

The Voice -

The Newsletter of the Hawaii Dental Hygienists' Association



Spring, 2008

Hello, Everyone.....

My patients sometimes ask me why I chose hygiene as a profession. I almost have to laugh at the irony because I hated the dentist's office. I like to think it was a fluke decision that was always there, crossing my path several times until I finally took hold of it. Here are some reflections:

I heard the terminology "baby bottle tooth decay" when I was five years old. Granted, I was standing in the doctor's exam room awaiting my pre-kindergarten physical and holding a baby bottle with chocolate milk at the time, but I knew that the doctor was referring to me. I remember he was telling my mother how my teeth would rot away, although I'm sure I already had the six silver chiclets to show for it. My mother reluctantly took the bottle away from me and I spilled my chocolate milk more often.

To this day, I don't believe there is ANY 'good-tasting' prophylaxis paste. At the pedodontic office, I always argued with the hygienist to first TASTE the prophylaxis paste before she could use it on me. I remember it was banana flavored and that one always had a mean after taste. She never did taste it, and I will never use any flavor other than mint.

When I was 13, I had to have my last primary molar extracted because it was badly decayed and throbbing like crazy. I remember as my mom pulled up to the dental office, I bolted from the car and ran back down the street. I had it in my mind to run the whole 15 miles back home, but I managed about half a mile instead. Four hours later, they dragged me kicking and screaming back to the dental office where I spat and bit until they finally yanked that bloody tooth from my mouth. And that same hygienist I argued with held my hand the whole time. Awww!



I actually remember looking in the classifieds for a job and seeing a lot of advertisements for hygienists. Silly me - I didn't know you needed formal training to be a hygienist. I guess I got confused with the assistants that offices will train on-site. So after following a boy to the University of Hawaii at Manoa, applying to the dental hygiene program and graduating with my baccalaureate several years later, here I am.

But now that I'm here, I fear for my profession. I'm sure you've heard the rumors of the "scaling" assistants that the dentists would like to train, all in the name of access to care. So I ask myself, then why did I go through all that training when I could have just trained on the job and been taught to scale and root plane eventually? And what's wrong with general supervision for dental hygienists? I'm all for working intra-dependently with dentists, but why limit the extent of our capabilities? There are probably still a lot of changes that I have yet to face, but I know that I would not know any of it if I hadn't gotten involved with this professional organization called ADHA. Yep, that's my plug for the organization!

The members of the board - YOUR Board - have been hard at work to preserve YOUR profession. We visited with the senators and representatives at the Hawai'i State Capitol to show support for bills that promote access to care. We are currently securing the venue for our Annual Scientific Session. In March, we reviewed Strategic Planning with our District XII trustee, Susan Savage on Maui. And we still have more to go!

~Mikiel Lina Agoy, RDH, BS - HDHA President

Keiki Dental Fair - Kailua-Kona - February 29, 2008

Once again, the West Hawaii Dental Hygienists' Association participated in the "Healthy and Hapai & Keiki Dental Fair". An annual event, The Keiki Fair is coordinated by approximately 20 family community agencies. Every year our numbers grow and this year was the biggest attendance ever, with over 150 children seen.



The hygienists screened the keiki ages 1-6 for caries and other dental problems and applied fluoride varnish. The children who were covered by Quest or Medicaid were referred to community case management workers who directed the participants to the agencies who could care for them.

Quite a few will go to Oahu or the Bay Clinic in Hilo for care since the new Community Dental Clinic in Kona is still a few months from opening.

We are proud of our keiki dental fairs because they have drawn attention to the situation that exists on the Big Island - that of children with severe dental disease who have few options for treatment. Until recently, the only way for them to receive treatment was the Mobile Care Van or the Bay Clinic on the Hilo side. Kona has had a community health clinic for a few years but no dental clinic.



This year we will open a community dental clinic in Kealahou and their focus will be on treatment of children. I want to thank the hygienists and dentists who helped us at this year's Fair: Teri Matsumura, Madeleine Budde, Stacy Matsuyama, Melissa Frommer, Kim Schneider, Diane Thomas, Donna Altshul, and Dr. Ann Marie Muramota and Dr. Ronald Hirata.

~Sierra Spruce, RDH - WHDHA President

HDHA's 2008 Annual Session!!

It's not too early to start planning - reserve your weekend for 2 days of continuing education! The 17th Annual Scientific Session will be held at the Hilton Prince Kuhio on November 8 and 9, 2008. Over 10 hours of continuing education will be provided.

Olga Ibsen, RDH, MS, will be presenting: "Oral Pathology for Dental Professionals" and "Differential Diagnosis of Oral Lesions", Trends in Youth Populations. This course will touch upon: Adolescence, Acid Erosion, Eating Disorders, Sub-stance Abuse, High Risk Behav- iors, Nutrition, Puberty, Pregnancy, Oral Contraception, Obesity, & HPV.



The top four groups from the University of Hawaii Dental Hygiene program will be showcasing their student table clinics at the President's Reception. For more information on the Annual Scientific Session, please check our website www.hdha.org. Information will be posted soon!!

~Stacy Matsuyama, RDH, BS - Immediate Past President & Annual Session Chair

VOLUNTEER...And Earn CE Credits!

Dear Fellow Dental Hygienist,

Over six hundred developmentally disabled athletes from across Hawai'i will gather at Cooke Field on the University of Hawai'i Manoa campus from **May 24-25, 2008** to compete in baseball, swimming, weight lifting, and track and field events at the 40th annual Special Olympics State Summer Games. During the Games, health care professionals will provide the athletes oral, hearing, vision, and physical fitness screenings in the Healthy Athlete Village.

It is now time to recruit dental volunteers needed for the oral health component, Special Smiles®. Dental volunteers will provide oral screenings and hygiene instructions, fabricate mouth guards, play dental games, offer referral information, and reward athletes a goody bag filled with a toothbrush, floss, and toothpaste. Dentists and dental hygienists will earn FAGD/MAGD participation credits for the hours they volunteer.

I hope you will participate! Since 2001, dental professionals from private practices, State Dental Health Division, Queen's Dental Clinic GPR program, Kokua Kalihi Valley, faculty and students from University of Hawai'i Manoa and Kapiolani Community College dental hygiene and assistant programs, and others have generously volunteered at Special Smiles®. They report their experiences interacting with the athletes as enjoyable and enlightening!

Calibration training is required for all new volunteers and will be provided on various evenings during the month of April from 6 - 7:30 p.m. at the Department of Health, Developmental Disabilities Office, 1250 Punchbowl, Room 463. (Call now for schedule)

Continuing Education credit is available for the time volunteered and for the (1) HOUR Continuing Education Course required prior to the event. Please review attached C.E. credit letter for more information.

Morning and afternoon sessions are available on Saturday, May 24 and a morning session on Sunday, May 25. The first attachment explains the requirements for continuing education credit. The second attachment is the volunteer application. Applications are due before **Friday, May 2 and can be faxed to 453-6585, attn: Jennifer.**

If you are interested in volunteering, please contact me to schedule the calibration training and C.E. course and fax your volunteer application (attached) with your volunteer shift request and t-shirt size as soon as possible.

Event Information:

Location: University of Hawaii Manoa, lower campus.

Assignments: Dentists will provide the oral health screenings, dental hygienists will provide oral health education and dental assistants will record. Dental hygiene students and dental assisting students will engage the athletes in games to encourage understanding of oral hygiene and motivate athletes to be healthy. All other volunteers will be escorts, registrars, "recruiters" and greeters. Position assignments will be subject to change based on the scheduling needs for that day.

~ Jennifer Ernst, RDH



Let me win. But if I cannot win, let me be brave in the attempt. (Athlete's motto)

March 2008

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If you would like to volunteer for Special Smiles®, please return the "Volunteer Application" form to my office or fax to 808-453-6585 before Friday, May 2, 2008. Feel free to call me at 453-6416 if you need more information. Thank you!

Jennifer Ernst, RDH
Special Smiles Coordinator

Volunteer Application

(Circle title) **Mr. Mrs. Ms. Dr. Other** _____ **Affiliation:** _____

Last Name _____ **First Name** _____

Phone Number 1 _____ **Phone Number 2** _____ **FAX** _____

Mailing Address: _____

E-mail address _____

Emergency Contact _____ **Phone** _____

Are you a returning volunteer? ☐ Yes ☐ No

Occupation (circle one)	Sign Me Up for (circle one or more)	T-Shirt Size (circle one)
Dentist	Shift 1: Saturday, May 24 8am – 10am (set-up only)	Adult Small
Dental Hygienist	Shift 2: Saturday, May 24 9 am -- 1 pm	Adult Medium
Dental Assistant	Shift 3: Saturday, May 24 1 -- 4pm	Adult Large
Student (circle Dental, DH, or DA)	Shift 4: Sunday, May 25 8 am -- 12 noon	Adult x-large
Other		Adult xx-large

Please return this application before **May 2, 2008** to:

Jennifer Ernst, RDH. Developmental Disabilities Division, Disability Supports Branch 2201 Waimano Home Road Pearl City, HI 96782 FAX: 453-6585

Dentists and dental hygienists previously calibrated do not need to be re-calibrated. Those who have not been calibrated will be contacted to schedule calibration.

A Challenge From Your President-Elect



Aloha Kakou!

As 2007-8 President Elect, I would first like to say, "Mahalo nui loa" to Kim Schneider, Anna Akaka, and Sierra Spruce, who spoke on my behalf at the Annual Scientific Session last November, and to all of our members who voted for me. I hope that I will serve you well.

In addition, I would like to say "Thank you!" to all of our members for maintaining your membership in Hawai'i Dental Hygienists' Association. Whether you have been a member since Day One or are a new member, I want to say that your membership is greatly valued and plays a key role in our legislative accomplishments.

As many of you know, while I have been active for many years on the Continuing Education Committee, I have also participated whole-heartedly on the Regulations and Practice Committee for about 14 years. As a former Western Regional Board Anesthesia Examiner, I have played a key role in obtaining legislation allowing the administration of block anesthesia for dental hygienists, thus raising the standard of care for patients in Hawai'i.

In addition, I was active in providing testimony over the years for other legislative issues, including general supervision in public health settings. Last year, I took position as Chair of the Regulations and Practice Committee and am continuing in that position this year. I remain devoted to upholding a high standard of care and increasing access to care for the people of Hawaii, in addition to protecting, promoting and empowering Dental Hygiene as a profession.

The reason I am telling you this is NOT to brag. The reason I am telling you this is, because I want to assure you that I am speaking from experience when I tell you that these legislative milestones could not be accomplished without your individual memberships.

When the Regulations and Practice Committee gather at the state capitol for Lobby Day each year, we bring goodies and greetings from our membership. We are there to represent you and give you a voice for our profession. Without your membership, the legislators would not take our testimonies as seriously. They want to know that we represent hygienists all over the state. There is power in the numbers of our membership.



HDHA represents all hygienists licensed in Hawai`i. While our committee work is voluntary, our legislative efforts cost a great deal of money, as we must pay our lobbyist, who advises and keeps us informed. One of my goals as President Elect, is to see a significant increase in membership. When we approach our legislators in favor of maintaining our duties and educational standards for the profession of Dental Hygiene in Hawai`i, or to support changes for the better, I would like for them to be astounded by the cohesiveness of the Dental Hygiene community in the state of Hawai`i.

That brings me to the following challenge...

As HDHA President Elect, I am proposing a membership drive and to encourage this, I, personally, am offering to pay ADHA member-

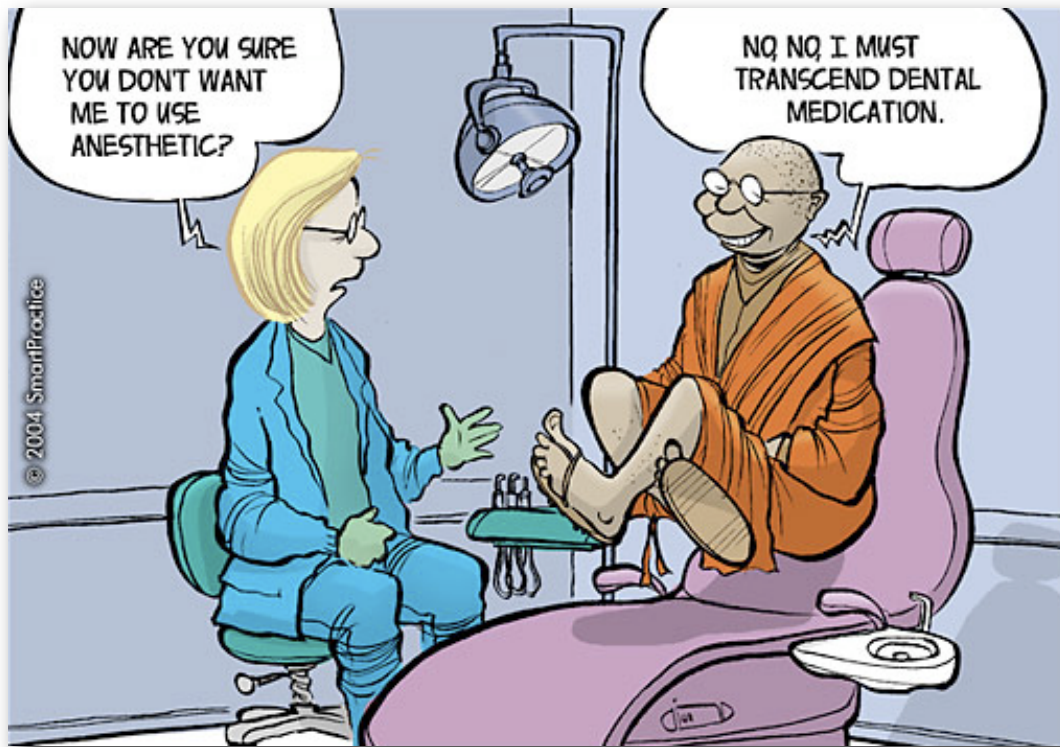
ship dues for one year for the member who can bring in the most new members by April 30, 2009.

In order to track this, I would ask that when you encourage a new member, you send a note to Tricia Jinbo stating your name and membership number and listing the names of the new members you are sponsoring. When Tricia receives confirmation from ADHA that their membership is official, she will credit your name with their membership. On April 30, we will count up the results and the winner will receive a check from me for ADHA for 1 year membership.

Let's see if we can communicate the value of membership in our association and promote Empowerment in the Profession of Dental Hygiene. Thank you!

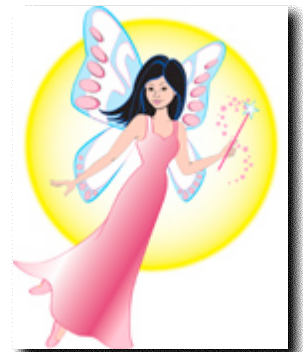
~ Diane Brucato-Thomas, RDH, EF, BS
HDHA President-Elect

LET'S LAUGH.....



BE A TOOTH FAIRY!!

Pediatric dental disease has been called a "Silent Epidemic" because millions of children suffer quietly from its devastating effects. Pediatric dental disease impairs the ability to eat, sleep and learn! The National Children's Oral Health Foundation (NCOHF) supports a network of not-for-profit pediatric dental facilities delivering critical comprehensive care to needy children. Your donation to the Tooth Fairy Campaign will provide education, grants for innovative project, preventive-oriented treatments and operating support. Let's make the Tooth Fairy Campaign the dental hygienist's charity of choice! Go to <http://www.toothfairycampaign.org> or call 800-559-9838.



Because Every Child Deserves A Healthy Smile!!

Breaking News!!!



CHANGES IN CPR TECHNIQUE: You can skip the mouth-to-mouth breathing and just press on the chest to save a life. In a major change, the American Heart Association now says that hands-only CPR — rapid, deep presses on the victim's chest until help arrives — works just as well as standard CPR for sudden cardiac arrest in adults.

Experts hope bystanders will now be more willing to jump in and help if they see someone suddenly collapse. Hands-only CPR is simpler and easier to remember and removes a big barrier for people skittish about the mouth-to-mouth breathing.

"You only have to do two things. Call 911 and push hard and fast on the middle of the person's chest," said Dr. Michael Sayre, an emergency medicine professor at Ohio State University who headed the committee that made the recommendation.

Hands-only CPR calls for uninterrupted chest presses — 100 a minute — until paramedics take over or an automated external defibrillator is available to restore a normal heart rhythm.

This action should be taken only for adults who unexpectedly collapse, stop breathing and are unresponsive. The odds are that the person is having cardiac arrest — the heart suddenly stops — which can occur after a heart attack or be caused by other heart problems. In such a case, the victim still has ample air in the lungs and blood and compressions keep blood flowing to the brain, heart and other organs.

A child who collapses is more likely to primarily have breathing problems — and in that case, mouth-to-mouth breathing should be used. That also applies to adults who suffer lack of oxygen from a near-drowning, drug overdose, or carbon monoxide poisoning. In these cases, people need mouth-to-mouth to get air into their lungs and bloodstream.

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The Voice

Hawaii Dental Hygienists' Association

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Look for our next issue:

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