

April is Postponed...

Dear SDDS Members,

As we have sent in emails and messaging, the events and activities for April will be postponed and we have already rescheduled most of them for future dates. Watch within this Nugget for rescheduled dates; we are so excited and very grateful that our presenters and speakers have been so flexible.

All SDDS APRIL events (CE, meetings, CPR, etc) will be cancelled/ postponed through the month of April. Specifically:

- April General Meeting cancelled (Current DMDs will receive a discount for next year's DMD program)
- · April CE, CPR and Business Forums - postponed and will be rescheduled for late summer and early fall
- Broadway, Bandstand; this show has been cancelled
- The Kitchen dinner/event has been rescheduled for September 24th
- The March CE programs have been rescheduled for September and October already

May and June Events

• We will wait until mid-April for the May/June events going forward (golf, May GM, Licensure Renewal, Business Forum, River Cats) - watch your emails and our website; we will keep you posted

Refunds and Rescheduling

• To all those who have signed up for these events, we have reached out to you individually with regard to rescheduling and refunds

CE Credits and Licensure Renewals

From CDA:

"Of the many ripple effects of the COVID-19 pandemic, we share the concerns many of the components have voiced about the potential inability of dentists to renew their licenses due to a shortage of live CE offerings in the coming weeks and months. Many CE course providers, including several dental components, have taken heed of state and local advisories and have cancelled CE courses. Others have cancelled courses because speakers are no longer able to travel or as a result of attendee cancellations.

The Dental Board of California sent an email acknowledging the license renewal problems related to cancelled CE courses but was steadfast in its following of current regulations (see below). The Dental Board is bound to the confines of the Dental Practice Act and is unable to deviate from enforcing, even on a temporary basis, current CE renewal requirements without explicit direction from the Governor.

This is a top priority -- CDA is actively working with the Governor's Office and legislature to find an expedient solution. Specifically, CDA is advocating that ALL licensees be provided an adequate extension (up to one year) to complete their continuing education units for renewal, which will allow all of us time to prepare for rescheduling live courses and develop alternatives, such as live webcasts. We hope to have this resolved in short order and we will continue to update you on the progress of our efforts."

Stay safe - we will keep our members posted on each and every new piece of information as we continue to learn more.

- Your SDDS Team sdds@sdds.org

Annual Golf Tournament Friday, May 8, 2020



Join us for the Annual Golf Tournament benefitting the Sacramento District Dental Foundation on May 8th!

Sign up for a day of fun as a golfer or even a sponsor!

Empire Ranch Golf Club (Folsom, CA) 8:00am Shotgun

Join us for Dental Day with the River Cats! Thursday, June 18, 2020



Bring your staff, family, and friends to enjoy a fun night out of baseball!

See sdds.org for details!

Save the Date

for the Annual SDDS Holiday Party!

December 11th, 2020

Join us with your team at Del Paso Country Club - let's unite our holiday parties this year!

We can do all the planning for your Holiday Party! We'll pay the band, host the wine, and do the wonderful dinner; you just bring your team and celebrate with us!

Stay tuned for when sign ups open!

Upcoming course/event dates may be affected by the developments from COVID-19.

COVER IMAGE CREDIT: SHUTTERSTOCK

Checkpoints for Referring Early Mixed Dentition Patients Marc Dunn, DDS

An Accurate Mark Cassandra Hanson, RDA

> The Worst Case Scenarios Ling Ralli, DDS

Buffered Anesthetic Anonymous

Simple Correction of Ectopically **Erupting Second Molars** Garri Tsibel, DDS

Cloud Based Billing Darce Slate, DDS

Chairside Stayplate Brian Ralli, DDS

Is Your Website Fully Optimized? Larry Cao, DDS

> **Avoiding Contamination** of Bonding Agent Denise M. Jabusch, DDS

Screw Retained Implant Crowns Jason Scorza, DDS

Flapless Implant Placement Charles Smurthwaite, DDS

> **Efficient Crowns** Gaetan Tchamba, DDS

Purchasing a Practice Benedict Yoong, DDS

Weaning off a PPO Natasha Lee, DDS

> A Few of my "Nuggets" Pamela Wong, DDS

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International College of Dentists (ICD)

2019 • Special Citation Award, unusual concept 2019 • Golden Pen

Article / series of articles of interest to the profession

2018 • Humanitarian Service Award

2017 • Special Citation Award, unusual concept

2016 • Golden Pen, honorable mention Article / series of articles of interest to the profession

2015 • Special Citation Award, unusual concept

2014 • Outstanding Cover, honorable mention

2014 • Golden Pen, honorable mention

2013 • Outstanding Cover

2012 • Overall Newsletter

2010 • Platinum Pencil

Outstanding use of graphics

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40 SDDS Calendar of Events unparalleled.



Exceptional protection from people who understand your profession.

With a heritage of nearly 40 years, TDIC now delivers dentist-focused protection to more than 24,000 dentists in 15 states. Our success is due in no small part to the collective strength of our company, the trust of our policyholders and the focus of our board of directors.

It's our privilege to serve a growing community of dentists who are engaged in the bright future of their profession.



By Carl Hillendahl, DDS 2020 SDDS President

Tips, Tricks and Nuggets

Upon graduation from dental school we are all loaded with the basic skills necessary to start this profession. We plod along at first noticing that some of the procedures we perform are not easy and some of the interactions that we have with patients don't turn out as desired. We begin a personal quest to find an easier way and to modify our conversations with patients to mitigate potential problems with treatment and mutual expectations.

We continually add various tips, tricks and nuggets to our armamentarium as we mature in our professional skills and become more successful.

We all went to dental school where admission required enough intelligence to "noodle" through problems to arrive at satisfactory resolutions. My entire college

career revolved around the ability to noodle through problems. We use the same trial and error techniques to modify treatment protocols and procedures to improve efficiency. When we find something that works, another trick goes in the bag.

CE is another wonderful way to pick up tips, tricks, and nuggets. That's why we attend those programs that SDDS provides throughout the year. The SDDS CE Advisory Committee, every year, focuses on current problems and interests we have in the workplace and tries to address them with programs. Check out the SDDS program guide... a new one comes out in June for next "school year."

Our mature members have been there and have done most of everything in dentistry. They know what works in their hands and

what doesn't. They have seen technologies come and become obsolete. They have seen products promise the moon and fall far short. From a mentoring standpoint, the younger SDDS member will find the mature member a wealth of information for clinical practice. This is just another reason for membership.

This issue of the Nugget is a compilation of tips, tricks and nuggets from various members who desired to share with the readership. So, read this issue and learn something you may not know. Thanks to the contributors - you have shared some great information!

Culwithe LC

MANUAL DAY HAS BEEN MOVED TO SEPTEMBER!

Manual Day: Build & Complete Your OSHA, Employee & HIPAA Manuals in One Day! 6 CEU, Core • \$199

Presented by Teresa Pichay, CDA Regulatory Compliance Analyst and a speaker from the California Employers Association

It's Manual Day!

Bring your laptops, or your notebooks, and make your mandatory manuals all in one day!

By the time you walk out the door at 3pm, all the manuals will be finished!

We will help you write and update your manuals and the experts will be here to answer your questions, and bring you the most current information.

Come to this class to complete your:

Employee Manual, HIPAA Manual, and **OSHA Manual**

The OSHA and Employee Manual templates will be provided within the cost of the course.

We have a great group price for the ADA HIPAA Manual – \$175. If you let us know with your registration, we will order it for you and have it at the course (2 weeks notice, please).

Friday, September 18, 2020

Note the rescheduled date above, was originally April 24, 2020!

8:00am • Registration & Breakfast 8:30am - 1:30pm • Class

SDDS Classroom

Head to sdds.org to get signed up for the class today!



Flexibility"

By Cathy B. Levering SDDS Executive Director

Just before our MidWinter Convention in February, I sat down with our wonderful SDDS Team and discussed how we are moving to new places, new spaces, and new opportunities as well as challenges. Fast forward to today and as I write my Cathy's Corner, I had no idea how that word would and could affect our lives. Whether it is our personal lives and families, our work lives, our employer lives and our employee lives - it's a whole new and, needless to say, a challenging time.

Enter COVID 19 (coronavirus).

Every minute the information changes. And CDA and SDDS strive to keep you updated on every aspect that affects your dental practice. We will continue to keep you informed. We have cancelled programs FOR SURE in April and are holding until Mid-April for the May events and meetings. Please know that we will have rescheduled options for all programs. And our fall program is going to ROCK!

Finally, CDA is working with the Governor about the consideration of extending the CE requirements for one-year for licensure renewals (see inside front cover). By the time this magazine goes to print, we hope that you already have received notification of this solution as well.

We sincerely know that this is a very, very hard time for businesses. Your employees and your families are all impacted. Please hang in there —we'll do our best to advocate for you, inform you and make sure you have updated information always.

We value you being our member – thank you.

Our prayers and good thoughts always to you all.

Stay up to date on the latest information regarding COVID-19:

Head to CDA.org and click the "Urgent COVID-19 (coronavirus) updates" bulletin at the top of the page to get to CDA's information hub.

This hub is being updated frequently with new information and includes FAQs on:

- Dental Office Closures
 Patient Screening
- Infection Control
- & more!



LEADERSHIP

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By Brian Ralli, DDS Associate Editor

Dentists are nerds. The stalwart Wikipedia defines a nerd as "a person who spends an inordinate amount of time on an unpopular, little known, or non-mainstream activity, which is generally highly technical or abstract." If you get a group of dentists together, the conversation inevitably ends up being a treatise on impression techniques, optimal axial angulation of a maxillary crown prep, or favorite type of matrix band wedge. This is usually at the expense of the poor spouses at the table who absently stare off in the distance as if we were talking in a foreign language. God forbid the topic of CR vs. CO pops into the conversation; there might be a fight. Few professionals love to "talk shop" more than dentists.

Sure, we all went to the same schools and learned the same fundamentals but the reality is that over the course of our careers we pick up lots of tricks and "nuggets" that build the foundation of what makes us the quality practitioners that we ultimately

evolve into. It may be a particular product that we love to use, a technique that makes our job easier, or even just a new way to communicate a concept to a patient. "Most of the fundamental ideas of science are essentially simple." -Albert Einstein

...we pick up lots of tricks and "nuggets" that build the foundation of what makes us the quality practitioners that we ultimately evolve into.

I consider myself fortunate to surround myself with friends who share my passion and "nerdiness" with dentistry. Much of what I do and use on a daily basis, I gleaned from my friends and colleagues. I remember

when I first opened my practice, I had lunch with an older prosthodontist and asked him to give me the secret to being a great dentist. Without a pause he said, "When you seat a bridge, tie the floss under it first so you don't have to mess with a floss threader." It wasn't exactly the momentous advice I was expecting but, honestly, that simple tip was something I've carried with me for many

This issue is about those pearls of wisdom that help us in our day to day practice. I asked many of my friends to share simple clinical methods, products, or communication techniques that they think might be of interest to our readers. I hope that some of these "nuggets" find a place in your own practice and I hope to encourage all of our readers to consider their own professional insights as something to be freely shared among colleagues. •

PLAN AHEAD FOR LICENSURE RENEWAL!

California Dental Practice Act, Infection Control, and OSHA Refresher

Are you a licensee who's looking to bangout all the mandatory courses in one day?

Say no more — our All-In-One covers the following:

- 2-hours of California Dental Practice Act for California licensees
- 2-hours of Infection Control for California licensees
- 2-hours of OSHA refresher to include bloodborne pathogens, hazard communication, materials safety, general office and all the required

elements of your compliance in the office for all those classified as being exposed to pathogens

We encourage all licensed as well as unlicensed staff to attend this comprehensive education day which covers scope of practice, infection control regulations from the Dental Board, employee safety issues from Cal-OSHA and a review of the duties and functions of practitioners in dental healthcare provision.

Friday, May 29, 2020

8:00am • Registration & Breakfast 8:30am - 3:00pm • Class & Lunch

SDDS Classroom

6 (2, 2, 2) CEU, Core • \$199

Head to sdds.org to get signed up for the class today!

This event date may be affected by the developments from COVID-19.

From Your 2019 SDDS President

A Year in Review of the Sacramento District Dental Society

What an exciting and fulfilling year it was for our Sacramento District Dental Society! There were events almost weekly from CE courses to General Membership meetings, Broadway musicals to River Cats games, The Kitchen to our Foundation Gala. With this goes a very large and well deserved thank you to Cathy and her expert team. Without these good people none of this would happen.

The strength of our Society is found in the members, you and me, and the impact we have in our commuities. Of all the dentists in the Sacramento region, running from the valley to South Shore, 85 percent belong to our Society. For a Component of our size, this is unprecedented—not only in California, but nationally. Our members are

pleased with the work done by our Society and 96 percent retain their membership. Thank you for your trust in us.

Sacramento led the way at the CDA House of Delegates—again, speaking to dental issues that impact you and me on a daily basis. We are blessed to have good people giving of self to lead the Society.

Our MidWinter Meeting was a success, bringing world class speakers to our doorstep. General Membership meetings were well attended, meaningful and well received. A thank you goes out to our hard working committees that plan for and execute these events.

Lastly, a word about the financial stability of our Society. The budget of \$1.7M was



By Bryan Judd, DDS 2019 SDDS President

right on the money, literally. With the success of the classes, General Membership meetings, Nugget advertising and so much more, our dues are kept in check. We are a strong and viable Society.

Thank you to the many who worked so tirelessly to make 2019 such a successful year.

Bryan Judd, DDS Immediate Past President Sacramento District Dental Society











2019 MEMBERSHIP BY THE NUMBERS

SIXTY FIVE HUNDRED

REGISTRATIONS FOR EVENTS

MARKET SHARE

2019 FINAL MEMBERSHIP (as of 12.31.2019)

DENTIST MEMBERS

ACTIVE: 1,437 RETIRED: 299

TOTAL DENTIST MEMBERS: 1,736

AUXILIARY MEMBERS

DHP (Dental Health Professionals): 48

STUDENTS: 9

TOTAL ALL MEMBERS: 1,793

2019 FISCAL YEAR END

CURRENT ASSETS

TOTAL ASSETS:	\$1,734,316
OTHER ASSETS/DEPOSITS:	\$7,907
TOTAL FIXED ASSETS:	\$50,148
TOTAL CURRENT ASSETS:	\$1,676,261
Prepaid Expenses	\$46,910
Accounts Receivable	\$29,152
Operating Reserves	\$589,140
Building Reserves	\$880,067
Cash	\$130,991

LIABILITIES & EQUITY

Current Liabilities	
Accounts Payable	\$7,711
Deferred Revenue	\$276,111
TOTAL CURRENT LIABILITIES:	\$283,822
Equity	
Retained Earnings	\$1,338,852
Net Income	\$111,641
TOTAL EQUITY:	\$1,450,493
TOTAL LIABILITIES & EQUITY:	\$1,734,315

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YOU SHOULD KNOW

NEW PRESCRIPTION FORMS AVAILABLE. NOT REQUIRED UNTIL JANUARY 2021

Reprinted with permission from CDA

Dentists are reporting to CDA that pharmacies are telling them to get new prescription forms. The new forms are now available; however, as CDA has previously reported, California law does not require that they be used until Jan. 1, 2021.

The state Department of Justice published a 2019 bulletin on the transition period for using the new prescription forms containing specific serial numbers and barcodes as required by Assembly Bill 149. The new forms should be ordered from an approved printer listed on the DOJ website.

Mandatory e-prescribing for all prescriptions, with limited exceptions, is expected to start Jan. 1, 2022. Information on how to get started with e-prescribing is in the CDA Practice Support resource article "Controlled Substances: Prescribing and Dispensing." Dentists can check with their respective electronic health record company on availability and costs of e-prescribing software and with the following stand-alone e-prescribing software companies:

- DrFirst
- NewCrop
- RXNT
- Bravado Health

Read the DOJ's May 2019 bulletin "AB 149 – New Requirements for Prescription Forms."

DENIAL OF HEP-B VACCINATION

Printed with permission from LaDonna Drurv-Klein: FADE

An employee can refuse on religious grounds or health concerns; this is where the CYA form (cover your assets!) really comes in - a declination form should be in the folder of forms available. An employee who is refusing or considering refusing must be informed of the risks and benefits of vaccination, the language from the CDC as to all healthcare providers obtaining HBV vaccination and regular TB testing (not required but recommended) and the requirements for completion of the vaccination to perform procedures on patients - then they can make their judgment call as to whether or not to vaccinate. The declination form then emphasizes that the employee or prospective employee is aware of the risks, holds harmless the employer in the event of an incident and agrees to all the medical exposure requirements upon suspected occupational exposure.

No, an employer cannot force it, but the employer must get a declination form signed and witnessed as to the employee's choice; further, the employer may also choose not to hire the employee, assuming this is an initial hire. If an existing employee, how long has the employee been working on patients without HBV vaccination coverage? Did the employee or prospective employee ever have the vaccination and maybe it's been several years since going through the series? Has the employee or prospect ever had a title test to see if perhaps they have already been exposed? Congenital exposure? Known carrier stays?

And if the series was taken at one time, has there been a titer test or antibody development blood test taken in the past 7 - 10 years (CDC recommendations) to see if she/he has a detectible level of antibodies? If detectable, is the level high enough to consider themselves vaccinated? If borderline, there is a one-shot booster available.

Lots of guestions to really be able to help our DDS in this matter but let's see what the data tells us and perhaps we can assist in helping the employee/prospective employee better understand her/his options.

FEE REDUCTION FOR 2,200 ENDODONTISTS, **PERIODONTISTS AND ORAL SURGEONS ACROSS CALIFORNIA**

Reprinted with permission from CDA

CDA was notified by Delta Dental of California that it will reduce fees for periodontists, endodontists and oral surgeons in its Premier provider network effective July 1, 2020. Delta Dental sent letters to Premier providers on Friday to explain changes to its fee structure, which will affect approximately 2,200 specialists statewide. This change will only reduce contracted fees that are greater than the new maximum amounts allowed. In its notification, Delta Dental cited the need to align its contracted fees for these specialties with those generally accepted as network reimbursement levels in the broader market. These shifts in the dental marketplace are occurring as purchasers become more cost-conscious of dental claims costs and premiums.

As part of its class-action settlement agreement with CDA, Delta Dental is providing affected Premier providers with 120 days' advance notice and an individualized illustration of how these reductions potentially affect each dentist's practice based on the dentist's prior 12 months' claims submissions. Dentists with questions about the fee reduction or the impact on their practices are urged to contact Delta Dental at 888-742-4099 or cafisupport@delta.org.

Additionally, CDA Practice Support developed an FAQ with a checklist to assist members with enhancing their understanding of the potential effects of this change to their practices. Members with questions may reach the CDA Contact Center at 800-232-7645 and request to speak with a Practice Support analyst.

DENTAL NUGGETS

These articles feature pearls of wisdom submitted by your colleagues to help in your day-to-day practice! They include a variety of topics like a particular product that we love to use, a technique that makes our job easier, or even just a new way to communicate a concept to a patient.

Checkpoints for Referring Early Mixed Dentition Patients

While practicing orthodontics for the last 19 years, two of the most frequent questions I get are what age would you like to first do an exam and what should I be looking out for? There is no set age to refer a patient

for orthodontic treatment, but seven seems to be the most common age for the initial referral. Treatment during early mixed dentition can provide the orthodontist with the opportunity to intercede during periods of growth or to correct harmful habits which can be difficult to correct at a later stage. Below are some examples of dentofacial concerns that may be best treated during early mixed dentition.

Transverse maxillary deficiency seen in early mixed dentition is very common and should be treated early. Look for posterior unilateral or bilateral crossbites with a functional midline shift as the patient closes into occlusion. Clinically, this is seen when the maxillary and mandibular midlines are not coincident in maximum intercuspation. Many times, this is from premature cuspid contact. Crossbites can also lead to enamel wear and periodontal concerns. Evidence also indicates that maxillary expansion can assist in opening up a child's airway which is becoming a growing concern in the medical community.

Freatment during early mixed dentition can provide [an] opportunity to intercede during periods of growth or to correct harmful habits...

Sagittal Class III malocclusion also seems to have advantages when treated during early mixed dentition. Again, this is easier to treat as the patient loses their deciduous teeth. Treatment can include both fixed and removeable appliances. Also, be on the alert for deep, impinging bites, which can cause soft tissue trauma on the palate.

Persistent thumb and or finger sucking habits are another indication for treatment during early mixed dentition. The dentofacial effects of a thumb habit lead to open bites, overbites, narrow maxillary arch, protruding

upper incisors and impinging lower incisors on the palate. Thumb sucking may also cause lisping and other speech impediments. Treatment routinely involves thumb cribs and other fixed appliances which are reminders to keep the thumb out of the mouth. Along with a thumb habit appliance, patients often need to consult a speech therapist.

Supernumerary and missing teeth should also be addressed at a younger age. A mesiodens, for example, can inhibit the eruption of permanent incisors.

It never hurts to have your orthodontist get an early look at a potentially complicated case. Many times, I will still choose to delay treatment until a later developmental stage but early diagnosis is always advantageous.

Marc Dunn, DDS Roseville, CA

An **Accurate** Mark

Clinicians always have a love/hate relationship with adjusting bites. The trusted standby, articulating paper, is many times not the most dependable tool in our arsenal. A lot of times the patient chews around on it and there are marks all over the place and it can be difficult to ascertain what spots actually need to be adjusted. One trick I've learned is to coat the articulating paper with petroleum jelly. This drastically reduces a lot of the "false positive" marks since it takes additional pressure to push the jelly out of the way to actually make the mark. You can confidently know that if you see a mark, that is a spot that does actually touch and perhaps needs to be adjusted. This little nugget has made this thankless task a little easier.

Cassandra Hanson, RDA Roseville, CA



Uncoated



Coated

The Worst Case Scenarios

get over was not being apologetic every time a patient who came in for a routine procedure ended up needing more extensive own dental work and it took me a long time to understand that also medicine in general. I have developed a little speech that I give to all patients after even something as simple as a filling:

"Your tooth had a cavity, which is a bacterial infection, that we attempted to clean out and fill back in with a simple filling. Your tooth still has a living nerve in it that may react to the biting and even some mild throbbing typically for a few days, but also occasionally for weeks and rarely for months. You may also experience some pain from the injection I gave you. This should be a tolerable level of sensitivity and I would tend to be patient with the tooth and give it a chance to settle down. However, if you are having extreme sensitivity or intense throbbing pain, you need to give us a call because you may need more advanced dental treatment. If that is the case, we will get you in and talk

can smooth the road when a complication does occur but is also our obligation as a clinician providing proper informed consent

Ling Ralli, DDS Roseville, CA

Buffered Anesthetic

One of the "luxury" products I've incorporated into my practive is the Onset anesthetic buffering system. I've always been apprehensive about giving my patients painful injections. The the of the discomfort and burning our patient's feel during a typical injection is due to the tissue reacting to the acid in the anesthetic. Our typical carpules are kept at a very low pH in order to preserve shelf life. When you inject, the body has to buffer the solution to normal pH before it can penetrate the nerve and do its job. The Onset system allows you to mix the solution with a sodium bicarbonate base prior to giving the injection. This raises the pH of the solution to the body pH. Besides taking away the burning sensation, it also drastically increases the rate of the onset of anesthesia. I've found this product gives me very predictable and relatively painless numbing of my patients and is well worth the investment.

Anonymous

SIMPLE CORRECTION OF Ectopically Erupting Second Molars

In an active dental practice it is not uncommon to come across a young patient with one or more partially erupted second molars that are not able to fully erupt due to being "stuck" and obstructed by the distal aspect of the first molars. This type of ectopic eruption occurs due to the deviation in normal path of eruption leading to the second molar being locked apical to the distal surface of the first molar. Studies show that the primary cause of ectopic eruption of permanent second molars is arch length discrepancy.*

A relatively simple way to correct some of these ectopically erupting second molars is via space gain by interproximal wedging with the use of elastic separators. An elastic separator can be placed/wedged between the distal surface of the first molar and the mesial surface of the partially erupted/ectopic second molar. The separator can be replaced several days to a week after initial placement. After 1 or 2 separator replacements there is typically enough interproximal spacing created between the distal of the first molar and the mesial of the second molar to allow the ectopic second molar to upright and fully erupt into occlusion (see below attached diagrams). There is typically eruptive force remaining in the second molar (with the root apices that are not completely formed or closed) which can guide the ectopic tooth to upright and fully erupt once it overcomes the obstruction. This method is relatively simple to perform, is cost-effective, has short span of force application with minimal discomfort, and does not require bonding or banding of adjacent teeth and/or any other orthodontic appliances. Correction usually occurs within 1-2 months with the ectopic second molar uprighting and fully erupting into occlusion.

Garri Tsibel, DDS Roseville, CA

References:

*Raghoebar GM, Boering G, Vissink A, Stegenga B. Eruption disturbances of permanent molars: a review. Journal of Oral Pathology and Medicine. 1991;20(4):159-166. [PubMed] [Google Scholar]



Left: Photograph showing ectopic and partially erupted mandibular right second molar.



Right: Photograph showing elastic separator placed interproximally between mandibular right first and second molars



Left: Intraoral periapical radiograph showing permanent mandibular second molar locked beneath first permanent molar.



Right: Intraoral periapical radiograph after 3 days of having elastic separator placed interproximal between first and second molars (note the interproximal spacing that was created by the separator)



Left: Posttreatment intraoral periapical radiograph showing erupted permanent mandibular second molar.



Right: Posttreatment photograph showing erupted permanent mandibular second molar.

Cloud Based Billing

We all have billing and accounting woes. Years ago, my accountant looked into my accounts receivable and told me, "Either someone is embezzling from your practice or someone is not doing their job". I took his advice and found the latter to be true. My office manager had months and inquiries, EOBs, claims that needed further documentation, requested attachments, or

Inspired to make this right and feeling the pressure from loss of revenue, my manager I and pulled together huge spreadsheets of past due accounts and unfilled claims. Now, the daunting task was in front of us. How to begin the job of contacting insurance companies and patients? I realized that the same lack of organizational skills that got my office manager into this mess was now compounded by this additional mountain of work and it was obvious she was completely unequipped to handle the job.

Frustrated, I had to consider firing the old manager and hoping her replacement could take on this mountain of work and was very effective at selling the cases and otherwise did a great job managing the practice, but unfortunately struggled with outsourcing my collections. Fortunately, I found a great cloud based solution called "eAssist". I put a call in and within a short period of time the owner, a dentist, called me directly. He too had similar issues in the past with managing accounts running multiple practices. He developed his company to put an end to all of those effortless, a couple of scanners were sent and installed. I gave them access to log in remotely and my team's job switched from managing EOBs, authorizations and billing to just scanning checks at the end of the day. The team at eAssist did the rest.

Within about 6 months, they had worked accounts and years later our partnership is still going.

Outsourcing billing and accounts receivable for me revolutionized my practice. treatment planning, patient relationships and managing the practice. I feel confident that my financials are being managed at all hours. I get detailed graphs and metrics daily, weekly and monthly that describe exactly who, what, when and how my claims and being processed and tracked. This is a service that I would highly recommend to other like minded dentists in the Greater Sacramento area.

Darce Slate, DDS Rocklin, CA



1-844-eAssist dentalbilling.com



COMPLETELY OUTSOURCE YOUR BILLING DEPARTMENT

- Dental Billing
- Dental Bookkeeping and Accounting
- Dental Medical Billing
- Dental Insurance Verification
- Dental Patient Statement Services
- Dental Credentialing

CHAIRSIDE STAYPLATE

We all see it routinely: a broken, unrestorable anterior tooth. A lot of times the patient was crammed in on your schedule on a busy afternoon and thinks you can just "glue it back in". Making a stayplate via the lab is many times ideal but sending the patient away for a couple days without a front tooth isn't exactly a "practice builder". I have a technique that has evolved over the years to make a fairly durable and cosmetic stayplate in about 10-15 minutes. (Figure 1)

In the patient's mouth take some soft rope wax and form a palatal plate to at least the 1st bicuspid. If you have the broken tooth you can stick it in place or just form an approximate tooth out of wax. (Figure 2)

Take a medium bodied PVS impression and remove the wax. This will leave a nice mould of the form of your stayplate. (Figure 3)

Inject an appropriately shaded selfpolymerizing temporary material and seat back in the patient's mouth just like you would make any crown temporary. Be sure to block out any extraction sites or post spaces with wax or a cotton pellet (trust me...). Like any temporary, don't let it get rock hard or you will have a lot of trouble removing it. (Figure 4)

Once set, trim your stayplate. leave some material locked into the embrasures for retention. If you overtrimmed it, you can easily add composite if it doesn't snap in and stay put. Worst case, a dab of denture adhesive can be acceptable too. The material can also be easily polished on a wet lathe with pumice. (Figures 5&6)

I will usually give the patient an option for a "nicer plate" made by the lab but most patients are satisfied with the result and it is usually durable enough to last through the implant process. Most importantly I'm able to give the patient an aesthetically acceptable tooth on an emergency basis.

Brian Ralli, DDS Roseville, CA



Figure 1



Figure 4



Figure 2



Figure 3



Figures 5 & 6

Is Your Website Fully Optimized?

Do you have a cool website with awesome content & reviews? If so, do you know how to make your website more visible to more internet traffic? These days having a website just isn't enough. You will need to implement SEO (Search Engine Optimization).

Search Engine Optimization (SEO) is a technical, analytical and creative process to improve the visibility of a website in search engines. The primary function of SEO is to drive more unpaid useful traffic to a site that converts into sales.

In other words, SEO involves making certain changes to your website design and content that make your site more attractive to a search engine. SEO is the process that organizations go through to help make sure that their site ranks high in the search engines for relevant keywords and phrases. In order to do this, search engines will scan, or crawl, different websites to better understand what the site is about.

As dentists, we are too busy running everyday business operations. Having a third party (usually your website company) come in to help with your SEO is actually the way to go. Gone are the days of pricey magazine & phone book listings that result in little to zero return on your advertising money.

For example, the company that does my SEO will email me a detailed monthly report. For the month of November 2019, we had 97 website visits which led to 18 appointment calls. This generated an additional \$3095 in revenue (a 609% return on our investment of \$495 per month).

Lastly, don't get scammed by numerous emails or phone calls from solicitors claiming that they are SEO specialists. Always use a trusted company (like your website designer) that won't require an annual contract. Even companies, like Google, have made it very easy to set up your own SEO program based on your own set monthly budget

Larry Cao. DDS Orangevale, CA

Avoiding Contamination of Bonding Agent

Most post-operative sensitivity of direct composite restorations is due to some sort of failure of the bond. One of the easiest ways to ruin a quality bond is due to moisture contamination. Commonly we place the bonding agent and blow it dry with the air/water syringe. There is actually a significant amount of moisture that comes out of the air/water syringe. Blow air on the back of your glove and you will see droplets of water start to form. Many times there is residual moisture or oil in the air lines. The water button tends to leak out over time and even if it is functioning perfectly all it takes is slight pressure from the corner of your finger on the wrong button to send over a spritz of water that you won't notice but your bonding agent will. So instead of using the air/water syringe, I use the HVE (High Vacuum Evacuator). This results is a "clean" source of air stream over the bond with minimal chance of contamination. Since adopting this technique, I noticed a significant decrease in post-operative sensitivity with my composite restorations.

Denise M. Jabusch, DDS Loomis, CA

Screw Retained Implant Crowns

I have found that doing screw retained implant crowns, especially for posterior teeth, has given me more peace of mind since I switched over to this method several years ago. With all implants being placed at bone level these days, the tissue often times will make getting the separate abutment in place a difficult procedure. I now rarely have to use the diode laser when delivering my implant crowns, because if the tissue is creating upward pressure on the restoration, I can place the one piece abutment/crown into position and have the patient bite on a cotton roll for several minutes. Screwing into place is usually very easy after doing so. I also like the ability to re-torque the restoration if the need arises years after the initial placement. With this approach we no longer have to cut the crown off in order to gain access to a loose implant screw. Placing a small cotton pellet and Cavit into the access opening is very important prior to placing the composite filling when covering the access. Of course not having to worry about left over subgingival crown cement is always a plus.

Some dental labs may charge more for a screw retained restoration as it takes some additional steps for them, including bonding the crown and abutment together. If you have a good relationship with your lab, as we do, they may not charge above their traditional implant crown fee.

Jason Scorza, DDS Rocklin, CA

Flapless Implant Placement

With the right situation, placing an implant with a flapless approach can be a benefit to both the patient and the doctor. Having a good CBCT scan is essential to ensure ample buccal-lingual width of bone and proper implant angulation. I also only want to consider this procedure if there is ample attached gingiva around the site to ensure proper healing and long term stability of the gums around the implant. A clean tissue punch will ensure a tight seal around the healing abutment to minimize inflammation and contamination of the exposed underlying



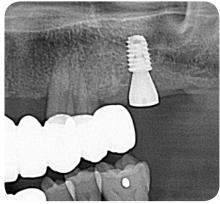




bone. I then use a long shank 2mm ball diamond bur to score the exact bulls eye center of the punched area to guide my initial drill. Another secret is to use the ball diamond to buzz around the crest of the bone to remove any periosteal tags or epithelial remnants to provide a clean bone perimeter. Healing is amazing if done right. Since minimal tissue was disrupted by a flap, there is minimal inflammation and almost zero post operative soreness. Reduction of inflammation will minimize crestal bone breakdown and ultimately lead to a successful final implant utilizing a relatively simple procedure.



Charles Smurthwaite, DDS Rocklin, CA



Efficient Crowns

Working efficiently and properly utilizing precious chair and doctor time is a hallmark of any busy dental practice. One nugget I learned from a mentor was to begin fabricating the crown temporary prior to taking the final impression. After packing cord, have the assistant take the temporary crown impression and start trimming it for later cementation. This will allow the the cord time to properly obtain hemostasis and also give you an extra few minutes that you can do a quick hygiene check or jump to another room and numb a patient. Be sure to clean the prep off thoroughly to not interfere with the setting of your impression. The temporary crown will be ready to go as soon as the impression is set and no time is wasted.

Gaetan Tchamba, DDS Dixon, CA

Purchasing a Practice

I had a nightmare of an experience purchasing my first dental practice. For anyone buying an existing practice, spend the money and time to hire your own representation and do thorough diligence to determine the appropriate value of the practice. Do not rely on the seller's evaluation of the practice value. Hire an accountant to pour over the books. Hire a lawyer to review the lease and sales agreement. Make sure that they are experienced in our particular field. This investment can save you a lot of stress down the road and or even financial ruin.

Benedict Yoong, DDS Ventura, CA

Weaning off a PPO

I often have colleagues ask about dropping a PPO contract and transitioning toward an insurance independent practice model.

Start by crunching numbers to determine how different scenarios may play out financially. When canceling a contract you can expect to lose some patients. However, you may be surprised at the number of patients you can lose and still come out ahead financially because the patients you retain will be paying UCR fees.

To increase your odds of patient retention you should be confident that patients because you are on their network list. If your practice does not have strong patient relationships, you should work toward this goal prior to dropping a contract.

You should have in-person conversations with patients over at least a 6-month period of time prior to dropping the contract with their plan. You should be thoughtful and authentic, explaining how your decision will allow you to continue to provide the

It's critical that you have a supportive team who are well prepared to reassure patients that they can still use their plan in your practice, that you will still handle insurance claims for them, and that they will receive a check from their plan about a week after their appointment if the plan Patients need reassurance that you will still be their advocate in helping them get the plan benefits that are due to them.

Each practice has different demographics, relationships, so each practice must decide whether dropping a plan is right for them. Finally, I highly recommend the services of an experienced practice management consultant to help a practice through any major transition.

Natasha Lee, DDS San Francisco, CA

A Few of my "Nuggets"

One of the more annoying moments in dentistry is when you are working in one area of the mouth and the patient complains that the water is making their other teeth hurt. I've even had to numb an opposing arch in order to work on a patient. It was actually a patient who recommend to me that I "squirt some of that rubber stuff" over the offending teeth to shield them. I injected a strip of blue bite along the exposed root surfaces and it worked great.

When doing a Class 2 composite on a periodontally involved tooth, it can be hard get the wedge to seal that large embrasure, even with the largest wedge available. Instead of double wedging which may create an odd anatomical embrasure or open contact, I will wrap a wedge in several layers of teflon tape. This adapts well to the space and leads to nicer anatomy.

I am fairly liberal about adjusting the opposing cusp when I do a crown. I just let the patient know that the reason the tooth broke or cracked in the first place was because of the opposing tooth. This will reduce potential lateral forces on the new crown and give the lab more room to work. Also many times areas of food impaction or open contacts can be

solved by rounding an opposing cusp. So far I have never run into a patient who wouldn't let me adjust the opposing tooth.

Just tell them to Google "worn teeth due to grinding" and once they see those horrific pictures they are very compliant about night guard wear.

Identifying bruxers often happens when they are rather young. I like to diagnose these patients early and get them to wear the appropriate appliance while their teeth are still in good shape rather than wait until the enamel is worn off. Showing them the usual pictures of wear facets, thinned incisors, flat molars, etc..., I have found is the most effective thing. Just tell them to Google "worn teeth due to grinding" and once they see those horrific pictures they are very compliant about night guard wear.

Pamela Wong, DDS Dublin. CA



Trustee Report





March 6-7, 2020

Highlights of the CDA Board of Trustees Meeting

Wallace Bellamy, DMD & Adrian Carrington, DDS

The CDA BOT met on March 6th and 7th. The Board received organizational highlights from Peter DuBois, the executive director.

CDA will be hosting the Western States Presidents Conference. This is its 40th year and includes 15 states.

All travel will be suspended through May in response to COVID-19 concerns. Meetings will be held via teleconference.

The Board approved incumbents for the CDA Foundation board, TDIC/TDIC IS Board, CDA Presents Board of Managers as well as Membership, Peer Review, Government Affairs and Judicial Councils.

The President's appointments were ratified for a workgroup to refine the board composition recommendations using the 2019 reference committee report.

Dr. Jay Kumar, California State Dental Director, gave an update on the utilization of Prop 56 funds. The target areas included:

- Childhood disease prevention.
- Fluoridation.
- Oral health literacy.

Critical to the process and the biggest challenge has been access to current data. They are transitioning from the planning to action phase. Booths will be set up at CDA Presents and counties will be present to recruit dentists to rural areas.

Dr. Maritza Cabezas, Los Angeles County Dental Director, bookended Dr. Kumar's presentation with a very engaging synopsis explaining how her team identified and was in the process of impacting the dental health, literacy and access for residents of 'Dental Deserts' of Los Angeles County. We encourage you to Google 'Dental Deserts of Los Angeles County Safety Net'.

CDA will be embarking on the third survey, 'Mind of the Dentist', with Edge Research. Member research. As we have learned previously, this survey provides

valuable insight into members' priorities. This directs CDA in focusing on the types of programs and services that are of greatest interest to members. CDA is looking to conduct the research this year and hopes to glean enough responses to be a statistical representation of our membership.

CDA is engaging with leadership of specialty organizations regarding Delta Dental fee reduction scheduled to take effect this summer. President Richard Nagy released an informational video in this regard.

The ADA 13th District Delegation recommendations were approved and notifications are in the mail.

Updates were received from TDIC and TDSC. Written reports were received from CDA Boards and Councils.

Next CDA Board of Trustees Meeting: June 12-13, 2020





WESTERN PRACTICE SALES

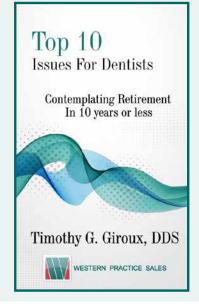
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ASK THE BROKER

How do you determine the listing price of my practice?

The single-most important factor in determining the practice sales price is the collection total of the previous calendar year. Lenders and Buyers like to see stability without large variances from year to year. It should be obvious that steady, slight increases in revenues are always better than even the slightest of decreases. Poor performance of one of three years should not affect pricing, unless it is the last calendar year that shows a significant drop. Therefore, try to maintain a stable practice, make sure you finish strong and make all your December deposits for that last year you will be filing!

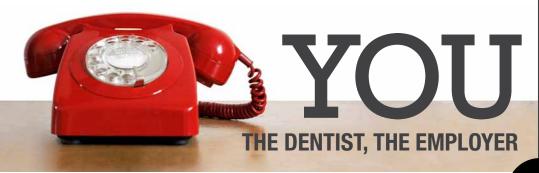
Practices are priced based heavily on gross receipts. Let's work through some scenarios and options. If you plan to practice 2-3 more years, it is not worth investing extra money in the practice. In this case, I would just advise finishing strong, especially to reflect your last tax return which will be filed. If you plan to practice approximately 5 years, spending large amounts of money for new technology may not necessarily return the

investment unless it helps to increase your production. However, this being said, purchasing new equipment may increase your enjoyment of practicing dentistry and therefore be a worthwhile investment.

With 8-10 years remaining to practice, modernizing the practice with the latest and greatest is generally a great idea. Leasehold improvements typically last 5-8 years, so making the investment at this time to spruce up the office will enhance the desirability of the sale. It may also give you greater satisfaction of working in a first-rate environment for the entire duration of the leasehold improvements. Most importantly, since practice values are based on gross receipts, keep up the good work!

With factors affecting the current practice market such as a large number of "Baby Boomers" choosing to retire coupled with a lower percentages of Millennials wanting to own dental practices, it is important to make decisions now that will help your practice stand out from the rest when you decide to sell! Call or email us today for a free copy of Dr Giroux's book "Top Ten Issues for Dentists Contemplating Retirement in Ten Years or Less".

Timothy G. Giroux, DDS is currently the Owner & Broker at Western Practice Sales and a member of the nationally recognized dental organization, ADS Transitions. You may contact Dr Giroux at: wps@succeed.net or 800.641.4179 Paid advertisement



YOU ARE A DENTIST. You are also an employer. Employee evaluations, hiring and firing, labor laws and personnel files are an important part of that. This monthly column, will offer current employment law information pertinent to you the dentist, the employer.

SDDS HR Hotline NEW EXCLUSIVE NUMBER FREE TO SDDS MEMBERS!

888.784.4031

Harassment Prevention Trainings

By the California Employers Association

Employers are well aware that sexual harassment is unlawful under both California and federal law, but that doesn't stop the problem from occurring. In fact, statistics show that sexual harassment claims have been on the rise in recent years. And it's not just sexual harassment that's unlawful; harassment based on any protected class, such as race, national origin, sexual orientation, age, etc. is unlawful.

Employers need to remain proactive and they have an ongoing affirmative duty to prevent and promptly correct workplace harassment.

You have requirements to follow at hire as well as during employment:

• Provide all employees with an up-todate harassment, discrimination and retaliation prevention policy (and an acknowledgment page for them to sign)

- Post the required DFEH poster, which includes information on the illegality of sexual harassment. Employers with 15 or more employees must also post the federal Equal Employment Opportunity poster. (Both are included in CEA's California/Federal Employment Law Poster.)
- Distribute a pamphlet on sexual harassment to all employees at the time of hire. (CEA's new hire packet has all the forms you will need.)

What about training requirements?:

• California businesses with 5 or more employees MUST provide harassment prevention training every 2 years (SB1343). Employees are required to have 1 hour of training. Supervisors and Managers are required to have 2 hours of training.

- Training must be completed by January 1, 2021.
- If you promote someone into a Supervisor role, they must receive the two (2) hour training within six (6) months of assumption of the position.
- Temporary workers employed by a temporary agency must be trained by the temporary agency, not the client.

Let CEA help! From Harassment Prevention Training and Employee Handbooks to Investigations and HR Audits, CEA is here to offer personalized support and service to your California businesses.

Upcoming Harassment Prevention Training Webinars

California businesses with 5 or more employees MUST provide harassment prevention training every 2 years (SB1343). In August 2019, SB 778 went into effect, requiring employers to provide training by January 1, 2021.

This instructor-led webinar meets the requirements of SB1343 and SB778. It covers all forms of sexual harassment. Other types of prohibited harassment, discrimination, retaliation and abusive conduct will also be covered in an interactive format.

For Employees - all employees must have one hour of harassment prevention training before January 1, 2021.

June 17, 2020 • September 16, 2020 November 11, 2020

12-1pm • 1 CEU, Core • \$44 each

For Supervisors/Employers - all supervisors/ employers must have two hours of harassment prevention training before January 1, 2021.

April 22, 2020 • June 9, 2020 September 22, 2020 • November 12, 2020

12-2pm • 2 CEU, Core • \$59 each

HR Webinar

Presented by California Employers Association

One hour online and audio seminar, you will only need a telephone, cell phone and/or computer (computer not required). All you need to do is dial, listen and ask questions if you desire. Sign up online at sdds.org

HR Webinar: CSI for HR -**Investigating Workplace Problems** May 20th • 1 CEU, 20% • \$59

Join us as we discuss the tools necessary to avoid liability in hiring decisions, workplace investigations and termination decisions. Learn how to assess the credibility of witnesses during internal investigations and what pitfalls to avoid. At the end of the day, the truth may not be discoverable, but the legal standards for basing your decisions are attainable.

the Time For... SDDS ELECTIONS

NOTICE OF ANNUAL MEETING & ELECTIONS

Elections will be held at the May 12, 2020 General Meeting

The Leadership Development Committee is tasked with guiding the future of SDDS by evaluating and nominating leaders for our organization. The committee met in the first quarter of 2020 and considered a very strong slate of candidates. We are pleased to report that the outlook is good with the following members listed below being nominated for 2021. SDDS is only as good as its volunteers and we appreciate all who give back to our organization.

Bryan Judd, DDS (Chair of the Leadership Development Committee)



SOCIETY SLATE OF NOMINEES

SDDS EXECUTIVE COMMITTEE

To be Elected:

President: Volki Felahy, DDS

President Elect/Treasurer: Wes Yee, DDS Secretary: Jagdev Heir, MD, DDS

Immediate Past President: Carl Hillendahl, DDS

TRUSTEE

To be Elected: Continuing:

Viren Patel, DDS Wallace Bellamy, DMD

BOARD OF DIRECTORS

To be Elected (1st Term):

Dean Ahmad, DDS Nima Aflatooni, DDS

Kart Raghuraman, DDS

To be Elected (2nd Term):

Brock Hinton, DDS Kevin Keating, DDS, MS

DELEGATES TO THE CDA HOUSE

To be Elected:

Dean Ahmad, DDS (2020-2021) Nima Aflatooni, DDS (2020-2021)

Lisa Dobak, DDS (2020-2021)

Jagdev Heir, MD, DDS (Secretary Elect) (ExComm)

Amar Pawar, DDS (2020-2021)

Karthic Raghuraman, DDS (2020-2021)

Continuing:

Bryan Judd, DDS (Ex Comm)

Volki Felahy, DDS (ExComm)

Carl Hillendahl, DDS (ExComm)

Viren Patel, DDS (2019-2020)

Hana Rashid, DDS (2019-2020)

Morton Rosenberg, DDS (2019-2020)

Stephanie Sandretti, DDS (2019-2020)

Wes Yee, DDS (ExComm)

GET SIGNED UP FOR THE MAY GENERAL MEETING TODAY!

Continuing:

Craig Alpha, DDS

Lisa Dobak, DDS

Hana Rashid, DDS

Tuesday, May 12, 2020

5:45pm: Social & Table Clinics

6:45pm: Dinner & Program

Hilton Sacramento Arden West (2200 Harvard Street, Sac)

To register fill out the insert in this issue or head to sdds.org/events/gm-may2020/

This event date may be affected by the developments from COVID-19.

Taking the Bite Out of California's Tooth Decay

Presented by Jayanth Kumar, DDS; California State Dental Director (SDDS Member)

We are honored to bring Dr. Jay Kumar (our very own SDDS member!) to this GM to discuss the status of oral health and future oral health strategies for our state. Dr. Kumar will provide practitioners with an understanding of the state oral health planning process and the roadmap it provides for improving oral health in California.

- To understand the magnitude of oral health problems in California
- To discuss the objectives and strategies of the California Oral Health Plan
- To describe the role practitioners can play in implementing the strategies

Member Benefits and **Services Task Force**

Chirag Vaid, DDS Member Benefits and Services Force Chair

We are very fortunate to have such a wonderful dental community in Sacramento and SDDS is a great resource for both dental professionals and patients. It may not come as a surprise to know our market share of membership is one of the highest in the country at 85%. The SDDS Board of Directors has assigned a special Task Force to assess the benefits and services SDDS provides to our members and suggest improvements and additions. Our goal is to make members aware of the existing services that members may not be aware of.

We have a few meetings this year where we are looking to make improvements, but understand we may not have all the answers. If you have ever thought of a benefit that you want to see us provide, please let me know, and the committee will do our best to do so. Thank you in advance for your input and we look forward to working hard for all of you!

Do you have suggestions about what benefits or services you'd like SDDS to provide?

Email your suggestions to the Member Benefits and Services Task Force Chair, Dr. Chirag Vaid at: c.vaid.dds@gmail.com

Committee Members

Chirag Vaid, DDS Lisa Dobak, DDS Nima Aflatooni, DDS Nancy Archibald, DDS Amardeep Bains, DMD, BDS Sarwandeep Bath, DDS Andrea Cervantes, DDS Darrell Chun, DDS Kevin Keating, DDS, MS Lila Kim, DDS Marina Milstein, DDS Aneel Nath, DDS Karthik Raghuraman, DDS Abhishek Raythatha, DDS Ramona Rivera, DDS Brittany Vacura, DDS Wesley Yee, DDS

2020 SDDS Committees Schedule

Standing Committees

CPR Committee Jan 22 • Feb 24 • Apr 25 • Aug 14 • Nov 6

Nominating/Leadership

Development

Jan 27, Work Completed

Peer Review Committee

Feh 25

Foundation

Foundation Board

Apr 7 • Nov 17

Other

Sac Pac

May 18

CDA House of Delegates

Advisory Committees

Continuing Education Advisory Feb 25

Mass Disaster/Forensics Advisory

Fluoridation Advisory

Yolo County Schedule as needed

Nugget Editorial Advisory Jan 21 • Sep 29

Strategic Plan Advisory Schedule as needed

Budget and Finance Advisory Schedule as needed

Bylaws Advisory Schedule as needed

Legislative Advisory Schedule as needed

New Dental School Advisory

Leadership

Board of Directors Jan 7 • Mar 3 • May 5 • Sep 1 • Nov 3

Executive Committee Feb 14 • Apr 3 • Aug 21 • Oct 2 • Dec 4

Task Forces

Member Benefits/Services

Feb 18 • Sep 29

Oral Health/Prop 56 Initiatives Mar 13 • Oct 2

Ethics

Jan 21 • Mar 16 • Sept 14

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*Initial five- and 10-year rate includes 1.00% discount for auto-pay from a Banner Bank Business Checking Account. Rate to adjust to Prime + 1.00% following the five- or 10-year fixed rate. Loan to value up to 80%. Loan fee 0.50%. Borrower to pay closing costs. Financing subject to credit approval. Available for applications submitted between March 2 through May 1, 2020.

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SDDS Foundation

Get Ready to Golf for a Good Cause

The SDDS Foundation's Annual Golf Tournament is coming up next month! On May 8th please plan to play, invite your friends (dentists and non-dentists) for a day of golf, fun and games, and camaraderie - all to support the Foundation! Here are the ways to support the golf tournament:

- Put a foursome together invite your dentist and/or nondentist friends to introduce them to our Foundation
- Sign up as a single we'll put you with a fun foursome

- Sponsor a tee or green if you can't attend
- Donate a raffle prize!
- Be a sponsor lots of great sponsorship opportunities still available

The golf tournament includes breakfast and lunch, snacks and libations from the sponsors on the course and loads of fun!

Please sign up for his awesome annual event! It's sure to be a great time and, best of all, it supports our wonderful Foundation and all the great projects it does for our community!















This event and date may be affected by the developments from COVID-19.

Swing for Smiles!

Get signed up today for our Annual Golf Tournament to benefit the Sacramento District Dental Society's Foundation! Golf for a good cause!

May 8, 2020

Contests! • Drinks On The Course! • Raffle Prizes! • Golf Souvenirs!

DENTAL PRACTICE BROKERAGE **TEAM SACRAMENTO**

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This is a sample of our listings.

AUBURN/FOOTHILLS AREA: Fast-growing, 7 Ops, 6 Equip, 30+ yrs Goodwill, 2019 GR on track for \$1.2M+ #CA632

FAIRFIELD AREA: 5 Ops, 4 Equip, Digital, Paperless, Strong hyg. prog, 2018 GR \$840K on 4 day/wk #CA655

FOLSOM/RESCUE/EL DORADO HILLS AREA: 5 Ops+RE, Modern, Digital. 2018 GR \$773K. Condo available for purchase. #CA581

GREATER SACRAMENTO: Desirable area, 38 yrs Goodwill, 4 Ops, Digital, 6 hyg. days/wk. 2018 GR \$1M+ on 4 day/wk #CA656

GREATER SACRAMENTO: PPO/Condo, 33 yrs. Goodwill, 4 Ops, Digital, I/O Cam. #CA561

LAKE TAHOE AREA: Resort area, 6 Ops, 5 Equip, Digital, 42 yrs Goodwill. 2019 GR \$579K on 22 Dr. hrs/wk #CA608

LAKE TAHOE AREA: Endo, 3 Ops, Digital, CBCT, 28 yrs Goodwill #CA602 NORTH SACRAMENTO AREA: 50+ yrs Goodwill. 3 Ops, 4th avail. 2019 GR \$616K on 33 avg. hrs/wk. #CA667

ROCKLIN/LINCOLN AREA: 10 Ops, 6 Equip, 2018 GR \$747K on 4 day/wk #CA641

SACRAMENTO: Price Reduced! Hi-traffic, 4 Ops, under 5% Delta Premier, 2018 GR \$607K on 30 Dr. hrs/wk #CA590

SACRAMENTO AREA: GP & Specialty HMO/some PPO+RE, 9 Ops, Digital, I/O Cam, 2018 GR \$680K. 5,000 sf bldg. for sale. #CA567

SACRAMENTO AREA: 4 Ops+RE, 1 add'l plumbed, 47 yrs Goodwill, 24 Dr. hrs/ wk. 2018 GR \$574K #CA603

STOCKTON AREA: 6 Ops+RE, 30+ yrs Goodwill. 2018 GR \$1M+ #CA616 VACAVILLE AREA: 5 Ops, 28 yrs Goodwill, Dentrix, 2019 GR \$556K #CA645



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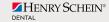
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YOU ARE A DENTIST. You've been to school, taken your Boards and settled into practice. End of story?

Not quite. Are you up to speed on tax laws, potential deductions and other important business issues?

In this monthly column, we will offer information pertinent to you, the dentist as the business owner.

5 Reasons Your Practice Should be on Instagram Reprinted with permission from Rita Zamora (ritazamora.com)

#1 The Numbers

Instagram is HOT! The social media platform now has more than 1 billion monthly active users, and was the fastest growing social network in 2018. Over 60 percent of users log in to Instagram daily, making it the second most engaged social network after Facebook.

#2 Engagement

If the explosive growth doesn't get your attention, how about engagement? Engagement, the interaction of users with content on the platform, is equally impressive. A study by Forrester showed that Instagram's brand engagement is 58 times higher than Facebook's, and 120 times that of Twitter. Wow. Rita Zamora Connections' client experience often reflects these trends, with significantly higher organic engagement rates on Instagram over Facebook for clients active on both platforms.

#3 Demographics

In a word: Millennials. A recent eMarket report shows that 64% of U.S. Millennials are active on Instagram. Millennials are the population roughly between 18-34 year old, who represent a quarter of the U.S population and carry tremendous buying and decision making power.

#4 Local & Location

As an important part of the local community, it's important for a dental practice to have a local presence online. Instagram has been a godsend. Why?

Instagram loves local. The simple act of adding a custom location tag to Instagram posts generates significantly higher engagement, according to a report from Simply Measured.

#5 Instagram is Fun and Different from Facebook

Instagram is a great way for your office to share its personality through pictures and videos. This is an opportunity to connect with a different audience than you may have on Facebook.

Getting Started Now

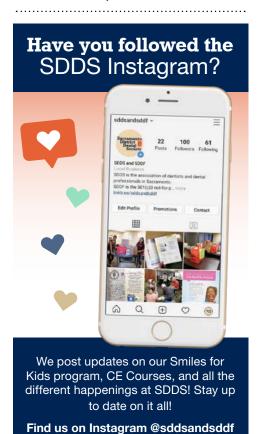
Here are few tips for a fast start.

- Claim your username on Instagram... before someone else does. Ideally, you want consistent branding across your digital presence. So if your practice is called Anderson Dental, that is the username you should claim. If someone has already claimed "your" ideal username, consider adding your location, such as "Anderson Dental_ Charleston.'
- Use only high quality eye catching images! Instagram is a visual platform and users have a keen eye for sharp
- Use a single Instagram filter. Achieve a measure of visual integrity by using a single filter. Research shows that when in doubt, the Mayfair filter is a safe bet.
- Keep your brand on point and consistent when viewed together. Think

about how your images fit together on your photo grid when viewed at one time. Use Stories to post images that don't fit your grid plan.

• Be a student of great social media. Study the Instagram accounts of brands or even other practices you admire.

Have fun! If you need help just reach out to us, we're here for you!



March 3, 2020

Highlights of the Board Meeting



Dr. Hillendahl called the meeting to order at 6:06pm. There were no conflicts declared. Dr. Hillendahl discussed the following items:

GMC / Denti-Cal / SDDS & CDA: Gov. Newsom is proposing eliminating GMC and CDA is supporting this. Since Sacramento Co. is the only mandatory GMC area, our efforts the last 10 years have been successful in holding the plans accountable, navigating patients to their dental homes and improving provider numbers. However, utilization is still lower than regular FFS Denti-cal (41%) and it costs double, according to CDA. SFK has improved (fewer patients and less "free care") due to the plans participation and partnership with SDDS. Early Smiles, funded by the plans, screens 25,000 kids, applies sealants and navigates kids to care - this has really reduced SDDS calls and URGENT needs. Dr. Hillendahl and Cathy have been in high level discussions with CDA. Utilization for GMC is still lower than the state average for FFS. It fails in all 12 metrics, according to CDA and DHCS. SDDS has done a great deal to improve the GMC program since 2010. Cathy Levering and the SDDS team have put so much effort to make GMC work, holding the plans accountable, recruiting more providers, recruiting partners and supporters, and care coordination and navigation for families. Dr. Patel (Foundation President and incoming Trustee) discussed that this decision may affect our SFK. Eliminating GMC may increase our numbers once again - but we should stand firm for those who have Denti-Cal to use it. Now that we know that 95% have Denti-Cal, we can move forward referring all patients to DHCS and their "help line" and warm handoff.

• It was M/C to take a neutral position and let the process take its course. SDDS' main interest is to assure that the patients are transitioned well, including navigation and care coordination.

Secretary's Report

Dr. Yee reported that the year end market share was 85.2% - the best ever for SDDS. The Board will be working on the nonmember list - we currently have only 315 nonmembers!

Treasurer's Report

Dr. Hillendahl and Dr. Felahy reported on Fiscal Year End 2019. We had another great year and budget projects were 99.6% of what we planned! surplus again this year, and the budget projects were almost exactly what we had planned! It was M/C to approve the Finance Committee Recommendations:

- \$20K to each Operating and Building Reserve Funds
- \$10K to SDDF
- \$500 to CDA Cares to be held in Long Beach this summer
- Approve the updated investment policy for 2020

Our CPA firm, Brandon and Keith Rood, Rood & Associates, CPA, presented to the Board. They have been our CPAs since 1994 and assured the Board that we are on track, compliant with the laws and in good financial shape. They have completed another Financial Review for 2019 (required by the DTI, as was also done in 2018). They assured the Board that they watch our numbers to assure we stay within the non profit legal rules, income rules, etc. They reported on several aspects of SDDS finance:

- Dues are only 31% of our total budget (this is REALLY good!)
- Program is a third of our budget it is important to support our CE programs
- Non dues revenue (events, sales, advertising, vendors) is a really important aspect of our budget and we are doing well
- · All funds are unrestricted, but our Board may designate funds as voted



Wesley Yee, DDS Secretary

- and needed, as per our budget projections
- SDDS is all good with our tax situation
- SDDS checks and balances are in line
- Thank you Keith and Brandon we are in good hands!

Old Business

- Bylaw and policy task forces - reviewing and will make recommendations in May.
- LDC/Nominating Committee report - Dr. Judd reported on the slate of nominees for the 2021 term. Congratulations to Dr. Heir (secretary), Dr. Patel (Trustee), and all the Board members! It was M/C to approve and move the slate forward to the election process in May.

Executive Director's Report

Cathy reported on all upcoming program and meetings. MidWinter Convention was another great event with more than 750 in attendance (625 doctors and staff and 150 exhibitors). Next year's dates are February 4-5 and will again be at McClellan. Thanks to all the sponsors and attendees - and GREAT speakers!

New Business... New Ideas

Bylaw changes - the Board approved bylaw changes to make language consistent regarding the Annual meeting section and the Elections section, changing our elections for Board and officers to May, but leaving the language arbitrary for flexibility.

Adjournment

The meeting was adjourned at 8:35pm.

Next Board Meeting: May 5, 2020 at 6pm

Sacramento District Dental Society



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TOTAL MEMBERSHIP

(as of 3/17/20:)

1,787

MARKET SHARE:

85.2%

RETENTION RATE: 96.1% ENGAGEMENT RATE: 94%

TOTAL ACTIVE MEMBERS: 1,404

TOTAL RETIRED MEMBERS: 306

TOTAL DUAL MEMBERS: 10

TOTAL AFFILIATE MEMBERS: 11

TOTAL STUDENT MEMBERS: 8

TOTAL CURRENT APPLICANTS: 0

TOTAL DHP MEMBERS: 48

TOTAL NEW MEMBERS FOR 2020: 27

New Members

April **2020**

Welcome Back!

JAMES CONNORS II, DMD, MD

Oral Surgery

Dr. Connors earned his dental degree from University of Louisville in 1998 and earned his specialty of Oral Surgery from Case Western Reserve University in 2003. He currently practices at Sacramento Oral Surgery in Sacramento.

VENIAMIN DRONOV, DDS

Transfer from Santa Clara Dental Society

General Practice

Dr. Dronov earned his dental degree from CA-UOP Arthur A. Dugoni School of Dentistry in 2018. He is currently practicing in Lodi at Dentists of Lodi.

JAMES EDWARDS, DDS

Transfer from Stanislaus Dental Society

General Practice

Dr. Edwards earned his dental degree from Loma Linda University in 1998. He currently practices in Sacramento.

MIRANDA KORE, DDS

General Practice

De in Auburn.

Dr. Kore earned her dental degree from Loma Linda University in 2017. She currently practices at Chap-

Welcome Back!

NOLAN KORANDO, DDS

Transfer from San Joaquin Dental Society

General Practice

Dr. Korando earned his dental degree from Loma Linda University in 2009. He currently practices at Crystal Dental in Sacramento.

COLBY MEEDER, DDS

General Practice

Dr. Meeder earned his dental degree from University of Nevada-Las Vegas in 2014. He currently practices at Western Dental in Folsom.

PATRICK PACYGA, DDS

General Practice

Dr. Pacyga earned his dental degree from University of Washington in 2015. He currently practices at the Smile Shop in South Lake Tahoe.

NGOC PHAM, DMD

General Practice

Dr. Pham earned her dental degree from Tufts University School of Dentistry in 2016. She currently practices at My Tooth Spa Dentistry And Orthodontics in Fair Oaks.

CHAU MY PHAN, DDS

General Practice

Dr. Pham earned her dental degree from Tufts University School of Dentistry in 2016. She currently practices at My Tooth Spa Dentistry and Orthodontics in Fair Oaks.

SAMINA QUIDWAI, DDS

General Practice

Dr. Quidwai earned her dental degree from University of Washington in 2015. She currently practices at the Smile Shop in Tahoe.

NADIA SHAHEEN, DDS

Transfer from San Joaquin Dental Society

General Practice

Dr. Shaheen earned her dental degree from UCSF School of Dentistry in 2018.

ALBERTO VARGAS MARTINEZ, DDS

General Practice

Dr. Vargas Martinez earned his dental degree from Indiana University in 2019.

BIRGITTA WARVAROVSKY, DDS

Oral Radiology

Dr. Warvarovsky earned her dental degree from UOP Arthur. Dugoni School of Dentistry in 2007. She went on to earn her specialty in 2013 from University of Texas-Houston.

Pending Applicants:

Maha Almusawi, DDS Cuauhtemoc Gonzalez, DDS Yun Hwan Eric Oh, DDS

Congratulations

to Our New Retired Members!

Frederick Wenck, DDS Clifford Chow, DDS Russel Sutliff, DDS

welcome to SDDS's new members, transfers and applicants.

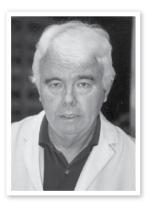
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Central Valley
Well Being Committee . . . (559) 359-5631

In Memorian



Dr. Patrick Melarkey passed away on February 25th at the age of 88. He started membership with SDDS in 1961. He worked as a dentist for 46 years, caring for children, the disabled, those with means and those without. He was an active part of the Sacramento community, serving on the Board of Supervisors, and as the first team dentist for the Kings. Dr. Melarkey was concerned about the preservation of Sacramento's architectural heritage, particularly the many Victorian homes in Downtown and Midtown Sacramento. His son, Dr. William Melarkey, continues his dental legacy serving the Sacramento community.



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Job Bank

The SDDS Job Bank is a service offered only to SDDS Members. It is published on the SDDS website and provides a forum for job seekers to reach other Society members who are looking for dentists to round out their practice, and vice versa. If you are a job seeker, associate seeker, selling or buying a practice, contact SDDS at (916) 446-1227. For contact information of any of the job bankers please visit www.sdds.org.

ASSOCIATE POSITIONS AVAILABLE

Monika Gugale, DDS • Sacramento • F/T • GP

Nima Aflatooni, DDS • Sacramento • P/T • GP

Quynh Pham, DDS • Sacramento • P/T • GP

Ashley Joves, DDS • Folsom, Rocklin • P/T • GP

Thomas Ludlow, DDS • Sacramento • P/T • GP

Thomas Ludiow, DDS • Sacramento • F/T • GF

Marina Mokrushin, DDS • Folsom, Rocklin • GP Raj Zanzi, DDS • Sacramento • PT • GP/Ortho

Jonathan Chan, DDS • Sacramento • PT • GP

Christopher Chan, DDS • Sacramento • PT • GP

Elica Health • Sacramento • FT • GP

Mignon Mapanao, DDS • Sacramento • PT/FT • GP

Sunny Badyal, DDS • Sacramento • FT • GP

Kids Care Dental • Sac/Stockton • PT/FT • Oral Surgeon

Capitol Periodontal Group • Sacramento • FT • Perio

Childrens Choice Pediatrics ● Sacramento ● PT/FT ● Pedo

Mark Redford, DMD • Roseville/Granite Bay • PT • GP

Kevin Chang, DDS • Roseville • PT • GP

Michael Hinh, DDS • Sacramento • PT • GP

R. Bruce Thomas. DDS • Davis • PT/FT • GP

Make A Smile • Sacramento • PT/FT • Pedo/Ortho/Endo/OS

SmileTime • Sacramento • PT/FT • GP

Jacqueline Delaney, DMD • Truckee • FT • GP

Paul Raskin, DDS • Sacramento • FT/PT • Prosth

Kids Care Dental • Bay Area • Ortho

Sean Avera, DDS • Auburn • Perio

Ana Maria Antoniu, DMD • Sacramento • FT/PT • GP

Amy Woo, DDS • Sacramento • PT • GP/Endo

Christopher Schiappa, DDS • Pioneer • PT • GP

Eloisa Espiritu. DDS • Lincoln • FT/PT • GP

David Park, DDS • FT/PT • GP

Gilbert Limhengco, DDS • Natomas/Citrus Heights • PT • Endo

Kids Care Dental & Ortho • Calvine/Elk Grove • FT • GP/Ortho

Elizabeth Johnson, DDS • various Wellspace locations • FT/PT/Fill-In • GP

DOCS SEEKING EMPLOYMENT

Gaetan Tchamba, DDS • P/T Fill in/2 Thursdays a month

Erica Hsiao, DDS • P/T • Perio

Blake Moore, DDS

Behdad Javdan, DDS • PT • Perio

Bruce Taber, DDS • Fill-In • GP

Steve Murphy, DMD • FT/PT • Endo

Congratulations to ...

Tiffany Bal, DDS and her staff, on attending the SDDS Kings game! The staff and their guests had a ton of fun at the event and do it as their annual holiday outing! Look at the amazing shirts they had made! (1)

Ash Vasanthan, DDS, MS, on giving a presentation at the College of Dentistry, Ajman University, UAE! There were over 200 registrants for the event! Photo includes Dr. Vasanthan with the Dean and the Professor/HOD of Perio. (2)

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Vendor Member	The Dentists Supply Company (TDSC)
Dont	al Practice
vendor Member	Kids Care Dental and Orthodontics 27, 36
Educ	ation
Vendor Member	The Foundation for Allied Dental Education 36
676.67	Dr. Pieter Linssen
	ncial Services
Vendor Member	Banner Bank
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Vendor Member	Fechter & Company
Vendor Member	First US Community Credit Union
Vendor Member	MUN CPAs
Vendor Member	Thomas Doll
Vendor Member	US Bank
Hum	an Resources & Legal
Vendor Member	BPE Law Group
Veridor Merriber	Goldman Law Firm
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	ance Services
Vendor Member	Access Dental Plan
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Vendor Member	TDIC & TDIC Insurance Services 4, 37
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Vendor Member	
Vendor Member	Blue Northern Builders, Inc
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	tice Marketing
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SMILES FOR KIDS

VOLUNTEERS NEEDED: Doctors to "adopt" patients for Smiles for Kids for follow-up care



TO VOLUNTEER, CONTACT:

SDDS office (916.446.1227 • smilesforkids@sdds.org)

SMILES FOR BIG KIDS



TO VOLUNTEER, CONTACT:

SDDS office (916.446.1227 • sdds@sdds.org)



July 17-18, 2020 • Long Beach

TO VOLUNTEER: www.cdafoundation.org/cda-cares

AUBURN RENEWAL CENTER CLINIC

VOLUNTEERS NEEDED: General dentists, specialists, dental assistants and hygienists.

TO VOLUNTEER, CONTACT:

Dr. Steve Holm (916.425.6766 • sholm@goldrush.com)

THE GATHERING INN

VOLUNTEERS NEEDED: Dentists, dental assistants, hygienists and lab participants for onsite clinic.

TO VOLUNTEER, CONTACT:

Kathi Webb (916.743.5351 • kwebbft@aol.com)

CCMP (COALITION FOR CONCERNED MEDICAL PROFESSIONALS)

VOLUNTEERS NEEDED: General Dentists, Specialists, Dental Assistants and Hygienists.

TO VOLUNTEER, CONTACT:

CALL: (916.925.9379 • CCMP.PA@JUNO.COM)

EVERYONE FOR VETERANS

SDDS is partnering with the national program, Everyone for Veterans, to provide care for combat veterans and their families who cannot afford, nor have military coverage, dental care. Can you adopt a vet? Hope so! Call SDDS (916.446.1227), or email us (sdds@sdds.org), to help us with this wonderful program.

For More Information: everyoneforveterans.org/for-dentists.html

Classified Ads

EMPLOYMENT OPPORTUNITIES



Established private practice in Davis. CA is seeking a talented associate dentist to join our team. We are a state-of-the-art general dental office that also specializes in implant and cosmetic dentistry. The goal of our team is to provide quality dentistry to every patient and establish long lasting relationships. Strictly a fee for service practice. Full time position with potential to transition to practice ownership. Candidates should be passionate about continuing education in dentistry and motivated to provide the highest quality of care. Candidates with GPR's or other advanced training are greatly preferred. Candidates can expect a skills assessment evaluation. Please send resume to office@childressdental.com.

Kids Care Dental & Orthodontics seeks Orthodontists to join our teams in the greater Sacramento and greater Stockton areas. We believe when kids grow up enjoying the dentist, healthy teeth and gums will follow. As the key drivers of our mission—to give every kid a healthy smile—our dentists, orthodontists and oral surgeons exhibit a genuine love of children and teeth. A good fit for our culture means you are also honest, playful, lighthearted, approachable, hardworking, and compassionate. Patients love us...come find out why! Send your resume to talent@kidscaredental.com.

WELLSPACE HEALTH ORGANIZATION (an FQHC) is taking applications for fill-in/parttime/full-time dentists. Send your resume/CV to eljohnson@wellspacehealth.org.

Kids Care Dental & Orthodontics seeks Dentists to join our teams in the greater Sacramento and greater Stockton areas. We believe when kids grow up enjoying the dentist, healthy teeth and gums will follow. As the key drivers of our mission—to give every kid a healthy smile our dentists, orthodontists and oral surgeons exhibit a genuine love of children and teeth. A good fit for our culture means you are also honest, playful, lighthearted, approachable, hardworking, and compassionate. Patients love us...come find out why! Send your resume to talent@kidscaredental.com.

FOR LEASE



Rocklin dental office sublease 1.300 sf. 3 operatories, perfect for a startup; Roseville dental office lease 1,386 sf, 5 operatories, Fully improved move-in ready suites; Ranga Pathak 916-201-9247, Broker Associate, RE/MAX Gold, BRE01364897

Beautiful new building just completed in Auburn with optimal visibilty, ideal location and ample ADA parking. We will help design, finance, build and market your relocation! Lease with future purchase option. 2-11,000 sqft spaces available for your dream office! www.3130ProfessionalDrive.com

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EQUIPMENT FOR SALE



2003 Planmeca Promax digital Pan & Cephlometric X-ray machine in good working condition. Software included for Windows Vista and 7. Paid \$80,000 new. Asking \$2,500. Email dentistbryan@gmail. com or call 916-984-6747.

Nupro RDH Handpieces for Disposable Angles, 3 handpieces in box REF 740010 unopened \$1200. Salvin Centrifuge 1310 (for PRP), Like New \$500. SurgimasterII LED for Ultrasonic bone surgery with two handpieces and many tips, new in original aluminum case. \$3200. Contact jcopedds@gmail.com.

PROFESSIONAL SERVICES



Bookkeeping, payroll, & more! After 20+ years in the dental profession, I followed my interest into accounting. I'm offering bookkeeping, payroll, and work comp services. My business is cloud based. I'm a QuickBooks ProAdvisor and I use ADP, a highly respected international payroll company. I have an honors bachelor of science degree in accounting. Check out my business articles on Facebook @CherylsCloudAccounting. Contact me via email cheryl@cherylscloudaccounting.com or phone/ text 916-708-1503 for a free consultation. Cheryl Taylor, RDH #20310

DENTISTS SERVING DENTISTS - Western Practice Sales invites you to view our ad on pg 21 to claim a courtesy copy of Dr Giroux's latest book, Top 10 Issues for Dentists Contemplating Retirement in 10 years or less. Visit our website, westernpracticesales. com to view all of our currently available practices. 800-641-4179.

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Selling your practice? Need an associate? Have office space to lease? SDDS member dentists get one complimentary, professionally related classified ad per year (30 word maximum).

For more information on placing a classified ad, please call the SDDS office at 916.446.1227 or visit http://www.sdds. org/publications-media/advertise/

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SDDS CALENDAR OF EVENTS

APRIL

Courses have been rescheduled to Fall 2020. See upcoming Program at a Glance for more information.

MAY

Courses and events subject to change due to Covid-19. Check your email and Facebook for updates.

- 5 Board Meeting 6pm / SDDS Office
- 8 Swing for Smiles Golf Tournament

12 General Meeting
Taking the Bite out of California's
Tooth Decay

Jayanth Kumar, DDS; California State Dental Director Hilton Sacramento Arden West 5:45pm Social / 6:45pm Dinner & Program

- 20 HR Webinar
 CSI HR Investigating Workplace
 Problems
 California Employers Association
 12–1:00pm / Telecom
- 21 Dentists Do Broadway Come from Away

- Vendor Members The Best Member Benefit
 Roundtables Meet Our SDDS
 Vendor Members
 6:30pm / SDDS Office
- 29 Licensure Renewal Course
 California Dental Practice Act,
 Infection Control, OSHA Refresher
 Marcella Oster
 8:30am / SDDS Office

For more calendar info and to sign up for courses ONLINE, visit: www.sdds.org



Dental Day with the River Cats!

JUNE 18 **2020**

MAY **12**

General Meeting 3 CEU, CORE • \$75

Taking the Bite Out of California's Tooth Decay

Presented by Jayanth Kumar, DDS; California State Dental Director

We are honored to bring Dr. Jay Kumar (our very own SDDS member!) to this GM to discuss the status of oral health and future oral health strategies for our state. Dr. Kumar will provide practitioners with an understanding of the state oral health planning process and the roadmap it provides for improving oral health in California.

- To understand the magnitude of oral health problems in California
- To discuss the objectives and strategies of the California Oral Health Plan
- To describe the role practitioners can play in implementing the strategies

Bring your staff – it's going to be a great meeting!

TUESDAY 5:45PM-9PM 5:45pm: Social & Table Clinics 6:45pm: Dinner & Program

Hilton Sacramento Arden West (2200 Harvard Street, Sac)