

April 2021

the

Nugget

Dental Education
in the Age of COVID



Get Ready For Our UPCOMING EVENTS

APR
1

Harassment Webinar • Thursday, 12–1pm • \$39

Harassment Prevention Training – For Employees (Webinar) (1 CEU, Core)
Presented by California Employers Association

Training on how to prevent workplace harassment is now mandatory for almost all California employers (five or more employees), and the California Employers Association is here to help with Harassment Prevention Training that meets California's legal requirement.

This course is a 1-hour instructor-led session where employees will engage in discussions on all forms of sexual harassment (verbal, visual, and physical). Other types of prohibited harassment, discrimination, retaliation and abusive conduct will be covered in an interactive format.

APR
17

CPR - AHA BLS Blended Learning Course

Saturday, 3 Time Sessions
(8-8:45am, 9-9:45am, and 10-10:45am)

\$77.50 (\$31 paid directly to AHA for the online course and the other \$46.50 paid to SDDS for the skills check portion)

For the Healthcare Provider (4 CEU, Core)

The April CPR Course will be an AHA blended learning course. Blended learning is a combination of eLearning (online portion), in which a student completes part of the course in a self-directed manner, followed by a hands-on session.

There are three potential time slots for the skills test session on that day. When signing up you'll select your preference (note that we will do our best to accommodate your preference, but sessions may fill up).

APR
13

Online General Meeting (via Zoom)

Tuesday, 6–8pm • \$49

TWEAKED! ICE, ACEs & CPS: An Intertwined Relationship (2 CEU, Core)
Presented by Mitchell Goodis, DDS & Jennifer Berry, MS

Methamphetamine use is rampant! Everyone knows someone affected by Meth...Patients, friends, relatives, or worse: Our kids. Unravel the allure of ICE. Learn how Meth is cooked, smuggled, and purchased. Follow the path of destruction that Crystal leaves behind as we explore the allure, predisposition, addiction, neuropathology, physiology and psychology of drug abuse in easily understandable terms. We are all mandated reporters. Learn what happens to children after CPS is called on the scene.

Coming In May...

MAY
6

Big Day of Giving • Thursday, All Day

Donate to help support the Foundation's programs!

MAY
7

Swing for Smiles Golf Tournament

Friday, 7am-2:30pm

MAY
11

Online General Meeting • Tuesday, 6-8pm

Numb, Numb-er, and Numb-est: The Latest Anesthesia Pearls (2 CEU, Core) Alan Budenz, DDS

Courses/events may be affected based on COVID considerations and social distancing guidelines. If necessary, alternate plans will be offered.

SAVE THE DATE!

May 6, 2021

On May 6th donate to the
**Sacramento District
Dental Foundation**

Big Day of Giving

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Nugget Editorial Board

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Awards

International College of Dentists (ICD)

2020 • Platinum Pencil
Outstanding use of graphics
2020 • Golden Pen, *honorable mention*
Article / series of articles of interest to the profession
2020 • Special Citation Award
2019 • Special Citation Award
2019 • Golden Pen, *honorable mention*
2018 • Humanitarian Service Award
2017 • Special Citation Award
2016 • Golden Pen, *honorable mention*
2015 • Special Citation Award
2014 • Outstanding Cover, *honorable mention*
2014 • Golden Pen, *honorable mention*
2013 • Outstanding Cover

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AM Best Company rating effective February 2021. For the latest rating, access ambest.com.



President's Message



By **Volki Felahy, DDS**
2021 SDDS President

Always *Adapting*

So we have made it through our first year of practicing dentistry while in the COVID-19 pandemic. One year ago today, most of us were limiting our dental practices to only emergency care and waiting for information on the fate of dentistry during the pandemic. Fast forward to now, and there have been so many changes to our daily lives and the way we practice dentistry. One of those changes is tuning in to hear the Governor every Tuesday when he updates the state on the assigned color imposed per county. The multicolored system ranges from purple for the most restrictive tier to yellow for the least. The color that represents the level of virus spread dictates what is allowed in our communities that week. This year, I have lost my affinity for the color purple. It seems that in the Sacramento area, we have spent more of our time in the purple tier than in any other tier. I long

to see any other color than purple on the Tuesday pandemic updates. I miss our pre-pandemic reality with in-person dental meetings, CE events, and indoor dining. I also find myself suffering from an acute case of Zoom fatigue. This year has forced us to change the way we live and practice. We all have become exceptionally good at navigating and adapting to our new reality of living through a pandemic. As a dental community, we have also risen to the occasion and answered the call to help administer the vaccine in large numbers. There has been quite a bit of change and stress this year because of the pandemic. Now, could you imagine being in dental school today? When I reminisce about my days in dental school, I remember not only the great times and lifelong friendships I made but also the constant high level of stress: managing patients, didactic tests, and clinical thresholds. I am sure that

dental students today are experiencing similar stress. This year is unique for dental students and schools. Students have the added stress of managing pandemic restrictions. The schools have needed to adapt to effectively delivering instruction while managing the risks of the pandemic. This month, the *Nugget* is focused on the experiences of dental students, their education, and school in a world deep in a pandemic. I hope you enjoy this month's *Nugget* and that you continue to adapt. Hopefully soon, this will be a distant memory, and I will see you in person at one of our great CE meetings. ■

Volki Felahy

Follow SDDS on Social Media!

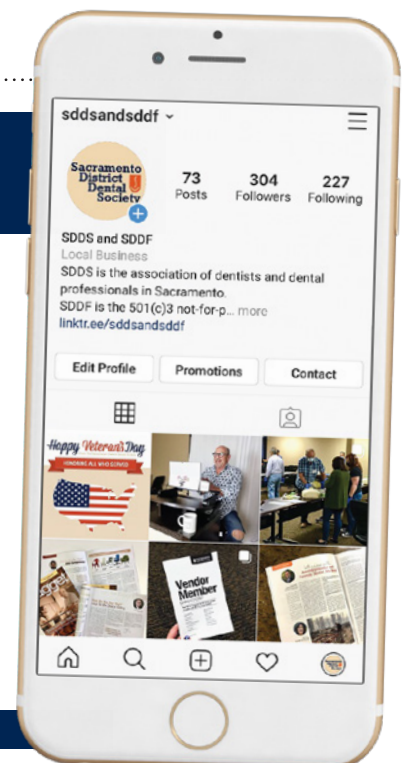
Want to keep in the know with everything happening at the Sacramento District Dental Society? Make sure to follow our Facebook and Instagram accounts to keep up to date!



Follow our Facebook to keep up to date on all of our upcoming events, for news relevant to the dental profession, and announcements!
facebook.com/sddsandf/



Follow our Instagram for behind-the-scenes photos of our courses and speakers, insight into SDDS and fun announcements!
instagram.com/sddsandsddf/





Not an April Fool!

By **Cathy B. Levering**
SDDS Executive Director

April 1st marks the beginning of my 21st year as the Executive Director of SDDS. Amazing that I began this journey on April Fool's Day. And my commitment was "just a few years."

Fast forward to today and we have seen this organization grow, strengthen, and get even better every year. Our membership continues to grow, the market share is amazingly great, our finances are stable, we have reserves, and our programs continue to expand, serving our members in all demographics, and pivoting as challenges confront us (i.e. COVID restrictions!). You will see in this issue (the Annual Report for SDDS) and in the May issue (the Annual Report for the Foundation) how great we are – I'm so proud of us!

I am proud to say that, as the 4th of only four SDDS Executive Directors in the history of SDDS, I am the longest serving ED. Yes, my goal was to last longer than the beloved Helen Hamilton!

Again, I was just going to stay "a few years" and help the Society through a reorganization and restructuring process. LOL.

And, personally, these past 20 years have been pretty eventful for me too, with good times, sad times, challenging times and memorable times...

- Both our kids graduated from college, got first jobs (and more), landed their 'dream jobs,' married, had kids and made me a Grandma to three darling grandkids.
- We lost three of our four parents.
- My husband, Bruce, had surgery on back, knees, sinus, prostate and upcoming hip (GOOD GRIEF!), kidney stones and a heart attack.
- My brother successfully battled breast cancer – 3 years ago.
- My son-in-law had a double lung transplant at age 40 (just 2 months ago) and complications continue – thank you all for your prayers!
- When I was hired, I played golf on Thursdays. My interviewers gave me the ok to continue that. Haven't played much golf since.
- The SDDS staff members came and went, but great friendships continue today (thank you Della, Erin, Mel, Lisa, Megan and others).
- We did TWO WICKED buses to SF – and the cast got on the bus with us after the show!
- I had the privilege to go on a cruise and played a duet with Marvin Hamlisch – one of my heroes!
- Lost wonderful SDDS members, leaders and friends – they are so missed.
- I am so proud of the leadership that has made SDDS so successful, past and present; together we have ensured that SDDS continues to be great. Thank you to them!

And I've made some wonderful friends in this dental society and the dental community. Thank you for welcoming me, teaching me, encouraging me, and trusting me.

We've done some great things here at SDDS. And I'm proud to continue to be your longest, and your "oldest" ED!

It's no joke – thank you!

Cathy



sacramento
District Dental Society

LEADERSHIP

President: Volki Felahy, DDS
Immediate Past President: Carl Hillendahl, DDS
President Elect/Treasurer: Wesley Yee, DDS
Secretary: Lisa Dobak, DDS
Editor-in-Chief: Ash Vasanthan, DDS, MS
Executive Director: Cathy Levering

EXECUTIVE COMMITTEE

Nima Afliatoni, DDS
Craig Alpha, DDS
Brock Hinton, DDS
Kevin Keating, DDS, MS
Kart Raghuraman, DDS
Hana Rashid, DDS
Morton Rosenberg, DDS
Stephanie Sandretti, DDS (Appointed Guest)
Jeff Sue, DDS (Appointed Guest)

BOARD OF DIRECTORS

Wallace Bellamy, DMD
Viren Patel, DDS

TRUSTEES

CPR: Margaret Delmore, MD, DDS
Nominating/Leadership Development:
Carl Hillendahl, DDS

COMMITTEES STANDING

Budget & Finance Advisory: Wesley Yee, DDS
Bylaws Advisory: Carl Hillendahl, DDS
Forensics Advisory: Mark Porco, DDS
Member Benefits and Services: Chirag Vaid, DDS
Mediation: Morton Rosenberg, DDS/Lisa Dobak, DDS
Strategic Planning Advisory:
Wesley Yee, DDS/Lisa Dobak, DDS

TASK FORCES ADVISORY COMMITTEES

Foundation: Viren Patel, DDS
SacPAC: Matt Campbell, DDS

SPECIAL EVENTS OTHER

Cathy Levering | Executive Director
Noel Seaver | Assistant to the Executive Director
Jen Jackson | Community Projects / Recruitment
Sofia Gutierrez | Foundation Projects / CPR
Anne Rogerson | Office Manager
Jessica Luther | Graphic Designer
Rachel Sheets | Graphic Designer

SDDS STAFF

The Nugget is an opinion and discussion magazine for SDDS membership. Opinions expressed by authors are their own, and not necessarily those of SDDS or *The Nugget* Editorial Board. SDDS reserves the right to edit all contributions for clarity and length, as well as reject any material submitted. *The Nugget* is published monthly (except bimonthly in June/July and Aug/Sept) by the SDDS, 2035 Hurley Way, Ste 200, Sacramento, CA 95825 (916) 446-1211. Acceptance of advertising in *The Nugget* in no way constitutes approval or endorsement by Sacramento District Dental Society of products or services advertised. SDDS reserves the right to reject any advertisement.

Postmaster: Send address changes to SDDS, 2035 Hurley Way, Ste 200, Sacramento, CA 95825.



By **Brian Ralli, DDS**
Associate Editor

Dental Education in the Age of COVID

I can't believe it's been 20 years since I graduated dental school. While some of my best memories happened there, it is surreal to look back at one of the most stressful periods of my life. I bet most of our readers share similar memories. I look back at those last few months, in the Spring of 2000. I remember freaking out because I had yet to pass a practical crown preparation on a live patient, which was supposedly required to even graduate. My poor wife roamed the clinic desperately trying to find a required bridge patient. We all scrambled to find board patients and hoped to God that they actually showed up on that important day. It really was a crazy time that to this day I commiserate with my fellow graduates.

We also take for granted the administration and faculty, who over the course of a few short

years, take a bunch of green college graduates and train them to be functional professionals representing their respective institutions. It's no small task to go from handing a young adult their first handpiece to sending them out in to the world to do the real thing. While you can do a lot of learning on models and from books, we all know that the vast majority of what makes us dentists comes from experience working on actual patients.

Now imagine that same experience and process but suddenly having your school shut down indefinitely due to a worldwide pandemic. Most institutions were given very little warning of the shutdown and almost no guidance of how to progress from there. There were questions of how to handle graduating classes, what to do with existing patients, and how to handle incoming students. Schools

did not really know when they would be able to re-open or what protocols would be required to do so. This month's issue will tell the story of some of those experiences from a tale of a dental student, to those faculty and administrators who had to adapt to the crisis. In the end, I find it enormously commendable and inspiring that our institutions were able to rise to the challenge and perform their duties to properly educate and train our next generation of colleagues. While the COVID-19 pandemic has been a crushing blow to society, it will always be a crowning achievement that our profession as a whole rose up and met this challenge spectacularly. ■

have you heard of the
**DEDICATED MONTHLY
DENTIST (DMD) PROGRAM?**

Prepay for your year
of General Meetings
and save big!

Stay tuned...

in next month's issue for additional
information in this year's DMD program
and how you can get signed up!

By enrolling in the **Dedicated Monthly Dentist (DMD) Program**, you can ...

PREPAY ...

for all seven General Membership Meetings for 2021–2022 with one check or credit card charge

EASILY REGISTER ...

for each meeting by responding to a simple email sent to you each month.

HELP ...

with SDDS recruitment! If you are unable to attend a particular meeting, call SDDS and we'll arrange for a new member to attend in your place.

From Your 2020 SDDS President

A Year in Review of the Sacramento District Dental Society

SDDS ended 2019 in great shape. Our market share, the percent of all the dentists within our component's boundaries that are members of SDDS, was 85.2%. That was the best large component market share in the nation. Fiscally, SDDS was in great shape also with total assets of \$1.73 million. SDDS started out 2020 looking forward to another great year. As I presided over my first board meeting of the year, operations were running smoothly in preparation for our first big event, the "Hooray for the Red, White and Blue" MidWinter CE Convention at the McClellan Air Force Base Conference Center.

Smiles for Kids Day was Saturday, February 1st. I woke up that day with a sore throat and as President I was tasked with visiting two SFK offices in Elk Grove and one in Jackson to make contact and deliver "goodies." Had I known about COVID, I would have quarantined for fourteen days. SFK 2020 experienced a low number of needy patients thanks to the Dental Transformation Initiative (DTI) partnership SDDS had with Sacramento County navigating Denti-Cal eligible patients to an appropriate Dental Home. More on DTI later.

The following week was MidWinter Convention. The first recognized coronavirus death in California occurred in Santa Clara County on February 6th, I still had symptoms, the worst runny nose, and congested sinuses I have ever had, and the MidWinter Convention was a great success. The CE programs and vendor member exhibit hall were excellent. The net proceeds from the convention were the highest since its inception. Remember that non-dues revenue reduces the need for dues increases and keeps our programs vibrant.

We started hearing more and more about the ravages of Coronavirus towards the

end of February. January and February had been good months in practice also. Production for the year was looking great. The in-person March Board meeting went well as we considered the fantastic results from the MidWinter convention and events for the rest of the year. On March 4, 2020, Governor Newsom issued his State of Emergency executive order and our dental world turned upside down. Governor

We started hearing more and more about the ravages of Coronavirus towards the end of February.

Newsom and the California Department of Public Health issued guidance to stop elective dental treatment and my office and SDDS meetings and events were shut down for an indeterminate time. This guidance was supported by the ADA and CDA, so patients were cancelled, and staff were furloughed and referred to unemployment. Congress stepped up with Economic Injury Disaster and Paycheck Protection Program loans to mitigate cashflow problems. Both loans helped immensely.

SDDS responded by only one employee allowed at the office, the others working remotely from home. All staff remained employed. During the shutdown SDDS was inundated by phone calls and emails from irate members and members not understanding what they needed to be do. Cathy and the SDDS team were very busy acquiring information that was changing daily, and email blasting the information out to our membership. Fifteen committee meetings were cancelled for the rest of the



By **Carl Hillendahl, DDS**
2020 SDDS President

year along with 34 events and CE programs. 30 webinars were added providing CE for members, many at no cost. Our SDDS team became Zoom experts as all meetings pivoted to the Zoom format. The Fall Zoom General Meetings were attended by one third to one half of the usual pre-COVID attendance, but we had in attendance many members who had not routinely attended a GM. This makes us think about adding a Zoom link to future post-COVID GMs. We will see.

The COVID shutdown occurred in the middle of March, before the March 31st deadline that many of our members use as their commitment date to actually pay their membership dues. SDDS worried about the effect the shutdown would have on membership and indeed between February and July we lost 101 members. Total membership lost for the year tallied to 122, but fortunately 108 new members made application leaving our market share essentially unchanged at 83.1%.

SDDS took a big hit to non-dues revenue in 2020, thanks to the necessity of cancelling the 34 special events and CE programs. How would SDDS cover operating expenses? There were the operating reserves that could be tapped and the decrease in expenses related to the cancelled events. And there was the DTI grant. The Dental Transformation Initiative was a three-year program launched by the State of California in 2017 and SDDS was chosen to be one of 15 partners within Sacramento County. DTI goals for SDDS included:

1. Navigating Denti-Cal eligible kids to dental homes for care and education.
2. Providing oral health education initiatives, programs, and materials to schools for students.

3. Provide dental screenings and assessment to schools.
4. Troubleshoot those kids and parents who have Denti-Cal and are not utilizing benefits or not able to be seen at their GMC-assigned dental provider and to offer options.
5. Help recruit Denti-Cal providers.
6. Offer training opportunities to dental professionals on various clinical topics, pediatric dental topics, and treating special needs patients.

Most of these goals were already being accomplished through the Sacramento District Dental Foundation's Smiles for Kids program, only now SDDS could invoice the DTI program and get reimbursed for employee costs, materials, graphic design services, and other expenses. Again, our SDDS team did such a great job at

accomplishing goals, documentation, and filing DTI audit forms that each subsequent year the approved budget for SDDS increased. In 2020 the SDDS approved

The DTI grant helped keep SDDS finances in the black, we did not need to access our operating reserves. SDDS at fiscal year-end is in great shape.

budget for the DTI grant totaled \$418,000. SDDS was able to justify \$336,000 in expenses for the program and \$82,000 went back to the California Department of Healthcare Services.

The DTI grant helped keep SDDS finances in the black, we did not need to access our operating reserves. SDDS at fiscal year-end is in great shape. Our balance sheet posts our total assets at \$1.8 million. That was a glimpse at the year 2020. I do see a light at the end of this Coronavirus tunnel.

And PS – in 2021 we were able to apply for the PPP grant – and we received it this year! Onward!



Carl Hillendahl, DDS
Immediate Past President
Sacramento District Dental Society

2020 FINAL MEMBERSHIP (as of 12.31.2020)

DENTIST MEMBERS

ACTIVE: 1,424

RETIRED: 313

TOTAL DENTIST MEMBERS: 1,728

AUXILIARY MEMBERS

DHP (Dental Health Professionals): 46

STUDENTS: 9

TOTAL ALL MEMBERS: 1,792

2020 FISCAL YEAR END

CURRENT ASSETS

Cash	\$69,711
Building Reserves	\$950,814
Operating Reserves	\$627,761
Accounts Receivable	\$95,143
Prepaid Expenses	\$19,889
TOTAL CURRENT ASSETS:	\$1,763,319
TOTAL FIXED ASSETS:	\$33,045
OTHER ASSETS/DEPOSITS:	\$7,907
TOTAL ASSETS:	\$1,804,271

LIABILITIES & EQUITY

Current Liabilities	
Accounts Payable	\$6,766
Deferred Revenue	\$176,767
TOTAL CURRENT LIABILITIES:	\$183,533
Equity	
Retained Earnings	\$1,450,468
Net Income	\$170,270
TOTAL EQUITY:	\$1,620,737
TOTAL LIABILITIES & EQUITY:	\$1,804,270

2020 MEMBERSHIP

BY THE NUMBERS

83.1%

96%
ENGAGEMENT RATE

30 ONLINE WEBINAR COURSES ADDED

MARKET SHARE

ADAPTING & PIVOTING FOR ALL OUR DIFFERENT EVENTS

106
NEW MEMBERS

MEMBERSHIP GROWTH

2000**1125** 2010**1530**

2005**1368** 2015**1642**

20201792

350
RECRUITABLE
NON-MEMBERS

94% RETENTION RATE

2477 TOTAL ATTENDANCE
FOR COURSES

NEW MEMBERS

TOTAL ATTENDANCE FOR COURSES

2020 WAS THE YEAR OF SDDS ADAPTING AND PIVOTING

GP Development is an innovative construction and design firm specializing in dental and medical office builds. Our team of experienced and dedicated professionals provide a complete portfolio of services including:

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YOU SHOULD KNOW

PAPERLESS RENEWAL - COMING TO THE DENTAL BOARD OF CALIFORNIA IN JULY 2021

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To better serve our licensees with greater speed and accuracy, the Dental Board of California (Board) will convert to an online-only renewal process beginning with the July 2021 renewal cycle.

Renewing online significantly reduces processing times: renewal transactions can be approved within 24 to 48 hours, compared to the current mail-in process, which can take up to 4 to 6 weeks.

This will also reduce the Board's carbon footprint, conserve natural resources, reduce mailing costs, and make the best use of licensee/permit renewal fees.

As part of this transition, licensees/permit holders will no longer receive the current renewal notice by mail. Licensees/permit holders will instead be mailed a renewal reminder postcard approximately 90 days prior to their expiration date for each license or permit they hold. A sample has been provided below.

To aid licensees/permit holders in this transition, the Board recommends that licensees/permit holders that are not currently registered on the BreEZe system set up their account now to avoid any technological or account issues when renewing a license or permit near the expiration date.

For information on setting up your BreEZe account and renewing online, please visit the BreEZe webpage at www.BreEZe.ca.gov.

In addition to renewing online, you can apply for a new license or permit and make changes to your information, such as updating your mailing address or requesting a duplicate license.

Until the transition, licensees can continue to renew online or by mail. If you have additional questions or concerns, please contact the Board at (916) 263-2300, or by email at dentalboard@dca.ca.gov.

https://www.dbc.ca.gov/licensees/paperless_renewal.shtml

C.E., EXAM WAIVER GRANTED FOR CALIFORNIA PROFESSIONALS WITH LICENSES EXPIRING MARCH 1-31

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Dentists, registered dental hygienists, registered dental assistants and other professionals who have active California licenses that expire between March 1 and March 31 now have additional time to satisfy the examination and continuing education requirements for license renewal.

The California Department of Consumer Affairs last Friday issued the waiver, which gives licensees an additional six months (through Aug. 26) to complete or demonstrate compliance with C.E. requirements and take and pass any examination necessary to renew a license.

The new waiver and other waivers issued early in 2020 are largely the result of CDA's consistent advocacy to assist dentists who continue to face restricted or limited in-person education and training necessary for licensure.

The state-of-emergency order issued in March 2020 gave the Department of Consumer Affairs the authority to waive statutory or regulatory professional licensing requirements as part of the state's response to the COVID-19 pandemic.

Licensees still must complete and submit any required renewal forms and pay renewal fees on time.

DID YOU MISS THE MARCH 31ST DEADLINE TO PAY YOUR DUES?
Fear not - call SDDS and we'll get you covered and "bring you back" as a member

CURES FEE INCREASE

Reprinted with permission from California Dental Association

Effective April 1, 2021, the Controlled Substance Utilization Review and Evaluation System (CURES) fee will increase from \$6 to \$11 annually for a period of two years. The increase will be applied to licenses expiring after July 1, 2021 and is assessed at the time of license renewal on specified licensees of the Dental Board of California that prescribe, order, administer, furnish, or dispense Schedule II, Schedule III, Schedule IV, or Schedule V controlled substances.

Most licensees will see a \$22 CURES Fee due to the biennial renewal cycle. The fee covers the reasonable regulatory costs of the Department of Justice for operating and maintaining CURES, a critical element in the state's effort to address the growing danger of opioid addiction stemming from prescription drug abuse.

For more information about CURES, visit: <https://oag.ca.gov/cures>.

CROWNS FOR KIDS HAS A NEW STAR REFINING GROUP REP

Elizabeth Reynoso
cell: (209) 623-9332
ereynoso@starrefining.com

AMAZON SMILE SUPPORTS THE SDDS FOUNDATION

Support SDDF, our Smiles for Kids and Smiles for Big Kids program with donations through Amazon Smile. They will automatically donate .5% of our purchases. **Logon to smile. amazon.com and select the Sacramento District Dental Foundation as your charity.**



By **Kenji O'Brien**

Mr. O'Brien is a 3rd year dental student at UOP. He is a Sacramento/Davis native. His father (Michael O'Brien) is a general dentist in the Pocket Area. Kenji graduated from Brown University in 2009 and Stanford University in 2011. Before dental school he worked for 6 years as a high school science teacher. After graduation he plans to work in his father's dental practice.

Dental School in the Time of COVID

It was Friday March 13th, 2020. Rumors had been circulating around school all week. 7 days earlier, Mayor London Breed had imposed citywide social distancing mandates and travel restrictions after the first two positive cases in San Francisco. Large events were being canceled, older residents were being told to stay home, and schools were moving their instruction online. I was supposed to attend the ADEA conference in Maryland that weekend and it was canceled at the last minute. What was going to happen with the school? Most of our patients and many of our faculty are older and have conditions that increase risk. Hundreds of people travel from throughout the bay area to our clinic every day. It was a ripe environment for the spread of this largely unknown virus.

University of the Pacific (UOP) had closed once before during my 1st year of dental school. The Camp fire in November 2018 had made the air quality in SF so bad that the school was shut down for a couple days. When you're a student in the thick of didactics and keeping up with the demands of clinic, a school closure is a bit like a "snow day." Despite the horrific events that trigger the closures (a devastating fire that leveled an entire town or a rapidly growing global pandemic), there is a tinge of excitement when the school shutters because exams get rescheduled and you get to stay home. I remember debating with one of my classmates who was adamant that the school should close due to COVID to protect the students and patients. At the time, I felt that closing the school meant lost learning for us. As young and healthy students, I felt like we were low risk. How wrong I turned out to be.

At 11:29 am, a school wide email went out announcing that the clinic would be closed for the next two weeks. We were told to reschedule all of our patients. I had delivered an immediate denture on Tuesday after full mouth extractions and my patient was scheduled the following week to get it adjusted. I ran over to the removable department and asked if I could squeeze the patient in that same day. The

patient came in at 3:30 pm and that was the last time I saw a patient for the next four months.

The two week closure quickly became three weeks as more county and state mandates went into effect. With each new announcement I called all of my patients to reschedule them, only to call them again two weeks later as the closures were extended. Eventually I just stopped rescheduling them once it became clear that there was no end in sight for the shutdown. Initially patients were frustrated, then they were understanding, and eventually they felt ambivalent as they watched the world around them grind to a halt.

With each new announcement I called all of my patients to reschedule them, only to call them again two weeks later as the closures were extended.

Didactic classes moved online and the faculty became accustomed to lecturing to silent computer screens. For the first several weeks, the first 5 minutes of every lecture was filled with exasperations from our instructors as they navigated the new world of Zoom, Webex, and Microsoft Teams. As the YouTube generation, my classmates and I adapted quickly, even choosing to watch our lectures at 1.5x or 2x speed just in time for exams! Although it was forced upon us by the pandemic, the transition to online lectures has been a silver lining for both instructors and students pushing us to explore new modalities in asynchronous teaching and learning.

A typical day during the shutdown involved waking up around 7 am and having breakfast with my one year old son. The two of us usually went for a run with the jogging stroller. If my wife wasn't working that day then I watched

my lectures streamed real-time from 9-11 am. Otherwise I recorded them and watched them while my son was napping. With all of the extra time, I started a Zoom book club with some of my classmates. Facilitated by our instructor Dr. Natasha Lee, we worked through several titles in personal finance and practice management ("Making it Easy for Patients to Say Yes," "7 Habits of Highly Effective People," and "The White Coat Investor," to name a few). In the afternoons, my son and I usually went for a hike at a local trailhead. In the evenings, my wife and I cooked dinner together and played board games or watched a show after my son went to sleep. Having so much uninterrupted time with my son and my wife was a bright spot during the pandemic.

Starting on June 8th, we were able to return to campus for sim lab only. It felt strange returning after almost three months with lots of changes big and small. Before entering the building we had to fill out an online questionnaire confirming that we had no symptoms and no contact with a positive case. We have our temperatures scanned at the door daily and we did N95 mask fit testing. All of the furniture in the building had been rearranged to facilitate six foot distancing. The senior students graduated in mid June with a virtual ceremony and little of the pomp and circumstance they had expected.

On July 13th the clinic resumed at 25% capacity. In order to keep patients as safe as possible, we were given 40 appointment slots for the quarter. This worked out to one patient every other day. The rest of the time we assisted our classmates or worked on simulation projects. At first patients were reluctant to return to clinic



The beard that Mr. O'Brien had during this time.

but eventually it started to pick up. Like many private practices, there was a huge backlog of undelivered crowns and dentures. We were meeting many of these delivery patients for the first time since their previous student dentists had graduated. Talking to friends at other dental schools in LA where the number of cases were higher, it was clear that their schools were less prepared. Many of them were opening slower and with less PPE.

Throughout this process the administration at UOP has been thoughtful about how to balance the safety of students and patients while keeping their promise to graduate clinically competent students. That hasn't been without friction, at times creating extra hurdles to schedule appointments. Under our agreement with the SF Department of Health, all treatment with an aerosol generating procedure required that patients get a COVID test prior to treatment. Sometimes tests were delayed as much as a week causing appointments to get rescheduled and rendering the results useless. I've had some patients get four separate COVID tests as we worked through their treatment plan. Cavitrons are banned and polishing after a prophylaxis is only allowed with a recent COVID test. As things improved outside the school and cases declined by the end of August we expanded to 50% capacity and eventually full capacity by the beginning of October.

So far we've been fortunate enough to not have any major outbreaks at the school. There have been isolated cases with individual staff and students quarantining. Other dental schools have been less fortunate with the entire 2nd year dental school class quarantining at Marquette and a large group of students contracting COVID at UMKC. As cases ramped up throughout the country in November our school began requiring onsite weekly testing of all students and staff. For Thanksgiving and Christmas, any student traveling out of state was required to quarantine for two weeks. We are all anxiously following predictions and wondering if another shutdown is imminent. While the prospect of a vaccine provides a glimmer of hope, it will be long after our graduation when things resume some sense of normalcy.

The pandemic has been a lesson in balance. I find myself caught between frustration at new challenges and admiration at the tremendous efforts of school administration to keep everyone safe. I reschedule patients who can't get a COVID test in time, work to stay connected to classmates when we are physically separate, and plan for the reality that I will graduate with significantly less clinical experience than expected. At the same time, I marvel at the fact



Examples of the N95 fit testing.



Mr. O'Brien all suited up in his PPE.

that UOP has been open for 5 months now with few isolated positive cases, no instances of patient-to-provider transmission, and effective dental care provided to hundreds of patients every day. This is our new reality, and now more than ever I am filled with gratitude for health, access to quality medical care, and the promise that someday we may regain some sense of normalcy. ■



Dental Education *in a COVID World*

By **Bethany Palesh, RDH, MS**

Ms. Palesh is a clinical assistant professor at the University of Missouri-Kansas City School of Dentistry within the periodontics department. She is a recent graduate of the University of Michigan School of Dentistry graduate dental hygiene program where she focused on nonsurgical periodontal therapy research and has implemented much of her clinical research and knowledge into teaching the predoctoral dental students at UMKC.

The dental profession has undergone many changes throughout the last century. Some of the major changes within the profession include the universal precaution protocols that prevent transmission of disease, the materials utilized in restorative procedures, and taking radiographs using digital software, giving clinicians the ability to see the images in an instant. However, as changes within the practice of dentistry took effect, places of business and educational institutions continued to remain open and provide oral health services to individuals as needed. That is, until this past year when the novel coronavirus (COVID-19) disrupted the lives of many individuals around the globe and heavily affected the dental community worldwide.

COVID-19 has negatively impacted the daily lives of people around the world, causing loss of businesses, loss of jobs, and in some cases, the loss of basic care, including dentistry. This pandemic shook the dental profession to its core and had many from the public health sector, including the World Health Organization (WHO) and the Centers for Disease Control (CDC) questioning the safety of individuals seeking basic oral health care in a dental setting. Dental procedures were identified as a potential threat that increased the risk of transmitting COVID-19 due to the aerosol production created in dental procedures, whether it was for a general prophylaxis, restorative treatment, or a simple tooth extraction. As such, dental practices around the

world were closed, dental education was put on hold, and many individuals had to forgo dental treatment in hopes that they wouldn't contract the virus.

Besides dental practices having to refrain from all "non-essential" treatment, dental students and educators alike had to transition from in-person learning to a completely new platform of learning, while pausing the most important aspect of dental education—the clinical component. This transition brought about unnecessary stresses to many dental educators who lacked much confidence in online educational platforms as well as dental students who often lacked the motivation to participate in course work and pre-recorded lectures. This was especially true in my experience at the University of Missouri-Kansas City School of Dentistry (UMKC).

As a result of the clinic closures at UMKC, many students in the graduating class of 2020 were unable to complete their clinic requirements for graduation in a timely manner, causing them to put their career plans on hold until the school clinics opened back up and allowed for the completion of their requirements. Once the summer semester was in full swing and clinic opened back up in mid-July, clinical faculty were doing all they could to assist the graduating students with their final clinical requirements and getting them ready for their dental careers or residency programs. The dental students (class of 2022) were eager to begin their clinical requirements, however, this

“...dental students and educators alike had to transition from in-person learning to a completely new platform of learning, while pausing the most important aspect of dental education—the clinical component.”

became problematic as the class of 2021 had a late start to their final year of dental school and were ultimately behind on many competencies that were required to be completed in the spring of 2020. With all this came the stress of many educators trying to find ways to keep the new senior students moving and ready to graduate by May 2021.

Following thorough reviews of clinical requirements for graduation and the modified requirements put forth by the Commission on Dental Accreditation (CODA), much of the class of '21 competencies were altered to accommodate for a timely graduation, while ensuring the students' dental skills meet the standards of practice. The COVID task force set forth policies in the school's clinical curriculum that would allow students the opportunity to complete clinical requirements while decreasing the risk of COVID transmission to patients, faculty, or students. These policies included decreasing the number of patients seen in the clinics by 50%, extra

personal protective equipment (PPE) worn by all students, faculty, and support staff, and even changes in the clinic schedule to minimize the amount of people in the school building during any period of time.

It is strange to reflect back to what life was like prior to COVID becoming a daily part of our conversation.

At this point in time during the COVID-19 pandemic came the concern that the holiday breaks would bring to our community and nation. Thanksgiving and Christmas breaks are well-deserved during a global pandemic where individuals are encouraged to be socially distant from others and even family members due to the many miles that keep them apart. To say that this year

has been anything short of difficult is an understatement. The students and faculty alike have gone through many stresses and needed a change of scenery. However, we as educators and clinicians have emphasized to our students that they have an obligation as healthcare workers to be responsible in their extracurricular activities as the transmission of this virus has proven to be all too easy.

It is strange to reflect back to what life was like prior to COVID becoming a daily part of our conversation. The dental community in the last few decades has had a fairly good handle on protocols utilized to prevent disease transmission, however, this pandemic took universal precautions even further, with dental practices and educational institutions incorporating special filtration systems, decreasing the use of ultrasonic scalers, and incorporating more four-handed dentistry. This has been a trying time for all and yet the only words of comfort one can offer is that we are not alone during this time of adversity. ■

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FAIRFIELD AREA: 7 Ops, Digital, Digital CB/Pano. Newer equipment, Specialties referred. 2019 GR \$1.7M. #CA1824

FAIR OAKS/CITRUS HTS: Desirable area, 38 yrs. Goodwill, 4 Ops, Nice décor, Digital, 6 hyg days/wk. 2019 GR \$970K on 4 day/wk. #CA656

FOLSOM/EL DORADO HILLS AREA: 5 Ops, 4 Equipped, Strong hygiene prog., Modern office in growing area. 2019 GR \$540K. #CA1629

GREATER SACRAMENTO: *NEW LISTING!* 5 Ops, Paperless, Strong hyg. Open 30 yrs with most Specialties referred. 2020 GR \$781K. #CA2465

LAKE TAHOE AREA: 4 Ops, Rural lifestyle practice in growing resort area. 37 yrs Goodwill. 2019 GR \$760K. #CA1715

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

NORTH SACRAMENTO: *NEW LISTING!* 5 Ops, Retail loc, Digital, Hi-NP count, Room to grow w/ Specialties, Seller can work back. 2020 GR \$900K. #CA2464

NORTH SACRAMENTO AREA: 3 Ops, 1 add'l shared, Paperless, Digital, CEREC, Busy street location. 2019 GR \$671K. #CA1745

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STOCKTON AREA: *Price reduced and will consider chart sale!* 1/3 partnership share, Digital, 10+ Op facility, GR \$462K. #CA1624

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By **Dan Soine, MBA**

Mr. Soine is the Director of Marketing and Communications at University of the Pacific, Arthur A. Dugoni School of Dentistry in San Francisco

Pandemic Pivot: Arthur A. Dugoni School of Dentistry Adapts through Flexibility and Innovation

The San Francisco Bay Area shelter-in-place order announced on March 17, 2020 shook the region to its core. As with private dental practices, dental schools had to quickly adapt to navigate the shutdown and plan for an unknown future.

More than 1,000 people—students, residents, faculty and staff—are part of the University of the Pacific, Arthur A. Dugoni School of Dentistry family. Combined with an estimated 27,000 patients who typically come to the school from throughout Northern California, plus a robust alumni network of nearly 8,000 dental professionals, the impact of the pandemic on the dental school's operations would be far reaching.

The Dugoni School's unique DDS program is the only three-year program in the nation. The school's accelerated schedule means that the school year runs longer than other dental schools—finishing in mid-June and promptly starting back up in mid-July.

Managing the clinics and the school through a pandemic—while maintaining this accelerated schedule—meant that flexibility and innovation would be required from the entire Dugoni School family.

“...dental schools had to quickly adapt to navigate the shutdown and plan for an unknown future.”

Pandemic Pivot

In mid-March, the Dugoni School was just a week away from final exams, so the school had to pivot quickly.

Academic affairs and information technology teams collaborated to implement secure online

exam software. They also worked closely with faculty and students to shift to online teaching and video technology so academic courses and learning could continue.

The school formed a cross-functional crisis management team that met daily, and continues to meet each weekday throughout the year. Priorities include planning for recovery, ensuring essential services, revising campus access policies, providing resources for students and employees, developing new health and safety protocols and monitoring ever-changing public health directives.

Communication was also a priority, and Dr. Nader A. Nadershahi, dean of the school, sent out daily school-wide updates and hosted virtual Town Halls to keep the school up to date during a time of great uncertainty.

An Innovative Approach to Licensure

One of the most pressing needs of the school was ensuring that graduates would be able to complete their program and take their licensure exams so they could pursue their careers.

The school's leadership worked closely with the Western Regional Examining Board to figure out a simulation-based exam that could safely license new dentists without the risks of seeing live patients. It also allowed the test to take place over just one weekend—June 6 through June 8—instead of the usual two, reducing examiner travel and exposure risks.

The school worked with partner organizations and leaders from the California Dental Association, the American Student Dental Association, and other California dental schools to clearly express the urgent need for a modified exam. And to their credit, the Dental Board of California and California Department of Consumer Affairs moved quickly to approve the non-patient-based exam.

The Dugoni School staff set up this simulated exam by turning dental clinic operatories into “simulation stations,” removing the headrests on the chairs and installing high-tech dental manikins. This allowed the graduating students to demonstrate proper techniques with the correct instrumentation and ergonomics, allowing the examiners to accurately assess them.

The collaboration made history. The Arthur A. Dugoni School of Dentistry, along with the University of Oklahoma College of Dentistry, were the first two schools in the nation to hold the exam in this format in early June.

Milestones Go Virtual

End-of-year celebrations and milestones needed to be shifted to a virtual format, including activities traditionally held during commencement weekend. The Dugoni School team developed an awards program to celebrate its graduates, and created celebratory videos featuring all the members of the class. The school’s White Coat Ceremony for dental hygiene students was also shifted to a virtual format.

To view some of the celebratory videos, visit the Dugoni School’s YouTube channel at www.youtube.com/pacificdental

The school also created a website for its annual OKU-Sutro Excellence Day to showcase achievements in clinical, research and community service. Even with the pandemic, Dugoni School students rose to the occasion, submitting no fewer than 161 presentations across a variety of award categories, representing the breadth of work, multidisciplinary collaboration and dedication to serving broader communities that characterizes a Dugoni School “Head, Heart, Hands” education. View the presentations at www.excellenceday.pacific.edu.

Resuming Clinical Services

During the initial shelter-in-place phase, the Dugoni School kept its emergency clinic open to patients of record. One of the goals was to ensure that patients had access to emergency care and also to make sure that patients would not overburden COVID-19-fighting hospital emergency rooms seeking dental care.

In June, the Dugoni School cautiously resumed routine general clinical services. New health and safety protocols were put into place. Patients were required to take

COVID-19 tests before appointments with aerosol-generating procedures.

The school’s specialty clinics, including Pediatric Dentistry, Orthodontics and the Special Care Clinic also resumed care in June. Initially, the patient load in all clinics was capped at 25 percent, but as July and August continued, patient load was increased to 60-70 percent. By November, the patient load was moving to 75 percent in the school’s adult Main Clinic.

This pandemic has presented many challenges to the profession and to higher education.

Lessons for the Future

While the year certainly presented challenges, the Dugoni School — and dental education as a whole — rose to meet them with a variety of adaptations that will likely persist long past the end of the pandemic. A few areas that will likely continue to be transformed in 2021 and beyond include:

- **Recruitment and admissions.** The Dugoni School’s current application cycle is presently being completed with virtual interviews. This includes the International Dental Studies program, which typically requires candidates to travel great distances for in-person interviews. Virtual interviewing still allows the face-to-face interaction that is so important in applicant assessment, and removes a significant obstacle that would-be students who live far from the school previously faced.
- **Clinical services.** The use of enhanced infection control and risk prevention strategies, PPE adaptation and ever-more-stringent health and safety protocols will protect oral healthcare providers and patients and strengthen everyone’s confidence in the quality of care. In addition, the Dugoni School has successfully incorporated “virtual” new patient screenings which are becoming a popular way for prospective patients to learn more about clinics and services.

- **Online educational technology.** The school surveyed students about the use of video technology to deliver didactic courses and case discussions, and found that overall, the experience has been positive. Even as the school eventually resumes in-person lecture courses on campus, there may still be continued use of video technology to take advantage of the flexibility it provides.

- **COVID-19-related research.** The Dugoni School is collaborating with other organizations and schools to enhance the scientific foundation for managing and mitigating the risks presented by a virus such as COVID-19. The collaborative projects range from description of risks in oral health care delivery environments to the understanding of aerosol generation in the profession.

- **Alumni and professional engagement.** Like many other organizations, the Dugoni School Alumni Association was forced by the pandemic to pivot to virtual formats. Undaunted, the association will offer its first-ever virtual Annual Meeting in February 2021. The school has also used technology to its advantage in connecting with alumni and supporters around the country. Regional alumni Zoom meet-ups, board meetings, continuing education courses, and other gatherings have taken place online, which offers alumni and others new ways to connect without the need for travel.

This pandemic has presented many challenges to the profession and to higher education. Through flexibility and innovation, the University of the Pacific Arthur A. Dugoni School of Dentistry has found ways to collaborate with local, state, and national partners to mitigate the risks of this public health crisis, provide excellent educational opportunities, serve our communities, and chart a path toward a stronger future based on the many lessons learned during this disruptive time.

There is more to learn and much more work to do but this pandemic has helped our great profession understand the essential and critical nature of the work that we do to help people in our communities live healthy lives. ■



Stepping Up Amid the COVID-19 Fight in San Francisco

By **Michael Reddy, DMD, DMSc**

Dr. Reddy is an internationally recognized master clinician, author and scientist who currently serves as dean of UCSF School of Dentistry. At UCSF, he is leading the integration of oral health into the overall health system through new technology, patient care models and research.

The Bay Area was one of the first regions nationally where the COVID-19 virus hit in early February. The city and county of San Francisco acted quickly and was the first municipality nationwide to declare a local emergency, despite having no local cases of the virus. San Francisco also was the first county in the nation to shut down, implementing a shelter-in-place order on March 17. Soon after, mask-wearing was required. These precautions have helped San Francisco have the lowest number of COVID-19-related deaths per capita.

The University of California, San Francisco (UCSF) was at the center of the response as the pandemic unfolded. As a longtime partner of the San Francisco Department of Public Health, UCSF Health and UCSF Dentistry stood beside city health officials leading the charge by establishing COVID-19 testing and treatment for patients in our city. Amid the shutdown, UCSF Dentistry continued to offer emergency oral health services for any patient in need to help lessen the volume of patients in our city's emergency rooms.

We implemented virtual learning and planned additional ways to meet our students' instructional needs, especially for our graduating class.

From the onset, our leaders, faculty and staff quickly collaborated to keep our operations moving forward while continuing to maintain the health and safety of our patients and campus community. We implemented virtual learning and planned additional ways to meet our students' instructional needs, especially for our graduating class.

We temporarily closed our research labs and supported our faculty and staff working from home. We instituted new health and safety precautions in our clinics and on campus, and rapidly adapted protocols multiple times to align with the latest guidance from the Centers for Disease Control and Prevention, the American Dental Association and local health officials.

Our clinics began welcoming patients back for non-emergency services in late May. A first step to ensure safety was establishing our own COVID-19 testing operation at UCSF Dental Center. We started off testing all patients, but today only require testing for patients undergoing surgical or aerosol-generating procedures (or as requested by providers). We also require daily COVID-19 screenings for anyone visiting our facilities and have a universal mask policy in our clinics. Providers don enhanced personal protective equipment and follow modified clinical and infection prevention protocols. Our clinics look very different – we installed plastic barriers at check-in desks and higher dividers between treatment bays; seating in reception and other common areas is limited; and physical distancing reminder stickers are throughout our buildings. We also added HEPA air filters for procedures in closed-room settings. With these steps in place, we feel confident in our ability to deliver safe dental care during this ongoing pandemic.

Our education operation has also been transformed. When the pandemic hit, our students quickly transitioned to remote learning for didactic instruction, which is continuing during the 2020-21 academic year. Our simulation lab has reopened but operates at half the capacity. Students received electric handpiece sets to practice and maintain their hand skills outside of the lab. We expect that our 2021 graduation and other large-scale events and trainings will be held virtually through June 2021. Through all of this, our amazing students have remained resilient.

It was a priority that our 2020 class was prepared for graduation and licensure to practice dentistry. They were the first to return to clinic and we developed an individualized plan for each student to ensure requirements were completed on time. Our school joined a statewide coalition with the California Dental Association (CDA) and other California dental schools to advocate for a pathway to timely licensure for the class. By using our collective voices, we demonstrated to the Dental Board of California the critical need to accept a modified licensure exam format that would not require a patient's assistance. These efforts helped lead to new exams as a pathway to licensure and the immediate acceptance of passing scores on a mannikin-based exam for licensure. With the change, our graduates could join the workforce or continue on to specialized training without delay during the pandemic. COVID-19 continues to impact UCSF Dentistry's internationally recognized

research programs. Our labs began a staggered reopening in May with new health and safety regulations in place. Today, our wet labs are operating at 50%

If there is one thing that the COVID-19 pandemic has taught us, it is that we are stronger as an institution – and can do more to advance health – when we collaborate.

density. Our investigators are contributing to resolving the COVID-19 pandemic. So far, 12 dentistry faculty from three departments are conducting research with the help of 10 grants and supplements.

More than eight papers have been published or are forthcoming, and we are also kicking off a clinical trial to determine if common mouth rinses are effective in reducing virus spread.

Like many dental operations, we have felt the financial impact of the pandemic. We are planning carefully and strategically to ensure that we can continue delivering in our core mission areas of patient care, education, research and public service. The pandemic has also highlighted the disconnect between the fields of dentistry and medicine. To help break down these silos, we are building a clinical partnership with UCSF Health. Our goal is to provide the best care to patients and establish a new model for integrated health care. If there is one thing that the COVID-19 pandemic has taught us, it is that we are stronger as an institution – and can do more to advance health – when we collaborate. ■

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By **Ash Vasanthan, DDS, MS**
Nugget Editorial Committee Chair

Behind the Scenes of the Nugget Committee

Have you ever been curious about how issues of *The Nugget* come together? There is a lot that goes on behind the scenes before you read the printed issue! The Sacramento District Dental Society publishes 10 issues of *The Nugget* each year. In order to determine the topics for each issue, the *Nugget* Editorial Committee meets 2-3 times a year. During those meetings the Associate Editors and the rest of the committee explore and discuss different topics and ideas which may be of interest to the dental community of Sacramento as a whole. The committee tries to keep a good balance between clinical topics, feel good pieces, current events, business and other relevant information.

Each Editor of the committee chooses a topic that they feel passionate about and move forward working on it, teaming up with experts of their choice to create the content. Typically the topics for the year are scheduled out with deadlines 6 months out and so Editors have ample time to work on their issue from research to planning and gathering the articles.

In recent years, the committee evolved with changing times and gone fully digital making the entire process very easy on all involved. We utilize Dropbox® to upload content in realtime to the graphic designers to start working on the issue as they gather other pieces that go on the issue and get a head start to the particular issue. Dropbox® allows the Editors to collect and organize their content in one place where all members of the committee can review it if required.

When the content due date for the guest editor comes around, the SDDS graphic designers go into the Dropbox and grab the articles, bios, headshots, and any other content provided for the issue. They begin to place and format all the articles and other content for the issue, taking Word documents into fleshed out article spreads. They may also gather other content to fill out the issue as well. This process takes around two weeks to a month depending on the amount and type of content which is entirely done by the graphic design team of the SDDS. The Editors work to choose an

appropriate cover page for their issue with guidance and input from the graphics team.

Once the issue has been proofed in the SDDS office, it gets sent off to print. Our print house prepares the issue and sends along a final proof which gets combed through and approved for printing. Then the 2,000 issues are sent to SDDS Members and everyone on our mailing list.

There is a lot of behind the scenes work that goes into each issue of *The Nugget* to produce the this wonderful publication, we know you've enjoyed over the years!

If you are interested in having a hand in creating your own issue teaming up with the committee, reach out to SDDS to express your interest in joining the *Nugget* Editorial Committee! We are always looking for new members to bring fresh perspectives, expertise, and insight to our publication! ■

2021 SDDS Committee Schedule

Standing Committees

CPR Committee (courses)
Apr 17 • Aug 18 • Sep 17 • Nov 12

**Nominating/Leadership
Development**
Feb 16

Foundation

Foundation Board
Sep 21

Other

Sac Pac
May TBA

CDA House of Delegates
Nov 11-13

Advisory Committees

Continuing Education Advisory
TBA

Mass Disaster/Forensics Advisory
TBA

Nugget Editorial Advisory
Sep 20

Strategic Plan Advisory
Schedule as needed

Budget and Finance Advisory
Schedule as needed

Bylaws Advisory
Schedule as needed

Legislative Advisory
Schedule as needed

Leadership

Board of Directors
May 4 • Sep 7 • Nov 2

Executive Committee
Aug 6 • Oct 8 • Dec 3

Task Forces

Mediation Review
Apr 12

Member Benefits/Services
Apr 26

Oral Health/Prop 56 Initiatives
TBA

CPR AHA BLS BLENDED LEARNING

In-Person Practice Session and Skills Test at the SDDS Office 4 CEU, Core • \$77.50

- Saturday, April 17, 2021 (3 sessions: 8:00-8:45am, 9:00-9:45am, or 10:00-10:45am)
- Wednesday, August 18, 2021 (3 sessions: 6:00-6:45pm, 7:00-7:45pm, or 8:00-8:45pm)

The 2021 CPR Courses will all be an AHA Blended Learning format. Below are the steps to register and complete the course (view full steps online). Email sdds@sdds.org if you have any questions.

Step 1 – Register for the BLS/CPR providers course with SDDS (via the inserted registration form, phone, or on the SDDS website)

Step 2 – Complete the HeartCode BLS Online course

Step 3 – Attend the IN-PERSON Skills practice session and skills test at the SDDS Office.

Step 4 – Your American Heart Association BLS (CPR) card will be issued digitally via email. Physical cards are no longer issued.



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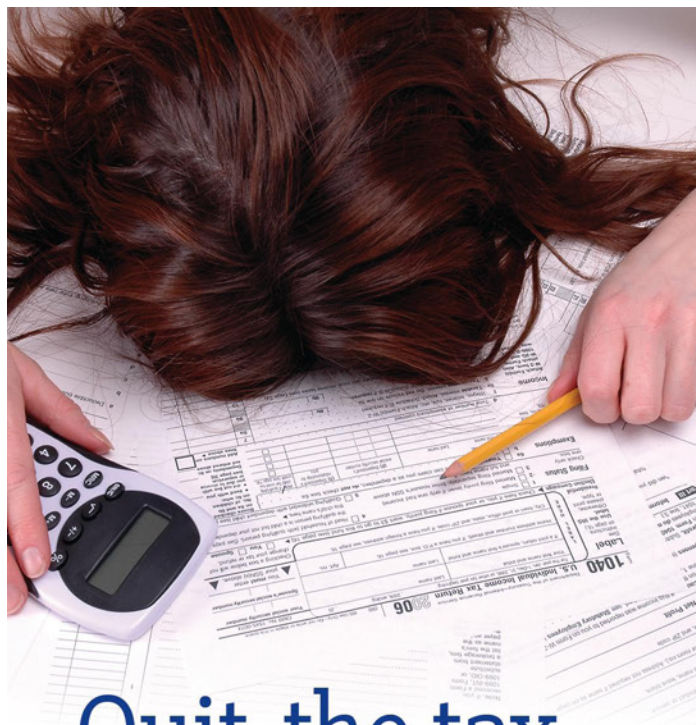
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YOU

THE DENTIST, THE EMPLOYER

Have You Used the HR Hotline?

By California Employers Association (SDDS Vendor Member)

Confused about new labor laws? Need answers to your COVID-19 questions? Then we have the answer for YOU! Call the no cost Human Resource HOTLINE for all of your HR solutions! Not sure what the HR Hotline is or have you not called in a while? Here's a quick overview - SDDS members have an amazing member benefit available at no cost to them – the SDDS HR Hotline powered by CEA, the California Employers Association. HR experts can provide guidance on so many topics you deal with every day: hiring and firing practices, paid sick leave, the new CFRA leave that affects businesses with 5 or more employees, harassment prevention and so much more!

Think you are the only one confused by all of the laws and regulations you have to follow? I promise, you are not. The SDDS HR Hotline has been powered by CEA for over a decade. In the past ten years we have received over 4,000 calls from member dentists just

like you! You can talk to an HR Advisor Monday through Friday from 8am to 5pm by calling the direct SDDS HR Hotline at 888-784-4031.

You can talk to an HR Advisor Monday through Friday from 8 am to 5 pm by calling the direct SDDS HR Hotline at 888-784-4031.

Be sure to visit CEA's website, www.employers.org so you can access their newsletter and blog to stay up to date on HR changes in CA. CEA also has an entire page dedicated to COVID compliance. Visit their website, click on the "HR Answers" tab and

scroll down to COVID-19 and you will be able to see State and Federal forms, links and tools to help manage COVID issues in the workplace.

Not sure what forms are needed at hire or at termination? Visit the CEA site and click on HR Answers and scroll down to "HR Forms," in the form key word search box type "checklist" and you will see a listing of free checklists that you can download for hires as well as terminations.

We have worked with countless dentists who have learned the hard way that not following California guidelines can be a costly mistake. We know that this can be a confusing and frustrating issue, but that is how the SDDS HR Hotline can help! Contact the Hotline or you can reach us via email at ceainfo@employers.org and we will be happy to assist you! ■

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**MAY
26**

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Board Report

March 2, 2021

Highlights of the Board Meeting

President's Report

President Dr. Volki Felahy called the meeting to order at 6:01pm and welcomed all the Board members. He reported that SDDS continues to “pivot” for the first and second quarters of the year, and hopes that the COVID restrictions will be lifted by May.

Secretary's Report

Dr. Lisa Dobak reported on current membership renewals, which are currently due by March 31st. Renewals are a bit behind where we were last year (pre-COVID) at this time, by we hope to keep our market share above 80% after the renewal period. Currently we are 83% market share with 350 nonmembers, and 350 members still to renew. **Next year, the grace period will be shortened and dues must be paid before January 31st next year. (Dues are actually due on January 1st).**

Treasurer's Report

Dr. Felahy reviewed the fiscal year end financials and comparisons with the Board. Although a challenge, we did not dip into reserves in 2020, the PPP was NOT available in 2020 (but we applied and received in 2021). Our net shows a positive \$170K, thanks to cutting expenses and the DTI partnership. Note that SDDS and the Foundation (together) are collectively a \$4.5 million organization. Dr. Felahy encouraged the Board and members to continue to thank our sponsors/vendors who continue to support both organizations. **It was M/C (Hillendahl) to accept the 2020 FYE Report.**

DTI (Dental Transformation Initiative) final report – the final DTI report was reviewed, covering the last three years' activities. This three year project was launched in July 2017 after six months of grant applications, vetting, justifications, due diligence, and interviews. SDDS was chosen to be one of the 15 partners with Sacramento County for the DTI with the State of California. The goals, for our section of DTI, were simple:

- Navigate kids to dental homes, dental care, and dental education

- Provide oral health education initiatives, programs and materials to school kids
- Provide dental screenings, assessment and navigation to school kids
- Troubleshoot those kids and parents who have Denti-Cal and are not utilizing benefits or not able to be seen in their GMC-assigned dentist providers and to offer options
- Help recruit Denti-Cal providers (all the while promoting SDDS members and recruiting those providers to be members of SDDS)
- Offer training opportunities to dental professionals on various clinical topics, pediatric dental topics, treating special needs patients, teledentistry, etc. (Most of these CE programs were partnered with CHILDREN NOW and it was a great opportunity for collaboration, especially since all SDDS dentists were invited to attend these webinars).

SDDS accomplished all these goals. The DTI also funded AND EXPANDED SDDS and SDDF programs that normally would have been paid for out of our Foundation, such as the educational puppet shows, children's dental health educational supplies, dental health and screening supplies, and more. The total amount of the DTI budget over the last 3 years was \$540,000, and \$80,000 was unspent and is returning to the State DHCS (we tried to spend it all!). Our goals were met and our partnerships were invaluable!

Action Items

The following items were approved:

- **Approved the extension of our office lease until 2028 and taking advantage of the current market.** We will save \$20,000 over the course of the lease as well as CAM savings.
- **Approved the report of the LDC Committee and the slate for 2022.** Dr. Hillendahl presented the report of

the LDC committee and the slate for 2022 officers, Board and Delegates. (see announced slate on the right) Congratulations, and thank you!

- **Approved Dr. Wes Yee's proposed Editor in Chief for *the Nugget*, beginning in January 2022 – Congratulations Dr. Hana Rashid!**
- Elections will be held at the May General Meeting and it will serve as our ANNUAL MEETING.

Committee Reports

The Board reviewed all current committee reports and minutes to date for 2021.

New Business

General Meetings will be virtual and ZOOM format through at least the end of April. May is still pending. General Meeting speakers will be solidified for 2022 by May 1st – it's going to be an exciting year! The Board went “round the room” to discuss questions, thoughts and great ideas!

Trustee's Report

Drs. Bellamy and Patel reported that the CDA Board of Trustees focus is on Board development, Resolution 5, core values, finalizing communication agreement for what happens in virtual meetings.

Executive Director's Report

Cathy Levering reported that the *Hamilton* tickets sold out in 45 minutes! The Super CE WoW was a great success, although many members missed the traditional MidWinter event. 1100 in attendance in the 26 different classes, 300 registrants – 160 dentists and 130 staff. Thank you to all our sponsors for helping to make it a success!

Adjournment

The meeting was adjourned at 8:08pm – early!

May 4, 2021 at 6pm



Lisa Dobak, DDS
Secretary

It's Time For...

SDDS ELECTIONS

NOTICE OF ANNUAL MEETING & ELECTIONS

Elections will be held at the **May 11, 2021** 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 2021 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.

Carl Hillendahl, DDS (Chair of the Leadership Development Committee)



SOCIETY SLATE OF NOMINEES

SDDS EXECUTIVE COMMITTEE

To be Elected:

President: Wesley Yee, DDS

President Elect/Treasurer: Lisa Dobak, DDS

Secretary: Ash Vasanthan, DDS

Immediate Past President: Volki Felahy, DDS

TRUSTEE

Continuing:

Wallace Bellamy, DMD

Viren Patel, DDS

BOARD OF DIRECTORS

Continuing (2021-2022):

Nima Aflatoon, DDS

Dean Ahmad, DDS

Brock Hinton, DDS

Kevin Keating, DDS, MS

Morton Rosenberg, DDS

Kart Raghuraman, DDS

To be Elected

(2nd Term, 2022-2023):

Craig Alpha, DDS

DELEGATES TO THE CDA HOUSE

To be Elected:

Margaret Delmore, MD, DDS (2021-2022)

Eric Grove, DDS (2021-2022)

Hana Rashid, DDS (2021-2022)

Morton Rosenberg, DDS (2021-2022)

Ash Vasanthan, DDS (2021-2022)

Continuing:

Lisa Dobak, DDS (ExComm)

Volki Felahy, DDS (ExComm)

Carl Hillendahl, DDS (ExComm)

Wesley Yee, DDS (ExComm)

Nima Aflatoon, DDS (2020-2021)

Dean Ahmad, DDS (2020-2021)

Kelly Giannetti, DMD (2020-2021)

Amar Pawar, DDS (2020-2021)

Kart Raghuraman, DDS (2020-2021)

FOUNDATION SLATE OF NOMINEES

BOARD OF DIRECTORS

Continuing:

Nancy Archibald, DDS

Wai Chan, DDS

Greg Heise, DDS

Viren Patel, DDS

Additional Term (2022-2023):

Wallace Bellamy, DMD

Margaret Delmore, MD, DDS

Paul Binon, DDS

To Be Elected (2022):

Ash Vasanthan, DDS (SDDS Secretary)

Volki Felahy, DDS (SDDS Past President)

Hana Rashid, DDS (2022-2023)



The Dis Case of Microaggressions

By **Brian Shue, DDS, CDE**

Dr. Shue is the Dental Director of a federally qualified health center and is a certified Dental Editor. He is the President of the American Association of Dental Editors and Journalists and a fellow of the American College of Dentists and the Pierre Fauchard Academy. Dr. Shue has served as the editor Facets, the publication of the San Diego County Dental Society for the past 15 years.

A person of color walks down a quiet street in a suburb. A passing car slows down to a crawl. The driver glares, shouts something unintelligible, then drives off. Was it a racial slur?

Or how about this? A person reads an article about COVID-19 in a professional journal, which begins with the words: “The Chinese Coronavirus COVID-19. . .” Was that appropriate?

Those are true stories. Unfortunately, examples like those are becoming more common in the U.S. because of heightened racial tensions. After a white police officer killed a Black man named George Floyd, our country’s beliefs and actions have been challenged. Yet some types of racism are subtle. As the impact of the coronavirus is felt by our country, there are increased incidences of anger blaming Americans of Asian descent for causing COVID-19.¹

The World Health Organization created best practices on naming new diseases to avoid stigma and any possible negative impact to any groups or areas of society. Disease names such as Swine Flu or even Legionnaires Disease would not be permitted today.

So, it is inexcusable when a news commentator or even a leader of a country refers to the COVID-19 disease as “Kung Flu.” Additionally, COVID-19 is caused by the coronavirus SARS-CoV-2, not “China virus” or “Chinese coronavirus.” That is racially insensitive. And it personally insults me.

The use of racially insensitive words is a form of “racial microaggression.” Microaggressions have been defined as commonplace verbal indignities. They are intentional or unintentional, hostile, derogatory insults that target a person.²

Microaggressions reduce inclusion. They increase divisiveness. They reinforce bias

and prejudices. They decrease empathy. And they are deceptive and insidious. Microaggressions are more than just feeling slighted. They have been shown to lead to exhaustion and decreased mental, emotional and physical well-being. Microaggression can be directed at any marginalized group, based on color, sex, religion or other characteristics. It’s not just about race. It’s about all of us.

Microaggressions are detrimental to providing health care, and they are pervasive. One study found microaggressions were seen or experienced by a majority of first-year medical and dental students. Picture this scenario: A female dentist walks into an operatory. The patient declares, “You’re too young to be a doctor. I want a real doctor who knows what they’re doing. I want a doctor — who can speak English.” That is an example of an intentional microaggression.

Microaggressions can affect our dental practices. A study showed that patients who experienced microaggressions from their medical provider had poorer compliance, more missed appointments and poorer health outcomes.

In treatment planning, microaggressions of a dentist could lead to different diagnoses for two patients with identical clinical presentation. It could influence treatment plan options provided and even the type of prescriptions written. It can basically undermine the trust inherent in the doctor-patient relationship. The patient may believe the dentist did not treat them like they would have treated someone else. As a result of a perceived microaggression, the patient may even seek care elsewhere. It could lead to negative reviews on social media. One’s reputation in the community could be damaged. Untoward consequences could spring from a simple remark or action that was an unintentional microaggression. Not only is that patient gone, but their future referrals are gone as well.

Back on June 2nd, ADA President Chad P. Gehani, DDS, addressed racial violence. He courageously said this:

“This is the moment to unravel from whatever personal biases we may harbor. To become allies. To have the hard conversations. To listen to voices that have long gone unheard. To speak up for those who have been disenfranchised. To commit to empathy and understanding. To be forces for change. To be agents of harmony. To call out wrong when we see it. And to do what’s right when we can.”

We most likely won’t see or be exposed to racial violence in our profession. But microaggressions are more likely to happen. And we can do something about it.

We must do our best to send the right messages in our practices and in our professional lives to our patients, and to our peers. It is our responsibility to treat all our patients respectfully. We must communicate with our patients without judgement or our own negative personal biases. Sue et al. states it is important to

first understand one’s own racial identity in our society, then look at one’s opinions about other racial groups. That can lead to recognizing one’s own prejudices and biases. One needs to recognize microaggressions exist, then look at how these can impact patients, and then do what is possible to correct one’s own actions.²

Full disclosure: I am Chinese American. And the true stories mentioned above? Those involved me. I was that person walking in my neighborhood. Did I confront that driver? No. And the person that read the offensive editorial? That was also me. I contacted the writer who used the racially insensitive wording. We had an open and honest discussion. The writer said there was no intention to offend and would have removed it if the writer knew it was hurtful. That is a signature characteristic of a microaggression. The organization immediately retracted the article from the publication. Writing about this subject even made me recall events that I have not thought about for decades.

Microaggressions, especially noticeable during this pandemic, can have negative effects. We need to be self-aware of our personal biases. They should not be allowed to affect our ability to provide the best dental care possible to vulnerable populations. This can greatly affect our standing in our communities and the success of our practices. Understanding microaggressions and recognizing they exist in our everyday interactions is a first step. ■

References

1 Castañeda L. Hundreds of anti-Asian American hate incidents reported in California during pandemic. The Mercury News July 2, 2020.

2 Sue DW, Capodilupo CM, et al. Racial microaggressions in everyday life: Implications for clinical practice. Am Psychol May–Jun 2007;62(4):271–86. doi: 10.1037/0003-066X.62.4.271.

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By **Leslie Canham, CDA, RDA**

Ms. Canham is a Speaker and Consultant specializing in Dental Infection Control and OSHA Compliance. In dentistry since 1972, Leslie helps dental teams update and fine tune their Infection Control and OSHA programs. With COVID-19, Infection Control is a term understood by everyone these days. There's never been a better time to re-tool and re-train the dental team to protect their patients, themselves, and the reputation of the practice.

Leslie Canham and Associates, LLC provides coaching, Webinars, in-office training, audits, mock-inspections, investigations, and consulting. Leslie provides expert opinion for dentists facing regulatory compliance violations, Dental Board allegations, and breaches in infection control. She has also been retained as an independent investigative consultant by public health agencies. In addition, Leslie has been retained by law firms as an expert witness in administrative law hearings. Leslie also provides Dentists with assistance on corrective action.

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OSHA COMPLIANCE & COVID-19:

What's New and What Do I Have to Do in 2021?

SARS-CoV-2, the virus that causes COVID-19, changed what we do for infection control, how we greet patients, what our practices look like, and what we wear for PPE. Even with new precautions in place, dental practices are at risk of OSHA citations. On January 29, 2021 OSHA issued stronger worker safety guidance for a coronavirus prevention program. OSHA inspections and citations are on the rise and OSHA Coronavirus-related issued citations totaled initial penalties of \$4,034,288.¹ This article covers steps you can take to be OSHA compliant and avoid costly fines in 2021.

Conduct Aerosol Transmissible Disease Training

In November of 2020, Cal/OSHA approved emergency temporary standards on COVID-19 infection prevention (<https://www.dir.ca.gov/dosh/coronavirus/ETS.html>). These new temporary standards apply to most workers in California not covered by Cal/OSHA's Aerosol Transmissible Diseases (ATD) standard (<https://www.dir.ca.gov/title8/5199.html>). To claim your practice is exempt from the ATD standard, you must meet certain conditions.

Dental practices are exempt from the ATD standard only if they meet all four of the conditions below:

1. Dental procedures are not performed on patients identified as ATD cases or suspected ATD cases.
2. The practice must have a written "Injury and Illness Prevention Program" that describes how to screen patients for ATDs and screening is performed before any dental procedure.
3. Employees are trained on how to screen patients for ATDs.
4. Aerosol generating dental procedures are not performed on a patient identified as a possible ATD exposure risk unless

a licensed physician determines that the patient does not currently have an ATD.

Let's Take These Conditions One at a Time:

Item 1. If you are not screening patients, you should be. Be sure to keep a log the screening: temperature, response to COVID questions, etc. OSHA may ask for to see this log if you are audited. The conundrum with screening is that 59% of COVID transmission is caused by pre-symptomatic and asymptomatic people.²

If screening does not eliminate the risk of treating a COVID positive patient, then exposed employees must be provided with respiratory protection. This means two things, 1. you are not exempt from the ATD standard and 2. you must follow all the requirements of providing respiratory protection for employees. The OSHA Respiratory Protection standard (<https://www.dir.ca.gov/title8/5144.html>) requires the employer to provide N95 (or better) respirators, medical evaluation, fit testing, and have written respiratory prevention plans. (**See table 1**)

Item 2. The California Dental Association has created a written Injury and Illness Prevention Plan (IIPP) addressing ATDs along with an addendum to the IIPP addressing COVID. CDA members can locate plans on the CDA COVID-19 Resources Website (<https://www.cda.org/Home/Practice/Back-to-Practice>) and in the CDA Regulatory Compliance manual.

Item 3. Be sure to train employees on the screening process for COVID and other ATDs like Chickenpox, Measles, Influenza, and Tuberculosis. Procedures for screening are described in CDA's written IIPP.

Item 4. Don't perform aerosol generating procedures on patients identified as having an ATD or suspected ATD. A physician

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 or associate seeker contact SDDS at (916) 446-1227. For contact information of any of the job bankers please visit www.sdds.org.

Table 1 - Respiratory Protection

If Respiratory Protection is Required

1. Employee medical evaluations are required prior to first use of a respirator.
2. Initial Fit Testing must be conducted for each type or model of respirator worn by the employee. Due to the current N95 supply shortage, the same style of N95 that was fit tested might not be available. If a different N95 is used, a new fit test must be conducted. (Hint: Fit testing can be done in house. All you need is training and a fit test kit).
3. Employees must be trained in use of respirators, respirator limitations, and how to properly don/doff, and how to perform a user seal check.
4. Employers must have a Written Respiratory Protection Plan. (Hint: You can get a model Respiratory Protection Program that you can customize on the CDA COVID-19 Resources Website: <https://www.cda.org/Home/Practice/Back-to-Practice>).

Ms. Canham offers a "Beginner's Guide to Fit Testing Training Video" on her website, available at: <https://programs.lesliecanham.com/registration-page1608317133644>

should determine that the patient does not currently have an infectious ATD. It may not be possible or practical to require the COVID positive patient to get cleared by a physician. Instead, you can use the CDA Reporting Symptoms/Positive Test for COVID-19 flowchart (<https://www.cda.org/Home/Practice/Back-to-Practice/All-Resources/reporting-symptomspositive-test-for-covid-19-flowchart>) to help you determine when a COVID positive patient can return for dental treatment.

The ATD standard has been law since 2009, yet many dental teams are not aware that the standard exists. They had not been trained on screening patients for ATDs until 2020 when the COVID-19 pandemic hit. For more information on the ATD standard, here is a link to the Aerosol Transmissible Diseases fact sheet (https://www.dir.ca.gov/dosh/dosh_publications/Aerosol-Diseases-fs.pdf).

Continued on following page...

ASSOCIATE POSITIONS AVAILABLE

Raj Zanzi, DDS • Sacramento • PT • Ortho
 Gertrude Lee, DDS • Rocklin • PT • GP
 Ruth Kenworthy, DDS • Roseville • PT/FT • GP
 Brandon Martin, DDS • Sacramento • FT • Ortho
 Pham Ngoc, DMD • Sacramento • PT • Pedo
 Novan Nguyen, DDS • Sacramento • PT • GP
 Sabrina Jang, DDS • Sacramento • PT/FT • GP/Pedo
 Christian Hoybjerg, DDS • Sacramento • PT • Ortho
 Monica Tavallaei, DDS • Sacramento • FT/PT • Pedo/Ortho/Endo/OS
 Madhavi Yellamanchili, DDS • Roseville • PT/FT • GP
 Brian Orcutt, DDS • Sacramento • PT • GP
 Aaron Reeves, DDS • Sacramento • PT • GP
 Peter Kim, DDS • Sacramento • PT • GP/Endo/OS
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 Marcela Diaz, DMD • Elk Grove • PT • Oral Surgeon/GP
 Robert Catron, DDS • Cameron Park • PT • GP
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 Amy Woo, DDS • Sacramento • PT • GP/Endo
 David Park, DDS • FT/PT • GP
 Jeff Summers • Kids Care Dental & Ortho • Calvine/Elk Grove • FT • GP/Ortho
 Elizabeth Johnson, DDS • various WellSpace locations • FT/PT/Fill-In • GP

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 Eric Tran, DDS • FT • GP
 Robert Nisson, DDS • PT • Ortho
 Erica Hsiao, DDS • PT • Perio
 Behdad Javdan, DDS • PT • Perio
 Bruce Taber, DDS • Fill-In • GP
 Steve Murphy, DMD • FT/PT • Endo

Create a Written COVID-19 Prevention Program

If your practice is exempt from the ATD standard, you must create and implement a written COVID-19 Prevention Program and train employees on the program. The written COVID-19 Prevention Program must include:

- Identifying and evaluating employee exposures to COVID-19 health hazards.
- Implementing effective policies and procedures to correct unsafe and unhealthy conditions (such as safe physical distancing, modifying the workplace and staggering work schedules).
- Providing and ensuring workers wear face coverings to prevent exposure in the workplace.
- Providing effective training and instruction to employees on how COVID-19 is spread, infection prevention techniques, and information regarding COVID-19-related benefits that affected employees may be entitled to under federal, state, or local law.

The Cal/OSHA website (<https://www.dir.ca.gov/dosh/coronavirus/ETS.html>) provides fact sheets, resources, and a Word document for a Model Written Program that you can use to create your site specific COVID-19 Prevention Program.

Don't Forget to Conduct Annual OSHA Bloodborne Pathogen Training in 2021

In 2020, COVID-19 threw a wrench into the business of conducting dentistry. With all the changes, annual Bloodborne Pathogen training may have been overlooked. OSHA requires employers to provide initial and annual training to employees who have occupational exposure to bloodborne pathogens. Anyone can conduct OSHA training as long as they are familiar with the Bloodborne Pathogen standard and can provide site specific information on the particulars of your dental practice. This includes location of the eyewash station, fire extinguishers, first aid kit, personal protective equipment, OSHA manual/SDS files (formerly called Material Safety Data Sheets or MSDS) and where hazardous materials are used/kept.

It is essential to conduct training on your exposure control plan at least annually. Explain the appropriate actions to take and persons to contact in the event of an exposure incident involving blood or other potentially infectious material. Be sure to include the method of reporting the incident and the medical follow-up that will be made available. The specific plan for your office should be spelled out in

the exposure control section of your OSHA manual. (See table 2 for the “14 Elements of Bloodborne Pathogen Training”)

Summary

In addition to new OSHA standards, our patients have a greater understanding of infection control, PPE, and hand hygiene. As dental professionals, we have a responsibility to exhibit best practices in infection control and safety. COVID-19 changed much in our profession, what hasn't changed is the requirement for dentists to provide a safe work environment. To avoid costly citations, adhere to all OSHA regulations, by having written plans and conducting the required training. This increases confidence, reduces errors, and promotes a culture of infection prevention and safety that patients appreciate and employees deserve. ■

References

1. Department of Labor, United States department of labor. (n.d.). Retrieved March 06, 2021, from <https://www.osha.gov/enforcement/covid-19-data/inspections-covid-related-citations>

2. Michael A. Johansson, P. (2021, January 07). Sars-cov-2 transmission from people without covid-19 symptoms. Retrieved March 06, 2021, from https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2774707?utm_source=For_The_Media&utm_medium=referral&utm_campaign=ftm_links&utm_term=010721

Table 2 - 14 Elements of Bloodborne Pathogen Training

Bloodborne Pathogen training must include the following 14 elements:		
1. A copy and explanation of the Bloodborne Pathogen Standard. The standard is usually located in your OSHA manual. If not, you can get a copy from the OSHA website (https://www.dir.ca.gov/title8/5193.html)	6. An explanation of the use and limitations of methods that will prevent or reduce exposure including appropriate engineering controls, administrative or work practice controls and personal protective equipment.	11. An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident, the medical follow-up that will be made available and the procedure for recording the incident on the Sharps Injury Log if sharps are involved.
2. A general explanation of the epidemiology and symptoms of bloodborne diseases.	7. Information on the types, proper use, location, removal, handling, decontamination and disposal of personal protective equipment (PPE).	12. Information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident.
3. An explanation of the modes of transmission of bloodborne pathogens.	8. An explanation of the basis for selection of personal protective equipment.	13. An explanation of the signs and labels and/or color coding to communicate hazards to employees.
4. An explanation of the employer's exposure control plan and the means by which the employee can obtain a copy of the written plan.	9. Information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine and vaccination will be offered free of charge.	14. An opportunity for interactive questions and answers with the person conducting the training session.
5. An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious material (OPIM).	10. Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM.	

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Package Options

Pack of 5 **\$127** (\$150 value)

Five pieces each of the following: SDDS or SFK face mask, B-safe key, sanitizer spray and phone sanitizer

Pack of 10 **\$240** (\$300 value)

Ten pieces each of the following: SDDS or SFK face mask, B-safe key, sanitizer spray and phone sanitizer

Single Item Pricing

SDDS or SDDF Face Mask	\$9
B-Safe Key	\$13
Phone Sanitizer	\$6
Sanitizer Spray	\$2

Product Descriptions

SDDS or SFK Face Mask

- 2 ply cotton mask with nose wire

B-Safe Key

- use on pin keypads, smartphones, touchscreens, elevator buttons, to open some doors and more!
- copper plating has anti-germ properties reducing surface time to 3 hours

Phone Sanitizer

- anti-microbial spray solution
- built in microfiber screen cleaner

Sanitizer Spray

- antibacterial spray in a pocket size tube

Trustee Report



Wallace Bellamy, DMD & Viren Patel, DDS
SDDS Trustees

Highlights of the Recent CDA Board of Trustees Meeting

March 5-6, 2021

Prior to regular business on Saturday, March 6th, the Board of Trustees participated in a board development session focused on team building and expectation setting for 2021. The Board will continue to participate in these sessions throughout the year.

- **2021 Management Objectives:**

The Board approved the annual management objectives, which focus on the five core areas identified by the board last year – practice support, education, advocacy, communications and insurance/protection as well as operational initiatives such as optimizing technology and remote work/space planning.

- **Financial Update:** The Board received a financial update, which highlighted expense reductions as well as new streams of potential revenue for 2021 and beyond. With CDA Presents spring and potentially fall being virtual, CDA has a significant operating budget deficit for 2021. In response, CDA is taking a highly proactive, iterative approach; reducing expenses that will not negatively impact the delivery of core member services, while enhancing the virtual CDA Presents experience and developing new sources of non-dues revenue, such as on-demand e-learning and new practice support offerings.

Following the presentation, the Board approved an expenditure from strategic reserves to balance the 2021 budget, with the goal of not drawing from reserves in 2022.

- **Board Composition Overview:**

The Board received an update regarding the board composition work, including a review of the workgroup's recommendation, component input

received in 2020 regarding the recommendations, and a review of upcoming work in 2021. The Board also approved additional Board Composition workgroup members, which expands the workgroup to include one representative from every component. The Board will consider the full board composition recommendation in May, after which it will be shared with component leadership in preparation for the House of Delegates.

- **Oral Health Program Update:**

Dr. Maritza Cabezas, Los Angeles County Oral Health Program Director, shared results of a survey her office conducted in partnership with the Los Angeles Dental Society and with the cooperation of all five Los Angeles area components, which highlighted the impact of COVID-19 on dental offices and clinics. The results indicated that CDA was the leading source of information for dentists in private practice and dental clinics during the pandemic.

- **Organizational Update:** The Board received an activity update from CDA Executive Director Peter DuBois, including a membership overview and 2021 renewal trends, the recent meeting of the CDA officers with the seven California dental school deans, vaccines efforts by CDA members, space planning and the first meeting of the newly formed TDSC, Inc. Board of Directors.

- **TDIC Update:** The Board received an update regarding the status of the TDIC policy administration system replacement project. The new system, Guidewire, is replacing several legacy systems and will provide enhanced functionality for policyholders including a self-service portal.

- **Closed Session:** A legal report regarding the McCarron Ferguson repeal and Delta Dental was provided in closed session.

Additionally, in closed session, the board conducted the executive director's annual evaluation, which reflected the collective strength and work of CDA responding so effectively to the challenges of 2020.

The Board of Trustees continue to monitor and adjust to the rapidly changing landscape of the COVID-19 pandemic and is planning for future enhancements to the services that CDA offers its members.

Next CDA Board of Trustees Meeting:
April 9, 2021

Recipe from our March General Meeting!

Thanks so much to Dr. Beth Settle for this month's recipe!

Lemony Red Lentil Soup Recipe

Makes 8 servings

- 2 tablespoons extra virgin olive oil
- 1 yellow onion, finely chopped
- 2 medium carrots, grated on a box grater (about 1 cup)
- 2 Roma tomatoes, finely chopped (or 10-ish grape tomatoes, whatever looks good)
- 2 garlic cloves, minced
- 1 teaspoon ground cumin
- 1-quart chicken stock or veggie stock (or bone broth for more protein)
- 2 cups of water
- 1.5 cups red lentils, no need to presoak them (you can rinse them, but I usually don't)
- 2 teaspoons sea salt, more or less to taste (3+ teaspoons if your stock is low-sodium)
- a few spins of freshly ground black pepper
- 1 teaspoon lemon zest
- 3 tablespoons fresh lemon juice (zest it first)
- garnish: drizzle of extra virgin olive oil, freshly chopped cilantro



Method

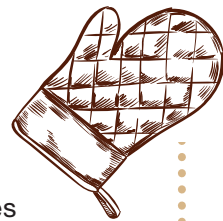
Preheat a large soup pot or Dutch oven over medium heat. Add the extra virgin olive oil and onion & carrot; saute about 5-6 minutes until the veggies are soft. Add the tomatoes (finely chopped, include the juices and all) and saute another 5-10 minutes until the oil has taken on the red color of the tomatoes.

It's important the tomatoes are fully cooked before adding the lentils—you'll know they're done when the oil is slightly red.

Add the garlic, cumin, a few spins of freshly cracked black pepper and a teaspoon of sea salt; saute 1-2 minutes until very fragrant, careful not to burn the garlic. Add the lentils and give them a quick stir into the oil, then add the stock and 2 cups of water. Add another teaspoon of sea salt and bring to a rolling simmer, then reduce to a gentle simmer. Simmer, covered with the lid slightly ajar, about 30 minutes until the red lentils are very soft.

No need to puree; red lentils break down a lot. Turn off the heat and stir in 1 teaspoon of lemon zest and 3 tablespoons of fresh lemon juice. The lemon is key, don't skip it. Adjust salt and pepper to taste. Garnish with a drizzle of evoo and freshly chopped cilantro, if desired.

Keeps in the fridge, covered, up to 5 days. Freezes well.





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SDDS Foundation

Big Day of Giving Is Coming up Soon

Big Day of Giving is coming up on Thursday, May 6th! Big Day of Giving is a program of the Sacramento Region Community Foundation's initiative to grow local philanthropy. It's a 24-hour community-wide movement that unites the regions nonprofit sector to help raise funds. This is a day where we raise money

to directly support the Sacramento District Dental Foundation and all its wonderful programs like Smiles for Kids, Smiles for Big Kids and more. Please mark your calendars for Big Day of Giving, we would absolutely love your support so that we can continue to make amazing impacts on our community! ■

**SAVE
THE DATE!**

May 6, 2021

**Big
Day of
Giving**

On May 6th donate to the
**Sacramento District
Dental Foundation**



Crowns for Kids Starting Strong

Crowns for Kids has had an incredible start in 2021! As of the end of February there have already been 28 different pickups with a total of \$7,496 raised in just the first two months of the year! Thank you so much to all who are a part of our Crowns for Kids Program!

Have you participated in our Crowns for Kids Program yet? If you'd like to be part

of the program as well, it's a simple process to get started. The first thing you'll need is a Crowns for Kids jar. Just call the SDDS office for one at (916) 446-1211. You then fill the jar with scrap metal, and then call Star Group to pick up their jar! Then Star Group sends the Foundation a check for the Foundation each month for the money made from the jars! ■

Broadway Tickets Going Fast

Thank you to everyone who purchased Broadway tickets when we announced them last month! Every ticket purchased helps to raise money for SDDF and all of its wonderful programs! We had an incredible response to our Hamilton tickets; we sold out our tickets in less than a week! We were even able to get some additional tickets, which also sold out extremely fast. Thank you for the amazing support! We still have tickets for our other three upcoming shows, so make sure that you get your tickets for those as well!

Upcoming Shows

HAMILTON (CURRENTLY SOLD OUT)
Thursday, September 23, 2021

The story of America then, told by America now. Featuring a score that blends hip-hop, jazz, R&B and Broadway, HAMILTON has taken the story of American founding father Alexander Hamilton and created a revolutionary moment in theatre—a musical that has had a profound impact on culture, politics, and education.

AN OFFICER AND A GENTLEMAN
Thursday, November 4, 2021

Based on the Oscar-winning film starring Richard Gere and Debra Winger, is a breathtaking production that celebrates triumph over adversity and includes one of the most iconic and romantic endings ever portrayed on screen.

CHARLIE AND THE CHOCOLATE FACTORY
Thursday, December 30, 2021

Roald Dahl's amazing tale is now Sacramento's golden ticket! Get ready for Oompa-Loompas, incredible inventions, the great glass elevator, and more, more, more at this everlasting showstopper!

COME FROM AWAY
Thursday, September 22, 2022

This show takes you into the heart of the remarkable true story of 7,000 stranded passengers and the small town in Newfoundland that welcomed them. Cultures clashed and nerves ran high, but uneasiness turned into trust, and gratitude grew into enduring friendships. On 9/11, the world stopped. On 9/12, their stories moved us all.

*Are you a
member of our
Foundation?*

Foundation Membership invoices recently went out in the mail, so if you see a \$75 invoice from the Foundation, that is your Foundation Membership!

Your Foundation Membership helps to fund our Smiles for Kids, Smiles for Big Kids programs and other forms of community outreach!

Not yet a member of the Foundation? Email us at sdds@sdds.org to become a member and make a difference.

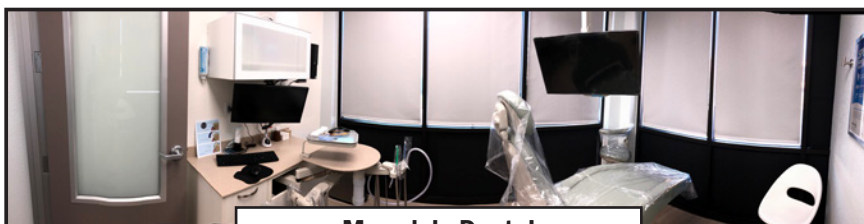
Thanks for your support!

Use the Broadway insert in this issue to sign up!

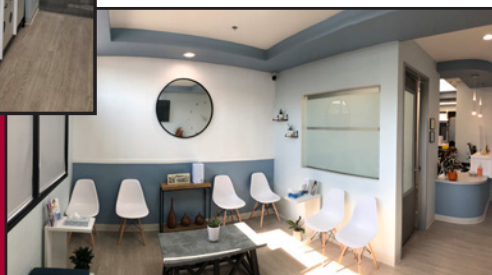


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TOTAL MEMBERSHIP

(as of 3/9/21:)

1,794

MARKET SHARE:

83.3%

ENGAGEMENT RATE: 96%

New Members

April
2021

MOHAMMED AHMED, DDS

Transfer from San Joaquin Dental Society

General Practice

Dr. Ahmed earned his dental degree from University of Alexandria in 1993. He currently practices at Tooth Berry Kids Dental in Carmichael.

PATRICIA BEZAD, DDS

Transfer from San Fernando Dental Society

General Practice

Dr. Bezad earned her dental degree from Tufts University School of Dentistry in 2005. She currently practices in Yuba City.

KIRAN FAREED, DDS

General Practice

Dr. Fareed earned her dental degree in 2019 from UOP Arthur A. Dugoni School of Dentistry. Her office address is currently pending.

ALI JASIM, DDS

General Practice

Dr. Jasim earned his dental degree from Mexico-Universidad De La Salle in 2020. His office address is currently pending.

HANH NGUYEN, DDS

General Practice

Dr. Nguyen earned her dental degree from Northwestern College of Dental Surgery in 1999. Her office address is currently pending.

GURLEEN SIDHU, DDS

General Practice

Dr. Sidhu earned her dental degree from UCLA School of Dentistry in 2019. Her office address is currently pending.

Pending Applicants:

Jennifer Cromeyer, DDS (returning)

Markus Kopa, DDS

Nitasha Goyal, DDS

An Ta, DDS

Congratulations to Our New Retired Members!

Jeffrey Chamberlain, DDS

James Cope, DDS

Michelle Inouye, DDS

Glenn Misono, DDS

James Pastor, DDS

Richard Silva, DDS

TOTAL ACTIVE MEMBERS:

1,393

TOTAL RETIRED

MEMBERS: 321

TOTAL DUAL

MEMBERS: 7

TOTAL AFFILIATE

MEMBERS: 13

TOTAL STUDENT

MEMBERS: 10

TOTAL CURRENT

APPLICANTS: 4

TOTAL DHP

MEMBERS: 46

TOTAL NEW

MEMBERS FOR 2021: 15

We're Blowing your horn!

Welcome Back!

Congratulations to Kelly Giannetti, DMD, MS

on working at her second vaccine clinic with Cindy True (Dr. Kenneth True's wife)! Thanks to them both for helping serve our community in this way!

LET US KNOW YOUR NEWS!

Get married? Pass your boards? Got published? Let us know your good news and we will feature it in "Blowing Your Horn."





Make the call that makes things better.

CDA's Well-Being Program

For dental professionals who suffer from alcohol or chemical dependency, the challenges of this past year may have profound impacts on health, personal relationships, and practicing safely.

Volunteer members and recovering dentists offer confidential peer-to-peer support, assistance finding facilities for evaluation or treatment, and guidance for family members.



Call or text for 24/7 confidential assistance.

Northern California

530.864.4264

San Francisco Bay Area

510.209.5637

Central California

916.947.5676

Southern California

310.487.5040

San Diego

619.275.7190

In Memoriam



Dr. Jun Tanimoto passed away on February 16th, 2021. He was a graduate of U.C. Berkeley and Washington University Dental School in St. Louis, MO. He served

on the faculty at the UOP Dental School and practiced dentistry in Sacramento for 43 years. In 1994 he was honored as the "Asian Dentist of the Year" and was a life member of the ADA, CDA and SDDS. We will miss seeing him at the SDDS River Cats game; he always attended with his son, Dr. Art Tanimoto!

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If you have not yet selected a charity with Amazon Smile you'll be able to search for "Sacramento District Dental Foundation" within the list of charitable organizations. If you've already selected a charity, you can switch it to SDDF at any time. Then you can shop at smile.amazon.com and Amazon will donate 0.5% of eligible purchases to your favorite charitable organization —no fees, no extra cost.

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

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ADA (800) 621-8099
CDA (800) 736-8702
CDA Practice Support . . (866) CDA-MEMBER
(866-232-6362)

TDIC Insurance Solutions . (800) 733-0633
Denti-Cal Referral. (800) 322-6384
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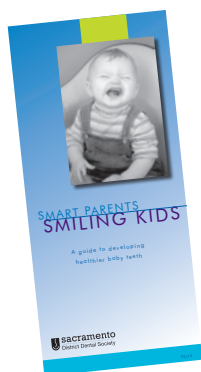
X **50**

3 1/4" 1st Tooth or 1st Birthday magnets



X **10**

Infant Gum Massagers (assorted colors)



X **100**

Smart Parents, Smiling Kids brochures (English)



X **10**

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X **50**

Smart Parents, Smiling Kids brochures (Spanish)

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Charles Cochran – SVP, Business Banking Team Lead

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pattersondental.com



Since 2003

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Publications

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newsreview.com



Since 2020

Education

The Foundation for Allied Dental Education

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916.358.3825
thefade.org



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Morgan Davis / Lynda Doyle
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bluenorthernbuilders.com



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GP Development Inc.

Gary Perkins
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gpdevelopmentcorp.com



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olsonconstructioninc.com



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Keith B. Dunnagan, Senior Attorney
Diana Doroshuk, Firm Administrator
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916.661.5754
kidscaredental.com



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Roy Fruehauf
916.918.5752
ddsmatch.com



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Brian Flanagan
855.337.4337
integritypracticesales.com



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PPSellsDDS.com



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John Noble, MBA
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Star Group Global Refining

Elizabeth Reynoso
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The Vendor Membership program offers so many great benefits! As a Vendor Member, you'll receive: four complimentary half page ads in *The Nugget*, a booth at our MidWinter Convention (or alternate event), the SDDS Membership Roster (send out quarterly via email), complimentary exhibitor tables at 3 meetings/events per year, and much more!

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muncpas.com



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Thomas Doll

Brett LeMmon
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thomasdoll.com



Since 2019

US Bank

Tom Collopy
916.924.4546
usbank.com



Since 2017

Staffing

Direct Dental Placements

Mark Ray, Sales Director
916.805.4221
directplacementsdental.com



Since 2021

Resource Staffing Group

Debbie Kemper
916.993.4182
resourcestaff.com



Since 2003

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Christine Sison
916.500.4125
swissmonkey.io



Since 2016

Access Dental Plan

Shanna Madden
916.922.5000
premierlife.com



Since 2017

Health Net of California

Felisha Fondren
877.550.3868
hndental.com



Since 2018

LIBERTY Dental Plan

Lisa Rufo
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libertydentalplan.com



Since 2016

Dental Plans

SDDS VENDOR MEMBERSHIP SUPPORT IS A WIN-WIN RELATIONSHIP!

SDDS started the Vendor Member program in 2002 to provide resources for our members. No, Vendor Members are not exclusive, and we definitely have some competitive companies who are Vendor Members. But our goal is to give SDDS members resources that would best serve their needs. We suggest that members reach out to our Vendor Members and see what is a best "fit" for their practice and lifestyle.

Our Vendor Members pay \$3,900 per year; that includes a booth at MidWinter (or alternate event), three tables at General Meetings, advertising in *The Nugget*, and much more. Our goal is to provide Vendor Members with the opportunity to connect with and serve our members. We realize that you have a choice for vendors and services; we only hope that you give our Vendor Members first consideration. The Vendor Members program and the income SDDS receives from this program helps to keep your dues low. It is a wonderful source of non-dues revenue and allows us to provide yet another member benefit. Additionally, we reach out to our Vendor Members for articles for *The Nugget* (nonadvertising!).

Our Vendor Members are financial, investment and insurance companies, legal consultants, dental equipment and supply companies, media and marketing companies, HR consultants, construction companies, billing consultants, practice sales and brokers, practice resource and staffing consultants, technology, dental plans, and even our Crowns for Kids refining partner!

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Volunteer opportunities

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

VOLUNTEERS NEEDED: Dentists willing to "adopt" patients for immediate/emergency needs in their office.



TO VOLUNTEER, CONTACT:

SDDS office (916.446.1227 • sdds@sdds.org)

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

The Valley Springs Health & Wellness Center is a new primary care clinic in Valley Springs, CA. The Center features a new, state-of-the-art 3-chair Dental operatory that is fully functional and dental staff is ready to start. We seek one or more part-time Dentists, hours and days negotiable, to provide general dentistry to scheduled patients. Compensation is \$85/hour or \$400 per half day and is open to negotiation based on experience and references. The position is open immediately on hiring. Please send your resume and questions to rwsmart@pacbell.net or call the main office at 209-754-4468. 3/21

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. 06-7/17

WELLSPACE HEALTH ORGANIZATION (an FQHC) is taking applications for fill-in/part-time/full-time dentists. Send your resume/CV to eljohnson@wellspacehealth.org. 01/15

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PART TIME General Dentist for Cameron Park growing office. Ownership oriented, motivated dentist preferred. Start with 1-2 days/week. Email resume to sacramentodds@aol.com. 06-7/20

PRACTICES FOR SALE

Roseville/Rocklin family oriented practice for sale. Consistently delivers standard of care to motivated patient base. Averages 7 patients/day and 10-15 new patients a month. \$240,000. Contact alignedteeth@gmail.com. 3/21

Campus Commons dental practice for sale. For more information please send an email to Stephen Molinelli of Northern California Practice Sales at molinelli@aol.com or call 650-347-5346. 2/21

Having Trouble Restarting Post-COVID? A+ Dental Care Group can help. Discover the benefits of our flexible affiliation model. Contact Dr. Tim Herman at 916-217-2458 or tim.herman@aplusdentalcaregroup.com to learn more. 06-7/20

PROFESSIONAL SERVICES

MONEY IS WALKING OUT THE DOOR. Have implants placed in your office and keep the profits. Text name and address 916-769-1098. 12/14

LEARN HOW TO PLACE IMPLANTS IN YOUR OFFICE OR MINE. Mentoring you at your own pace and skill level. Incredible practice growth. Text name and address to 916-952-1459. 04/12

EQUIPMENT FOR SALE

EQUIPMENT FOR SALE: Implant Surgical Motor – ATR3000, Sybron Endo Handpiece, GT Obturator, Root-2X. Serious inquiries only. Contact: (213) 842-1284 04/21

SOREDEX CRANEX D PANOREX/CEPH (digital) Gently used. Great images. Call (916) 393-1363 or (916) 606-7277. BEST OFFER! 04/21

FOR LEASE

Leasehold improvements and equipment. NEW LISTING: Carmichael, CA. Park Professional Center. High quality, built-out, 3 exam room suite. Current dentist is relocating to a larger suite. Reasonable rent. (510) 332-8442. 4/21

Fully built out dental offices: 2821 Eastern, Sacramento/125 Ascot, Roseville; South Sacramento \$1.25/sf; Retail for lease: 7509 Twin Oaks, Citrus Heights/362 N.Walton, Yuba City; Ranga Pathak 916-201-9247, Broker Associate, RE/MAX Gold, DRE01364897. 4/21

El Dorado Hills Professional building with 2 operatories fully equipped and 3rd plumbed. 1736 sq feet, modern furnished, panorex room, private office with Bathroom plus employee lounge. Utilities and janitorial included except phone and internet. Generous TI allowance also included. Total price \$3590 per month with 5 year lease and two 5 year options. Call Dr. Amar at (916) 230-5195 and leave a message for appointment. 3/21

Built out dental suites in Roseville 95661. Newly renovated exterior. Desirable location. Easy freeway access. Building and monument signage available. John Walston 916-677-8128 DRE 01200364 3/21

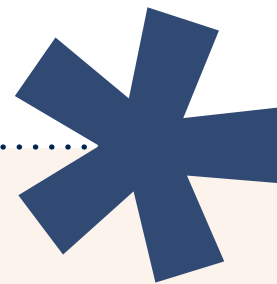
Greenhaven professional building on Secret River Drive. Beautiful outdoor views from all 4 operatories. 1500 square feet, panorex room, large lab, private bathrooms, and all utilities paid except for phone and internet. Nightly janitorial service and compressor and evacuation systems included in the rent and the responsibility of the landlord. Total price of \$2,950 per month with 5 year lease and two 5 year options. Generous TI allowance also included. Call Greg Maroni, DDS, (916) 421-3815. 2/21

Greenhaven Dental Office For Lease. Professional Dental Building 930 Florin Road Ste 100. 1,396 S.F. \$1.85 PSF Plus Utilities. Contact agent 916-443-1500 CA DRE Lic. #01413910 11/20

SACRAMENTO DENTAL COMPLEX has one 3 unit suite which is equipped for immediate occupancy. Two other suites total 1630 sq. ft which can be remodeled to your personal office design with generous tenant improvements. 2525 K Street. Please call for details: 916-448-5702. 10/11

ADDRESS SERVICE REQUESTED

SDDS CALENDAR OF EVENTS



APRIL

- 1** Harassment Prevention Webinar
For Employees
California Employers Association
12-1pm / Webinar
- 12** Mediation Review Task Force Meeting
6:15pm / Zoom Meeting
- 13** General Membership Meeting
TWEAKED! ICE, ACEs & CPS:
An Intertwined Relationship
Mitchell Goodis, DDS & Jennifer Berry
6pm–8pm / Zoom Meeting

- 17** CPR - AH BLS Blended Learning
Skills Testing, 3 Time Sessions
8-8:45am, 9-9:45am, 10-10:45am
SDDS Office
- 26** Member Benefits and Services
Meeting
6:15pm / Zoom Meeting

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

MAY

- 4** Board Meeting
6pm / SDDS Office
- 6** Big Day of Giving
Benefits the SDDS Foundation
www.bigdayofgiving.org/sddf
- 7** Swing For Smiles Golf Tournament
Benefits the SDDS Foundation
Empire Ranch Golf Course
- 11** General Membership Meeting
Numb, Numb-er, and Numb-est:
The Latest Anesthesia Pearls
Alan Budenz, DDS
6pm–8pm / Zoom Meeting



Swing for Smiles 2021

Come support the Foundation at the annual Golf Tournament
on May 7th at Empire Ranch Golf Course!



APR
12

General Meeting

2 CEU, CORE • \$49

TWEAKED! ICE, ACEs & CPS: An Intertwined Relationship

Presented by Dr. Mitchell Goodis and Jennifer Berry

Methamphetamine use is rampant! Everyone knows someone affected by Meth... Patients, friends, relatives, or worse: Our kids. Unravel the allure of ICE. Learn how Meth is cooked, smuggled, and purchased. Follow the path of destruction that Crystal leaves behind as we explore the allure, predisposition, addiction, neuropathology, physiology and psychology of drug abuse in easily understandable terms. We are all mandated reporters. Learn what happens to children after CPS is called on the scene.

This course is being offered as a Zoom meeting only. To register, please go to www.sdds.org/events/online-gm-tweaked-ice-aces-cps-an-intertwined-relationship/

If you are a 2020-21 DMD member, you will receive a credit.

TUESDAY
6PM-8PM

ARE YOU REGISTERED FOR THE GENERAL MEETING?