

Alumni Bulletin

INDIANA UNIVERSITY
SCHOOL OF DENTISTRY

JANUARY, 1957
INDIANAPOLIS, INDIANA

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A free and non-profit bulletin issued by Indiana University School of Dentistry, Indianapolis, Indiana, for the purpose of keeping its alumni informed of the activities and progress of the School.

Maxillofacial Prosthesis

*By Joe Gordon White, Assistant
Professor of Prosthetic Dentistry*

During the past year the complete denture department at Indiana University has been called upon by the physicians and surgeons of the Medical Center to construct many forms of maxillofacial prosthesis. This is a relatively new phase of prosthetics.

Maxillofacial prosthesis is that branch of dentistry which deals with the artificial replacement of missing parts of the face and jaws. There are two types, the extraoral and the intraoral. Causes of these deformities are: (1) accidents, such as, automobile, industrial, or gunshot wounds, (2) surgical removal of tumors, (3) diseases, such as, syphilis and tuberculosis, (4) congenital deformities, such as, cleft palates.

The extraoral type should be surgically reconstructed as a first choice of treatment. When surgery is contraindicated because of age, the condition of the patient, the extent of the deformity, or the condition of the surrounding tissues, an extraoral prosthesis is indicated. A prosthesis is indicated also as a temporary measure during surgical procedures.

The intraoral type makes up the majority of cases seen in our clinic. The increased knowledge and early detention of various tumors and their removal have created major problems for the prosthodontist. Prosthesis to restore function, esthetics, and speech are most difficult where a hemimaxillectomy has been done. Six such cases have been successfully treated this year. This type of surgery removes the tumor intact with the maxilla to the midline. If extensive, part of the zygoma, orbital floor, or even the orbit are also removed to prevent recurrence. When it is known that tissues have to be removed because of disease and must be replaced with mechanical means, the prosthodontist should be con-

sulted prior to the operation. In this way a treatment plan can be formulated whereby as many teeth can be maintained as possible to be used for retention, or anatomical parts retained such as the soft palate which would aid the prosthodontist to construct a more satisfactory prosthesis.

To better understand the problems created by this type of surgery, the following case history of our first patient is presented.

Case History A. In November of 1955, a white male, age 65, came to the Oral Diagnosis Department to be examined for new dentures. He had been edentulous for the past twenty-five years and had not worn dentures for the past three years. The patient complained that the upper molar area had been sensitive for the past two or three weeks. The entire molar area was swollen (Figure 1). The area was of normal color, but there was a whitish patch on the soft palate. X rays showed a radiolucent area in the molar region. A biopsy was performed and diagnosed as a moderately differentiated epidermal carcinoma, probably of maxillary sinus origin. A hemimaxillectomy was performed by the surgeon at Long Hospital (Figure 2).

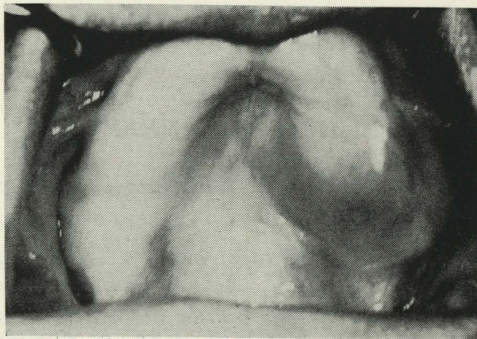


Figure 1

Enlarged area of maxilla

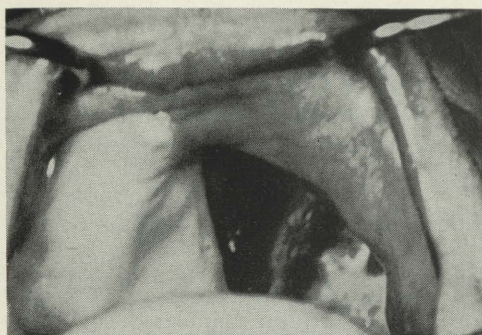


Figure 2

Defect after hemimaxillectomy operation

Prosthesis was begun about six weeks later. On examination at this time the patient's mental attitude was one of extreme depression. Nasal phonation was present and the patient could not be understood. Foods and liquids passing uncontrolled from the mouth into the nasal cavity caused embarrassment and great discomfort to the patient. The first appointment consisted of gaining the patient's confidence while studying the problem of how to construct the prosthesis. Since there was no established method of obturator prosthesis construction to be found in the dental literature, experimentation was necessary.

In order to determine the size and shape of the defect, an impression was made. This was done by injecting alginate into the latex matrix placed in the defect. From this a stone mold was made and the defect was roughly about the size of a lemon. From this mold a trial obturator was constructed of clear acrylic. Severe undercuts both medially and posteriorly would not permit this obturator to go to seat in the mouth. At the present time the impression of the defect is one of the last steps in obturator construction.

A compound primarily impression of the mandibular arch and a compound primary impression of the maxillary arch, including the area of the defect, were made. Primary plaster casts were poured and acrylic secondary trays were constructed. The mandibular tray was muscle trimmed with compound and a

rubber base secondary impression was made. The maxillary tray was built up with equalizing wax into the area of the defect. A rubber base secondary impression was made of the defect and the maxillary arch. These impressions were boxed and poured in stone.

Vertical dimension was not a problem with this patient; however, since then we have found patients with longer postoperative times have a tendency toward a closed vertical dimension. Often exercise must be prescribed in order to gain sufficient opening to even insert an impression tray. One such patient had a maximum opening between the arches of only 10 mm. Exercise increased this to 25 mm.

The vertical dimension was established and the casts were mounted on a House articulator. Plastic teeth were selected. It was decided to use sub-occlusal type repellent magnets as a further aid to retention. The teeth were tried in the mouth and the centric relation was checked at this time.

Since the area of the obturator was to be hollow, this area was blocked out on the mold with plaster to the level of the denture base. The waxed dentures were flaked and processed in the usual manner. They were remounted on the articulator and the occlusion was refined to permit the magnets to have maximum repellent force. The area of the obturator was lined with a fast setting type acrylic and fused to the denture in one operation (Figure 3). The dentures were then

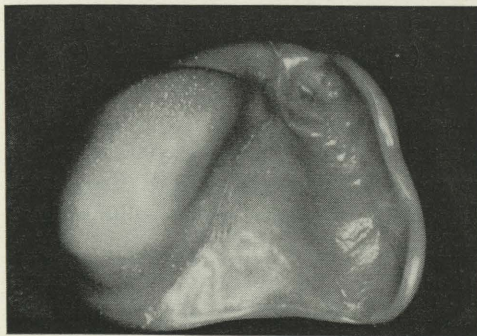


Figure 3

Palatal view of maxillary obturator

(Continued on page 27)

Dean Hine reports that...

It will be of interest to alumni to know that plans to enlarge the dental school are now almost completed. Actual construction of the addition can start in the spring of 1957 if the state legislators make the necessary funds available. This building will make it possible for the size of the dental classes to be increased at least to 90 when desirable. It will also make instruction for dental specialties, larger dental hygiene classes, and increased volume of research. To assist in the construction for increased teaching activities, the University has been given approximately \$127,000 to supplement funds used for construction and \$23,000 a year for five years to expand the graduate teaching program. Members of the faculty of the dental school have also been given many research grants.

Two Fulbright scholars have been assigned to the dental school this year who are working in the department of dental materials: Dr. George Mumford, Lecturer in Operative Dentistry at the University of Sydney, Australia, and Dr. Takao Fusayama, Assistant Professor of Operative Dentistry at Tokyo Medical and Dental University, Tokyo, Japan. Other foreign graduate students include Drs. Hector Davila (crown and bridge) and Rafael Nadal (operative), who plan to return to Puerto Rico to teach in the new Puerto Rico dental school; Drs. Alegria Zita (Philippines), Souad Kasri (Syria) and Sudarshal Mangi, Rasmikant Mehta and Govind Shankwalker from India. The three men from India were recommended to us by the dean of one of the dental schools in India who wishes to have these men return to assist in teaching in his school. Dr. Mohammed El Tannir finished his graduate work and returned December 28 to Egypt.

Members of the Class of 1956 were kind enough to give a fairly substantial

sum of money to the dental school at the time of their graduation, to be used to build a sidewalk running from the parking lot to the building and to extend the paging system to "Bea's." These two projects have been completed; the sidewalk includes some ceramic tile arranged to spell out "Class of 1956" and the loud speaker has a sign on it "Gift of Class of 1956." We wish to acknowledge these gifts publicly and thank members of the class for their cooperation.

Alumni going to the Chicago Midwinter Dental Meeting will want to visit the Alumni Association's headquarters room in the Conrad Hilton Hotel. The room will be the same as last year—553A—and will be open from 10 a.m. until 6 p.m. February 3 to 5. A luncheon is being planned for Tuesday, February 5; all interested in attending please come to the Headquarters room sometime Monday, February 4 and pick up a ticket. Last year the luncheon room was overcrowded so attempts are being made to get a larger room this year. Why don't you write your classmates and tell them you will meet them there?

Visitors to the campus during the Christmas holidays included John Buhler (Class of 1935), Dean of Emory University School of Dentistry, and Sumner Pallardy (Class of 1923), Chairman of the Prosthetics Department of Temple University. These visitors enjoyed reminiscing on the dental school program as they knew it as undergraduates and later as teachers. One of the chief topics of discussion was that which always crops up when dentists who were graduated from Indiana University School of Dentistry prior to 1948 get together. We refer, of course, to Dr. J. L. Wilson, Chairman of the Operative Department, who retired in 1948. Dr. Wilson's former students all remember him as an exacting teacher with

a personality all his own. It occurred to us that it might be worthwhile to collect some of the many incidents associated with Dr. J. L. Wilson and his teaching. His former students are invited to send to the Dean "stories" involving Dr. Wilson. Please do not "edit" stories sent in, as we wish to have them include the original language as nearly as possible. We recognize that some editing would have to been done before some of the stories could be printed! This can be done later.

Incidentally, Dr. J. L. Wilson is confined to his home, 940 North Campbell Avenue, Indianapolis, since his health is now quite poor. We know he would appreciate cards from his former students.

We are pleased to announce the following additions to our faculty this year:

Dr. L. Rush Bailey, who returned from the University of Alabama to join our Prosthetics Department.

Also joining the faculty full-time this year is

Dr. John R. Mink, who is teaching in Pedodontia.

The following part-time appointments were also made:

L. D. Adams (Oral Surgery)
 J. J. Baldwin (Orthodontia)
 R. W. Barnett (Oral Diagnosis)
 Elizabeth Keck (nee Gilchrist) (Dental Hygiene)
 J. E. Matthews (Operative Dentistry)
 R. E. Rothhaar (Pedodontics)
 Phyllis Wolf (Dental Hygiene)
 D. R. Miller (Pedodontics)
 K. C. Dole (Periodontia)
 Joan Ferber (Dental Hygiene)
 J. H. Koby (Dental Anatomy)
 D. B. McClure (Pedodontics)

Additional display cases have been purchased for the first floor hall and are now being filled with material of historical interest. Alumni who have old dental instruments or other such material are invited to send them in. When possible they will be displayed with the name of the donor. We are particularly interested in receiving material associated with the

development of casting. We know there are many (including the father of the Dean, C. L. Hine, Class of '05) who were casting inlays before the popularization of the Taggart process. We are desirous of having copies of licenses issued by Dr. Taggart allowing dentists to use his process, and other items reminiscent of this era.

Indiana University School of Dentistry Alumni Association Officers

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The Dental Hygienist—Her Role in Private Practice*

By A. Rebekah Fisk, RDH, BS., Director of Dental Hygiene

In September, 1956, the seventh class of dental hygiene students was enrolled and started on its way toward the completion of the requirements of the Dental Hygiene Curriculum.

The philosophy underlying the development of the dental hygiene profession has been dentistry's need for an aide who can relieve the dentist of the tedious, time-consuming service of the removal of calcareous deposits and stains from the surfaces of the teeth thereby leaving him with more time to perform those restorative procedures commensurate with his education. Although the need for this type of worker was recognized around 1900, when the attention of the dental profession was being directed more toward prevention than the relief of pain, it was not until 1913 that any attempts were made to organize schools for dental hygienists or to legalize their practice. Neither was there a census of opinion as to what education this worker should have nor just how much responsibility she should be allowed to assume. The educational programs that were started were planned around local ideas, were terminal in nature, and inadequate to meet the needs of the graduates.

There is a vast difference in the educational programs as they are today and what they were forty years ago. The changes that have been made are the result of demands exerted by several groups. Graduate dental hygienists requested a broader education that would help them understand better the work of the dentist, in order to be of more service in the private dental office; that would give them a better background to work in schools; and that would provide a foundation for education beyond the dental hygiene certificate. The dentists wanted

dental hygienists who would be proficient in taking and processing dental radiographs, and who would have a working knowledge of dental materials. The state boards, by requiring graduation from schools, and by adding new areas of examination were also instrumental in bringing about changes. Last but by no means least, dental projects based on the latest research, particularly in areas of caries prevention, have not only brought about changes in programs but also contributed to the growth of the dental hygiene profession by creating new areas of practice. Since the dental hygienist was designated in many areas as the logical person to apply sodium fluoride to children's teeth, there was a phenomenal increase in the demand for her services.

In the past five years more new schools for dental hygienists have been started than existed prior to that time. Until 1949, each school met the needs of its graduates in its own locale with no consideration of what the need might be across the state line. Finally, the American Dental Association became interested in the problem and directed its Council on Dental Education to start an analysis of dental hygiene schools. The Council in cooperation with the American Dental Hygienists' Association held a series of workshops which eventually brought about concentrated effort on the part of all schools to direct the major emphasis of their teaching programs toward the same objectives. As a result, the curricula in most schools have now become more standardized without becoming stereotyped and inflexible. This was accomplished by the agreement of all schools to basic curriculum of minimum course content and clock hours in specific subject matter areas which became the founda-

* Read before the meeting of the Indianapolis Dental Society, January, 1956.

tion for the "Requirements of the Council on Dental Education of the American Dental Association for Accreditation of Schools for Dental Hygienists."

In order to understand what the dental hygienist can do in a dental office one must have a knowledge of what her education *prepares* her to do and what the law governing her practice will *permit* her to do. The objectives of the healing arts whether they be thought of in relation to professional or auxilliary personnel, are essentially the same, the diagnosis, treatment, and prevention of disease states. The classical pattern for the education of all health workers presents courses in anatomy, physiology, pathology, microbiology and pharmacology. The depth of the course content is contingent on the amount of responsibility the worker is authorized to assume on graduation. For the dental student, emphasis in these courses is placed on factors involving the head and neck. Since the dental hygienist is to work with the dentist, it is logical that her education should approximate that of the dentist and that her intellectual capacity and social background are similar.

Since patient education is an important responsibility of the dental hygienist she should be cognizant of the principles of learning, the methods to be applied, the availability of visual aides, and be able to express herself in both speech and writing. As her patients will be from all age levels and from all walks of life, she must be able to understand and get along with people and be familiar with the social forces that affect the environment of the classes. Most schools meet these objectives through liberal arts courses of the specific departments of the college or university in which the dental hygiene school is located. The inclusion of additional liberal arts courses is desirable but not feasible in the two year program. For this reason at Indiana University we urge that applicants take a year of prescribed work in college before entering the professional school if possible.

Basic science courses are taught at the freshman-sophomore college level and are usually accepted for degree requirements for the students who desire to pursue their education beyond the certificate in dental hygiene. The objectives of the basic science courses included in the accreditation requirements are:

Dental Anatomy: To teach the growth, development, form, function and terminology of the teeth and environmental tissues with emphasis on those details which are associated with prophylactic technic and the identification of teeth and less emphasis on those concerned with restorative dentistry.

Anatomy and Physiology: To provide the student with a basic understanding of the structure of cells and tissue, with particular reference to the teeth and related structure including the embryological development of oral tissue; to provide understanding of the normal morphology and function of the body in such a way that it can be applied in the intelligent recognition and prevention of oral states and to motivate students to acquire and critically evaluate scientific information.

Chemistry: To teach the fundamentals of chemistry which will prepare the student for the study of other basic sciences; and to equip the student with the normal, abnormal biochemical aspects of the mouth in particular and the body in general so that she may better understand the physiological processes underlying disease.

Nutrition: To provide a knowledge of basic food elements in relation to proper diet for maintenance of normal health of adults and children; and the formulation of dietary procedures for the control of oral disease.

Microbiology: To provide the student with an understanding of certain basic and universally applicable principles of bacteriology such as antigen antibody reactions, immunity, and the nature of common infectious diseases and methods of prevention.

(Continued on next page)

General and Oral Pathology: To provide a general knowledge of the more common diseases affecting the human body, to develop the ability to differentiate between normal and abnormal tissue, to provide a knowledge of physiologic and pathologic changes which affect the supporting structures of the teeth and the ability to recognize lesions of the hard and soft structures of the oral cavity.

Pharmacology: To provide the student with a general knowledge of the action and uses of drugs, the theories of anesthesia with emphasis on those used in dentistry.

Poor health: To develop an understanding of the place of the dental hygienist in the total public health program.

Radiology: To provide knowledge of the techniques of radiology, to develop skill in the operation of the X-ray machine, in the processing of pictures, and to develop ability to interpret pictures.

Dental Materials: Was not included in the basic program as a required subject to be taught in schools for dental hygienists. There has been considerable controversy over how much the dental hygienist need to know about them. At Indiana, we follow the middle of the road. It is our objective to first acquaint the hygienist with the basic properties and behavior of various dental materials so that she may intelligently discuss clinical problems and manifestations with the patient and the dentist and interpret the literature; and second to familiarize her sufficiently with the actual manipulation of the material so that she can serve if required or in an emergency as a dental assistant or train the new dental assistant. In most cases, she will not have had sufficient practice to carry out these manipulative procedures perfectly at first, but she should be familiar enough with the fundamentals involved that the exact minor details can be given by the dentist. It is our feeling that a great amount of time should not be spent

in laboratory procedures that the hygienist will never be required to use, but instead the course should provide her with a thorough knowledge, and appreciation, of all materials with which she will be coming in contact.

Dental Prophylaxis Technic: To develop skill in the removal of calcareous deposits and stains from the surfaces of the teeth above the gingival attachment and in polishing the teeth. This skill requires manual dexterity which is developed in a technic course in which the student receives instruction and practice in the proper application of scaling and polishing instruments to remove simulated calculus and stain from the surfaces of the teeth of a dentoform which is supported in a bench manikin with an aluminum head. The importance of the use of fulcrum points and the necessity for the use of extreme caution when working on the soft tissues of the mouth and posture at the chair are stressed. Opportunities to transfer the knowledge and skills learned in preclinical courses are afforded the student in assignments in the pedodontia and adult clinics, the oral diagnosis, oral surgery, and radiology departments, in the children's clinic of Riley Hospital, the dental clinics of Long and Indianapolis General hospital and in a community dental health program which is under the Dental Division of the State Board of Health.

Since the practice of the dental hygienist is prescribed by law, it seems appropriate to review the permissive aspect of their practice. The legal provisions for their practice stipulate that they must be a graduate of recognized schools for dental hygienists, that they are licensed to practice only under the supervision of a licensed dentist, that there are specific limitations of their practice and that they have responsibilities relative to registration and exhibition of the licensing certificate. According to the Indiana Dental Hygienist Law, I would interpret Section

II, page 8 as permitting the dental hygienist to:

1. Remove calcic deposits or accretions from the surfaces of the human teeth, to clean and polish the teeth.
2. Remove rough or overhanging margins or fillings.
3. Make instrumental examination of the patient's teeth.
4. Chart the results of such examinations and findings.
5. Make X-ray pictures of the teeth and jaws.
6. Apply and use within the patient's mouth such antiseptic sprays as her employer dentist may direct.
7. Assist in the administration of general anesthetics.
8. Engage in any of the practices within the oral cavity that are included in the curricula in recognized schools of dental hygiene.

It was not until 1951 that all states and two territories of the United States licensed the practice of the dental hygienists. There are many variations in the statutes. Some of the laws passed when the profession first started limit the practice of the hygienist to the extent that her usefulness is negligible *if she practices according to a strict interpretation of the law*. In some states she cannot take X rays or apply sodium fluoride and must limit her scaling and polishing procedures to the anatomical crowns of the teeth. The Indiana law permits the use of a dental hygienist at the maximum productivity commensurate with her education.

Dental hygienists have the same responsibilities as dentists with regard to the annual registration of the license and display of the Certificate of Qualification in all states and territories. In Indiana, in addition to the qualifying certificate, the dental hygienist must display an office permit designating permission for her to practice in a specific situation and bearing the signature of the employer dentist or institution. If the hygienist desires to

change her employment to another dentist or institution, the old office permit must be returned to the Secretary of the Board and a new permit secured. Indiana is one of a few states requiring the office permit in addition to the registration certificate.

Traditionally, the dental hygienist is identified with dental prophylaxis in its limited aspect of the removal of calcareous deposits and stains from the surfaces of the teeth and the instruction in the home care of the mouth. Coolidge and Hine, in the 1955 edition of their book, "Periodontia" define prophylaxis as, "A combination of the exercise of preventive treatment of dental disease combined with the treatment of the early symptoms of the same disorder. It is a routine, planned treatment at regular intervals to observe, record, check and correct the beginnings of caries, gingivitis, and periodontal disturbances. It is certainly of greater significance than simple scaling, removal of stains and polishing the teeth, or in the common vernacular "cleaning the teeth".

From this review of the objectives of the education of the dental hygienist and the legal requirements of her practice, it is obvious that she is neither educationally prepared nor legally qualified to assume responsibility for all the procedures now identified with the prevention of dental disease symptoms with the *new* concept of prophylaxis. But, as a member of the office team she can assume many responsibilities which avail more time for the dentist to spend in restorative work which will produce an increase in service to the patient and greater income for the office.

In summary the dental hygienist is prepared by her education and permitted by law to assume the following responsibilities in a dental office under the supervision of the employer dentist:

1. To inspect the patient's mouth and to note on a record gross deviations from normal but not to diagnose or discuss with the patient any abnormal condition.

(Continued on page 30)

Annual Alumni Meeting Held At Bloomington

The Indiana University Dental Alumni Association held its twelfth annual fall conference on the Bloomington campus November 2 and 3, 1956. The officers and directors arranged an outstanding array of events for the week end, including both entertainment and scientific programs. They were very disappointed in the attendance, though. This may have been due to the later date of the meeting than the one last year. The officers and directors are considering every possible view to apply to their lively, efficient methods to get at the heart of this problem. They would welcome any suggestions from all alumni. As Billings said, "Silence is one of the hardest arguments to refute." There is another saying, by Edda that pertains to this meeting, "Go often to the house of a friend lest weeds choke the path."

Dr. Douglas White, the Alumni president, can hold his head high, because it was a meeting that had color, charm, humor, wit and scientific knowledge. He deserves special thanks for all his efforts.

All of those who participated in the program—Mr. Allen, the athletic director, Bernie Crimmins, the football coach, Professor Breneman, Mrs. Carl G. F. Franzen, Dr. O. M. Dresen, Dr. Joseph Volker, Mr. Clarence Walker and the Belles of Indiana—deserve special thanks and recognition.

This is the first year that the Association had a combined meeting with the ladies. Everyone on Friday afternoon was impressed with Professor Breneman's lecture on "Kalamazoo to You", and the beauty and wonderful music presented to us by the Belles of Indiana. The repertoire included every type of music you would want to hear. Mr. Eugene Bayless, the director of the organization, doesn't know how lucky he is to be associated with such

beautiful and charming ladies. Must be a tough life!

A reception was held for all the V.I.P.'s Friday evening, and this was topped off by the dinner and a speech by Mr. Clarence Walker of the Coca Cola Company. Everyone was impressed with his wit and humor, and he had all laughing and forgetting their troubles the entire evening. He is a native of Georgia, and you know how these Southerners can be. His subject was "Public Relations", and if anyone left Alumni Hall not better "public related" it was his own fault!

The Friday evening conference was completed with a show under the direction of Dr. Lee Norvelle, "The Taming of the Shrew". If anyone likes Shakespeare, he saw a first-class dramatic entertainment. This was the show's opening night, and all tickets were given free to Alumni members. What more can you ask for?

On Saturday morning, the scientific session was given by our Dr. Joe Volker, who is Dean of the University of Alabama School of Dentistry, and by Dr. O. M. Dresen, Dean of Marquette University School of Dentistry. They both gave excellent papers.

Our Friday noon speaker, Mrs. Carl F. Franzen, talked to the ladies about Thailand. She and her husband had just returned recently from a two-year stay in that country, and had many interesting things to say. From all reports, the meeting was very interesting, and each lady received an envelope opener made in Thailand. By the way, the ladies weren't the only ones to receive a gift from that country. Dean Hine received a hat from Dr. Rith Boozayaangool, who was a special student at Indiana University School of Dentistry in 1951-52. This hat is a particular kind of a hat because it is made from the quills of the peacock.

Fortunately, the hat just fit and was very appropriate for the kind of weather we were having.

Now, on Saturday afternoon Indiana battled Marquette. What a battle! Both teams had seasons which were fair-to-middling successes, and Indiana was forced to knock them off but good. Actually, after Indiana's first touchdown the team was lucky to come off the field a winner. Maybe it was because there was too much pressure on the strong sophomore contingents.

On Friday afternoon the Alumni met and elected the following officers:

President—Dr. Walter Crum

President-Elect—Dr. Harry Healey

Vice-President—Dr. Willard Damm

Secretary-Treasurer—

Dr. Frederick A. Hohlt

Board of Directors:

Dr. Joseph H. Griswold

Dr. Al Yoder

Dr. Wilbur Boren

Dr. Jack Carr

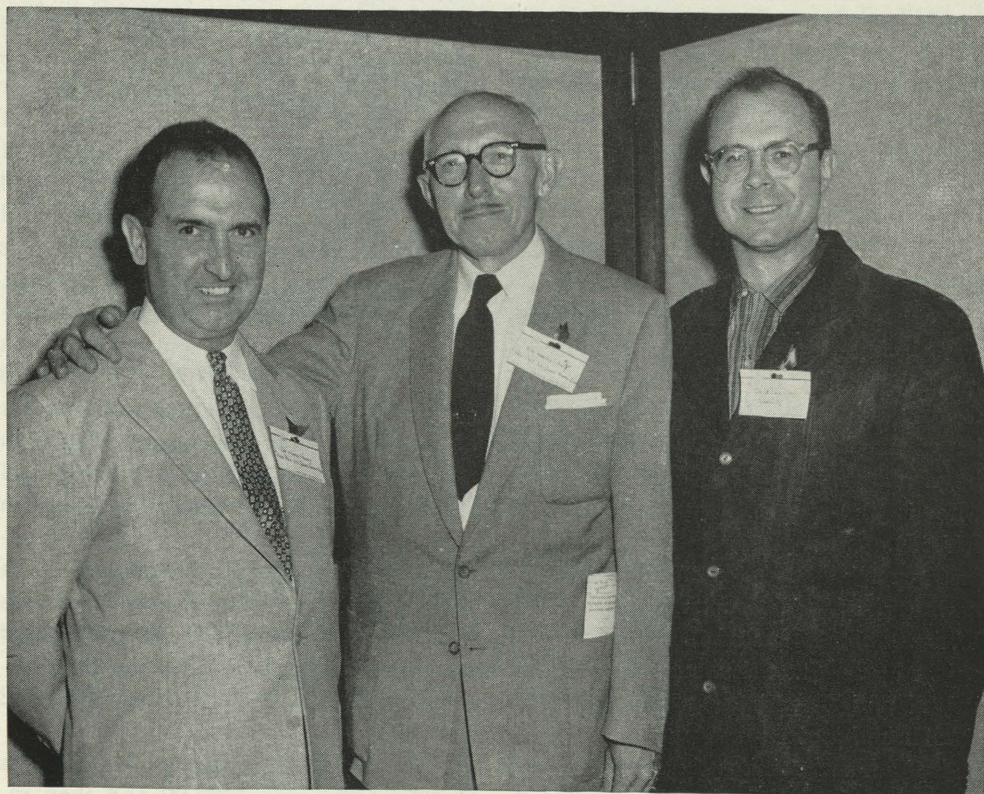
Dr. Paul Allen

During this meeting, the highlight was the addition of \$1,500 to the Indiana University Foundation. This money is to be used for the Scholarship Fund. As we all know, this money could be used for no better purpose than to give to a needy student in order that he may continue his education.

To sum up the meeting, those that weren't there missed a very wonderful time, and we hope you all will be with us next year. Orchids to Doug and all who helped to make this meeting possible.

Fredrick A. Hohlt,

Secretary-Treasurer



NEW DENTAL ALUMNI OFFICERS—New officers elected at the meeting of the Indiana University School of Dentistry Alumni Association held on the Bloomington campus in November are (left to right above) Dr. Harry J. Healey, Indianapolis, president-elect; Dr. Walter A. Crum, Richmond, president; and Dr. Willard Damm, Evansville, vice-president.

Alumni Notes

Mrs. Cleona Harvey, Recorder

This is the day before Christmas—snow is falling gently and it promises to be just what all the children ordered! The big tree in front of the Clinical Building is gaily decorated and bright lights twinkle from the hospital windows. Never before have we received so many greeting cards from the alums and never before has our jolly editor given me this much extension of time to get this column ready for the press! So we have been able to include your greetings and give changes of address. Of course we couldn't mention all who sent cards but if a change of address was indicated or if news was sent we tried to include it. It is so wonderful to hear from so many and we wish to extend to all our hope that Christmas will be Merry and the New Year the best ever! And now we present the news beginning with the

Class of 1892

Dr Arthur T. White, 345 Parkway Building, Pasadena, California, received another nice compliment, as his picture was the one chosen for the "Picture of the Month" in the September issue of Oral Hygiene. We have had a couple of letters from Dr. White commenting that he is enjoying the little discussion as to who is the oldest living graduate of I.U.S.D. We really aren't taking sides—just reporting so be sure and read the news in the 1893 Class. In November, Dr. White wrote, "Class of 1892 reporting. I enjoyed the June Bulletin very much. Powell and I are still on the move, although he has slowed somewhat. In June he had a heart attack and was hospitalized for a few days. I had a nice talk with him this morning and he seemed quite himself although a little weakened. Out to dinner table every day but not able to

be out on the go as always before. I am at the chair every day and seem as well as common. Hope to see you all next summer when the Indiana society meets. The Bulletin seems better and better and I await each issue eagerly. I sure will enjoy browsing around the Browsing Room when I visit you." I might add, in case you have forgotten, that Doctors White and Powell gave their age as 87 when we reported in the July, 1956, bulletin concerning them.

Class of 1893

I am sure the following letter from Dr. Driscoll of East Bradenton, Florida, will clear up the questions concerning his age at graduation: "Due to physical conditions I have delayed curiosity answer to article of Alumni Notes, page 16 of Alumni Bulletin of July, 1956, Class of 1893, in which Dr. Archie Powell, 1948 Lundy Avenue, Pasadena, California, and Dr. White, who reported on Dr. Driscoll's activities in the January 1956 Bulletin. I, Dr. Clarence Dexter Driscoll, (retired) now 82 years of age entered Indiana Dental College at age of 16 years in 1889—attended Indiana Dental College that annual term, was not in attendance in next term and returned in the fall of 1892 and graduated next year, 1893, in class of only three: Victor Voris of Franklin, and W. H. Upjohn of Lafayette. The cause for so small number graduating was occasioned by we three having missed one term and the law was changed requiring an additional year for beginning '92 and '93."

From this I gather that Dr. Driscoll was in school the year 1889-90 and then returned for his second year 1892-93. So he was only 19 when he graduated and is 82 now. Drs. White and Powell of the

Class of 1892 are 87, and I am sure you all agree that congratulations are due all three of these good doctors.

Class of 1906

Dr. Jack D. Carr has had some very interesting correspondence with Dr. H. A. Kelsey, 115½ West Mulberry, Kokomo, Indiana. Dr. Kelsey has quite a museum of dental items. He has been practicing dentistry 50 years and has his first dental chair, the footwheel that operated his drill, casting equipment, a bellows and cuspidor.

Dr. Howard R. Raper, 1516 E. Silver Avenue, Albuquerque, New Mexico, was the "Man on the Cover" of the June, 1956, issue of Dental Survey. We wish to quote a part of the very interesting write-up concerning him, "As a dentist, writer, researcher and crusader in the field of radiography, Howard R. Raper is probably one of the most widely read and widely known personalities in the dental profession. In recognition of his contribution to this profession, and thus bringing honor to the state, the faculty and regents of the University of New Mexico, Albuquerque, have voted this year to confer upon him the honorary degree of Doctor of Laws." He received this degree on June 6 at the University's Commencement Exercises.

Class of 1907

Dr. E. W. Ross of Garden City, Kansas, paid us a visit recently. On his way he stopped at Kansas City and heard our Dr. Johnston lecture on his favorite subject.

Class of 1913

Dr. Raul M. Montero, 8810 - Third A Avenue, Miramar, Havana, Cuba, remembered us with a greeting.

Class of 1918

Dr. J. S. Eilar, Medical Arts Square, Albuquerque, New Mexico, is the Secretary of the New Mexico Dental Society.

Class of 1919

Dr. E. J. Burke, Burns Building, Colorado Springs, Colorado, wrote us in August and among other things said, "I am a graduate of Indiana Dental College, Class of 1919. I retired two years ago, but was dissatisfied and returned to work."

Class of 1928

Dr. Lewis F. Compton reports his new office address is 42 West 56th Street, Indianapolis, Indiana.

Class of 1935

Dr. John W. Farley, 12 Medical Arts Square, Albuquerque, New Mexico, is President of the New Mexico Dental Society.

Class of 1936

Dr. Joseph F. Volker, dean of the University of Alabama Dental School, Birmingham, Alabama, was the "Man on the Cover" of the August, 1956, issue of Dental Survey. In the very interesting article concerning him it was said, "Dr. Volker's teaching career began in 1941 as assistant professor in the department of biochemistry and pharmacology at the University of Rochester School of Medicine and Dentistry. He also was director of dental research there and was one of the earliest workers in laboratory studies dealing with the effects of fluorine on tooth enamel.—When the University of Alabama, began its School of Dentistry in 1948, Dr. Volker was offered the deanship. Under his administration, the institution has progressed steadily and made improvements in its physical plant, teaching and research departments to where it now ranks among the top dental schools in the United States."

Class of 1938

Dr. William P. McClelland is with the Veterans Administration Hospital, in Chillicothe, Ohio.

(Continued on next page)

Class of 1939

Dr. Wilson A. Livingston is with the Veterans Administration Hospital in Marion, Indiana.

Class of 1941

Dr. George M. Smith (Captain) is stationed at Iwakuni, Japan, and his address is USN Air Station, Navy #995, F.P.O. San Francisco.

Class of August, 1943

Dr. Gilbert LeVine Mellion, of 217 Main Street, Rocky Hill, Connecticut, and his wife, the former Ruth F. Berman (I.U., 1942) gave a clinic at the 97th Annual Session of the American Dental Association held in Atlantic City, October 1 through the 4th on "The Practical Application of Nutrition in Modern Dentistry". Dr. Mellion is the Chairman of the Nutrition Committee of the Connecticut State Dental Association and represents the dental profession on the Connecticut Nutrition Council. Dr. Mellion has lectured extensively on nutrition and practices dentistry in Rocky Hill, Connecticut. He is also Chairman of the Dental Delegates to the Connecticut Joint Conference of Physicians, Dentists, and Pharmacists. Mrs. Mellion holds a B.A. degree in dietetics from Indiana University and is a member of Omicron Nu, National Home Economics Honor Society. Mrs. Mellion has also lectured extensively on nutrition as related to dentistry.

Class of April, 1944

Dr. Marcel Alexander Polz is now a Major with the Army Dental Corps in Verona, Italy, with his address, Dental Section, Headquarters, SETAF, APO 168, New York, N.Y.

Dr. Thomas H. Beavers announces the new location of his office at 6049 E. Washington Indianapolis, Indiana.

Class of December, 1944

A card from Dr. Dudley S. Moore asks

to change his address to 1208 Mendocino Avenue, Santa Rosa, California, and informs us that his practice is limited to oral surgery.

Class of 1948

Dr. and Mrs. Thomas Boyd, 2212 Wheeling Avenue, Muncie, Indiana, announces the birth of a daughter, Nancy Lou, born in October, 1956.

Dr. Cal Christensen of 2035 E. 18th Street, Bremerton, Washington, sent us the good news that "I'm hard at work again with no problems."

Dr. Bert W. Gilbert announces a change in his offices to 105 South Grand Avenue West, Springfield, Illinois.

Lt. Col. Robert H. Marlette's wife writes from 406 N. 29th Street, Lawton, Oklahoma, "As you see by the post mark we are now 'Okies'—having been assigned to Fort Sill last July, after completing the residency program. We were dealt a most severe blow in August when our 13 year old daughter was hospitalized and the diagnosis given us was multiple sclerosis. At this writing Cheryl and her Daddy are at Mayo's in Minnesota, so we hope we will be given a joyous Christmas present from them. The rest of our family are fine. Bob is the first oral surgeon to be assigned here at Sill and he finds plenty to keep him busy."

Class of 1949

Dr. Wigand Kenter, 218 E. Kirkwood Avenue, Bloomington, Indiana, visited Europe this past August and sent us cards telling us of the joy of the trip.

Class of 1950

Dr. James Dirlam (Major) 659 Sheffield Drive, Springfield, Pennsylvania, was in to see us in August. The Army is sending him to graduate school at the University of Pennsylvania for special training in oral surgery.

Dr. Wilbur C. Moorman, who received his Master's degree from Indiana Univer-

sity School of Dentistry, and who has been on our staff in oral surgery for several years, resigned in October and is now associated with Dr. Clyde Litton, his practice limited to oral surgery, at 1210 Virginia Street, East, Charleston 1, West Virginia.

Class of 1952

From Dr. and Mrs. R. E. Applegate, 2852 McConnell Drive, Los Angeles 64, California, comes this interesting bit of news, "Could we please get back on the mailing list for the Dental Alumni Bulletin? The University Alumni Bulletin doesn't have so many familiar names as yours. We're Crest toothpaste users now, and if anyone asks, we tell them the stannous fluoride has an edge over sodium. We have been in our own office near home for almost two years and are keeping busier than we sometimes want to be."

Dr. Rafael Aponte, Jr., 309-311 Del Diego Avenue, Suite No. 6, Santurce, Puerto Rico, wrote us in August, "I finally opened my office two weeks ago. For the time being, I am a general practitioner concentrating in oral surgery. So far things are shaping up pretty well with some referrals as well as patients walking in on their own. All beginnings come with a package of problems and I am having my share, but I am disposing of them quickly. In the mornings I still go to municipal and a district hospital, where I take care of oral surgery cases. Some of the fracture patients are a real challenge but I have been very lucky with them. My last multiple fracture patient (maxillary, compound mandibular, and palatal), came out beautifully, to the extent that two Board orthopedic men who saw the case before treatment congratulated me very enthusiastically. The patient was very grateful also, and I guess these rewards satisfy more than anything else. . . Your Alumni Bulletin and the Alumni Magazine keep me up to date with all the changes at Indiana."

Holiday wishes from the family of Dr. and Mrs. David Frye, 345 N. Center Street, Hickory, North Carolina, inform us they have three daughters, Nancy, Judy and Donna.

Captain and Mrs. Alvin J. Grayson, La Rochelle, France, announce the birth of a son, John Michael, April 15, 1956. This news arrived too late for the July bulletin and it may still be news to many of you.

Dr. Johnston let me read an interesting letter from Dr. Harold Glasser, dated October 21. Dr. Glasser and family are now in Bethesda, Maryland (6002 Johnson Avenue) where he is in school. He seems to be enjoying it although declares it is a "jam packed" schedule. He reports a visit in Falls Church, Virginia, with Dr. Fernando Rodriguez, who studied Orthodontia at I.U. in 1951-52 and also a visit with Dr. Thomas Garman in Florida not too long ago.

Dr. Frank J. Turber, 333 Main Street, Mount Vernon, Indiana, wrote us in September desiring latest book lists for his information in keeping abreast with the latest in dentistry.

Class of 1953

The latest news we have concerning Dr. Sanford Asahina and his wife, Shigeko, is that they have a baby daughter, Ann Akiko, born August 23, 1956. Dr. Asahina completed his tour of duty with Uncle Sam in Tokyo in May and is practicing in Honolulu with his father.

Dr. William Patrick Kelly announces his new location for the practice of general dentistry at 6358 North College Avenue, Indianapolis, Indiana.

Dr. and Mrs. Harry Motsinger, 1906 McKinnie, Fort Wayne, Indiana, have a son, Carl Daniel, born October 16, 1956.

Dr. Roy V. Carlson, Fowler, Indiana, wrote us a brief note in September—just taking another Board!

Dr. Allen E. English announced the opening of his office for the general practice of dentistry at 813 Pine Street, Michigan City, Indiana.

(Continued on next page)

Dr. William Heiny is now located at 829 W. Main, Greenfield, Indiana.

Captain and Mrs. R. C. Johns sent greetings from Casablanca, Morocco. Their mailing address is 7280th USAF Hospital, Box 6, c/o P.M., APO 30, New York, N.Y.

Dr. J. Oscar Leiva, 3a. Ave. #13-76 Z.1, Guatemala, Guatemala, Central America, wished us well at this season of the year.

Dr. William J. Parks, formerly of Terre Haute, Indiana, is now practicing in Santa Ana, California. His address is 302 E. Santa Clara Avenue.

Class of 1954

A greeting from Dr. and Mrs. Robert Blu gives us some late news regarding their activities. They have a new daughter, Barbara, born last February, and Dr. Blu has accepted a Regular Corps Commission in the Public Health Service. He is also re-equipping his 2-chair office with the latest and best. Their address is 250 Bellewood Drive, Englewood, California.

Dr. John S. Szakaly wrote in August, "We have had another addition to the family: Martin, Christopher, and now Daniel. This new arrival called for more bedroom space so we are now residing at 1309 N. Meade Street, South Bend, Indiana."

Class of 1955

Dr. Stuart Everard, 401 Pritchard Avenue, Chapel Hill, North Carolina, also wrote us in August, "After a pleasant evening reading the Alumni Bulletin and with the mind still running in the general idea of news, here are a few items both personal and related to other members of the Class of '55. For the record a change of address to a bigger house, but still in Chapel Hill, where we expect to remain for another year. This second year of teaching with the rank of Assistant Professor of Oral Pathology and Periodon-

tology at University of North Carolina dated July 1, 1956. In June I received a license to practice in the State of Virginia along with Jerry Shulman, who is with the Navy in Norfolk, Virginia. In January while lecturing at Fort Bragg in Fayetteville, North Carolina, I found my audience contained two classmates, Jack Ross and Robert Roetker, at present in the Army Dental Corps there. Sometime in the spring Dr. McDonald visited U.N.C. when I had the pleasure of meeting him again. In March at the Dental Schools' meeting at St. Louis it was like returning to Indiana to meet Dean Hine, Drs. Johnston and Cunningham besides seeing many others both close to and at a distance."

Dr. Norman Glassman wrote us in October, "I hope this letter finds you, Dr. Hine and the faculty in the same good health that they were when I last left Indiana. Since then many things have happened, Marcia and I have a daughter, Wendi Gail (one year old next week) and are happily stationed in Valdosta, Georgia, about 20 miles north of the Florida line. Two of my classmates have visited with us, Charles Infante and Bob Kuhn. Bob is now stationed at Tyndall AFB, Panama City, Florida.

Professionally speaking my Air Force assignment has been a good one. The clinic here affords us the opportunity of having a general practice. We do all phases of dentistry and complete each patient ourselves. There are some disadvantages due to the disadvantage of differences in Air Force materials and techniques—but basically we have almost everything we need. While here, I've lectured to all the airmen at the base theater on preventive measures in dentistry and on oral hygiene. Also, I've managed to address two groups of hygienists on related subjects. And being in the Air Force I've managed to get in some rides in our planes. Included was a ride in a jet fighter which was very thrilling. I've been keeping up as much as possible with I.U. School of Dentistry via the Alumni Bul-

letin. It is always a pleasure to read what has been happening there."

Dr. and Mrs. Floyd Hale, 4343 Monitor Drive, Indianapolis, Indiana, have a baby girl, Anna Marie, born December 13, 1956.

A brief visit from Dr. Daniel E. Hayes, (he brought his wife and their pretty blue eyed daughter in to see us), brings us up to date on his whereabouts—Naval Air Station, St. Louis, 21, Missouri.

A Christmas card from Captain Leonard Hollingsworth, 04055761, lets us know that he is still in Germany with his address, 34th Med. Det. APO 36, New York, N.Y.

Dr. Charles Infante stopped in to see us and gave his address at 201 Southland Boulevard, Louisville 14, Kentucky. He has a residency at the General Hospital there.

Dr. Robert D. Jamison is the Base Dental Surgeon at Hondo Air Base, Texas, with his address 909 27th Street, Hondo, Texas.

Dr. Aaron Kimche's address is 5217 S. Dakota, N. E., Washington, D.C.

Dr. J. Ellis Rue, 1309 E. Las Animas, Colorado Springs, Colorado, wrote us in November, "Nancy and I are finally settled now for my stay in the Army, and I thought you might like our new address for your records. We had a very enjoyable five week stay at Ft. Sam Houston, Texas, before being assigned to Ft. Carson, Colorado. Jerry Baker and I represented I.U. in a class of 112 dentists taking the orientation course in the Army Medical School there. Jerry was assigned to Ft. Hood, Texas. I was very happy to find that my classmates, Tom Quill and Eldon Cole, were also working here at Ft. Carson, although they are assigned to a different dental clinic here on the Post. I am working in the Oral Surgery section of the hospital dental clinic. This is one of the largest U.S. Army Hospitals in the country, having a capacity of 9,000 beds. It does not have near that many patients now, but I understand that this hospital

was used extensively for casualties flown in during the Korean Action. So far, Nancy and I really like Colorado Springs, although it looks as if we are in for a lot colder winter than that to which we are accustomed. The Rockies here are quite a sight to old "flatlanders" like we are. The whole town is right in the shadow of Pike's Peak, which is really quite impressive. We'll be seeing you in a couple of years when we head back to Indiana."

Capt. Gene E. Meyer, 04055556, 769 Med. Det. (DS) APO #35, New York, N.Y., wrote Dr. McDonald that he had not been receiving the Alumni Bulletin. We are glad to have his address; however, he said he would be discharged in July. Please, Dr. Meyer, send us your address when you get out of service.

Dr. M. Gene Stevens is with the 4455th Hospital, Greenville, South Carolina.

From Captain Bernard K. Stuart, D.C. #1, Ft. Devens, Massachusetts, we had news that Dr. Charles Hall is in England which he is enjoying immensely, and attended the International Dental Convention in Paris.

Class of 1956

Dr. Vithal N. Bhatavadekar announces the opening of his office at 215, D, Charni Road, Near Portuguese Church, Bombay 4, India. Dr. Bhatavadekar received the Master of Science Degree in Dentistry in June, 1956.

Dr. James A. Christian sent us a greeting and gave his address as BOQ, Rm. 3A, USNTC, Great Lakes, Illinois.

Dr. Robert R. Clark is located in Elk City, Oklahoma, with his address at 114 N. Adams.

Dr. and Mrs. Lou D'Angelo sent us a most unique Christmas card—several pages of typing bring us up to date on their activities. Space forbids passing it all along to you but I am happy to report they are enjoying their work. Dr. D'Angelo is with the United States Public Health Service. He was commissioned as Assistant Dental Surgeon and is serving in
(Continued on page 27)

Library

Mrs. Mabel Walker, Librarian

Current acquisitions to the library are represented by the following selected list of books, any of which may be borrowed by alumni.

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|------------------------------------|------------------------------------------------------------------------------------------------------------------|
| Ackerman, Lauren Vedder | Cancer: diagnosis, treatment, and prognosis. 2nd ed., Mosby, 1954. |
| American Dental Association | Clinical testing of dental caries preventives. American Dental Association, 1955. |
| American Dental Association | Group dental health care programs. American Dental Association, 1953. |
| American Dental Association | The role of the dental society in the school dental health education program. American Dental Association, 1953. |
| American Dental Association | Specifications for dental materials. Council on Dental Research, 1955. |
| American Public Health Association | American men of science; a biographical directory. Vol. 1—Physical Sciences. Science Press, 1956. |
| Archer, William Harry | Services for children with dentofacial handicaps. American Public Health Association, 1955. |
| Box, Harold Keith | A manual of oral surgery; a step-by-step atlas of operative techniques. 2nd ed., Saunders, 1956. |
| Calonius, P-E B | Oxygen insufflation in periodontal diseases. Thomas, 1955. |
| Coelho, David H. | Statistical studies on the frequency of caries in the permanent dentition of children. Reprint, 1954. |
| | A complete fixed bridge procedure. 2nd ed. New York University Press, 1955. |
| | Color atlas of pathology. Lippincott, 1956. |
| Cowdry, Edmund Vincent | Cancer cells. Saunders, 1955. |
| | Current therapy. Saunders, 1956. |
| Dodson, Edward Ottway | A textbook of evolution. Saunders, 1952. |
| Dorcus, Roy Melvin | Hypnosis and its therapeutic applications. Blakiston, 1956. |
| DuShane, Graham Phillips | Supplemental drawings for embryology. University of Chicago Press, 1955. |
| Edwards, Ralph Warren | A history of the Western Dental College. University of Kansas Medical Center, 1954. |
| Eranko, Olavi | Quantitative methods in histology and microscopic histochemistry. Little, Brown, 1955. |
| Ewing, Joseph E. | Fixed partial prosthesis. Lea & Febiger, 1954. |
| Fine, Samuel | Principles and practices of the dental assistant. Hamilton Publishing Co., 1955. |
| Friedman, Sydney M. | Visual anatomy. 1st ed., Thomas, 1950-52. |
| Huldt, Sven | Factors influencing the efficiency of dental local anaesthetics in man. Stockholm, 1953. |
| Johnson, A. Leroy | Dentistry as I see it today. Little, Brown, 1955. |

- Karsner, Howard Thomas
LaCroix, Pierre E.
Langley, Leroy Lester
- Last, R. J.
Levy, Irwin Robert
- Lippman, Hyman Shalit
- McCoy, James David
McGehee, William H. O.
- Michigan University
National Research Council
- Nyborg, Hilding
- Ogden, Charles Kay
- The pharmacopoeia of the
United States of America
- Rehfuss, Martin Emil
- Shields, Seth W.
Shipley, Joseph Twadell
- Stein, Irvin
Stewart, Thomas Dale
- Stromgren, Hedvig
- Sundvall-Hagland, I.
- Symposium on Radiobiology
- Talbot, Nathan B.
- Thimann, Kenneth Vivian
- U. S. Public Health Service
- Veillon, Emmanuel
- Weinmann, Joseph Peter
Westin, G.
- Human pathology. 8th ed. Lippincott, 1955.
The organization of bones. Blakiston, 1951.
The physiological foundation of dental practice.
Mosby, 2nd ed., 1956.
Anatomy, regional and applied. Little, Brown, 1954.
A text-book for dental assistants. 4th ed. Lea &
Febiger, 1955.
Treatment for the child in emotional conflict. Blak-
iston Division; McGraw-Hill, 1956.
Applied orthodontics. 7th ed. Lea & Febiger, 1956.
A text-book of operative dentistry. 4th ed. McGraw-
Hill, 1956.
Practice administration for the dentist. Mosby, 1955.
Atlas of tumor pathology. Armed Forces Institute of
Pathology.
Healing processes in the pulp on capping. Acta
odontologica Scandinavica, v. 13, Suppl. 16, 1955.
The meaning of meaning. 6th ed., Harcourt, Brace
and Company, Inc., 1944.
Pharmacopoeia of the United States of America.
15th revision, 1955.
Epitome of the Pharmacopeia of the United States
and the National formulary, with coments. 10th
ed. 1955.
A course in practical therapeutics. 3rd ed. Williams
& Wilkins Co., 1956.
Brevity is the soul. G. Mercer Co., 1955.
Dictionary of early English. Philosophical Library,
1955.
Living bone in health and disease. Lippincott, 1955.
Basic readings on the identification of human skele-
tons. Wenner-Gren Foundation for Anthropological
Research, 1954.
Index of dental and adjacent topics in medical and
surgical works before 1800. Munksgaard, 1955.
Sodium fluoride application to the deciduous denti-
tion; a clinical study. Reprint, 1955.
The basic aspects of radiation effects on living sys-
tems. Wiley, 1952.
Functional endocrinology; from birth through ado-
lescence. Harvard University Press, 1952.
The life of bacteria: their growth, metabolism, and
relationships. Macmillan, 1955.
Sources of morbidity data from the Clearinghouse on
Current Morbidity Statistics Projects. Listing no.
3, 1955.
Medical dictionary. Dictionnaire medical. Medi-
zinisches Worterbuch. Grune & Stratton, 1950.
Bone and bones. 2d ed. Mosby, 1955.
Some details in the histopathology of the enamel.
Reprint, 1952. Acta odontologica Scandinavica.

Dental Hygiene

A. Rebekah Fisk, Director

Again it is time for us to look inside the alumnae folder for news for the Bulletin. We note that most of the items are either birth or wedding announcements. While we are glad to have this information, there are other things that we would like to hear about you such as whether we have your correct address, where you are working, whether you have earned any additional college credit, taken any state board, etc. How about making a New Year's resolution to keep us posted? Start by returning the questionnaire included in your Christmas greeting.

Class of 1952

This first class to graduate from the Dental Hygiene curriculum will celebrate its five year reunion during the state meeting in May. We shall expect to see them 100% strong around a table at the President's luncheon. We have only one little item of news from this class. Jane (Hiatt) and Warren Johnson, a boy David Hiatt Johnson.

Class of 1953

This class seems to have a monopoly for having boys. Juanita and Bob Huitema have named their son Timothy Alan. The second son of Joan (Malacina) and Tom Hayden is Thomas Hayden Jr. The Haydens are now living in Griffith, Indiana. Frances and Tom Drakos also have a son, Dan Thomas Drakos.

Class of 1954

The class has had a few prospective dental hygienists. Marilyn and Larry Poel a second daughter, Kathryn Louise; Pat and "Dan'l" Boone a girl, Jennie Merritt; and Gerry and Bob Bailey a girl, Susan Elaine. Kay (Boese) and Edward Landreth have a second son, Timo-

thy Edward. Donna (Way) and Sam Dodd a boy, Mark. Alan. From the grapevine we hear that Dorothy and Don Robinson and son are living in Bloomington where Don is completing his work at Indiana University and Dorothy is associated in practice with Dr. Linnemeier; that Carol (Ottinger) and Dick Rosebrock have a daughter and that Carol is associated in practice with Dr. Simpson of Franklin, Indiana; that Barbara (Rambo) and Jon Herrold and son are living in Louisville, Kentucky, where Jon has an oral surgery internship in one of the hospitals.

Class of 1955

We were pleased to receive a letter recently from Marianlee (Comer) Hawk telling us about her daughter, Lisa Suzanne, and their recent move to Dearborn, Michigan. Gerry Charnley was on campus about a week ago to attend a radiology symposium. She brought some recall cards which she uses and which we think are a fine idea. If you are interested, maybe she will send you some samples. Gerry is now associated in practice with Dr. Leon Berger in Indianapolis. Carla Totten has also been in recently to borrow the flannelgraph and some talks for a community education project in the Greenwood school. We have heard that Jane Rutledge was married to Thomas Jacks recently and is now living in South Bend; that Mary Lou (Smith) and Max Gaunsauillus have a son and are now living in Fort Wayne; that Marcia (Mast) and Don Edgar have a daughter and are living in Modesta, California, where Don will be on the staff of the county hospital until he goes into service. In June Susan Gant was married to Edward Fielder, '56. The Fielders and the Lampsons are stationed with the Navy on the west coast.

Class of 1956

The news of this class is about the same as it was in June except that the Abbott's have now returned from Hawaii and are stationed in Michigan. Jane (McWethy) Sharp has a position as a dental hygienist in the dental clinic at Fort Lewis, Washington. Phyllis Wolf is working part-time for the State Board of Health and also as a graduate assistant in the dental hygiene clinic. We have an enthusiastic letter from Gwen Greenlee and Marilyn Kirchenbauer about their life in Denver, Colorado.

Sometime during 1957 a new wing will be added to the dental school. When completed the facilities for the dental hygiene students will occupy the fourth floor and will include among other things a twenty-five chair clinic. New housing for both married and single students is going to be built across the street in preparation for bringing the freshman dental and medical students to the Medical Campus when the Medical Science building is completed in 1958. Yes, the face of the campus will soon have a new lift—you must come back and see it.

History and Development, Department of Oral Histopathology, Indiana University School of Dentistry

By Gilmore, Byerly, Leer, O'Rear

NOTE: Another in a series of articles on the history and development of various departments in the dental school, written by members of the 1954 freshman class.

Our department of oral histopathology, devoted to the study of minute changes in diseased tissues of the oral cavity, was started at Indiana University around 1943. Prior to this time, courses were taught in oral histopathology and general pathology but this department as such was not developed until new enthusiastic and skillful men joined the department.

In 1889 Dr. Junius B. Cravens was Professor in Development and Pathology of Teeth.¹

Dr. George Edwin Hunt was Dean of the college and Professor of Pathology from 1904 to 1909. Prior to this time he was editor of the magazine, "Oral Hygiene" and he did as much to promote dental education among school children as any man in the profession. He made numerous contributions and lectures on mouth hygiene and dental prophylaxis.²

In 1910 the department was transferred to Dr. Harry Langdon, a professor in the School of Medicine. He was head of

the pathological laboratories and terminated his career in 1936³.

The above three men were the first professors of pathology in the early history of Indiana's Dental School.

The continuation of the work of these educational pioneers, with the help of the following men, brought about an organized department in oral histopathology.

Dr. Virgil D. Cheyne assumed his duties in the school of dentistry as Associate Professor of Oral Histology and Pathology on September 1, 1940. As head of the department of histopathology, Dr. Cheyne took an active and important part in the school's policy of exploring and developing the biological sciences in their relation to dentistry.

Dr. Cheyne was born in Webster City, Iowa, in 1908. After three years of liberal arts training at Iowa State College and the University of Iowa, he entered the University of Iowa School of Dentistry and received his D.D.S. degree in 1933. He served in the following capacities since that time; Intern at Forsythe Dental Infirmary, 1933-1934; Assistant Instructor in the Preventive Dentistry and Pedodont-

(Continued on next page)

tic Department of Iowa University Hospital 1934-1935; Assistant in dental research at the Iowa Child Welfare Station, 1935-1936; Department of Public Health, Department of Pathology at the University of Rochester, School of Medicine and Dentistry 1937-1940. Dr. Cheyne received his B. A. degree from the University of Rochester in 1938 and his Ph.D. degree from the same school in 1940. His work in the Department of Histopathology at the Indiana University School of Dentistry has been of immeasurable benefit to the school and its alumni.⁴

Dr. John E. Buhler graduated from the Indiana University School of Dentistry in 1935. He was a dental intern at the Indiana University Medical Center after his graduation. Dr. Buhler did postgraduate work in oral histopathology and in general pathology.⁵ He was appointed to the full-time teaching staff in the Department of Oral Surgery in April of 1936, continued as a full-time member until July of 1940, and as a part-time member until November of 1941. He taught materia medica and therapeutics, oral histology, oral histopathology, and clinical oral surgery. Dr. Buhler had a part-time practice of exodontia and oral surgery in Indianapolis, which he terminated upon his appointment to the staff at Temple University School of Dentistry in December of 1942. There he became Associate Professor of Oral Surgery and Secretary to the Faculty. Dr. Buhler was instrumental in a complete revision and modernization of the dental curriculum now in effect at Temple University. He was Secretary of the Executive Committee of the dental school from 1943, a member of the committee on graduate study of the dental school, and in 1946 was elected Secretary-Treasurer of the American Association of Dental Students.⁶ In 1948 he left Temple University to become Dean of Emory University at Atlanta, Georgia.

Dr. Grant Van Huysen joined the faculty of Indiana University in July, 1942, as Professor of Oral Diagnosis. Dr. Van

Huysen took his dental training at the University of Pennsylvania. After practicing in New York, he received a Rockefeller Fellowship in dentistry at the University of Rochester School of Medicine and Dentistry. There he studied in the departments of Pathology, Radiology, Gross Anatomy and Microscopic Anatomy. After leaving Rochester, Dr. Van Huysen taught at the Medical College of Virginia and the University of Louisville Dental College.⁷

Dr. William Gene Shafer is Associate Professor of Oral Histopathology at the present time. He received his B.S. degree from the University of Toledo in 1947, D.D.S. from Ohio State University in 1947 and his M.S. degree from the University of Rochester Graduate School in 1949. Dr. Shafer put biopsy service on the map for oral surgeons. He is in charge of the cancer education program in our school and supervises a series of lectures which are given by prominent physicians and dentists supported by the U.S. Public Health Service. This agency also supports yearly examinations given to all dental and medical students to determine how much is learned and absorbed through their expenditures.⁸

These two men, Drs. Shafer and Van Huysen, are closely associated with clinical dentistry. They write papers on clinical pathology and work out problems with various clinical departments especially in the fields of oral surgery, periodontia, pedodontia and endodontia.

One of the latest developments of the Pathology Department is the biopsy service. In 1940 they diagnosed five specimens per month. Today they diagnose 650 specimens a year which is an average of over 50 specimens per month. In October 1954 a \$2 fee, payable to the University, for every diagnosis was initiated to help defray the expenses involved in this expanding service. This fee has not reduced the number of cases received diagnosed; in fact the number of specimens processed each month is constantly increasing. The

recent graduates of the school especially seem to cater to the use of this service.⁹

Dr. Shafer has two full-time technicians and one part-time technician as well as several part-time dental student assistants to aid in their extension research program.

The brief histories above show us how under competent hands a department can thrive. Drs. Cheyne, Van Huysen and Shafer received their training from the same school, the University of Rochester School of Medicine and Dentistry.

The instructors were all trained first as dentists, then as general pathologists and as oral histopathologists. With their help, the dental student is given a basic course in disease and tumors from the medical school. Then they received the course in

oral histopathology and tie in this experience with the oral cavity.¹⁰ All in all this gives the dental student an understanding of general pathology and its applications to the diseases of the oral cavity and teeth.

REFERENCES

- ¹ Alumni Bulletin
- ² Dental Brief, Vol. XVIII, No. 4, April 1913, p. 249.
- ³ Personal Interview
- ⁴ Alumni Bulletin, November 1940.
- ⁵ Personal Interview with friends of Dr. Buhler
- ⁶ Dental Items of Int., 70:744, 1948.
- ⁷ Alumni Bulletin, July 1942.
- ⁸ Personal Interview
- ⁹ Personal Interview
- ¹⁰ Personal Interview

Class and Fraternity Notes

FRESHMAN CLASS

After allowing sufficient time to get acquainted, the freshman dental class elected the following officers for the coming year; John Libkie, president; Bill Potucek, vice-president; Carolyn Sewell, secretary; and Marvin Schmidt, treasurer.

Since we have been allowing ourselves little time away from our books, we welcomed the invitation of the alumni to their annual banquet. A large percentage of the class attended and afterwards joined the alumni at the Taming of the Shrew." Many of us also attended the other sessions of the fall conference. We forgot cadavers, microscopes, and test tubes for the week-end and jumped ahead four years to become "dentists for a day."

We are looking forward to the Christmas dance just before the holidays. This will be our big social event of the semester. Plans are now being made to hire an orchestra.

Our only other plans for the future are to study—study—STUDY!

Carolyn Sewell

SOPHOMORE CLASS

The first meeting of the sophomore class of 1956-57 was held the initial week of school and the following officers for the year were elected: David Bixler, president; Robert Hirschman, vice-president; Raymond Dennany, secretary-

treasurer; and Max Schaeffer and Robert Modlin, Student Council representatives.

For the past two months, the entire class has focused its attention on learning the many varied new lab techniques and procedures with which it has been confronted. Little attention has been devoted to the planning of a class party or dance, although this has been proposed. This affair will most likely take place before the second semester gets well underway, since the second semester appears to be even more academically taxing. In addition, several basketball games between the sophomores of the various fraternities have been planned as a means of physical recreation.

By now the faculty has come to know most of us—for one reason or another—and we have begun to feel a part of the dental profession and to realize the obligations and responsibilities which we have undertaken. Although the demands are many and the days are few, we look forward to an interesting and successful year.

David Bixler

JUNIOR CLASS

Another school year is in its beginning and once again the juniors have invaded the clinic. As always "prophys" are at a premium until we get our "clinic legs", but before long we'll be ready for even the awesome class III foil.

(Continued on next page)

I think our initial timidness has the seniors worried, for a wary junior class means fewer precious root canal patients for them. It's hard for even a junior to manage an exposure with a Jacquette.

The seniors are also displaying concern about the new casting machines and lathes which now grace the junior lab. Seems the same thing happened when they moved out of the sophomore lab. Poor boys.

Socially speaking, there is growing interest in a class party of some sort. We have money in the till and need only find the proper time and place to really function.

In our class elections Russ Boyd, Bill Witherspoon, Ralph Beatty, and Walter Burns were elected President, Vice-President, Secretary, and Treasurer respectively. To be honest, Walt is the only one with much work, and as soon as we have a party and spend the exchequer, he'll be looking elsewhere to keep busy. To wax philosophical for a moment, we of the junior class realize that this year represents our first real taste of practical dentistry. The attitude with which we approach our problems and accept our failures will determine the success of the year. You can bet that we are anxious to take fullest advantage of it, and maybe someday we will be able to read and chuckle at the plights of the "green" juniors.

Russell Boyd II

SENIOR CLASS

Here it is the year that all dental students have been looking forward to for the past three years. Now we are seniors. Most of the instructors have forgotten that you are just a picture and here are the boys that in the next few months are going to have to pack as much dentistry in their miniature noggin as they can possibly put there. They now say John, Ed, Bob, etc., here is the way you will get a better margin, more retention, a better finish, etc. Now the boys are looking for occlusion, unerupted teeth, impact teeth, teeth that can be saved by endodontic procedures and above all the oral cavity as a whole. They think of diagnosis, treatment, and prognosis. This is a profitable and a busy year that we will look back when it is all over and say, "Where did all the time go to".

The year started out with the offer to the class from the student health service for Salk vaccine shots. At this time most of the class has received their second shot. We of course wish to thank the Dean and the student health service for offering this service.

Class officers were elected and for the second term as president of the class Paul W.

Gilmore was elected. Other officers are Don Burns, vice-pres.; Don Lloyd, sec.; Dick Falender, tres.; and Paul White and Ronald Hauswald elected to the Union Board.

We were sorry to see that one of our classmates was not with us the day of enrollment due to the fact that he was in the hospital. We are glad to see that he is again among us and that his condition is much improved and in good condition.

The class lottery was held in operative a couple of weeks ago. The lottery was held to select subjects for reports in the field of operative dentistry. The subjects assigned are, amalgam, inlay, gold foil, anterior plastics, endodontics, preventive dentistry, and full mouth reconstruction.

The class has been swamped with insurance agents trying to sell us what we all need. It is hard to decide what type of policies to select and I am sure that Dr. Berger in his lectures next year will clear up some of this dark cloud that most of us are covered by.

One can tell by the parties that we go to that the seniors are about to graduate by the pregnant wives that are there. There are quite a few in our class.

Thus ends most of the news as of now but we will be able to give a better report of our progress in the next issue of the Dental Alumni.

Paul W. Gilmore

XI PSI PHI

The Indiana Theta chapter of Xi Psi Phi fraternity elected their officers for this academic year last May. The officers are as follows: John Rohn, president, Walter Burns, vice-president; William Cromwell, secretary; James Puccio, treasurer; William Hart, editor; and Water DeWitt, social chairman.

In mid-October, the chapter had its annual fall initiation at which fourteen new members were initiated into Theta chapter.

Of main interest since then have been plans for a ten state Xi Psi conclave which were culminated on November 17. There were numerous delegates, alumni, and active members of the local chapter present. The conclave was concluded in the evening with a dinner at the Medical Center Union Building and an open house at the local Theta chapter. Donald E. Bruce, noted Indianapolis news analyst, was the speaker at the dinner.

Immediate plans of the fraternity are for the preparation of the annual Christmas party which is to be held December 15. All the alumni are cordially invited to attend.

William Hart

MAXILLOFACIAL PROSTHESIS

(Continued from page 5)

finished and contoured to gain some buccal retention on the defect side (Figure 4).

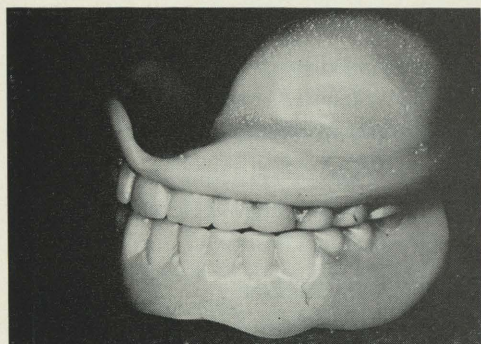


Figure 4

Labio-buccal view of prosthesis

The dentures were inserted and phonation was again almost normal. The patient could swallow a drink of water without discomfort. Such simple things as these could not be done before the insertion of the dentures. The appearance was esthetic (Figure 5), and the defect area of the face was restored to normal contour (Figure 6). The patient was given home instructions and his housekeeper advised of diet preparation. The patient after some eleven months is greatly improved. His weight has increased, he talks well, eats satisfactorily, and his mental outlook is very good.

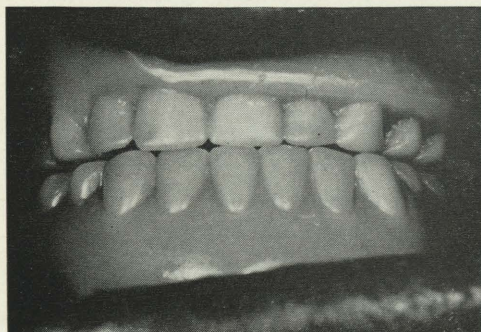


Figure 5

Anterior view of prosthesis in mouth

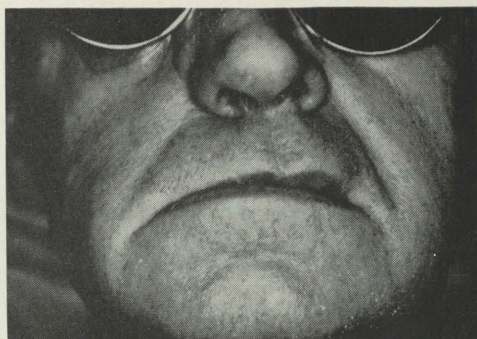


Figure 6

Facial contour with prosthesis in mouth

ALUMNI NOTES

(Continued from page 19)

the Division of Indian Health. He is currently stationed at the Standing Rock Hospital, Standing Rock Indian Reservation, Fort Yates, North Dakota. Mrs. D'Angelo (whom many of you will remember since she worked as a technician in the oral pathology laboratory while her husband attended dental school) is teaching the 7th grade in a school where most of the youngsters are Indian.

Dr. Robert L. Lackey informs us his office is located at 219 Citizens Bank Building, Anderson, Indiana, and at home at 1400 W. 16th Street.

Dr. Jack Leer came in to see us in September and gave us the following news which may not be correct now, but it was then! Dr. Leer is with the Dental Detachment at Fort Riley, Kansas; Doctors Russell James and George Jancosek are in Korea; Dr. James Pittman at Ft. Leonard Wood, Missouri; Dr. Wayne Alley, Fort Lawton, Washington, and Dr. John Morfas at Ft. Leroy Johnson, New Orleans, Louisiana.

Dr. and Mrs. Norris Lovan's new address is 213 "B" Begonia, Oceanside, California.

Dr. and Mrs. Nestor J. Ramirez, Box 173, San Lorenzo, Puerto Rico, have a baby daughter, Loudres Margarita, born August 27, 1956. Dr. Ramirez has opened

his office for the general practice of dentistry in San Lorenzo.

Lt. and Mrs. George B. Robinson sent us greetings from the U. S. Naval Dental Clinic, Navy 926, FPO San Francisco, California.

Dr. William W. Rogers, 2026 E. 1st Street, Tucson, Arizona, has been busy taking state Boards. He writes that he took and passed the Arizona, Colorado and California Boards which he took one after another. He still had enough energy left to send us a Christmas card and his address so I could give to all of you.

Dr. Ellis Shackelford wrote on his Christmas card to Dr. Johnston: "I managed to pass the Arizona Board. I practiced with Dad until the middle of August at which time I entered the Air Force. I went to Montgomery, Alabama, for three weeks and then on to Walker AFB here at Roswell, New Mexico. The town is a nice size western one and we are quite pleased with our surroundings. Mother and Dad are coming over here for the holidays so we should have an enjoyable time. We are getting very anxious for our wee one to arrive January 13." Late flash! Sue Anne Shackelford arrived Jan. 4.

Dr. Donald Stroud is with the 53rd USAF Inf. Sioux City Air Force Base, Sioux City, Iowa.

Listed below are the addresses of the Class of 1933. As usual we sent out questionnaires to the members of the class and these data are the result of their answers. An asterisk before the name indicates we did not receive an answer to our letter. If you know of the address of those for whom we have no address, we shall appreciate hearing from you. We shall also welcome corrections, etc. And now for the

Class of 1933

*Barton, Miles Shumaker
402 Hume Mansur Building
Indianapolis, Indiana
Bobbitt, Ralph E.
Deceased

Boone, Neville Blackmere
113 S. Center Street
Plainfield, Indiana

*Bratton, Raymond Hess
504 Broadway
Gary, Indiana

*Budnick, Edward Stanley
7821 Helen Avenue
Detroit, Michigan

*Crider, Delbert Harrison
Randall Building—2½ Main Street
Greenfield, Indiana

*Dell, Glenn William
404½ W. Main Street
Newark, Ohio

Enyart, Hugh Martin
V. A. Hospital
2601 Cold Springs Road
Indianapolis, Indiana
(Assistant Chief of Dental Service at
V.A. Hospital)

Grant, Lowell Judson
103 N. Line Street
Columbia City, Indiana

Hensley, Frank
424 Medical Arts Building
Richmond, Indiana

*Hickman, Hector Everal
165 E. Washington Street
Martinsville, Indiana

Hinesley, Dale E.
203 East South A Street
Gas City, Indiana

Hodson, Ferral Adamson
302 Wysor Building
Muncie, Indiana

Hutson, Harold Charles
6102 College Avenue
Indianapolis 20, Indiana

*Jefferies, Charles Edward
221½ South Main Street
Goshen, Indiana

Jordan, Victor, Jr.
511 Old National Bank
Evansville, Indiana

Kaler, Lester Aaron
Deceased

Kurtz, Irving Edward
2 Rose Avenue
Jersey City, New Jersey

Lefrak, Bernard David
Medical Tower—675 Broadway
Newark, New Jersey
(*Teaching in Dewey School. President elect of Passaic County Dental Society.*)

Lilly, Albert Jackson Capt.
District Dental Office Building 4
U.S. Naval Base
Philadelphia, Pennsylvania
(*Naval Res. Dental Program Officer 4 ND*)

Lord, Robert Theodore
14 Main Street
Kewanna, Indiana

Marlowe, Ralph Hamilton
117 East Main Street
Plainfield, Indiana

Mayne, Thomas Wells
804-5 K. B. & T. Building
Charleston 1, West Virginia

*McIntyre, Maurice Alton
(Address Unknown)

McKee, Robert Gilmore
516 D Street
South Charleston, West Virginia

Meyers, George Albert
431½ East Broadway
Logansport, Indiana

*Puckett, John P.
(Address Unknown)

Purman, Paul Andrew
Monroeville, Indiana

*Quellman, Irving Jack
(Address Unknown)

Quinn, Gilbert Dietz
1011 Hume Mansur Building
Indianapolis, Indiana

Robinson, Leonard Gerald
#3 Lincolnway
Valparaiso, Indiana

Rogers, Joseph Matthew
Deceased

Roush, Charles Edward
701 Marion National Bank Building
Marion, Indiana

Shearer, Carroll Walter
203 South Main Street
Churubusco, Indiana

Silbert, Sidney C.
Station Plaza
Pompton Lakes, New Jersey

Smith, Roscoe Russell
107½ West 5th Street
Bloomington, Indiana

*Spinning, Glen Shell
(Address Unknown)

Steckman, Floyd David
511 Johnson Building
Muncie, Indiana

Steernerson, Leif
209 East Maumee Street
Angola, Indiana

*Stuckey, Ralph Eugene
(Address Unknown)

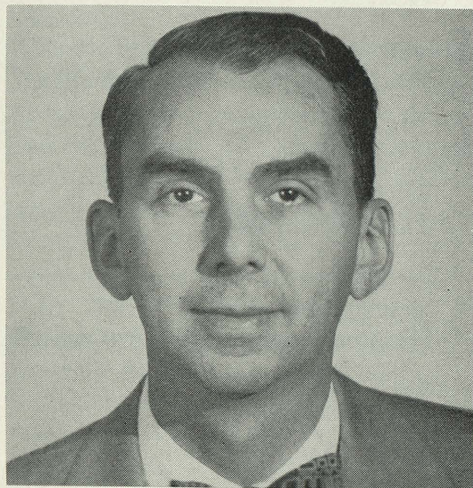
Turgi, John Charles
Deceased

Wills, Henry Clark
Deceased

Wolfe, Herman Bryan
122 N. 6th Street
Vincennes, Indiana
(*Just completed 2 year part-time course in Orthodontics at Ohio State University. Practiced 3 days a week and attended classes 3 days.*) (Now practicing Orthodontics exclusively.)

In July, 1957, we shall plan to give you the addresses of the Class of 1932.

New Appointment To Faculty



Dr. L. Rush Bailey

Dean Hine announces the appointment of Dr. L. Rush Bailey as Professor and Acting Chairman of the Prosthetics Department. He will also serve as a consultant to the crown and bridge department. Dr. Bailey assumed his duties September 1. He comes to Indiana from the Dental School, University of Alabama, where he has been Professor of Dentistry and directed the crown and bridge department since 1951.

Dr. Bailey is a graduate of Northwestern University School of Dentistry and following graduation practiced dentistry in South Bend for eight years. During the war he was in charge of crown and bridge prosthetics at Billings General Hospital, Fort Benjamin Harrison, and was discharged with the rank of Major. From 1948 to 1951 he was Assistant Professor of Operative Dentistry at Indiana University School of Dentistry.

Dr. Bailey belongs to many professional and honorary organizations including the American Academy of Crown and Bridge Prosthodontics, International Association for Dental Research, Omicron Kappa

Upsilon and the Alabama Academy of Science. In 1951 he was Chairman of the Dental Team to Germany, sponsored by the Unitarian Service Committee. He still remains active in the Air Force Reserve and holds the grade of Lieutenant Colonel.

THE DENTAL HYGIENIST

(Continued from page 11)

2. To remove calcareous deposits and stains from the surfaces of the teeth above the gingival attachment, and to polish the teeth.
3. To apply solutions for the prevention of dental decay and to recommend toothpastes and mouthwashes but *not* to prescribe any therapeutic dentifrice.
4. To take and process a full-mouth X ray of quality acceptable for diagnostic purposes.
5. To advance any educational programs the employer dentist recommends. This service is deemed equally as important as the operative procedures she performs.
6. To participate in dental meetings, guidance programs in secondary schools, and community dental health projects.
7. To be cognizant of all office tasks and policies in case she has to carry on in an emergency or to help train new personnel.

The control of the dental hygienist in these activities and the adaptation of her education to the specific policies of an office is the responsibility of the employer dentist. As it is impossible for the school to educate the hygienist to handle the problems which are unique to each office, the employer dentist must expect to devote some time at first to orient the worker to her new environment. If at anytime the employer dentist has cause to criticize her work, behavior, or appearance, he should arrange to do so personally in a private conference. As the captain of the team



Students first learn prophylaxes technique on dentoform mounted on manikin.

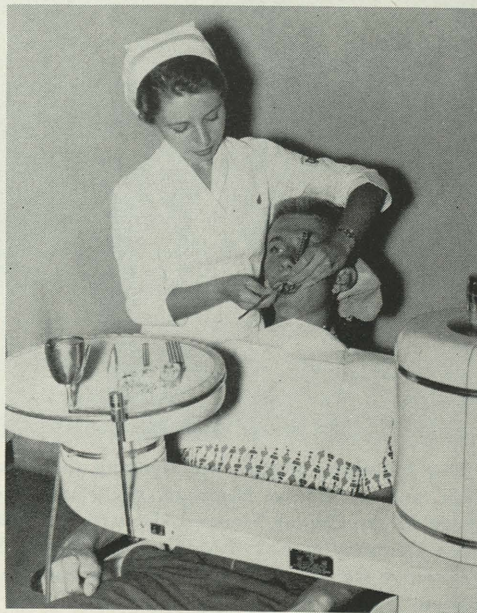
this is his responsibility and one which should not be delegated to anyone else.

On accepting a position in a private dental office the dental hygienist assumes that the employer dentist has established his need for her services either by previous employment of a dental hygienist or by making a detailed analysis of his practice in terms of the number of prophylaxes to be done each month, the number of radiographs to be taken each month, physical facilities which can be made available for her use, and duties already assumed by other personnel both adequately and inadequately. Since it is the prerogative of the employer dentist to seek the dental hygienist for employment, she can also assume that he wishes to transfer certain professional services to an associate in order to avail more time for him to perform other operative procedures; that he is convinced of her capabilities to perform these services and further that both his patients and the personnel in the office have been informed of what the responsibilities of this new worker are to be and are prepared to accept her.

Under no circumstances should the first

dental hygienist be employed in a private dental office until preparation has been made for her. Neglect to do so will lead to many embarrassing situations which will produce tensions in the office resulting in unhappiness of all personnel and the dissatisfaction of patients.

As I have stated previously, there is a vast difference in the education of the dental hygienist and in the provisions of the more recent laws regulating her practice now and forty years ago. These changes have been concomitant with changing concepts in dental education to meet new needs. Dentistry has gained recognition as a health profession with emphasis on prevention. As programs for the prevention of disease require more personnel than those for the relief of pain, the dental profession is faced with the problem of supplying personnel to meet the need. Comparisons have been made of the increased efficiency of the dentist who uses additional equipment and one or more assistants and a dental hygienist and one who practices unassisted. The 1950 study conducted by the Bureau of Educational Research of the A.D.A. shows



Hygienists begin clinical work only after perfecting laboratory technique.

(Continued on next page)

that the dentist working alone saw 25 patients a week. With one assistant the number rose to 49, and with two or more to sixty or more patients a week. The dentist who expands his practice in this way stands to benefit financially as well as discharge his responsibilities to the public more adequately.

The dental profession has only recently developed significant preventive measures. It is believed that as the profession enlarges its acceptance of this concept, the dental hygienist will become more important to the newer developments of dental practice and service.

Postgraduate Courses and Symposia

March 13, 1957—Symposium on Prescription Writing

March 11-15, 1957—Course on Partial Denture Design and Construction

April 3, 1957—Symposium on Crown and Bridge

April 8-11, 1957—Postgraduate Course in Pedodontics

April 17-18, 1957—Postgraduate Course in Endodontics



Two Fulbright scholars are studying this year at the dental school. Dr. Takao Fusayama, left, and Dr. George Mumford, right, are pictured here with Prof. Ralph W. Phillips, Chairman of the Dental Materials Department. Dr. Fusayama heads the Department of Operative Dentistry at Tokyo Medical and Dental School while Dr. Mumford is a member of the operative staff at the University of Sydney, Australia.

These scholars will be spending most of their time studying teaching and research methods in dental materials. However, they are also including work in the operative and crown and bridge departments. Both have contributed liberally to the dental literature in their countries and are continuing this research while at Indiana.

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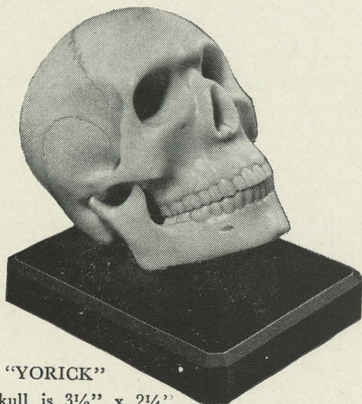
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