



**SOUTHERN ASSOCIATION  
OF ORTHODONTISTS**

# SAO NEWS

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## SAO President's Message

Dr. Mark W. Dusek

# “SUMMERTIME!”

For many of us it is time to head to the beach. For those of us who live in Savannah, it is time to head to the mountains to try to escape the heat!

**We just finished a successful Miami AAO Annual Session. Dr. Ken Dillehay, now past president of the AAO, and the AAO staff did a wonderful job of pivoting from a meeting in Hawaii to South Beach, Miami, and managed to provide a fun and informative gathering.**

The House of Delegates session occurred during the meeting. In an effort to save money for our members, the delegates from the SAO proposed a resolution, ultimately approved, to have the CAP (Consumer Awareness Program) dues reduced by \$100 and make up the difference from AAO savings. I sincerely thank Robert Moss, our

delegation chair, and the other members of our delegation for volunteering their time and energy to help our specialty.

If you have not registered for the Austin, Texas 2022 SAO annual session November 3-5, PLEASE DO SO. There will be lectures and team building opportunities for both doctors and staff. Our theme for the meeting will be “Where Art Meets Technology”. Both the lectures and activities will reflect this theme. To capitalize on Austin’s reputation as the “live music capital of the world,” there will be live music throughout the meeting, both in the exhibit hall and during many events. Be ready to have some old-fashioned Western

fun at our Friday night event! I hope you and your team will join me for this fun and informative meeting.

I have enjoyed meeting and talking to many of you during my visits to the different state orthodontic meetings. I am currently working with our Executive Director to improve communication with each of our state component leaders and to develop ways to help the component leaders facilitate their annual state meetings. We want to make sure that the SAO is an active resource for our members at every level.

The merger with the SWSO (Southwestern Society of Orthodontists) continues to move forward. Please try to attend the SAO general business meeting on November 4th. At this business meeting there will be a vote to approve the proposed shared SAO/SWSO bylaws. The proposed bylaws will be available on our website under the membership tab. Thank you for your support. **I look forward to seeing you in Austin.**

Registration can be found on the SAO website: [saortho.org](http://saortho.org)



House of Delegates



Dr. Beth Faber, Dr. Mark Dusek, Dr. Jeff Rickabaugh  
AAO Miami



Dr. Richard Williams, Dr. Wanda Claro-Woodruff, Vaughn Woodruff



**T**his year the SAO is teaming up with our colleagues from the **Midwestern Society of Orthodontists and the Southwestern Society of Orthodontists for a combined annual session.**

**Our meeting in Austin, Texas takes place November 3-5, 2022, at the Hilton Austin.**

**Attendees will experience the unique vibe of Austin, from the edge of downtown where tech meets art, to the rough and tumble life on a historic Texas Ranch.**

There will be delicious Tex-Mex food and, of course, live music every day in the exhibit hall and at our parties.

Your registration fee includes access to the opening ceremony, exhibit hall and educational sessions, plus meals and happy hours that surround the core of the meeting.



**MSO, SAO & SWSO Annual Meeting | November 3-5, 2022**

Bringing the family or your team? We recommend you arrive Wednesday so you can take advantage of the activities, tours and experiences we have planned for Thursday morning: - enjoy a morning of Golf at Star Ranch, take The Real Austin Tour to discover what's unique about Austin, compete in The Ultimate Scavenger Hunt, or bring your legwarmers and neon for the Weird Workout 80s Party.

Fun for Friday morning includes goat yoga or a guided walk to the state capitol building. And Friday night we'll board buses and head out of Austin city limits for party at Star Hill Ranch, a picturesque historic old west town.



## AAO Trustee's Message

Dr. Richard A. Williams

**Flamingos, beaches, sand, water, great food, entertainment, great times with good friends; and in person! Miami was our first time back together on the national stage since 2019 in LA.**

All would agree that it was nice to be back face to face to conduct the business of the AAO, attend some great CE, visit vendors we haven't seen in a while, participate in some wonderful activities and especially to see friends we have missed for the last few years. The meeting itself was altered in so many ways by the cruelty of the pandemic in that we were all looking forward to Hawaii. Our fabulous meetings team, led by Libby Dischert, worked with the annual session planning committee assisted by CCON to pivot from an island meeting to Miami in less than a year's time. What we experienced was nothing short of a miracle.....and it all seemed so seamless.

Challenges still presented themselves with travel, especially for internationals. While attendance was down, it was still a profitable meeting with around 12,000 total attendees. There was a surprisingly high number of staff with us for this meeting.

A key member value, identified by our surveys, has been advocacy. Nathan Mick and Trey Lawrence, as well as our team of Andrew Wiltsch, Gianna Nawrocki, and Kathy DiPrimo, are tireless. They continue to monitor the landscape and work hard to be in front of key issues at both the federal and state levels. Dale Ann Featheringham, the Trustee Liaison to COGA/PAC for this past year, led a deep dive into what our needs will be going forward. We have always had an almost total focus on federal advocacy, however we have seen a seismic shift in recent years to state dental boardrooms and state legislative bodies and the effect they can have on important issues such as teledentistry. Cozen O'Connor, our team in Washington, DC, has positioned us well by leveraging relationships and connections they have built to put the AAO in front of key regulatory bodies and agencies. This has allowed our voices to be heard and to have influence on rule-making processes by critical testimony.

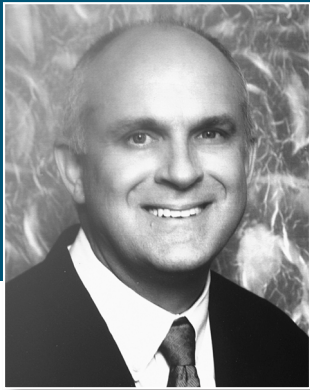
The AAOPAC will be revamped slightly to allow for contributions to be made by a larger audience and to have expanded opportunities to be in the conversations at the state level. This, in my opinion, will be critical to our future. Remember the old political axiom, "if you are not at the table, you might find yourself on the menu." Nathan Mick is working diligently to rebuild our giving and support network for our PAC. I encourage each of you to be generous with not just your financial support, but also with time and contacts as we engage the political processes that shape our specialty.

We are seeing continued success with the AAO/Wharton MBO program. We had discussions at our last meeting about what comes next because the thirst for this information has been overwhelming. This program assists doctors to be more successful in managing the business aspects of a practice. Each of the eight parts to the course has a faculty member from Wharton with the orthodontic application being presented by an orthodontist or someone knowledgeable from our specialty. TechSelect continues to expand as well. Mindi Brothers and the team from CTech continually evaluate new products that provide industry best pricing for items one would need to implement in house aligner fabrication.

One of the greatest challenges many of our members have faced exiting the pandemic is staffing. Many doctors have found themselves in a situation where staff have elected to retire or to not return. These problems leave huge voids in office teams. A Staff Shortage Task Force was formed and several recommendations were presented to the Board of Trustees at the post annual BOT session. Look for new training materials and recruitment tools to become available in the near future. These will assist practices in overcoming this immediate challenge.

Our board will continue to be focused on the "windshield and not the mirror" as we engage our new strategic plan. When you look at the caliber of young professionals in our residency programs, our future is bright. We will have challenges, but as we have always done, we will overcome them as long as we speak in a unified voice. This is why your membership is vital to our future. Thanks for the privilege to serve!

- Richard



# AAO House of Delegates Report

Dr. Robert Moss

## 122nd Annual Session House of Delegates | May 20-24, 2022

Long ago, in a LaLa Land far, far away, the 119th Annual Session of the AAO with its accompanying House of Delegates met, conducted business, and adjourned after installing Gary Inman as President. As we returned home, we looked forward to President Inman's meeting in Atlanta in 2020. Remember???

After shutdowns, the 2020 annual session cancellation, followed by the 2021 cancellation, we gathered in Miami for the first annual session in 3 years with a face to face House of Delegates meeting. It was hot, humid, and wonderful. Many people whom we had not seen in person since 2019 made the trip. The total attendance was just under 12,000, with almost 5000 orthodontists - a huge success! The lectures, exhibit hall and the House were all "alive" with activity. Your SAO delegation fulfilled our obligations to conduct the business of our association and had a lot of fun as well. Any down time offered the opportunity to enjoy one of the most beautiful beaches in the world.

The business of the HOD was conducted over 4 days, with the active sessions held on Friday and Monday. Although our delegation had only returning veterans, there were 7 who had only conducted HOD business virtually via zoom! Thirty resolutions, some with substitutes, were presented for consideration. When it all was over, our SAO resolutions, one

about block voting, the other to reduce the CAP assessment from \$600 to \$500, were adopted. Changes pushed by our delegation were adopted as well. We had a successful session. The Board of Trustees presented a budget of \$20,705,856, which was adopted for 22-23 or FY23. Our dues have been \$793 since 2012. In light of many economic factors, the HOD voted to raise dues by 3%, or \$24. Your next dues bill of \$817 will reflect this change.

Part of the business of the House of Delegates includes the pleasure of recognizing those who have served the AAO. It was an honor to thank Alex Thomas for her pioneer efforts as the first at-large Trustee in AAO history. Alex served a 2 year term; her dedication, leadership, and tremendous time commitment, all while starting a family, will set the bar high for future at-large Trustees. We also honored the memory of Albert (Buddy) Foy who served the Alabama association, the SAO and the AAO for many years. He served over a decade in the House of Delegates and was our delegation chair for most of that time. Buddy was instrumental in starting a process of collaboration among the delegation chairs which continues today. This process has tremendously streamlined the business of the house! We send our best to Buddy's wife, Linda, and their family. The HOD responded with a moment of silence.

In summary, it was great to gather face to face again!!! Our SAO delegation puts in many hours of preparation prior to the annual session, and, as always, it paid off. Thank you! We look forward to Chicago in 2023!

Respectfully submitted:

- Robert



## Congratulations Dr. Alex Thomas

In 2020 the AAO's "Virtual" House of Delegates adopted resolution 04-20DT that created At-Large Trustee positions. The AAO Board of Trustees immediately moved forward and filled two At-Large Trustee positions during the summer of that year.

**The Southern Association of Orthodontists congratulates our very own Alexandria (Alex) Thomas for being one of the first two people selected to serve as an AAO At-Large Trustee.** The Southern Association of Orthodontists offers heartfelt and sincere thanks to Dr. Thomas for her service, her exemplary leadership and the significant time commitment that she gave to orthodontics during her two-year term. The time commitment was a big sacrifice in light of the fact that she and her husband, Zack, welcomed their first child, Charlotte, into the world during her first year of service! Dr. Thomas served the AAO and its members with excellence. She created a very "high bar" for those who will follow her as an At-Large Trustee.

# The American Board of Orthodontics Report



Dr. Tim Trulove

## Help Lead the Specialty and Elevate the Standard of Care in Orthodontics as an ABO Director

### THE AMERICAN BOARD OF ORTHODONTICS

As a board-certified orthodontist, one may consider serving as an ABO director to help further the American Board of Orthodontics' Mission of promoting excellence in orthodontics.

The ABO is led by eight directors, each representing a constituent society of the American Association of Orthodontists (AAO). Members serve an eight-year term which culminates in installation as ABO president.

### WHO CAN SERVE

ABO directors must be ABO certified in good standing, with at least two years since initial certification. Candidates should exhibit leadership in orthodontic and dental organizations and/or orthodontic education, licensing boards and outside organizations, or by giving lectures or conducting scientific research. Potential directors must be engaged in full or part-time direct patient care and/or hold appointment as a full or part-time clinical faculty member in a CODA Accredited Orthodontic program.

Qualities sought for ABO directors include ability to think strategically and communicate effectively, willingness to prioritize the good of the organization over self-interest, ability to work collaboratively, and commitment to the highest level of integrity and ethics.

### THE NOMINATION PROCESS

The ABO director nominees are selected in consultation with the AAO constituent society which the new director will represent. One eight-year ABO director term is up for election each year. The opening rotates among the eight AAO constituent organizations. The new director elected in 2022 is from the Rocky Mountain Society of Orthodontists; the position up for election in 2023 will represent the Midwestern Society of Orthodontists.

During the year prior to the election, the constituent organization notifies its members of the upcoming open director position. All ABO certified members of the constituent organization who meet the required criteria, are eligible to submit his/her intention/interest for consideration. The constituent organization appoints a nominating committee and outlines a process for soliciting candidates, including a deadline for submitting names and curriculum vitae. By December 1, the constituent's nominating committee is asked to submit to the ABO a list of three to five eligible candidates.

From December through March, The American Board of Orthodontics studies the nominees' CVs. Each nominee submits a personal statement including areas of interest, qualifications, and the nominee's potential contribution to the board.

The chair of the constituent organization nominating committee is invited to observe as each nominee is interviewed by ABO directors. The ABO Board then makes a final decision on its nominee and submits this name to the AAO Board of Trustees.

Following approval from the AAO Board of Trustees, the AAO House of Delegates elects one new member to the ABO Board of Directors during the AAO Annual Session.

### ONE RECENT DIRECTOR'S EXPERIENCE

Dr. Valmy P. Kulbersh of Bloomfield Hills, Mich., was elected to the ABO Board in 2013 representing the Great Lakes Association of Orthodontists (GLAO). She served as ABO president in the 2020-2021 year. She was the first female orthodontist to serve as an ABO director and president.

"Due to my many years of clinical practice and involvement in academics, I felt I was qualified to be judged as a competitive candidate for the directorship position," Dr. Kulbersh recalled.

"The selection process was rigorous but fair and impartial. I was not intimidated by being the only female in the group of highly qualified interviewees, instead, I felt confident that I would be fairly evaluated because I could contribute to the mission of the ABO. When I was selected, I was humbled by the reception I experienced from the seated directors. I became part of a family where respect, encouragement, fairness, excellence, and ethical values were cherished."

She encourages other orthodontists to seek nomination to the ABO Board. "Any orthodontist who subscribes to the mission of the ABO, could certainly be considered as part of the ABO Board of Directors. If you could afford the time commitment, you will be rewarded with the utmost professional experience of your life. As past president of the ABO, reflecting on my years as ABO director, *if I had to do it again, I would not hesitate!*"

### NEXT STEPS

If you're interested in serving as a Director of The American Board of Orthodontics, please contact your constituent organization for details on its nomination process and when the next opening from your constituent will occur.

# American Association of Orthodontists Foundation



We invite all AAO members to support the foundation by making an annual donation.

The Resident Education Program was utilized by those orthodontic residents who attended the Miami meeting. The AAOF is supporting over 700 residents through this program in 2022.

The AAOF Awards Program approved 26 grant applications for funding in 2022.

The James L. Vaden Teaching Fellowship Award was given for the first time in 2022 to Shivam Mehta at Marquette University School of Dentistry.

## ONE PLACE, MORE OPPORTUNITIES FOR MEMBERS

Along with a new mission, the American Association of Orthodontists Foundation is now offering more opportunities for AAO members to get involved. In 2021, the AAOF welcomed the Donated Orthodontic Services (DOS) program and the Disaster Relief Fund (DRF) to its philanthropic umbrella so members can engage on multiple levels, all in one place.

The new mission, *"The AAO Foundation is to advance the orthodontic specialty by supporting quality education and research that leads to excellence in patient care, and by promoting orthodontic charitable giving."*

The AAOF's passion for education and research, will always be at the forefront of what it does. Expanding the mission statement and gaining two dynamic programs truly gives the Foundation new ways to move the specialty forward. Both programs, DOS and the DRF will bring diversification to the Foundation by adding volunteerism and a way of supporting our supporters, especially during times of natural disaster.

To learn more, visit: [aaofoundation.net/charitable-giving](http://aaofoundation.net/charitable-giving).

## DONATED ORTHODONTIC SERVICES IS LOOKING FOR VOLUNTEERS

DOS is looking for volunteers in the SAO constituent to participate in this program. We currently have 300 patients in active treatment with more on our wait list to be matched with our orthodontists. To learn about this program please visit our website. If you decide you are interested in volunteering or have additional questions, email us at [dos@aaortho.org](mailto:dos@aaortho.org).

## DISASTER RELIEF FUND

Did you know that the AAO Foundation has a fund just for orthodontists who have experienced a natural disaster and need support to get their practices up and running again? The Disaster Relief Fund supports our members if they end up in this type of situation. Please consider this option when you are making your annual charitable contribution, but also keep this in mind if you find yourself in this type of situation. We want to support those who are in need.

## AAOF AWARDS PROGRAM

Since the inception of the AAOF Awards Program, the AAOF has given back over \$15 million to the orthodontic specialty through research and education support. The grant proposals process has been moved to an online system and our review committee will consider applications for the 2022 funding cycle this winter and decisions will be shared in April. The AAO Foundation received 45 applications for funding in 2022. The AAO Foundation Board approved funding of 26 awards equaling \$409,425.

## RESIDENT EDUCATION PROGRAM

The AAO Foundation recognizes the importance of residents having the opportunity to experience an AAO Annual Session, and we support them through this program by offering a one-time \$400 incentive to offset expenses to attend the conference. At the 2022 Miami AAO Annual Session, over 700 orthodontic residents applied for this incentive. The AAO Foundation will be mailing their checks this summer. For more information about this program, please visit our website.

## REMEMBER THE AAOF IN YOUR CHARITABLE GIVING

Did you know that the AAOF can accept donations not only online, but via stock transfer as well? Please consider making a donation to the foundation in 2022.

We are still fundraising to complete the **Dr. Vaden Named Award**, so please consider supporting this award when you are making your 2022 charitable donations.

If you are interested in becoming a monthly donor, think about joining the **Century Club**. This is for donors who give a minimum of \$100 a month. You can sign up for this option on our website or by calling the office directly.

Also keep the AAO Foundation in mind as you create your estate plans. If you have the AAOF in your will, as a beneficiary on your retirement plan or life insurance, mentioned in your trust, etc. please notify the AAOF staff office so we can properly steward your donation as a **Keystone Society** member.

## FOLLOW US IN SOCIAL MEDIA

You can find the AAO Foundation in social media! If you have not already, please consider following us on Facebook, Twitter and Instagram. This is the best way to stay up to date on the happenings of the AAOF.

## FOR MORE INFORMATION

If you should have any questions or concerns, please contact Jackie Bode, AAOF Senior Vice President, at [314-292-6546](tel:314-292-6546) or [jbode@aaortho.org](mailto:jbode@aaortho.org). We look forward to seeing you in Austin this fall!



# SAO Component Director Spotlight

Dr. Celeste Block

“Throughout residency, I knew I wanted to ‘get involved’ with the SAO.”

I watched amazing leaders, Dr. Richard Williams and Dr. Jim Vaden, put their heart and soul into advocating for the future of orthodontics.

Their influence, as well as the influence of many others, made it easy to decide where I wanted to offer my time - the SAO.

When the Leadership Development Program applications were disseminated, I quickly applied. This was my opportunity to get involved. I soon realized there is so much more to the SAO than meets the eye. I encourage anyone who is interested in learning more about how organized orthodontics operates to apply for the Leadership Development Program. I volunteered to serve on the registration team for the SAO annual session in Orlando 2019. I was able to meet so many incredible orthodontists and leaders while serving with this group. After completing the Leadership Development Program, I became the Louisiana director to the SAO. During my time as director, I have had the privilege of being part of the meetings of the SAO board with the SAO executive board. Interacting with colleagues from other states has made my experience so meaningful. As a solo practitioner, it is always nice to check in with other colleagues from around the SAO to see how to handle

certain practice management issues or get an opinion on a case. It is also great to see familiar faces from residency! Not only am I excited to collaborate with the SWSO, but I am also thrilled that Louisiana will finally be whole! Our state has always been divided - some of it in SWSO and some of it in SAO.

The joint meeting with the MAO and SWSO in Austin, TX is going to be a great opportunity to learn and reconnect with friends. I encourage everyone to book flights early and clear schedules. The respective executive committees have worked tirelessly to create a meaningful meeting experience for everyone. You won't want to miss it!

It is a privilege to represent Louisiana as the LAO director to the SAO. I encourage anyone who has an interest in leadership to volunteer at a meeting or reach out to your state organization to see how you can begin your journey. You do not realize how much you miss by not getting involved. I wish everyone a safe and fun summer. See you in Austin!

## State Meetings



ALAO



SCAO



LAO



VAO



# Committee on Annual Meeting Planning

## Newly formed SAO/SWSO Committee on Annual Meeting Planning Seeks Nominations

The 2022 SAO and SWSO Board of Directors are issuing a call to members to consider joining the newly formed Committee on Annual Meeting Planning (CAMP).

**If you've been looking for a new opportunity to get involved-and if you are passionate about the value of continuing education through face-to-face meetings-this opportunity is for you!**

Working alongside SAO/SWSO Staff, CAMP members will ensure that all SAO/SWSO events engage and delight our membership, while providing the most advanced education available. CAMP members will directly impact the value of SAO/SWSO annual meetings, by making sure that all programming and content reflects the SAO/SWSO core values.

Any SAO/SWSO member with an interest in working on the SAO/SWSO annual conferences - or previous experience working on a conference committee - may be nominated (by themselves or others). Qualified CAMP applicants will provide meaningful insight and leverage their professional relationships to cultivate timely and relevant meetings and conferences.

If you are considering nominating yourself or another, here are some of the details you should know:

### **VOLUNTEER MEMBER COMMITMENT**

As a member of CAMP, volunteers will be asked to make the following commitments to the SAO/SWSO:

- Attend one 3-day, 2-night planning meeting in June/July of each year;
- Join conference calls as needed throughout the year, as schedule allows;
- All members shall attend the SAO/SWSO Annual Meeting annually during term of service;
- Perform functions on-site at each conference as specified by assigned sub-committee;
- Attend and provide feedback on other dental/ortho conferences as requested by Committee;
- Respond to emails in a timely manner;
- Participate in the post-conference meeting;
- Work directly with SAO/SWSO staff and other constituent committee members.

### **COMMITTEE MEMBER BENEFITS:**

In exchange for their service and depending on the assigned sub-committee, committee members will be eligible to receive the following benefits:

- Complimentary SAO/SWSO Annual Meeting registration and hotel accommodations at host hotel.
- Registration and Travel Expense Reimbursement when attendance at other dental/ortho conferences is requested by committee.

### **OTHER HELPFUL DETAILS:**

- Members of CAMP shall be selected based on their expertise rather than by component representation;
- Members of this committee will be selected so as to represent as many diverse demographics and viewpoints as possible;
- Members of CAMP shall be appointed by the SAO/SWSO Executive Committee;
- Members of CAMP shall serve for a term of 3 years, with a 2-term limit;
- Non-orthodontists who are active members of the SAO/SWSO community may be considered to serve on this committee;
- The first meeting of CAMP shall occur November 3-5 in Austin, TX

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### **HOW TO APPLY:**

Members who are interested in being considered for CAMP or in nominating a colleague, should **complete the CAMP Nomination Form**, found on the SAO Website, **by August 31, 2022**. Contact the SAO central office at 404-261-5582, or Lissette Zuknick, Executive Director at [lzuknick@saortho.org](mailto:lzuknick@saortho.org)



## American Association of Orthodontists Political Action Committee Dr. Ed Davis

**We have had a great 2022 start for the AAOPAC. Many members of the SAO have spearheaded the campaign to increase awareness of the PAC and have helped to support the initiatives the AAO has brought forward.**

years ago. I encourage each of you to help the AAOPAC by any means you can, whether it be with dollars or with your time. The AAOPAC needs your support. The more members we have who participate, the more of a united front we will have in Washington DC.

### **The AAOPAC, along with our advocacy team in Saint Louis, has worked hard for you.**

Over the past two years, the team has worked tirelessly to keep COVID restrictions that would have severely restricted an AAO member's ability to render patient care to a minimum.

In April, many members of the SAO met in Washington DC for the Advocacy Conference. Members met with their Congressional representatives to present the concerns of AAO members on both the federal and state level.

AAO's federal advocacy team has kept direct communication open with over 100 members of Congress and their staffs, thanks to the relationships generated with our AAO members and our advocacy team. Due to this direct communication, the advocacy team has influenced members of Congress to request that the Governmental Accounting Office (GAO), direct the Federal Drug Administration and Federal Trade Commission to conduct an investigation into the direct-to-consumer use of medical devices. The AAO advocates for oversight of patient health and safety for these DTC devices.

The AAO has successfully, with the help of the Organized Dentistry Coalition and the ADA, gotten the Ensuring Lasting Smiles Act (ELSA) through the US House. It is now being considered by the US Senate.

On the state level, the AAO advocacy team has been actively engaged in 22 states. Issues addressed include defense against mail-order orthodontic products that would negatively impact patient health and safety. Our team has also connected with over 15 state attorneys general to share consumer protection concerns about DTC health and safety. We must continue to increase our grassroots engagement. Our members need to interact directly with local governmental officials. On local and state levels we, through advocacy, can have a strong influence on policies for our organization and our patients.

SAO members have made significant contributions to the AAOPAC. We lead the AAO with both number of contributions as well as contributors. However, we are down in both categories over the last couple of years based on where we were a couple of

Each of you has a state leader who will reach out to you for your support. Please listen to him/her and help support AAOPAC in 2022.

The SAO is strong. We must stay strong. Help spread AAO initiatives by checking out Orthofacts.org, where you will find all the information you need to enable you to inform your state and federal legislators of patient care issues.

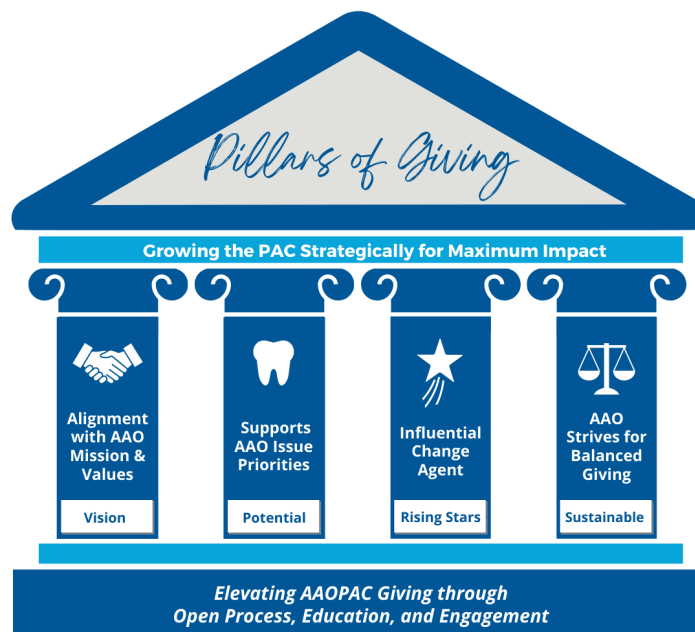
As we look forward to next year, AAO advocacy will tackle issues such as teledentistry, workforce training and shortages, small business initiatives and continued concerns relating to DTC treatment.

I must call your attention to our Advocacy team in Saint Louis. Tray Lawrence, our General Counsel, and Nathan Mick, Director of Advocacy, have worked tirelessly to make our AAOPAC very successful. Both are there to work for you. We owe these men our deep gratitude.

**To contribute to AAOPAC, please visit [AAOPAC.org](https://AAOPAC.org).**



**W**hile AAOPAC contributions do so much to help advance our advocacy priorities, the reality is less than 300 contributors currently shoulder the giving responsibility for nearly 15,000 AAO members eligible to contribute to AAOPAC. That is 2% of AAO members making a difference through advocacy for 100% of our specialty. We can all do more, and the stakes have never been higher. Join your AAO colleagues to contribute to AAOPAC.org now, adding your own value to help fuel advocacy work on your behalf!

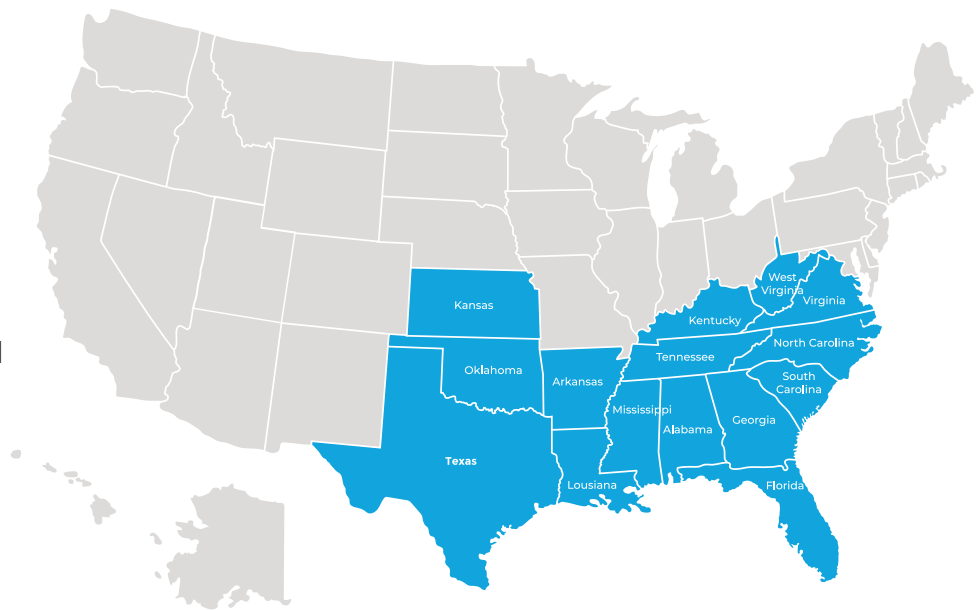


## Next Steps in the SAO/SWSO Proposed Merger

**Together with AAO leadership**, the SAO and the SWSO have recognized the need to adapt to changes in our profession. Over the course of the last several years (2019, 2020 & 2021), the AAO House of Delegates passed a series of resolutions that point toward a merger between the two constituents. We have received support from other AAO constituents that are considering using the blueprints of our merger process to engage in mergers themselves. All of us have a common goal of defining a strong and relevant AAO for years to come.

This document was created to give members of both organizations the information they need to vote on the next phase of the merger process, which is the approval of a blended bylaws document. This vote will take place at the joint Annual Session in Austin, Texas, during each constituent’s individual business meetings.

We encourage all members to come to Austin so you can attend the Annual Business Meeting of your constituent to vote on the revised merger bylaws. Both meetings take place on Friday, November 4, 2022 at 11:00 am.



*“All eyes are on our merger. It is critical that it succeed to assure the future of the AAO.”*

— Dr. Ken Dillehay

### Questions?

Leadership representatives will be available at the Austin meeting for questions and discussion prior to the vote. The SAO and SWSO merge task force chairman are available to answer any questions.



Dr. Dan Joseph, SAO  
henrystenth@yahoo.com



Dr. Kyle Shannon, SWSO  
shannonortho@mac.com

### Background on the Merger

- In 2018, Dr. Dan Joseph from the SAO and Dr. Kyle Shannon from the SWSO were selected to lead a group to study the merger, as they both had previously served on AAO government task forces.
- Drs. Shannon and Joseph selected representatives from each constituent to be part of the task force: Drs. Van Greer, Gayle Glenn, Clark Colville, Matthew Ng, Don Wilcoxon, DeWayne McCamish, Kim Reed, Chopper Snyder, Donald Balhoff, and Jeri Stull.
- The task force did a complete analysis of the operations and composition of each organization and made recommendations on how best to proceed with a merger.
- In 2019, 2020 and 2021, the AAO House of Delegates passed resolutions supporting various components of the prospective merger of the SAO and SWSO.



*“The need to restructure the AAO has been known for many years. The SAO/SWSO merger is a very important first step.”*

— Dr. Gary Inman

### Why Merge?

The AAO leadership is looking forward and has recognized the current constituent model needs revision. Multiple AAO governance task forces have failed to implement this change. Members from the SAO and SWSO decided a different approach was needed. The membership of the AAO is strong, but we must continue to work proactively to adapt to changes.

Remaining relevant to our members and making a difference in our specialty are timeless association goals. That has not changed. What has changed are new outside forces that influence how we practice, as well as advances in communications/data that affect not only our specialty, but all modern businesses and the member associations that govern them. By merging the SAO and the SWSO, we can maintain a stronger, more unified voice to ensure that our profession stays highly valued in the marketplace.

#### Outside forces affecting the marketplace:

- Variety of practice models
- DIY orthodontics and commoditization
- Insurance
- Regulations HIPPA/EMR/OSHA/Teledentistry
- Artificial intelligence
- Specialist distinction

#### Advances in communications changing how we engage with others

- Online networking and educational tools
- Vendor marketing/education

### How the Merger Would Impact The Individual Constituents: Increased Efficiency

Merging constituencies can lead to increased efficiencies in the following areas:

- Consolidated meetings means sponsors do not have to choose who to support. Experience has revealed that planning joint meetings of two independent constituents can be cumbersome.
- Consolidated administration expenses.

### How the Merger Would Impact Members

- **Networking:** Community and fellowship enhanced through increased meeting attendance.
- **Meetings:** New destinations and a more robust experience with combined resources to attract excellent speakers, provide enhanced entertainment and services. Elevated meetings can increase the number of attendees and attract more vendor support.
- **Component Support:** Improved communication between components, constituents, and the AAO.
- **Resources:** Consolidating our financial and leadership resources will allow for a rewrite of how a Constituent can serve its members.
- **Communications:** More resources for member communication through various platforms.
- **Advocacy:** We’ll continue to monitor state-level legislative and regulatory activities and partner with the AAO to ensure our members’ interests are served.
- **Increased leadership development opportunities:** Improving member communication, advocacy and programs will provide for expanded areas of leadership type and commitment levels.

### VOTE AT OUR ANNUAL MEETINGS

We encourage all members to attend your SAO or SWSO business meeting to vote on the revised merger bylaws on Friday, November 4, 2022 at 11:00 am at our Annual Session in Austin, Texas. For meeting information and registration, scan the QR code or visit us online at [saortho.org](http://saortho.org) or [swso.org](http://swso.org).

Scan for Annual Session Info and to Register:



# 2022 Resident Grant Summary

The Scientific Committee for the Southern Association of Orthodontists has completed its review of the 2022 resident grant applications. We are pleased to announce the following will receive a grant for their research efforts:

## GEORGIA SCHOOL OF ORTHODONTICS

Changes in alveolar bone height and width with various types of Orthodontic tooth movement in maxillary and mandibular molars: A systematic review (Dr. Timothy Moses, Dr. Nikki Sangha, Dr. Zainab Sharif, Dr. Adetola Adeniyi)

## UNIVERSITY OF FLORIDA

Artificial Intelligence to Detect External Apical Root Resorption (Dr. Samantha Montoya, Dr. Divakar, Karanth, Dr. Mateus Garcia Rocha)

Pain Response in T Cell Deficient Adult Rats Following Nerve Injury (Dr. Tyler Serres, Dr. John Neubert, Dr. Niall Murphy, Dr. Shannon Holliday)

3D printing of bone scaffolds using collagen matrix and their osteogenic potentials (Dr. Ruwa Irsheid, Dr. Shannon Holliday)

Evaluation of outcomes of periodontally accelerated osteogenic orthodontics in the mandibular anterior region using cone beam computed tomography: A pilot study (Dr. Hilury Ha, Dr. Calogero Dolce, Dr. Divakar Karanth)

## UNIVERSITY OF NORTH CAROLINA

Borderline Extraction Cases in Orthodontics and Second Molar Eruption Disturbances (Dr. Thomas Patrick, Dr. Kelly Mitchell, Dr. Laura Jacox, Dr. John Christensen)

Evaluating Changes in Speech for Class III Dentofacial Disharmony Patients after Orthognathic Surgery (Dr. Christine Bode, Dr. Laura Jacox)

Evaluating effects of animal assisted therapy on anxious pediatric dental patients using self-reported and objective physiologic measures of stress (Dr. Jacqueline Massouda, Dr. Laura Jacox, Dr. Eric Hodges, Dr. Kimon Divaris)

Commensal Microbiota as a Regulator of Epigenetics and Craniofacial Bone Remodeling (Dr. Joy Gerasco, Dr. Shannon Wallet)

"In Their Own Words": Families' Experiences with Tooth Autotransplantation for Replacement of Maxillary Anterior Incisors in Children (Dr. Beatrice Williams, Dr. John Christensen, Dr. Antonio Moretti, Dr. Kimon Divaris)

Evaluating Near Infrared Imaging (NIRI) in Intraoral Scanners for Interproximal Caries Detection (Dr. Adam Hoxie, Dr. Apoena Ribeiro, Dr. Kelly Mitchell, Dr. Angela Broome)

## UNIVERSITY OF TENNESSEE

Comparison of Orthodontic expansive forces of in-house clear aligners and slow palatal expanders: An in vitro study (Dr. Sierra Zarate, Dr. Ayman Aldayeh, Dr. Wanda Claro, Dr. Richard Williams)

## VIRGINIA COMMONWEALTH UNIVERSITY

Treatment Access and Outcomes for Craniofacial Care: Patient and Parent Perspectives (Dr. Benjamin Lowe, Dr. Bhavna Shroff, Dr. Steven Lindauer, Dr. Caroline Carrico)

Correlation between intraoral markers and risk of obstructive sleep apnea in children (Dr. Linda Powers, Dr. Eser Tufekci, Dr. Harmeet Chiang, Dr. Caroline Carrico)

## Motivations of Patients Seeking Orthodontic Retreatment

(Dr. Scott Philips, Dr. Eser Tufekci, Dr. Caroline Carrico, Dr. Parthasarathy Madurantakam)

A Long-Term Comparison of Orthodontic Pain Associated with Clear Aligners and Fixed Edgewise Appliances (Dr. Victor Chan, Dr. Vhavna Shroff, Dr. Caroline Carrico)

## WEST VIRGINIA UNIVERSITY

Cephalometric study comparing Class II patients treated with the Herbst and the MARA appliances (Dr. Mona Meky)

Anteroposterior (AP) and Superoinferior (SI) Displacement of the Maxilla and Mandible in Relation to the External Surface of the Forehead During Growth: A Novel Method of Superimposition (Dr. Adam Rudmann)

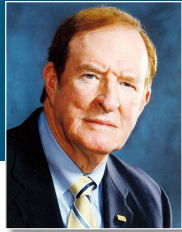
"Degradation of orthodontic elastomeric chains on exposure to e-cigarette JUUL aerosol: An in vitro study" (Dr. Joshua Lokant)

## UNIVERSITY OF ALABAMA

Nasal septum deviation in patients with or without impacted canines (Naurine Shah, Chung How Kau)

# In Memoriam

## Dr. Numa Watt Cobb, Jr.



On July 25, 2022 the Southern Association of Orthodontists lost one of its "Legends", Numa Watt Cobb Jr.

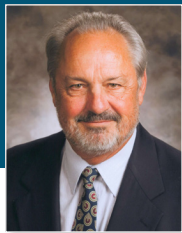
Watt, as he was know by everyone in orthodontics, was a role model, a mentor, a confidant and a "soul mate" to countless orthodontists. He was a "leader's leader" for many, many years. Watt and his lovely wife Carolyn were always at our SAO meetings where Watt could undoubtedly be found surrounded by colleagues who were eagerly listening to his opinion on an issue, enjoying a good story or looking at his latest pocket knife!

Watt served the specialty and the SAO as the SAO's Delegation Chair for almost 20 years. He was an "institution" on the floor of the House of Delegates during the annual meetings of the American Association of Orthodontists. His love for, and his service to his specialty are legendary. Orthodontics has lost a good man.



Scan this code to read Dr. Cobb's obituary.

## Dr. Albert (Buddy) Foy



The Southern Association of Orthodontists remembers with fondness and gratitude one of its most influential Delegation Chairs, Dr. Albert (Buddy) Foy who passed away recently from COVID complications. In 2009 Dr. Foy received the Southern Association's highest award - the Oren Oliver Distinguished Service Award.

Buddy served for many years as Delegation Chair for the Southern Association of Orthodontists and was responsible for organizing discussions between the Chairs of various constituent Delegations prior to and during AAO House of Delegate meetings. This practice of consultation between Delegation Chairs has proven to be of great benefit to the AAO's House of Delegates as its Delegates struggle with issues.

Dr. Foy is fondly remembered for a willingness to listen to opposing points of view and to seek common ground in order to reach the best decisions possible for the membership of The American Association of Orthodontists.

The Southern Association of Orthodontists offers its heartfelt condolences and best wishes to Buddy's wife, Linda, and their family.

# How Would YOU Treat This Patient?

**Dr. Timothy Shaughnessy**

A healthy 12-year-old boy presented for an orthodontic evaluation. He was referred by his pediatric dentist, who recently saw him for a dental emergency. The patient informed me that he “face planted,” resulting in significant fracture of tooth #8 and loss of crown form. I explained to this very clever boy with a fun personality that injuries like his occur more often when “your front teeth enter the room before you do.” With a wink and a nod, and that response, our relationship was formed.

Indeed, the patient’s chief complaint was his “protruding front teeth and overbite,” referring to his overjet. INITIAL records were obtained for comprehensive treatment planning and to quantify the characteristics of the overjet. Specifically, what percentage of the overjet is dental versus skeletal? If skeletal, which jaw is at fault? Or is it both?



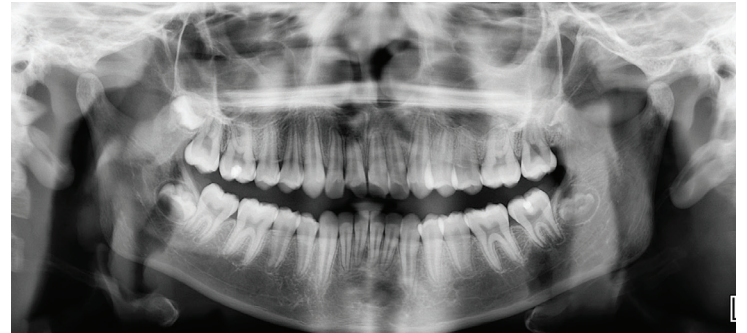
**Figure 1**

The INITIAL facial photographs (**Figure 1**) highlight this patient’s lip strain and mentalis muscle contraction with lips sealed. Both frontal and profile pictures in repose show the maxillary incisors making contact with the lower lip, interfering with resting lip competence. The maxilla is reasonably well positioned vertically upon smiling. The Class II profile appears to be due more from maxillary protrusion than mandibular retrusion.



**Figure 2**

The INITIAL intraoral photographs (**Figure 2**) reveal a Class II molar and canine relationship bilaterally, along with severe overjet. The maxillary incisors are mildly misaligned but obviously proclined. There is little crowding in the mandibular arch with a mild Curve of Spee.



**Figure 3**

The panoramic radiograph (**Figure 3**) reveals initial development of third molars in all four quadrants. Root length and periodontal support are within the range of normal. The patient’s restorative index is low, a reflection of regular dental care and good oral hygiene. The cephalometric radiograph, and analysis (**Figure 4a and 4b**) confirm a Class II skeletal relationship, proclined maxillary incisors, and normal vertical dimension relative to Frankfort horizontal (FH). The maxilla is protrusive, relative to both SN and Nasion perpendicular to FH. The mandible is measurably normal. The mandibular incisors are proclined, but less protrusive relative to A-Pogonion.



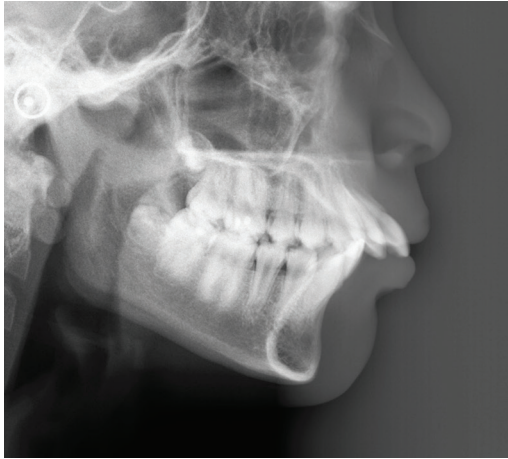


Figure 4a

Patient: N.V., ID: 1486E, Male, Age: 12y 0m (DOB: 6/6/2012)  
 6/6/2022 Initial Analysis: Shaughnessy 2 Norm: N/A

	Value	Norm	Std Dev	Dev Nor
SNA (°)	88.0	82.0	3.5	1.7 *
SNB (°)	79.6	79.0	3.5	0.2
ANB (°)	8.4	3.0	2.5	2.2 **
IMPA (LI-MP) (°)	104.1	95.0	7.0	1.3 *
UI - SN (°)	130.9	102.3	5.5	5.2 *****
Y-Axis (SGn-SN) (°)	65.3	67.0	5.5	-0.3
LI Protrusion (LI-APo) (mm)	3.0	2.7	1.7	0.2
SN - MP (°)	27.1	32.9	5.2	-1.1 *

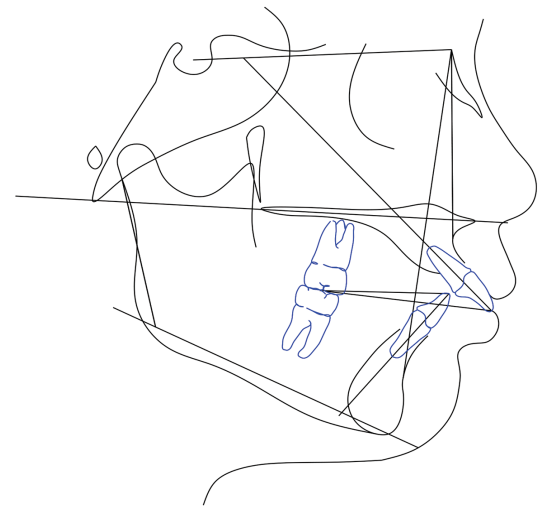


Figure 4b

## HOW WOULD YOU TREAT THIS PATIENT?

### TREATMENT PLANNING CONSIDERATIONS

The greatest priority is to retract the protrusive maxillary incisors. Is it necessary to extract teeth in the maxillary arch to accomplish this? Could posterior arch length be increased a satisfactory amount via a non-extraction approach to facilitate adequate anterior dental retraction, and Class I molar occlusion? Would the mechanics of this treatment negatively affect lower incisor position? If teeth are removed in the maxilla, should teeth be removed in the mandibular arch as well? This is a critical decision because it results in the need to obtain a Class I molar occlusion versus Class II. How does this change the anchorage requirements, the need for differential growth of the jaws, and patient cooperation? Furthermore, how might it change the treatment time, and the prognosis for achieving Class I canine occlusion and ideal overjet? Regardless of the treatment plan chosen, it was decided that the restoration of asymptomatic tooth #8 would be deferred until after orthodontic treatment. When considering the various options to achieve a functional, esthetic, and stable result, there are three other factors that should not be overlooked: predictability, time efficiency, and the need for patient compliance.

**OPTION 1:** Non-extraction treatment with headgear to promote differential anteroposterior growth of the jaws and maxillary molar distalization. Alternatively, some may opt for another technique to create space in the maxillary posterior segments, which could then be utilized for anterior dental retraction. The mechanics of any technique should ideally protect the mandibular incisors from proclination, if used for anchorage.

**OPTION 2:** Extract maxillary first premolars only and finish with Class II molars and Class I canine occlusion. Headgear worn at night, at least during the space closing phase of treatment, could be used for both anchorage and growth modification. Non-extraction treatment in the mandibular arch means that the lower incisor position will remain

approximately the same. On a positive note, the teeth are currently aligned and some would argue, in their most stable position-right where they start.

**OPTION 3:** Extract maxillary first premolars and mandibular premolars, either first or second, depending on preference. This option requires changing the molar relationship from Class II to Class I. The maxillary molar anchorage requirements become greater with this extraction option. Differential growth of the jaws will need to contribute to molar classification. If using a headgear, the patient will likely need to cooperate longer. Successful treatment would increase the likelihood of both lower incisor retraction and ANB reduction. On the other hand, failure to achieve Class I molar occlusion would increase the risk of incomplete overjet reduction and the corresponding occlusion.

### THE TREATMENT PLAN CHOSEN

.018 traditional twin brackets were placed on all of the teeth except the maxillary first molars, following the extraction of maxillary first premolars only. Bands with headgear tubes were placed on the maxillary first molars. This treatment plan provided two advantages. One, the maxillary incisors could be retracted most effectively with a space in the first premolar position. Two, a Class II molar relationship would be easier and more predictable to achieve than a Class I molar relationship as part of any other plan. The risk-reward ratio was considered to be the most favorable.

Round nickel titanium arch wires were used for initial alignment, followed by rectangular arch wires of the same material. A .016 x .022 stainless steel closing loop arch wire was used for maxillary space closure and I recommended supporting with extra-oral force. Cooperation was questionable. PROGRESS intraoral photographs (Figure 5) were obtained during space closure. .016 x .016 stainless steel arch wires were used in the finishing and detailing of the occlusion. Total time in orthodontic treatment was 18 months.

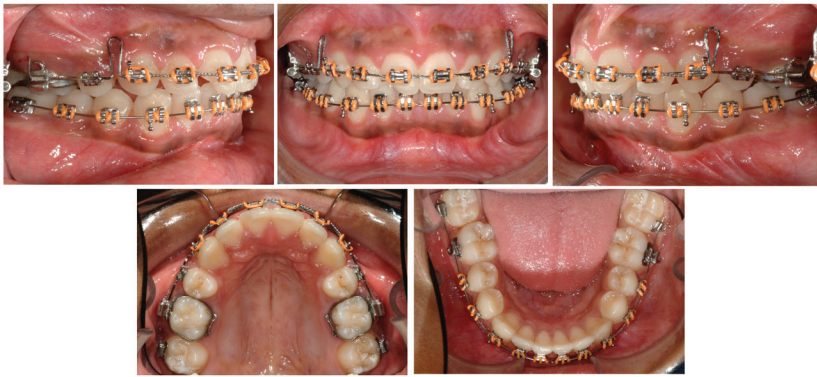


Figure 5

The post-treatment panoramic radiograph (Figure 8) shows good root parallelism across both extraction sites in the maxilla. Root quality and periodontal support appear to be similar after treatment.

The post-treatment cephalogram, its tracing and the cephalometric values (Figure 9a and 9b) reveal significant retraction of the maxillary incisors and correction of the excessive overjet. The pre-treatment/post-treatment superimposition (Figure 10) confirms that dental movement contributed most to overjet reduction. There was a smaller amount of skeletal change.

The FINAL facial photographs (Figure 6) illustrate an obvious improvement in lip competence. The nose-lip-chin balance is more pleasing as well. The lips were retracted, but not an excessive amount. The nasolabial angle now appears perfectly normal. The FINAL intraoral photographs (Figure 7) show good alignment of teeth, Class I canine occlusion bilaterally, and ideal overjet and overbite. Tooth #8 will be restored in a presumably safer position. Removable retainers were provided in both arches for nighttime wear.

YOU may have treated this patient differently, and that is completely acceptable. This case report is presented to illustrate one way and to highlight the rationale for that choice. I rejected non-extraction treatment of the maxillary arch because of my desire to predictably and efficiently retract the maxillary incisors the targeted amount. Extracting teeth in the mandibular arch was the more difficult decision. Ultimately, I placed greater emphasis on the clinical characteristics rather than a single measure of lower incisor position. Increased crowding in the mandibular arch would have tipped the scale toward the four premolar extraction option, as would have a greater component of mandibular deficiency. The maxillary molar anchorage demands would have been greater, along with the need for differential growth of the jaws in achieving Class I molar occlusion and further reduction in the ANB angle.



Figure 6

Would it have been better to extract teeth in both arches? Could this have resulted in a more measurably ideal lower incisor position, greater mandibular projection, and increased skeletal correction? Maybe, but we will never know. The increased risk caused me to select the actual treatment plan.



Figure 7



Figure 8



Figure 9a

Patient: N.V., ID: 1486E, Male, Age: 12y 0m (DOB: 6/6/2012)  
 6/6/2022 Initial Analysis: Shaughnessy 2 Norm: N/A

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SN - MP (°)	27.1	32.9	5.2	-1.1 *

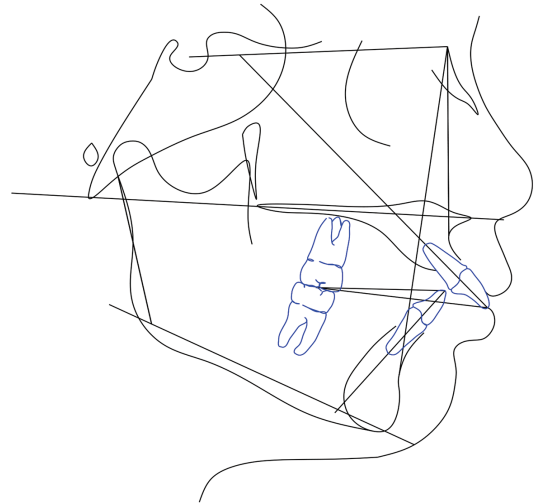


Figure 9b

1. Digitized Lateral Ceph, (6/6/2022), Initial  
 2. Digitized Lateral Ceph, (6/6/2022), Final

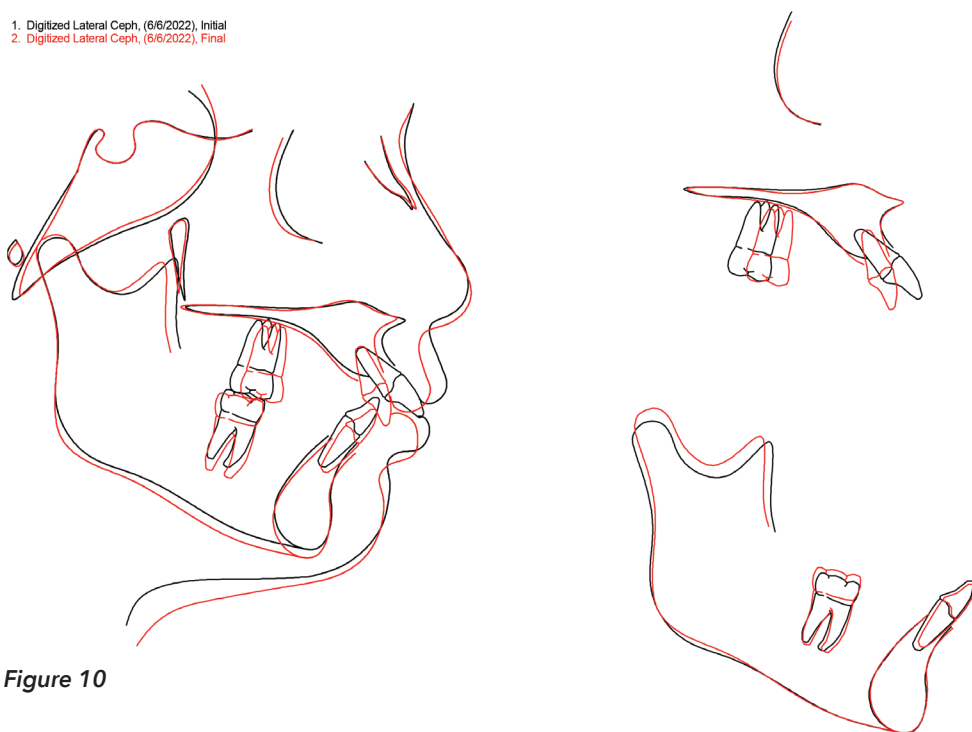


Figure 10



**2022**  
MSO/SAO/SWSO  
Annual Session

Nov 3-5, 2022  
Hilton Downtown  
Austin, TX

MSO  
SAO  
SWSO

*Austin*  
TEXAS

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