‘Our ultimate goal: to improve lives’

By Robin Goodman, Group Editor

You and I met at the California Dental Association convention in San Francisco at your Mobile CT Imaging van. What drew you to get involved with that business endeavor?

About two years ago, three colleagues and I saw the growing influence of cone-beam CT technology on dentistry. We felt that it would someday soon become the standard of care for implant placement and pathology detection, and eventually

Tankersley is new president of ADA

Ronald L. Tankersley, DDS, who practices oral and maxillofacial surgery in Newport News, Williamsburg and Hampton, Va., was installed as president of the American Dental Association (ADA) and will lead the 157,000-member organization’s efforts to protect and improve the public’s oral health and promote advances in dentistry.

Tankersley’s installation took place during the ADA’s recent 150th Annual Session in Honolulu. He previously served as ADA president-elect.

Tankersley served a four-year term as a member of the ADA Board of Trustees representing the Sixteenth District, which includes North Carolina, South Carolina and Virginia. As a trustee, Tankersley served as board liaison to the Dental Economics Advisory Group, the Committee on the New Dentist, the Council on Access, Prevention & Interprofessional Relations and the Council on Ethics, Bylaws & Judicial Affairs.

Tankersley’s previous responsibilities with the ADA include serving as chair of the Council on Dental Benefits, the Strategic Planning Committee, the Advisory Committee on the Code, the Diagnostic Coding Committee, the Standing Committee for Diversity and the Dental Content Committee.

In addition, Tankersley participated on the ADA’s Future of Healthcare/Universal Coverage Taskforce.

Tankersley is a former president of the Virginia Dental Association, Virginia Society of Oral and Maxillofacial Surgeons and Southeastern Society of Oral & Maxillofacial Surgeons.

He earned his dental degree from the Medical College of Virginia School of Dentistry, where he also completed his residency in oral and maxillofacial surgery.

Tankersley is a fellow of the American College of Dentists, the International Colleges of Dentists and the Pierre Fauchard Academy, an international honorary organization for dentists.

Tankersley and his wife, Gladys, reside in Newport News and are the parents of two children, Kenneth and Christine.
even ortho treatment planning and endo diagnosis.

We thought the technology was amazing. However, we saw that many dentists and their patients don’t have access to CBCT because the scanners are costly and radiology labs are often far away.

That’s when we decided to install a CBCT scanner in a van and form Mobile CT Imaging to bring the service to dentists in the San Francisco Bay Area.

How has the service been received?

Dentists, and especially patients, that use our service greatly appreciate the convenience of our mobile service. Generally, we meet the patients at their dental office, that way they don’t have to worry about finding an unfamiliar location.

And because the dentists know that patients will be more accepting of a referral that doesn’t involve driving to a remote lab, dentists tend to use CBCT more.

Are you a general dentist? How long have you been practicing?

Yes, I am a general dentist and have been practicing for 16 years after graduating from U.C. San Francisco in ’93. My wife, Geraldine Lim, and I share a practice in Oakland, California where we’ve been since ’96.

Are there any aspects of dentistry that you particularly enjoy?

I really enjoy keeping up on the latest technology that dentistry has to offer, including lasers. I have owned a Waterlase for years and several years ago implemented a Periolase into my practice. I think a Diagnodent is indispensable.

Last year, our practice went paperless and even got certified as Oakland’s first green dental practice. In addition to ensuring that my patients receive the best treatment available, it keeps the practice of dentistry interesting for my staff and me.

I understand that you are an assistant clinical professor at U.C. San Francisco, what do you teach?

Three years ago, I introduced an elective course on sports dentistry and trauma management.

The goal of the course was to give dental students, usually third and fourth year students, some experience in sports medicine by involving them in the care of student-athletes at U.C. Berkeley.

These students help conduct pre-participation exams, take impressions for mouthguards and fabricate and deliver mouthguards.

I think it offers a fun and interesting way for the students to reinforce what they have already learned about intraoral exams, impression-taking techniques and even occlusal concepts.

For the university, it’s a great way to make sure that their hundreds of athletes are monitored and treated well.

So what is your role at U.C. Berkeley?

I am one of the team dentists. In addition to exams and mouthguards, I make myself available for dental emergencies and routine care for the student-athletes.

Have you ever had to treat a player during a game?

I’ve seen and addressed many oral injuries after games, including stitching up a football player’s lip through the locker room, but I have never been called to treat a player during a game once. In that case, I had to numb up a football player’s tooth at halftime so he could make it through the second half.

Is sports dentistry a major part of your practice?

While I see my share of student-athletes, I wouldn’t consider sports dentistry as a big part of my practice. I view it more as a way for me to involve myself in the community.

I have made custom mouthguards for athletes ranging from kindergartens soccer to the NFL. I know many sports injuries are preventable with a custom mouthguard, and I would say that it is a mission of mine to spread this notion.

Any final thoughts or words of advice you’d care to share with our readers?

I think it is important for us as dentists to always stay mindful of our ultimate goal: to improve lives. In the dental office, this means our patients and our staff.

While the practice of dentistry can be stressful, we are very fortunate to have the opportunity to touch many lives.

Last month, a patient of mine came in for a crown prep. I walked into the room and asked, “So, how have you been?” He said, “Not well. To tell you the truth, I’m struggling just to get by.” I asked him if he wanted to talk about it. He told me that three months ago his adult son passed away.

His appointment was for an hour and a half, and we spent almost all of it talking. He was sobbing, and I was tearing up trying to console him. He was in so much pain that it hurt me. At the end of the appointment, we hugged and I could say, “I’m so sorry, Stay strong.” He thanked me for listening.

It was one of the most rewarding appointments of my career and a strong reminder of why I went into dentistry — not because I like teeth, but because I like people.

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