



Oral and Maxillofacial Surgery

**The University of Texas
School of Dentistry at Houston**
2000-2015

by
Robert R. Debes, DDS

with
Donald P. Butler, DDS


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The University of Texas
Health Science Center at Houston

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Dedication

This book is dedicated to all residents of the past, present, and future and to the faculty who have served so well in the Department of Oral and Maxillofacial Surgery at the University of Texas, Houston for the past sixty-five years. Collectively we have made it one of the top training institutions in the world. Our commitment is to keep it that way and to preserve this rich heritage through professionalism in our practice, our lives, and in support of our alma mater.

And To Dolly

Robert R. Debes, DDS

2015

“The properly trained dentist has an important role to play in the management of disease and injuries of the oral and maxillofacial region. We will establish a program that will provide the opportunity for interested dentists to obtain the necessary training to assume that role.”

Edward C. Hinds, DDS, MD

1949

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Robert R. Debes, DDS

About the Author

Robert R. Debes, DDS

The author, Robert R. “Bob” Debes, was born and reared in Beaumont, Texas, the son of Lebanese immigrants. He attended public schools and Baylor University in Waco, Texas, where he received Bachelor of Science and Master of Arts degrees. He graduated from Baylor University College of Dentistry in 1953. From there he began his oral surgery training at Charity Hospital of Louisiana in New Orleans. The Korean War draft was in effect, and he enlisted in the United States Air Force where he served as a captain for two years at Ellington Field, Houston. While serving in the Air Force, he met Dr. Edward C. Hinds, who invited him to join the Department of Oral Surgery at the University of Texas-Houston when he was discharged. The invitation was accepted, and in January 1956, he joined the faculty. He remained for one year and then returned to Charity Hospital to finish his internship. Following this, he returned to Houston and served as a resident at Jefferson Davis Hospital. A year of didactics was completed at the Dental Branch in June 1959.

He then entered private practice in Houston but maintained his association with the Department of Oral Surgery at the Dental Branch as a part-time faculty member. This association has continued for sixty years as of this writing. In 1980, he achieved the rank of Clinical Professor. In September 2000, Bob retired from private practice but remained a faculty member. In 1999, he authored *Looking Back*, which presented a history of the first fifty years of Houston’s OMS training program.

Dolly, his beloved wife of forty-three years who died in November 2001, supported him personally and professionally. Bob attributes successes he has enjoyed to her presence and will always remember her steadying influence. He and Dolly are the parents of two children, Ann Michelle Watkins and Robert, Jr., and four grandchildren, Grayson, Meghan, Fuller and Layton, all of whom reside in Houston.



Donald P. Butler, DDS

Collaborator

Donald P. Butler, DDS

Donald P. “Don” Butler, from Dragerton, Utah, is a 1967 graduate of Baylor University College of Dentistry. He spent 22 years as a commissioned officer in the United States Public Health Service, completing OMS training in 1974 at the USPHS Hospital, Staten Island, New York and New York University School of Dentistry. His USPHS career included assignments at The National Institute of Dental Research, National Institutes of Health, USPHS Hospitals at Staten Island, Baltimore, and Seattle, and the Gallup Indian Medical Center, Gallup, NM. He joined the UT Houston full-time OMS faculty following retirement from the USPHS in 1989. During his fifteen-year tenure at UT Houston Don spent the majority of his time at the Dental Branch where he served as OMS Department Vice Chairman and Director of the OMS Predoctoral Program. He retired in 2004 and returned to Mendon, Utah, where he and his wife Lynn are enjoying retirement.

About This Book

Robert R. Debes, DDS

In a sense this book is a sequel to our first, *Looking Back, A History of the Oral and Maxillofacial Surgery Training Program, University of Texas–Houston*, which was published in 1999. It will take up where we left off with the start of this new century. With the passing of time, the departure of John Helfrick, and the appointment of Mark Wong as chairman of the department, inevitably changes would be made in the structure and direction of the program. This book will provide the reader with documentation of these changes. It is not intended to be a free-flowing narrative; rather, it is a document in the words of the faculty involved in the training program and the School of Dentistry about the role they played. It is written and presented in their own words and relates their experience in the training program. I am indebted to all of them for their spirit of willingness and cooperation in this endeavor.

The financing of the publication of this book was made possible by the generosity of Dr. and Mrs. Bernard Katz. Bernard (1965) and his wife Gloria endowed the department chairmanship in 2014 with a gift of \$500,000. Some of the monies derived from the investment of the corpus are being used for publication costs. Thank you, Bernie and Gloria, for your generous gift.

*Dean John Valenza,
Bernard Katz,
Gloria Katz, and
Mark Wong, who
currently holds the
Bernard and Gloria P.
Katz Chairmanship
in Oral and
Maxillofacial Surgery*



Many titles were considered for this book, but in the final analysis the one chosen was a description of the training program as it has evolved and functioned as we entered a new century. In the future, we think, others will emulate these ideas and methods in their teaching. All the changes in personnel, relations with the hospital district, and the several hospitals themselves have helped this program to proceed in a forward direction. However, these changes go far deeper and cast a wider net than that. In the past fifteen years, relations with the department and the trainees have been forged so that both can work together on multiple projects. This relationship is stronger than at any time in the history of the training program. The writings in this edition provide clear evidence of the bringing together of the alumni of this program. This relationship must remain and be a cornerstone for the future. It is my hope that those who follow in the training program will pay heed to the dedication and devotion that their peers have extended towards the OMS Department and UTSD and follow in their path.

Included in this edition are several sections developed by Don Butler, my friend and collaborator. One is a database listing all residents who have completed our program since 1949. The appendix section includes an alumni directory, a faculty directory, and several interesting listings which document where our residents attended dental school and where they went after graduation. All of this data will be a valuable source of information to the department and the UT School of Dentistry for years to come.

So now I invite the reader to learn about what transpired in the years 2000-2015 at UTHSC-Houston. It is an interesting story and one that will have an influence on our program for years to come. It is my hope that someone will update this history in the future and find the material presented in the first two editions of this evolution a valuable source of information.

Foreword

Robert R. Debes, DDS

A chance meeting, a casual conversation, a thought, an idea, a suggestion, and finally a request and the decision was made to write a second edition of the history of the UT Houston Department of Oral and Maxillofacial Surgery. Some fifteen years had passed since the first edition was published. That book told the history of the program from its beginning in 1949 to our 50-year celebration in 1999. And what a great history it was.

But why continue the story now? This question had to be answered to my satisfaction. As a faculty member in the department for some 60 years, I have witnessed many innovative changes. And many more are on the way. It is my feeling that all of this is worth documenting while it is fresh in our memories and individuals are still around to give first-hand knowledge of their participation. In addition, perhaps this second edition will in some manner serve as a template for training future residents.

The challenge of how to write this new volume and document the material in an interesting and informative form was discussed with my friend and editor of the first edition, Don Butler. Don retired from the Dental Branch in 2004 and is now living in Utah. He consented to provide his expertise and advice, and we were on our way.

The material and data compilation for this book was done in a manner similar to our first edition; i.e., questionnaires were sent via the Internet and direct mailing. An effort was made to contact every trainee to make this book as complete as possible. (If someone is not included, it is not because of lack of effort on our part.) Information gathered from the questionnaires was used to produce and update the directory and tables in this book.

This edition will cover the years 2000–2015, including residents who started the program in 2014 and will finish in 2020. The period 1949–1999 saw 169 residents; 2000–2020 includes 105. Thus, the total number of residents anticipated to finish the program from 1949–2020 is 274. Of course, not all trainees finish the program and not all limit their practice to our specialty, but most do. Since joining the department in January 1956, I have been privileged to know and be a part of the training of all but a few. It has been an honor I will cherish always.

This new edition of our history has potential interest to a variety of groups. The intended readership of this book is first and foremost our graduates. In order to know where you are going, knowing where you came from is important. Hopefully by reading the first edition and this one, graduates will gain a clearer picture of the UT Houston OMS program and its rich history. The UT Houston OMS program was the first in the state of Texas and the Southwest, and, at this writing, it is the largest in the United States and perhaps the world. It is recognized as among the best, if not the best. This is quite an honor and achievement to be cherished and maintained. So, faculty and alumni, hold up your heads and be proud.

Faculty and administration may also enjoy learning more about our trainees, where they came from and where they chose to practice. The demographics are interesting and will help serve as a resource for future resident applicants. Additionally, other training programs may use this book as a guide in their effort to gain information on their trainees in a similar manner.

And last, but not least, vendors that manufacture the products we use and charitable foundations that provide grants will find this book useful. This written word will document what we have done, enabling them to readily see what we have produced through our graduates and research programs. It is an enviable record. UTHSC-Houston is a great institution in a great city.

This book is not intended to rewrite the history of our program, for the facts of history can only be written once. The 1949-1999 discussions and data remain basically intact and mostly are left out of this book. Rather, this edition documents the changes in our training program over the past fifteen years and the significant impact these changes have had on our trainees and our position in the Texas Medical Center. Keep the first book handy. It is a significant introduction to this updated edition.

As in any dynamic program, UT Houston OMS has evolved. There was a time when one, perhaps two years, of postdoctoral work was the norm for our training. Now our trainees commit to four or six years, depending on their desire for a medical degree. Previously one or two trainees were accepted into the program each year; now with the expansion of training sites and faculty, at least six are taken. Residents formerly lived in the hospital and took their meals in the cafeteria. This is no longer the case. And the pay scale has in a sense exploded. In the early 1950s, this intern made \$10 a month, plus room and board. Now a chief resident can earn up to \$60,000 a year.

Our department receives over 200 applications each year for the six places to be filled. Of this number of applicants, about 45 are interviewed and the final six are matched. The competition is fierce, but the training and experience make it all worthwhile. The department has put together faculty and service chiefs without peer in the nation's training programs. This fact, in a large measure, has contributed to the outstanding reputation the program maintains among its peers.

This edition was developed in a different manner than the previous volume. Here, service chiefs and faculty wrote about their various areas of expertise and the facilities to which they are connected. In this way, the reader will get a first-hand account of what our trainees experience and the responsibilities expected of them in their various rotations. These accounts will be much more accurate than trying to recall experiences in the future.

With time, memories of actions and achievements can become blurred. One can try to recount the past, but too often our remembrances, both real and imagined, are clouded by the passage of time. In no small part this has been the reason we have chosen to chronicle our evolution and achievements of the past fifteen years. We have seen an explosion of innovations and achievements at UT Houston during this time period, and we are proud. We want to share what has been done and accomplished with our readers and ensure that we remember it ourselves.

It is worth noting that in its 65-year history, the Department of Oral and Maxillofacial Surgery has had only three chairmen: Edward C. Hinds, 1948-1983; John F. Helfrick, 1984-2000; and Mark E. Wong, 2001 to the present day. This continuity and stability is without parallel in teaching institutions and is in no small part the reason our program has achieved its enviable position of leadership and recognition.

As we visit our recent collective past, our goal is to provide an update of what we think of as improvements in our mission as practicing oral and maxillofacial surgeons. Much has changed since the birth of our program in 1949. And many more changes will take place in the future, for the only constant in life is, indeed, change.

Taking on the responsibility of putting together another edition of our history was not an easy one. Many were asked to contribute, and all responded with their best

effort. In a way these writings are a “thank you” to those who came before us and to those who will follow. All of us are grateful for the opportunity to serve.

This edition would not have been possible without the help and encouragement of many friends and colleagues. Don Butler, my friend and former co-faculty partner, came on board with this project at the beginning. Don has been a major source of information for both editions. His advice, encouragement, and computer expertise were invaluable. He provided valuable suggestions and advice to make this book more useful as a reference. The database he has put together will serve the department and the program for many years to come. It is a model for other institutions to emulate.

Thanks are also extended to the service chiefs and faculty who wrote their first-hand accounts of the training residents were given while on rotation. Contributions from these individuals in their own words provide a more vivid and accurate picture of that portion of the educational experience. All their names are listed as contributors along with their subjects in the table of contents.

The author would also like to thank all alumni who responded to the questionnaire. These responses indicated to me an interest in the future success of the book and the data. Without their input, much of these writings would be less complete. In addition, sincere gratitude is extended to our very capable department support staff, Teresa Granhold, Michelle Savoie, and Cynthia Jackson, who were always willing to provide support and assistance to this project whenever they were asked, and they did. The author also wishes to acknowledge the help of Kelly Williams, Graphics Manager, and Donna Horbelt, director of UTHHealth Printing & Media Services.

We believe that the photographs included throughout this book are very important and clearly add to its overall presentation. The original images were shared by many individuals, and we are very grateful to each of them. Brian K. Schnupp, senior graphic designer and photographer, UTSD Media Production Services, deserves special mention. His images appear throughout the book, including the title page photo and most of the individual portraits, including those that Don Butler used to build composite images in the resident section. UTSD communications manager Rhonda Whitmeyer was also very helpful in locating and providing images and deserves a sincere vote of thanks. Most of the remaining photos were submitted by current and former faculty members, alumni and residents, for which we are also very grateful. All photographic credits are listed in detail on the final pages of this book.

A special word of thanks is also extended to Dr. Marie Dalton, who lent her writing, editing, and publishing expertise to the manuscript. Her suggestions and revisions helped provide coherence and interest to this edition.

Mention must be made of my family whose continuous support throughout my long life has helped sustain me. My deepest gratitude goes to my daughter, Ann Debes Watkins, and her husband, Dr. Duane Watkins; and to my son, Robert (Bobby) Debes, and his wife, Mariana; and, of course, to my four grandchildren, Grayson, Meghan, Fuller and Layton.

Being a part of the UT Houston training program for these many years has been a rewarding experience. The department has a special place in my life—and always will be in my heart. It is my hope that these histories will bring the alumni closer to the alma mater and result in friendship and commitment toward the UTHSC-Houston Department of Oral and Maxillofacial Surgery, one of the great teaching institutions of the world.

Evolution of The University of Texas School of Dentistry

Robert R. Debes, DDS

MD Anderson Hospital has long been a major player in the politics and direction of the Texas Medical Center. It has been located in the TMC since 1954, and today it is recognized as the number one cancer treatment hospital in the world. Many think MD Anderson Hospital is the crown jewel of the entire University of Texas Educational System. Our Dental Branch was located adjacent to Anderson Hospital and convened its first class in the fall of 1955. Both buildings had the same architect and a similar pink marble exterior. Both institutions prospered and grew in their first fifty years. But as the years passed and MD Anderson became a world leader in cancer research and treatment, their patient base exploded and a need for more space was realized. The most practical and available nearby was the parcel occupied by the Dental Branch next door. And as fate would have it, the Dental Branch was experiencing growing pains of its own. As with any fifty-plus-year-old building, a need existed to upgrade most of the physical facilities and much of the teaching equipment.



*UT Houston
Dental Branch
Building 2003*

With the convergence of these two situations, in 2008 a plan was put into place that MD Anderson would take the land occupied by the Dental Branch and the future school of dentistry would be relocated. Many sites were considered, but the final decision was made to rebuild in the University of Texas Research Park, located about one mile south of the Texas Medical Center.

The new school would incorporate the newest techniques for dentistry. Its larger size would allow an increased enrollment from an average of 65 students to about 100, which would have the added benefit of improving the dentist-to-population ratio in Texas. Cutting edge research and teaching space, which would in turn attract top-notch students and faculty, resulting in increased recognition for the school, would be another benefit of this new construction.

Construction was begun in the fall of 2009 and completed in June 2012. The new school of dentistry is six stories tall, has 300,000 square feet, and cost \$155 million. It is the newest dental college in the United States and was the most expensive to build.

The Oral Surgery Clinic, located on the first floor, includes eight suites used by predoctoral students and four for the use of our residents who come to the school as part of their rotations. The simulation room and manikin, also housed in this area, are discussed in another portion of this book.

The offices of our department faculty and ancillary personnel are located on the sixth floor.

Department of Oral and Maxillofacial Surgery Leadership Transition 2000-2001

Donald P. Butler, DDS

The Department of Oral and Maxillofacial Surgery at UTHSC-Houston in the Texas Medical Center was active, robust, and firmly established in January 2000 as the 21st century was about to begin. Members of the department were well respected throughout the Texas Medical Center and the Dental Branch. Faculty and residents were actively involved in patient care at the following hospitals: Ben Taub General Hospital, Lyndon B. Johnson General Hospital (LBJ), Memorial Hermann Hospital, Methodist Hospital, Houston VA Medical Center (VAMC), Smith Tower (intramural faculty practice), and the Dental Branch. At that time, management of Medical Center patients with maxillofacial trauma was equally shared by the departments of OMS, ENT, and Plastic Surgery, and each group assumed on-call responsibility on a rotating basis.

*Fulltime OMS
Faculty from the
preceeding
era in 1988.*

*Seated L to R:
Paul McFarland,
John Helfrick,
Bill Roche, and
Jim Sweet.*

*Standing L to R:
Rafael Flores,
Jimmy Johnson,
Theeralaksna
Suddasthira,
Terry Taylor,
and Mark Wong*



John Helfrick had entered his 17th year serving as department chairman. He continued to see patients at the Smith Tower office and operated regularly at Methodist Hospital. Full-time department faculty members included Jimmy Johnson, chief of service at Ben Taub Hospital, where busy clinic and operating room

schedules seemed to be ongoing. He often required assistance from other faculty (George Suchko, Mark Wong, Victor Escobar, and others), since OR cases were often scheduled during normal clinic hours. Three or four residents were typically assigned to the Ben Taub OMS service, which usually included a chief resident, an upper level rotator from the US Army or US Air Force, a second-year resident and a first-year resident.

The OMS service at LBJ Hospital was directed by Mark Wong, who also served as the OMS program director. Activity at LBJ had steadily increased since its opening in 1989. A third-year resident and first-year resident were assigned to the LBJ service, where they were active in both clinic and operating room. Jon Braderick was serving as chief of service at Memorial Hermann Hospital, where the trauma service continued to be active. Two residents, one third-year and one first-year, were assigned to the Memorial Hermann service. Jaime Gateno, who worked out of the Smith Tower office and Methodist Hospital and was also on the trauma call roster, was active at Ben Taub, LBJ, and Memorial Hermann as well. Two residents, a chief resident and first-year resident, were assigned to the Methodist service. Harry Gilbert, who was chief of the Dental Department at the VAMC, also directed the OMS service and had a chief resident and first-year resident assigned.

Don Butler was serving as department vice chairman and directing the predoctoral program at the Dental Branch. Dental Branch teaching and staffing responsibilities were shared by Don and George Suchko, but they received a considerable amount of help from part-time faculty members (Debby Cooper-Newland, Frank Frishkey, Alan Miyake, Bernie Natkin, Sid Schwartz, and Helena "Micki" Thomas in the clinic and Clark Whitmire in the didactic program). The Dental Branch included an ambulatory anesthesia suite where a first-year resident was assigned full-time for training in dentoalveolar surgery and sedation. In addition, upper level residents were also scheduled a few sessions per week to perform more advanced dentoalveolar surgery procedures. In addition to his responsibilities at the Dental Branch, George Suchko also spent time at the Smith Tower office, staffed at Ben Taub, and operated cases at Methodist and Memorial Hermann Hospitals. Victor Escobar provided coverage at multiple venues, including Methodist, Memorial Hermann, Ben Taub, LBJ, VA, and the Dental Branch. Flexibility was important, and most faculty members were credentialed at multiple hospitals and often provided staffing assistance wherever needed to maintain schedules.

In February 2000, John Helfrick announced that he wished to take advantage of a new opportunity and would step down as department chairman effective September 1, 2000. At that time he expressed his willingness to remain on board until a successor could be named. A search committee was appointed and a nationwide search was initiated, but it would require several months before that process would be completed. John remained at the helm during a critical preparation period for an upcoming program accreditation site visit, but officially vacated his chairmanship in the fall of 2000; Dean Ronald Johnson then appointed Mark Wong to begin serving as acting chairman. Mark also continued in his role as program director.

In the meantime, other changes had taken place within the department. Jon Braderick and Victor Escobar had resigned and left the area to pursue other opportunities. In mid 2000, James W. "Jim" Wilson, a graduate of the Parkland program, left his private practice in the Dallas-Fort Worth area and came to Houston to join the full-time faculty and assume leadership of the Memorial Hermann service. Tony Chu and Dana Brotherton, both graduates of the program in June 2000, joined the full-time faculty during that transition year, and each remained for one year before leaving for private practice.

In early 2001, following recommendations of the search committee, Mark Wong was officially named as the new department chairman; in addition, he continued on as program director. In 2001, Jose M. "Joe" Marchena, who began training and received his MD degree at Harvard before transferring to finish at LSU, became a full-time faculty member and joined Jimmy Johnson with staffing responsibilities at Ben Taub Hospital.

At the time Mark Wong became department chairman in early 2001, the full-time faculty roster consisted of the following: Jim Wilson, service chief at Memorial Hermann; Jimmy Johnson, service chief, at Ben Taub; Jaime Gateno, Smith Tower and Methodist Hospital; Tony Chu, who staffed LBJ, Ben Taub, and Memorial Hermann; Dana Brotherton, also staffing LBJ, Ben Taub, and Memorial Hermann; Harry Gilbert, service chief at the VAMC, Don Butler, vice chairman and predoctoral program director at the Dental Branch; and George Suchko, who was primarily at the Dental Branch, but was also active at Smith Tower, Ben Taub, and Memorial Hermann. In addition, Bob Debes, Bryan Bouchelion, Neil Gorme, Bernie Natkin, Mike O'Shell, and Sid Schwartz were staffing Dental Branch clinics on a part-time basis, and Clark Whitmire continued with his significant involvement in the predoctoral didactic program.

The Reorganization of The Department

Mark E. Wong, DDS

Challenges to academia

The decade beginning in 2000 will probably be remembered as one of the most difficult periods for academic oral and maxillofacial surgery programs in the United States. The difference between academic salaries, which had always been lower than those in private practice, grew immense as a focus on dental implants and dentoalveolar surgery resulted in practice incomes many times greater than before. The differential between private practice and academic salaries shifted from a factor of 2 or 3 to as much as 7 or 8, especially where middle grade faculty were concerned. This “middle” echelon of educators, who in previous years would soon assume leadership positions in their own institutions or others, began leaving academia in droves for private practice. Junior faculty positions could not be filled either, even though the difference in starting salaries between private practice and academia was perhaps not as great. Student debt at high interest rates, incurred during dental or both dental and medical school and also residency, required larger starting salaries with greater income potential than most academic programs could afford. To compound the dire faculty shortage, one of the traditional sources of experienced faculty, the military and public health service, no longer retained their surgeons long enough for them to consider continuing with institutionalized practice. The AAOMS attempted to address this problem in a variety of ways, appointing task forces to develop strategies to improve faculty recruitment and retention, collaborating with the Oral and Maxillofacial Surgery Foundation to create the Faculty Educator and Development Awards (FEDA) program, and instituting other measures to enhance interest in academia. While these programs met with some success, one of the conclusions reached by the various initiatives was that recruitment and retention was primarily a local issue and that strategies that worked in some places would not work in others.

Understanding our cash flow

In Houston, we host the largest oral and maxillofacial surgery training program in North America. While the availability of six hospitals and a dental school offers excellent training opportunities to our residents, the administration of the

department with its multiple funding sources, different rules and regulations, and non-coincident fiscal calendars is a major task. Without a good handle on this highly complex area, creating and managing a budget so that we would know how much we could spend (and save!) would be impossible. Another feature making this such a difficult task is the University's financial management system, a very complicated and un-intuitive ledger program—especially for non-accounting types. Key to managing the department was to develop a mechanism for understanding our cash flow.

At this time, credit must be given to Don Butler for undertaking the enormous task of creating an accounting spreadsheet to identify and manage multiple fund sources and accounts. For example, our department receives funds from over 10 different sources, including institutional support from the School of Dentistry, and both institutional and resident support from Harris County Hospital District, Memorial Hermann Hospital, Methodist Hospital, the VAMC, Shriners Hospital, the faculty intramural practice, research budgets, the Jesse Jones Foundation and special commercial grants. The dollar amounts in most of these accounts changes with every fiscal year. Residents, faculty, and our staff are paid from multiple sources; and, department expenses such as interview costs, meeting travel, and graduation ceremonies are also supported from different budgets. By accurately logging in contracted income, under-estimating patient care revenue, closely following the fiscal year close-out amounts, and above all, making strenuous efforts to avoid deficit spending, the department was able to better control its purse strings. The software program written by Don Butler is still in use today and forms the major tool in our financial management of the department.

A poly-scope faculty and staff

The department has always been composed of multiple institutions, each of which had a different focus of activity. Faculty who worked exclusively in these institutions ultimately developed a unique practice profile; and, in the case of certain procedures such as orthognathic surgery, joint reconstruction, and dental implantology, skill sets were either enhanced or lost. Also, when institutions were administered and run by single faculty, departure of that individual created a steep learning curve for replacement faculty. The decision was taken around 2002 to alter this system and to change faculty assignments. While faculty still had primary responsibilities at the various institutions, they were now asked to participate in the intramural practice at Smith Tower and staff undergraduate student clinics at the Dental Branch. This initiative made a faculty member's schedule more complicated and, in some cases,

required traveling to multiple institutions during the day. But the benefits from this change soon became apparent. Faculty members now experienced a more balanced practice profile, the intramural practice began to see growth and increased revenue from greater utilization of the facilities, and the dental school and dental students had more interaction with the entire department and not just those assigned to the school. So despite the difficulties created by the multiple assignments, faculty members were supportive of this change in structure.

The concept of multi-tasking was not limited to the faculty. Analyzing the different duties of each staff member showed that the use of cross-training and multiple responsibilities was not only wise, but a more efficient use of personnel. The internet and digital age meant that physical location is no longer as important in an employee's responsibilities. By leveraging this paradigm, our staff is now able to perform multiple tasks not usually associated with the original job description. For instance, our receptionist at the School of Dentistry may now be involved in insurance pre-certification for the faculty intramural practice. And the secretary at the intramural practice may also be involved in developing the call schedule for the residency program. Full engagement in the department and program has also helped improve the collegiality of our staff and program, and this heightened level of collaboration has been an enormous benefit to the department.

Increasing the bottom line

As described in the opening passages of this chapter, one of the main reasons for the difficulty in recruiting and retaining faculty members was the lack of financial resources available to support academic departments. Traditionally, most oral and maxillofacial surgery departments receive funds from parent institutions (dental or medical schools or hospitals), Federal Graduate Medical Education dollars for residents, and intra- or extra-mural practice revenue. Support can also come from research budgets or vendor support, but with the imposition of stricter guidelines regarding commercial participation in residency programs, this funding source has become increasingly limited. In 2002, our department's budget was close to \$2.7 million and was used to pay the salaries of 18 full- and part-time faculty, 23 residents, and 10 classified and nursing staff. This represented support primarily from the State, Harris County, Methodist Hospital, the Jesse Jones Foundation, and the intramural practice. Over the past 13 years, the combined efforts of faculty, staff, and residents has succeeded in raising the department's overall budget to over \$5.5 million dollars, which supports 14 full- and part-time faculty, 30 residents, and 12

classified and nursing staff. The improved bottom-line comes from a huge increase in support from Harris County (Harris Health Services), new and significant contracts with Memorial Hermann Hospital, and an augmented intramural practice at the Smith Tower. This intramural practice has recently begun to realize the potential revenue first seen by John Helfrick, who started the practice when he was chair. The increased support from the Hospital District and Memorial Hermann Hospital reflect the decades of excellent and responsive service provided by department faculty and residents and reinforces the notion that the three "A's" of success in practice (Availability, Ability, and Affability) have as much of an impact on academic practice as they do on private practice. The vast improvement in the intramural practice revenue is largely the function of our classified staff and faculty. Faculty's involvement in the intramural practice and their hard work to treat a steadily growing patient load has increased our department's productivity immensely to over \$7 million per year. However, it has been the increased attention to fastidious billing and collection practices that have allowed the faculty's production to be translated into higher revenues for the department. And while new federal regulations have limited our ability to garner support for the department and residency program from commercial vendors, this source has been more than adequately shifted to the Hinds Foundation, a unique and extremely useful source of perpetual funding supported by friends and alumni of the program and a brain-child of Thomas M. "Tom" Weil, an Ochsner Clinic alumnus and a long-time supporter of the department from the time of his arrival in Houston over 45 years ago.

Improving the bottom line has made significant differences to the department's faculty recruitment and retention efforts. From 1998 to 2008, the department recruited ten new faculty members (Drs. Bradrick, Escobar, Chu, Brotherton, Wilson, Marchena, Kennedy, Nawab, Demian, and Busaidy), only three of whom currently remain. Recruitment efforts during the dark days of academia from 2006 to 2012 succeeded in hiring only 1.5 faculty members (Drs. Freeman and Bertz). However, once the bottom-line was improved, the department successfully recruited five new faculty members since 2012 (Drs. Shum, Treasure, Melville, Gilbert, and Young). We realize that those oral and maxillofacial surgeons interested in an academic career have different interests from those who choose to enter private practice. However, it appears that there is a monetary threshold that must be met before professional interest can supersede one's livelihood. Hopefully we have identified that watermark and, by achieving the means to consistently exceed that level, have produced a strategy to strengthen future efforts at recruiting the very best to join our department and retain our highly experienced and noted faculty as members of the Houston community.

Innovations and Incentives

The organizational structure of a department or institution is important for its ability to meet the needs of personnel doing their jobs, providing resources to support our staff, balancing priorities, and creating and constantly refining a coordinated operational plan that takes into account current issues while maintaining a long-term vision shared by all. Over the past 15 years, many ideas were conceived, a select number tried, and a few implemented into the organizational fabric of the department. One innovation that made a difference was the creation of individual Professional Activity Fund (PAF) accounts for the faculty from a Memorial Hermann trauma call contract and supplemented with intramural practice revenue. These accounts are controlled by faculty themselves and can be used for work-related expenses such as paying professional dues and memberships and attending meetings beyond the regular one meeting per year. This innovation not only gives faculty members some control over their professional expenses, but these payments are accomplished with pre-tax dollars.

Staff support for faculty activities is another area where resources were lacking. An effective solution to this problem was to find other hospital services to share personnel, and this approach was used very effectively by Nagi Demian at LBJ Hospital. Collecting data about our department's clinical activities is yet another critical component of management. This information is used in a variety of ways including the completion of annual reports for the State, the AAOMS and our accrediting bodies, the ADA and CODA. Very importantly, however, it is also used to negotiate vital contracts with our different hospital partners. Without this data, we would be entering into discussions with one arm tied behind our backs. Our proprietary web-based resident surgical log, called OMSLog, has been one of the most important management tools for recording not only resident activities, but also providing practice profiles at our different clinical locations. Written by local programmers recruited from the ranks of start-up companies with off-shore contacts or Rice University graduate students trying to supplement their incomes, OMSLog has been revised and improved three times. Funding for this important initiative was originally provided by Synthes Maxillofacial as part of our annual Center of Excellence grant that we received for eight years (\$30,000 per year). However, as new Federal regulations imposed restrictions on the way commercial vendors could support educational institutions, funding for our latest revision was provided by the Hinds Foundation, a not-for-profit foundation controlled by the department's alumni. The Hinds Foundation, the strong relationship with our department's alumni organization, the Hinds Academy, and the highly successful collaboration with the

Houston Society of Oral and Maxillofacial Surgeons responsible for organizing the Hinds Symposium annually are all essential innovations that have strengthened the department. These important relationships will be described more fully elsewhere in this book by individuals who played leading roles in their creation and maintenance to this day. As an aside and in relation to OMSLog, the analysis of data collected by this program has relied on a back-end database tool, Microsoft Access, to sort and count the numbers into the different reporting fields required by our many reports. Composing the Access reports was done by our erstwhile department “hacker,” Don Butler, and is another example of his important contributions to the department’s reorganization.

The final innovation important to the department’s welfare is a recent development and owes its creation to Teresa Granhold, the department’s Administrative Service Officer. A well known tool used to retain experienced and excellent staff in the private office setting is an incentive bonus program, but this practice is not common in the university environment. Partnering with Joe Morrow, the newly minted Assistant Dean for Finance and Management, a plan was developed to provide incentive payments to our department’s classified staff. This is a first for university staff who have rarely been allowed to participate in a job-performance incentive scheme, aside from the Merit Pool awards made by the State. Funding for the program is provided by profits from the department’s intramural practice and goes into effect once a certain financial goal has been achieved by the practice. At the start of the financial year, individual staff members are given individualized activity goals and levels of performance. The bonus is not automatic and depending on performance, staff will qualify for different levels of incentive pay. In the first year of the program, we did not meet our financial target because of a number of illnesses in our office. However, in the second year, the goal was reached and exceeded by a substantial amount, and the bonus payments provided put a huge smile on the many deserving members of the department’s classified staff. Our thanks go to Ms. Teresa Granhold for innovating and creating this important tool.

The UTHSC-Houston School of Dentistry, 1995-2014

George D. Suchko, DDS

*“It is only as we develop others that
we permanently succeed.”*

– Harvey Firestone, business magnate

*George Suchko
in the
Dental Branch
Predoctoral
Clinic in 2001*



Our challenge as educators in the art and science of dentistry is to develop those who are to be the future of dentistry. In *Looking Back*, Drs. Robert Debes and Donald Butler chronicled the stories and legacies of our department from its inception. It is a story of faculty giants of the profession. We have been blessed at the University of Texas School of Dentistry at Houston to have attracted such people, whose names, contributions, and reputations are indelibly etched into the framework of dental education, not only at this institution but also nationally and internationally. The process of educating predoctoral students and oral and maxillofacial surgery residents will continue to evolve; therefore, current educators, tasked with this charge, must take up the yoke that these giants had borne so well.

The department has been guided by only three chairmen, Drs. Edward Hinds, John Helfrick, and Mark Wong. This, in itself, is a testimony to stability and leadership, which are cornerstones for success in any endeavor. Each chairman has been instrumental in recruiting and attracting faculty to meet the large and varied demands of a department of this size to ensure that we continue to develop those students and residents under our charge. As importantly, each maintained a close working relationship at the school. This is the focus of my description of the period 1995-2014, which was my tenure as a faculty member.

The Predoctoral Program: The Don Butler Years – 1995-2004

In 1995, Don Butler became the director of the predoctoral program at what was then called the University of Texas Dental Branch at Houston. When I arrived, the didactic program had recently transitioned from a self-paced modular learning format to a more traditional lecture format. We in oral surgery directed four core oral and maxillofacial surgery didactic courses spanning sophomore through senior year, and in addition, we also directed Physical Diagnosis, Internal Medicine, and Management of the Medically Compromised Patient. Many of our faculty served as contributors to Medical Emergencies in the Dental Practice courses directed by Ted Pate. We also greatly assisted Dr. Pate in the presentation of the Advanced Cardiac Life Support courses, as all of our staff were certified as instructors in ACLS. Ron Redden and Clark Whitmire directed courses in inhalation, enteral, and parenteral anesthesia. The school's class sizes ranged between 60 and 64 students from 1995-2004. The third- and fourth-year clinical courses also fell under the director's administration. The department was, and remains, integral to the education of the dental student. Evolution in the format and content of the predoctoral program would continue to occur over the years, to be discussed further herein.

The predoctoral program director in OMS oversees the conduct, content, and outcomes of these courses. Don Butler was a good match for this responsibility, as he is meticulous and well organized. Under his guidance, students continually performed above the national average on the NBDE, Parts I and II. I was fortunate to have been mentored by him. He was most competent on a computer and labored to educate me in its use for which I will always remain grateful. I'm sure I frustrated him at times! It was at this time (1995) that the era of 35 mm slides was being phased out and PowerPoint presentations were the presentation medium of choice. I know I was not alone going through the agony of copying hundreds or thousands of slides to this

format. As an aside, I recall being so well taught by Don that I was able to help John Helfrick and Jimmy Johnson through the transition. (See one, do one, teach one?)

Clearly, Don used his surgical knowledge and skills to provide excellent instruction to the dental students and the residents, both didactically and clinically. He was most attentive to observing and guiding both groups, always nearby and ready to help. He decided to retire in the summer of 2004 and to return to his native Utah with his wife, Lynn. However, he is still actively working with Mark on budgets; thus, he really never left the department!

The Clinic

Upon Dr. James B. “Jim” Sweet’s retirement in 1995, I joined the faculty after retirement from the U.S. Army Dental Corps with primary teaching responsibilities at the Dental Branch. Besides Don and I, Bill Roche, Ray Reid, and Harry Gilbert were full-time faculty who helped staff the school. In addition, Joe Dusek, Frank Frishkey, Helena “Micki” Thomas, Sid Schwartz, John Smith, George Barfield, Bernie Natkin, and Bob Debes staffed a half day a week. (I hope I didn’t forget someone, as the participation of the private practitioners was, and still is, greatly appreciated.) In 1996 and 1997, we unfortunately lost some of those private practice individuals; and, as I recall, only Bernie, Sid, and Bob stayed on as part-time faculty to help staff the school. This loss of faculty created a situation that was compounded by the untimely illness and retirement of Bill Roche in 1996. Then, in 1997, Ray Reid, who had been covering a full day at the school, also became ill. These circumstances led to my assuming part-time staffing responsibilities at Ben Taub, Memorial Hermann, and LBJ Hospitals to help offset the absences of Drs. Roche and Reid, which further strained coverage at the school. (Jon Bradrick and Victor Escobar did not join the faculty until the summer of 1997). This strain on faculty coverage was problematic because of the staffing dynamics and requirements at the Dental Branch. During this time frame, the resident assigned to the Dental Branch rotation was a PGY1. Most of the interns were inexperienced in the performance of dentoalveolar surgery, thus they needed close staffing. In addition, they were not credentialed to administer parenteral anesthesia, so the attending faculty had to function as the anesthetist too. Nine of the ten clinic sessions a week had seven active predoctoral surgical cubicles, which made it difficult to cover both residents and students with a single attending faculty member. Those familiar will recall that the resident surgical area was somewhat separated from the predoctoral cubicles, placing

*Bob Debes,
third from left,
staffing a case in
the Predoctoral
Clinic in 2001*

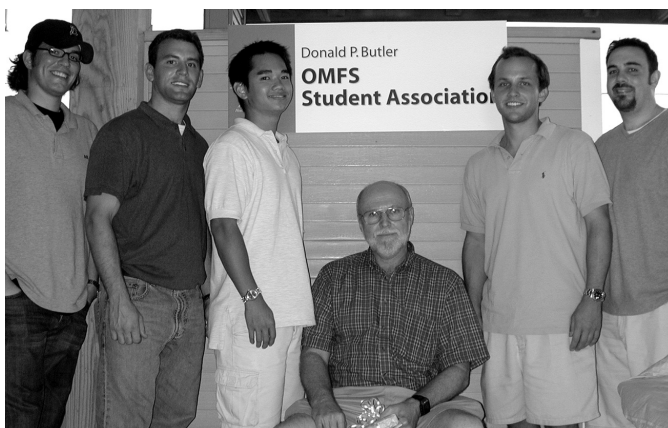


a strain on direct supervision. Of course, as everyone involved in teaching institutions knows, things sometimes happen, but, luckily we were able to make the best of them.

Fortunately, most often the daily routine was normally uneventful. The years passed, but some essential constants remained besides Don and me: namely Sid, Bernie, and Bob!

In 2003, the Don Butler Society was formed. This was conceived as an organization of dental students with aspirations to pursue oral and maxillofacial surgery as a career choice. The society would provide a mechanism to mentor dental students from first through fourth years in the elements involved to gain acceptance into an advanced OMS training program. Students would participate in lunch-and-learn sessions that would encompass academic subjects, preparation for NBDE, externships, the application for residency training process, and most recently the Comprehensive Basic Science Examination. The CBSE has become one of the discriminators that we, in OMS, now use for residency applicant assessment since the NBDE has become a pass or fail examination.

Butler OMFS Student Association in 2004. L to R: John Orfanos, Robert Fuentes, Thai Vuu, Don Butler, David Kostobryz, and Ryan Leonhart. The five predoctoral students shown in this picture all went on to complete OMS/MD training and all are now in private OMS practice in Texas.



The Department also had an OMS Honors Elective; this elective was made available in the final semester to fourth-year dental students who had demonstrated high clinical and academic performance in the oral surgery components of their schedule to recognize their performance and to enhance their skill sets in OMS. The course was intended to instruct students in more advanced techniques in dentoalveolar surgery to include the removal of third molars, advanced alveoloplasty, simple tori, placement of intravenous lines, and exposure to residents performing implant and grafting cases. In 2005 or 2006 we decided to move the elective into the third year second semester. This was done to allow students to later attend externships with more clinical skills, confidence, and competence, which in turn allowed them to become more actively involved in these experiences. Students who took part in this program have indicated that they were better prepared than other applicants because of this experience. This has proven to be most helpful in that our students have achieved high acceptance rates into postgraduate OMS training programs.

The externship program at UTSD continues to be a well attended element of our OMS program. Since 1995 it has been administered by George Suchko, Kamal Busaidy, and Nagi Demian. Nagi continues in this effort, doing an excellent job. The program affords externs the opportunity to experience the life of an OMS resident by attending morning conferences and participating in the day-to-day experiences, primarily at Ben Taub and Memorial Hermann Hospitals. It has also allowed us to evaluate future prospects for residency training in our program.

Journal clubs have always been important in the practice of oral surgery. These sessions have gone through many changes relative to format. Nonetheless, they remained important in encouraging discussion of current concepts in the practice of OMS. These were times when faculty and residents could enjoy good food and beverage at local restaurants and rooms in the Dental Branch. Drs. Gateno, Suchko, and Busaidy have been the faculty supervisors over these past twenty years. Thanks go to Synthes and Marcus Martin, their representative, for their participation and funding of these sessions.

Implant dentistry was still in its infancy at the then UTDB when I joined the faculty in 1995. Don Butler handed me this component of practice at the school. At that time the Periodontics Department was more highly involved with implants under the directorship of Dr. Raul Caffesse. In the late 1990s, the Dental Branch rapidly embraced the implementation of implantology. An implantology fellowship was developed under the direction of a general dentist at UTDB. To avoid quality care issues, our department in concert with the Prosthodontics and Periodontics Departments formed an Implant Board to oversee the activity of implant placement and restoration at the school. A co-directorship was developed so that no single department would, or could, hold advantage in implant placement at the school.

Don Butler retired at the completion of the 2004 academic year, and George Suchko assumed the predoctoral program directorship.

Predoctoral Program : The George Suchko years – 2004-2014

I apologize in advance for what may appear to be disjointed information that follows, as the chronology does not hold to a tight line. Those who knew me can remember the sign above my desk: “A CLEAN DESK IS A SIGN OF A SICK MIND!”

“A wise man changes his mind, a fool never will.”

A Spanish proverb

*Sophomore
student
Rickie Nguyen
during
preclinical
extraction
laboratory 2001*



The subject matter to be addressed will be related to events versus chronology and will include:

- (1) moving the PGY4/6 to the Dental Branch
- (2) planning for class size increases
- (3) curriculum changes and problem based learning
- (4) the addition of UTSD dedicated faculty
- (5) planning for the new School of Dentistry
- (6) recognizing our dedicated faculty 1995-2014
- (7) Mark Wong
- (8) Harry Gilbert (Good luck, Harry.)

The passage of the baton went well as I thought that I was well prepared by Don Butler to assume the position as predoctoral program director in oral and maxillofacial surgery. Our scope of involvement remained the same for many years. Class size expansion would come later.

Moving the PGY4/6 to the school. One of the good things I inherited was our department's decision to have a chief resident become the primary OMS resident at the school. The philosophy was intended to allow the chief residents who were assigned to UTDB/UTSD to perform more office anesthesia and dentoalveolar procedures as they approached graduation since most of the graduates will go to

*George Suchko
and Bernie
Natkin at the
Dental Branch
in 2001. Notice
the plaque
honoring former
program director
John Pleasants in
the background*



office-based practices. This clearly reduced the diligent oversight requirements on the attending faculty. In addition, the residents were more accomplished in parenteral anesthesia, thus releasing the faculty from continuous involvement in a case. The rotations varied from two to three months.

Increase in class size. Beginning in 2007, the entering freshman class numbered 84 students, and this continued until the move to the new dental school building in May 2012, when the entering class was increased to 100. The curriculum would remain the same; however, the winds of curricular change had started to blow in 2008.

Curriculum changes. We in OMS have had a long-standing concern that when students transition to the clinic the basic science knowledge base stayed behind. Whether it was at our department faculty academic retreats or informal interdepartmental faculty discussions, it was determined there was a need to consider modifying our curriculum. The classic example I can cite was that dental students would receive over 50 hours of cardiovascular didactic presentations in Physiology, Medical Pharmacology, Pathology, Internal Medicine, Physical Diagnosis, Management of the Medically Compromised Patient, and Emergencies in Dental Practice during academic years two and three. Previously students would present to our clinic with their patients for case discussion with the students generally lacking

foundational knowledge of the cardiac history of their patient. Students appeared to be incapable of conducting any meaningful dialogue history, nor could they interpret what the patient's responses meant. They could not make any clinical interpretation related to types of medications prescribed, doses and usages, and how that might impact clinical management of the patient. With the agreement of the basic science departments, we entered into more formal group discussions. Suffice to say, our department was instrumental in the early planning phases. We worked closely with basic science faculty, particularly Ted Pate and John McMahon in the Physiology Department, to make the courses more integrated to patient care and management. The time had come for the school to make changes.

The Problem-Based Learning Curriculum. Ad hoc committees were formed, which looked at options to include CBL/PBL, vertically-integrated learning, and virtual teaching methods. Proposals were developed and presented to the deans, Catherine Flaitz and John Valenza. Associate deans and some basic science faculty visited other institutions that had moved to CBL/PBL approaches, and consultants presented at full faculty retreats. Departments developed proposals and submitted proposed changes to the Curriculum Committee for review. This led to reformatting the traditional lectures in basic science courses to more patient-related presentations. In concurrence with the associate dean for academic affairs, Leslie Roeder, an Essentials in Medicine course was developed by our department in conjunction with the basic science departments. Clark Whitmire assumed the directorship of that course to prepare it for implementation in the spring semester of 2014. Lincoln Edwards (chairman of pharmacology), Trevor Treasure, George Suchko, and Mark Wong each provided significant input to the course development and content. Three courses were eventually developed in the Essentials in Medicine curriculum; every medical system would be examined with more time and emphasis placed on the more commonly encountered medical issues using the following format. At the time of this writing, I had retired before the Essentials Part II and III were implemented for the first time. No doubt adjustments will be made as needed.

The courses were designed to employ full class lecture presentations on particular essential elements of basic science but to be contemporaneously followed by 2- to 3-hour small-group discussion sessions (16 or 17 students per room) of correlative cases consistent with PBL formats. The lectures would be structured to incorporate the basic and clinical science relationship. (This is compared to the previous six or seven subject matter lectures and a written exam). The cases discussed would be the same in all of the small group sessions with the key points highlighted to assure the facilitators covered these points. Facilitator PowerPoint presentations would be

developed by varied assigned faculty in conjunction with student PowerPoints. The students would receive their copy on Blackboard, which is an online communication tool which makes course media available to UTSD students; the faculty facilitators would get their copy by e-mail. The course would endeavor to employ a variant of the Socratic method of interactive teaching encouraging a back-and-forth dialogue forcing the students to better develop organizational and associative thought skills. All students in the group would be involved rather than a select few; the small group sessions would mirror the experience they would encounter in the clinic when presenting their patients for oral surgery.

The Essentials of Medicine I course was first presented to the second-year students in the spring of 2014. (NOTE: The OMS faculty was still required to continue the former four-course scenario to the classes that had not started in the new curriculum, i.e, the current third- and fourth-year classes until they graduate).

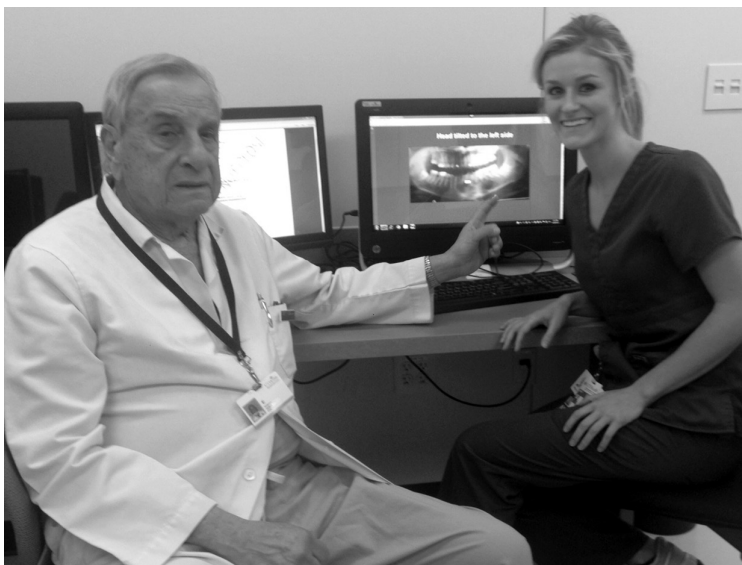
I had retired in July 2014 before I could see the anticipated results of better trained students.

The addition of UTSD dedicated faculty. The addition of Trevor Treasure to the faculty in 2012 brought a superbly trained and experienced surgeon who came with experience in teaching at the University of Indiana School of Dentistry. Trevor has been well received by the students and became the first oral surgeon to receive the James McGovern Teaching award as voted by the senior class. He was also most enthusiastic about becoming actively involved in the still evolving Essentials in Medicine curriculum, and as I departed, he was given directorship of one of those courses.

Kent Stobaugh joined us in 2012 and continues staffing two days a week. His knowledge and experience translated easily into predoctoral teaching; he plays an important role in the implantology component at the school and in the OMS residency program in general. (I was personally appreciative of the addition of Drs. Treasure and Stobaugh, as they tremendously lightened my staffing load at the school.)

Jim Wilson and Mark Wong have been the Thursday afternoon UTSD staff for years. Jim was the Memorial Hermann chief whose hospital demands were many, and Mark was always needed in three places at once. It was a toss up as to which one

*Bob Debes
with student
Macey Cartrite
in the UTSD
OMS Clinic
2015*



might be there. They are still covering Thursday afternoon sessions. Both are legend in the clinic relative to predoctoral students fearing Thursday afternoons with them

Planning for the move to the new School of Dentistry. Mark Wong and I were involved in numerous meetings with the dean and the architects. As one might imagine, all aspects of the transition were reviewed. Mark and I had discussed and presented a clinic design shaped like a stadium with the faculty alcove in the center and the operative cubicles surrounding in an ellipse to allow 360-degree visualization by faculty. We also believed it necessary that our clinic was on the ground floor for logical reasons. The design we suggested was unacceptable structurally to the architects, and we have adapted to their design.

In 2013, the entering class size was 100. This brought additional demands on clinic staffing and teaching. We fortunately preplanned for this with the additions of Drs. Treasure and Stobaugh in 2012. And, as always, we are extremely grateful to our part-time faculty without whom we would be hard-pressed to meet our staffing demands.

Recognizing the dedicated faculty 1995-2014. Considering the demands on our department and on the clinical staff, we have been fortunate to have had the following listed individuals be the embodiment of consummate professionals,

teachers and colleagues to whom we are greatly indebted: Drs. George Barfield, Jim Bertz, Massad Bahatheq, Dana Brotherton, Bryan Bouchelion, Kamal Busiady, Don Butler, Tony Chu, Debbie Cooper-Newland, Bob Debes, Nagi Demian, Joe Dusek, Phil Freeman, Frank Frishkey, Harry Gilbert, Neil Gorme, Issa Hanna, Jimmy Johnson, Alan Miyake, Bernie Natkin, Michael O'Shell, Jim Peoples, Ray Reid, Bill Roche, Sid Schwartz, Jonathan Shum, Bruce Smith, John Smith, Kent Stobaugh, George Suchko, Trevor Treasure, Tom Williams, Jim Wilson, and Mark Wong. (I hope I did not forget anyone.)

Mark Wong and my involvement as the predoctoral program director in OMS. This section is intended to catalogue my tenure as the predoctoral program director in OMS at UTSD under the chairmanship of Mark Wong. Mark's credentials and achievements speak for themselves, and I'm sure will be much discussed in other chapters of this edition. However, I wish to thank him for his support of me and for his willingness to consider my thoughts and recommendations for the department.

Harry Gilbert ("Good luck, Harry!") Harry Gilbert retired from his position as chief at the Houston VAMC in June 2014, and he assumed the predoctoral OMS program directorship in July 2014. He has a wealth of experience and capability that will hopefully translate into a transition as smooth as the one Don Butler left me.

How the 2012 Dental School Building Came to Be

(excerpted from “Dean to Dean” letter from Dr. John A. Valenza and placed in UTSD 2012 Time Capsule)

John A. Valenza, DDS, Dean



John A. Valenza, DDS

Although many will recall discussion about a new dental school building decades before it happened, the process began in 2002 when then president of The University of Texas Health Science Center at Houston (HSC), Dr. James Willerson, agreed to a development study. Under then dean Ronald Johnson, the study was commissioned to determine the cost and feasibility of a new building and is documented in the report by Gensler Architects, Dental Branch Replacement Building: Development Program Report, December 2002.

In 2005, the State of Texas Legislature appropriated \$60 million for the new building via tuition revenue bonds (TRB). The HSC ultimately commissioned WHR Architects and Hensel Phelps Construction Company in 2006, and the first kickoff meeting was held in September that year. The building was to be built simultaneously with the Behavioral & Biomedical Sciences Building, or BBSB (known during construction as the BREF building – Biomedical Research and Education Facility). Two facts are interesting about the BBSB. First, it is actually two buildings in one. Originally, HSC administration was looking for a replacement building for the former Mental Sciences Institute, plus a new research building. Because of cost constraints, they determined the need to essentially stack one project on top of the other. So the first three floors of the BBSB were the Department of Psychiatry's

outpatient clinics, with the rest of the building dedicated to research (floors 4 and 5 wet lab research space and 6th floor a vivarium). Second, UTSD was given clear instructions not to include any wet lab space in its building, as the dental school's biomedical sciences research needs would be accommodated in the BBSB.

From September 2006 until the summer of 2008, we worked to develop a design that would meet our needs and the budget, going through multiple scenarios and construction formats (i.e., steel building, tilt-wall, etc.). In early 2008, Dr. Willerson announced his intention to step down, and Dr. Larry Kaiser became president in August of that year. At the time, the project had gone into a holding pattern with a 2-phased design. Phase 1 would be an education and administration building (with clinics remaining in the old Dental Branch Building on MD Anderson Boulevard), and phase 2 would be clinics, built later when we had the money. We actually fully designed phase 1 and had schematic drawings of phase 2. Although we ultimately selected another design, the 2-phased design was my favorite if we could survive having a split campus for an unknown period of time. Why? Among other things, it would have allowed us to truly zone patient care into one building (phase 2).

Soon after Dr. Kaiser came in, the decision was made to scrap the 2-phased approach and go back to a single phase. We were most grateful that he and the HSC's chief operating officer, Mr. Kevin Dillon, gave us the green light to proceed. Our budget was set at \$155 million, funded as follows:

- \$60M – Tuition revenue bonds

- \$18M – UT System (permanent university funds)

- \$7M – School of Dentistry fundraising

- \$70M – “Revenue financing” (money borrowed by the Health Science Center)

Based on estimates we were getting from the architects and contractor, \$155 million was still not enough in late 2008. In order to make the budget work, we pulled out a 400-seat auditorium and a full-size cafeteria, shrunk most offices by 10 percent, and removed a few other things. After doing that, we were still short, but I was adamant that we not shrink the building any further. We, therefore, designated about 40,000 gsf -- 100 operatories (2nd floor south and faculty practice) -- as shell space, gambling that we could raise the funds to complete these spaces by the time we opened the building. We also designated a future auditorium next to our building should funding for that come to pass as well.

The BBSB officially broke ground in 2008 and was completed in early 2010. In fact, our biomedical sciences researchers moved into the building in the spring of 2010 and worked there nearly two years before our building was completed and we moved.

That is where the project was when we finalized the design in January 2009. But the most amazing part of the funding story is that by the time the contractor bid the project out in the fall of 2009, the actual cost came in approximately \$20 million below estimates! Why? Actually, when we were designing, many other buildings were under construction in the Texas Medical Center, driving up the cost of labor and materials. Also, the great recession of 2007/08 had finally caught up to the State of Texas. From my viewpoint, the cost was actually inflated during design, and the drop brought the cost back down to “normal” levels.

Regardless, we could not have been more fortunate with the timing. Not only could we now finish and equip the approximately 40,000 gsf of shell space, it was later determined that we would build the University Life Center and the courtyard and also finish out about 10,000 gsf of wet lab space on the 4th floor of the BBSB. And in addition to building the parking lot across the street from the school, we included a jogging trail with exercise stations around the ball fields that exist today. Through it all, it was my desire that we did not just build a building, but that we added to the community on the “south campus.”

*University of
Texas School
of Dentistry at
Houston 2012*



So, how did the OMS Clinic and some of the other “signature” spaces come to be? Here’s how:

- **OMS Clinic.** The OMS clinic was designed to actually be multiple clinics in one. First, it is a predoctoral OMS clinical education facility. Second, it is a postdoctoral clinic for OMS. And third, it is an outpatient surgery center designed to support patient care under conscious sedation by multiple services (OMS, Perio, Endo). Like all design elements of the new building, the OMS department had significant input in the design and selection of equipment for the clinic. Additionally, through the generosity of the Hinds Academy Foundation, one of the graduate treatment rooms in the clinic received further modification to support a more private practice experience by OMS residents plus to enable the use of the room with a recently purchased “sim man” for simulation. The latter is now used in dental student and OMS resident education, as well as supporting the department’s offerings to the OMS practicing community for various recertifications using the sim man. One thing, however, that we were not able to do that was an early goal of the OMS clinic design was to allow the facility to someday meet standards for a licensed outpatient facility. Still, infrastructure was put into place so that at some later date the clinic and adjacent space can be remodeled to add an outpatient facility.
- **Other Clinics.** In general, we wanted to fit all clinics on the first two floors and achieved this except for Orthodontics, whose faculty were happy to have the only clinic on level 3 (in early design, it was originally faculty practice up on the 3rd floor). Overall, we wanted an open, flexible layout for clinics, given how notorious dental education is for changing clinical teaching models. The individual operator design was driven by the desire to bring the computer/monitor into the circle of care with the provider and patient, hence a chair-mounted design. With this decision, the delivery unit was “forced” to the rear (the school had otherwise used over-the-patient delivery for as long as I can remember). The 12 o’clock unit was then needed, and the rest fell into place for individual operatories.
- **Simulation Clinic.** We debated significantly during design whether to merge the preclinical lab and simulation into one space, as most dental schools have done during our era. But our vision for simulation necessitated separate spaces. That is, as of this writing, the model of simulation in dental education is primarily a preclinical format. Students spend the first two years in simulation labs, learning tooth preparation. But our new curriculum in simulation, begun in 2011-12 in the old building, was across all four years of the DDS and both years of the DH curricula. The key difference for us was bringing the electronic patient record into simulation. We developed a library of virtual patients and rotated students through during their clinical years. In this way, using a standardized family of virtual patients that every student “treated,” we can now teach much more in simulation,

such as medical management, applied basic science, evidence-based dentistry, ethics and professionalism, etc. While we have much more to do, I am delighted with the initial results, and I consider our simulation clinic one of the signature spaces in the building.

- **Alumni Circle.** When we were designing the library, I envisioned it as a cross between a library, a learning resource center, and a Starbucks. But the library staff was opposed to coffee (and all other food and drink) in the library, so I took my coffee area right outside the library, and we originally called it a “kiosk.” A few months before we opened the new building, I realized that we did not have a good place in the building to honor alumni. So we named the kiosk the “Alumni Circle,” and I assigned the display case across from it to the Alumni Association. We also used the walls in the “prefunction” area between rooms 4310 and 4320 to also honor faculty and students.
- **Library & Learning Commons.** When we first started designing the building, we asked ourselves whether a 21st century school even needed a library? The answer we soon realized was yes! Not only did we need one, but it needed to be a centerpiece space for the school, given that our students had far fewer choices on where to go to collaborate or study than they did when we were in the former Dental Branch building. The “Library & Learning Commons” was sized for about 100 students maximum, and we debated for a while as to how much paper (books, bound materials, etc.) we would bring. Turns out it was less than we thought (as we were moving from paper journals and textbooks to digital), and even the stacks area was designed so that as stacks went away, we could add furniture.
- **Houston Center for Biomaterials & Biomimetics.** In the old building, we had a miscellaneous collection of spaces that made up the biomaterials center. During design, while we were committed to a reincarnation of the center and its space, we struggled to get a commitment from our HSC to locate the center in the adjacent BBS building, as the new HCBB would not fit in our new building. When we finalized design of the new building, the center was to be located in the BBS, although without a commitment from the HSC. The great part of this story is that, when the decision was made to build the Cooley Center (see below), we had more conference room space in our building than we needed. So even before we moved into our new building, we remodeled three side-by-side conference rooms on the 5th floor of the new building to be the new home for the HCBB. Because of how the budget worked out, fortunately we could afford to spend an additional \$1 million for this project.

*Dean John A.
Valenza
on the UTSD
Clinic Floor*



- Cooley University Life Center. To make our design fit our final budget, we had to remove (among a few other things) a 400-seat, sloped-floor, fixed seats/tables auditorium. When we did, we requested that we identify a future auditorium connected to our building on the north side. A good 12+ months into the building of our building, the leadership of the HSC allowed us to add what would become a multi-use conference center (and beautiful courtyard). And it would be owned and managed by the HSC (although paid for by the dental school's construction budget). After the conference center was under construction, we approached Dr. Denton Cooley regarding a naming gift in his and his father's names (his dad being one of our greatest alumni), which he agreed to do. In the short time we have been here, the center and courtyard have been a great source of pride.

This, then, summarizes some of the inside stories on how our new 2012 building came to be.

The Residency Program From 2000 To 2015

Mark E. Wong, DDS

Looking Back, the first installment in the history of the Department of Oral and Maxillofacial Surgery, described the seminal changes that took place in the residency program during the decade from 1990 to 2000. During that period, a six-year integrated OMS/MD program was initiated, and extra-mural rotations to North Wales, Aarhus, and eventually Providence Hospital in Detroit were conducted. The program successfully underwent a CODA site visit in 2000, a feat repeated in 2005 and 2010. A web-based resident surgical log, unique in North American OMS residency programs at that time, was instituted, and the first OMS/PhD resident, Zahid Lalani, was enrolled. The program utilized six surgical training sites (Methodist Hospital, Memorial Hermann Hospital, Ben Taub Hospital, LBJ Hospital, The VA Medical Center, and the Dental Branch). The didactic program was composed of Monday morning orthognathic conferences, Tuesday morning OMS seminars, a Thursday morning mixture of case-based studies, M&M conferences, and clinic-pathologic conferences. Also included were dreaded Saturday morning meetings at the VA and a monthly Journal Club held in a variety of local watering holes (such as the Red Lion pub on Main Street and the Black Labrador on Montrose Boulevard). Finally, after years of complaints, the Saturday morning conferences at the VA were cancelled in 2011. Many residents will be happy to learn of this change, but as of 2014, in-house call remains as one of the features of the program.

A significant improvement to the integrated OMS/MD program occurred in 1995 when then program director, Dr. Michael Donovan, was able to convince the UT Medical School that qualifying bench examinations, required of OMS residents at the end of the first year of residency, were unnecessary for them to secure a place as second-year medical students. This trend continued in the early 2000s when the Medical School decided that they did not need to scrutinize the undergraduate credentials of OMS candidates. This change of attitude was the result of the consistently excellent performance of our residents in medical school. Of 40 OMS/MD residents from 2001 to 2013, 10 have been elected to Alpha Omega Alpha, the National Medical Honor Society. This represents an incredible distinction for the program and the best justification for a more amicable admissions process. Currently, the entire vetting process for our OMS/MD residents is performed by the OMS program. Candidates are interviewed by two panels comprising both OMS faculty

and representatives from the Medical School Admissions Committee, and our final Match list is presented to the Admissions Committee who recognize and accept the superb qualifications of our candidates with little dispute.

The biggest problem facing the residency program in the early 2000s was a perpetual shortage of faculty. The problem promised to grow worse with the anticipated retirement of Jimmy Johnson and George Suchko's planned reduction in time, and insufficient funds to recruit new faculty. In 1999, the OMS Department employed 8.6 faculty FTE (full-time/part-time employment). By 2003, the faculty establishment had shrunk to 6.6 while the number of institutions covered had increased from 5 to 6. Another issue was a shortfall in funded resident positions. In 2000, the program lacked funding for 3 positions (if all positions were filled with civilian residents). Fortunately, military-supported residents from both the United States and Canadian Armed Forces compensated for these deficiencies. The next era in the history of the residency program was devoted to correcting the deficiencies in resident salary lines and improving our ability to recruit first-rate faculty. This period also concentrated on increasing the scope of surgical experience and refining the program content to improve the quality of didactic education.

Faculty Recruitment

The period from 2000 to 2005 was particularly difficult in faculty recruitment. Nationally, an acute faculty shortage had begun to affect programs universally. Loss of faculty from retirement and resignations was made more significant because of the inability to recruit new faculty from the ranks of graduating residents or retiring military and public health surgeons. In Houston, the resignations of Jon Bradrick, Joe Marchena, and Jaime Gateno and the anticipated retirements of Jimmy Johnson and Don Butler placed the program under extreme duress. Multiple recruitment efforts were conducted, but again and again, candidates could not accept the salaries offered. Several serendipitous events helped to reverse this trend, and it would not be an understatement to say that these eventualities helped save the residency program. The first of these took place at a Chicago Blackhawks game when Mark Wong was introduced to Jim Wilson when both were examining during the ABOMS oral boards. A Parkland graduate who had built a highly successful private practice in Irving, Texas, Jim had always nurtured the desire to follow in the footsteps of his mentor, Robert V. "Bob" Walker. Fortunately for the Houston program, salary was less of an issue, and we were able to persuade him to join us as the next service chief at Memorial Hermann Hospital. At the same time, Joe Marchena, a supremely well

qualified individual from the Harvard and LSU programs, decided that Houston provided the necessary professional stimulus for him to enter academia against the national trend. And as an added gift, George Suchko changed his mind about pursuing a part-time private practice option. These recruitments allowed the program to overcome the initial loss of faculty and maintain the necessary staffing requirement for a program of our size.

However, stability wasn't forever. Despite our successful recruitment of two graduating residents, Kamal Busaidy in 2002 and Nagi Demian in 2005, we lost Joe Marchena in 2004, who departed the program to pursue private practice opportunities in Massachusetts. However, Jim Wilson's recruitment provided us with the necessary experience to enlist the services of other retiring practitioners who were looking for additional professional experiences. James W. "Jim" Kennedy, another successful private practitioner and loyal program alumnus, was high on our list of potential candidates, and in 2006, he was persuaded to step into the vaunted shoes of Jimmy Johnson and Joe Marchena as the next service chief at Ben Taub General Hospital. Kamal Busaidy joined George Suchko at the Dental Branch, and Nagi Demian took over Mark Wong's position at LBJ Hospital. The next faculty member to join us was Ayesha Nawab, a graduate from the Connecticut residency program. She joined the Department in 2008 and assisted Jim Kennedy with staffing at Ben Taub. Upon Jim's retirement, Ayesha assumed the directorship of the Ben Taub service. Around that time, we were approached by Phillip N. "Phil" Freeman, a dually boarded OMS and plastic surgeon, who, despite a highly successful plastic surgery practice, decided that his OMS roots beckoned strongly. Perhaps his residency at Parkland under Dr. Walker influenced his desire for a career change. In 2011, he joined the department following Ayesha's resignation and assumed the post of service chief at Ben Taub Hospital.

Faculty salaries remained an issue during this period. An AAOMS Faculty Educator Development Award for Kamal Busaidy and a Hinds Foundation grant for Nagi Demian provided sufficient support to encourage both these talented individuals to continue with their academic careers. In 2012, the department faculty establishment totaled 8.3 FTE, of which 7.0 FTE were full-time. Compared to the 1999 establishment when the department employed 8.6 FTE, faculty shortage remained a challenge. During this period, at times only 3 faculty were available for call coverage. This was not a sustainable arrangement, and greater innovation was invoked in an attempt to correct this problem. Consideration was given to the recruitment of retired private practitioners who were less interested in salaries and more interested in teaching. From this initiative, part-time support was secured from two highly

qualified individuals, James E. “Jim” Bertz and Thomas P. “Tom” Williams. Jim Bertz was a previous full-time faculty member and former associate dean for student affairs and admissions at the University of Texas Medical School while Tom Williams was a private practitioner from Dubuque, Iowa. Both had served as president of the American Board of Oral and Maxillofacial Surgery, and their respective expertise in esthetic and cleft surgery as well as oral pathology added new dimensions to the program. Esthetic surgery experiences were also provided between 2001 and 2003 through a private practice rotation with another program alumnus, Roger Byrne. Roger provided not only clinical experiences with facial cosmetic surgery, but also directed a lecture series and anatomical dissections in this area.

Faculty recruitment efforts in the department took a significant turn for the better in 2012. A Federal Social Security legislative act called the 1115 Waiver provided funds to significantly increase faculty salary levels at Harris County institutions. A corresponding increase in faculty support by Memorial Hermann Hospital, justified by our strong involvement in the management of maxillofacial trauma, secured for the department a much needed budget increase and the necessary resources to recruit faculty members from the graduating pool of residents and fellowship trained individuals. This provision allowed the department to enter the next phase of faculty recruitment and, by extension, resident training experiences. In 2013, we successfully recruited Jonathan Shum, a head and neck oncologic and reconstructive surgeon to the program. With dual fellowship training from Portland, Oregon and the University of Maryland, Jonathan brought not only expertise in the management of head and neck cancer, but microvascular skills necessary for the reconstruction of both oncologic as well as traumatic defects. Extending this direction in scope of practice, the program was able to hire a second oncologic and reconstructive surgeon, James Melville from the University of Miami in 2014. Both these individuals bring a skill set previously absent from our program. But perhaps more importantly, they are first and foremost oral and maxillofacial surgeons whose continued involvement in the core aspects of our specialty (trauma, dentoalveolar surgery, outpatient anesthesia, and implants) helps to further reinforce the strength of our training program.

Changes to the Program Structure

As we recount the history of the residency program over the past 15 years, other major changes that took place should be mentioned. In 2007, funding issues compelled us to end the Providence Hospital, Detroit rotation. This was a difficult decision to make since the Detroit rotation exposed residents to the scope of practice

of two highly talented surgeons and mentors. Drs. Jeff Topf and Ian Jackson provided residents with exceptional experiences in orthognathic, cleft, craniofacial, and esthetic surgery that were incomparable. In addition, these two giants in oral and maxillofacial and plastic surgery imparted to residents clinical experiences, surgical instincts, and values that could not be easily replaced. Despite these benefits, an increasing stringency of Graduate Medical Education (GME) funding regulations required a change to our rotations if residents were to continue receiving stipends. Experiences in cleft surgery have been partially compensated by a new rotation at Shriners Hospital for Children. This rotation is directed by Kamal Busaidy and provides experience in the management of patients with cleft deformities. Kamal has also added a new format to the program's Journal Club. Aside from changing the venue of the Synthes sponsored meeting from the pub setting to a Middle Eastern restaurant in Rice Village, the Journal Club has adopted a new format based on a PICO format (Patient problem, surgical Intervention proposed, Comparison with other treatment modalities, and Outcomes from the proposed interventions). This approach poses relevant clinical questions ("should patients undergoing third molar surgery receive prophylactic antibiotics?") and requires residents to research an evidence-based response.

In 2010, the program expanded its intake from 5 to 6 residents, with 3 residents participating in the integrated MD program while the remaining 3 enroll in the traditional 4-year program. The residents are equivalent in every sense of the word. Acceptance criteria are the same, and the activities of the residents do not distinguish between the two tracks. As part of the program, 6-year residents receive 35 months of OMS experience while 4-year residents undergo 37 months of OMS training. The 6-year track enjoys a unique training experience when compared to many other OMS/MD programs. Currently, 6-year residents are enrolled in the general surgery program for the last 2 years of the program, qualifying them for 2 years of medical training, a requirement for medical licensure in a number of states. However, despite this designation, 6-year residents do not have their OMS training compromised and undergo the same number of general surgery rotations as the 4-year residents.

Few changes have been made to the location of resident rotations in the last 15 years. First-year residents in both tracks are introduced to the program and specialty at all five major hospitals (BTGH, LBJ, Methodist, Memorial Hermann, and the VAMC). Neurosurgery and anesthesia rotations are conducted at BTGH, and general surgery for both tracks is now based out of Memorial Hermann and LBJ. In 2012, a new CODA standard required a dedicated month of pediatric anesthesia experience. Residents receive this training at the Shriners Hospital under the guidance of Dr.

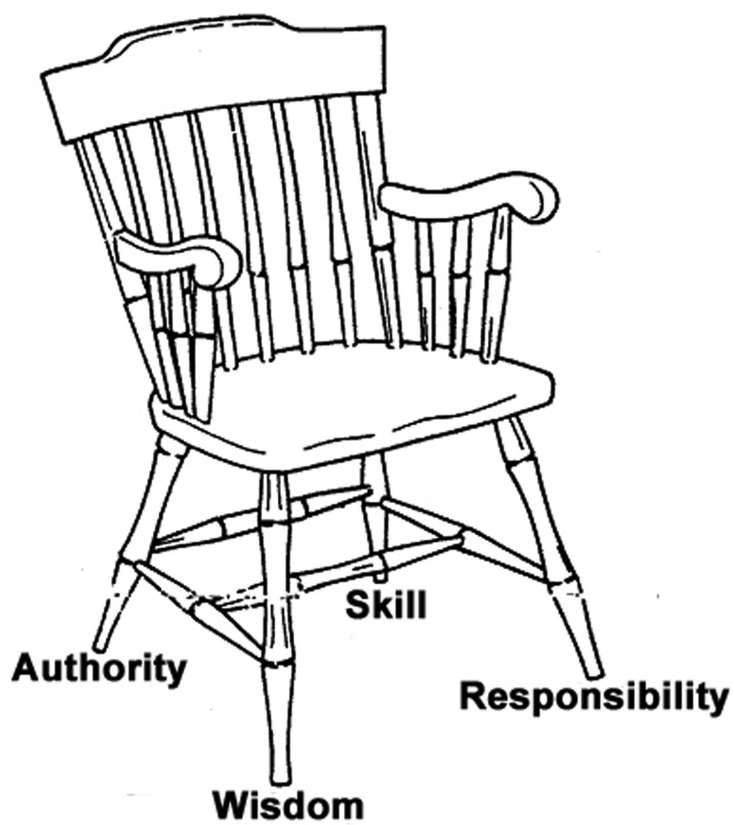
Melanie Lux, a former Baylor medical anesthesia resident who was very familiar and comfortable with the concept of training oral and maxillofacial surgery residents. The only significant change in rotations has been moving the 3-month medicine rotation from Methodist Hospital, where it was based for over 30 years, to Ben Taub and the VAMC under the supervision of Baylor medical faculty. The separation between Baylor and Methodist meant that more medicine private practitioners were involved in this rotation, and some were less inclined to teach our residents. The current rotation at the VAMC and Ben Taub has proven to be very valuable, especially with the addition of a month on the medicine consult service. We are very grateful to all the Baylor and UT medical school faculty for their interest and willingness to teach our residents, counting them as their own.

The role of externship programs in the nation has changed significantly over the last 15 years. In the past, dental students interested in OMS spent several weeks engaged in an externship to improve their skills and exposure to the specialty. Programs with large county hospitals were popular because the sheer volume of cases allowed students hands-on experience and training. When it came time to interview residents, programs looked favorably upon applicants who had an extra year of training in the form of internships, a GPR, or experience in an intensive externship. Programs believed that the additional training would allow these individuals to begin their OMS residencies up to speed, much as a medical internship benefited other surgical specialties. With the advent of integrated OMS/MD programs, the emphasis shifted from clinical experience to a candidate's academic record. The goal of externships also changed from opportunities to strengthen surgical skills to a chance for candidates to personally introduce themselves to a program. As a result of this shift, dental students began to favor shorter rotations, seeking multiple internships to broaden their exposure. The importance of a good externship program became an important recruitment tool, and this responsibility was entrusted to Nagi Demian. As a former resident, he was well equipped to understand the needs of dental students applying for externships in Houston. Despite a significant number of new rules governing the participation of non-UT students in clinical activities and the limitations of abbreviated rotations, he has designed an excellent program that has successfully attracted a number of highly qualified applicants to the program. Approximately 40 percent of our current residents have spent an externship with us before joining the program. The significance of the externship program has increased in recent years following the decision by the National Dental Boards in 2012 to stop providing numerical scores for the Part 1 and 2 examinations. Even though the specialty has recently started using a Comprehensive Basic Science Examination (CBSE) offered by the National Board of Medical Examiners as an academic

assessment, the correlative value of these scores with successful resident performance has not been validated. For applicants who come from schools that do not provide class rankings or a GPA, the externship program allows us to evaluate candidates through an additional mechanism.

Standards and the Surgical Chair

While significant effort has gone into the creation of a residency program with strong didactic and surgical experiences, the program has consistently focused on the importance of producing graduates who meet the highest standards of the profession. Along with academic and surgical performance, ethical conduct and the ability to represent the most noble values of the specialty are part of the annual evaluation of residents. Those unable to meet these standards have not been allowed to complete the program. The program recognizes our successful graduates with a long-standing tradition of surgical programs through the symbolic gift of a commemorative captain's chair during our graduation ceremony funded by the Hinds Academy. This practice is believed to have originated with the father of modern American surgical training programs, William Halstead, MD, the first chair of surgery at Johns Hopkins Medical School. Dr. Halstead suggested that the spindle-backed wooden chair, hard to sit on, represented the constant vigilance and efforts of a surgical healer. The four legs of the chair represented the necessary qualities of a surgeon: Authority born of considerable and current knowledge in the practice of surgery; Skill resulting from many hours of practice and effort; Wisdom derived from experience and an attention to detail; and finally Ethics, instilled by the profession's insistence that its practitioners accept the considerable trust patients give to their surgeons, believing that they will do their utmost to heal without consideration of ego, hubris, or reward. As the program continues into the sixth decade of its existence, the values of the surgical chair are as relevant now as they were when they were first proposed by Halstead and subsequently reinforced by the contributions of Drs. Hinds, Pleasants, Woodward, Adams, Lomba, Shelton, Helfrick, Taylor, Johnson, Donovan, and Wong.



*The Surgical
Chair*

Baylor Medical - Methodist Hospital Breakup

Robert R. Debes, DDS

(With permission from Texas Monthly, the following section is largely based on a comprehensive article that appeared in the magazine in March 2005, written by Mimi Swartz.)

The relationship between Baylor College of Medicine and The Methodist Hospital lasted over fifty-four years. Most observers thought this union would last forever; but, as a noted philosopher famously said, “all things come to an end.” The partnership between the two institutions ended in 2004. *Texas Monthly Magazine*, in a comprehensive report in March 2005, wrote that this was the first time in American history a medical school and its teaching hospital had severed relations. The breakup did not occur overnight nor did it happen without many attempts to heal the problems between these two great institutions of learning and healing. No, it was a long time in the happening, and in the end the common denominators that drive most organizations--money, control, and clashing personalities—were the culprits.

Baylor University College of Medicine relocated from Dallas to Houston in 1943 to anchor the young Texas Medical Center. (A little known fact is that Baylor University College of Dentistry, also located in Dallas, was supposed to join the medical school in the TMC at the conclusion of World War II. Of course, this did not work out.) Dr. Michael DeBakey was persuaded to come to Baylor in 1948. At that time, Baylor had no teaching hospital of its own. Hermann Hospital provided a place where clinical teaching could be done, but the doctors associated with Hermann would not allow DeBakey to operate on their patients. DeBakey discovered Methodist Hospital, a small non-air conditioned hospital located near downtown Houston at the intersection of San Jacinto and Rosalie Streets, and he began treating his patients there. Methodist had been founded in 1919. This new medical school – hospital association was mutually beneficial and became an immediate success. Shortly thereafter, plans were made to expand into a new hospital which would be located in the Medical Center. DeBakey was the driving force that led to the construction of the new 300-bed Methodist Hospital that opened in the Texas Medical Center in 1951.

The two institutions now had new facilities. Houston philanthropist Roy Cullen had funded a new Baylor building that was located across the street from Methodist

Hospital. It seemed to be a marriage made in heaven. But even good marriages have disagreements, and this one was no exception.

Hospitals and doctors get their money primarily from the government and insurance companies. This pool of money decreased in a dramatic way when insurance companies introduced managed care, and the government began limiting Medicare and Medicaid reimbursements in the 1980s. As the money pool decreased in size, both the hospital and the medical school thought they deserved a larger share of funds: The medical school, one of the most prestigious in the country, thought their doctors provided the skills and research that the hospitals needed to attract patients while Methodist Hospital believed it was the driving force for the success enjoyed because of the money it had provided to Baylor.

Baylor had other teaching relationships in the Medical Center, but Methodist Hospital wanted to be first among equals. Baylor refused this request. A compromise was put together that satisfied the two major players but did not entirely satisfy all the staff physicians at Methodist.

In 1973, Baylor signed a new thirty-year affiliation with Methodist. With this agreement, the future looked secure. The next thirty years were mostly calm, but a controversy over who controlled their direction and destiny was brewing. More money was needed to attract and keep top faculty and research doctors at Baylor. Because Methodist Hospital had some \$2.6 billion in the bank in 2002, this seemed the logical place to turn.

Various plans were put forth to resolve the money and control issues. But in the end, no agreement could be reached. So Baylor Medical went down the street to St. Luke's Episcopal Hospital and made it their teaching hospital. In the end the city of Houston was probably the biggest loser in the breakup.

The separation of Baylor and Methodist had little effect on the residents of our training program except that our residents no longer do anesthesia or medicine rotations at Methodist. Under a contract, the Department of Oral and Maxillofacial Surgery provides a resident to assist at Methodist Hospital. When department faculty members take cases to the operating room, they often perform the surgery at Methodist where our residents are able to assist in surgical procedures. Today the residents do a rotation that includes working with Drs. Terry Taylor and Jaime Gateno at Methodist where their facial reconstructive surgical cases are done.

*Memorial
Hermann
Hospital 2015*



Memorial Hermann Hospital

James W. Wilson, DDS

Robert R. Debes, DDS

Hermann Hospital, which was the first hospital in what became the Texas Medical Center, was opened in 1925. It was a gift to the City of Houston from George Hermann, a philanthropist who donated his considerable fortune to the city he loved. Hermann made his fortune in the cattle, oil, and land business. In a poker game he bought 30 acres of land north of Houston for 35 cents an acres. Under that plot of land, oil was discovered and the royalties paid him \$50,000 a week. He invested heavily in land, and it is safe to say he owned a considerable portion of the real estate in what is now south and southeast Houston.

George Hermann was a frugal man, and in his journey through life, he came to dislike doctors and hospitals. It was his belief that medical care was too expensive and many who needed care were unable to afford it. Around 1913, he donated ten acres of land in the south end of Houston for the establishment of a charitable hospital. This was to become Hermann Hospital. At its opening, it had 100 beds and some 100 doctors on staff. It also had a school of nursing (which closed in 1973). When

George Hermann died in 1914, he bequeathed his estate (about \$2.5 million in 1914 money) to the hospital.

Today Memorial Hermann Hospital (after a 1997 merger) has some 1100 beds. It is the largest non-profit hospital in Texas. In 1976, Hermann started the first air ambulance service in the state. Presently there are six helicopters on board. The first cardiac catheterization in Houston was done at Hermann Hospital in 1946, and the first penicillin to come to Houston was provided to Hermann in 1943.

Today Memorial Hermann is a Level I trauma center (one of two in Houston), and a \$650 million expansion of this facility is in progress.

When first built, Hermann Hospital had a dental clinic that provided care to indigent of the city. It was staffed by volunteers from the oral surgery community for many years. In 1961, the first oral surgery resident in the Houston training program was assigned to Hermann Hospital. Since that time Memorial Hermann Hospital has become an integral part of the Health Science Center and its training programs, providing both didactic and clinical care experience primarily for the acute care patient.

In 2001, Jim Wilson left private practice in the Dallas metroplex and became the service chief at Memorial Hermann. His presence provided a new stability and continuity to the OMS training program. Hermann and Memorial had merged in 1997 and as a result the faculty was forced to relocate its offices from the Hermann Professional Building to Smith Tower. This move left no in-house clinic for postoperative care of Hermann patients, which proved to be a logistical problem and financial burden on the training program. The answer came in the form of a new outpatient clinic in the basement of Hermann Hospital. This new clinic contained four rooms and a full laboratory. Initially the services were limited to postoperative wound care and minor procedures. Presently IV anesthesia is utilized for some of these cases.

*Memorial
Hermann
Operating
Room 2013: L
to R: Residents
Marcus Couey,
Sam Robinson,
David Wilson,
and a surgical
scrub nurse*



A problem that emerged was the increasing amount of facial trauma and the limited time of operating room availability. With strong support from the faculty and residents, the allotted time was expanded considerably.

Recruitment and retention of faculty and staff reflected the discrepancy between academic salaries and private practice, making it difficult, if not impossible, to attract additional faculty. In recent years this has changed through the support of the Harris County Hospital District and Memorial Hermann Hospital. This has resulted in being able to hire quality faculty and to upgrade the salary of staff.

With the addition of Jonathan Shum, who completed fellowships in ablative and microvascular surgery, our service has expanded into the area of oncologic and reconstructive surgery. Another recent addition, James Melville, has added strong support in reconstruction, pathology and trauma. Another area of increased training is with the management of oral surgery anesthesia cases with maxillomandibular advancement. Tracheotomies performed include both open and percutaneous techniques. At the present time the faculty and residents are doing research in the surgical management of sleep disorders with obstructive sleep apnea.

Memorial Hermann has announced a new \$650 million construction stand-alone trauma center, which will be the third of its kind in the United States. At the present time, a lot of planning is going into this new venture of facial trauma service.

In the summer of 2014, James Wilson resigned as service chief at Memorial Hermann Hospital. Nagi Demian is his replacement. Formerly Nagi was the service chief at LBJ Hospital. He is a graduate of the Dental Branch and the UT Houston OMS program and brings an enormous background of experience, knowledge, and energy to this position.

*Memorial
Hermann
Hospital 2015*



A Broadened Scope of Practice

Jonathan Shum, DDS, MD

With the introduction of Jonathan Shum as new faculty in July 2013, a broadened scope of practice was obtained within the fields of head and neck oncology and microvascular reconstruction. Jonathan completed Oral and Maxillofacial Surgery residency training at New York Presbyterian Hospital, Cornell Campus in New York City followed by two additional years of fellowship training in the areas of head and neck oncology and microvascular reconstruction at the Providence Portland Medical Center, in Portland, Oregon under the direction of Dr. Eric Dierks, and at the University of Maryland Medical Center under the direction of Dr. Robert Ord.

The addition of Dr. Shum has altered the landscape of oral, head, and neck oncology at the Texas Medical Center, as traditionally, comprehensive management of oncology patients was generally completed by the otolaryngology service. Although resistance to the introduction of an additional head and neck surgeon was initially strong, the department was able to carve a niche within the areas of maxillofacial oncology and microvascular reconstruction, owing to the supportive faculty and community dentists and oral and maxillofacial surgeons. Gradually, the referrals for malignant disease have increased over the first year, 2013–2014, to warrant the development of a dedicated rotation for residents.

The management of oral, head, and neck oncology generally involves the clinical suspicion of cancer warranting the definitive diagnosis by biopsy. This initial step is primarily completed by the community dentist or oral surgeon who upon the confirmation of diagnosis will refer the patient to our department for comprehensive treatment. We work closely with the oral medicine and diagnosis sciences department to review pathology slides to confirm diagnosis, and then we arrange for work up and staging generally in the form of imaging, CT, and/or MRI. Patients are presented to tumor board dependent on their insurance eligibility and are operated at one of three sites: Memorial Hermann Hospital, Ben Taub General Hospital, or the Methodist Hospital. As oral cavity cancers are traditionally treated with surgery first, the final pathology is reviewed by the tumor board at which point adjuvant therapy is considered. As the primary service for these patients, our service will arrange and provide the care and support required for oncology patients. Consequently, the oral and maxillofacial surgery residents will adopt a more active role in the perioperative management of oncology patients.

Associated with oral, head, and neck oncologic surgery are the reconstructive procedures that are generally required to recreate and alleviate deformities that often follow resection. Microvascular reconstructive surgery was also formally introduced into the scope of practice of the OMS Department in July 2013. The first free flap reconstruction procedure was completed in September 2013 with a fibula osteocutaneous free flap reconstruction of a hemimandibular defect for the treatment of an ameloblastic carcinoma.

Head and neck microvascular reconstructions are generally indicated for large composite defects or for reconstruction sites that have been compromised by radiation or prior surgery. The selection of the type of flap is based on the appropriate harvest site that will provide the tissue types desired for the reconstruction. Soft tissue donor sites include the radial forearm fasciocutaneous free flap, generally used for the tongue, buccal mucosa, maxilla or soft palate, and the anterior lateral thigh free flap that is indicated for larger defects not suitable for the radial forearm free flap. The requirement for bony reconstruction is traditionally the fibular osteocutaneous free flap that can incorporate skin, fascia and bone, or bone only free flap. The length of the fibula allows for numerous variations for the reconstruction of the jaws and structures of the face. In order of frequency, the general indications for these procedures in the OMS Department have been the reconstruction of malignant ablative defects, benign ablative defects such as osteoradionecrosis or medication-induced osteoradionecrosis, and avulsive maxillofacial trauma.

Future directions for the OMS Department in this sub-specialized aspect of our practice will be to establish a fellowship program to train aspiring OMS in this exciting field of oncology and reconstruction.

*Patient Entrance
at Ben Taub
General Hospital*



Ben Taub General Hospital History

Robert R. Debes, DDS

Ben Taub General Hospital (BTGH) was named for a Houston philanthropist who was instrumental in bringing medical institutions to the city and in developing the Texas Medical Center. Mr. Taub was a bachelor who accumulated a vast fortune in real estate and commerce and donated much of it back to the city he loved.

The evolution of the Harris County Hospital District (Houston) is interesting, and a few paragraphs will be devoted to this transformation.

The first hospital to be built for the care of the indigent in Houston was Jefferson Davis Hospital, located at 1100 Elder Street. This hospital was built in 1924 and had 150 beds. It was built over the site of a cemetery where many African Americans and Civil War veterans were buried. This created a storm of controversy in the city, as one might imagine. As the city grew in size and population, the need for a new and larger hospital was apparent. A new Jefferson Davis hospital was built on Allen Parkway in 1937. This hospital had 875 beds in its eleven stories. It also had an annex that housed nursing students and resident doctors. When Baylor Medical School moved

to Houston in 1943, this hospital along with the Veterans Administration Hospital were the teaching hospitals.

As the Texas Medical Center began to expand, it was thought that training hospitals should be located in close proximity to the medical teaching institutions. Baylor Medical School was already in the Medical Center and the University of Texas was soon to come.



*Emergency
Entrance at Ben
Taub General
Hospital*

Thus, in 1963, to be near both medical schools, Ben Taub General Hospital, with 568 beds, was built in the Medical Center to replace the Jefferson Davis Hospital on Allen Parkway. The original Jefferson Davis Hospital (1924) has been converted to a loft apartment building, and the Allen Parkway building was demolished in 1999, to be replaced by a Federal Reserve Bank.

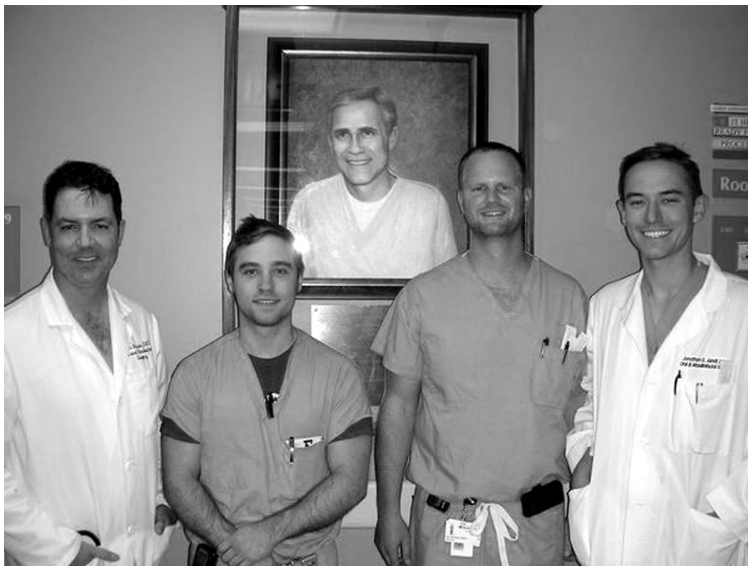
Ben Taub General Hospital Today

Phillip N. Freeman, DDS, MD

James W. Kennedy, DDS

Ben Taub General Hospital provides a major component of resident training for the UT Houston oral and maxillofacial training program. As a level one trauma center, it is one of the busiest services for resident rotation. Four residents rotate through the service for a period of two months each year. The service is composed of one chief resident, one junior level resident, and a first- and second-year resident. This rotation provides the residents with extensive training experience in treating trauma, pathology, infections, orthognathic, cosmetic, oncologic surgery, and reconstruction, including microsurgical procedures.

*OMS
Residents in the
Ben Taub
James V. Johnson
Clinic 2011.
L to R:
Roch Messier,
James Garrett,
Ian Buckley and
Jonathan Jundt.*



Each year this service has more than 15,000 outpatient and emergency visits, 400 outpatient anesthesia cases, and more than 350 major surgical procedures.

After Jimmy Johnson retired as service chief at Ben Taub Hospital in 2006, Jim Kennedy took over this position. During his tenure, dental implants on a fee-for-service basis was inaugurated in cooperation with the Harris County Dental Clinic under the direction of Dr. Matthew Plummer. In addition, an orthodontist was

added to the OMS department faculty on a part-time basis to aid in the treatment of patients with jaw deformities requiring orthognathic surgery. In 2011, Jim Kennedy left his position with the hospital to be succeeded by Phil Freeman.

*BTGH operating
room 2010.
L to R:
Roch Messier,
George Forrest,
Jim Kennedy,
and US Army
rotator
Kenny Carey.*



Lyndon B. Johnson Hospital History

Robert R. Debes, DDS

After the construction of Ben Taub General Hospital in the Texas Medical Center in 1963, the Jefferson Davis Hospital on Allen Parkway ceased to be a primary training facility for Baylor and UT Medical Schools. What to do with it became the next question for the Harris County Hospital District. It was decided to use the hospital as an outpatient clinic with emphasis on obstetrics and psychiatric care. It would serve the indigent of the community for several years in this capacity, but it soon became overrun with patients as the population of Harris County grew. (In one day 1335 patients were treated.) In the 1980s conditions in the hospital deteriorated and became the subject of local newspapers and television reporters. Early in this decade a book, *The Hospital*, was published that detailed all of the shortcomings and the deplorable conditions that prevailed in this once proud hospital. This was the straw, so to speak, that broke the camel's back.

In the mid-1980s a decision was made to close down this hospital and build a new hospital in northeast Houston. It was originally designed to replace the obstetrics and maternity services of Jefferson Davis hospital, but that changed. It was initially felt that the proposed location at 5600 Kelly Street might be prone to flooding, but that proved to be incorrect. The initial name choice for this new hospital was the North-Northeast Hospital, but after some consideration, it was named after our fellow Texan and former president, Lyndon B. Johnson.

The hospital opened in 1989 with 330 beds. In 1990 it became a true general hospital with a full range of services. That same year it became a partner with the University of Texas Health Science Center at Houston. Today it is staffed by the faculty, residents, and students of the UTHSC-Houston School of Medicine and MD Anderson Hospital.

*LBJ General
Hospital*



Oral and Maxillofacial Surgery Service at LBJ Hospital Today

Nagi Demian, DDS, MD

The beginning

The hospital in its current name and mission did not exist prior to 1990. The current building was mainly a labor and delivery hospital that was meant to relieve the workload of another Harris County Hospital District (now Harris Health System) health care facility, the Jefferson Davis Hospital. It became LBJ General Hospital in 1990 with 330 beds, and its affiliation changed from Baylor College of Medicine to the University of Texas Health Science Center at Houston (currently UT Health).

From its inception, the hospital was mandated to provide medical care for the needy and uninsured.

The OMS clinic had to also be built from scratch. Mark Wong used creativity to help design a fully functional clinic in the very small space provided. The entire clinic consisted of two operatories, a recovery area, and a room holding the panoramic x-ray

*Jefferson Davis
Hospital 1949*



machine and film processor. A faculty and two residents ran the OMS service for most of the 1990's until 2013.

LBJ hospital has always tried hard to shed its predecessor's reputation as a charity hospital with crowded hallways, a high mortality rate, and unsanitary conditions. The desire of all involved in managing the hospital was to make it an improved, high quality community hospital with multiple subspecialty services. Despite some ups and downs, and in large part thanks to the leadership commitment, the hospital has maintained a steady course of continued improvement since its inception.

From 2000 to the present time

By the year 2000, LBJ had been established to meet its mission of acute care. It has served the community, especially the population in the surrounding areas, as well as additional referrals assigned to LBJ from different clinics. At the 10-year anniversary, LBJ had seen 1.5 million patient visits, with more than 800,000 being adult and pediatric emergency visits, and over 94,000 obstetric deliveries

The OMS scope at LBJ covered a broad spectrum of cases: dentoalveolar, sedation, pathology, trauma, and reconstructive surgeries. The LBJ service was assigned patients from the satellite clinics in Acres Home, Settegast, Bordersville, and Baytown. Despite the assigned referrals, most of the patients seen were in need of attention of an urgent nature. By the year 2005, roughly 200 patients were seen in every 2.5 days

of clinic operation. Not only did LBJ become busier, but the breadth and quality of services provided also grew greatly. Head and Neck cancer services were added. A head and neck tumor board was initiated, and a multidisciplinary approach was followed to improve outcomes.

This collaborative effort yielded a protocol-like approach to treating head and neck cancer patients. This work included not only recognizing and treating the cancer, but also treating associated and no less devastating conditions such as osteoradionecrosis (ORN), necrosis of the jaw bone due to antiresorptive therapy (ARONJ), and post-treatment trismus. Treating and preventing the above conditions became a core of LBJ OMS activities. Emphasis on improving treatment outcomes meant more attention and time was spent preparing head and neck cancer patients for their therapies and improving their quality of life. Procedures such as pretreatment, extraction, dental implant placement, and coronoidectomies, became part of the arsenal available to meet or even exceed levels of care offered in well known cancer centers around the country.

New services and technologies have also been added. These include moderate sedation with infusion pumps for the clinic, sialoendoscopy, TMJ arthroscopy procedures, and laser treatment to name a few.

*LBJ OMS
clinic space:
Limited but
highly efficient.
The same space
is still in use
today with some
modifications*



In 2012 Harris County Hospital District became the Harris Health system. Although not a level one trauma center, LBJ, with more than 70,000 emergency room visits per year is the busiest level three trauma center in the state of Texas.

Recognizing the need for expanded space, Harris Health System embarked on an expansion project that included the construction of a new outpatient facility that included new clinics and a new outpatient operating room center. (This is the so called west-land expansion in reference to the land that was west of the original building acquired by Harris Health for that purpose in LBJ.)

Our LBJ OMS clinic will remain in the main hospital building but will be completely remodeled on the first floor and will include six operatories, a cone beam CT room, a dedicated recovery area, separate physician and nursing stations, and a dedicated reception area.

The UTHSC-Houston system also recognized the importance of LBJ, and faculty hiring increased with the number of full-time faculty at LBJ almost doubling in number. Similarly the OMS department responded in kind. The LBJ OMS service now has two full-time faculty members and three residents, including a senior chief resident starting in 2014. At this time, LBJ OMS service sees more than 375 patients per month, has three operating room days (increased from two with the addition of the outpatient center operating room), performs moderate sedation two clinic days per week, and is in operation five clinic days per week.

The future

The LBJ OMS service now has new leadership. Issa Hanna, who is well known in our department and very familiar with the service, is at the helm. With a new facility, he will be leading the service. Additionally, the service has assumed a more active role in treating cancer patients with the addition of James Melville. Both Drs. Hanna and Melville completed their training in oral and maxillofacial surgery at the Jackson Health System in Miami. They were both in the residency program together at one point with Issa being the more senior of the two. James has additionally completed a fellowship in oral and head and neck oncology and reconstruction. With such great potential, the future promises to be very bright for the LBJ OMS service.

*Michael E.
DeBakey VA
Medical Center,
Houston 2014*



Houston VA Medical Center History

Robert R. Debes, DDS

The origin of the VA Medical Center in Houston began in April 1944, when President Franklin D. Roosevelt approved the acquisition of a 118-acre site at the corner of Old Spanish Trail and Almeda Road. Funds for the purchase came from the citizens of Houston. The Anderson Foundation was the major donor with a gift of \$100,000. Some 353 citizens of Houston contributed the remainder of the purchase price, which amounted to \$221,500 (\$1877 per acre). The land was donated to the U.S. government for the construction of the hospital. The cornerstone of the new hospital was laid in March 1945. Original estimates were that the hospital would cost \$6 million; but by the time it was formally opened in September 1946, the cost had increased to around \$11 million.

When the European war ended in 1945, President Harry Truman announced that this new hospital would belong to the U.S. Navy. The plans called for a 500-room hospital with 1000 beds. On the grounds were 37 buildings to provide additional services for returning veterans. The hospital construction was completed in some two years. In September 1946, the hospital was officially opened. At the formal dedication ceremonies, it was said then there was not a finer hospital in the world. A stated

mission of the hospital was to bring to American citizens the lessons that the armed forces had learned in combat. In addition, since the U.S. Navy operated globally, a further mission was to provide the Navy with all medical knowledge necessary throughout the world.

This new hospital remained a Navy hospital until April 1949 when it was transferred to the Veteran's Administration. Of note is that this hospital was the first teaching hospital used by Baylor University College of Medicine for their students and residents. The first oral surgery resident to be trained at the Houston VA Hospital, Edward J. Degnan, arrived in 1954, some five years after UT Houston had initiated its oral surgery training program.

The Houston VA Medical Center

Harry D. Gilbert, DDS

The VA Hospital has two University of Texas OMS residents assigned for each two-month period during the year. The first-year resident is exposed to a large volume of dentoalveolar surgery cases in the clinic including impacted third molars, extraction of teeth, and reduction of palatal and mandibular tori. These procedures are often done under IV sedation with local anesthesia. The first-year OMS resident is also introduced to medically complex patients and their surgical management. The first-year OMS residents are also exposed to the proper work up and arrangement for patients to be scheduled for the operating room.



*Dr. Harry
Gilbert staffing
a case in the
VAMC OMS
Clinic*

The senior OMS resident is expected to supervise the first-year resident in conjunction with the OMS attending surgeon, Dr. Rickey A. “Rick” Morlen. The senior resident is expected to manage the admission of patients to the hospital and provide the needed treatment in consultation with the help of the attending OMS staff. The senior resident is also provided significant exposure to the virtual work up of dental implant patients in consultation with the VA prosthodontic program. The senior resident is exposed and uses the cone beam 3D x-ray to order and use virtually made splints for use during treatment of implant patients in the clinic and the

operating room. The senior resident also consults and works with Plastic and ENT surgery to provide surgical care for patients requiring complex reconstructive surgical care.

The complex medical care required by VA patients provides OMS residents with valuable experience needed for their training.

*Shriners
Hospital in the
Texas Medical
Center*



Shriners Hospital

Kamal Busaidy, DDS

Hurricane Ike dealt a blow to Galveston in 2008, the likes of which hadn't been seen since 1900. The Shriners Hospital in Galveston suffered such severe damage that clinical services, including the care of children with cleft lip and palate, came to a complete halt. Within two years, the cleft program shifted to the Shriners Hospital in Houston. At that time, the team included one plastic surgeon (Dr. Steven Blackwell, the founding director of the team) and one orthodontist (Dr. Jim Fairleigh).

Within a year, a number of patients with cleft lip and palate disorders had arrived who required orthognathic and dentoalveolar surgery. Without an oral and maxillofacial surgeon on the team, the hospital was having difficulty in comprehensively managing their needs. In 2011, therefore, the Shriners Hospital in Houston negotiated a contract with the UT Houston Department of Oral and Maxillofacial Surgery. The department was to provide services for the cleft team, and Kamal Busaidy was selected as the principal surgeon to lead that effort.

The new affiliation proved to be an immediate success. The addition of the cleft program to the department's portfolio of hospital affiliations has brought a new wealth of educational opportunities for the residents. Under Kamal Busaidy's

tutelage, residents have been able to attend a multidisciplinary clinic every week and to provide orthognathic surgery for cleft lip and palate patients. In addition, residents have enjoyed participating in rigid external distraction cases and cleft bone grafts. Dr. Harry Morse has also succeeded in establishing a dental implant service within the team. The Shriners Hospital affiliation has proven all the more important as resident involvement in the UTHHealth cleft lip and palate program has decreased in recent years.

In May 2014, Dr. Ernest Cronin, a renowned cleft surgeon, joined the Shriners team, combining his established cleft lip and palate practice with that of the Shriners Hospital. The resulting collaboration between the Christus Foundation for HealthCare's Cronin & Brauer Cleft Palate and Facial Reconstruction Clinic and the existing cleft lip and palate program at Shriners Houston has resulted in a busy and successful cleft lip and palate service.

At the time of this writing, the Cronin & Brauer Cleft Lip and Palate Clinic at the Shriners Hospital in Houston is one of the nation's premier cleft lip and palate programs. It is manned by a comprehensive team of professionals, comprising three plastic surgeons (Drs. Steven Blackwell, Ernest Cronin, and Eric Cole), two oral and maxillofacial surgeons (Drs. Kamal Busaidy and Harry Morse), two geneticists, (Dr. Jackie Hecht, who is also the current associate dean for research at UTSD, and Alix D'Angelo), Dr. Robert Lee (orthodontist), and Dr. Binoy Chandy (of the Baylor ENT department). In addition, the team has a speech pathologist, a child life specialist, a psychiatrist and a pediatrician. Over the next year, the cleft team plans to install a cone beam CT at the Shriners Hospital and to incorporate a pediatric dental service.

Smith Tower Intramural Faculty Practice

Donald P. Butler, DDS

The department intramural faculty practice, located on the 22nd floor of the Smith Tower in the Texas Medical Center, has been in continuous operation since 1988. It provides an opportunity for members of the full-time faculty to see private patients. Each member of the current full-time faculty is assigned a weekly allotment of time at the facility.

The Smith Tower clinic operates smoothly with the help of a very capable classified staff. It also serves as home base for two OMS residents, a chief resident and a first year resident, while they complete their Methodist Hospital rotation. The following photographs were taken by Mei Atienza under the direction of Kamal Busaidy, who submitted the image collection for this book:

*Photo on left:
Mark Wong*



*Photo on right:
Jim Wilson
and resident
Karl Chandler*



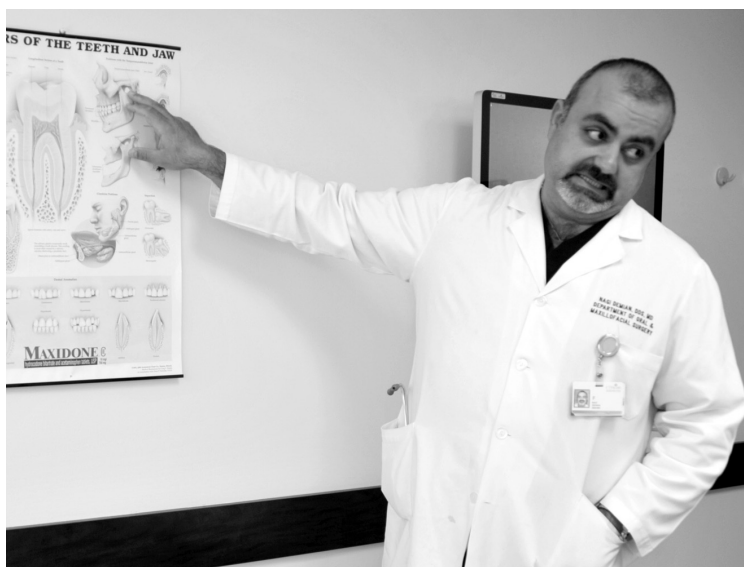
*Joyce Hooks
at the intramural
practice reception
desk*



*Issa Hanna
with residents
Jonathan Jundt
and Kelsey
Menegotto*



*Nagi Demian
during a patient
consultation
visit at the
Smith Tower
Clinic*



*Photo on left:
Jonathan Shum*



*Photo on right:
Jim Wilson and
resident
Karl Chandler*



*Resident
Jonathon Jundt
and Kamal
Busaidy*



*Rosa Benavidez,
Kamal Busaidy,
and Kelsey
Menegotto*



*Kelsey
Menegotto,
Charlie Miller
and Phil
Freeman*



*Phil Freeman
and resident
Kelsey
Menegotto*



Resident Derrick Zech fabricating a stent in the Smith Tower clinic laboratory



Smith Tower staff members Dena Taylor (L) and Rosie Sanchez (R) demonstrating the Cone Beam CT which was a generous gift from the Hinds Academy Foundation.



The Faculty

Robert R. Debes, DDS

On a hot humid evening in June 1999, the Golden Anniversary of the founding of the Oral and Maxillofacial training program at University of Texas-Houston was being celebrated. A full house was in attendance at the Petroleum Club high above downtown Houston for this gala affair. *Looking Back*, a record of our history from 1949 to 2000, made its debut. Little did we know that changes were on the horizon that would significantly alter the dental school, the department, and many aspects of our training program. A discussion of those changes follows.

John Helfrick, who had become chairman of the department succeeding Edward C. Hinds in 1984, resigned with the coming of the millennium. Mark Wong, who had joined the department in 1987, was named chairman after an extensive search (discussed further within this chapter). Growing space needs within the Texas Medical Center, where the Dental Branch had been located since 1955, resulted in the school being relocated to the nearby Research Triangle a few years later. New faculty and staff ultimately joined the department and our training institutions to supervise and work with residents. All of these events and happenings thus prompted this chronicle and recording of the past fifteen years. An explosion of activity associated with UT Houston occurred, suggesting that these events be documented as a part of our history.

The new century has seen many changes in the department faculty at the Dental Branch. Before discussing new personnel, this book takes a look at those who were present during the transition into the new millennium.

Full-time Faculty

Mark Wong joined the faculty in 1987, became the program director in 1996 and has been department chairman since 2001. His biography can be found on page 86.

Jimmy Johnson remained the service chief at Ben Taub Hospital. Jimmy joined the faculty in 1987. His appointment as chief that year represented the first time that the service was represented by a full-time attending surgeon. This provided much needed

continuity and guidance for residents covering this busy service. His calm demeanor and firm method of instruction made him a favorite, not only within our department but throughout the entire hospital. Jimmy retired from the department in 2014.

Don Butler came to the Dental Branch in 1989 following his retirement from the U.S. Public Health Service. Don worked with James B. “Jim” Sweet where his responsibilities included the predoctoral program, the resident dentoalveolar training, and coordination of the OMS resident implant program. When Jim Sweet retired in 1995, Don became director of the predoctoral program at the Dental Branch. Don retired in 2004.

Ronald Redden, a dentist anesthesiologist, joined the faculty in 1990. Ron, a graduate of Baylor College of Dentistry, completed his anesthesia training at the Medical College of Virginia. He was a full-time faculty member until 1995, when his time was reduced to half. He left the department in 2007.

Jaime Gateno, who joined the department in 1993, made the Smith Tower intramural practice his primary office location, and worked along with residents at Methodist, Memorial Hermann, LBJ, and Ben Taub hospitals. He also served as co-director of the UTHSC Cleft Palate Team. Jaime left the department in 2005.

George Suchko, a retired Army colonel who had joined the department in 1995, continued his primary responsibilities associated with the predoctoral program. George was also responsible for direction of the dental implant program at the Dental Branch. After Don Butler retired in 2004, George became director of the Dental Branch OMS predoctoral program. He retired in 2014.

Jon Bradrick joined the department in 1997 and became service chief at Memorial Hermann Hospital soon after his arrival. Jon came from Cleveland, Ohio, where he was a member of the teaching staff at Case Western Reserve University and Cleveland General Hospital. He left Houston and returned to Cleveland in 2001.

John Helfrick, who became chairman of the department in 1984, left the department as the millennium began. John brought about many changes in his sixteen years with UT Houston, including upgrading the program and helping it gain national prominence. His work did not go unnoticed by those in our national organizations.

Continuing the march toward excellence is Mark Wong, who had been serving as program director since 1996 and was named the interim chairman in 2000. Choosing a new department chairman began with the formation of a search committee. The committee was appointed by Dean Ronald Johnson and included the following: Drs. James Kennedy, Tom Weil, James Johnson, Catherine Flaitz, Don Butler, Marion Messersmith, Margaret McNeese, Karen Stortz, Bob Newland, and John Teichgraeber, Chairman. Several applicants were interviewed before Mark Wong was selected and appointed in 2001.

One of the first hires made after the turn of the century was Jim Wilson. Jim graduated from the University of North Carolina School of Dentistry and received his OMS training under Bob Walker at Parkland Hospital in Dallas. He practiced in the Dallas Metroplex area for 25 years and then decided to join the UT Houston program in 2000. Jim replaced Jon Bradrick at Memorial Hermann Hospital as service chief. Jim did an outstanding job integrating the residents into the trauma flow at Memorial Hermann Hospital. Today Memorial Hermann is a Level I trauma center without peer. The residents have always looked forward to this rotation for an excellent experience under Jim's tutelage. As of the summer of 2014, Jim continues on a part-time basis with the training program.

Dana Brotherton and Tony Chu, both new graduates of the UT Houston OMS training program, joined the full-time faculty in 2000 and were primarily associated with Memorial Hermann hospital staffing. Both left the department after one year to go into private practice.

Joe Marchena joined the faculty in 2001. Joe finished Harvard Dental and Medical Schools and also began his OMS training in Boston before transferring and completing training at Charity Hospital of Louisiana at New Orleans under the direction of our own Jack Kent. Joe came to Houston and was appointed service chief at Ben Taub Hospital where he remained until 2006 when he returned to Boston and private practice.

Kamal Busaidy came to the department in 2002. Kamal finished dental school in the United Kingdom. His initial training in our specialty took place in London. After completion, he went to Oman where he worked in a government hospital. Kamal left Oman in 1998 to enter OMS training at UT Houston, and joined the faculty after finishing our program. Presently he is service chief at the Shriners Hospital in the Medical Center. Kamal has taken a special interest in the high-tech simulation

lab located in the Hinds Academy Suite at the School of Dentistry. In that setting, he supervises the training of students, residents, auxiliary staff and members of the community as they respond to simulated real life/real time medical emergencies. In addition he is involved with teaching at all levels and participates in the intramural practice at Smith Tower. At this writing, Kamal is an examiner for the American Board of Oral and Maxillofacial Surgery.

Two members of the program's class of 2005, Nagi Demian and Didier Malis, joined the full-time faculty in July of that year. Nagi Demian was born and raised in Lebanon; he lived for a time in Romania and then immigrated to Texas. He received his dental and medical degrees from the University of Texas at Houston. Nagi became the service chief at LBJ Hospital at the time of his faculty appointment. The LBJ program has become outstanding under his leadership. Nagi is extremely likable and a most capable leader and educator. In 2014, Nagi became the service chief at Memorial Hermann Hospital to replace the departing Jim Wilson.

Didier Malis, a native of Switzerland and also a UTOMS 2005 graduate, earned his dental and medical degrees from the University of Geneva. He went to the United Kingdom for ENT training, and then came to UT Houston for his formal training in oral and maxillofacial surgery. Didier joined Jim Wilson where he worked primarily at Memorial Hermann Hospital. Didier resigned in 2007 to return to Switzerland and private practice.

Jim Kennedy completed our training program in 1971 and went into private practice in the Houston metropolitan area. In 2006, he left private practice and joined our faculty, bringing a world of experience and knowledge to our residents. He worked with the residents at Ben Taub and Memorial Hermann Hospitals until 2011, when he left the department to work for the Texas State Board of Dental Examiners, and later retired from that position in 2014.

Ayesha Nawab joined the department in 2008. Ayesha was a graduate of the Harvard Dental and Medical Schools and trained in oral surgery at the University of Connecticut. Serving as service chief at Ben Taub Hospital, Ayesha was a respected and competent addition to our training staff. She left the faculty in 2011 and moved to the Washington D.C. area.

Faculty and Staff

2009 L to R:

Cynthia Jackson,

Jim Kennedy,

Teresa Granhold,

Nagi Demian,

Jimmy Johnson,

Bob Debes,

Ayesha Nawab,

Mark Wong,

Harry Gilbert,

Jim Wilson,

George Suchko,

Kamal Busaidy

and Clark

Whitmire



Issa Hanna joined the department in 2011. Issa is a graduate of the University of North Carolina School of Dentistry and completed his postgraduate training at Jackson Memorial Hospital in Miami under Robert Marx. Issa worked with Nagi Demian at LBJ Hospital for several years. When Nagi left LBJ to move to Memorial Hermann Hospital, Issa became the service chief at LBJ. Issa is well regarded and respected as a teacher and surgeon.

Phil Freeman joined the faculty in 2011. Phil, a graduate of the University of Louisville School of Dentistry, received his medical degree from Southwestern Medical School in Dallas, and also took his OMS training at Parkland Hospital under Bob Walker. Phil is board certified in both plastic and oral and maxillofacial surgery. He is the service chief at Ben Taub Hospital and also works at Smith Tower in the intramural practice. Phil's expertise in cosmetic surgery has added a new dimension to the residents' scope of training.

Chris Olynik finished the training program in 2012 and joined the faculty for one year. He worked primarily at Memorial Hermann Hospital. When his wife completed her training in pediatrics in 2013, they returned to British Columbia to enter private practice.

Trevor Treasure came to the department in 2012. Trevor graduated from the University of Toronto School of Dentistry and then finished Southwestern Medical School in Dallas. He then completed OMS training at Parkland Hospital under Bob Walker. He served as a full-time faculty member at the University of Indiana before

coming to UT Houston. He has quickly become a favorite among the students and in 2014 was awarded the coveted John McGovern award for his clinical teaching skills. He is the first person from our department to win this prestigious honor.

Jonathan Shum joined the faculty in 2013. Jonathan received his dental education at the University of Toronto and his medical degree at Cornell Medical School in New York City. Fellowships in Head and Neck Oncology and Microvascular Reconstruction at Providence Medical Center in Portland, Oregon, and the University of Maryland in Baltimore were his post-graduate pursuits. Jonathan's special area of expertise is the treatment of malignant tumors arising from the mouth, jaws, and salivary glands. Memorial Hermann Hospital is his primary base of operation.

James Melville came to the department in 2014. He graduated from the University of Michigan School of Dentistry. James did multiple fellowships at the University of Miami under Robert Marx. He works at Memorial Hermann and LBJ Hospitals doing cancer surgery and working with trauma victims.

Harry Gilbert came to the Houston VA Medical Center in 1985 where he served as Chief of Oral and Maxillofacial Surgery and later chief of the Dental Department. A graduate of the University of Missouri at Kansas City, Harry trained at the VA Hospital in Detroit. Harry is an outstanding teacher. The VAMC OMS rotation he directed was consistently a valuable training experience for our residents. During Harry's 29 year VA tenure he also staffed the Dental Branch predoctoral clinic on Friday mornings. He retired from the VA in 2014 to join the department full-time faculty, where he now serves as director of the OMS predoctoral program at the School of Dentistry.

Part-time Faculty

Bob Debes, one of the early graduates of the Houston program (1959), first joined the part-time faculty in 1956, and, except for a nine-year hiatus during the 1990s, he has continued his affiliation and remains active today. He still covers AM and PM predoctoral clinics every Friday. Sidney H. "Sid" Schwartz, another dedicated member of the local OMS community, began staffing predoctoral OMS clinic sessions in 1986, and retired in 2006 after 20 continuous years of service. Bernard "Bernie" Natkin, a St. Louis graduate, joined the faculty in 1995, and has

continued to staff our predoctoral clinics since that time. Helena “Micki” Thomas, who graduated from the UT OMS program in 1995, joined the part-time faculty and staffed Dental Branch OMS clinic for five years before leaving in 2000. After spending several years in private practice, she is now acting chairperson of OMS at The University of Detroit Mercy School of Dentistry.

Raymond R. “Ray” Reid, a 1964 graduate of the program and member of the Houston private OMS community, had been affiliated with the department during several time periods over the years. He rejoined the faculty in the early 1990s, first at the Dental Branch predoctoral clinic, but he later stepped up to fill unexpected voids in program faculty coverage. He served as interim chief of service at Memorial Hermann immediately following Bill Roche’s retirement, and later managed the Ben Taub service when Jimmy Johnson was called up for a tour of active duty. His faculty appointment had increased accordingly to 0.5 FTE or 1.0 FTE during those periods. He continued to staff predoctoral clinics at the Dental Branch until he was forced to retire due to a terminal illness. Ray passed away in December 2000. He was an excellent teacher and role model and was revered by all – colleagues, students, residents and patients.

Clark Whitmire, a dentist anesthesiologist, joined the department in 1997. Clark graduated from the University of Alabama School of Dentistry and the Samford University School of Law. He received his training in anesthesiology in New Jersey. Clark was appointed to half time status (0.5 FTE). He plays a significant role in the OMS department’s predoctoral didactic program and, as previously mentioned, directs several courses.

Neil Gorme, a UT Dental Branch graduate who returned to Houston following his OMS training at Kings County, NY, worked in Dental Branch predoctoral clinics from 2000 until 2004. Micheal “Mike” O’Shell, who graduated from the Dental Branch, completed his training in Galveston and joined the faculty in 2000. He staffed the predoctoral clinic one half day weekly until he resigned in 2003. Bryan Bouchelion joined the part-time Dental Branch faculty in 2000 and left in 2002.

Frank Frishkey, who had completed training in our program in 1987 and had previously been a member of our part-time faculty from 1987 until 2000, returned again in 2005 and remained through 2007.

Tom Williams, who maintains an OMS private practice in DuBuque, Iowa, joined the faculty in 2007. Tom spends several weeks, in “time blocks” at the Medical Center each year, primarily staffing at Ben Taub General Hospital. Bruce Smith, a member of the OMS class of 1990 who had held a part-time faculty appointment from 1990 until 1997, returned in 2008 and has continued since that time. Incidentally, Bruce’s son Scott is a current resident in the 6-year program and is scheduled to graduate in 2019. Chad Seybold, a graduate of the UT program in 2006, worked at LBJ Hospital for a short while in 2010 before going into private practice in Houston.

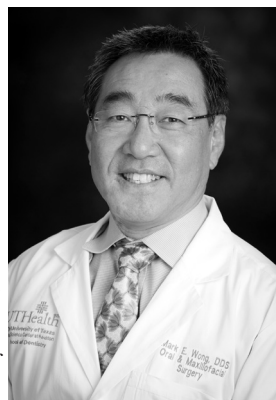
Jim Bertz, who directed the Memorial Hermann Hospital program from 1975 to 1982, returned to us in 2010. Listed as part-time, he is with our department on a half-time basis. While at UT Medical School, he was associate dean for student affairs. Jim has his medical degree from Baylor College of Medicine and completed his OMS training at Parkland under Bob Walker. When not staffing at Ben Taub or Memorial Hermann Hospitals, he still operates his private practice in Scottsdale, Arizona.

Rick Morlen, a 2001 graduate of the UT program, completed his OMS training as an active duty Army officer. Rick, also a West Point graduate, received his dental degree from Southern Illinois University School of Dental Medicine. He retired from the Army several years ago and entered private practice in the Albuquerque, NM area, and later became affiliated with the Veterans Administration. He joined the Houston VAMC staff in 2013, and became the OMS service chief when Harry Gilbert retired.

Kent Stobaugh rejoined the faculty in 2013. Kent had finished the UT program in 1973 and entered private practice shortly thereafter. Kent placed a heavy emphasis on dental implants in his Houston practice. He had previously been associated with the department from 1991 until 2004, initially staffing in the Dental Branch OMS resident suite with emphasis on implant cases for upper level residents, and later directing an elective implant rotation for chief residents from his private office. In rejoining the faculty following his retirement from private practice, Kent again brings his expertise to the department and is teaching both undergraduates and residents.

In summary, an outstanding cadre of faculty has excellently utilized their training and experience to produce leaders and future leaders in our specialty. The entire faculty came from highly respected training programs where they studied under outstanding experts in our field. Combining all these backgrounds with a desire to provide the best teaching experience possible has made the UTHSC-Houston Oral and Maxillofacial Surgery program a highly sought destination for resident applicants.

*Mark E. Wong, DDS
Chairman, Department of Oral
and Maxillofacial Surgery,
University of Texas School of
Dentistry at Houston*



Mark E. Wong

Mark Wong was born in Singapore on April 14, 1955. Singapore is not the furthest city in the world from Houston (that distinction belongs to Vacoas, Mauritius, which is 10,627 miles from Houston), but at 9,936 miles, it is still quite a distance away! On the surface, the geographic, ethnic, and cultural differences between Houston and Singapore would seem large and significant.

However, on closer consideration, there are many similarities, starting with the heat, humidity, and reliance on air conditioning. Both are also highly cosmopolitan cities with multiple ethnicities integrated into a common society producing a melting pot representative of the world. And both cities play host to the oil and medical industries. These similarities made it less challenging for Mark and Marlene to make Houston their home, and they have lived here since 1987, starting and raising their family of three children.

Mark comes from several generations of physicians, dentists, and nurses. Education was always stressed, and his physician parents sought a broad and multi-dimensional experience for their three children. He attended elementary and middle school at the Singapore American School and then was sent to Melbourne, Australia, for high school as a boarder at Melbourne Grammar School. He then returned to Singapore for a two-year college program at Raffles Institution before beginning dental school at the University of Singapore. Following graduation in 1978, he spent the next two years completing his mandatory military service as a dental officer. While in dental school, he had a fortuitous meeting with Mr. (later Professor) Paul Bradley, an oral

and maxillofacial surgeon from North Wales in the United Kingdom. Mr. Bradley was engaged in a six-month sabbatical in Singapore, and his stories of practicing oral and maxillofacial surgery in the bucolic North Wales countryside stimulated great interest.

A friendship ensued, which was to have a profound effect on Mark's choice of career and the path he took to accomplish it. After his military service, Mark accepted Mr. Bradley's invitation to visit the North Wales unit. The North Wales oral and maxillofacial surgery unit, founded by Mr. F. Gordon Hardman in 1955, provided clinical services to the entire North Wales region, extending from the city of Wrexham in the south to Bangor in the north. In Wrexham, the team worked at the Maelor General Hospital, while in Bangor, clinics and operating services were provided at the Caernarvon and Anglessey Hospital. The base of operations for the oral and maxillofacial surgery service was at a new hospital called Ysbyty Glan Clwyd, located in a small village called Bodelwyddan, roughly half way between Wrexham and Bangor. Prior to this hospital being built, the department was based in a city close by called St. Asaph, at the H.M. Stanley Hospital. The dynamism of the unit and vast scope of practice owed much to the surgical legacies continued by Mr. Hardman and Mr. Bradley. Hardman was trained at East Grinstead Hospital by the venerable Sir Terrance Ward, while Bradley trained at Queen Mary's Hospital, under Mr. Norman Rowe. In a remarkable coincidence and a testimony to the notable reputation of the North Wales unit, The University of Texas Dental Branch at Houston sent residents there on rotation from 1972 to 1974. (See pp 64 – 65, *Looking Back*, 1999.)



*Left: Paul F. Bradley
Right: F. Gordon Hardman*

What began as a visit as a “supernumary,” a title Mr. Hardman bestowed upon unpaid observers, turned into a three-and-a-half-year stay as Mark was appointed to the position of a Senior House Officer and later Honorary Registrar. During this time, he gained experience with the full breadth of the specialty from dentoalveolar surgery and trauma, to head and neck oncologic and reconstructive surgery, which was rapidly becoming part of the regular scope of practice of British oral and maxillofacial surgery.

*Gary Parker,
David Adlam
and Mark Wong
operating at
Glan Clwyd
Hospital 1983*



During his time in North Wales, Mark formed friendships with a number of individuals who would later play major roles in oral and maxillofacial surgery around the world. Some of these included Dr. Graham Wood, who replaced Dr. Paul Bradley as a North Wales oral and maxillofacial surgery consultant before returning to Glasgow to take the helm at the famous Canniesburn Hospital, Dr. Larry Nissen, who would go on to become President of the AAOMS in 2003 and the IAOMS in 2010, Dr. David Patton, President of the BAOMS in 2008, and Dr. Gary Parker who has served with great distinction as a medical missionary in Africa and Medical Director of Mercy Ships. Another important aspect of Mark’s experience in North Wales was the relationship between the North Wales unit and the University of Miami, whose residents rotated to Wales as the Houston residents had before then. This connection provided an opportunity for Mark to continue his training in Miami. In 1984, he began his residency at the University of Miami/Jackson Memorial Hospital under Stuart Kline. Robert Marx returned to Miami the following year, and

his guidance helped shape Mark's interest in tissue engineering and reconstructive surgery.

Before he was accepted to the Miami program, Mark interviewed at a number of other programs around the country, and during this process, met another individual who would have great bearing on his career. John Helfrick was then chair of the Department of Oral and Maxillofacial Surgery at Mt. Sinai Hospital in Detroit. This initial connection was responsible for Mark's move to Houston in 1987 as a junior faculty member upon completion of his residency.

Initially, Mark was given the responsibility of developing the LBJ Hospital service, which was built in 1990 as the second Harris County Hospital District hospital. This was his principal responsibility until 1996, when the premature death of the program director, Michael G. (Mike) Donovan, led to his appointment as Dr. Donovan's replacement. Working with John Helfrick, he focused his attention on strengthening the integrated OMS/MD program, replacing a foreign rotation to Aarhus in Denmark with a craniofacial rotation to Providence Hospital, Detroit with famed plastic surgeon, Dr. Ian Jackson, and oral and maxillofacial surgeon, Dr. Jeff Topf. In 2000, John Helfrick surprised the department with his announcement that he would be retiring from the university to pursue a new opportunity with the Joint Commission International. JCI was a subsidiary of the Joint Commission of Accreditation on Healthcare Organizations, an organization he chaired from 1997–1998, and the new position would allow him to engage in improving global healthcare. Mark was appointed as interim chair by Dean Ronald Johnson, and a national search for a permanent chairman initiated. After a six-month search, he was named the third chairman of the Department of Oral and Maxillofacial Surgery in March 2001, following in the footsteps of Edward C. Hinds, 1948–1983, and John F. Helfrick, 1984–2000. Tenureship was awarded by the University of Texas in 2005; and in 2009, Mark was promoted to a full professor with tenure. In 2014, an alumnus of the program, Bernard Katz (1965) and his wife Gloria created the second endowed chairmanship at the University of Texas School of Dentistry in the school's 109-year history with a gift of a half million dollars. The Dr. Bernard and Gloria P. Katz Chair in Oral and Maxillofacial Surgery was awarded to Mark in June 2014.

Since assuming the department's helm in 2001, Mark has enjoyed several additional leadership positions. In 2004, after six years as a member of the Examination Committee of the American Board of Oral and Maxillofacial Surgery (ABOMS), he was elected as a director of the Board. Seven years of vertical ascendancy resulted in the presidency of the ABOMS in 2011. Following his tenure on the ABOMS,

he was approached by the officers of the International Association of Oral and Maxillofacial Surgeons (IAOMS) to investigate the feasibility of developing an international certification process. A steering committee appointed by the IAOMS determined that the creation of an international certifying board was desirable, and in 2013, the International Board for the Certification of Specialists in Oral and Maxillofacial Surgery (IBCSOMS) was founded with Mark as the first president. He will hold this position for the first five years until the IBCSOMS has gained sufficient maturity to transition into a more normal leadership progression. Further, another fledgling specialty organization was created in 2012 to represent the interests of oral and maxillofacial surgeons who maintained major surgical practices. The American Academy of CranioMaxillofacial Surgery (AACMFS) was formally incorporated in 2012, and Mark was appointed to a position on the Executive Committee. In 2014, he became president of the AACMFS and will continue to help the organization develop its role, especially since the membership is largely composed of individuals in academic practices.

Mark and Marlene began their family in 1994 with the birth of their first child, Denise. A second daughter, Lindsay, followed in 1996, and in 1999, Matthew completed the family. At the time of this writing, Denise is in college in Chicago while Lindsay and Matthew are high school students. Marlene continues to practice as a nurse anesthetist in the Houston community and holds the unofficial family position as the Director of Fun!

Department Chairmen

Edward C. Hinds, DDS, MD
1949 – 1983



John F. Helfrick, DDS
1984 – 2000



Mark E. Wong, DDS
2001 – Present



Program Directors

Program Directors Oral and Maxillofacial Surgery Training Program UTHSC-Houston

Edward C. Hinds	1949-1965
John E. Pleasants	1965-1975
Hubert W. Woodward	1976-1977
John C. Adams	1977-1981
Jose A. Lomba	1981-1982
David W. Shelton	1982-1983
John F. Helfrick	1984-1988
Terry D. Taylor	1988-1993
James V. Johnson	1993-1994
Michael G. Donovan	1994-1996
Mark E. Wong	1996-present

Edward C. Hinds
1949-1965



John E. Pleasants
1965-1975



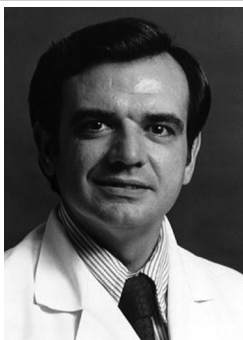
*Hubert W.
Woodward*
1976-1977



John C. Adams
1977-1981



Jose Lomba
1981-1982



David W. Shelton
1982-1983



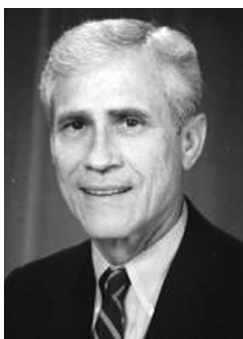
John F. Helfrick
1984-1988



Terry D. Taylor
1988-1993



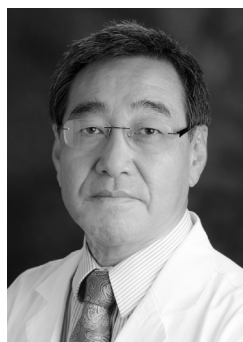
James V. Johnson
1993-1994



Michael G. Donovan
1994-1996



Mark E. Wong
1996-



Service Chiefs

Chiefs, Oral And Maxillofacial Surgery Service VA Medical Center, Houston, Texas

Edward J. Degnan	1956-1959
Ashley H. Sills	1959-1968
F. Edward Miller	1968-1985
Harry D. Gilbert	1985-2014
Rickey A. Morlen	2014-

Chiefs, Oral and Maxillofacial Surgery Service Memorial Hermann Hospital, Houston, Texas

Hutton Shearer	1961-1971
James E. Bertz	1972-1978
William C. Roche	1978-1996
Raymond R. Reid	1996-1997
Jon P. Bradrick	1997-2001
James W. Wilson	2001-2014
Nagi Demian	2014-

Chiefs, Oral and Maxillofacial Surgery Service The Methodist Hospital

Edward C. Hinds	1955 - 1983
John F. Helfrick	1983 - 2000

Chiefs, Oral and Maxillofacial Surgery Service Ben Taub General Hospital

Edward C. Hinds	1963-1965
John E. Pleasants	1965-1975
Hubert W. Woodward	1976-1977
John C. Adams	1977-1981
Jose A. Lomba	1981-1982
David W. Shelton	1982-1983
Terry D. Taylor	1984-1987
James V. Johnson	1987 -2001
Jose M. Marchena	2003-2006
James W. Kennedy	2006-2008
Ayesha Nawab	2008-2010
Mark E. Wong	2010-2011
Phillip N. Freeman	2011-

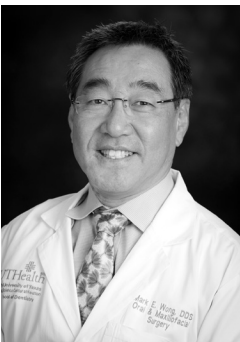
Chiefs, Oral and Maxillofacial Surgery Service LBJ General Hospital

Brian R. Smith	1991 - 1992 Co-chief
Mark E. Wong	1991 - 1992 Co-chief
Mark E. Wong	1992 - 2005
Nagi Demian	2005 – 2014
Issa Hanna	2014 –

Chief, Oral and Maxillofacial Surgery Service Shriners Hospital

Kamal Busaidy	2013-
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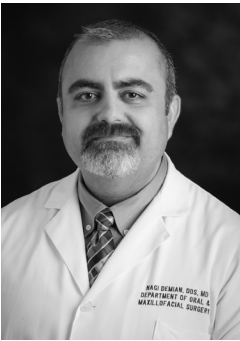
Current Faculty Members



*Mark E. Wong,
DDS*



*Kamal Busaidy,
DDS*



*Nagi Demian,
DDS, MD*



*Phillip N. Freeman,
DDS, MD*

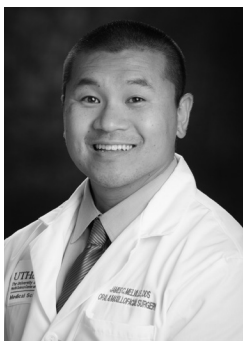


*Harry D. Gilbert,
DDS*



Issa Hanna, DDS

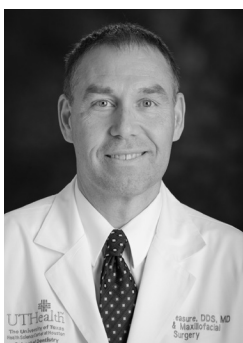
*James Melville,
DDS*



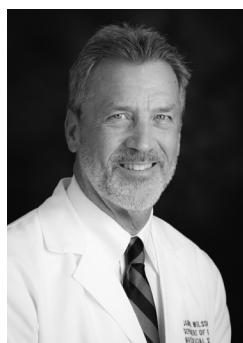
*Jonathan Shum,
DDS, MD*



*Trevor Treasure,
DDS, MD*



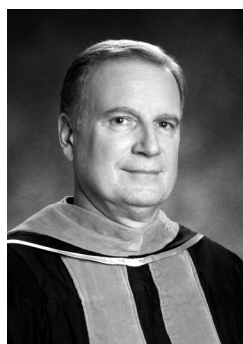
*James W. Wilson ,
DDS*



*James E. Bertz,
DDS, MD*



*H. Clark Whitmire,
DDS*



UT Houston OMS Faculty Members 1949-2014

Adams, John C.	Hull, Donald *	Repa, Charles M. *
Armstrong, James E.	Johnson, James V. **	Robertson, Bailey O. *
Barfield, George H. *	Karney, F. W. C. *	Roche, William C.
Barkley, Jim Bob	Kattchee, Phillip A. *	Ruthven, D. C. *
Behatheq, Mesaad *	Katz, Bernard *	Schmitt, M. Anne
Bell, William H.	Kennedy, James W. III **	Schwartz, Sidney H. *
Bertz, James E. **	Kent, John N.	Seybold, Chad *
Bouchelion, Bryan C. *	LaForge, G. A. *	Shearer, Hutton *
Bradrick, Jon P.	Larson, Stephen M. *	Shelton, David W.
Brotherton, Dana	Ledbetter, Richard *	Shum, Jonathan
Busaidy, Kamal **	Lomba, Jose A.	Sills, Ashley H.
Butler, Donald P.	Maldonado, Oscar D.	Smith, Brian R.
Chen, Joseph J. *	Malis, Didier	Smith, Bruce S. *
Chu, Tony	Marchena, Jose M.	Smith, John D. *
Cooper-Newland,	McDonald, Gary W. *	Speer, Wayne *
Deborah L. *	McFarland, Paul H.	Stobaugh, R. Kent *
Curl, Carroll A. *	McLean, G. Robert	Stout, Roy A. *
Debes, Robert R. **	Meador, Robert C. **	Suchko, George D.
Degnan, Edward J.	Melville, James	Suddasthira, Theeralaksna *
Demian, Nagi	Miller, F. Edward	Sweet, James B.
Donovan, Michael G.	Miyake, Alan A. *	Taylor, Terry D. **
Dusek, Joseph J. *	Morgan, Joseph **	Thomas, Helena M. *
Dwyer, Stephen C. *	Morlen, Rickey A. *	Treasure, Trevor **
Escobar, Victor	Murphy, Morris B.	Waltrip, Maurice C.
Fonville, Raymond *	Natkin, Bernard B. *	Walker, D. Gordon *
Freeman, Phillip	Nawab, Ayesha	Weil, Thomas M. *
Frishkey, Frank R. L. *	Olynik, Christopher	Whitmire, H. Clark *
Galbreath, Jess C.	O'Shell, Michael *	Williams, Thomas *
Gardner, Donald *	Peoples, James R. III *	Wilson, James W.
Gateno, Jaime	Pleasants, John E.	Wong, Mark E.
Gilbert, Harry D.	Quirk, George P. *	Woodward, Hubert W.
Hanna, Issa	Ranfranz, Oscar *	Wozniak/Potts, Halina L.
Helfrick, John F.	Redden, Ronald J. **	
Hinds, Edward C.	Reid, Raymond R. **	

* indicates individuals who have held part-time faculty appointments only

** indicates individuals who have held both full-time and part-time faculty appointments.

All others have held full-time appointments only.

2000 – 2014 Graduates and Where They Are Today

Robert R. Debes, DDS

A total of 75 OMS residents graduated from the UT Houston program between 2000 and 2014. Where did each of them go immediately following graduation? And where did they eventually settle to enter practice and begin their promising careers?

One third of the residents (25) have remained in the state of Texas, with the majority of that group choosing to enter practice in the Houston metropolitan area. Many had come to the program from outside the state, but the appeal of the local area has apparently been significant. Many agree that Houston is an “up and coming” city and region, and it is estimated that more than 40,000 new residents come to the area every year. With that in mind, it is little wonder that a significant number of our graduates do remain in such a dynamic area to establish and build their practices.

In addition to Texas, California was the second most preferred destination for our graduates. Seven have located in the Golden State. Another large group of graduates (13) were members of the Canadian Armed Forces (CAF) during their training, and each of them immediately returned to active duty following graduation.

The remainder of our 2000 – 2014 graduates have traveled in every direction and are now located throughout the United States. We were able to trace them to at least 20 different states.

In this section we will name members of each graduation class (2000-2014) and briefly mention where each individual is currently located. An attempt was made to contact everyone, but this effort was not entirely successful as a few failed to respond. In any event, the material we were able to gather is presented to the reader in a form we hope will be enjoyed, and is based upon information we were able to obtain from UT Houston faculty, colleagues and friends. The database located in the back of this book is another source of information.

The class of 2000 included five graduates: Jeffrey “Jeff” Almony, an active duty US Army officer during training, returned to active duty following graduation. He is now retired from the Army and practices in Aberdeen, North Carolina;



Top – Class of 2000 L to R: Jeffrey Almony, Dana Brotherton, Tony Chu, Leonard Tyko, and Terrence Vankka. Middle Class of 2001 L to R: James Macholl, Rick Morlen, R. Scott Murphy and Jim Stewart. Bottom – Class of 2002 L to R: Paul Anderson, Kamal Busaidy, Scott Middleton, Kimberley Perkins, and Garth Smith

Dana Brotherton joined the UT Houston faculty for one year and then entered private practice in Sugar Land, Texas; Tony Chu also joined the department faculty immediately following graduation. He left the faculty after one year to join another 2000 graduate, Leonard Tyko, and they now practice together in Santo Rosa, California; Terrance “Terry” Vankka, who was the first member of the Canadian Armed Forces to complete our program, returned to active duty following graduation. He is now retired from the military and practices in Edmonton, Alberta.

The class of 2001 had four graduates: James “Jim” Macholl, an active duty US Army officer while a resident, recently retired from the Army and now practices in the Dallas – Fort Worth area; Rick Morlen, another army officer/resident, is also now retired from the military and has returned to Houston where he serves as chief of oral surgery at the VAMC; R. Scott Murphy is in private practice in Huntington, West Virginia; and Jim Stewart is now located in El Cajon, California.



Top – Class of 2003 L to R: Timothy Coyle, Eric Engel, Claude Guimond, William Logan, and Raymond Wiggins. Middle – Class of 2004 L to R: Michaelanne Briggs, Michael Gliddon, Zabid Lalani, Nathan Walters, and Eddy Yang. Bottom – Class of 2005 L to R: Nagi Demian, Didier Malis, Sandeep Pathak, Shelley Seidel, and Brian Stern

The class of 2002 had five members: Paul Anderson returned west and practices in Irvine, California; Kamal Busaidy is currently an associate professor at UT Houston and a full-time OMS faculty member; Scott Middleton is now located in Sarasota, Florida; Kimberly Perkins, another who came to us from the Army, returned to active duty and was last known to be in Hawaii; and H. Garth Smith, who went on to complete a plastic surgery residency, now practices plastic surgery in Madisonville, Kentucky.

The class of 2003 had five members: Timothy Coyle entered private practice in Columbia, Missouri; Eric Engel established a practice in Chandler, Arizona; Claude Guimond, another member of the CAF, returned to active duty following graduation. William “Bill” Logan, yet another resident who came from the Army, is now in private practice in Ashville, North Carolina; and Raymond Wiggins stayed in the Houston area and now practices in Katy, Texas.



Top – Class of 2006 L to R: Adam Bateman, Doug Hong, Michael Moody, Judd Partridge, and Chad Seybold. Middle – Class of 2007 L to R: Zaid Ali, Sean Kim, Steven Koo, Francois Theriault, and Kyoko Yamaji. Bottom – Class of 2008 L to R: Peter Bui, Jared Cottam, Chris Daniel, Samuel Petersen, and Antonella Trache

The class of 2004 had five members: Michaelanne Briggs entered private practice in Georgetown, Texas; Michael “Mike” Gliddon, an active duty Army officer during his training, is now in private practice in Lawton, Oklahoma; Zahid Lalani, after combined PhD/OMS training, joined a group practice in Spring, Texas; Nathan Walters returned to his home state and now practices in Louisville, Kentucky; and Eddy Yang practices in Sugar Land, Texas.

The class of 2005 included five members: Nagi Demian became a member of the full-time faculty at UT Houston and is now the service chief at Memorial Hermann Hospital; Didier Malis also joined the UT Houston OMS faculty, where he remained for two years before returning to his native Switzerland; Sandeep Pathak went on to practice in Lawrenceville, Georgia; Shelley Seidel joined a practice group in Houston; and Brian Stern now practices in Powell, Ohio.

The class of 2006 had five members: Adam Bateman returned to his home state and entered private practice in Lehi, Utah; Douglas "Doug" Hong went on to practice in Westminister, Colorado; Michael Moody also moved to Colorado and practices in Lakewood; Judd Partridge moved on to practice in Draper, Utah; and Chad Seybold, who initially entered practice in Michigan, later returned to Houston where he now practices.

The class of 2007 had five members: Ziad Ali located in Rockville, Maryland; Sean Kim entered private practice in the Houston area; Steven Koo also entered practice in Houston; Francois Theriault, another CAF officer, returned to active duty in Canada, and Kyoko Yamaji now practices in Westminister, Colorado.

The class of 2008 had five graduates: Peter Bui moved on to Santa Clara, California; Jared Cottam practices in Renton, Washington; Christopher "Chris" Daniel joined two other program alumni (Tony Chu and Len Tyko) to enter a group practice in Santa Rosa, California. Samuel "Sam" Petersen established his practice in Farmington, New Mexico; and Antonella Trache returned to active duty with the Canadian Armed Forces.

The class of 2009 had four members: Jeff Alford now practices in Austin; Alex Bachoura entered private practice in the Houston area; Jimmy Cavaretta also entered practice in Austin; and CAF officer Erick Garand returned to active military service.

The class of 2010 included five graduates: Jason Beck established a practice in Waco; Vera Cooke joined a group practice in Boston, Massachusetts; Sandeep Dhesi returned to active service with the Canadian Armed Forces; Steven Schoolman located in Cape Girardeau, Missouri; and Cecil Shrewsbury stayed in the Houston area where he continues to practice.

The class of 2011 had five members: David Kostohryz is now in Fort Worth; Roch Messier, another CAF officer, returned to active duty following graduation; Jiries Mogannam moved to Santa Rosa, California; Misty Goff-Roberts went to Jackson, Mississippi; and Thai Vuu remained in Houston.



*Top – Class of 2009 L to R: Jeff Alford, Alex Bachoura, Jimmy Cavaretta, and Erick Garand.
Middle – Class of 2010 L to R: Jason Beck, Vera Cooke, Sandeep Dhesi, Steven Schoolman, and Cecil Shrewsberry. Bottom – Class of 2011 L to R: David Kostohryz, Roch Messier, Jiries Mogannam, Misty Goff-Roberts, and Thai Vuu*

The class of 2012 included five graduates: Bill Curtis joined the faculty at the University of Kentucky College of Dentistry; Bryan Garrett entered practice in College Station, Texas; Adam Irvine returned to CAF active duty. Christopher “Chris” Olynik joined our department faculty where he remained for one year prior to entering practice in Nanaimo, British Columbia; and Jeff Riggs moved on to practice in Hendersonville, Tennessee.

The class of 2013 was the first to have six graduates: Garrett Blundell now practices in College Station, Texas; George Forrest, yet another member of the Canadian Armed Forces, returned to active duty; Laith Mahmood joined the Houston private practice community; Charles Nguyen also entered private practice in Houston; David Wilson now practices in Thunder Bay, Ontario; and Simon Young, who was the first to complete combined PhD/OMS/MD training in our

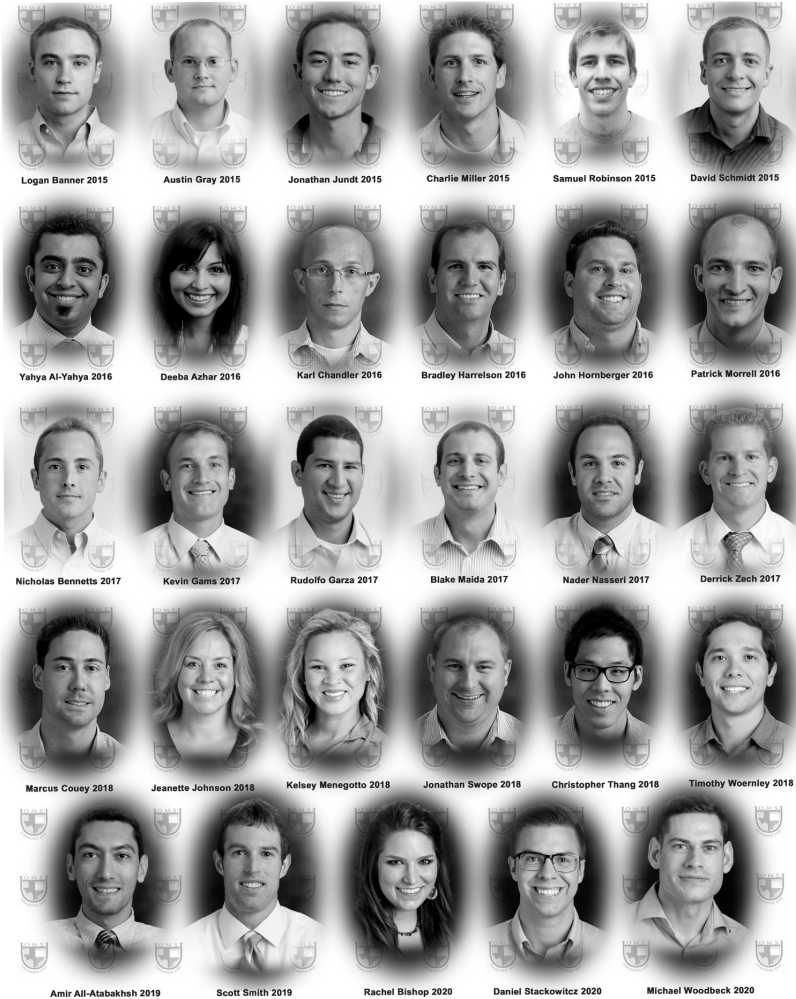


Top – Class of 2012 L to R: William Curtis, Bryan Garrett, Adam Irvine, Christopher Olynik, and Jeffrey Riggs. Middle – Class of 2013 L to R: Garrett Blundell, George Forrest, Laith Mahmood, Charles Nguyen, David Wilson, and Simon Young. Bottom – Class of 2014 L to R: Patrick Beetar, Ian Buckley, Andrew Michael, Susana Porras, James Schlesinger, and Justin Seaman

program, is currently based in Boston, where he is continuing with the post-doctoral phase of his research (discussed elsewhere in this book).

The class of 2014 also included six graduates: Patrick Beetar now practices in Houston; Ian Buckley, a Canadian Armed Forces officer, returned to active duty; Andrew Michael moved on to Dallas to enter private practice; Susana Porras joined the Houston practice community; James Schlesinger relocated west to enter practice in Las Vegas; and Justin Seaman entered private practice in Houston.

UTHSC-Houston Oral and Maxillofacial Surgery Residents 2014 - 2015



Current Residents 2014 – 2015. Top – Class of 2015 L to R: Logan Banner, Austin Gray, Jonathan Jundt, Charlie Miller, Samuel Robinson, and David Schmidt. 2nd Row – Class of 2016 L to R: Yahya Al-Yahya, Deeba Azhar, Karl Chandler, Bradley Harrelson, John Hornberger, and Patrick Morrell. 3rd Row – Class of 2017 L to R: Nicholas Bennetts, Kevin Gams, Rudolfo Garza, Blake Maida, Nader Nasseri, and Derrick Zech. 4th Row – Class of 2018 L to R: Marcus Couey, Jeanette Johnson, Kelsey Menegotto, Jonathan Swope, Christopher Thang, and Timothy Woernley. Bottom Row – L to R: Class of 2019: Amir All-Atabakhsh and Scott Smith; Class of 2020: Rachel Bishop, Daniel Stackowicz, and Michael Woodbeck

Military Affiliations

James V. Johnson, DDS

The Oral and Maxillofacial Surgery Department of UT Houston has had a long and beneficial association with oral and maxillofacial surgeons of the United States Armed Forces serving both in this country and abroad. Our graduates played a critical role in the first Gulf War (Desert Storm), Iraq, and Afghanistan, and departmental members were represented in each of the armed forces in these conflicts.

Our participation and success is primarily due to the collegiality and vision of our three department chairmen, Drs. Edward C. “Ed” Hinds, John Helfrick, and Mark Wong. Following Dr. Hinds’ graduation from Baylor Medical School in 1945, he enlisted in the Navy where he served as a medical officer, meeting and serving with many dental officers. In 1948 he became chairman of the department of oral surgery at what was then called the University of Texas School of Dentistry. In the years following this appointment, he became interested in orthognathic and temporomandibular disorders and spent most of his time doing research and surgery in these areas. He soon gained an outstanding reputation, which resulted in his being a popular speaker at military medical centers all over the United States.

After the Air Force separated from the Army (1947), many oral surgeons transferred from the Army to the Air Force. Among the first was Colonel Alex Mohnac, who served as service chief at Wilford Hall Hospital in San Antonio. Colonel Mohnac had survived the Bataan death march and spent four years in a Japanese prison camp after the fall of Corregidor in 1942. Upon return to the U.S., he was service chief for many years and then, in the 1960s, retired to become chairman of the oral surgery department at Temple University. Colonel Mohnac was a good friend and confidant to Ed Hinds, who was one of the Colonel’s first consultants. He was instrumental in facilitating the placement of Air Force dentists in the early years of our program. Their association would help bring about the good relationship between the Air Force and our department for many years.

In the early years, the standard training program was three years, including a mandatory master of science degree. The Air Force residents initially came for two years and took six basic science courses without clinical training. Included in this group were Drs. Don Steed and Wes Titterington. Wes had served with me for two

years of active duty at Clinton Sherman Air Force Base in the early 1960s. Both of the above individuals later trained at Willford Hall Hospital, completed their research for a thesis, and satisfied all requirements for a master of science degree from the University of Texas. The process was facilitated by Dr. Sumpter Arnim, dean of the graduate school at the Dental Branch.

In the late 1960s and early 1970s, the department began hiring full-time faculty who were retired military. Among this group was John Pleasants, a Korean war veteran. This much-loved faculty member was one of the first to spend three years as an oral surgery resident, which included his time at Jefferson Davis Hospital and the Dental Branch. He finished his training in 1955. Others who followed him from the U.S. Army were Paul McFarland, David Shelton, and John Adams. Bill Roche and Hubert W. Woodward came to the department from the U.S. Air Force. These individuals came at a critical time and provided leadership during the early 1980s when Dr. Hinds was contemplating retirement. Both Drs. Roche and Woodward had served as service chiefs at Willford Hall.

When Ed Hinds retired in 1983, Bill Roche served as interim chairman of the department until his successor, John Helfrick, was named in 1984. Dr. Roche regularly stressed to the residents that a successful surgeon must possess the three A's: be available, be affable, and be able.

In 1987, I (Jimmy Johnson) became the service chief at Ben Taub Hospital. To relate well was my primary focus. Because of my activity in the Army reserve unit, I felt a special connection to the military residents who came to our program.

In 1990-91, I was called to active duty by the Army and served in Operation Desert Storm. During the war in Bosnia, my tour of duty took me to Wuerzburg, Germany (57CSH). As a result of this, I was able to meet and work with several oral surgeons at Brooks Army Medical Center at San Antonio when I returned to the United States. An important contact made was with Mike Donovan, who was the service chief at William Beaumont Hospital. He later became our program director from 1994 until 1996. During the 1990s, four Army dentists were accepted into our four-year training program. One of them, Jeffrey Almony, was able to transfer from the four-year program to the dual degree program and become the first Army resident to do so.

During one summer tour of duty at Brooks Army Medical Center, the OMS consultant to the Surgeon General asked for a meeting with me. It was his desire to have four Army programs send residents to Ben Taub Hospital. They would come from Brooks Army Medical Center (San Antonio), William Beaumont Hospital (El Paso), Madigan Hospital (Fort Lewis, Washington), and Tripler Base in Honolulu. John Helfrick approved this request. Prior to this, only those from Williams Beaumont and Madigan had come to Ben Taub. Later on, Fort Bragg supplied us with residents. (Jeff Almony had become the service chief and facilitated this.) While the Navy had become interested in this rotation, we were not able to work out a plan at that time.

Ed Hinds agreed to take on two full-time residents from the Air Force in the 1960s. The Department of Defense provided funding for their training at UT Houston. The Department of Defense had concluded that it was less costly to train oral surgeons at civilian programs than for the military to conduct their own training. Our military faced a huge problem in trying to train adequate OMSs in combat zones such as Viet Nam and their military hospitals. Those oral surgeons who had served in World War II were no longer practicing or were deceased. Those available were not skilled in current technological advances such as external pin fixation and the reconstruction of severe facial trauma and disfigurement.

Colonel David Shelton came to the department in 1982 and served as program director for two years. Dr. Shelton had served in Viet Nam and brought his expertise to our program. An authority on ballistics and gunshot wounds and facial trauma with extensive experience in these areas, he was called upon to lecture at many professional meetings.

Prior to his retirement, Ed Hinds had been approached by the Army to have their residents serve three-month rotations at Ben Taub Hospital doing facial trauma. Paul McFarland made this suggestion to John Helfrick when he became chairman. Mike Billingsly was the first to come. George Suchko came shortly thereafter, and upon his retirement from the Army became a valued member of our department from 1995 to 2014.



*Jimmy Johnson,
Major Rick
Morlen (Class
of 2001), and
Mark Wong*

In the past few years we have had Air Force residents from Wilford Hall come to Memorial Hermann Hospital for training in trauma management with Jim Wilson. This has been done in coordination with Rick Johnson, the service chief at that facility.

Recently the Department of Defense has begun Joint Service Trauma Training for mobile surgical teams from the Army, Navy, and Air Force at Ben Taub. Dr. Ken Mattox, the chief of staff at Ben Taub Hospital, is and has always been appreciative of our service and the training program. One of our trained trauma doctors from the Army, Lt. Shan Bagby, was awarded the Bronze Star and Combat Medic Badge while serving in Iraq.

Since Mark Wong became chairman in 2000, Navy personnel have been accepted into the program. In addition, the Canadian Armed Forces also uses our program to satisfy oral and maxillofacial surgery training needs for their officers..

Because of the prominence of Mark Wong as past president of the American Board of Oral and Maxillofacial Surgery and his leadership in American and international oral surgery, the UT Houston OMS program is recognized as one of the finest, if not the finest, in the world.

Department Research

“Raising our Research Profile”

Mark E. Wong, DDS

The Department of Oral and Maxillofacial Surgery has had a notable history of research from its earliest days. One of the first graduates of the program, William H. “Bill” Bell (1957), helped establish the practice of orthognathic surgery by a number of seminal experiments. These included a vascular study that demonstrated the robust blood supply of the upper jaw even after detachment from the mid-face. Dr. Bell’s classic three-volume textbook on orthognathic surgery, *Surgical Correction of Dentofacial Deformities* (Bell, Profitt, and White), remains one of the most authoritative works in the field and is part of the library of many oral and maxillofacial surgeons worldwide. After Bill Bell and John N. “Jack” Kent (1969) entered the academic arena, Jack Kent not only published one of the first tomes on orthognathic surgery, but also developed an interest in the management of TMJ dysfunction. His courageous efforts in this field, some associated with notable failures like the Teflon-Proplast disc replacement experience, helped advance the specialty in our understanding of the function and dysfunction of body parts. From his meticulous efforts to create the ideal device to reconstruct the temporomandibular joint, several other systems have evolved and currently represent the state of the art.

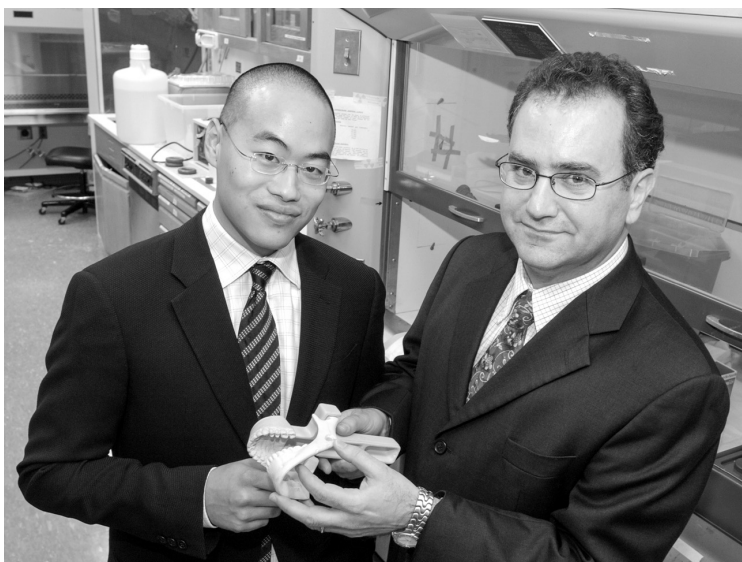
This highly productive beginning to the department’s research efforts did not last. By the mid-1980s, many clinical departments in academic dentistry and medicine were faced with shrinking support from institutions. This reality forced faculty to develop alternative methods for supporting salaries by increasing their level of clinical activity. This shift of focus left little time to pursue traditional academic interests, especially research. Even though the residency program’s publication requirement provided a level of scholarly activity, more sophisticated research, especially funded research, was not a priority. Two exceptions to this trend were projects in virtual surgery and wound healing that took place between 2001 and 2004. The first involved an initiative by Jaime Gateno and James Xia, who adopted new imaging and scanning technology to treatment plan patients with craniofacial skeletal deformities. They then fabricated digital models of the jaws and dentition that could be used to create surgical splints to guide the localization of bony segments after osteotomies. This approach represented a significant innovation in craniofacial and orthognathic surgery, replacing traditional methods of tracing cephalometric radiographs and performing model surgery on plaster of paris casts with digital techniques for

outlining and measuring structures and angles and manipulating these values to determine treatment goals. This technology has gained a loyal following, and its accuracy and benefit have been well established.

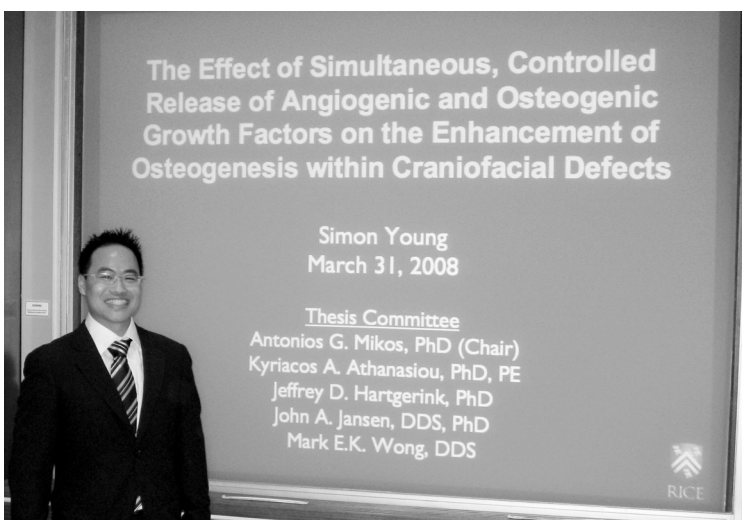
Another research direction was initiated by Zahid Lalani (2003), who was the first resident to pursue both a PhD and an OMS residency as an integrated program. (Historical note: Theerlaksna Suddhasthira (1984) earned a PhD in 1989 following completion of her residency as an additional qualification, before embarking on an illustrious career as an academician in her native Thailand that included the deanship at Mahidol University, Bangkok, Thailand.) Zahid studied alveolar socket wound healing and characterized the temporal and spatial relationship of different growth factors and cytokines involved in post-extraction healing. This highly important research has even greater relevance as techniques are being sought to improve the osseous regeneration of the peri-implant environment. A side-benefit of Zahid's endeavors was a new relationship with Professor Tony Mikos and the Department of Bioengineering at Rice University. Professor Mikos is regarded as one of the pioneers in the field of bioengineering, and the Department of BioE at Rice is one of the most internationally acclaimed. Zahid was able to persuade Tony Mikos to serve on his thesis committee. From this connection, substantial collaborations developed between our two departments that resulted in several NIH RO-1 grants (the oldest and historically one of the most esteemed research awards made by the NIH). This collaboration also resulted in a unique residency track leading to a PhD and OMS/MD, and most recently, a significant role in the Armed Forces Institute of Regenerative Medicine (AFIRM), a congressionally mandated, Department of Defense-funded research initiative that is one of the largest tissue engineering consortiums in existence.

With Professor Mikos, several joint projects have focused on the regeneration of bone and development of reconstructive techniques to address craniofacial defects. In a separate collaboration, Mark Wong began working with Professor Kyriacos Athanasiou, a noted bioengineer also from Rice University who was well known for his work on orthopedic reconstruction. They decided to apply similar approaches to the study of the temporomandibular joint, and in 2004 they were awarded a NIH RO-1 grant to characterize the structure and function of the joint and build platform technology to be used in tissue engineering of joint replacement constructs. The project was re-funded in 2011 and continues as a collaboration with the University of California, Davis, where Athanasiou moved in 2010 to assume the chairmanship of the Department of Bioengineering.

*Simon Young
and Professor
Tony Mikos in
2004 after NIH
RO-1 grant
award*



*Simon Young at
his PhD thesis
defense in 2008*



So far, the only individual to complete the arduous integrated PhD/OMS/MD program in 10 years, awarded conjointly by Rice University and the University of Texas, is Simon Young. Simon's excellent performance and commitment were rewarded by a highly prestigious NIH award called a "Pathway to Independence (K99/R00) Award." This grant is designed to identify promising young researchers and to provide them with the necessary means to secure both additional laboratory training and the support to launch their careers. Approximately 23 percent of all applicants are successful. Simon's original research focus was bone and cartilage

engineering, but in this post-doctoral phase, he has decided to explore different ways to combat cancer through novel immunotherapy techniques. Finally, as we were preparing to go to press, we learned that Simon had received yet another prestigious award when he was selected by The University of Texas Rising STARS Program (Science and Technology Acquisition and Retention). This program provides funding for recruitment of promising faculty members and insures that Simon will be rejoining our faculty in the fall of 2015. Congratulations, Simon!

Drs. Bell and Kent earned a reputation for creativity and innovation. The next generation of department researchers are acutely aware of the shoes they need to fill.

Town & Gown

Academia vs. Private Practice

Thomas M. Weil, DDS

Today an intimate and collaborative relationship exists between the University of Texas at Houston Oral & Maxillofacial Surgery Department and the private practice OMS community in the Houston area, but it has not always been such. Although in the early history of the department, the 1950s and 1960s, there were, and still are, private practicing oral surgeons who taught part-time at the school and were welcomed, subtle and not so subtle antipathy occurred. Private practitioners tended to feel that the academic oral surgeons saw themselves as existing in an ivory tower of knowledge and science of the specialty.

In 1949 Ed Hinds founded the Oral Surgery Training Program at the UT Dental Branch in Houston with two residents, Joe Kuebel and Bruno Kwapis. Both had the additional responsibility of teaching undergraduate dental students and providing oral surgery care in Texas Medical Center hospitals. The existing private practicing oral surgeons at that time were essentially exodontists with some advanced training in trauma. This small group was close and in 1948 had organized together to form the Harris County Society of Oral Surgeons, the predecessor to the Houston Society of Oral and Maxillofacial Surgeons. Dr. Hinds was a dentist with a medical degree who was trained and board certified in general and oral surgery. Therefore, a fairly wide knowledge gap existed between the department and many oral surgeons in the community. Additionally, Dr. Hinds had a part-time private practice. This may have created a polarity based on the perceived intellectual arrogance of academia and an unfair advantage in recruiting private patients that would otherwise have been treated by the private practitioners. In later years, when the Smith Tower intramural private practice opened, there was some resentment about unfair competition by some members of the private oral surgery community. The academicians were paid by the State and generally had considerably lower income than private practice oral surgeons. The academicians may have felt that the private practitioners were not all current in state-of-the-art treatment of complex OMS problems such as trauma, pathology, orthognathic and cleft palate surgery, and current research. Additionally, the department was a dumping ground for indigent patients or those with complications or conditions beyond the scope of the private practitioners' training,

experience or willingness to treat. Although the OMS Department had always been generous with its willingness to provide consultation or assistance to private oral surgeons, that was not always fully appreciated.

In 1984 Ed Hinds was succeeded by John Helfrick, and in 2000, Mark Wong became chairman. The department evolved into a great teaching institution for dental students and residents, many of whom have become nationally and internationally recognized. The department became well known for groundbreaking research and clinical advances in trauma management, orthognathic surgery, TMJ surgery, pathology, and management of severe maxillofacial infections. Today it is the largest OMS training program in the United States.

Changes began to occur with the arrival of Dr. Helfrick and Dr. Wong. Both were conscious of an invisible chasm between the private practice OMS and the academic department. Both deemed it essential to become engaged in the Houston Society of OMS affairs. Residents were invited to make case presentations and discuss emerging clinical science at meetings. The Houston Society became an excellent forum to discuss issues of importance to both the private practitioners and the academic faculty, including items of importance at state and national levels. With five to six residents graduating from the program each year, many remained in the Houston area. Now, a critical mass of full-scope, state-of-the art OMS's existed in the community. These former residents possess a loyalty to their chiefs and a strong affinity for the department resulting in a collegial source for consultation on difficult or complex cases that is welcomed by the Houston and regional community.

In the past 30 years the monetary gap between academic and private practice oral surgeons has widened, making it increasingly difficult to recruit or retain faculty. Both Drs. Helfrick and Wong recognized this and have creatively found ways to attract individuals in mid or late-career private practice to join the department faculty with great success. Jimmy Johnson, Jim Kennedy, Jim Wilson, and Kent Stobough were successful OMSs who have had a significant impact on the program and bring a culture of understanding to the spectrum of issues faced by private practitioners. This has provided a healthy spirit of unity and a bridge between the two groups.

Other factors that have led to a collegial and collaborative unity between the OMS Department and private practice oral and maxillofacial surgeons are the development of an active alumni association, The Hinds Academy; the evolution and growth of the Hinds Symposium; and the creation of the Hinds Foundation in 2005.

The Hinds Academy is an active alumni association made up of OMS Department graduates and friends of the department. Friends are usually oral and maxillofacial surgeons who practice in the Houston area who may have trained elsewhere but feel an affinity for the department and the OMS community in Houston. The academy meets at least once a year and has promoted and presented continuing education to the OMS community and helps to maintain a close bond between the two groups.

The Hinds Symposium is a combined Houston Society and UTHSC-Houston OMS Department scientific meeting held annually in Houston that attracts 150-200 surgeons from the region and beyond. Its genesis began with a few meetings in the late 1970's and early 1980's. There were some years when it was not presented because of lack of an efficient organization. In 1989 Charlie Repa, who had worked with a committee of faculty members and Houston Society members who sporadically planned these meetings, recommended that a permanent organizing committee be created comprised of three faculty members, three private practicing members of the Houston Society, and the president and vice-president of the Houston Society. The committee would meet several times a year, plan meetings, and have a permanent administrative secretary. This was an important milestone in the development of a strong collaborative relationship between the Houston area, and ultimately the state OMS's, that led to a unified private practice-department community. Over the past 25 years, that synergy has led to a well established, institutionalized regional meeting with cutting edge science that many consider to be the best in the U.S. The camaraderie and brain storming that comes out of those committee meetings is what makes the Hinds Symposium great. Such creative collaboration is unique among most academic and private practice settings. Having people on the committee who are involved in national OMS affairs, such as the ABOMS and AAOMS committees, has helped to recruit top notch speakers because of relationships engendered by that involvement.

The Hinds Foundation was created in 2005 to develop a permanent endowment whose sole mission is to provide unencumbered funds to the department for resident education, research, and capital needs. As of 2014, it had raised over \$950,000 in gifts and \$850,000 in legacy, deferred giving commitments from over 100 contributors who are a mix of faculty, private practitioners, alumni, friends, and a few vendors. Funds have been given to the department to provide faculty stipends, update digital resident logs, and purchase equipment for the department. The success of the Foundation is a tribute to the close ties between the department, the Houston private community and alumni practicing elsewhere.

The effect of networking and community spirit within the local specialty has had other exciting outcomes. With the opening of the new UTHealth School of Dentistry in 2012, funds were needed to purchase a \$120,000+ anesthesia simulator in the Hinds room of the OMS clinic. Most of those funds were successfully solicited from private practice individuals, the Hinds Academy, and the Houston Society over a two- to three-month period.

Support for the school and department with contributions of \$100,000 to \$500,000 for professorships have come from individual donors from the private sector.

Mark Wong, chairman of the OMS Department for the past 15 years, is a man of impeccable integrity and wisdom who has an unfailing passion for selfless promotion of the specialty, the OMS Department and the Houston Community. It is his spirit of generosity and inclusiveness without which many of these endeavors might not have occurred.

The evolution of this remarkable spirit of cooperation, mutual respect, and professionalism foretells a bright future for future generations of our specialty, the UTHSC-Houston Department of Oral and Maxillofacial Surgery, and private Oral and Maxillofacial Surgery practitioners in Houston.

The Hinds Academy

William V. Jordan, DDS

In 1997 The Edward C. Hinds Academy was established as the “alumni” association for the University of Texas School of Dentistry (UTSD) Department of Oral and Maxillofacial Surgery, formerly UTDB, with the charge of providing an opportunity for social interaction among the alumni, develop continuing education programs, and provide an avenue by which the alumni can provide support for the residency training program. Thanks to the hard work and dedication of the original organizing committee, the framework for success was established and has been strengthened over the ensuing 17 years.

As with any alumni association, the key for longevity is the number of relationships that are forged and strengthened through multiple interactions and continued support. What a better opportunity to begin those relationships than during the residency training program. Hinds Academy members have been working with the full-time faculty to help transition residents into the private practice setting by helping to develop a practice management series. Through a variety of lectures, the chief residents are exposed to many of the issues that they will face upon entering into private practice. Also, during their chief resident year, they have the opportunity to spend time in the offices of many of the academy members to gain a firsthand experience of what it takes to run a successful private practice. The interaction between the residents and The Hinds Academy continues through the graduation ceremony. It has been a tradition since 1997 that the Hinds Academy provides the new graduates with a hand-crafted cherry wood surgeon’s chair. In keeping with the tradition established by Dr. William Halstead, the great general surgeon, the surgeon’s chair is a symbol of the four traits necessary to be a successful surgeon. More personally, the chairs represent the Hinds Academy’s unending support to each one of the graduates in an effort to help them be productive and contributing members of our profession that we hold so dear. The gifting of surgical chairs to the new graduates has become quite popular and somewhat the envy of those graduates who predated the beginning of the current generosity of the Hinds Academy--so much so that the Academy is currently working on a program that would honor previous graduating classes with surgical chairs. This continues to be one of the highlights each year for the Hinds Academy.

Once a resident graduates from the University of Texas School of Dentistry Department of Oral and Maxillofacial Surgery, they are automatically eligible for membership into the Hinds Academy. However, we pride ourselves on being a true community of supportive oral and maxillofacial surgeons, including into membership former and current faculty members and Houston area oral and maxillofacial surgeons, regardless of their training affiliation. As was stated before, the Hinds Academy is much more than a provider of surgical chairs to new graduates. We also want to serve as a resource that can provide our members the opportunity to obtain vital and necessary continuing education. We take the commitment to our membership very seriously. Not only do we support the Hinds Symposium annually, but over the years, we have provided additional continuing education opportunities available only to our members. The Academy has provided a course on the difficult airway outlining advanced techniques that are critically important for all practicing oral and maxillofacial surgeons. We have provided opportunities for members to obtain and re-certify for PALS and ACLS, as these certifications are needed for state board licensure. The most recent initiative has been to provide an opportunity for any member oral and maxillofacial surgeon and his/her entire staff to participate in a simulation-based emergency training program. In the Hinds Academy Suite, located in the Oral and Maxillofacial Surgery clinic at the UTSD, is a high fidelity mannequin, known as SimMan, who can simulate real life/real time medical emergencies allowing the entire staff to be trained together in this state-of-the-art facility.

*Mark Wong,
SimMan and
Bill Jordan
in the Hinds
Academy Suite*



The Hinds Academy also realized that in order to have a successful alumni association, a solvent and financially viable training program is necessary from which students can graduate. The Department of Oral and Maxillofacial Surgery has been faced with its fair share of financially challenging times to say the least. When the department encountered massive state funding cuts and declining hospital contributions, the residency training program was faced with some very difficult monetary decisions. Owing to a close relationship between “town and gown,” the Hinds Academy leaders and its membership stepped up to help. The Hinds Foundation was developed as the fund raising arm of the Academy to provide funds solely for the Department of Oral and Maxillofacial Surgery. Thanks to a successful initial fundraising effort, the Foundation began with over \$500K in its corpus with an ultimate goal of raising over \$1 million. Using the interest income from the investments, the chairman, Mark Wong, was able to request items that would otherwise be unavailable to the training program.

In addition to the development of the Hinds Foundation, which was wholly funded by the generosity of the Hinds Academy members, we have undertaken specific fund-raising initiatives. During the construction of the state-of-the-art dental school, UTSD Houston, the Hinds Academy leadership not only had the opportunity to provide input into the development and design of the surgical suites, but also had a unique opportunity to develop and equip the first emergency simulation suite in the country. In an initial meeting with the dean of the School of Dentistry, Drs. John Valenza, Mark Wong, Tom Weil, Jim Wilson, Kamal Busaidy, and Bill Jordan discussed the desire to have a surgical suite designed for simulation with the use of Sim-Man technology, designated as the Hinds Academy Suite.

Dr. Valenza was very appreciative of the \$64K raised, but he was more impressed with the support of the Department of Oral and Maxillofacial Surgery and UTSD shown by the Hinds Academy. This was in addition to the over \$500K raised in support of the Hinds Foundation. In the spirit of what the Hinds Academy truly represents, the membership showed its continued and selfless support of the department and UTSD. Dr. Valenza was so impressed with the generosity of the Hinds Academy and the overwhelming support of the department of oral and maxillofacial surgery and UTSD, he allowed all of the money raised to be used to develop and equip the Hinds Academy Suite. Under the watchful eye of the director, Kamal Busaidy, the department has developed one of the only simulation-based emergency suites in the country. Through the relationships forged and solidified with Dr. John Valenza and the Hinds Academy, we continue to be involved in many committees and long-range initiatives associated with the UTSD.

Success in any organization is dependent on the relationships developed and maintained. The Hinds Academy is no different. Each year in April, the Hinds Academy membership has the opportunity to reunite with old friends, meet new ones, and enjoy wonderful comradery as we ignite the flames of knowledge through our participation in the Hinds Symposium. These few short days allow us the privilege of solidifying our relationships by enjoying a round of golf, renewing ACLS, sharing more than a few laughs with past and present residents, obtaining necessary CE, or just being with close friends. The weekend is capped off by the Hinds Academy dinner where we enjoy a wonderful evening of food and drink, but most importantly, time together. Just as the memories begin to dim from our April gathering, the Hinds Academy enjoys another great tradition each year at the AAOMS National meeting. Once again we have the priceless opportunity to visit with current residents, faculty, and alumni through the Hinds Academy dinner. A unique dining experience is provided as we gather to relive distant memories, hear the vision, and explore the exciting future of our oral and maxillofacial surgery residency training program. Each encounter is intended to provide the participants a real opportunity to begin relationships that are sure to be strengthened as time marches on, which is the true cornerstone of the Hinds Academy.



*Drs. Mark Wong,
John Valenza,
Bill Jordan,
Tom Weil*

The future of the Hinds Academy is as bright as our glowing past. We are currently in the process of designing a new website that will allow greater interaction between our members and the training program. We hope to provide case studies and a forum

for discussion of individual cases among members. We will be providing a case of the month that will allow members to stay up to date with current techniques and procedures. Even opportunities for financial support will be a click away through the Hinds Foundation website. Through a very rare and respectful relationship among alumni, friends, and faculty, The University of Texas School of Dentistry Department of Oral and Maxillofacial Surgery is planted firmly at the forefront of residency training education in the United States, and The Hinds Academy will be right beside them every step of the way to help ensure success.

The Hinds Academy Foundation

Rickey L. Hurst, DDS

In 2005 members of the Hinds Academy (UTHSC-Houston Oral and Maxillofacial Surgery Alumni Association) searched for a method of making financial contributions to the Department of Oral and Maxillofacial Surgery at UT Houston to maximize the benefit to the department. After discussions with officials of the Dental Branch and the University of Texas Health Science Center at Houston (now UTHealth), the Academy formed a 401c(3) corporation. Forming a foundation allowed a flexibility to appropriate and direct contributions in a way consistent with the greatest needs of the department. A 401c(3) not-for-profit IRS designation was obtained to allow the Foundation to function as a charitable organization.

The founding board was Larry Spradley, Chairman, Rick Hurst, Vice-Chairman, Tom Weil, Executive Secretary, Jim Kennedy and Jim Hebert as voting members and Mark Wong as an ex-officio non-voting member. In later years Larry Stewart, Curtis Garrett, Charlie Repa, and Bill Jordan were named to the Board. All contributed to the growth and success of the Foundation in its early years.

The structure of the founding documents and bylaws of the Foundation stipulated a board of Academy members tasked with financial oversight. A decision was made early to let the corpus of the donations grow to a sizable amount and then make contributions to the department based on interest earned. In this way, the Foundation set out to be a fund of money available in perpetuity.

The initial fund drive of the Foundation was named for Jimmy Johnson, a much loved faculty member of the department for many years. In 2005 an advisory board of twenty doctors representing various years of residency training was appointed. These individuals did a remarkable job of encouraging their peers to make substantial contributions. In the following six years, the Foundation's assets grew to over \$600K. The largest gift to date has been from Dr. and Mrs. Bernard Katz in the amount of \$100K.

In 2010 Legacy Gifts were solicited, which by 2014 had promised over \$850K in deferred giving by a total of sixteen donors. The largest pledge to date has been Dr. Kent Stobaugh's in the amount of \$100K.

Coinciding with the construction of the new dental school, the Hinds Academy raised sufficient funds to furnish a surgical and emergency simulation suite. It has been named the Hinds Academy Suite.

In 2012 the Hinds Foundation Forward Program was initiated. Gifts were given that represented the revenue of one set of third molars, or about \$1500, for a period of four years. To date these contributions and corporate donors, such as KLS Martin, have produced total pledges of \$1.35 million dollars. The gifts from the Foundation have been used for such diverse purposes as purchasing a cone beam CT for the Smith Tower office and upgrading software for the tracking of patients for the residents. In addition, funds have been provided to the department to supplement the salaries of junior faculty in the hope of helping to retain talented staff.

Ongoing projects include new fundraising initiatives creating a stronger link between the Academy and the Foundation with current residents in training. In addition, a robust website has been produced that will encourage and allow donors to make contributions on line to the Foundation.

Going forward our Board hopes to continue to steward the monies entrusted by investing in a conservative portfolio, which we will diligently review on a semi-annual basis. It is our goal for assets of the Foundation to grow to over \$2 million in the next decade. Accomplishing this goal will require a new generation of leadership. To that end, Mike O'Shell and David Kostohryz have been named to the Board.

Our original focus remains clear—to see the UT Houston training program retain its preeminence among OMS training programs in the United States.

In closing, our history and progress would not be complete without recognizing the pivotal part Tom Weil has provided. His vision, unwavering support, and unflagging energy will be long remembered.

The Edward C. Hinds Symposium

Charles M. Repa, DDS



EDWARD C. HINDS SYMPOSIUM

ON CONTEMPORARY
ORAL AND MAXILLOFACIAL SURGERY

The Hinds Symposium currently enjoys the status of an exceptional, well respected regional meeting that has attendees with diverse geographical representation from both a national and an international perspective. One would be hard pressed to find a regional meeting anywhere in the United States that would compare in quality, consistency, and quantity of materials presented or in size of attendance today. As with many things, the symposium had a smaller, inauspicious start. The purpose of this chapter is two-fold: to familiarize those who are interested in or are unaware of its past with how it has evolved into the Edward C. Hinds Symposium in its present-day form, and to offer some insights as to what has contributed to its preeminent standing among meetings and conferences within the oral and maxillofacial profession.

The history of the current Hinds Symposium has its roots in the lectures given by the University of Texas Oral and Maxillofacial Surgery Department in the early 1960s. These original details were chronicled by Dr. Robert Debes in the first edition of this history, *Looking Back: A History of the Oral and Maxillofacial Surgery Training Program University of Texas-Houston 1949-1999* (ref. pages 38-39). The department started lectures for dentists as a continuing education offering to enhance their dentoalveolar surgery skills. This departmental series grew with guest speakers being invited to present, and the members of the Houston Society of Oral Surgeons were welcomed to attend and assist as well. As Bob noted in 1966, the suggestion for a joint meeting sponsored by the Dental Branch Oral and Maxillofacial Department and Houston Society of Oral Surgeons was proposed with the focus on programs for the oral surgery specialist. These meetings were on a smaller scale than the current symposium, as one would expect for the then size of the city and OMS community as compared to the present day. The first meeting was held at the Jesse Jones Library

in the Texas Medical Center in August 1966. Surgical Orthodontics was the topic discussed. Dr. Alex Mohac, an oral surgeon, and Dr. Haskell Gruber, an orthodontist, were the featured speakers. Bill Bell was in charge of the meeting. Some 140 doctors were in attendance. Following the meeting, a reception and dinner was held at the recently completed Astrodome, the eighth wonder of the world. (Note: The Los Angeles Dodgers played the Houston Astros that night, with Sandy Koufax on the mound for the Dodgers. The Astros lost.) The meeting was a huge success. Bob reported in the first edition of *Looking Back* that the presentations were held on an almost annual basis over the ensuing years following that beginning lecture and social event.

The lectures became somewhat more sporadic as time passed with attempts to keep to the planned annual time-frame. Fast forward now to 1984 when John Helfrick assumed the chairmanship of the department following Ed Hinds' retirement. Mark Wong was recruited onto the faculty shortly thereafter, and Dr. Helfrick tasked him with re-energizing the lecture series, which had faded into a less-than-annual affair at that point. Out of this assignment, the Hinds Lectureship, as it was then named, was born. The lecture was usually a two- or three-hour session and held in rooms at the Dental Branch, Jesse Jones Library, or medical center hospital venues. I had the good fortune to teach in the department at the Dental Branch part-time for several years following completion of residency training. Teaching and working with the residents presented me with several opportunities to discuss a multitude of issues with Dr. Wong. One venture that came from those interests and discussions was the three-day arthroscopy courses that were given in North Wales, Great Britain. Mark, having trained there, was a close acquaintance of Drs. Graham Wood and John Phillip, who presented these lectures. In the course of teaching at the school, traveling and spending time together, and giving the courses a couple of times a year in Wales, I had occasion to discuss other topics, one of which was the Hinds Lectureship. Mark was dealing with several issues pertaining to the meetings he was trying to arrange.

The meetings had become primarily the responsibility of the department at this point, and lack of an operating budget was a problem. Yearly seed money to help arrange speakers, reserve venues, pay for meals and refreshments, or cover other components was needed so that this was not a logistical and financial albatross around the neck of the department. The Hinds Lectureship attendance was typically comprised of residents, faculty, and private local OMS practitioners. Mark Wong recalls that about 30-40 persons typically attended. Another factor in the attendance and support for the lectures at that time was a less-than-robust relationship between the private sector and academia. Given the current state of the favorable interaction

and support between the town and gown, it is hard for someone who was not around then to understand this. Given that with these factors and concerns, the time was ripe to craft and broker a new arrangement for the lectureship. The intent was to institute a new and improved association between the Houston Society and the UT OMS department in a format that would lift the lectureship to the next level and establish a win-win situation for the department and oral surgery community in the process.

The first step in attempting to move forward and improve the lectureship was formulating a formal working agreement between the OMS Department and the HSOMS as to work loads, logistics, budgets, expenses, and revenue. This included establishing a committee to take on the work of planning the meeting so it would not fall onto the shoulders of only a few persons. At this stage, the Lectureship took on the title of the Edward C. Hinds Symposium on Contemporary Oral and Maxillofacial Surgery. A permanent organizing committee for the symposium with representation from the UT OMS Department as well as the Houston Society of Oral Surgeons was thus created. The envisioned objective of the agreement was to allow for local meaningful continuing education opportunities for the Houston Society members in a convenient and more economical environment with some potential limited funds to support the society needs while helping to keep the need for dues changes minimized. From the perspective of the department, this structure would help share the work load and generate improved academic standing in the Dental Branch and the greater state or regional oral and maxillofacial communities in hosting such an annual event. Hopefully also, if successful, the symposium would generate funds that would be apportioned per the agreement to support the department for needs unavailable from state funding sources and as allowed by state funding guidelines. The other benefit to the arrangement would be improvement in the academic and private practice relationship in the community. This structure would also be able to keep some working capital from year to year for organizing expenses, i.e. seed money. In addition, some small reserve as a cushion could be maintained for any potential off year in attendance or revenue to avoid bankrupting or destroying the meeting.

This unique committee structure has proved invaluable over the years and has allowed for the growth of the Edward C. Hinds Symposium through synergistic, brainstorming discussions among the private practice and academic components of the group. This has helped greatly in developing the general topic themes of the meeting and supportive secondary speakers. These have included not only hot topics of the day, but topics that are apropos to the private practice environment. The lecturers

and content given at the symposium during the last 25 years have been second to none. This recruitment has been possible due to the involvement of the committee members in local, state, and national OMS affairs via input in committees, officer and board positions, and their personal relationships with OMS professionals throughout the U.S. and the world. Participation in the ABOMS certification process through membership on the exam committee or as directors and officers was also a factor. The current committee is comprised of Mike O'Shell (chairman), Kamal Busaidy, Bill Jordan, Paul Metz, Sharon Peterson, Charles Repa, Tom Weil, Jim Wilson, and Mark Wong. Previous members have included Jim Kennedy, Gary MacDonald, Beny Remedios, and Bill Wintersteen. A special mention must be made of the administrative help the committee has enjoyed. The assistance of an executive secretary cannot be underestimated or understated, as it is vital to the operation and success of the committee and symposium. Ms. Ladonna Roland, who formerly worked for Tom Weil, filled that position for many years. Ms. Teresa Granhold currently occupies that critical role and assists the committee to ensure that all details are carried out in a proper manner. The dedication of both and their assistance and expertise has been greatly appreciated.

*Mark Wong presenting
2003 Hinds Symposium
speaker Norman Betts
with unique caricature
sketch by Bill Hinds*



A multitude of factors led to the success and growth of the Ed Hinds Symposium. In addition to the aforementioned vision statement, agreement, and committee structure, this symposium has some features not seen in other non-national meetings. One major component is the support and involvement of Dr. Hinds' family, who

have been very helpful. In fact, his son Bill was gracious enough to sketch out the logo used for the symposium, shown at the beginning of this chapter. Bill Hinds is a nationally known cartoonist, having drawn the nationally syndicated Tank McNamara cartoon strip for many years. He has helped the symposium provide a personally drawn, unique caricature of the primary Hinds lecturer to be presented to that individual each year. Obviously, this is a one-of-a-kind and cherished token of appreciation from the symposium to the lecturer in accepting the invitation to speak. A heartfelt thank you must be expressed to Bill and the Hinds family for their support in this gifting each year.

The addition of other ancillary program modules has helped generate interest and attendance as well. The meeting as originally imagined and currently organized starts on Friday afternoon. This structure was chosen to allow local surgeons to work half a day on Friday and to allow out-of-town attendees to travel either Thursday evening after work or Friday morning. This arrangement provides them four work days yet enables them to travel to Houston for a meaningful block of continuing education hours. Sunday is typically left free so that those wanting to visit with local friends or partake of Houston's many attractions could still do so and have travel time back home for the start of a new week.

A Thursday afternoon golf outing was added to the meeting format. This was initiated as an homage to the yearly parties that Dr. and Mrs. Hinds would host for the residents at their country home. This tournament is set up in a scramble format so even the less skilled golfers can enjoy the afternoon. For the local practitioners, in keeping with the intent as outlined previously, this allows them to work on Thursday and Friday mornings and still have a productive week. Those out-of-town attendees who love golf, getting outdoors, and continuing the Hinds golf retreat history can elect to come into Houston a day early and play 18 holes with a few of their friends. In 2013 a new wrinkle was added, a shooting clays golf scramble with a shotgun event was inaugurated. This component to the symposium is an added draw to the festivities, and although probably not a primary reason for some attending, it dovetails nicely into the tradition that Dr. Hinds established for the residency program and gives attendees some chance for a little additional rest and recreation.

Other supplemental activities have been attractive to attendees, augmented the desirability of the Ed Hinds Symposium, and added to the success of this endeavor. The committee has been able to include the opportunity for Advanced Cardiac Life Support certification each year. This has been a joint effort undertaken in conjunction with the UTHealth School of Dentistry. Other adjunctive options for

those attending the meeting are programs to assist with risk management through collaboration with OMSNIC, courses via AAOMS cooperative arrangements for insurance coding, practice management, and financial seminars. OMS practitioners also have the chance for their office and surgical personnel to participate in courses focusing on office administrative, business, and surgical skills. Another contribution to the success over the years is the availability of pre or post symposium courses that have been offered in cosmetic and reconstructive surgery. Mention must also be made that the Hinds Symposium has been fortunate to have had some combined meeting opportunities. The Southwest Society of Oral Surgeons held a joint meeting with the Hinds Symposium, and the Oral Surgery Travel Club of Great Britain also staged a joint meeting with the Hinds Symposium.

*Reception
following the
Ray Reid
Speaker
presentation
in 2003*



The Ray Reid Speaker presentation was added by the organizing committee in 2002 to honor and remember Dr. Reid. It provides a non-clinical interesting and entertaining component to the symposium during the post-meeting reception time-frame. This has been an appropriate tribute to Ray and a very welcome addition to the meeting. Another factor helping with the growth is the location chosen to host the meeting. In the past the Warwick Hotel and JW Marriott have been used as sites for the meeting. The current location at the Houstonian Hotel, which has been used as the venue since 2003, offers an exceptional locale with numerous amenities that work well for single attendees, couples, and families. It is in close proximity to the Galleria for shopping or dining, the museum district, and countless other attractions should one choose to leave the premises.

Last but not least is the alumni component to the meeting. A large number of attendees completed their training at the UT Houston Oral and Maxillofacial Surgery program. This symposium offers a great opportunity to see past colleagues and make new personal connections while receiving excellent continuing education knowledge, pearls, and tips—not only from the speakers but from colleagues in attendance.

This chapter has presented information to help familiarize the reader with information about the history and evolution of the Hinds Symposium. Additional commentary about how the structure and components have allowed for the growth and success of the symposium are included. The need for continuing education hours for professional development and improvement and licensure needs help drive the desire to provide such a meeting. The ability to provide for those needs in a more affordable and value-added way through this setting has helped it become what it is today. The meeting material is practical, relevant, and current. The venue location has been top notch and is very desirable. The Hinds Symposium is a one-of-a kind regional meeting in terms of its success and attendance. It produces real-world, cutting edge, and science-based information for the oral and maxillofacial surgeon and does so in a compact, efficient manner at a fraction of the cost of most other continuing education courses today. The partnership of the UT Houston OMS Department and Houston Society of Oral and Maxillofacial Surgeons via the agreement to pursue such a goal and the mixed component nature of the organizing committee has created a unique collaborative environment not found elsewhere. The personal and professional connections of the academic and private practice individuals have allowed for the recruitment of the high caliber speakers invited to present at this meeting. The Hinds Symposium owes its well earned reputation and success to this combination of institutionalization, organization, blending of academic and private practice members and community, smorgasbord of activities, ancillary learning components, location, plus content and speakers that not only bridge the local community but span the national and international ones as well.

Hinds Symposium Speakers

1989 – Dr. Bruce Epker
1990 – Dr. Daniel Laskin
1991 – Dr. Roger West
1992 – Dr. John Kent
1995 – Dr. Robert Marx
1996 – Dr. Thomas Jeter
1997 – Dr. Gil Triplett
1998 – Dr. Larry Peterson
1999 – Dr. Jeffrey Dembo
2000 – Dr. Michael Block
2001 – Dr. John Helfrick
2002 – Dr. Jay Malmquist
2003 – Dr. Norman Betts
2004 – Dr. Peter Moy
2005 – Dr. Robert V Walker
2006 – Dr. Kenji Higuchi
2007 – Dr. David Frost
2008 – Dr. Ronald Redden
2009 – Dr. Robert Marx
2010 – Dr. M Anthony Pogrel
2011 – Dr. Stuart Lieblich
2012 – Dr. Daniel Spagnoli
2013 – No featured speaker
2014 – Dr. Eric Carlson
2015 – Dr. Craig Misch

Ray Reid Speakers

2002 – David Sibley, DDS
2003 – Beck Weathers, MD
2004 – Sanjay Gupta, MD
2005 – James Tour, Ph.D.
2006 – James “Red” Duke, MD
2007 – Michael McKinney, MD
2008 – Cpt. Michael Lopez-Alegria
2009 – Anthony Atala, MD
2010 – Robert V Walker, DDS
2011 – R. Bruce MacIntosh, DDS
2012 – Bodan Pomahac, MD
2013 – Joaquin Jackson
2014 – Boas Arzi, D.V.M.
2015 – David Eagleman, Ph.D.

Distinguished Service Awards

1995 - Dr. John N. Kent
1996 - Dr. Raymond R. Reid
1997 - Dr. Nicholas T. Hallick
1998 - Dr. James M. Herbert
1999 - Dr. William H. Bell
2000 - Dr. James V. Johnson
2001 - Dr. John F. Helfrick
2002 - Dr. Dean R. White
2003 - Dr. James W. Kennedy
2004 - Dr. George P. Quirk
2005 - Dr. Thomas M. Weil
2006 - Dr. Robert R. Debes
2007 - Dr. Larry W. Spradley
2008 – No Award Presented
2009 - Dr. Mark E. Wong
2010 - Dr. Rick L. Hurst
2011 - No Award Presented
2012 - Dr. James W. Wilson
2013 - No Award Presented
2014 - Dr. Mark W. Tucker

Building Upon the Present for the Sake of The Future: Endowments, Legacies, and How These Shape Our Destiny

Mark E. Wong, DDS

As the Department of Oral and Maxillofacial Surgery journeys into the next fifty years of its history, much has happened to transform the specialty from its roots in dentoalveolar surgery to a branch of dentistry that overlaps the boundaries of medicine. We have become the quintessential health profession, and our practitioners are intimately involved in all aspects of healthcare delivery, politics, and research. The department, through the activities of its many graduates and faculty, past and present, has been at the forefront of many of these changes. As a single training program in the fourth largest city in the country with one of the nation's largest training programs housed in the largest medical center complex in the world, we enjoy opportunities and a scale of practice second to none. By the numbers, in 2014, 31.5 residents, including Air Force, Army and Navy rotators, and 385 dental students are training with the department. We have 11.2 faculty members, and our activities are supported by 13 classified staff. At this time, the Texas Medical Center is composed of 290 permanent buildings that house 7000 hospital beds, treats 7.2 million patients per year, employs 106,000 staff, teaches 49,000 students, and has an annual operating budget of 15 billion dollars. Capitalizing on all these components, we must carefully use the lessons from the past as we develop future directions.

An important part of our future is, therefore, a record of our history. To this end, the indefatigable efforts of Bob Debes and Don Butler must be acknowledged. Fifteen years ago, they undertook the first edition of the department's history at the request of the Hinds Academy and Department Chairman John Helfrick. Fifteen years was sufficient time for them to forget the amount of work it took to compile this book, and they subsequently agreed to a second edition in 2014. By recording not only the history of the department, but also analyzing enrollment data and future practice destinations, they provided an excellent reference tool to document the characteristics of the department. The second volume of the department's history seeks to do the same and contains explanations and accounts for many of the department's current activities. The famous essayist and philosopher, George Santayana (1863 – 1952), is credited with the quote, "Those who cannot remember the past are condemned to repeat it." The two editions of the department's history, *Looking Back and Oral and Maxillofacial Surgery at the University of Texas School of Dentistry at Houston* will

become part of Drs. Debes' and Butler's enduring legacies for their contributions to oral and maxillofacial surgery in Houston.

The department's significant involvement in the management of facial trauma care has been a major reason for our success. Not only did it legitimize our role in the hospital environment, but the skill and dedication of our practitioners helped establish valuable connections with the different medical schools and hospital administrators. The former facilitated the creation of an integrated OMS/MD residency track as well as excellent off-service rotations that are a necessary component to the residency program. Strong relations with the hospitals allowed us to negotiate for sufficient financial resources to maintain and strengthen our department. As we move into the next epoch, trauma will continue to be part of the department's legacy. In 2014, Memorial Hermann Hospital announced plans to build a dedicated multi-story trauma center in response to its position (since 2011) as the nation's busiest trauma center. Our department will play a major role in this endeavor, and we are currently developing plans to augment our role in facial trauma management and research.

Since 2013, the department has expanded its role in head and neck oncology and microvascular reconstruction surgery. This initiative builds upon previous collaborations enjoyed by different faculty members with other head and neck surgeons in the Medical Center. John Helfrick's celebrated collaborations with Drs. Don Gard and Saleh Shenaq, plastic and reconstructive surgeons at The Methodist Hospital in the 1980s, is an example of our long-standing involvement in this area. Non-vascularized reconstruction techniques were also part of our surgical experience, especially after Mark Wong and Brian Smith joined the department after their training at the University of Miami with renown reconstructive surgeon Robert Marx. The management of benign and malignant head and neck pathology has become one of the program's strengths. And in an effort to further strengthen our capabilities in this area, the recruitment of an outstanding clinician-scientist, Simon Young, will hopefully result in the creation of novel and more effective ways to manage one of the twenty-first century's most difficult medical challenges: curing cancer.

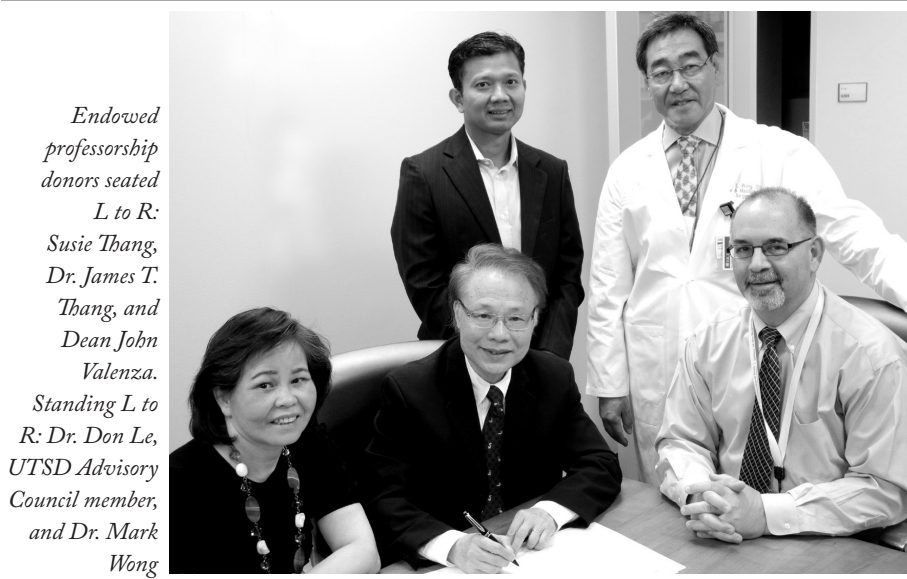
The department's involvement in the history of orthognathic surgery is also well known. These techniques have found expanded applications in cleft patients and the management of obstructive sleep apnea. Over the years, the department has participated in different Houston cleft teams, and we continue to expand our efforts. The practice of orthognathic surgery has been refined extensively by an alumnus of

the program, Terry Taylor. Terry's very robust orthognathic practice, one of the largest in the nation, is the result of his consummate skill and discipline, and the extremely high volume of training experiences provided to the residents is invaluable. Building upon this foundation, we have engaged the services of two part-time orthodontists at Ben Taub General Hospital to create additional opportunities for the program.

Promotion of our strong surgical scope of practice in the Medical Center hospitals has long been a major focus of the department for much of its history. However, recognizing that we need to nurture our relationship with the School of Dentistry for us to maintain our place as a dental specialty has also become a high priority. Over the past ten years, our faculty members have sought greater roles in the dental school community and education of dental students. New roles in providing courses in medicine and implant dentistry have provided increased exposure of the department to the undergraduate students. When a new dental school was opened in 2012, a simulation center was built and funded by the Hinds Academy in the School of Dentistry. This state-of-the-art facility has been used to train both residents and dental students in the management of outpatient anesthetic and medical emergencies. Technology, such as the SimMan, will undoubtedly find greater roles in the training of our students, and we have positioned ourselves well to lead this initiative.

With an enviable track record in terms of a vibrant residency program, a strong and talented faculty establishment, and a highly active and prolific research portfolio, one remaining area of deficiency for the department lay in the area of endowments. In academia, one of the benchmarks of success is a measure of the donations solicited by a department. Successful fund raising is reflected to a major degree by the number of endowed positions created. While the department has enjoyed some credit through past fund raising efforts, such as the Jesse Jones Endowment and the Oral and Maxillofacial Surgery Resident Fund, significant support was still lacking. A number of reasons accounted for this, not the least of which was a lack of a message that resounded with our alumni and other potential supporters. As reported in a different chapter of this book, one of the consequences of this lack of imagination was the creation of an extramural agency, the Hinds Foundation, to raise money for the department. The Hinds Foundation dedicated itself to providing additional resources to the department using interest accrued from a fixed corpus. In a few years, the Foundation had raised sufficient funds to begin its activities, and since 2011 over \$100,000 has been donated. Once established, a culture of giving has also been revived. Through the persistent efforts of the School of Dentistry's Chief Development Officer, John Greer, 2013 saw the creation of the department's first

endowed professorship, The Nguyen-Thang Professorship in Oral and Maxillofacial Surgery, through the generosity of a Houston dentist, Dr. James Thang and his wife. The Thangs' son, Chris, received his dental education at the School of Dentistry and is currently a resident in our program, and the gift was an acknowledgment of the excellent education he received as a student. The director of the Undergraduate Oral and Maxillofacial Surgery Program has been designated as the holder of the Thang Professorship, and the inaugural recipient was Dr. George Suchko. Shortly after the creation of this first endowment, an alumnus of the program, Dr. Bernard Katz and his wife, Gloria, decided to endow a Chairmanship in Oral and Maxillofacial Surgery. Following approval by the University of Texas Regents, the Dr. Bernard and Gloria P. Katz Chairmanship in Oral and Maxillofacial Surgery was established, and in 2014, Dr. Mark Wong was named to the post. Dr. Katz had already been a major supporter of the Hinds Foundation, and this additional gift provided strong evidence



*Endowed
professorship
donors seated
L to R:
Susie Thang,
Dr. James T.
Thang, and
Dean John
Valenza.*

*Standing L to
R: Dr. Don Le,
UTSD Advisory
Council member,
and Dr. Mark
Wong*

of his belief in the value of the department. The position is only the second endowed chairmanship in the dental school's 109-year history. And as the final feather in the cap of John Greer (who shortly after departed the School of Dentistry to head the newly created Development Office at the Texas Heart Institute at the request of Dr. Denton Cooley), a third Professorship in Oral and Maxillofacial Surgery was created by another alumnus of the Department, Dr. Steven Koo, and his wife Jessica in honor of his practice partner, Dr. Tom Weil, whose contributions to organizational oral and maxillofacial surgery at both the local and national levels is remarkable. As a long-

time member of the AAOMS Committee on Practice Management and an examiner for the American Board of Oral and Maxillofacial Surgery, Tom Weil has served the specialty well. But perhaps nowhere else has he served with greater distinction than in Houston, where his commitment and devotion can be seen in many of our successful initiatives such as the Hinds Symposium, the Hinds Foundation, and in the strong collaborations between the academic and private practice communities. The Thomas and Debbie Weil Professorship in Oral and Maxillofacial Surgery was created in 2014, with Dr. Jim Wilson being named as the inaugural recipient.



Dr. and Mrs. Bernard Katz

In *Looking Back*, John Helfrick spoke of the many technological advances he believed were going to become a routine part of the specialty's practice. Many of these have come into being. The use of computer guided surgery in orthognathic, implant, and even reconstructive surgery is commonplace. Vaccines against cancer are part of the latest weaponry employed in fighting this disease. From changing the focus of the specialty from "techniques" to "technology," oral and maxillofacial surgery entered the 21st century. We will undoubtedly continue in this vein for many years to come, with genome-based personalized therapeutics guiding the choice of medications, advances in molecular biology that target specific receptors or enzymes, and tissue engineering that will allow us to grow tissues and solid organs to replace failing or missing structures. However, all of these advances will be delivered against a backdrop where efforts to contain costs and expand coverage to include the millions of patients who are currently un-insured or under-insured collide. The economics of healthcare will,

therefore, become a major determinant affecting how care will be delivered. With an aging population, diseases that are more common in the elderly will also become a major focus of healthcare. The department will need to take into consideration all these factors as we plan a course for the future. Efficient models of practice, less expensive forms of treatment, and expertise in geriatric oral and maxillofacial surgery will be areas that will be emphasized as we build upon the strong foundations created during the period covered by that part in the department's history described in this book.

Dean John Valenza, gift donor Steven Koo, honoree Tom Weil, Thomas and Debbie Weil Professorship recipient Jim Wilson, and department chairman Mark Wong



Photo Gallery

*Synthes Bone
Plating Course
2001. Residents
L to R: Sean
Kim, Eddy
Yang, Ziad
Ali, Kimberley
Perkins, and
Zahid Lalani*



*Synthes Bone
Plating Course
2001. L to
R: Kimberley
Perkins, Shan
Bagby, and
Zahid Lalani*



*During a break
at 2001 Robert
V. Walker special
lecture: L to R:
Bill Logan, Dr.
Walker, Sandeep
Pathak, Scott
Middleton
(taking a sip),
Ziad Ali, and
Sean Kim*



*Faculty group at
the Wong home
in 2001, L to
R: Terry Taylor,
John Helfrick,
Mark Wong,
Don Butler,
Jimmy Johnson,
Harry Gilbert,
Tony Chu, Clark
Whitmire and
Jim Wilson*



*At 2001 Hinds
Symposium
L to R:
Tony Chu,
George Suchko
and Don Butler*



*Faculty members
2005 L to R:
Nagi Demian,
Bernie Natkin,
Didier Malis,
Kamal Busaidy,
Joe Marchena,
George Suchko,
Mark Wong,
Frank Frishkey,
Jim Wilson,
Jimmy Johnson,
Bob Debes and
Clark Whitmire*





Smiling faces found at the Hinds Academy dinner held during the annual 2003 AAOMS meeting:
Top L to R: Bill Frick, Linda Frick, Brent Bailey, Brian Smith, Raymond Wiggins, Joe Marchena,
Nate Walters, John Lavoie. 2nd Row L to R: Jim Wilson, Janie Carver, Doug Carver, Dean White,
Vicky White, Don Cohen, Mike Gliddon, Eddy Yang. 3rd Row L to R: Mike Sitters, Rick Hurst,
Christy Hurst, Larry Spradley, Legrand Spradley, Naifa Busaidy, James Xia, Kirby Bunel.
Bottom L to R: Mrs. Mike Sitters, Robert Mermer, Anita McDonald, Gary McDonald,
Kamal Busaidy, Mark Wong, Jim Macholl



Photon on left:
Jimmy Johnson
2005

Photo on right:
Michelle Lavoie
and Teresa
Granbold



*At Katrina
Evacuation
Center 2005:
Peter Bui and
Didier Malis*



*Alumni at
2006 Hinds
Symposium
L to R:
Raymond
Wiggins,
Tim Coyle,
Eric Engel and
Rick Morlen*



2009 L to R:
*Jim Kennedy,
 Ayesha Nawab,
 Jim Wilson and
 Mark Wong*



*At AAOMS
 National
 Meeting 2012
 "Sim Wars"
 Presentation.*

*L to R:
 Jim Wilson,
 Phil Freeman,
 Simon Young
 and Kamal
 Busaidy*



*2012:
Kamal Busaidy
conducting
a SimMan
simulated
emergency
training session
in the Hinds
Academy Center
for Clinical
Simulation*



*2012: Resident
Patrick Morrell
and three
BTGH nurses
managing a
high fidelity
simulated
airway
emergency
in the Hinds
Academy Center
for Clinical
Simulation*



*Faculty Retreat
2012. clockwise
from left:
Phil Freeman,
Nagi Demian,
Jim Bertz,
Bob Debes,
George Suchko,
Bruce Smith,
Michelle Savoie,
Teresa Granhold,
and Kamal
Busaidy.*



*Sid Schwartz,
a part-time
faculty member
for 20 years who
has also provided
entertainment
for many
graduations and
social functions
over the years.
Here Sid is
adjusting his
equipment prior
to a department
holiday party
in 2000.*



Appendix

UTHSC-Houston OMS Alumni 1949 - 2020

1950

Kuebel, Joseph O.	deceased	Loyola NO
Kwapis, Bruno W.	Belleville IL 62223	Marquette

1952

Chase, Edward D.	deceased	UTSD
Hull, Don	deceased	Emory

1953

Daugherty, Joe Wilson	Lexington KY 40503	Kentucky
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1954

Beiter, Gerald R.	Austin TX 78746	St Louis
Waggoner, S. Duane	deceased	Wash U StL

1955

Pleasants, John E.	deceased	Emory
--------------------	----------	-------

1956

Curl, Carroll	deceased	UTSD
Degnan, Edward J.	deceased	Georgetown

1957

Bell, William H.	Stowe VT 05672	St Louis
Papazoglou, Ourania	Athens, Greece 609	Greece
Seaton, Thomas A.	deceased	Ohio State
Shapiro, Donald N.	deceased	Michigan

1958

Sills, Ashley H.	deceased	Baylor
Warren, Joe B.	deceased	Baylor

1959

Debes, Robert R.	Houston TX 77098	rrd611@sbcglobal.net	Baylor
Maldonado, Oscar D.	Houston TX 77030		Peru
Quirk, George P.	Houston TX 77063		Pittsburgh

1960

Brady, Jerry A.	Ponte Verde Bch FL	brookielab@aol.com	St Louis
Holland, Joseph A.	deceased		St Louis
Keesling, G. Robert	deceased		Indiana
White, Norman S.	Carlsbad CA 92009		Nrthwestern

1961

Galbreath, Jess C.	deceased		UTSD
Nohaile, George A.	Altoona PA 16601		Pittsburgh
Pfafflin, Edward M.	deceased		Indiana
Reid, Loy C.	deceased		UTSD

1962

Suzuki, Akinori	Fullerton CA 92831		Baylor
White, Wendell R.	deceased		UMKC

1963

Dyer, Michael H.	Belleville IL 62223		Illinois
Hallick, Nicholas T.	Corpus Christi TX 78412	nhallick@aol.com	Baylor
Hamilton, Reuel E.	Kennesaw GA 30152	reuel30152@bellsouth.net	Louisville
Palumbo, Vincent D.	Temple Hills MD 20748	vdpalumbo@aol.com	Georgetown

1964

Galloway, Charles R.	Wills Point TX 75169		UTSD
Haslem, John R.	Indianapolis IN 46220		Indiana
Reid, Raymond R.	deceased		Oregon

1965

Clark, James T.	deceased		Tennessee
Katz, Bernard	Bellaire TX 77401	bkatz1@aol.com	UTSD
Myers, Lamar J.	Americus GA 31709		Emory
Parnes, Edmund I.	Miami FL 33176	eporal@aol.com	Pittsburgh
Taylor, Harry E.	Fort Worth TX 76120		Tennessee

1966

Chalmers, Donald L.	Austin TX 78731	dlcworld@sbcglobal.net	UTSD
Smith, Ronald G.	Lubbock TX 79407	rqsons@gmail.com	UTSD
Torres, Israel	deceased		UTSD

1967

Barfield, George H.	Pasadena TX 77502		UTSD
Girotti, William J.	Wilbraham MA 01095		Maryland
Johnson, James V.	Georgetown TX 78633	james.v.johnson@uth.tmc.edu	UTSD

1968

Becker, Jerome	Toronto ON M9A1C3	duffer18@rogers.com	Toronto
Prater, Walter L.	deceased		UTSD
Santora, Edward, Jr.	deceased		Georgetown

1969

Cantrell, Rex J.	deceased		Baylor
Cline, Donald A.	deceased		Baylor
Kent, John N.	New Orleans LA 70119	jkent1@suhs.edu	Nebraska

1970

Hebert, James M.	Houston TX 77005	jmhebert@sbcglobal.net	UTSD
Valle, Arnold	Brownsville TX 78520	maryhelenvale@yahoo.com	UTSD
Vogel, Robert G.	Little Rock AR 72212		Case W Res
Wolfson, Sherwood H.	Iowa City IA 52246	sherwood-wolfson@uiowa.edu	Pittsburgh

1971

Chiles, Donald G.	Temple TX 76508	dchiles@sw.org	Baylor
Fesler, Michael E.	Houston TX 77090		Illinois
Kennedy, James W.	Austin TX 78738	kennedyj@wt.net	UTSD

1972

Furman, Terence H.	Victoria TX 77905		Marquette
Nelson, David F.	El Dorado Hills CA 95762	jawdoc63@comcast.net	Wash U StL
Tucker, W. Mark	Tampa FL 33617	jawsdoc@hotmail.com	Tennessee

1973

Byrne, Roger P.	Houston TX 77063	byrneddsmd@aol.com	UTSD
Meador, Robert C.	deceased		UTSD
Stobaugh, R. Kent	Houston TX 77007	kentstobaugh@gmail.com	UTSD

1974

Allen, Peter M.	deceased		New Jersey
Frick, William G.	Temple TX 76502	2fricks@sbcglobal.net	Baylor
Gross, Bob D.	Santa Rosa Bch FL	jawjob@gmail.com	UMKC
White, R. Dean	Granbury TX 76048	dr.deanwhite@gmail.com	UTSD

1975

Black, Jerry D.	Missouri City TX 77459	jdboms@mac.com	Creighton
Eklund, Michael K.	Houston TX 77046	michael@sworalandimplant.com	UTSD

1976

Hageman, Robert A.	Casper WY 82601		Georgetown
Hubbard, Alan L.	Shenandoah TX 77380		UTSD
Long, William H.	Nellysford VA 22958	bgklong@gmail.com	UTSD
Spradley, Larry W.	Southlake TX 76092	larryspradley@yahoo.com	UTSD

1977

Gradke, Gary M.	Scottsdale AZ 85254		Baylor
Poinsett, William S.	Lake Jackson TX 77566		UTSD
Reed, David E.	Mission TX 78574		UTSD

1978

Angevine, Terry T.	Flower Mound TX 75028	dr.vine@juno.com	UTSD
Haverkorn, David E.	Whitney TX 76692	dhaverkorn@hotmail.com	UTSD
Patterson, W. Richard	Highland Village TX	dickandjane97@yahoo.com	Meharry
Sutton, Craig S.	Duncanville TX 75116		Baylor

1979

Cohen, Donald F.	Houston TX 77030	donalddcohenoralsurgery.com	Baylor
Garrett, J. Curtis	College Station TX 77845	cgarrett@bvoms.com	UTSD
Munford, Arthur G.	Victoria TX 77904	goaggies@suddenlink.net	UTSD
Renner, Dale E.	Houston TX 77069		UTSD

1980

Gordon, Jay T.	Longview TX 75603	jaygordon@sbcglobal.net	UTSD
Hurst, Rickey L.	Nacogdoches TX 75965	drrickhurst@yahoo.com	UTSD
McDonald, Gary W.	Kingwood TX 77339	gwm@gmcdonald.com	UTSD
Spence, Dennis R.	Tyler TX 75703	dennisomfs@aol.com	UTSD

1981

Dwyer, Stephen C.	Conroe TX 77304	n4516s@aol.com	UTSD
Frey, Karl F.	Harlingen TX 78550	kffrey@hotmail.com	Indiana
Phillips, David M.	Sherman TX 75090		UTSD

1982

Bucy, Robert L.	El Paso TX 79936	rbucy1@gmail.com	UTSD
Sitters, Michael A.	Spring TX 77379	skoms@gmail.com	UTSD
Stewart, Larry R.	Plano TX 75075	dr.s@texasoralsurgerygroup.com	Baylor
Taylor, Terry D.	Houston TX 77030	ttaylor@tmhs.org	Illinois

1983

Bates, James D.	Dallas TX 75205	jbates@texasoms.com	UTSD
Chen, Joseph J.	Houston TX 77065	jjchen@sbcglobal.net	UTSD
Patton, Robert M.	Austin TX 78731	s2000@austin.rr.com	Louisville
Yen, Kirk K.	San Jose CA 95125	kirkyenoffice@juno.com	UCLA

1984

Harrison, Marshall D.	Baton Rouge LA 70806	mharrison43@cox.net	LSU
Randolph, Gregory D.	San Antonio TX 78216		UTSA
Robertson, O. Bailey	San Antonio TX 78254	brobert775@aol.com	UTSD
Suddhasthira, Theeralaksna	Bangkok Thai 10400	theeralaksna@yahoo.com	Thailand

1985

Loudon, Michael R.	Battle Creek MI 49015	mikeloudon@aol.com	Nebraska
Repa, Charles M	The Woodlands TX	cmrepa@aol.com	UTSA
Rod, Edward F.	Beaumont TX 77702	drrod.oms@gmail.com	UTSD
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1986

Carver, Douglas D.	Denver CO 80202	ddcarver@aol.com	Baylor
Foster, James H.	Ingram TX 78025		UTSD
Peterson, Sharon S.	Houston TX 77082	sspeterson@mindspring.com	UTSD
Sims, Darrell B.	Phoenix AZ 85006	drdarrellsims@live.com	UTSA

1987

Bailey, R. Brent	Webster TX 77598	brent.bailey@sbcglobal.net	UTSD
Frishkey, Frank R. L.	Houston TX 77089	frank_frishkeydds@sbcglobal.net	UTSD
Holland, Peter L.	Denton TX 76201		Baylor
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1988

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Marks, Gregory P.	Atlanta GA 30305	winstonmarks@bellsouth.net	UTSD
Remedios, Benito L.	Houston TX 77030	benyr@mail.com	UTSD
Rogers, Thomas R.	Temple TX 76504	thomas.rogers97@yahoo.com	Baylor

1989

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McRoberts, Marcus L.	Harlingen TX 78550		UTSD
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1990

DaPonte-Manon, Ermalinda	Humble TX 77346	northeastoral@cebridge.net	Venezuela
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Smith, Bruce S.	Cypress TX 77429	brucesdr@sbcglobal.net	Baylor
Stanton, Robert F.	Kingwood TX 77325	docrobs@aol.com	Wash U StL

1991

Anton, Michael J.	Webster TX 77598	anton7@sbcglobal.net	UTSD
Cooper-Newland, Deborah L.	Bellaire TX 77401	coopernewland@mindspring.com	Venezuela
Ranieri, Therese	deceased		Loyola Chi
Tew, Darrell K.	Yakima WA 98908	doctortew@gmail.com	Nebraska

1992

Manon, Victor M.	Kingwood TX 77339		UTSD
Morales, Ofilio J.	Orlando FL 32819	ojmorales@ofdis.com	Guatemala
Thomas-Taylor, Mary	Houston TX 77030	maryt@swbell.net	UTSD
Tso, Albert C.	Fremont CA 94539		UCSF

1993

Bunel, Kirby L.	Texarkana TX 75503	kbunel@aol.com	Baylor
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Miller, Craig E.	Hays KS 67601	ksman54@comcast.net	Creighton
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1994

Chu, Sai Boon	Kuala Lumpur Mal 50450		UMKC
Oliver, Anthony J.	Pimlico QLD 4812		Australia
Rieger, William P.	Hartford WI 53027	wrieger1@hughes.net	Marquette
Whitley, Brian	Hamilton NZ		New Zealand

1995

Cruz, Carlos	Edinburg TX 78539	ccruz@dracruzoms.com	Guatemala
Perez, Helena M.	Detroit MI 48208	perezhm@udmercy.edu	UTSD
Reiche, Oscar J.	San Jose CR	info@costaricanetwork.com	Costa Rica
Tacher, Samuel	Mexico City Mex CP11000		Mexico

1996

Bahatheq, Mesaad	Riyadh Saudi 11425		Saudi Arabia
Gadler, Nicholas N.	El Cajon CA 92020	nngadler@cox.net	USC
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Miyake, Alan A.	Oklahoma City OK 73117	alan-miyake@ouhsc.edu	UTSA

1997

Camp, Brian H.	Raleigh NC 27615	camp@raleighoralsurgery.com	UNC
Cooke, Howard F.	Dallas TX 75237	howcooke@gmail.com	Stalingrad
Jordan, William V.	Sugar Land TX 77479	www.fortbendoralsurgeons.com	UTSA
Keyhani, J Tina	Phoenix AZ 85014	info@tinakeyhanioms.com	Ohio State

1998

Fusetti, Stefano	Padova Ita 35128	stefano.fusetti@unipd.it	Italy
Lawrenz, Dietrich R.	Minneapolis MN 55421	dlawrenz@omsspecialists.com	Minnesota
Moya, Deiter J.	Houston TX 77063	docmoya@logixonline.com	Mexico

1999

Brown, Steven A.	East Greenwich RI 02818	jawbreaker65@cox.net	Tufts
Pandolfi, Philip J.	Harrisonburg VA 22801	pjpandolfi@msn.com	Louisville
Pearce, Alan R.	Nampa ID 83686		Creighton
Unterman, Brian M..	The Woodlands TX	dkotsios@nwoms.net	UCLA

2000

Almony, Jeffrey S.	Southern Pines NC	jalmoney@yahoo.com	Maryland
Brotherton, Dana M.	Sugar Land TX 77479	dbrother@entouch.net	UTSA
Chu, Tony W.	Santa Rosa CA 95404	tonywchuoms@gmail.com	McGill
Tyko, Leonard M.	Santa Rosa CA 95405	ltyko@hotmail.com	UCLA
Vankka, Terence K.	Edmonton AB T6M2K3	tvankka@kingswayos.com	BC

2001

Macholl, James R.	Keller TX 76244	jamesmacholl@yahoo.com	Marquette
Morlen, Rickey A.	Houston TX 77030	rickey.morlen2@va.gov	SIU
Murphy, Robert S.	Huntington WV 25702		W. Virginia
Stewart, Jim D.	El Cajon CA 92020	jstewart64@hotmail.com	Baylor

2002

Anderson, Paul B.	Irvine CA 92603	pbanderson@gmail.com	UCLA
Busaidy, Kamal F.	Houston TX 77054	kamal.busaidy@uth.tmc.edu	Un Kingdom
Middleton, Scott A.	Sarasota FL 34239	middletonoralsurgery@gmail.com	Scarolina
Perkins, Kimberley L.	Tripler AMC HI 96859	kperkinsdavis@gmail.com	Meharry
Smith, Henry G.	Madisonville KY 42431		Georgia

2003

Coyle, Timothy T.	Columbia MO 65203	tcyletx@yahoo.com	Missouri
Engel, Eric Roy	Chandler AZ 85226	engele@yahoo.com	UCLA
Guimond, Claude	Gatineau QC J9A2W8	glaude.guimond@forces.gc.ca	Montreal
Logan, William	Asheville NC 28801	info@rockclifforsurgery.com	Pitt
Wiggins, Raymond L.	Katy TX 77450	drwiggins@txofs.com	Baylor

2004

Briggs, Michaelanne	Georgetown TX 78626	mbrigg524@hotmail.com	UTSD
Gliddon, Michael J.	Lawton OK 73505	mgliddon2004@yahoo.com	UTSA
Lalani, Zahid S.	Spring TX 77379	zalani@tmhs.org	Mangalore
Walters, Nathan	Louisville KY 40202	dt@kyoms.com	Louisville
Yang, Eddy P.	Sugar Land TX 77478	eyangddsmd@yahoo.com	Michigan

2005

Demian, Nagi	Houston TX 77026	nagi.demian@uth.tmc.edu	UTSD
Malis, Didier	Geneva Switz 1203	malissoff@hotmail.com	Geneva
Pathak, Sandeep V.	Lawrenceville GA 30046	spathak99@hotmail.com	Tufts
Seidel, Shelley	Houston TX 77024	shelleyseidel@gmail.com	UTSD
Stern, Brian	Powell OH 43065	bstern@oral-surgery.cc	Pitt

2006

Bateman, Adam	Lehi UT 84043	oralsurgeon@ymail.com	Northwestern
Hong, Doug	Westminister CO 80234	hongdsdmd@yahoo.com	Penn
Moody, Michael D.	Lakewood CO 80215	mdmoodydds@hotmail.com	Baylor
Partridge, Judd E.	Salt Lake City UT 84121	oralsurgeryofutah@gmail.com	Louisville
Seabold, Chad R.	Houston TX 77027	cseabold7@gmail.com	Michigan

2007

Ali, Ziad A	McLean VA 22101	ziadali7@gmail.com	Penn
Kim, Sean	Houston TX 77073	sejoonseank@yahoo.com	Michigan
Koo, Steven	Houston TX 77063	steve@pineypointoms.com	UTSD
Theriault, Francois	Quebec QC G1X5E2	theriaultf@gmail.com	LaVal
Yamaji, Kyoko	Westminister CO 80234	kyokoelisa@yahoo.com	UTSD

2008

Bui, Peter	Santa Clara CA 95051	ptbui2001@gmail.com	Washington
Cottam, Jared	Burien WA 98166	jamcottam@hotmail.com	UCLA
Daniel, Chris	Santa Rosa CA 95405	christopherdanieloms@gmail.com	UTSA
Petersen, Samuel G.	Farmington NM 87401	spddspc@gmail.com	UCSF
Trache, Antionella	Edmonton AB T6M2E9	antonella.trache@forces.gc.ca	Alberta

2009

Alford, Jeff A	Lakeway TX 78734	drjalford@gmail.com	Baylor
Bachoura, Alex G.	Cypress TX 77429	alex.bachoura@gmail.com	USC
Cavaretta, Vincent John	Austin TX 78746	vcavaretta@gmail.com	UCLA
Garand, Erick	Cow Bay NS B3G1L3	erick.garand@gmail.com	LaVal

2010

Beck, Jason	Waco TX 76712	jbeckddsmd@gmail.com	UTSD
Cooke, Vera	Newburyport MA 01950	vdcooke@yahoo.com	Marquette
Dhesi, Sandeep	Calgary AB T3Z3K1	drsandeepdhesi@gmail.com	Saskatchewan
Schoolman, Steven R.	Cape Girardeau MO	steve.schoolman@semooralsurgery	Missouri
Shrewsbury, Cecil Rosco	The Woodlands TX	cecilshrew@hotmail.com	LSU

2011

Kostohryz, David W.	Fort Worth TX 76109	davidk@fwos.com	UTSD
Messier, Roch	Shannon QC G0A4N1	rmessierdmd@hotmail.com	Montreal
Mogannam, Jiries	Santa Rosa CA 95405	jm.omfs@gmail.com	UCLA
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2012

Curtis, William J	Lexington KY 40503	billcurtis2012@gmail.com	UNLV
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Irvine, Adam Matthew	Almonte ON K0A1K0	akirvine@ymail.com	Manitoba
Olynik, Christopher	Nanaimo BC V9R2S5	chrisolynik@gmail.com	BC
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2013

Blundell, Garrett D.	College Station TX 77845	gblundell@bvoms.com	UTSA
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Mahmood, Laith	Houston TX 77044	laithm47@gmail.com	UCLA
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2014

Beetar, Patrick D	Pearland TX 77581	pbeetar@gmail.com	UTSD
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Michael, Andrew V.	Irving TX 75063	drmichael@ntfos.com	UOP
Porras, Susana	Houston TX 77006		Penn
Schlesinger, James John	Las Vegas NV 89119	jjjs@glymanswanson.com	Conn
Seaman, Justin	Houston TX 77008		NYU

2015

Banner, Logan	Houston TX 77056	logan.banner@uth.tmc.edu	NYU
Gray, Austin	Manvel TX 77578	austin.d.gray@uth.tmc.edu	Baylor
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Robinson, Samuel W.	Houston TX 77007	samuel.w.robinson@uth.tmc.edu	Baylor
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2016

Al-Yahya, Yahya M	Houston TX 77054	alyahya.dds@hotmail.com	Virginia
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Hornberger, John C.	Houston TX 77004	john.c.hornberger@uth.tmc.edu	UTSD
Morrell, Patrick T.	Houston TX 77054	patrick.t.morrell@uth.tmc.edu	Marquette

2017

Bennetts, Nicholas A.	Pearland TX 77584	nicholas.a.bennetts@uth.tmc.edu	Colorado
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Nasseri, Nader	Houston TX 77025	nadernasseri@gmail.com	UCLA
Zech, Derrick	Pearland TX 77584	derrickzech@gmail.com	Creighton

2018

Couey, Marcus	Riverside CA 92506	mac2280@columbia.edu	Columbia
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2019

All-Atabakhsh, Amir	Reseda CA 91335	amir.allatabakhsh@uth.tmc.edu	Tufts
Smith, Scott	Houston TX 77064	smsmith14@gmail.com	UTSD

2020

Bishop, Rachel A.	Houston TX 77054	bishop55b@gmail.com	UTSD
Stackowicz, Daniel J.	Pearland TX 77584	daniel.stackowicz@gmail.com	Indiana
Woodbeck, Michael D.	Houston TX 77025	michaelwoodbeck@gmail.com	UTSD

UT Houston OMS Alumni 1950 Through 1968



Top L to R: Kuebel 50, Kwapis 50, Hull 52, Beiter 54, Waggoner 54, Pleasants 55.

2nd Row L to R: Curl 56, Degnan 56, Bell 57, Seaton 57, Shapiro 57, Sills 58.

3rd Row L to R: Debes 59, Maldonado 59, Quirk 59, Keesling 60, Galbreath 61, Nohaile 61,

4th Row L to R: Pfafflin 61, L. Reid 61, Dyer 63, Hallick 63, Hamilton 63, Galloway 64.

5th Row L to R: R. Reid 64, Katz 65, Parnes 65, Taylor 65, Chalmers 66, R. Smith 66.

Bottom Row L to R: Torres 66, Barfield 67, Girotti 67, Johnson 67, Becker 68,

Prater 68, Santora 68

UT Houston OMS Alumni 1969 Through 1982



*Top L to R: Cantrell 69, Cline 69, Kent 69, Hebert 70, Valle 70, Vogel 70.
 2nd Row L to R: Chiles 71, Kennedy 71, Nelson 72, Tucker 72, Byrne 73, Meador 73.
 3rd Row L to R: Stobaugh 73, Frick 74, Gross 74, White 74, Black 75, Eklund 75.
 4th Row L to R: Hubbard 76, Long 76, Spradley 76, Gradke 77, Reed 77, Haverkorn 78.
 5th Row L to R: Cohen 79, Garrett 79, Renner 79, Hurst 80, G. McDonald 80, Spence 80.
 Bottom Row L to R: Dwyer 81, Phillips 81, Bucy 82, Sitters 82, Stewart 82, and Taylor 82*

UT Houston OMS Alumni 1983 Through 1991



*Top L to R: Bates 83, Chen 83, Yen 83, Harrison 84, Randolph 84, Robertson 84.
 2nd Row L to R: Suddhasthira 84, Loudon 85, Repa 85, Rod 85, J. Smith 85, Carver 86.
 3rd Row L to R: Foster 86, Peterson 86, Sims 86, Bailey 87, Frishkey 87, Holland 87.
 4th Row L to R: Mermer 87 Kattchee 88, Marks 88, Remedios 88, Rogers 88, Mack 89.
 5th Row L to R: McRoberts 89, Sachs 89, Vizuite 89,
 DaPonte-Manon 90, D. McDonald 90, B. Smith 90.
 Bottom L to R: Stanton 90, Anton 91, Cooper-Newland 91, Ranieri 91, and Tew 91.*

UT Houston OMS Alumni 1992 Through 1999



Top L to R: Manon 92, Morales 92, Thomas-Taylor 92, Tso 92, Bunel 93, Krishnan 93.
2nd Row L to R: C. Miller 93, K. Smith 93, S. Chu 94, Oliver 94, Reiger 94, Whitley 94.
3rd Row L to R: Cruz 95, Reiche 95, Tacher 95, Perez 95, Bahatheq 96, Gadler 96.
4th Row L to R: Geisler 96, Miyake 96, Camp 97, Cooke 97, Jordan 97, Keyhani 97.
5th Row L to R: Fusetti 98, Lawrenz 98, Moya 98.
Bottom L to R: Brown 99, Pandolfi 99, Pearce 99, and Unterman 99.

UTHSC-Houston OMS Alumni and Faculty 1949-2014

-A-

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Class of 2019

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OR
Class of 1974

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Class of 2002

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Class of 1965

Partridge, Judd E.

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Class of 2006

Pathak, Sandeep V.

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Class of 2005

Patterson, W. Richard

3426 Sherwood Ln
Highland Village TX
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Class of 1978

Patton, Robert M.

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Class of 1983

Pearce, Alan R.

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Class of 1999

Peoples, James R.

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713-932-1447
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Part-time Faculty

Perez, Helena M.

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Class of 1995

Perkins, Kimberley L.

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Class of 2002

Petersen, Samuel G.

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Class of 2008

Peterson, Sharon S.

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Class of 1986

Pffafflin, Edward M.*
IN
Class of 1961

Phillips, David M.
809 Gallagher Ste H
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Class of 1981

Pleasants, John E.*
TX
Class of 1955

Poinsett, William S.
215 Oak Drive South Ste E
Lake Jackson TX 77566
979-297-5221
Class of 1977

Porras, Susana
1412A Harold St
Houston TX 77006
Class of 2014

Prater, Walter L.*
TX
Class of 1968

-Q-

Quirk, George P.
7700 San Felipe St Ste 220
Houston TX 77063
713-784-4200
Class of 1959

-R-

Radman, W. Paul
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Class of 1959

Randolph, Gregory D.
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Class of 1984

Ranieri, Therese*
GA
Class of 1991

Redden, Ronald J.
1906 W Summer Rain Ct
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Faculty

Reed, David E.
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Class of 1977

Reiche, Oscar J.
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Class of 1995

Reid, Loy C.*
TX
Class of 1961

Reid, Raymond R.*
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Class of 1964

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Class of 1988

Renner, Dale E.
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Class of 1979

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Class of 2012

Roberts, Misty Goff
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Class of 2011

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Class of 1984

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Class of 2015

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Class of 1985

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Class of 1988

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Class of 2015

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Shapiro, Donald N.*
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-V-**Vizuite, Jack R.**

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-W-**Waggoner, S. Duane***

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Class of 2004

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Class of 2003

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Class of 1983

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Class of 2013

-Z-

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Class of 2017

UTHSC-Houston OMS Full-time Faculty 1949-2014

Name	Address	City	Telephone	Years
Adams, John C.	deceased	TX		1977 1982
Armstrong, James E.	deceased	TX		1952 1975
Barkley, Jim Bob	deceased	TX		1952 1953
Bell, William H.	303 Worcester Loop Rd	Stowe VT 05672	802-253-6312	1956 1960
Bertz, James E.	3501 N. Scottsdale Rd. Ste 110	Scottsdale AZ 85251	480-945-0663	1972 1978
Bradrick, Jon P.	10701 East Blvd, 160 (W)	Cleveland OH 44106	216-791-3800	1997 2000
Brotherton, Dana	3501 Town Center Blvd S	Sugar Land TX 77479	281-242-2848	2000 2001
Busaidy, Kamal F.	7500 Cambridge St Ste 6510	Houston TX 77054	713-486-4308	2004 Pres
Butler, Donald P.	45 S 100 E, PO Box 482	Mendon UT 84325	435-752-2190	1989 2004
Chu, Tony W.	1275 Fourth St #313	Santa Rosa CA 95404	707-545-8585	2000 2001
Debes, Robert R.	2929 Buffalo Speedway Ste 611	Houston TX 77098	713-623-2626	1956 1957
Degnan, Edward J.	deceased	FL		1956 1958
Demian, Nagi	5656 Kelly UT Annex 112B	Houston TX 77026	713-566-4719	2005 Pres
Donovan, Michael	deceased	TX		1994 1996
Escobar, Victor H.	101 W. University Ave	Champaign IL 61820	217-366-1246	1997 2000
Freeman, Phillip N.	7500 Cambridge St Ste 6510	Houston TX 77054		2011 Pres
Galbreath, Jess C.	deceased	TX		1961 1971
Gateno, Jaime	6550 Fannin Ste 1280	Houston TX 77030	713-441-5577	1993 2006
Gilbert, Harry D.	7500 Cambridge St Ste 6510	Houston TX 77054	713-486-4315	1985 Pres
Hanna, Issa	7500 Cambridge St Ste 6510	Houston TX 77054	713-486-4308	2012 Pres
Helfrick, John F.	1343 Creekford Circle	Sugarland TX 77478		1984 2000
Hinds, Edward C.	deceased	TX		1948 1983
Johnson, James V.	108 Landmark Inn Ct	Georgetown TX 78633	713-248-0775	1987 2014
Kennedy, James W.	404 Black Wolf Run	Austin TX 78738		2006 2009
Kent, John N.	1100 Florida Ave	New Orleans LA 70119	504-941-8216	1969 1972
Lomba, Jose A.	2205 Copeland St	Lufkin TX 75904	936-634-2517	1978 1981
Maldonado, Oscar	6560 Fannin Ste 1600	Houston TX 77030	713-795-4120	1962 1971

Name	Address	City	Telephone	Years
Malis, Didier	Centre M, Rue de Lyon 87	Geneva Switz 1203	++4122-	2005 2007
Marchena, Jose M	3 Cherry St	Newburyport MA 01950	978-465-3400	2001 2006
McFarland, Paul H.	deceased	TX		1973 1989
McLean, G. Robert		TX		1951 1952
Meador, Robert C.	deceased	TX		1973 1974
Melville, James C.	7500 Cambridge St Ste 6510	Houston TX 77054	713-486-4312	2014 Pres
Miller, F. Edward	deceased	TX		1968 1985
Morgan, Joseph	7515 S. Main Ste 720	Houston TX 77030	713-795-4232	1974 1976
Murphy, Morris B.	deceased	TX		1951 1953
Nawab, Ayesha	19441 Golf Vista Plz Ste 130	Lansdowne VA 20176	703-723-7858	2007 2010
Olynik, Christopher	#1-84 Robarts St	Nanaimo BC V9R2S5	281-979-0552	2012 2013
Pleasants, John E.	deceased	TX		1965 1976
Reid, Raymond R.	deceased	TX		1967 2000
Remedios, Benito L.	7505 S Main Ste 390	Houston TX 77030	713-790-9474	1983 1984
Robertson, O.	8807 Warley Heights	San Antonio TX 78254	210-494-2005	1984 1985
Roche, William C.	deceased	TX		1976 1996
Schmitt, M. Anne	511 W Hanley Ave Ste C	Coeur D Alene ID 83815	208-667-0824	1979 1982
Shelton, David W.	deceased	FL		1981 1983
Shum, Jonathan W	2727 Revere St Apt 4091	Houston TX 77098	713-486-4311	2013 Pres
Sills, Ashley H.	deceased	TX		1959 1968
Smith, Brian R.	1002 W Pointe Cir	Shreveport LA 71106	318-797-5812	1989 1991
Suchko, George D.	25914 Turquoise Sky	San Antonio TX 78261	281-639-2066	1995 2014
Sweet, James B.	2013 Sweet St	Navarre FL 32566	850-939-4849	1981 1995
Taylor, Terry D.	6560 Fannin Ste 614	Houston TX 77030	713-790-1995	1982 1993
Treasure, Trevor E.	7500 Cambridge St Ste 6510	Houston TX 77054	713-486-4311	2014 Pres
Waltrip, Maurice C.	deceased	TX		1958 1965
Wilson, James W.	2172 Dryden	Houston TX 77030	713-500-7280	2001 2014
Wong, Mark E.	7500 Cambridge St Ste 6510	Houston TX 77054	713-486-4311	1987 Pres
Woodward, Hubert	deceased	TX		1970 1976
Wozniak/Potts,	PO Box 433	Paauilo HI 96776		1976 1982

UTHSC-Houston OMS Full-time Faculty 1949-2014 By Year

Name	Address	City	Telephone	Years
Hinds, Edward C.	deceased	TX		1948 1983
McLean, G. Robert		TX		1951 1952
Murphy, Morris B.	deceased	TX		1951 1953
Armstrong, James E.	deceased	TX		1952 1975
Barkley, Jim Bob	deceased	TX		1952 1953
Bell, William H.	303 Worcester Loop Rd	Stowe VT 05672	802-253-6312	1956 1960
Debes, Robert R.	2929 Buffalo Speedway Ste 611	Houston TX 77098	713-623-2626	1956 1957
Degnan, Edward J.	deceased	FL		1956 1958
Waltrip, Maurice C.	deceased	TX		1958 1965
Sills, Ashley H.	deceased	TX		1959 1968
Galbreath, Jess C.	deceased	TX		1961 1971
Maldonado, Oscar	6560 Fannin Ste 1600	Houston TX 77030	713-795-4120	1962 1971
Pleasants, John E.	deceased	TX		1965 1976
Reid, Raymond R.	deceased	TX		1967 2000
Miller, F. Edward	deceased	TX		1968 1985
Kent, John N.	1100 Florida Ave	New Orleans LA 70119	504-941-8216	1969 1972
Woodward, Hubert	deceased	TX		1970 1976
Bertz, James E.	3501 N. Scottsdale Rd. Ste 110	Scottsdale AZ 85251	480-945-0663	1972 1978
McFarland, Paul H.	deceased	TX		1973 1989
Meador, Robert C.	deceased	TX		1973 1974
Morgan, Joseph	7515 S. Main Ste 720	Houston TX 77030	713-795-4232	1974 1976
Roche, William C.	deceased	TX		1976 1996
Wozniak/Potts,	PO Box 433	Paaulo HI 96776		1976 1982
Adams, John C.	deceased	TX		1977 1982
Lomba, Jose A.	2205 Copeland St	Lufkin TX 75904	936-634-2517	1978 1981
Schmitt, M. Anne	511 W Hanley Ave Ste C	Coeur D Alene ID 83815	208-667-0824	1979 1982
Shelton, David W.	deceased	FL		1981 1983
Sweet, James B.	2013 Sweet St	Navarre FL 32566	850-939-4849	1981 1995
Taylor, Terry D.	6560 Fannin Ste 614	Houston TX 77030	713-790-1995	1982 1993
Remedios, Benito L.	7505 S Main Ste 390	Houston TX 77030	713-790-9474	1983 1984
Helfrick, John F.	1343 Creekford Circle	Sugarland TX 77478		1984 2000

Name	Address	City	Telephone	Years
Robertson, O.	8807 Warley Heights	San Antonio TX 78254	210-494-2005	1984 1985
Gilbert, Harry D.	7500 Cambridge St Ste 6510	Houston TX 77054	713-486-4315	1985 Pres
Johnson, James V.	108 Landmark Inn Ct	Georgetown TX 78633	713-248-0775	1987 2014
Wong, Mark E.	7500 Cambridge St Ste 6510	Houston TX 77054	713-486-4311	1987 Pres
Butler, Donald P.	45 S 100 E, PO Box 482	Mendon UT 84325	435-752-2190	1989 2004
Smith, Brian R.	1002 W Pointe Cir	Shreveport LA 71106	318-797-5812	1989 1991
Gateno, Jaime	6550 Fannin Ste 1280	Houston TX 77030	713-441-5577	1993 2006
Donovan, Michael	deceased	TX		1994 1996
Suchko, George D.	25914 Turquoise Sky	San Antonio TX 78261	281-639-2066	1995 2014
Bradrick, Jon P.	10701 East Blvd, 160 (W)	Cleveland OH 44106	216-791-3800	1997 2000
Escobar, Victor H.	101 W. University Ave	Champaign IL 61820	217-366-1246	1997 2000
Brotherton, Dana	3501 Town Center Blvd S	Sugar Land TX 77479	281-242-2848	2000 2001
Chu, Tony W.	1275 Fourth St #313	Santa Rosa CA 95404	707-545-8585	2000 2001
Marchena, Jose M	3 Cherry St	Newburyport MA 01950	978-465-3400	2001 2006
Wilson, James W.	2172 Dryden	Houston TX 77030	713-500-7280	2001 2014
Busaidy, Kamal F.	7500 Cambridge St Ste 6510	Houston TX 77054	713-486-4308	2004 Pres
Demian, Nagi	5656 Kelly UT Annex 112B	Houston TX 77026	713-566-4719	2005 Pres
Malis, Didier	Centre M, Rue de Lyon 87	Geneva Switz 1203	++4122-	2005 2007
Kennedy, James W.	404 Black Wolf Run	Austin TX 78738		2006 2009
Nawab, Ayesha	19441 Golf Vista Plz Ste 130	Lansdowne VA 20176	703-723-7858	2007 2010
Freeman, Phillip N.	7500 Cambridge St Ste 6510	Houston TX 77054		2011 Pres
Hanna, Issa	7500 Cambridge St Ste 6510	Houston TX 77054	713-486-4308	2012 Pres
Olynik, Christopher	#1-84 Robarts St	Nanaimo BC V9R2S5	281-979-0552	2012 2013
Shum, Jonathan W	2727 Revere St Apt 4091	Houston TX 77098	713-486-4311	2013 Pres
Melville, James C.	7500 Cambridge St Ste 6510	Houston TX 77054	713-486-4312	2014 Pres
Treasure, Trevor E.	7500 Cambridge St Ste 6510	Houston TX 77054	713-486-4311	2014 Pres

Former UTHSC-Houston Full-time Faculty 1949 – 1980



Top L to R: Ed Hinds 1948-83, John Armstrong 1952-75, Bill Bell 1956-60, Bob Debes 1956-present.

2nd Row L to R: Ed Degnan 1956-58, Ashley Sills 1959-68, Jess Galbreath 1961-71, Oscar Maldonado 1962-71.

3rd Row L to R: John Pleasants 1965-76, Ray Reid 1967-2000, Ed Miller 1968-85, Jack Kent 1969-72.

Bottom row L to R: Woody Woodward 1970-76, Paul McFarland 1973-89, Bill Roche 1976-96, John Adams 1977-82, and Joe Lomba 1978-81.

Former UTHSC-Houston Full-time Faculty 1981-2014



Top L to R: Dave Shelton 1981-83, Jim Sweet 1981-95, Terry Taylor 1982-93, John Helfrick 1984-2000. 2nd Row L to R: Jimmy Johnson 1987-2014, Don Butler 1989-2004, Brian Smith 1989-91, Jaime Gateno 1993-2006. 3rd row L to R: Mike Donovan 1994-96, George Suchko 1995-2014, Jon Bradrick 1997-2000, Victor Escobar 1997-2000. Bottom L to R: Joe Marchena 2001-06, Didier Malis 2005-07, Jim Kennedy 2006-09, and Ayesha Nawab 2007-10.

Dental Schools Attended By UTHSC - Houston Residents, 2005-2020

Robert R. Debes, DDS

Dental School	Residents	Dental School	Residents
Baylor	4	Marquette	2
UT San Antonio	5	Mississippi	2
UTSD	16	Missouri	1
Alberta	1	Montreal	1
British Columbia	4	New York	2
California San Fran	1	Northwestern	1
Colorado		Michigan	2
Connecticut	1	Ontario	1
Columbia	1	Pittsburgh	2
Creighton	1	Pennsylvania	3
Dalhousie	3	Saskatchewan	1
Geneva (Switzld)	1	USC	1
Indiana	3	Toronto	2
Iowa	1	Tufts	2
Kentucky	3	UCLA	5
Lavol	2	Univ of the Pac	1
Louisville	2	Virginia	1
LSU	1	Washington	2
Manitoba	1		

84 total residents from 39 different schools

A total of eighty-four (84) residents have been enrolled in the UT Houston OMS program since July 1999, when the class of 2000 first entered the training program. They came from thirty-nine (39) different dental schools. Twenty-five, or 30% of the total came from dental schools located within the state of Texas, which included sixteen (19%) from our own UTDB/UTSD. This is consistent with the trend that began in the 1960s, when Dental Branch graduates began applying to our program in large numbers. So, one-third of our residents came from Texas dental schools; of greater significance however, is the fact that the other two-thirds came from elsewhere. Nine residents (11%) were graduates of Canadian dental schools, which

was an obvious result of the relationship between the UT program and the Canadian Armed Forces. Two residents (2%) completed predoctoral training outside North America, which is a marked decrease in the percentage of foreign dentists who entered the program during its first fifty years. The remainder of our residents have come from all over the United States. California, with eight (8) residents, ranks second to Texas in the overall total.

The yearly total number of applications for acceptance into the UT Houston program has steadily increased to become one of the largest in the United States. The program receives between over 200 applications each year. After initial screening of applications about 20% of the total are subsequently invited and agree to be interviewed by the faculty. Six new residents (three on the four year track and three on the six year track), or about 3% of the original 200+ applicants, are finally selected through the national match program. The current 2015 resident roster includes 29 residents at the six different levels of training, but that number is likely to slowly increase as we continue to accept six new resident each year.

Data confirms that our program is both national and international in scope. When residents from Canada are included in the total, foreign trained residents make up 19% of the overall total. The remainder came from 29 different dental colleges located all over the United States. Worth noting is that the percentage of Texas school graduates entering the program has significantly declined from 49% (1949-99 analysis) to 32% during the current 2000-15 analysis. The reputation of Houston as an international city, the recognition of the Texas Medical Center and its achievements, and the high marks that have consistently been given to the UT Houston OMS program have resulted in wide acceptance by dental graduates who are interested in our specialty. A significant number of our graduates continue to remain in Texas, fulfilling the obligation of our state's educational system to provide training for those interested in our specialty.

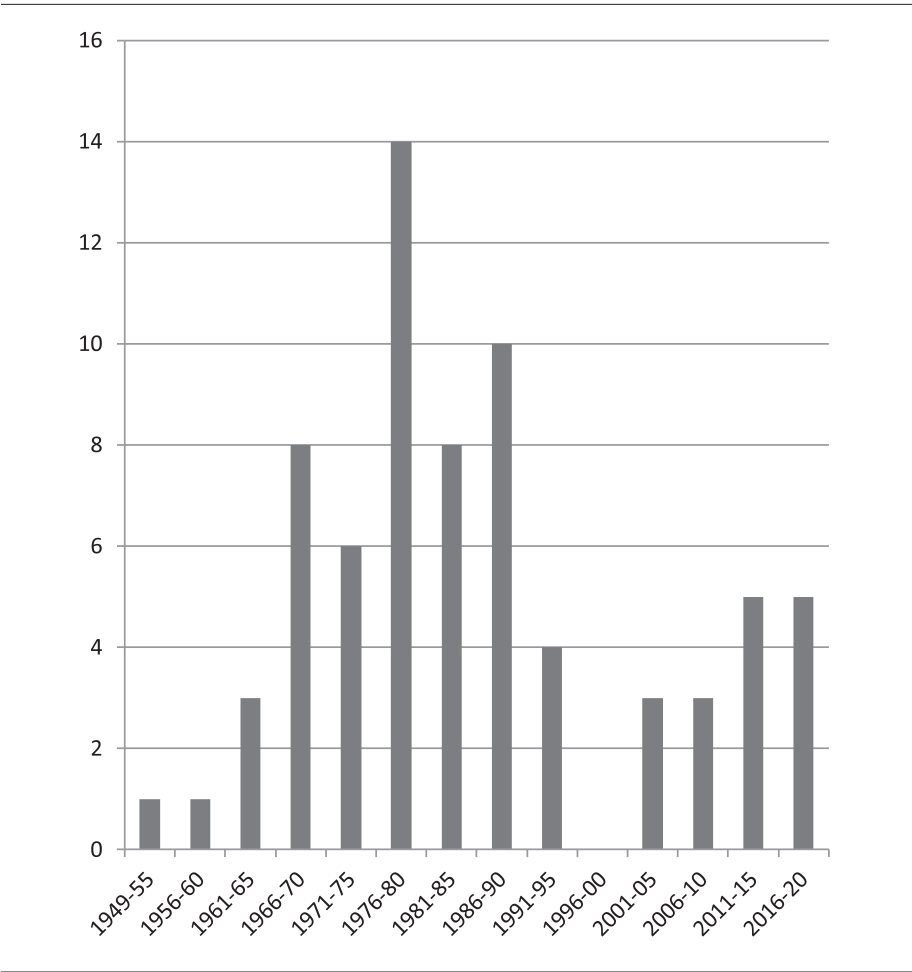
Residents who wish to pursue the six-year dual degree program must meet the requirements of our medical school affiliate, the University of Texas Medical School at Houston. Thirty-eight (38) 2000 – 2014 OMS graduates and 15 current residents have either (1) earned MD degrees, or (2) are currently enrolled in the Medical School. Many have questioned the need for the dual degree, since the scope and practice of oral surgery has increasingly moved from the hospital to what is now almost exclusively office based practice. This is an interesting paradox in that we struggled for years to gain acceptance and privileges in our hospitals, and now that

this has been accomplished, we seem to be increasingly focusing our practices on an in-office environment. This suggests a potential risk because if these privileges are inadvertently lost, having them restored will likely become a significant challenge.

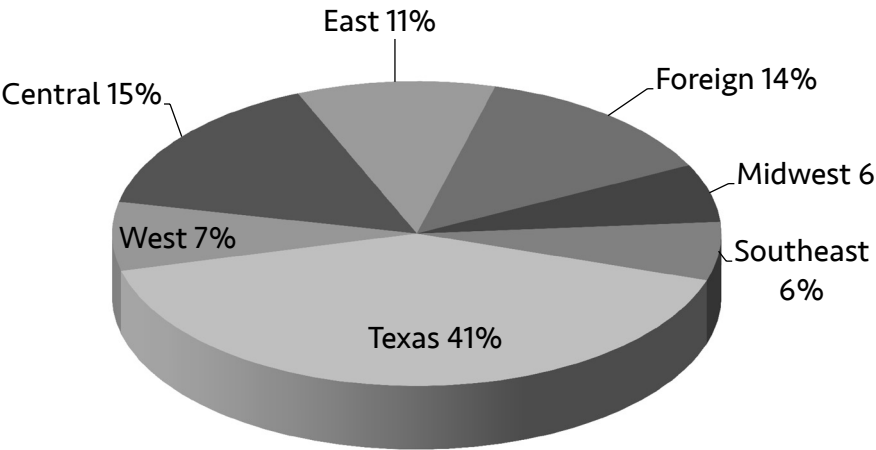
In comparing dental schools of our 2000 – 2014 residents (where they came from) versus their eventual practice locations (where they went), interesting observations can be made. The central, eastern, and mid-western geographic areas of the United States have not seemed to be popular places to which a previous resident wishes to return. Also worth noting is that fewer than half of our foreign graduates have returned to their native countries.

The number of graduates choosing to go west and southeast has doubled in percentage, and the number who chose to remain in Texas has increased by 15 percent. The numbers associated with Texas are not surprising for a number of reasons: First, since the three dental schools in the state provide a large percentage of our residents who most likely grew up in the state and therefore have families and friends in the area, it is a natural choice for them to remain in Texas. Secondly, Texas now ranks among the top three states in population and is experiencing an economic boom. Finally, the relatively mild climate, cultural attractions, hunting and fishing opportunities, professional and college sports and being a gateway to Mexico and points south, it is not surprising that many of our residents choose to stay after living in the area during their training.

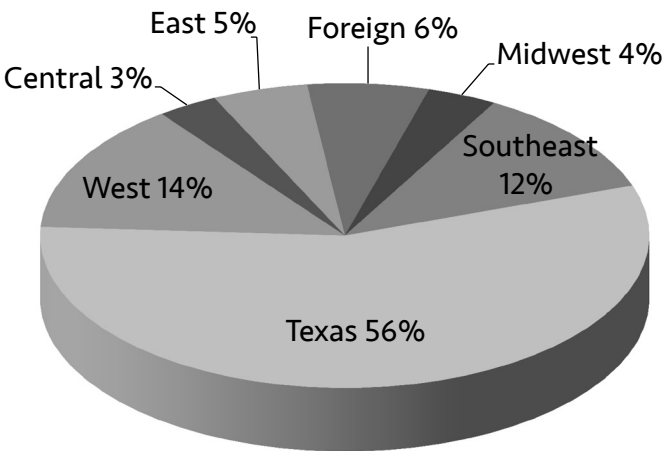
Number of UTSD Graduates Completing OMS Residency Program by Graduation Year (5 Year Periods)



UT-Houston OMS Residents Where They Came From 1950-2014



UT-Houston OMS Alumni Where They Practiced 1950-2014



UTHSC-Houston OMS Alumni By Dental School and Year

Dental School	Name	Graduation Year
Alberta	Trache, Antionella	2008
Baylor	Sills, Ashley H.	1958
	Warren, Joe B.	1958
	Debes, Robert R.	1959
	Suzuki, Akinori	1962
	Hallick, Nicholas T.	1963
	Cantrell, Rex J.	1969
	Cline, Donald A.	1969
	Chiles, Donald G.	1971
	Frick, William G.	1974
	Gradke, Gary M.	1977
	Sutton, Craig S.	1978
	Cohen, Donald F.	1979
	Stewart, Larry R.	1982
	Smith, John D. Jr.	1985
	Carver, Douglas D.	1986
	Holland, Peter L.	1987
	Rogers, Thomas R.	1988
	Mack, James A.	1989
	Smith, Bruce S.	1990
	Bunel, Kirby L.	1993
	Stewart, Jim D.	2001
	Wiggins, Raymond L.	2003
	Moody, Michael D.	2006
	Alford, Jeff A	2009
British Columbia	Vankka, Terence K.	2000
	Forrest, George	2013
Case Western Reserve	Vogel, Robert G.	1970
	Geisler, Stacy S.	1996
Costa Rica	Reiche, Oscar J.	1995

Dental School	Name	Graduation Year
Creighton	Black, Jerry D.	1975
Emory	Hull, Don	1952
	Pleasants, John E.	1955
	Myers, Lamar J.	1965
Florida	McDonald, David G.	1990
Geneva	Malis, Didier	2005
Georgetown	Degnan, Edward J.	1956
	Palumbo, Vincent D.	1963
	Santora, Edward, Jr.	1968
	Hageman, Robert A.	1976
Georgia	Smith, Henry G.	2002
Guatemala	Morales, Ofilio J.	1992
	Cruz, Carlos	1995
Illinois	Dyer, Michael H.	1963
	Fesler, Michael E.	1971
	Taylor, Terry D.	1982
Indiana	Keesling, G. Robert	1960
	Pfafflin, Edward M.	1961
	Haslem, John R.	1964
	Frey, Karl F.	1981
Italy	Fusetti, Stefano	1998
Kentucky	Daugherty, Joe Wilson	1953
Louisville	Hamilton, Reuel E.	1963
	Patton, Robert M.	1983
	Pandolfi, Philip J.	1999
	Walters, Nathan	2004
	Partridge, Judd E.	2006

Dental School	Name	Graduation Year
Loyola Chicago	Ranieri, Therese	1991
Loyola New Orleans	Kuebel, Joseph O.	1950
LSU	Harrison, Marshall D.	1984
	Shrewsbury, Cecil Rosco	2010
Malaysia	Krishnan, Vejayan	1993
Mangalore	Lalani, Zahid S.	2004
Manitoba	Irvine, Adam Matthew	2012
Marquette	Kwapis, Bruno W.	1950
	Furman, Terence H.	1972
	Macholl, James R.	2001
	Cooke, Vera	2010
Maryland	Girotti, William J.	1967
	Almony, Jeffrey S.	2000
McGill	Chu, Tony W.	2000
Meharry	Patterson, W. Richard	1978
Mexico	Tacher, Samuel	1995
	Moya, Deiter J.	1998
Michigan	Shapiro, Donald N.	1957
	Yang, Eddy P.	2004
	Seabold, Chad R.	2006
	Kim, Sean	2007
Minnesota	Lawrenz, Dietrich R.	1998
Nebraska	Kent, John N.	1969
	Loudon, Michael R.	1985
	Tew, Darrell K.	1991

Dental School	Name	Graduation Year
New Jersey	Allen, Peter M.	1974
Northwestern	White, Norman S.	1960
	Sachs, Scott A.	1989
	Bateman, Adam	2006
NYU	Seaman, Justin	2014
Ohio State	Seaton, Thomas A.	1957
	Keyhani, J Tina	1997
Oklahoma	Smith, Kevin S.	1993
Oregon	Reid, Raymond R.	1964
Penn	Hong, Doug	2006
	Ali, Ziad A	2007
	Porras, Susana	2014
Peru	Maldonado, Oscar D.	1959
Pittsburgh	Logan, William	2003
	Quirk, George P.	1959
	Nohaile, George A.	1961
	Parnes, Edmund I.	1965
	Wolfson, Sherwood H.	1970
Saskatchewan	Dhesi, Sandeep	2010
South Carolina	Middleton, Scott A.	2002
Southern Illinois	Morlen, Rickey A.	2001
St Louis	Beiter, Gerald R.	1954
	Bell, William H.	1957
	Brady, Jerry A.	1960
	Holland, Joseph A.	1960
Stalingrad	Cooke, Howard F.	1997

Dental School	Name	Graduation Year
Tennessee		
	Clark, James T.	1965
	Taylor, Harry E.	1965
	Tucker, W. Mark	1972
Thailand		
	Suddhasthira, Theeralaksna	1984
Toronto		
	Becker, Jerome	1968
	Wilson, David	2013
	Young, Simon	2013
Tufts		
	Pathak, Sandeep V.	2005
UCLA		
	Yen, Kirk K.	1983
	Unterman, Brian M..	1999
	Tyko, Leonard M.	2000
	Anderson, Paul B.	2002
	Engel, Eric Roy	2003
	Cottam, Jared	2008
	Cavaretta, Vincent John	2009
	Mogannam, Jiries	2011
	Mahmood, Laith	2013
UCSF		
	Tso, Albert C.	1992
UMKC		
	White, Wendell R.	1962
	Gross, Bob D.	1974
	Chu, Sai Boon	1994
United Kingdom		
	Busaidy, Kamal F.	2002
UNC		
	Camp, Brian H.	1997
UNLV		
	Curtis, William J	2012
UOP		
	Michael, Andrew V.	2014

Dental School	Name	Graduation Year
USC	Gadler, Nicholas N.	1996
	Bachoura, Alex G.	2009
UTSA	Randolph, Gregory D.	1984
	Repa, Charles M	1985
	Sims, Darrell B.	1986
	Miyake, Alan A.	1996
	Jordan, William V.	1997
	Brotherton, Dana M.	2000
	Gliddon, Michael J.	2004
	Daniel, Chris	2008
UTSD	Blundell, Garrett D.	2013
	Chase, Edward D.	1952
	Curl, Carroll	1956
	Galbreath, Jess C.	1961
	Reid, Loy C.	1961
	Galloway, Charles R.	1964
	Katz, Bernard	1965
	Chalmers, Donald L.	1966
	Smith, Ronald G.	1966
	Torres, Israel	1966
	Barfield, George H.	1967
	Johnson, James V.	1967
	Prater, Walter L.	1968
	Hebert, James M.	1970
	Valle, Arnold	1970
	Kennedy, James W.	1971
	Byrne, Roger P.	1973
	Meador, Robert C.	1973
	Stobaugh, R. Kent	1973
	White, R. Dean	1974
	Eklund, Michael K.	1975
	Hubbard, Alan L.	1976
	Long, William H.	1976
	Spradley, Larry W.	1976
	Poinsett, William S.	1977
	Reed, David E.	1977
	Angevine, Terry T.	1978

Dental School	Name	Graduation Year
UTSD (cont)	Haverkorn, David E.	1978
	Garrett, J. Curtis	1979
	Munford, Arthur G.	1979
	Renner, Dale E.	1979
	Gordon, Jay T.	1980
	Hurst, Rickey L.	1980
	McDonald, Gary W.	1980
	Spence, Dennis R.	1980
	Dwyer, Stephen C.	1981
	Phillips, David M.	1981
	Bucy, Robert L.	1982
	Sitters, Michael A.	1982
	Bates, James D.	1983
	Chen, Joseph J.	1983
	Robertson, O. Bailey	1984
	Rod, Edward F.	1985
	Foster, James H.	1986
	Peterson, Sharon S.	1986
	Bailey, R. Brent	1987
	Frishkey, Frank R. L.	1987
	Mermer, Robert W.	1987
	Kattchee, Phillip A.	1988
	Marks, Gregory P.	1988
	Remedios, Benito L.	1988
	McRoberts, Marcus L.	1989
	Vizuete, Jack R.	1989
	Anton, Michael J.	1991
	Manon, Victor M.	1992
	Thomas-Taylor, Mary	1992
	Perez, Helena M.	1995
	Briggs, Michaelanne	2004
	Demian, Nagi	2005
	Seidel, Shelley	2005
	Koo, Steven	2007
	Yamaji, Kyoko	2007
	Beck, Jason	2010
	Kostohryz, David W.	2011
	Vuu, Thai Minh	2011
	Garrett, James Bryan	2012
	Nguyen, Charles	2013
	Beetar, Patrick D	2014

Dental School	Name	Graduation Year
Venezuela		
	DaPonte-Manon, Ermalinda	1990
	Cooper-Newland, Deborah L.	1991
West Virginia		
	Murphy, Robert S.	2001
Washington Univ St Louis		
	Waggoner, S. Duane	1954
	Nelson, David F.	1972
	Stanton, Robert F.	1990
Washington		
	Bui, Peter	2008

UTHSC-Houston OMS Alumni By Practice Location

Location	Name	Graduation Year	Dental School	Zipcode
Alberta	Dhesi, Sandeep	2010	Saskatchewan	T3Z3K1
	Forrest, George	2013	BC	T8N7H8
	Trache, Antionella	2008	Alberta	T6M2E9
	Vankka, Terence K.	2000	BC	T6M2K3
Arizona	Engel, Eric Roy	2003	UCLA	85226
	Gradke, Gary M.	1977	Baylor	85254
	Keyhani, J Tina	1997	Ohio State	85014
	Sims, Darrell B.	1986	UTSA	85006
Arkansas	Clark, James T.	1965	Tennessee	deceased
	Vogel, Robert G.	1970	Case W Res	72212
California	Anderson, Paul B.	2002	UCLA	92603
	Bui, Peter	2008	Washington	95051
	Chu, Tony W.	2000	McGill	95404
	Daniel, Chris	2008	UTSA	95405
	Gadler, Nicholas N.	1996	USC	92020
	Mogannam, Jiries	2011	UCLA	95405
	Nelson, David F.	1972	Wash U StL	95762
	Seaton, Thomas A.	1957	Ohio State	deceased
	Stewart, Jim D.	2001	Baylor	92020
	Suzuki, Akinori	1962	Baylor	92831
	Tso, Albert C.	1992	UCSF	94539
	Tyko, Leonard M.	2000	UCLA	95405
	White, Norman S.	1960	Nrthwestern	92009
	Yen, Kirk K.	1983	UCLA	95125
Colorado	Carver, Douglas D.	1986	Baylor	80202
	Hong, Doug	2006	Penn	80234
	Moody, Michael D.	2006	Baylor	80215
	Yamaji, Kyoko	2007	UTSD	80234
Costa Rica	Reiche, Oscar J.	1995	Costa Rica	

Location	Name	Graduation Year	Dental School	Zipcode
Florida	Brady, Jerry A.	1960	St Louis	32082
	Degnan, Edward J.	1956	Georgetown	deceased
	Gross, Bob D.	1974	UMKC	32459
	McDonald, David G.	1990	Florida	33609
	Middleton, Scott A.	2002	Scarolina	34239
	Morales, Ofilio J.	1992	Guatemala	32819
	Parnes, Edmund I.	1965	Pittsburgh	33176
	Tucker, W. Mark	1972	Tennessee	33617
Georgia	Hamilton, Reuel E.	1963	Louisville	30152
	Marks, Gregory P.	1988	UTSD	30305
	Myers, Lamar J.	1965	Emory	31709
	Pathak, Sandeep V.	2005	Tufts	30046
	Ranieri, Therese	1991	Loyola Chi	deceased
Illinois	Dyer, Michael H.	1963	Illinois	62223
	Holland, Joseph A.	1960	St Louis	deceased
	Kwapis, Bruno W.	1950	Marquette	62223
Indiana	Haslem, John R.	1964	Indiana	46220
	Pfafflin, Edward M.	1961	Indiana	deceased
Iowa	Wolfson, Sherwood H.	1970	Pittsburgh	52246
Italy	Fusetti, Stefano	1998	Italy	35128
Kentucky	Curtis, William J	2012	UNLV	40503
	Daugherty, Joe Wilson	1953	Kentucky	40503
	Smith, Henry G.	2002	Georgia	42431
	Walters, Nathan	2004	Louisville	40202
Louisiana	Harrison, Marshall D.	1984	LSU	70806
	Kent, John N.	1969	Nebraska	70119
	Kuebel, Joseph O.	1950	Loyola NO	deceased
Malaysia	Chu, Sai Boon	1994	UMKC	50450
Maryland	Palumbo, Vincent D.	1963	Georgetown	20748
	Santora, Edward, Jr.	1968	Georgetown	deceased

Location	Name	Graduation Year	Dental School	Zipcode
Massachusetts				
	Cooke, Vera	2010	Marquette	01950
	Girotti, William J.	1967	Maryland	01095
	Young, Simon	2013	Toronto	02115
Mexico				
	Tacher, Samuel	1995	Mexico	CP11000
Michigan				
	Krishnan, Vejayan	1993	Malaysia	48334
	Loudon, Michael R.	1985	Nebraska	49015
	Perez, Helena M.	1995	UTSD	48208
	Shapiro, Donald N.	1957	Michigan	deceased
Minnesota				
	Lawrenz, Dietrich R.	1998	Minnesota	55421
New York				
	Chase, Edward D.	1952	UTSD	
North Carolina				
	Almony, Jeffrey S.	2000	Maryland	28387
	Camp, Brian H.	1997	UNC	27615
	Logan, William	2003	Pitt	28801
Oklahoma				
	Gliddon, Michael J.	2004	UTSA	73505
	Miyake, Alan A.	1996	UTSA	73117
	Smith, Kevin S.	1993	Oklahoma	73104
Ontario				
	Becker, Jerome	1968	Toronto	M9A1C3
	Irvine, Adam Matthew	2012	Manitoba	K0A1K0
	Wilson, David	2013	Toronto	P7E6E7
Oregon				
	Allen, Peter M.	1974	New Jersey	deceased
	Geisler, Stacy S.	1996	Case W Res	97035
Pennsylvania				
	Mermer, Robert W.	1987	UTSD	19114
	Nohaile, George A.	1961	Pittsburgh	16601
South Carolina				
	Keesling, G. Robert	1960	Indiana	deceased
Switzerland				
	Malis, Didier	2005	Geneva	1203

Location	Name	Graduation Year	Dental School	Zipcode
Texas				
	Alford, Jeff A	2009	Baylor	78734
	Angevine, Terry T.	1978	UTSD	75028
	Anton, Michael J.	1991	UTSD	77598
	Bachoura, Alex G.	2009	USC	77429
	Bailey, R. Brent	1987	UTSD	77598
	Barfield, George H.	1967	UTSD	77502
	Bates, James D.	1983	UTSD	75205
	Beck, Jason	2010	UTSD	76712
	Beetar, Patrick D	2014	UTSD	77581
	Beiter, Gerald R.	1954	St Louis	78746
	Black, Jerry D.	1975	Creighton	77459
	Blundell, Garrett D.	2013	UTSA	77845
	Briggs, Michaelanne	2004	UTSD	78626
	Brotherton, Dana M.	2000	UTSA	77479
	Bucy, Robert L.	1982	UTSD	79936
	Bunel, Kirby L.	1993	Baylor	75503
	Busaidy, Kamal F.	2002	Un Kingdom	77054
	Byrne, Roger P.	1973	UTSD	77063
	Cantrell, Rex J.	1969	Baylor	deceased
	Cavaretta, Vincent John	2009	UCLA	78746
	Chalmers, Donald L.	1966	UTSD	78731
	Chen, Joseph J.	1983	UTSD	77065
	Chiles, Donald G.	1971	Baylor	76508
	Cline, Donald A.	1969	Baylor	deceased
	Cohen, Donald F.	1979	Baylor	77030
	Cooke, Howard F.	1997	Stalingrad	75237
	Cooper-Newland, Deborah	1991	Venezuela	77401
	Cruz, Carlos	1995	Guatemala	78539
	Curl, Carroll	1956	UTSD	deceased
	DaPonte-Manon, Ermalinda	1990	Venezuela	77346
	Debes, Robert R.	1959	Baylor	77098
	Demian, Nagi	2005	UTSD	77026
	Dwyer, Stephen C.	1981	UTSD	77304
	Eklund, Michael K.	1975	UTSD	77046
	Fesler, Michael E.	1971	Illinois	77090
	Foster, James H.	1986	UTSD	78025
	Frey, Karl F.	1981	Indiana	78550
	Frick, William G.	1974	Baylor	76502
	Frishkey, Frank R. L.	1987	UTSD	77089

Location	Name	Graduation Year	Dental School	Zipcode
Texas (cont)	Furman, Terence H.	1972	Marquette	77905
	Galbreath, Jess C.	1961	UTSD	deceased
	Galloway, Charles R.	1964	UTSD	75169
	Garrett, J. Curtis	1979	UTSD	77845
	Garrett, James Bryan	2012	UTSD	77845
	Gordon, Jay T.	1980	UTSD	75603
	Hallick, Nicholas T.	1963	Baylor	78412
	Haverkorn, David E.	1978	UTSD	76692
	Hebert, James M.	1970	UTSD	77005
	Holland, Peter L.	1987	Baylor	76201
	Hubbard, Alan L.	1976	UTSD	77380
	Hull, Don	1952	Emory	deceased
	Hurst, Rickey L.	1980	UTSD	75965
	Johnson, James V.	1967	UTSD	78633
	Jordan, William V.	1997	UTSA	77479
	Kattchee, Phillip A.	1988	UTSD	77098
	Katz, Bernard	1965	UTSD	77401
	Kennedy, James W.	1971	UTSD	78738
	Kim, Sean	2007	Michigan	77073
	Koo, Steven	2007	UTSD	77063
	Kostohryz, David W.	2011	UTSD	76109
	Lalani, Zahid S.	2004	Mangalore	77379
	Macholl, James R.	2001	Marquette	76244
	Mack, James A.	1989	Baylor	75605
	Mahmood, Laith	2013	UCLA	77044
	Maldonado, Oscar D.	1959	Peru	77030
	Manon, Victor M.	1992	UTSD	77339
	McDonald, Gary W.	1980	UTSD	77339
	McRoberts, Marcus L.	1989	UTSD	78550
	Meador, Robert C.	1973	UTSD	deceased
	Michael, Andrew V.	2014	UOP	75063
	Morlen, Rickey A.	2001	SIU	77030
	Moya, Deiter J.	1998	Mexico	77063
	Munford, Arthur G.	1979	UTSD	77904
	Nguyen, Charles	2013	UTSD	77090
	Patterson, W. Richard	1978	Meharry	75077
	Patton, Robert M.	1983	Louisville	78731
	Peterson, Sharon S.	1986	UTSD	77082
	Phillips, David M.	1981	UTSD	75090
	Pleasants, John E.	1955	Emory	deceased

Location	Name	Graduation Year	Dental School	Zipcode
Texas (cont)	Poinsett, William S.	1977	UTSD	77566
	Porras, Susana	2014	Penn	77006
	Prater, Walter L.	1968	UTSD	deceased
	Quirk, George P.	1959	Pittsburgh	77063
	Randolph, Gregory D.	1984	UTSA	78216
	Reed, David E.	1977	UTSD	78574
	Reid, Loy C.	1961	UTSD	deceased
	Reid, Raymond R.	1964	Oregon	deceased
	Remedios, Benito L.	1988	UTSD	77030
	Renner, Dale E.	1979	UTSD	77069
	Repa, Charles M	1985	UTSA	77382
	Rod, Edward F.	1985	UTSD	77702
	Rogers, Thomas R.	1988	Baylor	76504
	Sachs, Scott A.	1989	Nrthwestern	78028
	Seabold, Chad R.	2006	Michigan	77027
	Seaman, Justin	2014	NYU	77008
	Seidel, Shelley	2005	UTSD	77024
	Shrewsbury, Cecil Rosco	2010	LSU	77381
	Sills, Ashley H.	1958	Baylor	deceased
	Sitters, Michael A.	1982	UTSD	77379
	Smith, Bruce S.	1990	Baylor	77429
	Smith, John D. Jr.	1985	Baylor	77030
	Smith, Ronald G.	1966	UTSD	79407
	Spence, Dennis R.	1980	UTSD	75703
	Spradley, Larry W.	1976	UTSD	76092
	Stanton, Robert F.	1990	Wash U StL	77325
	Stewart, Larry R.	1982	Baylor	75075
	Stobaugh, R. Kent	1973	UTSD	77007
	Sutton, Craig S.	1978	Baylor	75116
	Taylor, Harry E.	1965	Tennessee	76120
	Taylor, Terry D.	1982	Illinois	77030
	Thomas-Taylor, Mary	1992	UTSD	77030
	Torres, Israel	1966	UTSD	deceased
	Unterman, Brian M..	1999	UCLA	77381
	Valle, Arnold	1970	UTSD	78520
	Vizuete, Jack R.	1989	UTSD	78229
	Vuu, Thai Minh	2011	UTSD	77063
	Waggoner, S. Duane	1954	Wash U StL	deceased
	Warren, Joe B.	1958	Baylor	deceased
	White, R. Dean	1974	UTSD	76048

Location	Name	Graduation Year	Dental School	Zipcode
Texas (cont)	Wiggins, Raymond L.	2003	Baylor	77450
	Yang, Eddy P.	2004	Michigan	77478
Thailand				
	Suddhasthira, Theeralaksna	1984	Thailand	10400
Utah				
	Bateman, Adam	2006	Nrthwestern	84043
	Partridge, Judd E.	2006	Louisville	84121
	White, Wendell R.	1962	UMKC	deceased
Texas				
	Bell, William H.	1957	St Louis	05672
Virginia				
	Ali, Ziad A	2007	Penn	22101
	Long, William H.	1976	UTSD	22958
	Pandolfi, Philip J.	1999	Louisville	22801
Washington				
	Cottam, Jared	2008	UCLA	98166
	Tew, Darrell K.	1991	Nebraska	98908
West Virginia				
	Murphy, Robert S.	2001	W Virginia	25702
Wyoming				
	Hageman, Robert A.	1976	Georgetown	82601

UTHSC-Houston OMS Alumni

By Home Region and Practice State

Region	Name	Graduation Year	Dental School	Practice State
Central USA				
	Bateman, Adam	2006	Nrthwestern	Utah
	Beiter, Gerald R.	1954	St Louis	Texas
	Bell, William H.	1957	St Louis	Texas
	Black, Jerry D.	1975	Creighton	Texas
	Brady, Jerry A.	1960	St Louis	Florida
	Chu, Sai Boon	1994	UMKC	Malaysia
	Cooke, Vera	2010	Marquette	Massachusetts
	Dyer, Michael H.	1963	Illinois	Illinois
	Fesler, Michael E.	1971	Illinois	Texas
	Frey, Karl F.	1981	Indiana	Texas
	Furman, Terence H.	1972	Marquette	Texas
	Gross, Bob D.	1974	UMKC	Florida
	Haslem, John R.	1964	Indiana	Indiana
	Holland, Joseph A.	1960	St Louis	Illinois
	Keesling, G. Robert	1960	Indiana	South Carolina
	Kent, John N.	1969	Nebraska	Louisiana
	Kwapis, Bruno W.	1950	Marquette	Illinois
	Lawrenz, Dietrich R.	1998	Minnesota	Minnesota
	Loudon, Michael R.	1985	Nebraska	Michigan
	Macholl, James R.	2001	Marquette	Texas
	Morlen, Rickey A.	2001	SIU	Texas
	Nelson, David F.	1972	Wash U StL	California
	Pfafflin, Edward M.	1961	Indiana	Indiana
	Ranieri, Therese	1991	Loyola Chi	Georgia
	Sachs, Scott A.	1989	Nrthwestern	Texas
	Smith, Kevin S.	1993	Oklahoma	Oklahoma
	Stanton, Robert F.	1990	Wash U StL	Texas
	Taylor, Terry D.	1982	Illinois	Texas
	Tew, Darrell K.	1991	Nebraska	Washington
	Waggoner, S. Duane	1954	Wash U StL	Texas
	White, Norman S.	1960	Nrthwestern	California
	White, Wendell R.	1962	UMKC	Utah

Region	Name	Graduation Year	Dental School	Practice State
Eastern USA				
	Ali, Ziad A	2007	Penn	Virginia
	Allen, Peter M.	1974	New Jersey	Oregon
	Almony, Jeffrey S.	2000	Maryland	North Carolina
	Degnan, Edward J.	1956	Georgetown	Florida
	Girotti, William J.	1967	Maryland	Massachusetts
	Hageman, Robert A.	1976	Georgetown	Wyoming
	Hong, Doug	2006	Penn	Colorado
	Logan, William	2003	Pitt	North Carolina
	Murphy, Robert S.	2001	W Virginia	West Virginia
	Nohaile, George A.	1961	Pittsburgh	Pennsylvania
	Palumbo, Vincent D.	1963	Georgetown	Maryland
	Parnes, Edmund I.	1965	Pittsburgh	Florida
	Pathak, Sandeep V.	2005	Tufts	Georgia
	Porras, Susana	2014	Penn	Texas
	Quirk, George P.	1959	Pittsburgh	Texas
	Santora, Edward, Jr.	1968	Georgetown	Maryland
	Seaman, Justin	2014	NYU	Texas
	Wolfson, Sherwood H.	1970	Pittsburgh	Iowa
Foreign and Canada				
	Becker, Jerome	1968	Toronto	Ontario, Canada
	Busaidy, Kamal F.	2002	Un Kingdom	Texas
	Chu, Tony W.	2000	McGill	California
	Cooke, Howard F.	1997	Stalingrad	Texas
	Cooper-Newland, Deborah L.	1991	Venezuela	Texas
	Cruz, Carlos	1995	Guatemala	Texas
	DaPonte-Manon, Ermalinda	1990	Venezuela	Texas
	Dhesi, Sandeep	2010	Saskatchewan	Alberta
	Forrest, George	2013	BC	Alberta
	Fusetti, Stefano	1998	Italy	Italy
	Irvine, Adam Matthew	2012	Manitoba	Ontario, Canada
	Krishnan, Vejayan	1993	Malaysia	Michigan
	Lalani, Zahid S.	2004	Mangalore	Texas
	Maldonado, Oscar D.	1959	Peru	Texas
	Malis, Didier	2005	Geneva	Switzerland
	Morales, Ofilio J.	1992	Guatemala	Florida
	Moya, Deiter J.	1998	Mexico	Texas
	Reiche, Oscar J.	1995	Costa Rica	Costa Rica
	Suddhasthira, Theeralaksna	1984	Thailand	Thailand

Region	Name	Graduation Year	Dental School	Practice State
Foreign and Canada (cont)				
	Tacher, Samuel	1995	Mexico	Mexico
	Trache, Antionella	2008	Alberta	Alberta
	Vankka, Terence K.	2000	BC	Alberta
	Wilson, David	2013	Toronto	Ontario, Canada
	Young, Simon	2013	Toronto	Massachusetts
Midwestern USA				
	Daugherty, Joe Wilson	1953	Kentucky	Kentucky
	Geisler, Stacy S.	1996	Case W Res	Oregon
	Hamilton, Reuel E.	1963	Louisville	Georgia
	Keyhani, J Tina	1997	Ohio State	Arizona
	Kim, Sean	2007	Michigan	Texas
	Pandolfi, Philip J.	1999	Louisville	Virginia
	Partridge, Judd E.	2006	Louisville	Utah
	Patton, Robert M.	1983	Louisville	Texas
	Seabold, Chad R.	2006	Michigan	Texas
	Seaton, Thomas A.	1957	Ohio State	California
	Shapiro, Donald N.	1957	Michigan	Michigan
	Vogel, Robert G.	1970	Case W Res	Arkansas
	Walters, Nathan	2004	Louisville	Kentucky
	Yang, Eddy P.	2004	Michigan	Texas
Southeastern USA				
	Camp, Brian H.	1997	UNC	North Carolina
	Clark, James T.	1965	Tennessee	Arkansas
	Harrison, Marshall D.	1984	LSU	Louisiana
	Hull, Don	1952	Emory	Texas
	Kuebel, Joseph O.	1950	Loyola NO	Louisiana
	McDonald, David G.	1990	Florida	Florida
	Middleton, Scott A.	2002	Scarolina	Florida
	Myers, Lamar J.	1965	Emory	Georgia
	Patterson, W. Richard	1978	Meharry	Texas
	Pleasants, John E.	1955	Emory	Texas
	Shrewsbury, Cecil Rosco	2010	LSU	Texas
	Smith, Henry G.	2002	Georgia	Kentucky
	Taylor, Harry E.	1965	Tennessee	Texas
	Tucker, W. Mark	1972	Tennessee	Florida
Texas				
	Alford, Jeff A	2009	Baylor	Texas
	Angevine, Terry T.	1978	UTSD	Texas
	Anton, Michael J.	1991	UTSD	Texas

Region	Name	Graduation Year	Dental School	Practice State
Texas (cont)	Bailey, R. Brent	1987	UTSD	Texas
	Barfield, George H.	1967	UTSD	Texas
	Bates, James D.	1983	UTSD	Texas
	Beck, Jason	2010	UTSD	Texas
	Beetar, Patrick D	2014	UTSD	Texas
	Blundell, Garrett D.	2013	UTSA	Texas
	Briggs, Michaelanne	2004	UTSD	Texas
	Brotherton, Dana M.	2000	UTSA	Texas
	Bucy, Robert L.	1982	UTSD	Texas
	Bunel, Kirby L.	1993	Baylor	Texas
	Byrne, Roger P.	1973	UTSD	Texas
	Cantrell, Rex J.	1969	Baylor	Texas
	Carver, Douglas D.	1986	Baylor	Colorado
	Chalmers, Donald L.	1966	UTSD	Texas
	Chase, Edward D.	1952	UTSD	New York
	Chen, Joseph J.	1983	UTSD	Texas
	Chiles, Donald G.	1971	Baylor	Texas
	Cline, Donald A.	1969	Baylor	Texas
	Cohen, Donald F.	1979	Baylor	Texas
	Curl, Carroll	1956	UTSD	Texas
	Daniel, Chris	2008	UTSA	California
	Debes, Robert R.	1959	Baylor	Texas
	Demian, Nagi	2005	UTSD	Texas
	Dwyer, Stephen C.	1981	UTSD	Texas
	Eklund, Michael K.	1975	UTSD	Texas
	Foster, James H.	1986	UTSD	Texas
	Frick, William G.	1974	Baylor	Texas
	Frishkey, Frank R. L.	1987	UTSD	Texas
	Galbreath, Jess C.	1961	UTSD	Texas
	Galloway, Charles R.	1964	UTSD	Texas
	Garrett, J. Curtis	1979	UTSD	Texas
	Garrett, James Bryan	2012	UTSD	Texas
	Gliddon, Michael J.	2004	UTSA	Oklahoma
	Gordon, Jay T.	1980	UTSD	Texas
	Gradke, Gary M.	1977	Baylor	Arizona
	Hallick, Nicholas T.	1963	Baylor	Texas
	Haverkorn, David E.	1978	UTSD	Texas
	Hebert, James M.	1970	UTSD	Texas
	Holland, Peter L.	1987	Baylor	Texas

Region	Name	Graduation Year	Dental School	Practice State
Texas (cont)	Hubbard, Alan L.	1976	UTSD	Texas
	Hurst, Rickey L.	1980	UTSD	Texas
	Johnson, James V.	1967	UTSD	Texas
	Jordan, William V.	1997	UTSA	Texas
	Kattchee, Phillip A.	1988	UTSD	Texas
	Katz, Bernard	1965	UTSD	Texas
	Kennedy, James W.	1971	UTSD	Texas
	Koo, Steven	2007	UTSD	Texas
	Kostohryz, David W.	2011	UTSD	Texas
	Long, William H.	1976	UTSD	Virginia
	Mack, James A.	1989	Baylor	Texas
	Manon, Victor M.	1992	UTSD	Texas
	Marks, Gregory P.	1988	UTSD	Georgia
	McDonald, Gary W.	1980	UTSD	Texas
	McRoberts, Marcus L.	1989	UTSD	Texas
	Meador, Robert C.	1973	UTSD	Texas
	Mermer, Robert W.	1987	UTSD	Pennsylvania
	Miyake, Alan A.	1996	UTSA	Oklahoma
	Moody, Michael D.	2006	Baylor	Colorado
	Munford, Arthur G.	1979	UTSD	Texas
	Nguyen, Charles	2013	UTSD	Texas
	Perez, Helena M.	1995	UTSD	Michigan
	Peterson, Sharon S.	1986	UTSD	Texas
	Phillips, David M.	1981	UTSD	Texas
	Poinsett, William S.	1977	UTSD	Texas
	Prater, Walter L.	1968	UTSD	Texas
	Randolph, Gregory D.	1984	UTSA	Texas
	Reed, David E.	1977	UTSD	Texas
	Reid, Loy C.	1961	UTSD	Texas
	Remedios, Benito L.	1988	UTSD	Texas
	Renner, Dale E.	1979	UTSD	Texas
	Repa, Charles M	1985	UTSA	Texas
	Robertson, O. Bailey	1984	UTSD	Texas
	Rod, Edward F.	1985	UTSD	Texas
	Rogers, Thomas R.	1988	Baylor	Texas
	Seidel, Shelley	2005	UTSD	Texas
	Sills, Ashley H.	1958	Baylor	Texas
	Sims, Darrell B.	1986	UTSA	Arizona
	Sitters, Michael A.	1982	UTSD	Texas

Region	Name	Graduation Year	Dental School	Practice State
Texas (cont)	Smith, Bruce S.	1990	Baylor	Texas
	Smith, John D. Jr.	1985	Baylor	Texas
	Smith, Ronald G.	1966	UTSD	Texas
	Spence, Dennis R.	1980	UTSD	Texas
	Spradley, Larry W.	1976	UTSD	Texas
	Stewart, Jim D.	2001	Baylor	California
	Stewart, Larry R.	1982	Baylor	Texas
	Stobaugh, R. Kent	1973	UTSD	Texas
	Sutton, Craig S.	1978	Baylor	Texas
	Suzuki, Akinori	1962	Baylor	California
	Thomas-Taylor, Mary	1992	UTSD	Texas
	Torres, Israel	1966	UTSD	Texas
	Valle, Arnold	1970	UTSD	Texas
	Vizuite, Jack R.	1989	UTSD	Texas
	Vuu, Thai Minh	2011	UTSD	Texas
	Warren, Joe B.	1958	Baylor	Texas
	White, R. Dean	1974	UTSD	Texas
	Wiggins, Raymond L.	2003	Baylor	Texas
	Yamaji, Kyoko	2007	UTSD	Colorado

Deceased UTHSC-Houston OMS Alumni

NAME	CLASS
Joseph O. Kuebel	1950
John D. Hull	1952
S. Duane Waggoner	1954
John E. Pleasants	1955
Carroll Curl	1956
Edward J. Degnan	1956
Donald N. Shapiro	1957
Thomas A. Seaton	1957
Joe B. Warren	1958
Ashley H. Sills	1958
Joseph A. Holland	1960
G. Robert Keesling	1960
Jess C. Galbreath	1961
Edward M. Pfafflin	1961
Loy C. Reid	1961
Wendell R. White	1962
Raymond R. Reid	1964
James T. Clark	1965
Israel Torres	1966
Walter L. Prater	1968
Edward Santora, Jr.	1968
Rex J. Cantrell	1969
Donald A. Cline	1969
Robert C. Meador	1973
Peter M. Allen	1974
Therese Ranieri	1991

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Page 4	Drs. Valenza, Katz, Mrs. Katz, Dr. Wong <i>photo by Brian K. Schnupp, UTSD Media Production Services</i>
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Page 56	Ben Taub General Hospital <i>courtesy M. Wong</i>
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Page 72	Joyce Hooks at Smith Tower Reception Desk Drs. Hanna, Jundt and Menegotto <i>both photos by Mei Atienza courtesy K. Busaidy</i>
Page 73	Dr. Demian Dr Shum Dr. Wilson <i>all photos by Mei Atienza courtesy K. Busaidy</i>
Page 74	Drs. Jundt, Busaidy Dr. Kamal Busaidy <i>both photos by Mei Atienza courtesy K. Busaidy</i>

Page 75	Drs. Menegotto, Miller, Freeman Dr. Freeman <i>both photos by Mei Atienza courtesy K. Busaidy</i>
Page 76	Dr. Zech Dena Taylor and Rosie Sanchez with Cone Beam CT <i>both photos by Mei Atienza courtesy K. Busaidy</i>
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- Page 93 Jose Lomba 1981-82
courtesy Jose Lomba
- Page 94 John F. Helfrick 1984-88
Terry D. Taylor 1988-93
James V. Johnson 1993-94
Michael G. Donovan, 1994-96
All UT Houston OMS collection
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photo by Brian K. Schnupp, UTSD Media Production Services
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Kamal Busaidy
Nagi Demian
Phillip Freeman
Harry Gilbert
Issa Hanna
all by Brian K. Schnupp, UTSD Media Production Services
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Brian K. Schnupp, UTSD Media Production Services*
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*collage by D. P. Butler from images by
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Page 146	Drs. Kennedy, Nawab, Wilson and Wong Drs. Wilson, Freeman, Young and Busaidy <i>both courtesy M. Wong</i>
Page 147	Dr. Busaidy and group in Simulation Suite <i>courtesy M. Wong</i>
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