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Dear Trojan Dental Family,

Welcome to the Spring 2016 issue of TroDent!

In this issue, we celebrate the contributions of women to dentistry. It wasn’t that long ago that dentistry was nearly universally male. I’m sure many of our alumni can remember a time when there were only a few women in their classes. Some of these pioneering individuals — like Dr. Carol Gomez Summerhays who graduated in 1978 and now leads the American Dental Association (p. 21-22) and Dr. Cherilyn Sheets who graduated in 1968 and serves on Ostrow’s Board of Councilors (p. 23–24) — have served as role models for ensuing generations. Today, nearly 50 percent of our student population is women, and I think it was the efforts of groundbreaking women like these alumnae that have inspired more women to join our profession.

Later this spring, Ostrow will be celebrating two more amazing women at our Friends of Dentistry Gala. Dr. Mahvash Navazesh joined Ostrow’s faculty in 1987. During the past decade, she has set an incredible example as the associate dean of academic affairs and student life. Read about her career on pages 17–18. The second honoree, Dr. Roseann Mulligan, has been working in Ostrow’s mobile clinic since it began, serving alongside her mentor Dr. Charles “Charlie” Goldstein. She officially took the helm in 2000 and is now the associate dean of community health programs and hospital affairs. Read more about Mulligan on pages 19–20.

I can confidently say that Ostrow is a much better place because of the contributions of strong women like Drs. Navazesh and Mulligan.

Another woman we’re lucky to have on faculty is Dr. Natalie Tung, who, after blazing a trail in the traditionally male-dominated field of oral and maxillofacial surgery, joined Ostrow in 2014. The mother of two has inspired a whole new generation of women to know they can have it all — their dream careers and a happy family life. You can read more about Tung on page 25–26.

In addition, we’ve got a “5 Things to Know About” on Dr. Jack Lytle (p. 15) who was honored this spring with a 2016 USC Alumni Service Award for his longtime contributions to USC. And, on page 37, Harris Done DDS ’63 pens a column, telling us what has inspired him all these years to do international service trips with the student group AYUDA.

Whatever your interest, I think you’ll find a little something in the following pages to inform and entertain you. So please, sit back, enjoy the issue and, as always, fight on!

Avishai Sadan DMD, MBA
Dean
G. Donald and Marian James Montgomery Professor of Dentistry

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THE ACCIDENTAL AMERICAN DENTIST 17-18
BY YASMINE PEZESHKPOUR MCM ’16
Dr. Mahvash Navazesh left Iran in the late ’70s for what was supposed to be a one-year residency program. But life had other plans for Ostrow’s associate dean of academic affairs and student life who has called Los Angeles home for nearly 40 years.

A CHAMPION FOR THE UNDERSERVED 19-20
BY HOPE HAMASHIGE
Dr. Roseann Mulligan MS ’87 has dedicated her career to increasing access to care for underserved populations. The associate dean of community health programs and hospital affairs shares what helped shape her career.

MADAME PRESIDENT 21-22
BY BREANNE GRADY MCM ’10
ADA President Carol Gomez Summerhays DDS ’78 reflects on her nearly four-decade career in dentistry, the transformation of women’s roles in that time and how USC helped set her up for professional success.

THEN AND NOW 23-24
BY JAMIE WETHERBE MA ’04
We compare the experiences of Board of Councilors member Cherilyn Sheets DDS ’68 and vice president of the Class of 2016 Soo Kyung Lee DDS ’16 to see how women’s experiences in dentistry have changed over nearly 50 years.

THE TRAILBLAZER 25-26
BY JOHN HOBBS MA ’14
Women can have it all, according to Dr. Natalie Tung, a wife and mother who’s also blazing a trail in the traditionally male-dominated field of oral and maxillofacial surgery.
FEATURES

PUTTING OUR HEADS TOGETHER 27–30
BY JOHN HOBBS MA ’14
The Interprofessional Geriatric Curriculum aims to improve future patient care by pairing teams of USC health professions students with low-income seniors for a hands-on didactic experience.

THE LGBTQ AMBASSADOR 31–32
BY JOHN HOBBS MA ’14
Jonathan Nguyen DDS ’17 wants to improve both dental health and access to care for LGBTQ individuals by better educating providers in gender and sexuality issues.

THE CHILDREN’S DENTIST 33–34
BY JAMIE WETHERBE MA ’04
Lenise Yarber DDS ’06 overcame tremendous challenges in pursuit of her career. Today, she tries to give back by dedicating a portion of her practice to Denti-Cal patients.

OSTROW TREASURE HUNT 12
Our hunt for extraordinary items across the Norris Dental Science Center takes us to the USC Wilson Dental Library and Learning Center.

CONTRIBUTORS

HARRIS DONE DDS ’63
Done served as president of the Alumni Association and the Century Club and co-edited the Centennial, a commemorative book detailing the dental school’s first 100 years. Done was selected as “alumnus of the year” in 2000 and was given a part-time faculty teaching award in 2005. Done counts having aided underserved populations throughout the world as one of his most important accomplishments. He does all this with the help of USC dental students through the non-profit AYUDA International. Read what keeps him inspired on p. 37.

KAUSHIK MUKHERJEE
Mukherjee is a second-year predoctoral student in Dr. Janet Moradian-Oldak’s Lab at the Center for Craniofacial Molecular Biology. Having received a bachelor of dental surgery degree in India and a master’s in craniofacial biology from the University of London, he decided to further his academic growth here at USC. Currently, he works on the biomimetic reconstruction of dental hard tissues such as enamel and dentin. Mukherjee shares some of his scientific discoveries, which won several awards at Ostrow’s 2016 Research Day, in this issue’s Cerebral Download on p. 35.

WENDY O’DONOVAN PHILLIPS
O’Donovan Phillips founded her marketing agency Big Buzz to provide dental practices nationwide with research-backed marketing. Wendy has been published in The Hollywood Reporter, The Washington Times, The Denver Business Journal and several other publications. She speaks across the country on how to take the guesswork out of dental marketing, and her book KABOOM!: The Method Used By Top Dentists for Explosive Marketing Results helps dentists build thriving practices with marketing backed by strategy. She offers Trojan dentists some advice in Mouthpiece on p. 14.
USC dentistry leads nation in dental school fundraising.

BY CALEN OUELLETTE
CHIEF DEVELOPMENT OFFICER
EXECUTIVE DIRECTOR OF EXTERNAL RELATIONS

The Campaign for the University of Southern California has crossed the $5-billion mark toward its $6 billion goal only five and a half years after the university began its historic fundraising effort.

As part of that endeavor, the Herman Ostrow School of Dentistry of USC is closing in on the $100-million mark of its own $115-million fundraising initiative, making the initiative one of the most successful in dental education to date.

More than 4,000 donors, friends and alumni alike, have contributed to the dental school so far. With your help, we are advancing the dental school’s mission of teaching, research, patient care and public service while expanding the university and school’s impact and influence around the world.

Every dollar helps us make an impact. This support has generated millions in vital scholarship support, endowment funds for faculty recruitment and retention, as well as grants and gifts to enhance community outreach programs, including the opening of the world’s largest mobile clinic earlier this spring.

Looking ahead, we hope to build upon the success with targeted improvements to our classrooms and clinics to ensure USC dentistry remains at the forefront of dental education well into the 21st century.

During my time at dentistry, I have had the opportunity to work with a number of motivating and impressive individuals. I’m truly inspired by how many individuals remain connected to USC dentistry decades after they’ve tossed their mortar boards in the air and began their professional careers. The desire to give back among these individuals, either with a cash gift or a future pledge, resounds with so many of them. It’s that mix of loyalty, Trojan pride and generosity that has made USC dentistry one of the top dental institutions nationwide for nearly 120 years.

Dean Avishai Sadan’s leadership has cultivated a time of growth and prosperity at the Herman Ostrow School of Dentistry of USC. The fact we are aligned with the University of Southern California and continuing our ascension to eminence is both an honor and a call to action.

In the coming months, we will be announcing some exciting new objectives and endeavors for the USC dental community, including a revamped alumni association helping to serve our graduates with resources and opportunities that enhance their careers. In addition, a new alumni-centric website and smart phone app are in the works! We have so much to celebrate thus far with even more coming down the pike. It is a privilege and honor to be the catalyst for a lasting legacy at USC.

Fight On!
A $3 million gift from the Hutto-Patterson Charitable Foundation makes the clinic on wheels possible.

BY JOHN HOBBS MA ’14

At 48 feet long — just five feet shy of a standard semi trailer — and 22 feet wide, it’s the largest mobile dental clinic in the world.

And this spring, the Herman Ostrow School of Dentistry of USC celebrated the opening of the colossal clinic — the crown jewel in its mobile fleet — with a ribbon-cutting ceremony and walk-through tours at its first stop in Pasadena, Calif.

“You know, standing here today, I can’t help but think how happy Charlie Goldstein would be to see how the program he started has flourished,” said Dr. Roseann Mulligan MS ’87, associate dean of community health programs and hospital affairs, referencing the late faculty member often called the “father of USC’s community dentistry.”

“Charlie often said the best thing you can do in life is to help others,” she said. “I hope to impart that wisdom to every one of my students, year after year, so that one day no one will have to suffer through dental pain simply because they cannot afford to see a dentist.”

More than 85 USC dental students attended the event at Pasadena’s Westminster Presbyterian Church, where Ostrow faculty, staff and students provided dental treatment to 120 disadvantaged children.

“It is our hope that these community experiences engender in our students a lasting commitment to give back to the community,” said Avishai Sadan, dean of the dental school.

Other speakers included Marilyn Flynn, dean of the USC School of Social Work, and Catherine Hutto-Gordon, who represented the Hutto-Patterson Charitable Foundation, the donating organization who made the colossal clinic possible with a $3 million gift.

“Today, my dream has come to fruition,” Hutto-Gordon explained, “to combine social work and dentistry and share my family’s good fortune.”

Hutto-Gordon is a social worker; her grandfather was a dentist.

The Hutto-Patterson gift not only helped build the custom-made clinic and provide faculty endowments and student scholarships to community-minded individuals in both dentistry and social work, it also sets up a collaboration between the two schools to better provide health care and outreach services to disadvantaged children and their families.

After the ceremony, visitors toured the state-of-the-art clinic, which includes eight dental chairs, a separate X-ray room and a patient-calming system known as Synesthesia, in which soft music and vibrant imagery are used to soothe any frazzled dental nerves.

The mobile clinic is the eighth in Ostrow’s fleet. Outside of the military, Ostrow has the largest mobile dental clinic fleet in the nation.

The new mobile clinic will be making stops in Bakersfield, Calif., in May and early June and another stop in San Diego in late June and early July.

USC’s mobile dentistry program began in the late 1960s when dental faculty, staff and students would drive out to remote areas in their own cars — packed full of dental tools and supplies — to provide care to migrant farm workers.

Each year, the Community Oral Health Programs provide more than $1 million in free dental care to underserved communities from Central California to the Mexican border.

Moradian-Oldak has been named the new chair-elect of the Dentistry and Oral Health Sciences section of the American Association for the Advancement of Science (AAAS).

“I hope to bring excitement about excellent ongoing research in our dental community and increase awareness about oral health-related activities among the AAAS scientific community,” Moradian-Oldak said.

Established in 1848, AAAS is an international non-profit organization dedicated to advancing science for the benefit of all mankind. Globally, AAAS has more than 120,000 members, with sections representing 24 scientific fields.
BE SEEN BY MORE THAN
10,000
USC DENTISTS

TRODENT, THE OFFICIAL ALUMNI PUBLICATION OF THE HERMAN OSTROW SCHOOL OF DENTISTRY OF USC NOW OFFERS ADVERTISING OPPORTUNITIES.

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The new Pediatric Dental Clinic at LAC+USC Medical Center strives to meet the needs of underserved foster care children.

BY BREANNE GRADY MCM ’10

It all started with a hidden population’s need: Many foster care children in Los Angeles County weren’t able to find dental care.

This spring, Ostrow, in partnership with the Violence Intervention Program (VIP) and the office of Los Angeles County First District Supervisor Hilda Solis have opened the Pediatric Dental Clinic (PDC) in the Village at LAC+USC Medical Center.

The idea for the PDC started with VIP’s Dr. Astrid Heger, who approached Dr. Roseann Mulligan MS ’87 in 2011 about this special population of children.

“For the longest time, foster children have had an unmet need for dental care. It is often the first or second most-cited need,” Mulligan said. “This lack of care is in part due to the frequent moves from family to family that foster children undergo, which does not allow the discovery and building of a relationship with a nearby dental office.”

By locating all health care services at one site — the Village at LAC+USC Medical Center — foster children will now have a place where they can receive dental care, integrated with their medical care, on a regular basis, Mulligan explained.

“The PDC’s ability to meet the oral health needs of foster children and especially to provide ongoing preventive care has been lacking for far too long for these at-risk children,” she added.

The PDC is part of an $18.4 million grant received by Ostrow in 2012 from First 5 LA to fund the Children’s Health and Maintenance Project (CHAMP) grant. The goal of the CHAMP grant is to reach an overall target population of 45,000 children.

“The initial construction funds for the PDC were also supplied by First 5 LA and granted to Dr. Heger to build a dental clinic that would care for 0-5 year olds,” Mulligan said. The PDC participates in the training of 10 Ostrow advanced pediatric dental residents, with the hopes that the experience will increase the resident’s desire to help underserved populations in the future.

Mulligan, who serves as Ostrow’s associate dean of community health programs and hospital affairs, has a personal goal to get oral health services to people who don’t have any other access. Whether it’s foster children, the developmentally disabled, geriatric patients or homeless vets (to name just a few discrete populations Ostrow serves), she believes that oral health care should be available to all.

“I think it’s important to your overall systemic well-being as well as your psychological outlook,” Mulligan said. “There are many populations where the lack of good oral health has a profound effect on individuals, the quality of their life, potentially their ability to get jobs, their ability to do well in school.”

Staffed by Ostrow pediatric dentistry faculty, the three-chair clinic had its soft opening in early February and has been providing up to 20 oral screenings a day for foster children who come to the Village at LAC+USC for their medical visits. In addition, the clinic provides toothbrushes and toothpaste, helps the children brush their teeth and educates foster parents on the importance of oral health care.

Within the next few months, pre-doctoral dental students who have expressed an interest in caring for very young children will also be participating in the PDC experience.

The others have been selected for publication in Oral Surgery, Oral Medicine, Oral Pathology and Oral Radiology; the Journal of Oral & Facial Pain and Headache; Oral Surgery, Oral Medicine, Oral Pathology and Oral Radiology; the Journal of Oral & Facial Pain and Headache; and Oral Oncology. The online master’s of orofacial pain and oral medicine began in 2012. It is a 37-month program designed for full-time practicing dentists. The first cohort graduated last year. In 2014, Ostrow added a second web-based program, the online master’s program in geriatric dentistry.

OSTROW FACULTY MEMBER NAMED “DENTIST OF THE YEAR”

Earlier this spring, Cheryl Goldasich DDS ’99 was honored as “Dentist of the Year” by the California Academy of General Dentistry at a ceremony held in Newport Beach, Calif. Goldasich was selected based on her work as chair of the Academy’s Fellowtrack, an education-based program with lectures, hands-on courses and events designed to instill a philosophy of lifelong learning in dental students. She currently oversees Fellowtrack student clubs at all six California dental schools and also serves as a mentor for the USC and UCLA clubs.

CAPSTONE PROJECTS FROM ONLINE PROGRAM TO BE PUBLISHED IN PRESTIGIOUS PEER-REVIEWED JOURNALS

Students from the first graduating class of the online master’s of science in orofacial pain and oral medicine recently had five research articles accepted for publication in four prestigious peer-reviewed journals. Two articles will appear in the Journal of the American Dental Association. The others have been selected for publication in Oral Surgery, Oral Medicine, Oral Pathology and Oral Radiology; the Journal of Oral & Facial Pain and Headache; and Oral Oncology. The online master’s of orofacial pain and oral medicine began in 2012. It is a 37-month program designed for full-time practicing dentists. The first cohort graduated last year. In 2014, Ostrow added a second web-based program, the online master’s program in geriatric dentistry.
By day, Ostrow alumna and assistant professor of clinical dentistry Kathy Elizondo can be found at Union Rescue Mission, supervising USC dental students as they treat the often neglected mouths of L.A.’s homeless population. After the final patient is treated, Elizondo laces up her running shoes and begins training for the next big race as part of her quest to run 50 marathons in 50 states by the time she turns 50. That’s 1,310 miles worth of shoe rubber! Welcome to the secret life of Kathy Elizondo, aspiring member of the 50 States Marathon Club.

Photo by Ryan Forbes
Elizondo has run marathons in 43 of the 50 states. Still remaining:
Alaska, Hawaii, Maine, Minnesota, Montana, North Carolina and Rhode Island.

Q&A
Kathy Elizondo

How did you first come by the goal to run 50 marathons?

At first, I planned on only completing one marathon — the Suja Rock ‘n’ Roll Marathon in San Diego in 2003. So I joined a running club and finished my first one with friends from the club. Then a few of my running buddies and I thought it would be fun to do the Chicago marathon and visit the city, then Arizona had a new Rock ‘n’ Roll Marathon in Phoenix, so we all decided to do that one. After that, everyone wanted to do the New York City marathon, and it snowballed from there. I realized that I had completed 4 or 5 states, at that point, and I heard there was a 50 States Marathon Club.

How many states have you covered so far?

So far I’ve completed marathons in 43 states. This year, I will be running the Providence Marathon [Rhode Island] in May, the Twin Cities Marathon [Minnesota] in October and the OBX Marathon [Outer Banks, North Carolina] in November. I plan on finishing my last 2 states — Alaska and Hawaii — in 2018. I’ll finish my 50th state when I turn 50, hopefully!

What’s the hardest part about running marathons?

For me, the hardest part is being out there on my own for many races. I’m a slow runner, so I finish toward the back of the pack. Sometimes, I’ve passed by water stations that have been abandoned because the volunteers thought everyone finished the race! (laughs) But I always make it to the finish line, and I’ve never been the last one — so far! (laughs)

In what ways does racing impact your performance in the clinic?

It reduces stress and gives me a happier demeanor. It also helps me with time management because you’ve got to meet deadlines at work just like during a race. Remember, you’ve got to finish within a certain time frame or else they’ll kick you off the course, which has almost happened to me a couple of times. Also, just having the sense of accomplishment and more physical energy to perform at work is very beneficial.

Who inspires you?

There are many marathon runners who inspire me. I’ve met marathoners who are leg amputees, cancer and heart attack survivors. I’ve read about runners with multiple sclerosis, cerebral palsy, autism, runners over the age of 80; female runners weighing more than 200 pounds. Marathoners run the whole gamut; they are people from all walks of life and are all inspirational to me!
1. The Treatment of Malocclusion of the Teeth and Fractures of the Maxillae: Angle’s System — Written by the American father of orthodontics Edward H. Angle, this 1900 reference guide instructed dental students on the simplest and best methods to treat malocclusion, which included some odd (by today’s standards) interventions.

2. The Mouth and the Teeth — This 1880 book, written by surgeon James William White, covered topics like tooth anatomy, hygiene, decay and extractions for lay audiences, from a medical expert perspective.

3. Edentulous Skull — While dental students can check out actual human skulls from the USC Wilson Library for their studies, this rare skull whose owner lost all her teeth is not in circulation.

4. Dental Kit — This dental kit from the 1870s, consists of 4A. reusable syringes; 4B. “nerve paste,” which contained arsenic placed on the tooth pulp to devitalize it; and 4C. a bottle of alloy used for dental restorations. Also common at the time: the use of cocaine as an anesthetic. These items and more can be found on display in the USC Wilson Dental Library in a display titled, “Hidden Treasures of the Wilson Dental Library.”
LIFELONG LEARNER

ANNA CHEN
MPA ’05, DPPD ’15

In her (near) decade at Ostrow, Anna’s gone from being an administrative assistant to being called doctor.

Anna Chen is a true testament to the Trojan principle of lifelong learning. The Ostrow staffer — who was hired as an administrative assistant — left her parents in China in 2003 to pursue a master’s in public administration at the USC Sol Price School of Public Policy.

In 2011, Chen enrolled in the doctor of policy, planning and development program at USC Price, where she learned many valuable skills, including advanced research methods, cross-sectoral leadership and public-private partnerships.

Chen also completed an internship with the United Nations and conducted field research in Egypt, Ghana and China.

She says her education has better trained her to serve the diverse population of Ostrow, where she currently works as a curriculum and budget planning coordinator in the office of academic affairs.

“Often times I am reminded of the benefit of continuous study — not only for self-improvement, but also for the possibility of helping others and making a positive contribution to our community and society,” Chen says.

—Yasmine Pezeshkpour MCM ’16
A Method to the Marketing Madness

BY WENDY O’DONOVAN PHILLIPS

Most dentists feel sick when they think about marketing. Overwhelmed. Confused. Apathetic. But there’s no need to. Here is an easy-to-follow method for marketing:

1. Survey Patients
You will learn what they love most about your practice. It’s not technology, philosophy or credentials. It’s that you made their lives better. This resonates not only with them, but with their friends and family — other potential patients. Surveys will also reveal what media patients use to find a new dentist. By knowing this, you invest only in the marketing tactics that will help the practice now.

2. Define a Message and Design Equation
Look back through the surveys for response trends. Based upon those patterns, answer these questions: What are three ways that my patients say my practice is different than other practices? What is the one thing people like best about the practice? What does this message look like when translated into design? The answers become your message and design equation, a guide for how all marketing materials should read and look. It’s the ultimate in continuity and efficiency.

3. Build a Balanced Marketing Formula
From your surveys, you know what tactics resonate with your patients. There are about 35 marketing tactics — including print advertising, paid online advertising or community involvement — that any given practice could deploy, and only a handful of those will be the focus during the next 12 months. Let the patient surveys show you which ones.

4. Deploy the Plan!
Hire the right experts, whether a team member or an outside company, to deploy the tactics that appear on your balanced marketing formula and to develop those marketing materials in keeping with your signature message and design equation.

It’s simple, yet wildly effective.

For more information on marketing your practice, purchase O’Donovan Phillips’ book, KABOOM!: The Method Used by Top Dentists for Explosive Marketing Results, available on Amazon.
Lytle was awarded the 2016 Alumni Service Award by the USC Alumni Association for 60 years of exceptional service to the university. In addition to his leadership on numerous university support groups, he and his wife established the John J. and Marcia L. Lytle Endowed Scholarship that has been supporting dental students since 1992.

His mentor Marsh Robinson DDS ’46, MD ’52 influenced his path in oral and maxillofacial surgery and inspired him to pursue both a doctor of dental surgery degree as well as a medical degree at USC. Lytle and Robinson were among the first generation of oral and maxillofacial surgeons to receive dual degrees, which has now become the profession’s educational standard.

Lytle has served as both president and examiner on the American Board of Oral and Maxillofacial Surgery. His renowned contributions to oral and maxillofacial surgery include mentoring multiple generations of surgeons as well as pioneering the research and practice of outpatient anesthesia.

While Lytle was a student at Glendale College in 1953, he worked weekend shifts as a ladies’ shoe salesman at Mandel’s Fascinating Slippers in Glendale, Calif. He was “employee of the month” on numerous occasions for leading sales in the store.

Lytle acquired an interest in boating after he and a Keck classmate bought their first sailboat together upon completion of their medical degrees in 1965. From there, his hobby took off; he went on to own nine more boats and even started Antigua Yachts West, a boat development and charter business.
Only a few decades ago, female participation rates in dentistry were in the single digits. Today, 25 percent of practicing dentists are women. And, with nearly 50 percent of the nation’s dental students being female, the traditionally male face of dentistry is headed for complete gender parity in the coming years. In this issue, we celebrate the contributions of Trojan women to the field of dentistry. Turn the page to get started.
“... In Iran I never thought being a woman in my profession was unique. It was when I was in the U.S. ... that I would get comments like, ‘Do you have hands that are strong like a man to do what you’re doing?’”
THE ACCIDENTAL AMERICAN DENTIST

She came to the United States for a year-long residency program. Nearly 40 years later, Dr. Mahvash Navazesh is still here, helping to lead one of the nation’s top dental schools.

BY YASMIN PEZESHKPOUR MCM ’16

Being the first-generation college student and the only female in your family to study in a foreign country can be intimidating in itself. But doing so when your country’s undergoing revolution and your student visa’s on the line takes heavy resolve. That’s exactly what Associate Dean in Academic Affairs & Student Life Mahvash Navazesh had to have in the late ’70s during her general practice residency at the University of Pennsylvania.

Navazesh will be honored on May 21 at the Friends of Dentistry Gala, where she, alongside Dr. Roseann Mulligan, will receive Excellence in Education Awards.

TOP OF HER CLASS

Navazesh attended Pahlavi University in Shiraz, Iran, a university that was privately funded by the Iranian Shah Mohammad Reza Pahlavi, a Western-influenced leader.

“I remember the Shah talking to me once during a visit to the school,” Navazesh says, “I was the tallest in my class so I could not blend in, and when he asked me questions, I was so nervous.”

During her time in dental school, she remembers visits by the Shah and his wife Farah, who was a major advocate for promoting women toward professional endeavors.

Navazesh graduated at the top of her class and was valedictorian for the dental medicine class of 1977. She was also one of six graduates from her class selected to travel to the United States to complete a residency.

“It was never my intention to finish first or to be at the top of my class,” she says. “I was mainly interested in being selected to fulfill my residency at University of Pennsylvania, and I did what I had to do to be selected.”

Navazesh left her family and friends to begin her residency in August 1977.

“I had never left my family before; I had never even gone on a trip within the country without them so this decision to travel alone as a woman to the U.S. was a very big deal,” she says.

After completing her general practice residency, Navazesh began an oral medicine residency, hoping to return to her Iranian alma mater to create an oral medicine residency program.

But, in 1979, war broke out in Iran, and her plans changed indefinitely.

“The Iranian Revolution started and, as a result, my scholarship that was funded by the Iranian government was discontinued, and I was subject to deportation,” she says.

“When I left home, I thought I would be gone for 12 months. I never thought almost 40 years later I would still be in this country.”

It was then that Navazesh decided it was critical that she gain the education and credentials she needed to practice in the United States. She took her boards at Penn and received her DMD degree in 1983.

THE ONLY WOMAN IN THE ROOM

As Navazesh’s career started to gain more exposure, she began to realize she was often times one of the few — if not only — females in the room.

“When I was in school in Iran I never thought being a woman in my profession was unique,” she explains. “It was when I was in the U.S. and my career was taking off that I would get comments like, ‘Do you have hands that are strong like a man to do what you’re doing?’”

Navazesh said she would just laugh it off and continue working hard doing what she wanted to do most: help others.

In 1986, Navazesh’s family — minus her father who had passed away — moved from Iran to Southern California. She, too, relocated to be close to them and began working at Ostrow as a volunteer faculty member.

REVOLUTIONARY IDEAS

It was in the halls of Ostrow that Navazesh met her mentor, the late Distinguished Professor Emeritus Dr. Clifton Dummett, who encouraged her to pursue her then-revolutionary ideas, which involved looking at the impact of oral health care on the whole body, rather than just restoring form and function of teeth.

“My background was clinical research, hospital dentistry and oral medicine. It wasn’t the bread and butter of restorative dentistry,” she says of the profession’s focus at that time. “I wanted to bring the rest of the body into the picture, and I had a lot of resistance.”

Dummett always advocated for her, encouraging her to fight for what was right. Another volunteer faculty member did too: Tom Feder ’75, DDS ’80, the man that would later become her husband and father to their two daughters, Daisy and Lilly.

“He was very helpful and supportive when I was new at USC. He was also very persistent even when he realized I was not interested in dating anyone from work,” she says, with a laugh, recalling their first encounters.

Thirty years since starting as a volunteer faculty, Navazesh now serves as a professor of diagnostic sciences and associate dean of academic affairs and student life at Ostrow.

“As a woman I made a lot of sacrifices and turned down a lot of professional opportunities because I wanted my family to have the stability that I didn’t have in my home country,” she says.

“I left my home in Shiraz, the city of red roses and wine, to go to Philadelphia, the City of Brotherly Love, and ended up here in the City of Angels, which I now call home.”
Dr. Roseann Mulligan has dedicated her decades-long career to increasing dental care access to underserved populations across Southern California.

BY HOPE HAMASHIGE

It was as a dental student in the 1970s that Roseann Mulligan MS ’87 found her passion for providing dental treatment to underserved populations.

On weekends, Mulligan would travel with her school’s mobile dental clinics, traversing the roads of California’s agricultural heartland, to provide dental services to the children of migrant farm workers.

Mulligan says that while joining the mobile clinic student crew definitely appealed to her, she had no idea how tough the work would be.

With limited time to spend in any one place, the challenge was to safely treat as many children as possible in a compressed time frame. The people of the community typically brought food and drinks to the faculty and students to keep them going throughout the very long days. At night, the dental students usually took their bedrolls and slept on a local school library floor.

It was during these weekend trips that Mulligan began to realize the power of bringing care to people who might not otherwise have access to a dentist.

Throughout the week, Mulligan’s patient pool in clinical sessions was almost entirely made up of individuals with developmental or physical disabilities, few of whom had regular access to a dentist.

Whether at the school or in the community, Mulligan found that the patients were deeply grateful for the rare opportunity to see a dentist, and their gratitude filled her with a sense that she had something valuable to give.

“My goal became to identify those populations with no access to care and to figure out a way to help them,” Mulligan says.

TAKING THE REINS AT OSTROW

Mulligan, who is currently Ostrow’s associate dean of community health programs and hospital affairs, began her career at USC in 1982.

Three years later, she established a clinic at Ostrow that provides care to the elderly, the infirm and people with disabilities. On its 30th anniversary, Mulligan and her husband, Professor Glenn Clark, provided an endowed gift to the clinic, now named the Dr. Roseann Mulligan Special Patients Clinic.

She also established USC-affiliated clinics at nursing homes and retirement facilities. Her most recent accomplishment in this area was creating an online geriatric master’s program for practicing dentists who seek ongoing education to meet the changing needs of their aging patients.

In 2000, Mulligan took over leadership of Ostrow’s Community Oral Health Programs, which was once led by her mentor, Dr. Charles “Charlie” Goldstein, who founded USC’s mobile dental clinics. Though passionate about the elderly and special needs patients, Mulligan was inspired to be a champion for other underserved populations by colleagues like Goldstein and Niel Nathason, who made it their life’s work to bring care to a variety of disenfranchised people.

Through their collaborative efforts, there are now two USC-affiliated dental clinics on Skid Row, which serve the large number of homeless people who live in the area. USC also has a relationship with several area schools as well as partnerships with WIC centers, federally funded health and nutrition programs for women, infants and children. In all, Ostrow is affiliated with or staffs more than 200 sites across Southern California that serve traditionally underserved populations.

Despite these accomplishments, Mulligan continues to identify people in need of dental services and find ways to build a safety net for them. Her most recent project is founding a dental clinic for at-risk and foster children who often do not receive regular dental care.

“Just as important as bringing dental care to patients who need it is the fact that she is providing an opportunity for Ostrow students to find a way to serve the community.”

“My goal is to provide those same opportunities to our students.”
"My interest in working with underserved and special needs communities blossomed when I was in school. My goal is to provide those same opportunities to our students."
"There were times when some of our closest friends ... would say 'I can’t believe you can do what I can do’ ... "

MADAME PRESIDENT

ADA President Carol Gomez Summerhays DDS ’78 discusses the evolution of women’s roles in dentistry.

BY BREANNE GRADY MCM ’10
When Carol Gomez Summerhays DDS ’78 entered dental school in the mid-1970s, she was one of only 18 women in her class.

The year before that, there were just two women in the graduating class.

At the time, Summerhays didn’t take notice of the gender gap.

“I never thought of it as a male/female issue,” she says. “But there were times when some of our closest friends in my class would say, ‘I can’t believe you can do what I can do,’ and it was pretty surprising.”

She attributes her career choice to how she was raised, sharing that her father always encouraged her to get a doctoral degree. This advice allowed her to come unbiased, but she quickly saw that gender wasn’t the only factor; there were other factors at play.

“If you talk to a lot of Asian women, it was a time when women were expected to be teachers and maybe hygienists, but not physicians and dentists,” she explains.

Summerhays defied gender norms of the time in more ways than one. The product of a multi-generational military family, Summerhays was awarded a four-year full scholarship as a commissioned Naval officer prior to her arrival at USC. Upon graduating, she was named a Lieutenant in the United States Naval Reserve.

“When I entered the Navy, there were very few female officers and less than 3 percent of practicing dentists,” she explains. “With any new dental officer coming in, there was always an attitude of ‘let’s see how this one will do!’

More than 30 years later, she has witnessed quite the change in the status quo.

Today, 28 percent of practicing dentists are women, and female students now comprise nearly 50 percent of dental school populations. Ostrow’s class of 2016 has 167 female students (out of nearly 300 students across all programs) graduating this year.

Summerhays believes USC contributed greatly to her professional success and, upon graduating, she felt very confident in her clinical skills.

“When I started at USC, there was USC, and then there was the rest of the world,” she says, laughing. “So, our professors would tell us that we do it this way at USC. The university had such a great reputation throughout the world, and we had extraordinary professors and clinicians who we could learn from.”

One of Summerhays’ mentors was the late Distinguished Professor Emeritus Dr. Clifton Dummett, who encouraged her to pursue active leadership roles in organized dentistry while at Ostrow and throughout her career.

“I wouldn’t be doing what I’m doing today had it not been for Dr. Dummett,” she says.

In addition to membership roles in the American College of Dentists, American Association of Women Dentists, Hispanic Dental Association and as past president of the California Dental Association, Summerhays has also served on Ostrow’s Board of Councilors since 2010.

She strongly encourages all dental professionals as well as students to take advantage of the networking opportunities that organized dentistry provides.

“It really helps to meet others and meet dentists who then become your mentors and colleagues to help you succeed throughout the different phases of your professional career,” she says.

This past year, Summerhays became the 152nd president of the ADA and considers this among her top career achievements and a way in which she can be a catalyst for positive change.

“This is really a pivotal year for the ADA,” she emphasizes. “It’s a time when we’re looking at what our new dentists will face in the future, because practice is changing very rapidly, technology is changing very rapidly.”

While Summerhays’ impressive career is a great model for all students, male and female, she has some specific advice for women entering or already in the field who may seek balance in their family and professional lives.

“I tell women they can make it whatever they want to make it,” she says. “I was able to organize my hours and do things I wanted to do because I had a fair amount of autonomy, and I still think that’s true today: that you really can make your professional career what you want and balance it however you want, but you need to take an active role in doing that.”
THEN & NOW

Two Ostrow women graduating nearly four decades apart sit down to discuss female progress in the field.

BY JAMIE WETHERBE MA ‘04
When Cherilyn Sheets DDS ’68 studied dentistry in the 1960s, only 1.1 percent of dental students in the United States were female, according to the American Dental Association.

“A lot of what I’ve done in my career I’ve been told, “That’s the first time a woman has ever done that,”” Sheets says. “Of course, that’s not the case now, thank heavens. But it was for many of us who graduated around that time.”

We compared Sheets’ experience with that of Soo Kyung Lee, vice president of the DDS Class of 2016, to see how dentistry has changed and what the profession might hold for women in the future.

What made you choose to become a dentist?
Cherilyn Sheets: I read an article my dad authored when I was 15 that listed all of the specialties in dentistry, and it immediately clicked with me. My uncles and father were dentists, and my mom and her sisters all worked in dental offices, so it was a natural choice for me.

Soo Kyung Lee: I was doing research in Alzheimer’s and Parkinson’s in grad school at UCLA, and my principal investigator suggested dentistry. She said it was a career where I could help people while being involved in science, and I wanted to do both.

What were the reactions of those around you when you first realized you wanted to be a dentist?
CS: Dad was a little surprised but very supportive; mom was extremely excited and supportive. Others were pretty skeptical, but I had a mother who always told me don’t let anyone tell you that you can’t do something because you’re a girl.

SKL: I was lucky to have supportive people around me when I chose this path. They thought it was wonderful, especially my mom, because one of my main goals is to be not only a good medical provider, but to become a mom one day. And this is a field where I can balance family and work.

Who were some of the female figures you looked up to when you were in dental school?
CS: I didn’t know any women dentists before I got into school, and there weren’t any women on the faculty. Through the American Association of Women Dentists, I met providers well into their careers who served as mentors for me.

SKL: Dr. Gabriela Anderson leads almost every preclinical course during the first two years of dental school. She has amazing skills; she’s a great teacher and a mom. I really respect that.

What percentage of your graduating class was female?
CS: There were three women in my class out of 108, so less than 3 percent. But that was the most who graduated from USC since the 1920s, so we made headlines in the Los Angeles Times.

SKL: On the first day of orientation, it was about 50 percent female. Right now, it’s 48 percent.

What advice would you give women entering dental school?
CS: I would encourage them to take advantage of special programs that are beyond the normal curriculum and to volunteer for charity outreach programs to learn to be philanthropic by sharing their talents. I hope they would embrace the opportunity to be their own boss because there’s no feeling of wage inequality when you’re your own boss — it’s just what you do with your own two hands and your team.

SKL: I don’t think my advice would be any different for a female or a male student. Dental school is a challenging four years, and you have to be ready for that physically, emotionally and intellectually. If you’re not sure about the field, shadow dentists in different specialties.

With so many women in the field, is this the best time for women in dentistry?
CS: Yes, I think that’s true in many ways. It’s such a wonderful career choice for anybody — particularly women. As more women enter the profession, there needs to be mentoring of female students and graduates entering the profession.

SKL: I highly agree. I think dentistry is a very universal field, and we’ve come a long way in terms of diversity. And with good reason: Many women, including those in my class, are working hard to earn scholarships and become leaders in organizations.

What do you hope to see for women in dentistry in the next 10 or 20 years?
CS: I hope they embrace the opportunities that dentistry uniquely offers women and don’t settle for less than the opportunities that our generation has experienced. The future is really in their hands, and I hope they grab it and run with it, expecting only the best. The next 20 years should be extremely exciting, and I want to work alongside these women as our profession morphs into new areas of oral health.

SKL: I think women will be more inclined to take leadership roles and continue to step into those positions. I would also like to see more female mentors: powerful, influential female mentors to guide women in dental school.

Editor’s Note: Responses have been edited for clarity and length.

“... I had a mother who always told me ‘Don’t let anyone tell you that you can’t do something because you’re a girl.’”
—CHERILYN SHEETS
The world’s changing, and we have shown that we can be whatever — surgeons, deans or even future presidents.”

Dr. Natalie Tung forges ahead in the typically male-dominated field of oral and maxillofacial surgery.

By John Hobbs MA ’14
ike most people, Natalie Tung would get squeamish at the sight of blood. “Every time I would see or smell blood, my mind would instantly revert back to a horrible childhood memory of seeing someone’s leg get amputated without anesthesia,” says Tung who grew up in Vietnam.

While most can often avoid the object of their fears, Tung had a dream that would require her to face her’s head on: She wanted to become a surgeon.

Tung uses the story to motivate her students, encouraging them to let nothing get in the way of pursuing their dreams.

The 35-year-old daughter of Vietnamese immigrants who went on to become a Harvard-educated oral and maxillofacial surgeon and assistant professor of clinical dentistry at the Herman Ostrow School of Dentistry of USC is certainly a case study in tenacity.

**A TYPE-A PERSONALITY**

Tung lived in Vietnam until immigrating to the United States when she was 9. Her mother and father — both teachers in Vietnam — found work at a dental lab and a printing company respectively to afford to live in Orange County.

A lover of learning from way back, Tung prospered in school. She was the valedictorian of her high school class.

“I’m very proud of that,” Tung says, “because the year I graduated, there were seven Vietnamese valedictorians across Orange County.”

After high school, she moved to Northern California to attend the University of California – Berkeley. During college, Tung, who had her heart set on becoming a pediatrician, worked for an ophthalmologist.

“Across the hallway from the ophthalmologist’s office, there was a pediatrician,” Tung says. “I’d always hear all these kids crying, and I thought, I don’t think I want to do that for the rest of my life!”

At that point, Tung began looking into dentistry. “My mom said, ‘You know it’s a great lifestyle. You get to be your own boss. You don’t have to work five days a week. You can have a family life.’”

With that, Tung pursued a doctor of dental surgery degree at UCLA, with an eye on going into oral surgery.

“I’m such a type-A person that I like challenges,” she says. “I felt that surgery would be the most challenging for me — both from the physical and emotional perspectives.

**MEDICAL SCHOOL — A VACATION?**

During dental school, Tung married one of her classmates, Austin.

The couple welcomed their first child, Matthew, during Tung’s fourth year in dental school. “I have a picture of my baby son on my shoulder at graduation,” says Tung who had finished her requirements early and was spending the last days of dental school studying for her board examinations.

After graduating, she moved to Boston where she completed a year-long internship before entering Harvard University’s oral and maxillofacial surgery residency program.

The program is highly competitive. Tung says hundreds apply each year, but the program only accepts three, one of whom is typically a female.

“When you’re accepted into a residency at Massachusetts General Hospital [where Harvard’s program is housed], you are not female or male,” Tung says. “You just do your best as a resident.”

Harvard’s six-year residency program — like one of Ostrow’s oral and maxillofacial surgery programs — confers both a doctor of medicine degree as well as a certificate in oral and maxillofacial surgery upon its graduates.

“For the average person, medical school is very busy, but for those of us who’d been through oral surgery, it wasn’t very busy. It’s more like a vacation,” Tung says, with a laugh.

**WOMEN CAN HAVE IT ALL**

During Tung’s final year of residency — the busiest, at 120 hours per week — she became pregnant with her second child.

“I was operating in the O.R. for eight hours standing on my feet when I was in my third trimester,” she says. It was, in fact, right after finishing a six-hour surgery that Tung’s water broke. She had to rush herself to the hospital and have an emergency cesarean section to deliver her second son, John.

Tung says she was able to have it all — a husband, children and a thriving career — because of the support she got both from her spouse and her in-laws, who often helped care for her children.

“We are now living in a world where it doesn’t have to be a male breadwinner and a female stay-at home mom,” she says. “Roles can reverse.”

Tung’s job at Ostrow began in 2014 after Mark Urata ’85, DDS ’89, OMFS ’93, MD ’96, General Surgery ’99, Plastic and Reconstructive Surgery ’02, Craniofacial Surgery ’02, director of Ostrow’s then new division of oral and maxillofacial surgery, asked her to come aboard.

“He convinced me that he has a vision, and I bought into that vision,” Tung says. “I have a vision too. I don’t just show up to work. I’m going to make this place better.”

Some of their goals for the division have included integrating the culture of oral and maxillofacial surgery better into dentistry and to pique more students’ interest in oral and maxillofacial surgery.

“When I first started here, there were probably 10 people interested in oral surgery; now there are about 50,” she says.

Tung also tries to use her own experiences to motivate her students, particularly the women.

“Several of the older, female students often ask me, ‘If I do oral surgery, I’ll be like 30-something when I’m done. When do I start a family?’ I tell them, ‘You can do it. It’s all doable,’” Tung says, pointing to her own career.

“I think the world’s changing, and we have shown that we can be whatever — surgeons, deans or even future presidents.”

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**TRODENT SPRING 2016 26**
here’s an old parable that tells of a group of wise men unknowingly standing in a dark room with an elephant.

Each is allowed to touch just one part of the unknown object to identify it. Afterward, the men debate vigorously: One is convinced the tusk is a spear; another thinks the tail’s a whip; someone argues the animal’s flank is a wall.

It is only after sharing information and working together that they’re able to arrive at the realization that a giant pachyderm stands before them.

It’s this collaborative spirit that is quickly becoming the foundation of interdisciplinary

Interdisciplinary course brings disparate health professions together to provide health care consultations to low-income seniors.

BY JOHN HOBBS MA ’14
team-based health care models — also called integrated health care models — which are spreading across the nation.

“People don’t have diseases in neat little categories,” says Dr. Cheryl Resnik, associate professor at the USC Division of Biokinesiology and Physical Therapy, which is part of the Herman Ostrow School of Dentistry of USC. “It’s about getting to know a person as a complete human being as opposed to a single issue.”

Resnik is one of a handful of faculty members serving as faculty advisers to students enrolled in the Interprofessional Geriatric Curriculum (IPGC), an innovative course that pairs teams of USC health professions students with low-income seniors facing chronic illnesses.

IPGC began in 2011 with a $450,000, 3-year grant from the U.S. Department of Health and Human Services awarded to the family medicine department at the Keck School of Medicine of USC, with Dr. Jo Marie Reilly, associate professor of clinical family medicine as co-principal investigator. Reilly envisioned using IPGC to teach primary care physicians how to work in interdisciplinary teams.

Since then, the program has grown, adding disciplines and increasing the number of students enrolled. In total, nearly 400 future health care professionals have taken the course in the past five years.

“As health care delivery becomes more interdependent and complex, it is critical that each health care team member works in concert to provide optimal patient care,” Reilly says. “IPGC’s success is its ability to value the contribution of each health care student and help them recognize that the most important member of the health team is the patient. Working together, each student maximizes and complements each other’s skills to provide the best patient care possible.”

continued »
HOW IT WORKS

The course — a voluntary externship at the Herman Ostrow School of Dentistry of USC — holds three sessions at low-income senior residences across Southern California. Its goal is twofold: to better educate students from dentistry, medicine, occupational therapy, physical therapy, physician assistant practice, pharmacy and social work about what the other professions do and to provide health assessments, exams and referrals for disad- vantaged senior citizens.

“The students really enjoy working as a team,” says Jeremy Teoh, IPGC dental faculty adviser and Ostrow clinical assistant professor. “They like to be able to interact with other health professionals and work together for a common goal, which is the health of the senior resident.”

Senior citizens were chosen to “teach” the future health professionals because they often take many medications for a variety of age-related illnesses, making them ideal patients for a multidisciplinary patient care model.

The class meets five times, with three sessions centered around actual patient health care consultations. One health care consultation session is dedicated to medication management and cognitive testing, another is focused on mobility and home safety, and a third highlights oral health care and nutrition.

Each class session begins with a didactic portion where representatives from each of the professions share with the group of about...
90 students information about typical assessments their profession conducts that can be administered by any medical professional to better understand a patient’s overall health status.

Afterward, the teams — comprised of at least one representative from each profession — and a faculty adviser visit low-income seniors in their apartments to provide home-based consultations. At the end, the teams discuss their observations and strategize how best to help the patient.

**THE DENTAL ASSESSMENT**

“I felt like I had my own in-house medical team,” jokes Denise Clayton, 63, one of the seniors given advice by the USC interdisciplinary team. “I love the concept of possibly making it a one-stop service for seniors. That really is a good plan.”

During Clayton’s third consultation, Ostrow student Jonathan Nguyen DDS ’17 conducted an intraoral and an extraoral examination, explaining to both Clayton and the other students what he was looking for.

“It became very apparent that the other professional students did not have any training about the oral cavity,” Nguyen says.

Occupational therapy student Lynn Kim OTD ’16 was one of those students.

“I learned that dentistry’s scope is much broader and holistic than what I had given it credit for,” Kim says. “Dentists also consider how the state of one’s oral health may affect one’s psychosocial functioning — self esteem, social interactions — and nutritional status.”

From the dental exam, Nguyen determined that Clayton needed a great deal of dental work, something that didn’t come as a surprise to Clayton.

“I still have most of my teeth, but I know they need some work. They’ve been in this body a long time,” Clayton says, explaining that the high cost of dental treatment had been a deterrent.

The students provided Clayton with a list of affordable dental care options so she could take care of her teeth.

“They’re doing their best to help me out with that, and that’s a beautiful thing,” Clayton says.

**LOOKING TO THE FUTURE**

While the program proves beneficial to the seniors receiving such attentive health care advice, it’s what it can do for future patient care that could make the biggest impact.

“We’re hoping collaboration will become more second nature to them in the future,” Teoh says. “They’ll think, ‘I have a question that I’m not able to answer,’ so I’ll call my colleague in such and such health profession.”

“The experience has shown me the limitations of dentistry,” Nguyen says. “By acknowledging those limits, I can work with experts of different fields to provide the best health care.”

The faculty members behind IPGC hope the program continues to grow so they can teach even more future health care professionals how to work collaboratively.

“I actually would like USC to set up a Center for Excellence in Interprofessional Education, Research and Practice,” Resnik says, pointing out that integrating interprofessional education is now an accreditation standard for every single health profession at USC.

“There’s really nothing like this experience,” Resnik adds. “It offers our students a 360-degree view of the patient’s life rather than just looking at it through their own lenses.”
Albert Schweitzer Fellow Jonathan Nguyen DDS ’17 aims to increase LGBTQ cultural literacy among dental professionals.  

BY JOHN HOBBS MA ’14
When Darby Osnaya visited an Inland Empire dental office, the 27-year-old would often get more than just a professional opinion from the office’s dental assistant.

“The negative feedback I would get from her would range from judgmental looks and scoffs when I would paint my nails to unnecessary comments about my appearance,” says Osnaya, a health educator from Garden Grove, Calif., who identifies as gender fluid, a dynamic mix of male and female. “She’d say stuff like ‘You make such a handsome boy when you’re not feminine.’”

While Osnaya was able to brush off the hurtful comments, it did impact his relationship with his dental care provider.

“I started going plain and non-femme to avoid any negative looks or feedback,” Osnaya says.

It’s situations like these — or even worse — that Ostrow dental student Jonathan Nguyen hopes to quash by better educating dental professionals about LGBTQ diversity and patient care issues.

In a survey of 3,000 self-identified LGBTQ Californians, dentists were among the top six health care providers to whom the respondents chose not to come out. They were also listed among the top six health care providers to have rejected LGBTQ identities, according to the 2012 study titled, “First, Do No Harm: Reducing Disparities for Lesbian, Gay, Bisexual, Transgender, Queer and Questioning Populations in California.”

These survey results were part of the reason Nguyen devoted himself to helping future dental professionals bridge gaps in cultural competency as part of his Albert Schweitzer Fellowship project.

“It’s not necessarily about trying to get dental professionals to ask their patients, ‘What’s your sexual orientation?’ or ‘What’s your gender identity?’ Nguyen says. “It’s more about if the subject pops up, then you’re more aware of how you can talk to someone of that identity.”

Nguyen says he felt LGBTQ issues were not given a lot of exposure at dental school, particularly since they’re seldom relevant to the actual clinical treatment of teeth.

“It’s not so much how it can improve treatment,” he says. “It’s more about how we can improve patient experience.”

In the past few years, the openly gay Nguyen has become something of a spokesperson for classmates, faculty and staff eager to learn more about LGBTQ patient care issues in dentistry.

He’s given cultural sensitivity lectures about LGBTQ diversity and patient care to his classmates and to Ostrow faculty and staff members. He’s also spoken at continuing education courses.

“I had people come up afterward and say, ‘Wow, that was a very informative lecture!’” Nguyen says. “They said they were more confident with talking about sexual orientation and gender identity at the end.”

Recently, Diane Melrose MA ’11, professor of clinical dentistry and director of dental hygiene, asked Nguyen to speak to Ostrow’s dental hygiene students.

“I am very excited about this oppor-

“It’s not so much how it can improve treatment. It’s about how we can improve patient experience.”

—Jonathan Nguyen DDS ’17

“arly last year, Diane Melrose MA ’11, professor of clinical dentistry and director of dental hygiene, asked Nguyen to speak to Ostrow’s dental hygiene students.

“I am very excited about this oppurtunity for Jonathan to share his expertise and help increase our awareness and communication skills with the LGBTQ patient population,” Melrose said in the email invitation to the event.

Last summer, Nguyen began Ostrow’s first LGBTQ student group called the Society for Queers and Allies in Dentistry, or “SQUAD” for short.

The group of about 10 dental students regularly holds lunch-and-learn events where they’ll discuss LGBTQ topics including diversity, patient care and HIV/AIDS in the transgender community.

SQUAD also participates in outreach programs, including the Models of Pride Conference hosted by the Los Angeles LGBT Center this past October, where they see individuals — like Darby Osnaya — whose oral health has become imperiled because of bad experiences with dentists.

“We had another transgender individual who said he was completely denied treatment at a dentist’s office,” Nguyen said of a patient he met at the event.

“When we did dental screenings, it was really sad because there were a lot of hopeless teeth that could’ve easily been managed had he had a better rapport with a dental provider.”

Nguyen also sits on the executive board of the Southern California LGBT Health Conference, which earlier this spring held its second LGBTQ patient care event, drawing nearly 250 health professionals, students, currently practicing health care providers and LGBTQ community members.

The event, organized by health professionals at USC, UCLA and the University of California-Irvine, aims “to stimulate thought and learning around various topics relating to LGBTQ health and wellness in the context of individual lives and stories,” according to the event website.

This year’s conference featured three separate tracts: one focused on transgender issues, including gender confirmation surgery; another on LGBTQ body issues, including intimate partner violence; and a third on LGBTQ lifespan issues, including youth homelessness and geriatric health concerns. Keck students Justin Trop MD ’17 and Jennifer Franks MD ’17, both of whom also hold positions on the executive committee, felt these topics were lacking in the general health care curriculum at the Keck School of Medicine of USC — something they both seek to change.

“I believe the tides are shifting,” Trop says. “Students are initiating a wave of change, and administrators are beginning to acknowledge the importance of such change.”

Recently, for example, Keck administrators approved a lecture on LGBTQ health, according to Franks, thanks to the advocacy work of MedGLO, a medical gay and lesbian organization with more than 70 members at USC.

Still, Franks said she’d like to see the issues woven into every applicable course to help future health care professionals understand their LGBTQ patients and make them feel more comfortable sharing the details of their lives.

“I think of my friends and family, my loved ones who identify as part of the LGBTQ and queer community, and I imagine the standard of care I would want them to receive,” she said. “I think of what I want their doctors to know, how I want them to treat my loved ones.”

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Despite low reimbursement rates, Ostrow alumna Lenise Yarber DDS ’06 dedicates nearly half her South Bay practice to providing dental treatment to Denti-Cal patients.
Lenise Yarber’s dental practice is best described as a high-tech playground. Toys, a big-screen TV and video games line the waiting room while the office is adorned with decals of waterfalls and animals of all kinds; the forest motif even extends to the leaf-shaped sinks.

Inside treatment rooms, children watch overhead televisions or iPads loaded with kid-friendly content while soothing jazz plays in the background.

“Patients get a feel that they’re not in a dental office,” says Yarber DDS ’06 who opened her South Bay practice in 2014. “It’s a very welcoming environment for children and their parents.”

Her patients range in age from just a few weeks old to young adults with special needs.

“Some have delayed development or different syndromes that make them more childlike,” she explains. “They love the cartoons, how we talk to them and how we provide treatment.”

Beyond the iPads and decor, perhaps what’s even more unique about Yarber’s private practice is her range of clientele. Patients with Denti-Cal, the state’s dental insurance for low-income residents, make up about 44 percent of her practice, while the rest are a combination of HMO and PPO plans.

“I have a very diverse practice; I see all kinds of patients all day long,” Yarber says. “Everyone gets an hour slot regardless of their coverage.”

Yarber’s dedication to low-income patients is personal.

“I come from an underserved community,” says Yarber, who dropped out of high school and became a single mother at 16. “I always told myself when I became a practitioner, I wouldn’t discriminate against Denti-Cal because there are a lot of children who need good, quality dental care in a safe and clean environment where they feel comfortable.”

While the quality of care remains consistent for all of Yarber’s patients, the reimbursement rate does not. For instance, she receives $27 for a cleaning through Denti-Cal while a PPO pays her $122.

“There could be two kids right next to each other that are getting the same 45-minute cleaning for very different costs,” she says.

Yarber also offers nitrous to Denti-Cal enrolled children who have difficulties at the dentist at a rate of $22.50, about a third of the payment she receives from private plans.

“Parents always ask me, ‘Are you sure this is covered by our insurance?’ because no one has ever offered [nitrous] before,” she says. “They’ll say, ‘My child has always cried and fought,’ and [the child] ends up getting restrained during care. They’ve been treated this way for so long they think it’s proper.”

She says parents are often surprised when they are invited into the treatment rooms alongside their children, and when their kids leave toting a hygiene bag.

“One mom told me, ‘We’ve never gotten a toothbrush when we’ve gone to the dentist,’” she says. “And her child was 6 years old.”

Yarber understands how these children and parents are often treated: Her daughter had Denti-Cal growing up.

“I’ve experienced it all — from doctors assuming that I was uneducated because I had Denti-Cal to doctors giving me the utmost respect and my child quality care,” she says. “I’ve been to clean, nice offices, and I’ve walked into offices where there’s a thousand kids.”

Yarber’s interest in dentistry began at a young age, but she had doubts it was an attainable career for her. “Since I dropped out of school, being a dentist didn’t seem tangible,” she says.

After attending community college and earning her high school equivalency, Yarber enrolled in USC’s dental hygiene program.

“At that time, we took a lot of the same classes as the dental students and some of the hygiene students would set the curve,” she says. “And I started thinking, ‘I can do this.’”

With encouragement from her instructors, Yarber started taking dental school prerequisites while completing her hygiene degree. “My daughter would sit in the hallway at one of the desks and watch me take my classes,” Yarber says of attending night school at Los Angeles Harbor College.

After graduating from dental school, Yarber and her daughter moved to Harlem, N.Y., for two years while she completed her pediatric specialty at Columbia University.

The two returned to SoCal where Yarber worked for other practices before opening her own.

“My patients’ parents have invited me to many career days,” she says. “They say, ‘I want to bring you to my child’s school, so the kids can see you and know what they can do.’”

Thanks to the example Yarber has set, many students might pursue dentistry. But it seems Yarber’s daughter, now 20, won’t be one of them. “She was with me all that time, and I think she’s tired of it and wants to do something else,” Yarber says with a laugh. “So, she’s pre-law.”
REGROWING ENAMEL AT THE DENTIN INTERFACE

Attempts to recreate the intricate hierarchical microarchitecture of dental enamel have eluded the imagination of enamel researchers and material scientists for decades. What makes enamel, the most mineralized tissue in vertebrates, unique is its inability to regenerate itself when breached upon carious attack. Preservation of enamel structure and function, to conserve the structural integrity of the tooth, has clearly emerged as one of the most overwhelming challenges in clinical dentistry.

I started my PhD in the craniofacial biology graduate program in May 2014. Being a dental student, I was inclined to work on a translational research project that would equip me with a well-rounded scientific experience to bridge the gap between lab and clinics. At that time Dr. Janet Moradian-Oldak at the Center for Craniofacial Molecular Biology (CCMB), along with postdoctoral research associate Qichao Ruan, was working on a novel amelogenin-chitosan hydrogel to regrow enamel-like tissue in initial carious lesions. Amelogenin, the most predominant protein in the enamel matrix, plays a vital role in regulating the orientation and elongated growth of apatite crystals. I started working closely with Dr. Oldak towards making this methodology clinically viable. Inspired by the functional role of native amelogenin in orchestrating enamel mineralization and based on a critical understanding of its active domains, we rationally designed two smaller amelogenin-derived peptides: P26 and P32. The objective was to evaluate the mineralization efficacy of the smaller synthetic peptides while drawing comparisons to their full-length natural counterparts.

In the past few months, our team has generated some exciting data with the newly synthesized peptides. In this emerging project, we decided to venture into a different tissue system for the first time: dentin. The idea was to address deep dentin caries by concurrently regrowing oriented enamel-like mineral on the dentin lesions while occluding the exposed dentinal tubules from the surface and within. The highlight of this study was that the newly formed apatite layer rendered the treated dentin lesions with mechanical properties that were significantly higher than that of healthy dentin in just five days after a single application of the peptide. For the first time, we confirmed such a robust organized enamel-like mineral regrowth firmly bound to the surface of dentin. Compared to enamel, dentin poses a greater challenge in guiding mineralization due to a more complex organic matrix that delays the kinetics and growth of residual crystals. The conventional restorative materials lack the composition, chemical properties, graded anisotropy and structural framework of enamel crystals, which compromises their bonding strength at the tooth interface. This leads to the age-old problem of increased incidences of marginal leakage, secondary caries and eventually failure of the restoration.

Looking to the future, a more rational way of treating a disease as rampant as dental caries would be to emphasize preventive dentistry and design innovative means of replicating enamel-like microstructure at the earliest onset of tooth decay. The enticing prospect of enamel regeneration and repair rests on a rather comprehensive understanding of enamel matrix biology and protein-mineral interactions. This proof-of-concept suggests that a biomimetic approach is well suited for dental bioengineering. It offers an excellent opportunity to develop novel biomaterials to treat incipient dental caries, dentin hypersensitivity and noncarious cervical lesions.

The project, spearheaded by Dr. Oldak and supported by National Institute of Dental and Craniofacial Research and the USC Coulter Translational Research Partnership Program, has assembled a highly skilled interdisciplinary team comprised of clinicians, protein chemists, material scientists, molecular biologists, graduate and dental students and volunteers. Interacting with such an academically diverse panel has been liberating and has enriched my learning curve in innumerable ways. Probably the most riveting moments of my doctoral program so far have been experiencing how wondrously scientific ideas transform and translate to clinical application to benefit oral health care. This has only ‘cemented’ my vision of continuing to strive for quality learning for the advancement of craniofacial sciences in the future. Fight on!

For more information, go to tinyurl.com/amelogenin
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The first six years of my life were spent in Blackfoot, Idaho, a small town located in the middle of the Fort Hall Indian reservation. Impoverished Native Americans often came to town looking for food. When my mother saw them, she sent me out with sandwiches and a bag of fruit for them. Giving back to the underserved was my mother’s way of teaching her children to care about others.

Other mentors of mine were my grandfather Lancelot Peter Nielsen DDS ’17 and my father Jean Christian Nielsen DDS ’44, both of whom were dentists who encouraged me to choose this challenging and useful profession. Mentored by Dr. Guy Ho, my DDS Class of ’63 classmates — Drs. Leon Unterman, Albert Mizrahi, Gerald McClellan, Eugene Zakaryn — and I are now working to mentor our own students to become the next great USC generation.

In 1965, I fulfilled my dream of becoming a pilot. It was at a meeting in Santa Fe, N.M., for the “Flying Dentists,” a group of pilots and dentists who treated indigenous people in Honduras, that I realized it was something I wanted to be a part of. I built a two-chair dental trailer, parked it at Marble Canyon, Ariz., and flew there once a month to treat underserved Navajo Native Americans. My four-seat airplane allowed me to take another dentist and assistants. Without any communication, the Navajo people lined up for treatment minutes after our arrival.

Two years later, my mentor and spiritual leader Spencer W. Kimball asked me to join other medical and educational leaders to create a non-profit organization called AYUDA. I flew my Beechcraft Bonanza to Guatemala to establish our first project in Cunen, where nearly half the children died before turning 5. We built a hospital, medical and dental clinics as well as schools. We also helped upgrade their agricultural system to quadruple crop production. By 1987 the educational and health levels in this valley of 30,000 transformed to levels similar to the United States.

In 1998, the Anaheim City School District asked if AYUDA might provide dental treatment to their underserved students, many of whom came from Mexico and Central America. Dean Howard Landesman DDS ’62, ME ’73 gave permission for USC students to donate their time at schools in Orange County. Over the years, AYUDA has formed a memorandum of understanding with USC.

We work closely with Roseann Mulligan MS ’87 to ensure both techniques and equipment meet USC standards. To date, these clinics in California have treated more than 16,000 patients at a value of nearly $5 million.

Since 1998, AYUDA has included 800 dental students in international clinics from Central and South America to Fiji. This year, our mission will take us to Thailand, where 45 dental students (five from the University of British Columbia), USC faculty and other volunteers will treat 1,000 underserved children.

Making these trips possible is our most generous mentor, Robert Ibsen DDS ’58 who donated money and supplies; rotary clubs; and many generous friends and dentists.

Former student Joseph Field DDS ’08 said of his experience: “Working and serving through AYUDA was the highlight of my dental school career at USC, and I wouldn’t be where I am today without it.”

The joy and satisfaction I have received seeing the gratitude of parents whose children were relieved of pain and given quality dental care cannot be expressed in mere words.

I am also fortunate to have the opportunity to give back as a mentor and teacher to hopefully inspire others to find greater fulfillment to their lives. Leo Rosten’s thoughts of living for a greater purpose truly does bring us joy and fulfillment!
I’ll bet the Herman Ostrow School of Dentistry of USC didn’t plan on this party when they set up my gift annuity!

While USC can’t guarantee that donors in the USC Charitable Gift Annuity program will live longer, the university can guarantee they will enjoy many benefits, including lifetime payments to one or two annuitants, an income tax deduction and a fulfilling gift designated for any program at the dental school.

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