DENTISTRY REFLECTS

Working toward a better future for the profession ➤ PAGE 8
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MESSAGE FROM THE DEAN

DENTISTRY: NOW AND THEN

This issue of *U of T Dentistry* magazine focuses on dentistry’s past, present and future. As a result of hearing feedback from our alumni on their experience at the Faculty, we are committed to a more respectful, inclusive and welcoming environment for our students. We have heard from our community that dental school can be a gruelling experience, and while we know this is not unique to the Faculty of Dentistry, we want to take responsibility for the past and commit to doing better. As a faculty, we continue to strive to make a better learning environment for our students with wellness initiatives, peer support programs and a strong commitment to equity and diversity. While we are in a much better position than we were decades ago, we know there is still more work to be done.

We also recognize the importance of our students acquiring a set of competencies that go beyond the specifics of treating patients’ disease. Communication, collaboration, professionalism, health promotion and practice management are important attributes for our students to gain. Skills of chairside manner, contributing to a positive work environment, and developing the interpersonal side of the profession will help prepare them for the future.

The Faculty recently opened its new satellite clinic at 777 Bay St. This modern facility features 41 enclosed operatories that will enable a significantly increased capacity for our DDS students’ clinical training. We are looking forward to this brand new clinic enhancing the patient experience and enriching clinical education. The clinic will also serve as a swing space while we make upgrades to Clinic 2 and the simulation lab in the coming years.

While the last year has been difficult, our community continues to rise to the occasion and take these challenges in great stride. As we look to brighter days ahead, we remain committed to serving our community, delivering excellence in education and achieving groundbreaking research discoveries.

DEAN DANIEL HAAS 7T9, 8T8 PhD
The Faculty of Dentistry recently opened its new satellite clinic at 777 Bay St.

The 15,000-square-foot clinic features 41 enclosed operatories and will enhance the patient experience and enrich clinical education for DDS students.

“At 777 Bay, we expect to do mainly aerosol-generating procedures, such as more complex endodontics and restorative work,” says James Posluns 9T1, 9T8 Dip Ortho, director of clinical affairs for the Faculty.

Dentistry patients will likely find themselves visiting both this new location and Edward St. for treatment over the next few years.

Danielle Churchill, manager of building operations, says students, faculty and patients will appreciate spending time at the new clinic. “There’s plenty of glass and everything looks very modern. It will be a place that provides wonderful patient comfort while providing the students with a facility that is in keeping with what they’ll experience in practice.”

Posluns agrees. “It’s a brand new clinic. It’ll be efficient and attractive. We are all excited to be in there.”

The new location will help the Faculty continue to follow current safety protocols. It will also operate as a swing space when Clinic 2 and the simulation lab at Edward St. undergo renovations in future years.

Churchill says she sees the space as serving as something of a testing ground, to see which design aspects work best for students, faculty and patients.

“It’s like a miniature big clinic, a testing bed.”

**SATELLITE CLINIC OPENS**

An enclosed operatory at the new clinic

**15,000 SQUARE FEET OF CLINIC SPACE**
FIRST-IN-CANADA RADIOGRAPH

Dentists always perform surgery after a proper assessment with a dental radiograph. However, in hospital settings where patients need treatment right in their beds — especially in the intensive care unit — that’s not always possible.

“We’d have to go in to urgent clinical situations and do exams, diagnosis and treatment without having dental radiographs,” says Faculty of Dentistry professor Michael Glogauer 9T3, 9T9 Dip Perio, 9T9 PhD, who is dentist-in-chief at University Health Network (UHN). “The standard of care in dentistry is to have a radiograph. We were treating patients with one hand tied behind our backs.”

Thanks to Glogauer’s efforts over a two-year period, patients needing dental care at UHN can finally get dental radiographs performed bedside. The network is the first in Canada to purchase and use this device.

He worked with the manufacturer to encourage it to seek Health Canada approval, which it received in November 2019. Then Glogauer and others worked with the Ontario government to get the green light at the provincial level. The head of cardiology at UHN agreed to purchase the device, as dental health is a priority for heart patients.

While UHN is the first to use this device, it will likely see uptake at other Canadian hospitals. “It was amazing to finally have access to this technology. It made our task safer and much more efficient,” says Glogauer.

GRAD STUDENTS’ NETWORK

The Faculty of Dentistry’s Graduate Professional Development Community (GPDC) was recently established to create connections between basic science and specialty-trained graduate students. Led by PhD candidates Shahrzad Nouri, Mehrnoosh Neshatian and Fereshteh Younesi, the GPDC allows graduate students to exchange knowledge and skills to help bridge the gap between academic training and career preparation.

“We wanted a place where graduate students could share knowledge and collaborate with people from dentistry and non-dentistry backgrounds,” says Nouri.

The GPDC has already held several workshops and on-demand focus groups and is planning a networking night and a peer-to-peer mentorship program.

BOARD LEADERSHIP

Join the U of T Dentistry Alumni Association board. Apply at: dentistry.utoronto.ca/alumni-association
A recently published Faculty of Dentistry study takes a close look at the healing process that happens around implants at the cellular level, tracking optimal wound healing microscopically for the first time.

First author Niloufar Khosravi PhD conducted this study with Faculty of Dentistry and Institute of Biomedical Engineering professor John Davies and Temerty Faculty of Medicine assistant professor Ralph DaCosta as part of her PhD in Dentistry.

The research team used a multiphoton microscope to observe tissue regeneration around metallic implants with both smooth and rough surfaces.

The rough implants experienced what Davies dubbed a “proliferative bloom” of progenitor cells. “What was surprising was not only the number of these cells changing with the surface properties of the implant — the rougher implant had a far greater number of these essential cells. But they also arrived at the wound site earlier,” says Davies.

Smooth implants also caused the creation of these cells, but they came later and in lower volumes, without the dramatic bloom of their rough counterparts.

Rough implants and their proliferative bloom also had the important ability to switch off at the right time and pivot to a more mature, calmer state to allow for full wound healing without any overgrowth of blood vessels or continued inflammation.

Since this study revealed many key, wound-healing cellular processes, it offers numerous possibilities for future research.

“A rougher implant had a far greater number of these essential cells.”

A new study called Oral Health and Oral Health Care of Canadians has received $3.3 million from the Canadian Institutes of Health Research. McGill University professor Paul Allison leads the study involving researchers from all 10 Canadian dental schools, including Faculty of Dentistry professor Carlos Quiñonez PhD and assistant professor Sonica Singhal PhD.

The researchers will work with Statistics Canada’s Canadian Health Measures Survey to gather data on oral health. The study should provide valuable data on the link between oral and general health.

**The Politics of Dental Care in Canada**

Professor Carlos Quiñonez has come out with a new book, *The Politics of Dental Care in Canada* was published by Canadian Scholars in August. The book outlines Canada’s dental care system, its history and how it impacts oral health access to care and dentistry’s professional status.
Researchers from the University of Toronto have been awarded a grant from the New Frontiers Research Fund to explore the impact of sociocultural and psychological factors on postsurgical pain.

The study will focus on transgender men and cisgender women who undergo mastectomies. Research has shown that almost 40 per cent of cisgender women develop post-mastectomy persistent pain, while transgender men who undergo gender affirming surgery, which also includes a mastectomy, report little to no pain.

“Cisgender women who undergo a mastectomy may experience more pain because of a negatively perceived body image, on top of surgical recovery and a potential cancer diagnosis,” says Craig Dale, assistant professor at the Lawrence S. Bloomberg Faculty of Nursing, a co-applicant on the study.

The research team will use MRIs and pain assessments to compare the brain, pain sensitivity, gender identity and body image of patients before and after surgery.

Massieh Moayedi, assistant professor at the Faculty of Dentistry, is one of the principal investigators of the study.

“There is emerging evidence that body perception disturbances — or mismatches between the body itself and how we perceive our bodies — contribute to some complex pain disorders,” says Moayedi. “This study can help us find new treatment strategies and targets to treat pain disorders.”

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DENTISTRY

COVER STORY

DENTISTRY
Dental school can be overly tough on dentists-in-training. Some dental practices, meanwhile, may turn toxic, while dentists, who seldom have leadership training, can struggle with stress. As dentistry reflects on its imperfect past, the profession is moving forward to a more compassionate and collaborative future.

ILLUSTRATION BY HANNA BARCZYK
Although she was a member of the most women-heavy cohort at the Faculty of Dentistry in history up to that point, with a record 19 women out of 128 in the class of 1980, Elizabeth MacSween 8T0 sometimes found her gender a barrier during her education. “I remember having my hand up once and watching our demonstrator walk down the aisles, helping the male students,” she says. “Finally, he came over. I said, ‘Sir, I’ve been waiting a lot longer.’ He said, ‘Well, I don’t want to waste my time, and you’re wasting my time being in this Faculty.’”

That upsetting incident stood in stark contrast to the support she and her female classmates frequently got from the young men in her cohort. But, in addition to that moment, something potentially more damaging to her career happened behind the scenes. A four-person interview panel nearly rejected her application for the DDS program. “Three thought I was a suitable candidate, but the student on the panel wouldn’t pass me. He didn’t feel women belonged in dental school,” she says.

The third-year student was removed from the panel, and MacSween underwent a second interview — she only learned what had happened after starting the program, when a faculty panelist sought her out to apologize. MacSween isn’t alone in her not-so-pleasant memories of certain moments in dental school. While many graduates enjoyed their time as they learned important skills, that’s not been the universal experience. Incidents of mistreatment are an unfortunate but very real part of the Faculty of Dentistry’s history.

Many dental faculties across the country harbour a similarly blemished history. And those, in turn, resemble what students recall about their treatment in other competitive healthcare programs such as medicine and nursing.

That was then, and this is now. U of T’s Faculty of Dentistry and many dental schools across the country increasingly prioritize a positive and inclusive student experience. “This is a faculty that recognizes the world’s a different place,” says MacSween, who practises near Ottawa. “They recognize the differences and are trying to anticipate the effects those differences have on the education of future dentists and the delivery of health care.” She is a vocal supporter of her alma mater and its renewed commitment to promoting equity and student well-being.

“As an alumnus myself, it pains me to hear that some alumni had a negative student experience at the Faculty,” says dean Daniel Haas. “To those who experienced bullying or discrimination here, I am truly sorry. I know an apology can’t undo the past, but please know that we are trying to do better.”
To those who experienced bullying or discrimination here, I am truly sorry

But dentistry and other healthcare programs still grapple with finding the right degree of intensity to teach professionals who will one day be responsible for patient health. They need to rout out hidden discrimination in the curriculum and try to make amends for a past that cannot be changed. A better, more accountable future lies ahead.

DISCRIMINATION ACROSS DISCIPLINES
Health care and other science-related education programs have long encouraged a competitive mindset that can trigger bad behaviour. A multi-nation study published in 2010 found that, in first year, nearly 35 per cent of dental school students reported being intimidated or badly treated by instructors, while 17 per cent had been bullied or poorly treated by fellow students.

In 2018, a National Academies of Sciences, Engineering and Medicine survey of multiple U.S. campuses showed the rate of sexual harassment for female students ranged from 20 to 50 per cent, depending on their major and if they were in undergraduate or graduate school. Female medical students were a shocking 220 per cent more likely to experience sexual harassment than students outside of science, engineering and medicine.

The report suggests that part of the reason the numbers are so high in science-related education is because the risk of sexual harassment increases in male-dominated environments, especially where there is perceived organizational tolerance for harassment.

In the past, there were few mechanisms in place to resolve student problems. For instance, MacSween filed a complaint about the dismissive demonstrator. She never heard if anything had been done about it — which upset but didn’t surprise her. “It was so much a part of our lives in the ’70s and ’80s, not just in school,” she says. “You saw it in so many parts of your life that it was just one more hurdle,” she says. “It wasn’t terribly unexpected. I think young students nowadays would not put up with that, nor should they.”

A POWER STRUGGLE
While the hierarchies implicit in dental schools foster learning — students in labs and clinics defer to instructors who guide them through the acquisition of dentistry’s skills, while graduate students rely on principal investigators for research direction and funding — these relationships can lead to misuses of power.

Greg Smith (not his real name) was completing a graduate degree at the Faculty a decade ago when he made a key research discovery. “It was difficult for the principal investigator to let go of this seminal article,” he says, although the two of them had agreed in advance that Smith would be the first author. “It was a challenge, but in the end, I was allowed to be the first author,” he recalls, admitting he had to firmly stand up for himself for this to happen.

While the power struggle was stressful, the research experience was still a positive one. “I was fortunate to be given an opportunity to be at the University of Toronto at a time when such research was going on. It opened doors,” he says.
Smith says his graduate experience was often gruelling, and the school culture at the time encouraged students to think of their teachers as vastly superior to themselves. This led to the sense that any deviation from perfection would be career ending. “You’re so scared of your teachers; you’re working with these people who are like gods, and you’re just a student.” It took some moments of real compassion from individual instructors to end that myth for Smith. “I learned not only about the practice, but also tolerance and keeping the bigger picture in mind.”

Indeed, in the past, dental schools didn’t always get the balance right between teaching rigour and excellence while preserving students’ self-confidence and mental health. “I hated dental school,” admits Ernest Lam, associate dean of graduate education and graduate program director of the Oral and Maxillofacial Radiology program at U of T. “But now, in retrospect, I understand the method to the madness because I’m on the other side.”

Lam completed his DMD at the University of British Columbia (UBC) in 1989, and it was only years later when he understood why the program was sometimes tough to bear for a young student. “It’s meant to be hard. After you finish, you could potentially hurt an individual. All of the things that are put in place in dental school to ensure both academic and clinical rigour are there to ensure that the student, when they leave, is a safe and thoughtful practitioner.”

**DENTISTRY’S PIVOT**

Over the last decade or so, healthcare education programs have tried to check their power imbalances and refresh their programs and protocols. But few have had the kind of watershed moment that dentistry in Canada went through starting in December 2014. That’s when screenshots leaked to the press revealed that a group of fourth-year dental students from Dalhousie University had posted sexist, misogynistic and homophobic remarks in a private Facebook group.

The students were suspended from the teaching clinic for two months and went through a restorative justice process. The school created a task force to investigate the incident, publishing a report in 2015 that examined how the culture within Dalhousie’s Faculty of Dentistry permitted such behaviours. The task force was emphatic, however, that Dalhousie “does not stand in isolation.” The report went on to state: “We must recognize that we all live a sexist, racist, and heterosexist culture to lay the groundwork for change. The status quo is unacceptable…. This incident is an opportunity to confront inequalities and make meaningful change.”

The task force made recommendations around systemic change that included the need for clear communication of policies and processes to support and protect complainants. Plus, it stated schools should foster a diverse and respectful A COMMITMENT TO BETTER

Dental school is a rigorous experience. For some, memories from their time learning dentistry are not happy ones. Over the years, alumni have recounted stories of a militant atmosphere, a competitive spirit and discrimination. This is not exclusive to U of T or even to the field of dentistry; other dental schools and areas of study, especially those in the sciences and health care, have grappled with similar concerns. The calls for change haven’t gone unnoticed. U of T’s Faculty of Dentistry has been taking steps to foster a more inclusive, supportive environment for students, faculty and staff. From then to now, the Faculty has come a long way — and it’s just the beginning.
One of the priority actions of the strategic plan was to appoint a lead to focus on student engagement, well-being and student life. Another early priority was the formation of a working group on professionalism. More recent working groups have been formed to develop wellness initiatives for students, staff and faculty.

Upon approval of the strategic plan in May 2014, dean Haas asked longtime clinical instructor and former program director of the Comprehensive Care program Richard Rayman to take on the new role of director of student life in addition to his role as assistant professor. Charged with listening to students and finding ways to make programs more attentive to learners’ needs, Rayman’s efforts have triggered numerous changes.

“Dr. Rayman organized small group meetings with every single student to encourage feedback and discussion in a supportive atmosphere,” recalls Caroline Conway, who practises in Ottawa. She felt the positive shift in the culture at the Faculty during her time there. A key component of that, she says, was feeling like student feedback was encouraged and taken into consideration.

As former Dental Students’ Society (DSS) president, Conway also saw an increase in student outreach committees through the DSS. The wellness initiatives were particularly well-received, she says. “I remember a dedicated group of students setting out healthy snacks once a week for everyone, which they went and purchased themselves with funding from the DSS. Little things made a big difference.”

Increasingly, the Faculty has embedded representatives from the DSS into its advisory groups, so students now meaningfully contribute to the alumni association board, academic committee and faculty council. As well, the DSS has become more active than ever, running peer support and mentorship programs, the Dental Pride Alliance and the Women in Dentistry group.
Lam has observed an increase in services available to students, both within the Faculty of Dentistry and across U of T. “There were no accessibility services or mental health support services when I was a student at UBC. There are many programs today that never existed 35 years ago, which I think is great.” The University has also published numerous policies related to research that protect students.

Meanwhile, many curriculum and program changes to better support learning have come from individual Faculty members. “I’ve tried to tailor my educational program because I know the students are inundated with information,” says Lam. For instance, program delivery for radiology and pathology has been combined in third year, which helps students. He’s received positive feedback around these kinds of changes, but he stresses the need for more students to provide feedback, such as through course evaluations, to help faculty members identify what’s working and what isn’t.

MacSween, who has been serving as a facilitator for an online ethics and professionalism course — which didn’t exist when she was a student — notes that such courses make a difference. “It’s been a huge shift,” she says. “It used to be expected that you would understand what being professional was, whereas now they teach it to help students navigate different ethical problems. The students take it seriously; they’re amazing in their responses.”

Many of Canada’s other dental schools have also worked hard to adjust their programs to better serve students, including streamlining programs and making sure that those working in hospitals no longer do back-to-back shifts, which is better for their physical and mental health and also reduces medical errors.

A NEW ATMOSPHERE
Changes small and large to dental school have led to more students finishing their degrees with positive memories of their educational experience. Conway, who now serves as a clinical instructor at the Faculty, is part of a newer generation of graduates who have benefited from — and contributed to — a more empathetic program. “It was fantastic. I look back on it very fondly. I feel lucky to have been involved in a lot of faculty goings-on and really miss everyone I met through those channels.”

DSS president Fady Barsoum, who is in his final year of the DDS, has enjoyed dental school so far. “The school has been very involved with creating a diverse community and offering support, and extracurricular activities have given me a rich experience,” he says.

Barsoum’s objective for this academic year is to focus on fostering relationships and building community. “I want to preserve the traditions that made the dental school experience a great one and continue improving the culture in the school. The goal is to show the new generation of students how the dental experience should be.”

There is a lot of work still to be done in dental education to achieve necessary change and improvements. “It’s not perfect, and we still have a long way to go, but we’re committed to continuing to take steps to enhance the student experience, prioritize professionalism and foster a diverse and inclusive environment through strengthened services and supports. This will always be a work in progress,” says Haas.

Such efforts will take time and more voices at the table to highlight where more change is needed. But for now, the Faculty and other dental schools hope to keep bettering themselves, and keep graduating students who take away not just great clinical skills, but as many memories as possible of a respectful, meaningful education.
About five years ago, Shawn Monga OT4 bought a second dental practice. In the following months, he watched while one of his locations flourished with positive team chemistry. The other, meanwhile, had a negative atmosphere with employees micromanaging each other and a lot of staff turnover. It made little sense: the offices were a mere 10 minutes apart, both in the Greater Toronto Area, and some staff members worked at both places.

Monga wanted to fix things. He’d learned business basics in dental school such as how to read appraisals and secure a bank loan, but little around leadership. “The real challenge is how do you go from dental school to learning how to manage a team?” he says.

With the guidance of a business coach and by observing his employees, Monga developed a philosophy that has helped his practices — he now has four — run as congenially and efficiently as possible. “As the dentist and the owner, I put myself at the bottom of the hierarchy,” he says. “My job got easier when I empowered everyone else to do their job well and I valued the work they did.” He avoids micromanaging. With lots of positive encouragement and an openness to hearing his staff’s ideas, he humbly does his job and lets others do theirs.

This approach, plus frequent in-office and after-work celebrations (when safely possible) to make his team feel appreciated, has made running a private practice a lot more joyful for Monga, and helped him retain staff in an increasingly competitive labour market.

Dental practice owners have often struggled with this dichotomy: being a great dentist has little to do with being a successful business owner and manager. Now, expectations in the workplace have changed. In many regions, staff can easily find work in another dental practice. Even the most junior of employees know that they don’t need to deal with autocratic leadership styles, or subtle — much less overt — sexism, racism or any other kind of prejudice from their bosses, colleagues or even patients. Today’s workplace leaders increasingly must be seen as a positive force in their employees’ lives. “When you lead a team, you’re responsible for their well-being in the workplace,” says Shervin Rowshani TO, who owns dental practices in the Muskoka region in central Ontario.

Today’s dentists are under pressure to become skilled leaders, not just great clinicians. “There’s a greater recognition that being a dentist and being an oral healthcare professional requires a much larger skillset beyond the clinical piece,” says Laura Dempster 7T7 Dip DH, 8T1 BSc D, associate professor at the Faculty of Dentistry.
TOXIC WORK

Dentistry-related workplaces can be toxic. A 2009 survey of dentists doing postgraduate hospital training in the U.K. revealed that one quarter had been victims of bullying while nearly half had witnessed colleagues being bullied. But 60 per cent of those surveyed, even those who didn’t consider themselves bullied, had experienced one or more bullying behaviours on a checklist. This happens in Canada too: a 2018 Statistics Canada report found workplace harassment happens more often in health-related jobs.

Some of these issues stem from how medical professionals are trained. Dental education, for instance, has traditionally focused on teaching precise technical skills. Dentists have also been schooled in the social determinants of health and are encouraged to treat their patients with compassion and understanding. However, less time has been devoted to honing interpersonal skills more broadly, including skills around managing a team. “Leadership training is virtually non-existent for dental students, and practising dentists rarely engage in any form of leadership development, relying primarily on mentoring by senior colleagues and on-the-job experiences,” trumpets the first line of a 2017 doctoral thesis out of Walden University on dentists’ role as clinic managers.

Dempster says the fact that the DDS is comprised of older students has further kept this kind of training out of the four busy years of the program. “Huge assumptions have been made that because we deal with adults here, and they’re older, that they’re going to be able to do things like communicate.” During the program, students deal with patients face-to-face, so they often learn to navigate those relationships. “Many instructors are teaching this, but it can be ad hoc,” says Dempster. Dental students get few opportunities to practise communicating with hygienists and assistants, plus they receive minimal training around leadership best practices.

TRANSITIONING TO PRACTICE

Sally Safa OT2, OT7 MSc Perio says the precise, technical and perfection-focused nature of dental training and dentistry itself can translate into a stressful practice management experience. “We’re lone wolves. When we go through our training, there’s not a lot of collaboration. We are very detail-oriented, our jobs demand it. So our leadership style tends to be very authoritative. That’s not what you need to be a good leader,” says Safa, who is an associate at a periodontal practice in Toronto and has served as a clinical instructor at the Faculty.

A 2016 article published in the British Dental Journal also argues this point, showing that characteristics such as autonomy, being detail-oriented and having excellence in technical ability make for being a good dentist, but can be a barrier to being an effective leader, especially of larger practices. “The American Dental Association and various other dental organisations have formal leadership training programmes and dentists must consider these as critical learning opportunities rather than optional extras,” the paper concludes.

Safa is convinced this mismatch directly leads to problematic management habits for dentists and contributes to the stress many professionals feel. “We think that work is a pyramid and we’re at the top. So, it’s all on me. I have to look after everyone and everything. So we become overwhelmed,” she says.

Many professionals have the same problem. “What I’ve seen in dental practices isn’t different from other professional practices,” says Sandra Bekhor, practice development consultant with Bekhor Management, a consulting firm based in Toronto. She sees engineers, lawyers and accountants avoid conflict with their teams — but if they keep skirtiing
difficult issues and conversations, they never discover what’s going wrong and find ways to fix things. She says workplaces can quickly become toxic if no one listens to each other; problems never get solved and roles and responsibilities don’t get sorted out. Staff leave and a practice’s reputation “is going to spread like wildfire,” she says.

**TRANSFORMING LEADERSHIP**

Increasingly, people in dentistry have become aware of the profession’s challenges around dentists acquiring the well-rounded skills they need for their careers.

Dempster has been teaching communication and has plans to research the characteristics that contribute to someone becoming a successful dental professional. In 2016, the Association of Canadian Faculties of Dentistry identified five competencies that dental school graduates need to enter general dental practice. While Dempster notes that these competencies — patient-centred care, professionalism, communication and collaboration, practice and information management and health promotion — are represented equally in the association’s infographic portrayal of the competencies, “That’s not necessarily reflected in the time spent on these skills in the curriculum.”

While dental schools have been working to carve out space for teaching these kinds of skills, the likes of U of T’s Continuing Dental Education (CDE) department sees huge uptake for its communications and leadership offerings — CDE’s Dental Practice Management course is currently running for the 18th consecutive year. Rowshani personally wanted to learn more to help him be an effective leader, so he completed an MBA three years ago. He chose the Rotman School of Management at U of T because it went beyond the numbers side of business. “It focused on developing the kind of leader you will be versus just your business skills,” he says.

Others have found their own approaches to making the interpersonal side of dentistry a priority. For Safa, that has come through a mindfulness practice. “Mindfulness is awareness. It doesn’t mean you have to be happy all the time.” She says it’s about slowing down and having self-awareness, perhaps identifying just how stressed you are and trying to understand why. Then, it’s having compassion for yourself and others regarding the challenges and stressors of life and work. “I think the cultural shift of understanding stress and seeing how our emotions influence those around us helps build better teams,” says Safa, who has run mindfulness seminars on behalf of the Faculty.

Like Monga, Rowshani realized that upending the traditional workplace hierarchy made for a better leadership experience. “I set the tone that everyone is at the same level. Everyone calls me by my first name. Even my hygienist who graduated two years ago, when she was hired out of school,” he says, noting that he runs his office with a high respect for the other trained professionals he works with, trusting that they know their jobs.

Bekhor, who has consulted a number of professionals in different settings, says many business owners think it’s just about being nice and not bossing people around that leads to better management. “You could be the nicest person and still not have a good culture. It’s not about being nice. If you’re a really nice person and you’re afraid to deal with the issues in your office, you’re enabling a toxic culture.”

Doing the hard work of facing conflict, listening to team members openly, stopping yourself from micromanaging and making gradual change takes hard work over time. “You don’t fix the whole practice at once. You fix one little thing at a time,” she says.
CHANGES IN PROGRESS
The dental education community increasingly appreciates the value of communication and leadership skills, but there are barriers to adding these elements to the curriculum. Along with challenges around finding the time, Dempster says dental educators grapple with both how to teach some of these competencies and, even more complexly, assess them. “How do you know if someone is doing a good job in health promotion?” she asks rhetorically. While other university departments, such as those in the humanities, have a higher comfort level with such types of assessment, dentistry and other science-focused faculties sometimes dismiss subjective forms of grading, even those created with rigour and following rubrics.

Once dentists are running a practice, the leadership challenges keep on coming — they’re not easy to fix with one great initiative. Bekhor says leaders that try something just once risk undermining trust from their employees. “You have to follow through. Otherwise your team won’t be interested in your efforts anymore.” She admits that early initiatives might work, but the next challenge is often not far behind. Solutions related to leadership and running teams are never simple, one-shot fixes.

For Monga, meanwhile, even practice locations with the most positive workplace culture will shift and change over time. “If you take a snapshot of my staff in January, April and October, every team is going to be different.” Being an effective, sympathetic and aware leader is a moving target. There’s no set path to acquiring these skills, no guarantee that being a better leader will always result in a well-functioning workplace. And yet, the future of dentistry as a happier and healthier profession hinges on this emerging change.

Navigating Hospital Culture
Think private practice requires stellar management skills? Try running a dentistry department in a hospital. “The actual dental units are great, but the problem is where they fit into the organization and where they are valued,” says Bob Wood 8T2, 8T6 MSc, 8T6 Dip OR, the emeritus head of the dental department at Princess Margaret Hospital. “In hospitals, 50 per cent are trying to move things forward, and 50 per cent devote their lives to make it very difficult to get anything done.”

Wood found the bureaucracy would get in the way regarding replacing a piece of equipment or dealing with a staff conflict. He put up with time-consuming meetings — which often led to little concrete action — and focused on building trust within his team and forging good relationships with other departments. “We were valued because we made sure that we provided a great service.”

Leading Around Inclusion
Shervin Rowshani recalls a not-so-recent time when society stayed silent around discrimination or prejudice related to race, gender or other factors — at work and beyond. “This used to be the polite way to deal with it,” says Rowshani, who owns practices in a part of central Ontario where he used to be the only dentist of colour in the region.

Now, he feels more comfortable saying something. “If you see it, you have to address it,” he says. “You have to ask why. You have to poke.” These have resulted in some tough conversations at work, mainly with patients. “I’ve had patients say they don’t think a female dentist is skilled enough. I’ve had them say they don’t want this hygienist because they have a thick accent. They don’t think they’re skilled enough because of their accent.”

Sandra Bekhor agrees that addressing discrimination and microaggressions alike is now a must-do for leaders. “There’s definitely been a shift in our culture in North America,” she says. “People aren’t going to take things anymore; they’re done. If you want your practice to thrive, you have to embrace these ideas or your reputation will spread.”
A DEGREE IN
resiliency

The DDS class of 2021 had the unique honour of graduating in one of the most turbulent years in recent history. Here’s how they managed virtual didactic learning, found jobs as the pandemic wore on and figured out how their “new normal” looked for their personal and work lives.

CONGRATULATIONS TO THE CLASS OF 2021!

Doctor of Dental Surgery
Gabriella Sadie Aber
Karim Abouelenin
Ahmed Ismaiel Abdulrasoul Al-Ali
Sumeedha Anand

Taranjot Kaur Arora
David Sung Hyeon Baek
Ehsan Baghani
Mohammad Sadegh Baharvandy
Ashkan Bargriz Farshi

Evangelos Christian Benak
Nardeen Mounir Beshay
Anmol Kaur Biajar
Diana Kavita Boodram
Evan James Carr Kinnear

Matthew Chor Hung Choi
Arsalan Danesh
Mima Deif
Ipneet Kaur Dhaliwal
Julia Marie Diamandakos

MAHAM TANVEER 2T1
SERBAN SIRCA 2T1
SUSIE SON 2T1
Completing a dental degree as a newcomer to Canada is hard enough. Add in a new baby, then a pandemic, and you have the last few years of Maham Tanveer’s life.

Tanveer — mom of 20-month-old Zaviar — is now practising dentistry as an associate in a downtown Toronto practice.

It’s a long way from where she began. Growing up in Pakistan in a family of doctors, she got inspired by dentistry at a young age when she saw the unmet need around her. She completed her dental degree in Pakistan in 2015 and then left her home country to join her family, who had come to Canada two years earlier. Tanveer landed one of 24 coveted spots in the University of Toronto’s International Dentist Advanced Placement Program in 2019.

She appreciated polishing her clinical skills and learning the Canadian approach to record keeping, infection control and chairside manner. “The way you talk to patients here, the way you approach them, I learned a lot about that.”

With a baby on the way in her third year, Tanveer took six weeks off in early 2020 — she had been hoping to have a shorter leave, but both she and then the baby had short-term health issues — and then returned to school, quickly catching up. At home in Brampton, Tanveer’s husband Omar Sheikh and her mother took time off to care for Zaviar. The pandemic hitting then prevented the family from hiring a nanny, so everyone pitched in.

Tanveer is now settling into working life with her young family. In the future, she’d love to go back and visit Pakistan to volunteer and use the skills she learned at U of T. Dental care there is prohibitively expensive, even for well-off families, and not considered a priority. “It’s always been in the back of my mind to go back and help those who have been unable to care for their mouths.”

When students or faculty had a technical problem at the Faculty of Dentistry over the last four years, they knew who to call on. “I don’t mind. I like helping people,” says Serban Sirca, which is part of what drew him to dentistry. He decided during his final years studying medical science at Western University that the profession would be a great fit for his interpersonal and scientific skills.

The pandemic transformed the social side of dental school for Sirca. Luckily, his fourth-year study group was comprised of many close friends. “We found ourselves relying more and more on this little group of 10,” he says.

Sirca also loves the outdoors, but missed out on things such as backwoods camping because of COVID-19. Staying in the city the summer before his final year was particularly tough. “It made me think about where I wanted to steer my life. Enjoying nature and being connected to my community was important to me. I felt like I had to make an active step in making sure I could get that.”

Assistant professor Greg Anderson 8T6 shared with Sirca what it was like to work in Sault Ste. Marie. Then, assistant professor and director of student life Richard Rayman heard from Dani Stein 2T0 that her office in Thunder Bay needed a new associate. “It ticked all of the boxes,” Sirca says. Thunder Bay is a thriving city with many options for outdoor activities. The clinic was small enough for a new dentist to build relationships with colleagues and patients.

Sirca started his job in July 2021 and is hoping his girlfriend, a medical student at Queen’s University in her final year, will eventually join him. His Toronto-based family is not keen on him being so far away, he admits. “But at the end of the day they know I’m doing what I love and I’ll be happy, so it’s OK.”
Susie Son happened to be stopping by Richard Rayman’s office when his phone rang. It was a dentist looking to hire — an applicant had put Rayman down as a reference. The two were chatting and Son heard the word “Markham.”

“I live in Markham,” she says, noting her “eyes lit up” when she heard the name of her hometown. Rayman, assistant professor and director of student life, noticed. “I can give you some names of new grads too if you like,” he told the caller.

Within days, Son had an interview and then an offer for a part-time position at the dentist’s Whitby location. Son later found a second job to fill out her schedule in North York at a practice recommended to her by a friend.

“When it comes to these job searches, connections are very important. As is being at the right place at the right time,” she says of her job-hunting success.

As president of the Dental Students’ Society for her final year, and a devoted volunteer for much of her time at the Faculty, Son is always building relationships and showing up.

Her tenure in the top student job began when the school could not run face-to-face events. “It’s rough for the first-year students especially. They don’t really know each other and hardly ever get to be in the same space at the same time.”

So Son made an extra effort in her messaging to students. “Anytime I speak or when students reach out to me, I always put in a positive comment. I try to tell everyone they’re not alone.”

Son also has positive words about the dentistry job market for new dentists. “I think it’s a lot better than last year. I think the job market is pretty open and flexible to take on new grads.”

As her classmates land positions, she’s feeling great about their career prospects and her own as well. “I’m so excited to finally live out my dream job.”
The Faculty of Dentistry's Alumni of Influence Award

NOMINATE AN INFLUENCER

LouAnn Visconti 8T8 Influencer 2021
Farel Anderson 6T6 Influencer 2021
Sneha Abhyankar 8T1 Dip DPH, 8T5 MSc, 8T9 Influencer 2021

For more information, visit our website. dentistry.utoronto.ca/alumni-of-influence-award

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We hope to see each other in person on May 6th, 2022 to reconnect with friends at Steam Whistle Brewing.

For more information and event updates, visit our website. www.dentistry.utoronto.ca/the-great-alumni-event
DENTISTRY GETS technical

These alumni and their digital, dental startups are improving the profession for themselves and their colleagues.
Early one morning in 2015, James Younger 9T9 got a text from one of his hygienists. She could not come into the office that day.

It was too early to call a temp agency or other hygienists on his team. “It is one of the most common and biggest sources of stress and frustration for dentists,” says Younger, who was running his own general dentistry practice in Oakville at the time. Younger wished there was a way to get someone in so he could avoid cancelling a day of procedures, losing his practice up to $1,500 and upsetting patients.

No such solution existed. But a year later, Younger was ready to launch TempStars, a digital service that allows dental offices to hire hygienists and dental assistants. It is now the top dental temp service in the country, working with more than 3,000 dental offices and allowing about 8,000 hygienists and dental assistants to find work.

Younger and other dentistry alumni who have started tech-driven companies have a leg up: they understand the market. They’re solving problems that truly exist, and are customizing their products and services to support dentistry in the real world.

For Boris Pulec 8T5, it was a real need that triggered the start of his company, Consult-PRO. Pulec graduated from the Faculty the same year dental implants got approved in Canada and was able to observe training sessions on how to use them.

Once Pulec was established in practice, he began using implants. But he found explaining procedures using a traditional plastic model wasn’t enough. He commissioned some videos to show patients what implants looked like. “If they understood the treatment, they would go ahead with it,” he says.

Pulec and a business partner launched Consult-PRO to create more videos. Now, the company offers about 800 cloud-based videos, plus practice management software and education software.

He continues to focus on product development and make sure Consult-PRO’s functionality helps dentists. “I spend most of my time in development because I’m still a practising dentist.”

Sara Rahman 0T9 wanted the perfect location to start her own practice. With an investment of about half a million dollars at stake, finding the perfect spot mattered.

In 2018, Rahman attended a seminar in Texas that supported dentists in launching practices. During the program, instructors stressed the importance of getting a demographic analysis. In Canada, most companies offered postal code analysis, while the instructors highly recommended so-called drive-time analysis, which shows more comprehensive data regarding the radius around a location.

So Abdullah Aman, a web developer and data engineer, coded a new platform that Rahman designed and they launched ConfiDens Analytics in 2019. The product syncs up with Google Maps, which lets people look around a neighbourhood to assess neighbourhood features, such as parking, without having to visit.

Rahman works in dentistry in Mississauga and she and Aman run their company on the side — they hope to expand beyond dentistry in the future to help other professionals vet new locations.

Like other entrepreneurs in dentistry, Rahman’s motivation comes from her experience in the field and her understanding of what her colleagues want and need. “We just want to help people. Help them do their due diligence and make the best choices.”
What do climbing the world’s highest mountains and practising dentistry have in common? Chris Dare, a periodontology graduate student who has completed the Seven Summits, the highest peaks on each of the seven continents, has a theory.

Dare, a third-year MSc candidate, notes a parallel between mountaineering and dental school: if you work hard and put your mind toward a dream, you can accomplish anything.

“A lot of people think things are too hard and give up too soon,” says Dare. “I’m not superhuman; I’m just a hard worker. If you really want something, you have to put everything you have into it, all hours of the day.”

Dare, who grew up in Victoria, wasn’t always planning on a career in dentistry. He attended the Royal Military College of Canada from 2001 to 2005 and went on to become an army communications officer for five years, including a 10-month deployment to Afghanistan. In 2009, his mother came to visit him at his posting in Quebec City.

“My mom was complaining about missing a few teeth and the discomfort it was causing her,” he says. “She had tried dentures and other options. She wanted implants but they were too expensive. As she was telling me these
problems, I realized I couldn’t help her. From that moment, I decided I wanted to be able to help her and other people by becoming a dentist myself.”

Dare, who was also working toward a master’s degree in business at the time, changed gears and began the DMD program at the University of British Columbia. Following graduation, Dare worked in the Canadian Armed Forces as a dentist and then began his MSc in periodontology at U of T Dentistry in 2019.

In between his studies, Dare did something only 22 Canadians and 416 people have accomplished worldwide: he climbed the Seven Summits. His passion for mountaineering was ignited during his time serving in Afghanistan. After working for weeks around the clock, Dare had a two-week break, which he used to travel. He had heard about Mount Kilimanjaro and decided it would be a great adventure and challenge to attempt with his best friend. After conquering his first mountain, he was completely hooked.

Dare says his time spent both mountaineering and in dentistry have been extremely rewarding. Each experience has taught him the importance of good communication skills, compassion and the importance of helping others.

“‘In dentistry, it’s essential to have strong communication with colleagues and patients, and compassion to help understand where patients are coming from,’” says Dare. “‘It’s the same for mountaineering — you require compassion to see yourself in another person going through something extremely challenging. In each situation, the most rewarding feeling is being able to help another person, whether that be a patient or a friend.”

Dare says his ability to balance his studies and adventurous lifestyle stems from making time and squeezing every extra ounce out of the day. If he gets a little less sleep but can climb a mountain or help a patient, that’s OK with him.
As an instructor at the Faculty of Dentistry since 2009, Susan Glazer Brown sees first-hand the impact of its clinical operations on patients in need. It inspired the gift that she and her husband, Mitchell Brown, made in support of the Faculty’s Access to Care Fund.

Together, they created a named fund in 2018, with an initial $30,000 donation over three years and a recent $20,000 donation to enhance the fund for an additional two years. This generous $50,000 gift directly supports Access to Care patients, covering some or all of their treatment fees at the Faculty’s clinics.

“Working with patients at the Faculty of Dentistry has been a truly enlightening experience for me,” says Susan, who has also worked as a hygienist in private practice in Toronto. “Many of the patients I’ve seen had years of oral health neglect that made it hard for them to function.”

Susan has seen how the Faculty and the Access to Care Fund has supported such patients. So she spoke to her husband about making a meaningful contribution. “We requested this gift be applied to life-altering procedures,” says Mitchell, a trained lawyer who ran his own legal software company before retiring. “Ordinarily, when you make a donation, you get a general sense that you’ve made a difference. With Access to Care, we are able to hear about the massive change our gift has made in someone’s prospects, self-esteem and overall quality of life.”
If it weren’t for gifts from private donors, these patients may not have received these valuable dental procedures. Susan also notes the importance of giving to people in need of dental care to enable a new beginning.

“Pain and lack of teeth can be detrimental, beyond the physical symptoms,” she says. “Helping these patients makes a huge difference to their lives and the lives of their families. They are happier and often finally able to return to work. They are so grateful to be a patient at U of T and to have somebody listen to them, acknowledge them and care for them.”

The impact of Access to Care goes beyond the patients it serves. Susan says it’s important for dentistry students to be caring and empathetic when dealing with people.

“Working with these patients helps students build compassion and sensitivity,” says Susan. “Aside from the procedures they are performing, I always tell my students how important it is to be a caring provider. I think anyone who does work in the clinics has that empathetic nature, because we are giving our time and serving those who really need it.”

The couple focuses their other philanthropic giving on organizations that help those most in need, including new Canadians, refugees and seniors.

“We are very fortunate to be able to give back in this way,” says Mitchell. “The Faculty and its Access to Care program provided a great opportunity to help a marginalized population receive critical dental care while involving dental students in cases and procedures they might not otherwise participate in before graduating. It is rewarding and meaningful to donate where it’s needed and where it aligns with our hearts.”

“It is rewarding and meaningful to donate where it’s needed and where it aligns with our hearts.”
Goldie Dixit 9T9 and his wife, Brinda, started thinking seriously about making a donation to the Faculty of Dentistry when their eldest son went through the application process for his own postsecondary education.

“We’re giving back at a time when most students are trying to scrounge for every dollar,” says Goldie, who completed both his undergraduate degree and his DDS at U of T. He recalls that the costs for his first degree were “laughable” back in the 1990s compared to today.

He admits studying dentistry was costlier, even back then. But now, decades later, the Dixits wonder how any student without significant family support can afford a degree, much less an advanced and more expensive medical program such as the DDS.

The couple, who are based in Ottawa, have just established the Goldie Dixit Family Student Bursary. This $25,000 endowment will support a DDS student in financial need every year to help pay for their studies at the Faculty of Dentistry.

“We’re so fortunate that we can help our son out with savings in an RESP [registered education savings account]. Not everyone can do that,” says Brinda, who notes the family gives to charity regularly, but this is their first planned, major donation — they made sure to explain the gift to their children so they understood why they were giving.

She herself studied at York University — they joke about their rival alma maters — and started her career as a financial planner. When Goldie bought a general dentistry practice in Smith Falls, Ont., 20 years ago, Brinda took over as office manager. That partnership has led to a relatively stress-free and successful family business, with Goldie able to focus on patients while Brinda’s business skills ensure the practice’s back-end runs seamlessly.

“You can’t beat small-town anything,” says Goldie of his practice and where it’s located. “The pace is nice, no one is in a huge, massive rush. It’s been really great.” Now, two decades in, he’s enjoying seeing patients he treated as children coming in with their own little ones. Many of his patients recall his own children as babies, sitting in bouncy chairs in the office.

As the couple’s son enters his first year at the University of Ottawa — his father is hoping he’ll consider a dentistry degree later — and their daughter is quick on his heels and set to finish high school next spring, the Dixit family is all about education these days.

They’re focusing on the Faculty with their giving because it has meant so much to Goldie. “Growing up in Toronto, I knew all of my life I was going to go U of T. I didn’t consider going anywhere else.”

As well, Goldie looks back fondly on his dental degree and how well it prepared him for a profession he loves. “At U of T, you get the best education of anywhere in North America,” he says. “I owe pretty much everything to U of T.”
WE REMEMBER…

HOWARD HOLMES

Howard Holmes, a respected oral and maxillofacial surgeon and a faculty member at U of T Dentistry for 37 years, passed away last April. He studied at the University of Western Ontario (now Western University), and did surgical training at the University of Rochester. He joined the Faculty in 1980 and served as a senior tutor and assistant professor until 2017 — after which he worked as an instructor. He was interim head and then head of the graduate specialty program in Oral and Maxillofacial Surgery between 2010 and 2017 and established its fellowship program. He was a staff surgeon at Mount Sinai Hospital and consulted for Toronto General Hospital and Holland Bloorview Hospital. A group of alumni has created the Howard Holmes Education Fund at the Faculty in his honour.

GARRY HURD 6T1, 6T7 DIP OMFS

Garry Hurd was 84 when he died in April. He completed his DDS in 1961. He returned to U of T a few years after graduation for speciality training in Oral and Maxillofacial Surgery. Hurd set up a practice in Kitchener in 1967, serving patients for 30 years until his retirement in 1997. He taught for many years as an instructor in surgery at U of T Dentistry. Hurd and his wife, Cathy, a nurse, frequently visited Moose Factory in northern Ontario to offer pro bono care.

JOHN STAMM 6T9 DIP DPH, 7T1 MSC D

U of T alumnus John Stamm died in April. He completed his DDS at the University of Alberta before studying dental public health and completing a master’s degree at the Faculty. He worked at McGill University in the department of community dentistry, where he contributed to a series of important studies on dental caries and fluoride. In 1978, Stamm was elected fellow in the Royal College of Dentists of Canada, and served as president of the Canadian Society of Public Health Dentists, chief examiner for the Royal College of Dentists of Canada and president of the Canadian division of the International Association for Dental Research. Stamm served as dean of the University of North Carolina school of dentistry from 1989 to 2004, and was interim dean in 2010 – 11. His research in oral disease was published in numerous journals and books and he was the recipient of many awards, including honorary degrees from King’s College London and the University of Montreal.

ELAINE FISHBEIN 8T0

Elaine Fishbein died in April of ovarian cancer. She attended U of T Dentistry, graduating with her DDS in 1980. She ran her own practice in Mississauga for thirty years. She also taught as an instructor in Oral Diagnosis at the Faculty for many years.

WARREN HEASLIP 5T9

Warren Heaslip died last February. He attended U of T Dentistry, graduating in 1959 and practising dentistry for his entire working career. He served as president of the Ontario Dental Association from 1971 to 1973.

GRAYDON HANCOCK 5T3

Graydon Hancock died last June in his 93rd year. He trained in dentistry in the army and at the Faculty, graduating in 1953. He set up a private practice in Toronto, where he treated patients for nearly 40 years. Hancock taught at George Brown College in the 1970s and then served as a clinical instructor for the Faculty for more than 25 years.

WE MOURN THE LOSS

Bernard Bassett 6T0
Robert Bennett 6T3
Wesley Bodrug 6T5
William Boland 5T0
Lorne Brooks 4T5
Murray Chantler 6T2
John Conder 6T8
Sidney Mandel 5T9
Leva Plorins 6T4 Dip DH
Margot Powell 5T6 Dip DN
Peter Sbaraglia 9T0, 9T7 Dip Anaes
Marianne Smith 6T7 Dip DH
Mislav Stipetic 6T0
Mario Succi 7T9
George Webster 8T3

Listings are as accurate as possible as of press time.
AS DENTISTRY FACES UNPRECEDENTED CHALLENGES, WE NEED YOUR SUPPORT MORE THAN EVER.

Since COVID-19 hit, our profession has faced unprecedented challenges. Many of you had to rapidly adapt by closing private practices and then safely reopen.

The University of Toronto dentistry clinics faced similar challenges. Even prior to COVID-19, our clinics needed critical upgrades for future dentists to hone their skills and provide affordable dental care for some 15,000 patients a year. Today the need for these upgrades is urgent.

By making a gift to the Clinic Fund, you can support tomorrow’s dental professionals and the communities they serve by ensuring our facilities match the Faculty’s global reputation for excellence, innovation, and patient care.

To make a gift, please visit dentistry.utoronto.ca or contact alumni@dentistry.utoronto.ca

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