

The Importance of Enthusiasm

Enthusiasm is one of those key ingredients in life, an ineffable thing that brings joy, energy and life. It's what makes learning possible. If you aren't enthusiastic about an idea, how likely is it you'll put it into practice? If you aren't introduced to a new topic with enthusiasm, how likely will you be to pay attention and strive to understand it?

Harry Truman once said: "I studied the lives of great men and famous women, and I found that the men and women who got to the top were those who did the jobs they had in hand, with everything they had of energy and enthusiasm."

We've long known how vital enthusiasm is to the endeavor we're involved in at the Institute. Maintaining a passion for the art of dentistry is critical to success. It's one of the main reasons we recently invited Dr. Lee Brady to become part of our inhouse faculty. We are excited to say she has accepted and begun meaningfully contributing.

Dr. Brady is smart, willing to learn, friendly, caring and yes, *enthusiastic*. She comes to us from private practice in Jacksonville, Florida and has taken on her new role with grace and excitement. She is the embodiment of the fresh energy we are constantly fanning here at the Institute.

The kind of attitude she displays – that deep desire to continuously learn, that excitement at possibility and change – is exactly what we have dedicated ourselves to fostering in our students. Read more about Dr. Brady on Page 2 and experience her enthusiasm in her article about optimal care on Page 5.

So thank you for joining us, Dr. Brady. I hope you'll be happy here as we continue our mission of educating dental professionals and putting our own special mark of excellence in the world.

On another note, our 18th Biennial L.D. Pankey Alumni Association Meeting is coming up in

September. This event is a wonderful mix of relaxation and learning and I encourage all who can to attend.

We'll have some fascinating keynote speakers, including Dr. Stephen Schmitt, Mrs. Joan Unterschuetz and Mr. Kevin Asbjörnson, a Gala Dinner, golf and fishing tournaments, shopping and even a kayak tour.

Our illustrious Pankey Scholars will be leading Saturday Morning Workshops along with faculty, as well.

Please see the article on Page 6 for more about the meeting, or visit our website at pankey.org. I really do hope to see you there. This is the kind of event that's characteristic of the Institute: chock full of both fun and educational opportunities. I would even say that it is events such as this that fuel the enthusiasm of our participants. When you come to this meeting, you'll feel the energy and excitement, and it will give you drive and power when return home.



Executive Director's Message

Christian B. Sager
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Norman Vincent Peale, the famous motivational speaker, said: "Enthusiasm releases the drive to carry you over obstacles and adds significance to all you do." What a wonderful way to look at the power of enthusiasm. Not only does it carry you past the hard times, but it makes your life worthwhile. I have seen the difference it can make.

I call upon you to follow the example of Dr. Brady, and make your life a study in the enthusiastic pursuit of technical mastery and love of learning. I promise, it will add new energy to all you do. ■



Chairman's Message

Dr. Irwin M. Becker
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For several years, I have wondered if the future of dentistry is headed in a healthy or detrimental (self-destructive) direction. It's like the yin and yang of any complex thought process. On the one hand, there are clearly more people seeking dental care because of the exposure to cosmetic issues on television shows and heavy marketing of cosmetic products and cosmetic educational programs. More people are seeking cosmetic products such as bleaching and tooth whitening, even if the source may be the department store or cosmetic counter.

On the other hand, these same influences may encourage both patients and dental care givers to overlook the tried and proven steps involved in developing optimal care treatment plans. Cosmetic movements may give a false impression of simplicity and singularity of purpose

relative to the question of what appropriate dentistry actually is. I am reminded of the parable of fixing a used, worn out car by simply painting the hood.

I am not at all in disagreement about helping patients make appropriate decisions to improve their smiles and overall beauty. In fact, I believe that optimal care involves suggesting the best available treatment appropriate for each patient to obtain results in Health, Comfort, Function and Esthetics. This is exactly what Dr. Pankey wrote about in the 1950s.

We are committed as an Institute to uphold these same basic principles which lead to optimal care in all four arenas, but in a modern day setting. I am troubled by the seemingly common opinion that dentistry today needs to be done efficiently and quickly. What has happened to the old saying that it is better to measure twice and cut only once? Effectiveness, predictability and longevity still motivate the sophisticated dental consumer more than getting it done in one visit. Why do we have to stoop to the same rationale that has made fast food so popular?

Lastly, I am convinced that these same questions really turn out to be cloaked in the bigger issues of ethics. What forces have fueled the makeover movement? Has corporate marketing sparked the funding of educational centers? Do many of the treatment solutions suggested by cosmetic centers lead to extreme over treatment? And finally, are new dental graduates being drawn into this rage for cosmetics by financial lures dangled in front of them, without the appropriate knowledge of function and parafunction that could keep them from frequent disappointments? Legal and professional entanglements are bound to create a backlash to the makeover movement and will affect all of dentistry. Where will you be positioned when it comes? Is your reputation centered in thorough, relationship-based appropriate optimal care?

In this critical juncture of our beloved profession, are you prepared to utilize all of your own personal and professional power to ensure the viability of our world-class Institute? My hope for you and my plea to you is to make sure that when any one of your colleagues is debating over where to spend CE

efforts, time and money, you talk to him or her about the above mentioned issues. It is your ethical responsibility to speak up. It is essential to your own future security to take a stand for appropriate dental care. Don't allow the young dentists coming out of your dental school alma mater to be misled. Don't sit back in apathy. Instead, make sure you enlist someone to attend your Pankey Institute. Or, make sure that when you hear of someone who hasn't been back to complete their Continuum journey, you enter into the above type of discussions. We need and appreciate your support, now. ■

Extreme Makeover: Good or Bad?



Welcome to Pankey, Dr. Brady



Dr. Lee Brady

What do you get when you take a burned out dentist working only to make ends meet and expose her to the Pankey Philosophy? You get Dr. Lee Brady, a woman so excited by what the Institute offers she left her hometown of Jacksonville, FL to become part of the faculty.

As the new Clinical Instructor at the Institute, Dr. Brady will work with C1, C2 and C2E students in the clinic and lab. But what Dr. Brady really hopes to do is change lives. "The people I'm now working around leave me awestruck," she says. "But more than anything I'm thrilled about the chance to give back. I look at all the years I practiced before knowing about the Institute. If one person I'd met along the way had taken the time to tell me about this place, I could have been enjoying dentistry years earlier. I think of all the people now practicing like I was, feeling stuck and frustrated, and I think I have an awesome opportunity to help them."

Dr. Brady's road to the Institute is typical of many who enter the dental profession with high hopes and dreams, only to find themselves dissatisfied in just a few years. After graduating in 1988 from the University of Florida, Dr. Brady went to work in a high volume practice, where she stayed for five years. "We saw 50 patients a day there," she says. "I knew there had to be a better way." She moved to Atlanta and bought a private practice, where she stayed for eight years. But even being her own boss wasn't enough to stem building pressure and frustration and she was forced to sell the practice and enter semi-retirement.

Finally, after September 11th and resulting economic issues, Dr. Brady returned to work at a

Jacksonville practice. Here she found colleagues who had attended The Pankey Institute. "They began teaching me clinical ideas before I even took a course at the Institute," she says. "But when I first came here I was struck by the bigger picture, by the Pankey Philosophy and management ideas. I learned to develop my own vision instead of following in my associates' footsteps. I discovered what I like to do, how I like to practice." Dr. Brady has since completed C2E.

What appealed to Dr. Brady most about the Pankey Philosophy was the idea of choice. "If there are parts of dentistry I don't like," she says, "then I don't have to do

private practice in Jupiter, Florida, the search began for a new Clinical Instructor.

"[Dr. Brady] presented herself so extraordinarily well during her interview for the position at Pankey I had no problem at all convincing Chris, Steve and Gary she was the right person," says Dr. Becker. "I have tremendous expectations for her role which will be increasingly more involved over the next year. She connects well with the students and has a quiet, confident air about her that is not at all intimidating. She can already do fine complex dentistry but has the persona of someone who has a lot to learn; and a lot she will learn and apply to the

"I've found reconstructive is more rewarding than cosmetic work. When you can give someone back the ability to smile, to chew and to function, it means so much more to them than whiter teeth."

them. Having freedom of choice and creating your own vision were the strongest ideas I received from the Philosophy."

"Lee started one of our first Pankey Affiliated Learning Groups," says Dr. Irwin Becker, Chairman of the Department of Education, "and within no time had a well-functioning group that was motivated and has sent numerous new students to The Pankey Institute for the C1 experience. She has convinced me and others that the concept behind the PALG is very positive and can be a tremendous marketing tool for The Pankey Institute."

After Dr. Erik Zudans left the Institute in October 2004 to go into

patients she will be treating here."

Having experienced the Institute as both student and teacher, Dr. Brady has found the learning environment to be truly state-of-the-art. "You couldn't get a higher quality facility than this one," she says. "Not only does it make the learning experience better, it makes facilitating easier. Participants can relax and experience the course."

"She has been an outstanding student," says Dr. Becker, "one who asks very intelligent questions at the appropriate time. She is very aware of the other students and how to motivate and engage them. She has tremendous people skills with the highest of Emotional Intelligence."

The hardest part about her new position, she believes, will be

the change from a private practice, where she had authority and autonomy, to functioning in a more corporate environment. But she has already experienced the interaction between participant and faculty and loves it. "I love to talk dentistry and that's how I see my position here: exchanging information about dentistry."

Dr. Brady's husband, Kelly, works as Vice-President of New Business Development for The Cathedral Foundation, a nonprofit that assists the elderly. She has three children: Sarah (10), Jenna (8) and Kyle (5). The family has moved to Key Biscayne, just blocks from the Institute. "My family loves it here so far. My husband was able to create a flexible arrangement with his work, to do it long-distance, using technology."

"Her family has already adjusted to the major move to Key Biscayne and this is a testimony of the solid character that she and her husband Kelly consistently demonstrate," Dr. Becker says. "They all will be a fine addition to the Pankey family and tradition."

Dr. Brady's hope is that students will share what they've experienced at the Institute with everyone they know. "Spreading the word about this place is so important," she says. "Share openly when you return to your local communities. You never know how much a friend or colleague needs to know about the options presented here." ■

Publisher: Christian B. Sager

Editor: Vanessa C. Leon

The *Pankeygram* is published quarterly by The L.D. Pankey Alumni Association. Articles in this newsletter represent the viewpoint of their individual authors and not necessarily that of The Pankey Institute or The L.D. Pankey Dental Foundation, Inc. Articles may be submitted for consideration. Please contact the editor at:

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Hal Pearson Dies at 75

Mr. Harold B. Pearson passed away March 5th in St. Petersburg, Florida at the age of 75. Hal endured Parkinsons and Diabetes for the last several years. Services were held March 11; the family requested donations to the American Parkinsons Disease Association in lieu of flowers.

Hal was a stalwart of the L.D. Pankey Dental Foundation, and Trustee for 12 years. In 1972, when Hal was Chairman of the Den-Tal-Ez company, he played a major role in the original opening of the Institute by donating equipment. He helped create an operating framework which enabled the Institute to continue operations in 1981-82 when our continued existence was tenuous. Please join us in acknowledging his work on our behalf. ■

Annoucement

Dennis J. Stiles, D.D.S., was installed as the 72nd president of the American Prosthodontic Society on February 25, 2005. Dr. Stiles currently practices with his wife, Dr. Marie Tigani Stiles in Gaithersburg, Maryland. He is an alumnus of The Pankey Institute. ■



Giving Back

By Nancy Ward, DDS, Visiting Faculty, Baltimore, MD (wardbyrne@aol.com)

This article is reprinted from *Woman Dentist Journal*, November 2004.

Whether it's treating those in need from their local community through the Donated Dental Services (DDS) program, volunteering time in inner city and rural clinics, participating in international mission teams, or serving in other ways, many dentists freely give of their time to provide oral health care for those who can least afford it. I have been affiliated with the Pankey Institute for the past 18 years, and one of the things I have observed is the large number of Institute participants and faculty who are involved in such activities. Not only are they donating dental services in their communities but also all over the world... in Honduras, Mexico, Belarus, Thailand, Brazil, Uganda, Jamaica, The Dominican Republic... the list goes on. Perhaps, that's one of the reasons I have felt so at home in their company.

"Giving back" to others is part and parcel of being a happy professional with a balanced life. It's how we get perspective on others' lives and our own. Through service, we learn to appreciate what we have been given and can do to improve the lives of others.

My personal journey in volunteering has been with a group of Pankey dentists from Dallas, Texas who started an organization called ServingHIM (Health International Ministries). ServingHIM is a nondenominational Christian organization with the mission of sending medical/dental teams and humanitarian aid worldwide, improving healthcare related educational services and facilities, partnering with other organizations to increase its impact, and providing an outreach opportunity to share the gospel of Jesus Christ. For me, it's been a life-changing experience and exciting to participate with others from all over the United States coming together to make a difference.

Since 1998, Dr. Kevin Seidler, who has attended The Pankey Institute, and Dr. David Hildebrand, one of its Visiting Faculty who was an instructor in the course I took there in 1988, have been taking dentists and support teams to Braila, Romania every summer as part of ServingHIM. My first trip was in 2003. I participated with my husband Dr. Denny Byrne (also a dentist) and our daughter Devon Byrne (who is a pre-dental/religion

major at Baylor University). We learned as much as we could so that we could lead a group from Maryland in 2004.

This past July we took a group consisting of two dentists (ourselves), a senior dental student, four hygienists, and five others (an elementary school vice principal, three teenagers, and an accountant), who helped with the educational aspects of the mission.

We were joined by a Romanian dentist, Dr. Andreea Gheta, who we had become friends with the previous summer. Together, we were able to treat 250 patients in four days.

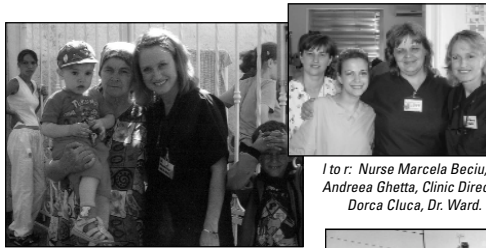
Many ask, "Why do you go to Romania when there is so much need here?" I serve needs here at home but I feel "called" to serve there. It's my experience that each of us is drawn to a particular mission or set of volunteer opportunities. The need in Romania is very large. What's more, here at home, I am caught up in so many day-to-day activities that I don't stop to reflect upon the "miracles" that occur. When I am away from home, I find I am more aware of the transformations taking place in people's lives and the impact I can have.

Under Communist rule, Romanian churches and their leaders suffered immense persecution from 1974 to 1989. Much of the population (23 million Romanians) grew up during a period when churches were underground, and medical and dental services were barely



I to r: Clinic Physician, Dr. Doina Dorobantu, Pastor Iosef Stefanuti, and Dr. Ward.

existent. The hope and faith of Baptist Pastor Iosef Stefanuti, who was imprisoned during this period, inspired many to rebuild churches and serve their communities. His vision to take care of the physical and spiritual needs of the people of Romania is becoming a reality with the help of churches in America, ServingHIM, and the Evergreen Educational Foundation, Inc.



Dr. Ward with patients in Romania.



New clinic under construction.

Currently the ServingHIM dental teams serve in the Diaconia Medical Clinic, a small nonprofit, Christian medical facility with a laboratory for blood tests and a pharmacy. It includes preventive, diagnostic, therapeutic and affordable medical care, trying to combine efficiency with harmony and respect. Clinical Director Dora Ciuca and the head physician Dr. Doina Dorobantu, are generous enough to shut down the medical services off and on throughout the summer so dental mission teams can come in and serve dental needs. ServingHIM has provided three operative chairs and two surgery chairs for the clinic. When we arrive, we set up a hygiene area with two lawn chairs and a portable unit. Romanians from the church, mainly high school age students who speak English, volunteer their time to work alongside us as interpreters.

I imagine the amount of dental disease present in Romania is comparable to what dentists in the U.S. faced in the 1950s. Decay and gum disease are rampant. In the clinic we do not have the use of x-rays; however, decay is so common that it is not difficult to determine the needs. The new clinic will be equipped with x-rays. One of my personal goals is to obtain donations of fluoride tablets to give to the children of the orphanage on a daily basis and to start a fluoride program in the public school system.

I to r: Nurse Marcela Beciu, Dr. Andreea Gheta, Clinic Director Dorca Cluca, Dr. Ward.



Clinic building currently being used.

Last summer, four teams went to Braila - one from Texas, one from Alabama, one from Maryland, and one from South Dakota. Next summer we hope to have eight teams. I will be taking a team in June including my husband Dr. Denny Byrne, daughter Devon and younger daughter Lucy.

Other woman dentists from the U.S. have been on ServingHIM teams over the past four years. These include Dr. Jan Balsiger of Dallas, Texas; Dr. Dana Radu-Scafaru of SunCity, Arizona; Dr. Susan Snyder of Lafayette, Indiana; and Dr. Pam Nicora of Spokane, Washington. In addition to the above women, Drs. Seidler and Hildebrand from Dallas, and my husband and I from Baltimore, there are several other Pankey dentists who led or served on teams: Dr. Edwin (Mac) McDonald of Plano, Texas; Dr. Randy Sachau of Spearfish, South Dakota; Dr. Michael Harris of Temple, Texas; Dr. Bryron McKnight of Mesquite, Texas; Dr. Gene Lamberth of Dallas, Texas; Dr. Loren Matthew (Matt) Miller of Plano, Texas; and Dr. DeWitt (Witt) Wilkerson of St. Petersburg, Florida. Any one of these dentists will be happy to tell you about their personal experience with this type of mission.

Many ask, "What can I do?" You can join a team, or contact dental companies for donations of supplies and equipment. We are in need of hand pieces, restorative material, portable x-ray units, and fluoride. Sullivan-Schein Dental has been a generous contributor. The Dallas Sullivan-Schein representative participated on one of the

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In the Crucible

By Richard A. Green, DDS, MBA, Director Emeritus of Business Systems Development (rgreen@pankey.org)

In Your Tissues: Another 10 Year Retrospective

I first wrote an article like this for a Pankeygram in 1994. Ten years have now passed. Having spent those years involved in day-to-day teaching at The Pankey Institute, I have come to learn, firsthand, that impactful teaching involves many different attitudes and skill sets. Creating learning moments that thoroughly engage individuals, stimulate reflective thinking, and place a smooth “reminder” pebble in the learner’s shoe, is indeed a challenge. But this is not only the challenge of the institutional educator but also the dentist in day-to-day practice. You have often heard me say a dental office should look more like an educational institution than a purveyor of goods and services.

Lately, I have been informing friends who tell me that I do not look like I am retired that I am “Reengaged in Life.” Throughout my life I have considered life in ten-year chapters. This has gifted me an opportunity to do some reflective thinking and reconsider what it is that truly brings meaning to my life; to reengage with the inside-out! This is a developmental process, behaviorally similar to developing a practice, a team, a patient (at their own speed) or even yourself. When you get a glimpse of the similarities - “It is Hugel!”

For me, one of the developmental concepts that has brought me understanding comes from the study of psychoanalyst Erik Erikson’s Eight Developmental Stages. According to him, most of us first want to be competent; when this is questioned in our thinking, we will get very busy to prove it is not an issue. Does that look like anyone’s schedule you know? Once we are feeling pretty confident that we can “do it,” we move on to ask the question, “Is this really what I want to do?” In dentistry I hear this as, “Do I want to be a fixer of teeth or do I want to be a facilitator of health?” While not being exactly separate questions, they do imply a different set of skills to accomplish one or the other; it is left brain and right brain, respectively. Often I hear the expression from participants that they would like to learn to “communicate” better to get case acceptance; this is indicative of being at this level in the Erikson Model.

What I often heard in Dr. Pankey’s words was that the “yes” is only the beginning. He wanted his patients to not only do the dentistry but in addition, “pay a fair fee with gratitude and apprecia-

tion!” This implies yet another level of understanding in the Erikson Model; one that revolves around the intimacy of feelings and values. What operational values internally motivate patients to move toward health; what is most important to them? If you really want to know, you will have to have the courage to ask and make sure you listen to the response! Values are most often discovered when you listen carefully for the feeling behind patients’ statements.

Thomas Gordon wrote and talked about this in the 70s in his Parent Effectiveness Training book and seminars. Learning to listen for “content and feeling” within another’s words is foundational to a relationship-based dental practice. This is what Erikson was talking about as he came to understand the issues at conflict. Are we going to choose intimacy or isolation as we face relationships? Will dentistry be only a mechanical exercise or will it truly be “connected” to the person who came in with the teeth? The benefit of wrestling with the intimacy issues, according to Erikson, is what he describes as “Mature Love.” This is the capacity to commit oneself to concrete affiliations and partnerships and to develop ethical strength to abide by such commitments, even though they may call for significant sacrifice and compromise.

Back in the middle 70s, I was frustrated with my slow progress toward my preferred future. I cornered Dr. Pankey, who sensed my feelings, and he shared a story about one of his associate’s “development in this work.” When I asked how long it took this particular dentist, his response set me on my ear. “Fifteen years, to get it in his tissues” he said.

Since the Institute was now functioning and on its path, I asked what he realistically hoped its influence would be on my timeline (wanting and needing it to be shorter). His answer was, “It will probably shorten the process by two years.” His reasoning was, “It not only takes time to get it on the shelf technically (Competence), but it also takes time to get it in your tissues!” (Behaviorally)

This situation is common at all levels of the Continuum. Participants are unsettled with their progress, as I was. Often, my counsel is to “lighten up, be gentle with yourself, your team and your practice.” In order to “get it in your tissues” and let change flow

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Perspectives

By Dr. Steve Ratcliff, Director of Academic Affairs, The Pankey Institute (sratcliff@pankey.org)



I am often amazed at how learning sneaks up on me when I least expect it. My reaction usually surprises me... I become defensive, as though I must protect those around me from seeing my ignorance. After all, I am supposed to know the answer. This isn’t new behavior. I can track it back to my earliest memories of insecurity. Didn’t matter that I might not have any reason to know; that knowledge was to have been deposited into my head.

I’ve thought about this silliness for years; in fact, ever since I started teaching. It usually starts when someone asks me a question that I answer quickly. They respond with a different question and I feel a nagging sense of doubt in my gut. My mind races as it looks for the correct answer, and as the mad rush to find what isn’t there crescendos, the next thought is to figure out how I get out of this without looking like an idiot. It feels like getting caught with my hand in the cookie jar and then trying to convince Mom what she was seeing didn’t really exist. I want to run and avoid the humiliation.

Perhaps this sounds overly dramatic. In fact, the whole episode occurs in seconds. I have learned that I can fight it and dig myself into a deep hole where I confirm that I am ignorant and perhaps unteachable, or I can embrace it and be a learner. It happened recently when I spent time with a favorite mentor.

I have a new patient who asked me to help her with her bite. She is a dentist, has a high degree of understanding of what is going on in her mouth, and wants the best possible care for herself. Unfortunately, she has had orthodontic treatment multiple times and lost teeth because of it. The resulting occlusion is less than optimal and there is severe fremitus throughout the entire upper arch. Her envelope of function is restricted and she has been having muscle pain. Additionally, we discovered severe wear facets on her front teeth.

I was feeling pretty smug about my diagnosis and tentative treatment plan. Splint therapy, then more ortho to open up the envelope of function. Seemed the most conservative treatment and I thought I was on the right track.

I took the photos to my mentor friend and showed him what I was seeing. He kept asking me the same question: “What do you hope to gain from the ortho?” I answered several times that I wanted to open up the envelope of function. Feeling frustrated that he didn’t seem to understand my answer and at the same time feeling that nagging sense of doubt, I decided to shut up and listen differently.

We looked at a single slide of the marked up occlusion and I was taken on a journey of learning about how teeth rub together. (I am now considering opening the bite with small occlusal inlays just enough to free up the anteriors in function. What I finally saw was that because of a tooth arch discrepancy and interarch discrepancy, ortho might create even more problems. You will probably see this case somewhere in the Continuum some day.)

The lesson for the day was learning more about learning. Sometimes my current level of understanding leads me to solutions I haven’t considered fully. I saw a malocclusion and jumped to orthodontic without fully considering what it could actually accomplish in this case. Fighting what my mentor was trying to help me see was the same as saying, “If I believe what you tell me, then what I think I know must be wrong. If I am wrong I must be inadequate.” Yeah, I know it sounds like psychobabble. Think about it though.

Have you ever found yourself hanging on to a piece of knowledge so tightly you can’t hear what anyone else has to say? Holding it as though letting go of it would somehow be letting go of who you are? It’s just information; what makes it so important to have exactly the right information?

Learning is an emotional process. It speaks to our core values and how we live out those core values. We may want to learn for lots of reasons: achievement, altruism, integrity. When we feel those values threatened by not having an answer, the response may be similar to the one I describe. What I’ve discovered is that, when I can identify that familiar feeling of unease, I have a golden opportunity to learn something. If I can find the wisdom to embrace the fear of not knowing, more good stuff can come in.

I write about this because I think that the patient I describe will get better opportunities for treatment as a result of my new learning. I also observe similar behaviors with our participants while they are studying here at the Institute. Those who can set aside the need to be right seem to learn the most. Those who hang on to what they think they know at all costs often leave angry or resentful.

Don’t hear me saying that we have all the right answers; we don’t. Often we have no more to offer than more questions. Yet perhaps that really is the essence of learning: finding the next right question. ■



Imagine If... Every Patient Were Offered Optimal Care

By Lee Brady, DDS, Clinical Instructor, The Pankey Institute (lbrady@pankey.org)

Just as we are on a professional journey with caring educators to guide and facilitate our course, our patients are on a journey of discovery about their oral health and establishing their values about optimal care. It is our privilege to facilitate this journey and our obligation to respect their right to choose.

Early in the Continuum, at the condos in the evening, it is common to hear concerns about patients' expectations of care not matching the optimal care model. We need look no further than ourselves to assess a cause for this dilemma. As a profession we are responsible for current beliefs about the care we provide. Dentists have done an enormous disservice to the very people we are charged with caring for. We have taught patients that a ten-minute exam following a prophylaxis is the standard for new patient appointments. Dentists have taught patients to expect single tooth dentistry, and for years we have told our patients that cracked teeth are caused by the large amalgam

placed by the dentist before us. Shame on us. Every one of the misconceptions patients hold regarding dental care have been propagated by all of us.

Medicine is different. Patients expect and require that their treatment vary as standards change

"Dentists have taught patients to expect single tooth dentistry."

in accordance with new research. It is imperative that we educate our patients that dentistry is also constantly evolving and we as caring professionals are choosing to change the way we practice for the better based on new knowledge. We cannot afford to not incorporate comprehensive examinations and comprehensive care into our practices, for our patients' sake.

As we live longer and longer lives, maintaining a complete, healthy, functional dentition has

become an integral component of overall health and quality of life. It is our obligation to look beyond the current status of the patient's oral health into their dental future by completing a comprehensive examination. We can then educate them about current conditions in their

mouth, (whether caries, periodontitis or occlusal disease from mild to involved) and allow them to strive to live their entire lives with a healthy dentition. Step back from the chair for a moment and take a broader view of your comprehensive examination. Look beyond today and next week and imagine how the current dental conditions you are witnessing will progress over the patient's lifetime if they remain undiagnosed, untreated and not communicated.

Now answer this question: "Does every patient deserve a

comprehensive examination and an explanation of the findings?" I think we all believe the answer is unquestionably yes! In our individual practices we strive every day to educate our patients and change their expectations. Hopefully they become disciples and educate the people they refer, who then enter our offices expecting a comprehensive examination. Imagine how the experience of your day would change if most of the patients calling the office requested a comprehensive exam, and would not expect a prophylaxis on the first visit.

I believe it is our professional obligation to change the expectations of all patients to match what is currently known and practiced. However, we cannot expect patients to value and desire a level of care if we as dentists don't value it first. Step one, then, is to change the widely held views of our peers by being leaders in the field. ■

CRUCIBLE

(Continued from page 4)

gracefully into your life, it is important to "Know Yourself." In the C1 and C2 experience, we introduce you to learning about yourself through the Social Styles Matrix, while in C4 you spend time pursuing the "Know Yourself" aspect of Dr. Pankey's Cross of Dentistry through the use of the Keirse/Bates Temperament Sorter. This instrument allows us to look at our personal and professional "typology" and identify various "types" of individuals and how they deal with ever-constant change.

There are individual types who get excited about change, handling it appropriately from a psychological standpoint; another group manifests its ability to deal with change through people. Yet another type rises to the challenge, gaining energy through the intentional creation of a crisis, to which a response is forced. The final type includes those that feel most comfortable when they can find relief from change, avoiding it or letting it pass by. Interestingly, my experience leads me to believe most dentists fall into this last type category - often referred to as "traditionalists" or "stabilizers." In my ten years of collecting data from C4 participants I've found approxi-

mately 65% are of this last type.

A better understanding of our unique type gives us the ability to develop in the Erikson Model along with uniquely individualized leadership characteristics. An individual who is willing and able to influence behavior, their own first and then others, is defined as a leader. The good news is that we are in charge of both the willing and the able parts. The word willing has to do with attitude while the word able has to do with skill development within Developmental Stages.

As you come to understand yourself, you can use intentional learning and encourage yourself to move out of your comfort zone to experience change as a benefit to your life and practice, not as a threat. Consequently, we need to find ways to measure our progress, make corrections and implement personal and organizational change. This behavior has a direct impact on our patients, our team, our families and ourselves.

Our expanding world of information and experience provides us the freedom to change and grow. Peter Drucker's words "Vision, Action, Understanding" are a framework for "getting it in your tissues."

We are permitted to act before we completely understand the scope of our total vision. Identifying

vision, purpose and philosophy of life and practice, as many of our Pankey Participants have discovered, is at times lonely, and can seem slow. But from this perch of "Reengagement," I would encourage you to ask, "what is it that holds meaning for me, at this point in my life and practice?" In quiet reflection become increasingly clear about what is most important to you and then act on it prior to requiring a "complete" understanding; truly, this type of understanding only comes after you have acted and had time to reflect on your action/outcomes. Continued growth along the Developmental Stages requires openness to new mentors, studymates, friends and experiences.

Envision it, Act on it, then and only then will you Understand it - and you'll find your "development quotient" accelerating. ■

Dr. Green can be reached at:

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Upcoming Faculty Presentations

New York Pankees, New York - April 7 & 8: Dr. Steve Ratcliff

New Hampshire Dental Society, Manchester, NH - April 8: Dr. Mark Hyman

Kentucky Dental Association, Louisville, KY - April 9: Dr. Mark Hyman

Greater Pensacola Study Club, Pensacola, FL - April 15: Dr. Irwin Becker

North York Centre Study Club, Toronto, Canada - April 22: Dr. Steve Ratcliff

North Star Affiliated Learning Group, Fergus Falls, MN - May 13 & 14: Dr. Irwin Becker

New York Pankey's PALG, New York - June 9 & 10: Dr. Irwin Becker

Western Colorado Pankey Study Club - June 16 & 17: Dr. Irwin Becker

Coming Soon: The 18th Biennial Alumni Meeting

Join us September 22-25, 2005, at the Key Biscayne Ritz-Carlton for the 18th biennial meeting of the L.D. Pankey Alumni Association, "Optimal Future". All Pankey Institute participants and supporters are welcome to register and may be accompanied by staff, family members and guests.

This lively long weekend of keynote presentations, workshops, recreational activities and entertainment is a joyful opportunity to celebrate Pankey-style dentistry.

The 2003 meeting, dubbed "Positive Future," featured talks on Esthetic Advancement, Creating a Positive Future and Advanced Excellence by speakers Dr. Thomas F. Trinkner, Brian DesRoches, PhD, Kim McBride and Robert K. Cooper, PhD.

Workshops were presented on Provisionals for Veneer Restoration, Orthosis Therapy, The New Patient

Experience, Developing the Esthetic Practice and Orthopedic Medicine and the TMJ. These workshops featured Dr. Steve Ratcliff of the Institute, Dr. Gabriel Don Sing, Dr. James C. Kincaid, Dr. Garrett B. Lyons, Jr., Dr. John R. Droter and Dr. Cheryl Scott.

This year, featured speakers include Stephen M. Schmitt, DDS, MS, Mrs. Joan Unterschuetz and Kevin Asbjornson, MIM.



Dr. Stephen M. Schmitt, DDS, MS

Dr. Schmitt's scheduled presentation, *Dental Diagnosis and Treatment in the Digital Age*, will focus on new imaging techniques and digital manufacturing processes that change the way dental care is provided today.



Mrs. Joan Unterschuetz

Mrs. Joan Unterschuetz will join with Dr. Steve Ratcliff (Institute Faculty) to present *Listening and Facilitation*, and *The New Person Experience*. Both of these presentations are designed for doctors and team members to create a foundation of skills.



Mr. Kevin Asbjornson, MIM

Mr. Kevin Asbjornson's presentation, *Artistry in Leadership*, will explore the parallels between music, performing arts and leadership. An experienced inspirational speaker, Mr. Asbjornson will spark creativity, collaboration and productivity among you and your team members.

To relax, participants will have the option of taking part in the Association Golf Tournament, the Fishing Tournament, a Shopping Excursion or a kayaking trip over a fossilized reef.

The high point of the meeting is always the Gala Dinner, a formal affair followed by music and dancing. It is here that old friends come together and new ones are made.

Look for future information detailing the schedule and events of the 2005 meeting.

Alumni Association members will receive a special mailing detailing the meeting and a registration form. If you have yet to join the Association and would like more information, please contact Mari Blandon (Phone: 305-428-5501 or email: mblandon@pankey.org). ■

The year 2006 will bring outstanding learning experiences to the Institute. Once again Master's Week, to be held April 2-6, 2006, will have an outstanding lineup of the finest clinicians in the country.

Frank Spear, arguably the best lecturer in dentistry today and perhaps ever, leads the week off with workshops as only Frank can do them. He will create two days of interaction with participants as he asks them what they would like to talk about for the time he is with them. One evening in the condos will be available with Frank to talk about cases, philosophy, and whatever else comes up.

Special Events In 2006

In keeping with our new tradition of pairing Frank with a European clinician we are delighted to announce that Mauro Fradeani will be joining us for two days of Master's Week.

Dr. Fradeani, the author of the recently published *Esthetic Analysis Part I*, is known for his exquisite restorative cases and his magnificent photography. His topic will be: *The Key Steps to Achieve Predictable, Esthetic, Functional and Biologic Integration*. You can count on learning with a European master

who is highly regarded, approachable and a great teacher.

Golf and fishing will be available on Friday of that week, after Master's Week has concluded.

Pascal and Michel Magne Exclusive to The Pankey Institute

Pascal Magne and his brother Michel have agreed to use The Pankey Institute as their exclusive venue east of the Mississippi for their four day course: *Esthetic Porcelain Rehabilitation and*

Bonded Porcelain Restorations, Tooth Preparation and Provisionalization. The course will be held April 23-27, 2006 and will be limited to 24 participants. Laboratory technicians are welcome to attend and we highly encourage doctors to attend with their technicians for an unparalleled joint learning experience. This course is also open to participants who have not previously attended the Institute so if you have colleagues you have been trying to get down to Key Biscayne, this is a chance to come together and learn with Masters! ■

GIVING BACK (Continued from page 3)

2003 mission teams and was able to bring along a lot of supplies from different manufacturers. Financial donations also are welcome to complete the new medical-dental clinic. Donations may be sent to ServingHIM, PO Box 794151, Dallas, TX. The website address is www.servinghim.org and the email is info@servinghim.org.

Fundraising for ServingHIM in support of our mission trips has not been difficult. In my case, I offer patients the opportunity to have their teeth bleached and then write their check to ServingHIM instead of me. I donate the bleaching materials but I know of other dentists doing this who have had corporate sponsors donate the materials. My church, the Bay Area Community Church in Annapolis,

Maryland, and many of the Visiting Faculty of The Pankey Institute and other Pankey colleagues have made donations. My chiropractor, Dr. Kibby, was so inspired that he and his patients collected 1,000 beanie babies for us to take to Romania for the children. (If you undertake



Pankey Institute faculty at work in the clinic: Dr. Mac McDonald (Plano, TX), Dr. Denny Byrne (Baltimore, MD), and Dr. Ward.

dental mission work, you likely will find that many of your professional friends and patients will be happy to



Outside the clinic, children celebrate their visit with the dentist.

provide helpful donations.) For information about ways you can get involved with ServingHIM, you may contact me personally at wardbyrne@aol.com or the ServingHIM organization at info@servinghim.org.

The rewards of volunteering go beyond a thank you or a smile, they go deep to the heart. It can only be named Love. Love pours back to you from those you help and in turn you have more love to share. I can think of no greater reward or a more fulfilling life because my entire family benefits, as well. Mission has

become a central part of my vision for my life. The experience of giving back is something I can easily share with the patients and staff of my dental practice. From this involvement, we all grow. Dr. L.D. Pankey summed it up well when he said that we want our patients to pay us with gratitude and appreciation. The gratitude and appreciation we receive from the patients of the clinic far outweigh any money they could pay us. ■

Nancy A. Ward, DDS, MAGD, partners with her husband Denison E. Byrne, DDS, MAGD in Baltimore, MD. They have three children. She has been on the faculty of the Univ. of MD Dental School, and is a Visiting Faculty member, and Board Member of The Pankey Institute. She may be emailed at wardbyrne@aol.com.

We at The Pankey Institute are great believers in continuous analysis and improvement. What is working? What isn't? Always, our most basic question is, how can we make the experience of learning the best it can be? Enter web-based learning.

We knew it was a sound concept: streamline the onsite time requirement for Continuum courses, allowing participants to complete their education from the comfort of their own homes or offices. We ticked off the benefits: money and time saved for the dentist, an enhanced learning experience, the ability to involve home office staff in the learning, and so on. Then we took the plunge.

Our first revised class featuring web-based learning debuted in September 2004. We were met with a few eager faces and some skeptical ones. We took a deep breath and forged ahead, confident in the improved Continuum.

Since that time, more than 27 classes and 35 online web sessions have taken place. The result? It's all working better than even we dared to dream it might. Participants are happy to have the ability to combine the best of both worlds - the camaraderie of the onsite portion, the convenience of the web-based learning - and they have not been shy letting us know it.

Web-based learning has given us the chance to evaluate how effective each onsite course was, to check back with participants within a short frame of time and to emphasize the important points students might have missed.

Students also have the opportunity to send in cases and documentation for in-house faculty and the rest of the class to view and review. Some might not have had the confidence to bring the case in person or to present it in front of the class. In the virtual classroom, they are not so inhibited.

But perhaps the most exciting part about web-based learning is getting each doctor's staff involved. Hearing them praise their doctors for how much they have applied and how much the practice has changed is so satisfying. Often

Web-Based Learning

A message from the inhouse faculty.



Drs. Becker, Ratcliff, DeWood and Brady

these same doctors either don't recognize the growth, or they are too humble to tell us, or worst yet, they continue to think that they are still not doing enough.

Web-based learning is not just an exercise in convenience, then: it is a system that encourages and rewards growth, and that levels the playing field. Whether gaining new understanding of a key point, or hearing glowing words of praise from one's own staff, web-based learning can be just as, if not more, rewarding than the onsite portion.

We could say we had total confidence in the new system all along, but the truth is we were taking a risk, forging ahead into the unknown. There have been minor adjustments, and this will continue as we hear more and more comments from students.

But we know now that web-based learning at The Pankey Institute is a success, an integral part of our Continuum series, convenient and practical for today's dental professional. To illustrate that success, we thought we'd let a few recent participants tell you about their own experiences.

[The Elluminate class] helped to spur me on to incorporate some of the things that I heard while at the Institute that I intended to implement but haven't yet begun. I was glad to have some interaction with my Pankey family so recently from the time I was there. Much better than once a year.

- Dr. Doug Milner

It was great to be back at The Pankey Institute and hear the terrific discussions from the

participants. I liked the informality of it and sitting at home in my kitchen at the same time was really cool! I think this format is a great idea. Hearing from everyone else helps to keep me motivated and encouraged to apply my knowledge. This is the hardest part for me and it was so helpful at this point to meet again for discussion.

- Dr. Krista Fisher

The best part of the session is it reminded me again of all the things I wanted to work on when I left the class. It gave me a great feeling to feel like I was really together with all the people in our class and to share our feelings about our successes and failures.

- Dr. Diane Arel

Thank you for having this technology available to us. It was wonderful. I am not very computer savvy, and I had low confidence that I would be able to participate in the class at all. But this worked for me without a hitch. The best aspect was to actually learn from some great minds in dentistry from the comfort of my own home, and in real time. I would love to be able to listen in to other classes in the future. I don't want to take CI and CII over again, but I'm sure from listening in on Elluminate I would identify some important things that I forgot or am just not doing.

- Dr. Jim Fulmer

I was quite frankly concerned about what the quality of the follow-up would be like. I should have known

that, with you [Dr. Gary DeWood] in charge, it would be an exception! The pictures of splints that you used to show real world situations were just great, and the energy and interest of the students was palpable! It was perfect in so many ways--they had obviously been "applying their knowledge" as they understood it, and the feedback at this juncture about six weeks out couldn't have been better. Great reinforcement of the principles! Good job!! Wish I could've benefited from this kind of feedback back when I did CII. You won me over on this whole idea--you'll hear me really encourage my next class NOT to miss it!!

- Dr. Tom Risbrud

I think the best aspect is connecting with classmates, and ensuring a "continuum" of learning. All kinds of questions come to mind from the last day of class, and many of them were directly answered during the webclass. I found the discussion centered around the splints slides particularly useful.

- Dr. Glen Joyce

I can't comment on how it can be better because I am still in awe about the whole experience. Eighteen doctors scattered all over the US listening to the faculty speak and be able to interact at the same time, blows my mind.

- Dr. Jose Peralta

The concept worked. The students were able to use this tool as an effective means to further their education. This was my first web-based learning experience and I am very impressed with its potential.

- Dr. Jim Lockwood

If you haven't yet experienced web-based learning, we urge you to remain open to the experience. Questions, comments? Email us at vleon@pankey.org. ■

Web Link

Our website (www.pankey.org) is continually being updated with new information.

Hot Topics

Featured articles have included Stopping Periodontal Disease, Secondhand Smoke and Tooth Decay and Dealing with Dental Anxiety (for Patients).

Pankey Scholar Spotlight

We're proud of our high-achieving

scholars and have been highlighting their accomplishments online. So far, Drs. Jim Fondriest and Tom Dawson have been featured.

Discussion Board

Post questions, discuss topics and be a part of things at the Institute on our Board. Requires log-in.

Video Library

Watch videos on Philosophy, Articulating Casts, Centric Relation, Codiscovery and The Patient Interview. Requires log-in. ■

Less Than Perfect

When we decided to list those who had made our Key Biscayne educational facility possible in the January 2005 Pankeygram, we were enthusiastic about the chance to thank our kind donors. Unfortunately, two of our generous donors were inadvertently omitted. We'd like to take this moment to apologize for the error and list their names here. Thank you for making our dream a reality.

Cornerstone Donors \$5,000 - \$7,499

Dr. Wayne and Tina King of Oklahoma City, OK
Dr. Darren A. McKeever of Pompton Plains, NJ



The New Continuum: One Doctor's Experience

By Dr. Carl Steinberg, Philadelphia, PA (carlsite@aol.com)

In the Spring of 2004, I had the pleasure of spending some time talking with Duke Schwarte [Business Systems Manager of The Pankey Institute]. While we have developed a good friendship over the years of my journey and discussed many topics, I felt as though I was attacking Duke personally when the conversation came to the topic of the change to a reworked week of classes.

I told him with a proud chest that I was glad I went through most of the Continuums with a full week's schedule. I was glad I had had enough time to experience the combination of technique, philosophy, and student and faculty interaction. Some of the best learning comes when we are not in class, but at meals or talking in the condos. I felt the new schedule would force the Institute to cut out some of the non-technical training that has helped me greatly to continue the transition and new understanding of my dental practice and life.

Duke assured me that there have been many meetings and surveys as to what the students want, and they've been calling for a streamlined week with less time away from their families and

practices. I rolled my eyes in disbelief. He told me that with the addition of faculty one-on-one conferences and two web-based classrooms, the experience with the Institute may be *enhanced*, not diluted. He asked me to give it a try and see what I thought.

In October of 2004, I attended the Esthetics course. The class and format did not simply meet my expectations; they exceeded them. The feeling of information overload that I usually felt on Thursdays

Our days were filled with the sharing of knowledge, professional and personal bonding, watching the Red Sox beat the Yankees, lots of coffee and little sleep. What a wonderful experience that I only get at The Pankey Institute!

The faculty conference allows you to go one on one and get your individual needs addressed. Sometimes you need an environment where you feel secure and unashamed when asking questions. This is such an environment. I felt

arrived, Dr. Steve Ratcliff gave us a guided tour and made sure we all could participate. The class focused on reviewing a case treatment planning. We reviewed many esthetic topics that were presented to us at the Institute. We could all see what was presented and we could talk to one another.

With the completion of the second virtual classroom I realized that, while in its infancy, there exists an enormous potential for us students to continue to grow and

"The class and format did not simply meet my expectations; they exceeded them."

evening prior to a Friday completion, I felt on Wednesday, our last day of class. But there was still the faculty conference and the web classrooms to come.

Our class was fortunate to have Drs. Tom Trinkner and Jim Fondriest as our visiting faculty. Not only were their lectures marvelous, the personal insight they were able to share with each student in the lab and the condos was awe-inspiring. What a treat to have these two fine clinicians critique and motivate you on an individual basis.

as though my best friend was putting his arm on my shoulder and passing along fatherly advice. These individual meetings are a great addition to the Continuum.

I finished the Esthetics course with a big smile on my face, knowing that there was still more to come. I was going to enter the world of an online classroom.

At home I found myself in front of my computer not knowing what to expect. With the help of Diego [Technical Operations Coordinator at the Institute], I was able to enter the virtual classroom. When we all

learn. Not only will we benefit, but also our staff, study clubs, and lab techs can be included to experience what we do. The possibilities are limitless.

While I had gone into the new format fearing being shortchanged, I left with a wealth of knowledge and peace of mind. I know now that our future is bright. ■



"FINISH EACH DAY AND BE DONE WITH IT. YOU HAVE DONE WHAT YOU COULD; SOME BLUNDERS AND ABSURDITIES HAVE CREEPT IN; FORGET THEM AS SOON AS YOU CAN. TOMORROW IS A NEW DAY; YOU SHALL BEGIN IT SERENELY AND WITH TOO HIGH A SPIRIT TO BE ENCUMBERED WITH YOUR OLD NONSENSE."

Ralph Waldo Emerson (1802-1882)

New Triple Plus Club Members

Dr. Jeffrey T. Bonk (Barrington, IL)
 Dr. Thomas G. Brown (La Jolla, CA)
 Mr. Paul H. Westbrook, C.D.T., B.S. (Garland, TX)
 Dr. Christopher M. Wilson (Brookfield, VT)

The Daffodil Principle

Anonymous

My daughter took me one day to a place she called the Daffodil Garden. We saw a hand-lettered sign, got out of the car and walked down the path. We turned a corner and gasped at the glorious sight before us. It looked as though someone had taken a great vat of gold and poured it down over the mountain peak and slopes. The flowers were planted in majestic, swirling patterns - great ribbons and swaths of deep orange, white, lemon yellow, salmon pink, saffron, and butter yellow. Each different colored variety was planted as a group so that it swirled and flowed like its own river with its

own unique hue. There were five acres of flowers.

"But who has done this?" I asked.

"It's just one woman," replied my daughter. "She lives on the property. That's her home."

She pointed to a well kept A-frame house that looked small and modest in the midst of all that glory. We walked up to the house and on the patio saw a poster. "Answers to the Questions I Know You Are Asking" was the headline.

The first answer was a simple one. "50,000 bulbs," it read. The second answer was, "One at a time, by one woman. Two hands, two

feet, and very little brain." The third answer was, "Began in 1958."

There it was, The Daffodil Principle. I felt deeply touched by this, and thought of this woman whom I had never met, who, more than forty years before, had begun - one bulb at a time - to bring her vision of beauty and joy to an obscure mountain top. Just by planting one bulb at a time, year after year, this unknown woman had forever changed the world in which she lived. She had created something of magnificence, beauty, and inspiration.

Learning to move toward our goals and desires one step at a time - often just one baby-step at a time - and learning to love the doing, learning to use the accumulation of time is the Daffodil Principle. When we multiply tiny pieces of time with

small increments of daily effort, we too will find we can accomplish magnificent things. We can change the world.

"It makes me sad in a way," I admitted to my daughter. "What might I have accomplished if I had thought of a wonderful goal thirty-five or forty years ago and had worked away at it 'one bulb at a time' through all those years? Just think what I might have been able to achieve!"

My daughter summed up the message of the day, saying, "Start tomorrow."

It's so pointless to think of the lost hours of yesterdays. The way to make learning a lesson of celebration instead of a cause for regret is to only ask, "How can I put this to use today?" ■



Impatient Medicine Can Be Hazardous To Your Health

By Bryan Stahl, DDS, Barrington, IL

It seems we have an epidemic of impatient patients and impatient doctors. Waiting is viewed negatively; we are an instant society. This has had a marked impact in medicine. A common theme from doctors is that the patient chose one treatment option over another based on time investment: patients wanted the quicker fix. The doctor happily accommodated this request, knowing that of course the patient is entitled to make an informed choice. After all, who am I to tell someone what is best for them?

Imagine seeing an ophthalmologist who determines you have a serious eye condition which will require laser therapy and months to years of steroid and antibiotic therapy. Being an impatient person, you ask for a quicker option. The doctor goes on to explain the wondrous new ways we have, thanks to "technology", to make a

virtual exact replica of the human eye. This will be so natural-looking it will escape detection from everyone except an ophthalmologist. There will be very little maintenance required and it can be completed in three easy appointments. Total therapy time is estimated at one month. You jump at this near instant fix; being the overworked, busy person you are, you simply do not have the time it requires to save your natural eye.

What would you think of an orthopedic surgeon who determined you have an abscessed finger but gives you the quicker option of removing it and constructing the finest state-of-the-art replacement finger? It would be made of titanium and look just like yours by means of computer modeling. This can be done almost painlessly, quickly and within your budget with low monthly payments of \$97. The good news is he can schedule you soon. Thousands of

patients have chosen this wonderful option and are very happy with their choice. Dr. Wonderful has made this almost a specialty. You forget that your finger could have been saved with an operation and medication to treat the infection. There would have been time-consuming physical therapy and, of course, healing time. But you were gently led by a caring doctor to have this "instant" replacement. How could he be wrong?

You may recall the dismal failures complete TM joint replacements were. I'll bet many surgeons and patients sang the praises of them for a short while. These were virtually abandoned for a "compromised" but natural TM joint.

This is not to say technology cannot help people sometimes. I think of hip replacement surgery, which many patients are very happy with. In truth, hip replacements are a last resort, proposed when all other options are exhausted.

As dentists, are we truly committed to preserving the natural dentition or are we simply too impatient for the patient's own good? Selling treatment is easy; living with the consequences is the hard part. Just because society and most other dentists are doing something does not mean we have to join in. I would hope that I would have been one of the doctors who "fought" against frontal lobotomies when they were in vogue to treat certain mental health concerns. In fact, I know someone who had one done and what a tragic operation it truly was. Just because something is being done by many in medicine doesn't mean it is right. Doctors need to take back the rightful respect and reputation medicine has known historically. Change will only occur when doctors are willing to take a stand on certain issues and have the "patience" it requires to change things one patient at a time. In the words of Ben Franklin, "patience is still a virtue." ■

Dr. Stahl has been in solo practice for 17 years in Barrington, Illinois. He is an alumnus of The Pankey Institute and can be reached at (847) 842-7788.

The hardened rain staggered across the windows of 221B Baker Street. On days such as this, these modest digs became our refuge and our prison. Holmes sat across from me in the drawing room with his eyes lidded in deep thought. The warm glow of the fire did not seem to affect his sullen mood. It had been some time since our last adventure and I knew that the great detective abhorred the vacuum of a thoughtless day. I took a chance to break the silence: "Holmes, may I ask you a question?"

"You already have," he whispered, exhaling slowly. I pressed on with a question that had smoldered in my head since our first case together so many years ago. "Holmes, what is the secret to your uncanny ability to solve the most singular and complex cases?"

He was quick to reply. "My good doctor, certainly you have noticed a method and pattern to my examination of our cases."

Not to seem obtuse, I replied that I had noticed some connecting threads but wondered about his thought process. The great detective quickly rose to his feet and seemed pleased to have a student for his ensuing lecture.

"Dr. Watson, as you are a prodigious note taker, I will reveal my *modus operandi* in a chronological manner:

"First and foremost is my in-depth interview of our potential client. We usually meet here in our sitting room where we are both comfortable and relaxed. I may begin by asking how he heard about me and my services. You can learn



Elementary Examination

By Brian Beirl, DDS, Seminole, FL
(brbr@aol.com)



much about a person by his acquaintances.

"It is important to have him verbalize his paramount concern. Stay in the question; do not lose your patience. Until we have heard him, he will not hear our most brilliant ideas.

"I observe his mental state and physical appearance. I ask few questions and listen the majority of the time. Although personalities fall into basic categories, one must be careful not to place people in those categories. Our client will reveal himself soon enough.

"Everyone has a history and they like to tell it. Many times a proper understanding of this history will point toward the current dilemma and eliminate some possible causes of the present state. You will notice I do not hurry this process. I arrange my schedule so that I have ample time to confirm this person's importance and honor the trust shown in my abilities.

"The next step is to gather, arrange and record the facts of the case. Many people think that is all I do, just make observations and announce the solution to the case. Some detectives practice in this manner. Please hear me that, without initially knowing my client and developing a relationship, I would be guessing as to the

solution. And as you know my dear Watson, I never guess!

"The gathering of facts is an absolutely necessary part of the investigation. There are two types: the information the client relates to us and the information that can be observed and measured. I am thought to be a great observer. I humbly accept the accolade but I must inform you that I was not born a natural observer. It can and must be learned to become a great detective. Do you, Watson, detect a common theme to my method?"

"Why yes Holmes, it seems to revolve around knowing your client and being curious about him as a fellow human being."

"Excellent, my good doctor, you hold the universal Key to become a man of great Worth. But there is more. You will notice that I use the latest in technology to aid in my collection of data. I have my magnifying glass, your stethoscope, plaster of Paris, chemicals and accurate measuring devices, to name just a few. Look around you; we are surrounded by books of every description. I have found that knowledge of past cases is essential for solving future ones. Although no cases are identical, there are definite patterns and similarities that will help one find the solutions.

"I am assisted not only by these inanimate objects; I seek assistance from other experts who can help me in my quest. It is never one person alone that has success in this field. And you, Watson, are my unwavering assistant, secretary and fellow detective rolled into one!

"Finally, I must end with a discussion of the art of deduction and having the end in mind. Much of what we do is merely through a series of deductions or subtractions of possible outcomes. Many times by knowing what is not possible or what is not in the best interest of our client, we are left with the most probable solution. This is having the end in mind, a visualization of the outcome. Then and only then can we determine the steps that will lead to the solution."

Then Holmes gave a great sigh and ended with this heartfelt appeal: "When the answer to a problem or mystery is revealed it always seems simple to many observers. But this is just the tip of the iceberg of what has transpired. To have consistent success, one must make a commitment to excellence. This involves a commitment to intensive study of not just the technical side of our chosen profession, but the study of ourselves and those around us."

With that Holmes moved to his chair, his face now warmed by the soft glow of the embers. We heard light steps climbing the stair. Holmes welcomed our visitor with a natural smile, saying: "Welcome to our humble abode. How may we assist you?" ■

A Letter of Thanks

This letter was received by Dr. Ratcliff from Dr. Robert W. Mier of Warwick, RI in 2004. It details the personal transformation he underwent thanks to the Institute and great courage on his part. We are reprinting the letter here because its message is so inspiring. Thank you, Dr. Mier, for your honest words and meaningful letter.

Dear Dr. Ratcliff,

I know you have many demands on your time and thousands of dentists to deal with, but I hope you can take the time to hear my story. I completed C1 in June of 2003 and found it to be not only what I expected but much more. At the age of 45, I was buried at work and psychologically burned out. I was in desperate need of change in my practice. At The Pankey Institute, I found a place where people espoused the views I had possessed and subconsciously held but never articulated to either myself or my patients. I learned a lot about myself and the distance I had strayed from my true self.

I think the turning point was during a group discussion about the Philosophy. During the exchanges about Dr. L.D. Pankey's Cross of Life, I realized that my wife's cross was skewed out of center because of me. It may have been the most unselfish moment I have experienced in a long time. I was in tears while I shared this with the group, something I had never done, and it felt as if I were listening to someone else speak. That moment began a journey of emotional and spiritual awakening and gave me the motivation to change my life and practice.

I am also writing this to you because you directed me to several books in the Resource Center during the post-course celebration. I want to thank you personally for those few moments you gave me. One of the books was *The Art of the Examination* by Dr. Barry Polansky, which I have found to be of

significant value in clarifying many questions I had upon completing C1. I had the opportunity to read it on vacation about a month after C1. I also read the *E-Myth for Physicians*, *Soar with Your Strengths*, and *People Skills at Work* during this vacation in a fairly secluded cabin in the Rockies with no television or telephone.

My wife and I used this opportunity to discuss and write down our goals, aspirations, and needs for the future. We enjoyed some wonderful moments and discussed things we had needed to address for a long time. She finally understood why I wanted her cross to be centered and balanced, and why it wasn't in the first place. Out of those discussions we developed a Primary Aim for our life and our practice. The natural consequence

"I was in desperate need of change in my practice."

of this was renewed and written philosophy for my practice. I returned and began to try to explain this to my staff.

This began an uphill battle to say the least, with some of them afraid I was going to change everything wholesale. We were developing our goals and strategies to change direction to match the vision I now had for the practice. This included dropping my participation in the two plans I provide for now. This is to be done one at a time over the span of several years. We aim to educate the patients before we drop the plans.

I began blocking off Wednesday mornings to do comprehensive exams, beginning with the staff and then selected patients of record to allow me to hone my skills and those of my assistant. You were instrumental in this aspect when you demonstrated your exam technique during the course and showed the importance of the assistant in the process.

We began identifying the "below-the-line" patients and learning to stress the education aspect for them. We purged the "wandering" patients who occasionally showed, had multiple no shows, and exhibited a general lack of desire for dentistry. This has immensely helped the hygiene schedule by eliminating most cancellations.

We also began working with the four personality types by first identifying everyone in the office and where we stood. That alone led to some eye-opening moments for my staff. We then began to learn to identify characteristics in our patients and how to "flex" to allow better communication. This exercise has brought me the biggest returns in my practice. Almost from the outset, my ability to communicate with patients improved. Patients began agreeing to treatment I had recommended for years. Their feedback was invaluable, as they showed real interest in their

strong, and it only became stronger. I'm sure my wife would have made it through this but I'm not sure I would have without the "awakening" I experienced in C1.

I will be forever grateful to the staff and the Pankey organization for allowing me to experience what you have developed and continue to nurture. My wife is now on the other side of bilateral mastectomy with immediate reconstruction, and we know cancer did not spread to her lymph nodes. She will have to undergo some chemotherapy but nothing lengthy and too debilitating. We were blessed in many ways through this, and I wanted to share the importance of my Pankey experience on my personal ability to deal with my wife's illness. I do not necessarily believe in fate but the Institute was there at the right time for me. I was certainly ready to hear the message being delivered and was, and continue to be, receptive to developing that as it applies to me.

I was scheduled to continue with C2 at the beginning of January 2004, but I delayed going until the February 29th course so I could help my wife begin her chemotherapy. I also had to put a hold on the office changes as my attention was taken away in helping my wife make decisions and complete treatment. This week, I began to become excited about the C2 course and reapply my energies toward my office. Writing this letter was one of the things I needed to do as I get back on track.

Thank you for taking the time to read this. My time on Key Biscayne paid huge dividends in my life, and I'm sure will continue to do so. Please be sure to pass along my thanks and this letter to the many people who helped me begin my journey. The Pankey Institute has helped me see that it's never too late to change and grow for the betterment of one's self and patients. A heartfelt thanks is the most I can offer right now, but I plan to offer much more in the future.

Sincerely,

Dr. Robert W. Mier
Warwick, RI ■

oral health and in receiving treatment to improve and maintain it. I was back in the saddle and loving it!

However, late in October of 2003, my wife was diagnosed with breast cancer. She had been following a cyst for six years with a noted surgeon in our area through yearly mammogram, ultrasound, and needle aspiration. No changes were noted. My wife decided to have the cyst removed to get it over with and eliminate the need for annual biopsies. Her surgeon agreed, and a simple lumpectomy was completed. Four days later, we learned a tumor had been growing behind the cyst. It was determined to be a grade three, highly malignant growth of around 1.8 cm.

The first thing the surgeon said to my wife was that she had saved her own life. Needless to say, we were floored but our attitudes were positive. We know a lot of that was the result of the post-C1 discussions and changes. Our relationship was

Referral Champions

In the last few months, new participants reported that the following individuals referred them to the Institute. Thank you for your support and leadership.

Dr. Charles Anderson	Dr. Pete Dawson	Dr. David Jalkowski	Dr. Greg Miller	Dr. Deelynn Shattuck
Dr. Phil Ankrim	Dr. Don Erickson	Dr. Warren Jesick	Dr. Mark Murphy	Dr. John Shuffield
Baltimore VA Hospital	Dr. Leonard Fabre	Dr. Mary Ann Jurasic	Dr. Richard Pence	Dr. Frank Spear
Dr. Kathleen B. Barth	Dr. Mitch Farr	Dr. Jim Kincaid	Dr. George Platt	Dr. Charles Willis
Dr. Darin Becker	Dr. Peter Fay	Dr. Toby Kravitz	Pride Institute	Dr. Jane Young
Dr. Henry Bernstein	Dr. Matt Fluegge	Dr. Gerald Kugel	Dr. Russ Rainey	Dr. Joe Yalch
Dr. Lee Ann Brady	Dr. Peter Furnari	Dr. Angeline Lam	Dr. Chris Ramsey	Dr. Phil Zelmanow
Dr. Wayne Browder	Dr. Pat Garvin	Dr. David Latz	Dr. Alan Samuelson	
Dr. Steve Carstensen	Dr. Steve Hart	Dr. Scott Lawson	Dr. Michael Schuster	
Dr. Dayna Cassandra	Dr. David Hornbrook	Dr. Terry Max	Dr. Cordell Scott	
Dr. John Darling	Dr. Greg Jacobson	Dr. Mike McDevitt	Dr. Barry Segal	

One of the most romantic places in the world is St. Mark's Square in Venice, Italy. There is a popular television commercial from DeBeers, the diamond industry leader, that depicts a couple becoming engaged in the center of this timeless and ageless landmark. Known for its beautiful architecture and landscape, St. Mark's Square has become one of the most popular travel destinations in the world. Beyond the beauty and the romance, the square is renowned for one more thing: the pigeons.

I spent time in Venice this past summer. On a Sunday afternoon, the square is crowded with tourists from all over the world. People line up to get into the cathedrals and palaces, or they sit to enjoy gelato and cappuccino while music is played by formal orchestras with shiny brass instruments. Many people survey the shops that line the square, although most Americans these days are just looking at the extraordinary merchandise. All of these things have drawn millions to Venice. But I wondered what had drawn the pigeons to St. Mark's Square. The pigeons have become as much a part of this attraction as the shopping, the gelato and the palaces. But why here and not on neighboring islands Lido and Murano?

A Matter of Trust



By Barry Polansky, DMD Visiting Faculty, Cherry Hill, NJ
Publisher of *Dental Life* and Author of *The Art of The Examination*
(drbarrypolansky.com)

Scattered around the square I noticed vendors selling popcorn kernels. My first thought was of the commercialization of the Vatican that I had witnessed years ago. As I did back then, I thought to myself, "Is nothing sacred?" But after watching the tourists feed the pigeons, I realized that the abundance of these birds was only possible because they felt it was safe for them to be there. The vendors served a purpose, now another example of form follows function. In the days when Leonardo roamed the streets of Venice, I'm sure there weren't as many pigeons.

The pigeons are integral to the character of St. Mark's Square. Without them, I'm not sure if the romance would be there. I'm from New York. In the Big Apple pigeons have come to mean something entirely different than they mean in Venice. Public park employees

consider pigeons to be pests, not icons of romance. I was taught that pigeons carried disease, and my mother told me to stay away from them. I didn't learn to fear pigeons but I certainly learned to be careful around them.

The tourists in the square didn't seem to share this philosophy. People bought the corn from the vendors and stood in an open space, allowing the pigeons to eat out of their hands. It was a picture of mutual trust. People weren't afraid of disease or of getting their hands pecked, and the birds kept coming. Pigeons of all sizes and colors flocked to the square to be fed in a human aviary - a mutual admiration society.

At first I was skeptical, being a New Yorker, but I invested my one Euro and opened shop. At first I knelt down and fed a few of the ground dwellers. I gradually stood up with my hands spread out. In

seconds, the pigeons found me as a charitable statue. I imagined they were sending signals out to their brethren that they had found a goldmine of popcorn and love. I stood there for a while and let my wife take photos because I wanted to share this special moment with everyone back home. These are the things that make St. Mark's Square special and romantic.

I asked my wife to feed the birds, but she couldn't overcome her fear of avian flu so she just took the pictures instead of being part of the picture. Fear stymies. Trust opens doors. With trust, who knows what we can create.

I am reminded of the old phrase "Birds of a feather flock together." Many of us use this idea when we market our practices to get new patients of a certain ilk. But I couldn't distinguish between these pigeons. True, some were lighter, or darker, or bigger, or had speckles, or had sharper claws but all had one thing in common - they all had trust. They were taught to trust over the thousands of years the Italians held their hands out to these birds and silently said, "It's okay; come with me." ■

SEEKING

The Pankey Institute does not take responsibility for the outcome of any relationship you establish with any of the following Pankey participants. Make all contacts directly with the seeking practitioner.

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Gardnerville, NV: Dr. Richard Dragon (775-782-9755; rick@dragondmd.com)

San Diego, CA (willing to relocate): Drs. Michelle and Douglas McDonald (619-501-3203)

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Cleveland, OH: Dr. Jason Bienia (216-328-1841)

N. Virginia (McLean or outside beltway): Dr. Robert S. Wagner (703-298-3020; rswagner.prodigy.net)

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Continuum Level 1	\$3,390	May 1, 2005	May 15, 2005	October 30, 2005	October 16 - 18, 2005
Continuum Level 2	\$3,575	June 12, 2005	June 19, 2005		
Continuum Level 2E	\$3,690	July 10, 2005	October 2, 2005		
Continuum Level 3	\$4,390	August 14, 2005	November 27, 2005		
Continuum Level 3E/Esthetics	\$3,890	September 18, 2005			
Continuum Level 4	\$3,975	October 9, 2005		PANKEY SCHOLAR	TECHNICIAN COURSE
Continuum Level 5A	\$4,090	December 4, 2005		Group 4 Part B	August 21 - 23, 2005
Continuum Level 5B	\$4,090			May 23 - 24, 2005	
Continuum Level 6	\$4,290		CONTINUUM LEVEL 3E/ ESTHETICS	Group 5 Part A	IMPROVING CASE ACCEPTANCE (A TEAM APPROACH)
Masters Forum Week	\$4,775		September 25, 2005	August 22 - 23, 2005	June 1 - 4, 2005
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Dentist	\$3,150	May 15, 2005		October 30, 2005	July 31, 2005
Photographic Assistant	\$1,890	Jul 24, 2005			
Predictable Removable Prosthetics	\$3,890	August 28, 2005	CONTINUUM LEVEL 4		
Financial Management Level 1		October 23, 2005	June 12, 2005		
Dentist	\$3,290	November 27, 2005	December 11, 2005		
Financial Administrator	\$ 850				
Financial Management Level 2					
Dentist	\$3,550			INTERDISCIPLINARY LEVEL I	
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