott Bedichek
Committee Member	Dr. David Yu
Committee Member	Dr. Jeff Pope

## Scientific Affairs Committee

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Vice Chair	
Committee Member	Dr. Nikola Angelov
Committee Member	Dr. Tapan Koticha
Committee Member	Dr. Matt Byarlay
Committee Member	Dr. Pooja Maney
Committee Member	Dr. Yong-Hee Chun
Committee Member	Dr. Pilar Valderrama

## John F. Prichard Prize for Graduate Research Subcommittee

Chair	Dr. Pilar Valderrama
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## Strategic Long Range Planning Committee

Chair	Dr. Bradley Crump
Vice Chair	Dr. John J. Dmytryk
Committee Member	Dr. Eduardo Lorenzana
Committee Member	Dr. Scott M. Dowell
Committee Member	Dr. Teri Brooks Lovelace
Committee Member	Debbie Peterson

## Standing Committees of the Board of Directors Executive

Chair	Dr. Eduardo Lorenzana
Committee Member	Dr. Scott M. Dowell
Committee Member	Dr. Alan Moritz
Committee Member	Dr. Sara A. Bender

## Budget & Finance

Chair	Dr. Guy Huynh-Ba
Vice-Chair	Dr. Pilar Valderrama
Committee Member	Dr. Scott M. Dowell
Committee Member	Dr. Sara A. Bender
Committee Member	Dr. Cora Marsaw

## By-Laws, Policies & Procedures

Chair	Dr. Brian Mealey
Committee Member	Dr. Bradley Crump
Committee Member	Dr. Teri Brooks Lovelace

## Ad Hoc Committees of the Board of Directors

### Exhibitor Committee

Chair	Dr. Jeff Pope
Committee Member	Dr. John Tunnell
Committee Member	Dr. Samuel Ellsworth
Committee Member	Dr. Gary DeWitt
Committee Member	Dr. Bill Reeves

### Governmental and Regulatory Affairs

Chair	Dr. John J. Dmytryk
Committee Member - Arkansa	Dr. Fred Church
Committee Member - Colorado	Dr. Charles Powell
Committee Member - Louisiana	Dr. Gary DeWitt
Committee Member - Nebraska	Dr. Takanari Miyamoto
Committee Member - Oklahoma	Dr. Bill Reeves
Committee Member -Texas	Dr. Lisa Masters

## Sedation

Chair	Dr. Charles Rader
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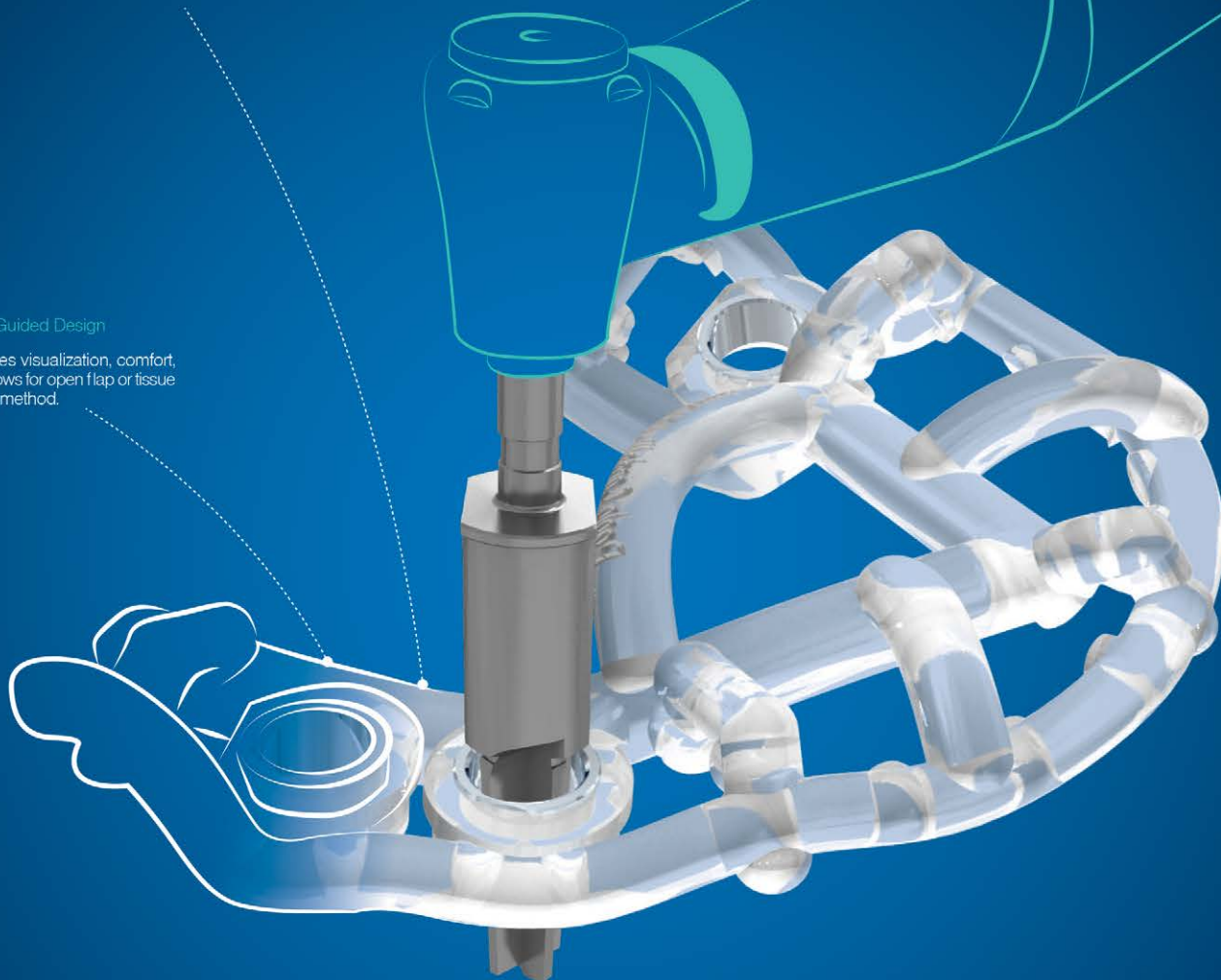
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# PROBE

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