

PDT



24

The *Incisor's* Guide to Social Media

Practice Management and Marketing News

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30



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Staying Focused on Increasing Access to Dental Care for Children

by Dr. Jessica Y. Lee AAPD President



We have all witnessed so much change the past several months. With all this change, much of us have had the time to refocus on what is important. We have spent time at home with our families, missed our friends and been grateful for our health and happy to practice dentistry again. With everything changing, the only thing that has remained constant is that children need access to dental care. This has become more apparent than ever. In March, many of us were under stay at home orders and were asked to limit our practices to urgent/emergency care only. During the summer, we opened our offices and expanded treatment options. This fall, we got busy doing what we do best—taking care of children. Many of us quickly found out that delaying dental treatment has its consequences. Children showed up to our offices in pain and teeth that could have been restored were now being extracted. During this time, we kept hearing that oral health was elective care. Our operating cases were being delayed or cancelled due to the elective nature of the case. Many of us are now having difficulties accessing operating room time with many hospitals deciding not to accommodate dental cases. The Surgeon in Chief at the University of North Carolina Children's Hospital stated it best when referring to dental operating cases, "These are essential cases that are just being postponed for a few weeks. These are not elective cases. Yes. Dentistry is essential care."

The American Dental Association's Ad Interim Policy on Dentistry As Essential Health Care states: "Dentistry is an essential health care service because of its role in evaluating, diagnosing, preventing or treating oral diseases, which can affect systemic health. The term "Essential Dental Care" be defined as any care that prevents and eliminates infection, preserves the structure and function of teeth as well as the orofacial hard and soft tissues, and that this term be used in lieu of the terms "Emergency Dental Care" and "Elective Dental Care" when communicating with legislators, regulators, policy makers and the media in defining care that should continue to be delivered during global pandemics or other disaster situations, if any limitations are proposed."

As members of the American Academy of Pediatric Dentistry (AAPD), we are advocates for children's oral health. If there was ever a time where this was most important—that time is now! Our children are being neglected by a system that is failing them. Whether it be poor reimbursement rates by the Medicaid program or allowing hospitals and surgery centers to limit dental cases, these barriers hurt the children the most. Fortunately, we can do something about it. The AAPD works to advocate policies, guidelines and programs that promote optimal oral health and oral health care for children. We work closely with legislators and government agencies, and other professional associations. AAPD advocacy efforts strengthen the voice of pediatric dentistry on behalf of children's oral health at the national and state level. We are well represented by our Congressional Liaisons (Dr. Heber Simmons, Jr, Dr. Jade Miller and Dr. Warren Brill), but they cannot do it alone. We are only as good as our members. We need you to be oral health advocates for children. You need to be involved in making the system work for our children. Please get involved with the AAPD, the AAPD Foundation, the AAPD PAC, make contact with your U.S. representative or senator when requested by the AAPD to discuss your concerns about access to dental care (sign up to join the AAPD Grass Roots network¹), and get involved with your state AAPD Public Policy Advocate and state dental association. Together, we can provide optimal oral health for children.

¹To sign up go to: <https://www.aapd.org/advocacy/grassroots-advocacy/advocacy-tools/>

Section 1557 Relief Obtained

by C.Scott Litch Chief Operating Officer and General Counsel



As noted in the 2020 AAPD CEO's Annual Report to the membership that was published in the July 2020 *PDT*, the Organized Dentistry Coalition (**ODC**), which includes the AAPD and ADA, submitted a regulatory comment letter on Aug. 23, 2019, to the U.S. Department of Health and Human Services Office for Civil Rights' (**OCR**) supporting a proposal to amend portions of the Section 1557 Final Rule. This is the provision of the Affordable Care Act that prohibits health care entities that receive federal financial assistance from discriminating on the basis of race, color, national origin, age, disability and sex. Implemented in 2016, the final rule applies to health care providers who receive certain funds through HHS, including Medicaid and the Children's Health Insurance Program.

Among other provisions of the OCR's proposal, was a **repeal of the Section 1557 requirements for covered dental practices to post taglines in the top 15 non-English languages spoken in the state and notices of nondiscrimination**. The proposal also expanded permissible use of audio-based interpretation services for individuals with limited English proficiency. The ODC letter said each dental coalition member "strongly supports non-discrimination in health care and equal access to care for all patients without regard to race, color, national origin, sex, age, religion or disability," but noted dentists have reported "great difficulty" complying with this provision of the rule." Further, coalition members "believe that the repeal of these requirements will lead to cost savings and will allow staff to spend time on appropriate patient care and communication instead of time on interpreting and complying with the regulations." The coalition also expressed support for the proposed rule's exemption from the auxiliary aids and services requirements for covered entities with fewer than 15 employees.

With the release of final regulations on June 18, 2020, these changes are now final with an effective date of Aug. 18, 2020.¹ To summarize:

- Dentists are no longer required to include notices related to nondiscrimination and language assistance services in all significant communications. Providers had been required to include taglines in the top 15 non-English languages spoken in their state indicating that free language assistance services were available, as well as a notice of nondiscrimination, with any significant publications and communications. OCR repealed this requirement, stating the "requirement caused significant unanticipated expenses" because of confusion over what constitutes a significant communication, leading many covered entities to include the nondiscrimination notice and taglines with most written communications. ADA estimated that the dental profession has spent an estimated \$240 million on complying with the Section 1557 requirements.
- Covered dentists are still required to provide taglines when they are necessary to ensure meaningful access by people with limited English proficiency to a covered program or activity, according to the amended rule.

- Remote English language interpreting services are permitted to be audio based instead of video based.
- The final regulation does NOT contain an exemption for entities with 15 or fewer employees from the auxiliary aids and services requirements for covered entities:

“ . . . the Department finds it appropriate not to adopt an exemption from the auxiliary aids and services requirement for covered entities with fewer than 15 employees.”²

For further information, contact Chief Operating Officer and General Counsel C. Scott Litch at (312) 337-2169, ext. 29 or slitch@aapd.org.

This column presents a general informational overview of legal issues. It is intended as general guidance rather than legal advice. It is not a substitute for consultation with your own attorney concerning specific circumstances in your dental practice. Mr. Litch does not provide legal representation to individual AAPD members.

¹Available at: <https://www.govinfo.gov/content/pkg/FR-2020-06-19/pdf/2020-11758.pdf>.

Also see the ADA news story at: <https://www.ada.org/en/publications/ada-news/2020-archive/june/department-of-health-and-human-services-finalizes-section-1557-regulations>

²85 FR 37215

Protect Yourself and Others by Wearing a Face Covering Correctly

Looking for a way to kindly inform your office visitors to follow your mask guidelines? Hang up these great resources in your office to make wearing a mask a little bit more fun!

The Mouth Monsters are here to help encourage masks to be worn in the office. Wearing a mask properly can significantly help stop the spread of disease from person to person. These posters are wonderful for use on social media, websites and to be hung on the wall in the office. The best part is that they are available in English and Spanish!



Download yours now from the Mouth Monster hub at mychildrensteeth.org!



PAC Corner

Candidates Supported for 2020 Congressional Election Cycle...and More!



In late August, we emailed all AAPD PAC-eligible members (Active, Life, Affiliate, and Postdoctoral Student) to share a link to the 2020 AAPD PAC Annual Report. I strongly encourage all AAPD members to review the report.¹

We also included a link to an inspirational keynote address by AAPD Congressional Liaison Dr. Heber Simmons Jr., in Washington, D.C., in March, 2020.² This encapsulates the role that all pediatric dentists can play in advocating for optimal oral health for all children.

This report recognizes our contributors, highlights our activities, and demonstrates how your PAC is THE BIG ADVOCATE for little teeth.

I want to thank all of you who have supported the AAPD PAC in the current dues cycle.

As noted on pages six of the AAPD PAC Annual Report, here are candidates supported by the AAPD PAC in the 2020 Congressional election cycle.

▲ *House members denoted with this symbol signed onto a FY 2021 Dear Colleague Letter in support of Title VII Pediatric Dentistry appropriations, which was generated by Congresswoman Julia Brownley (D-Calif. 26th). This is AAPD's number one federal appropriations priority.*

Senate

Illinois

Dick Durbin

Iowa

Joni Ernst

Kentucky

Mitch McConnell

Louisiana

Bill Cassidy

Maine

Susan Collins

Mississippi

Cindy Hyde-Smith

Montana

Steve Daines

New Hampshire

Jean Shaheen

Oregon

Jeff Merkley

Rhode Island

Jack Reed

South Carolina

Lindsay Graham

Utah

Mitt Romney

House

Alabama

Mo Brooks

Arizona

Paul Gosar

Arkansas

Steve Womack

California

Lucille Roybal Allard

Julia Brownley

Salud Carbajal

Anna Eshoo ▲

Barbara Lee

Mike Levin ▲

Katie Porter

Kristi Smith

Jackie Speier ▲

Eric Swalwell

Colorado

Diana DeGette

Connecticut

Joe Courtney

Rosa DeLauro

John Larson ▲

Florida

Gus Bilirakis

Georgia

Drew Ferguson

Idaho

Mike Simpson

Illinois

Danny Davis

Rodney Davis

Indiana

Jackie Walorski

Kansas

Sharice Davids

Kentucky

Brett Guthrie

Maine

Chellie Pingree ▲

Maryland

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Steny Hoyer

Dutch Ruppersberger ▲

Massachusetts

Richard Neal

Michigan

Fred Upton

Minnesota

Betty McCollum

Steve Palazzo

Mississippi

Michael Guest

Trent Kelly

Nevada

Mark Amodei

New Jersey

Frank Pallone

Jeff Van Drew ▲

New York

Yvette Clarke

Grace Meng

Hakeem Jeffries ▲

North Carolina

Virginia Foxx

David Price

Oklahoma

Tom Cole

Tennessee

Chuck Fleischmann

Mark Green

Texas

Brian Babin

Kevin Brady

Michael Burgess

Henry Cuellar

Kay Granger

Van Taylor

Vermont

Peter Welch ▲

Washington

Derek Kilmer

Rick Larsen

Kim Schrier

Wisconsin

Mark Pocan

Bryan Steil

Indicates dentist member of Congress

There are also 49 additional signers of the Dear Colleague letter that the AAPD PAC supported who are listed in the Annual Report.

I also want to thank all those AAPD leaders who helped deliver AAPD PAC checks in this election cycle, whether via Zoom fund-raiser events or (in a few cases) in person. Here are a few examples:



I-r Council on Government Affairs Chair Dr. Jessica Robertson (and son) with Congressman/dentist Paul Gosar (R-Ariz. 4th) in early September 2020.



On Aug. 14, 2020, Dr. Jeff Rhodes (r) welcomed Congressman Steve Womack (l) (R-Ark. 3rd) to Dr. Rhodes' pediatric dental office Smile Shoppe. Rhodes serves as Public Policy Advocate for the Arkansas Society of Pediatric Dentistry. Congressman Womack serves on the U.S. House Committee on Appropriations.

On Aug. 29, 2020, pediatric dentist Mark Lisagor (Camarillo, Calif.) hosted a Zoom fund-raiser for Congresswoman Julia Brownley (D-Calif. 25th). This was Ms. Brownley's birthday, and there were more than 80 people on the Zoom. This turned out to be the biggest fund-raiser of the year for her campaign. Congresswoman Brownley has spearheaded Dear Colleague letters in support of funding for Title VII pediatric dentistry.³ Lisagor serves on the AAPD PAC Advisory Board.



(l-r) U.S. Senator Jean Shaheen (D-N.H.) and New Hampshire Public Policy Advocate Dr. Roger Achong during an Aug. 25, 2020, Zoom meeting.

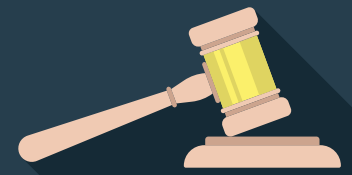
For further information about the AAPD PAC, please contact PAC Secretary C. Scott Litch at (312) 337-2169 ext. 29 or slitch@aapd.org.

Dr. Clifford R. Hartmann, D.D.S., F.A.A.P.D., PAC Steering Committee Chair

¹<https://www.aapd.org/globalassets/media/pac/2020-pac-annual-report-final.pdf>

²The keynote can be viewed with the access password of AAPD: <https://vimeo.com/videoreviewlink/>

³<https://www.aapd.org/globalassets/media/advocacy/fy2021-pediatric-dentistry-appropriations-dear-colleague-letter-with-signers.pdf> review/400007200/62f361470e



Legislative, Regulatory and Legal Update

Unless otherwise noted, for further information on any of these issues please contact Chief Operating Officer and General Counsel C. Scott Litch at (312) 337-2169 or slitch@aapd.org.

STATE NEWS

NEBRASKA LEGISLATURE APPROVES MEDICAID AUDIT REFORM LAW



The AAPD is delighted that the Nebraska Society of Pediatric Dentistry (NSPD) achieved legislative success this summer as the Medicaid audit reform bill was added to and approved under LB956¹ and signed into law by Governor Pete Ricketts on Aug. 21, 2020. Dr. Jessica Meeske (Hastings, Neb.), who is a member of the AAPD's Committee on Dental Benefit Programs and Medicaid and CHIP Advisory Committee (both under the Council on Government Affairs) plus current chair of ADA's Council on Access, Advocacy, and Prevention (CAAP) comments that:

"This bill was a great example of the powerful impact we can have when AAPD, ADA, and NDA, and the NSPD join forces to create meaningful legislation that helps to assure Medicaid audits are fair. Nearly all of Nebraska's pediatric dentists are significant providers of care for children with Medicaid. We hope this will be great model legislation for other states. In the end, without fair and valid audit processes, the dentists will quit the program, and then it's the kids who are the ultimate losers."

The law requires that all program integrity contractors retained by the state Medicaid agency (SMA) when conducting a program integrity recovery audit, investigation, or review shall meet the following requirements:

- Review claims within four years from the date of the payment.
- Send a determination letter concluding an audit within 180 days after receipt of all requested material from a provider.
- If a service was provided and sufficiently documented but denied because it was determined by the department or the contractor that a different service should have been provided, the department or the contractor shall disallow the difference between the payment for the service that was provided and the payment for the service that should have been provided
- Utilize a licensed health care professional from the specialty area of practice being audited to establish relevant audit methodology consistent with state-issued Medicaid provider handbooks and established clinical practice

guidelines and acceptable standards of care established by professional or specialty organizations responsible for setting such standards of care.

- Work with the SMA the start of a recovery audit to review this section and section 68-973 and any other relevant state policies, procedures,



Nebraska pediatric dentists on the steps of the state Capitol after the bill signing.

Background

The AAPD, American Dental Association, Nebraska Society of Pediatric Dentistry and Nebraska Dental Association (NDA), troubled by the growing number of Medicaid pediatric dental audits in Nebraska that are harming children's access to oral care, wrote the state's Medicaid agency on Nov. 6, 2019, stating that the audits have led to "unfortunate outcomes detrimental to the program's goal of improving oral health access for children of low-income families." The organizations said they believe that dental auditors were not basing their reviews on AAPD's accepted clinical recommendations and were "second-guessing clinical decision-making by pediatric dentists absent appropriate peer review by a dentist with equivalent educational training." **The audits questioned the use of stainless steel crowns in children at high caries risk, many with signs of severe decay on multiple teeth, and requested significant refund of payments for alleged inappropriate treatment.** The letter asked the Nebraska Division of Medicaid and Long-Term Care to halt the audits and require all future Medicaid dental auditors to utilize dental profession clinical guidelines, best practices and policies of the appropriate specialty organization, and require contracted auditors to utilize licensed dentists of equivalent education and training as the dentists being audited and to have experience in treating Medicaid patients.

On Dec. 13, 2019, the Nebraska Legislature's Health and Human Services Committee held a hearing that included testimony on the Medicaid UPIC (Uniform Program Integrity Contractor) dental audits. The dental audit portion lasted for a little under an hour. The witnesses all did an outstanding job; these included pediatric dentists Drs. Marty Killeen (the first pediatric dentist impacted by these audits), Jill Wallen (head of pediatric dentistry at the University of Nebraska dental school), and Jessica Meeske (former AAPD NorthCentral Trustee and member of the AAPD's Committee on Dental Benefit Program and Pediatric Dental Medicaid and CHIP Advisory Committee), along with the mother of a special needs child. In a bit of great timing, coordinated between the Nebraska Society of Pediatric Dentistry and AAPD, there was a front page news story Friday morning of the hearing in the Omaha World-Herald and a subsequent editorial supporting the dental community's position.

A subsequent state legislative hearing was held in February 2020 with many of the same witnesses from the December hearing, along with NDA contact lobbyist Kim Robak. This was followed by the introduction of legislation, LB 1105, that expands the state's existing RAC audit law to require all Medicaid audits to have peer review by same specialists and follow the best practices and guidelines of national organizations.

regulations, and guidelines regarding program integrity audits. The program integrity contractor shall comply with this section regarding audit procedures. A copy of the statutes, policies, and procedures shall be specifically maintained in the audit records to support the audit findings.

- Claims processed or paid through a capitated Medicaid managed care program shall be coordinated between the department, the contractor, and the managed care organization. All such audits shall be coordinated as to scope, method, and timing. The contractor and the department shall avoid duplication or simultaneous audits.
- Extrapolated overpayments are not allowed without evidence of a sustained pattern of error, excessively high error rate, or the agreement of the provider.
- Records requests made by a program integrity contractor in any 180 day period shall be limited to not more than 200 hundred records for the specific service being reviewed.
- Provider training and provider appeal rights under the Recovery Audit Contractor law are now applicable to all program integrity audits.

Dr. Holly Randone, Nebraska Public Policy Advocate, comments:

"It has been disheartening for the pediatric dentists of our state to go through these audits over the last several years, and while we know audits need to be done, I'm glad we now have a system in place to assure that they are being conducted in the correct manner. We have went through a rough patch over the last several years, but we have pulled together and fought for what is the right thing for our profession, and for our patients. I want to especially recognize Dr. Marty Killeen for being so courageous and open with telling his story throughout this process."

The AAPD believes this is a model law for all states to consider, especially those facing improper Medicaid dental audit challenges.

¹ <https://nebraskalegislature.gov/FloorDocs/106/PDF/AM/AM2827.pdf>

Access to Hospital Operating Rooms for General Anesthesia Cases: AAPD Pursues Multi-Pronged Strategy

The AAPD is aware that many pediatric dentists around the country have been experiencing difficulty in obtaining or maintaining hospital operating room time for dental cases requiring care under general anesthesia. This problem was identified by the AAPD state Public Policy Advocate (PPA) network in 2019 as an emerging issue of concern, and it has resumed as problem since pediatric dental practices have come back up to speed after COVID-19 practice limitations were lifted.

Earlier in the year, AAPD's Chief Policy Officer Dr. Paul Casamassimo initiated a survey of the AAPD PPA network on this issue. The PPA survey results indicate the problem is largely financial, particularly due to low facility fees for dental cases. This survey analysis has been accepted for publication in the Pediatric Dentistry journal and will be utilized in AAPD's advocacy efforts.

Last year, the AAPD engaged Powers law firm¹ in Washington, D.C., to provide an analysis of potential upgrades to facility fee coding for dental operating room cases, via CMS HCPCS codes and other venues.² This was included as one of the AAPD's 2020 federal regulatory priorities:

Access to Care Goal

1. Based on findings of a coding and reimbursement technical analysis, seek recommended changes in CMS Medicaid funding formula for facility fee charges in hospital dental general anesthesia cases, so that pediatric dentists do not lose hospital operating room access due to low facility fees for such cases.

This analysis was recently completed and the AAPD is moving ahead with an advocacy strategy. AAPD members should be aware that this is at least a two-step process. First, we will have to convince CMS to adopt new codes and mapping. Second, our PPA network working with state chapters will have to convince their state Medicaid agency (SMA) to adopt new codes. AAPD is coordinating advocacy efforts closely with the ADA, as noted in an *ADA News* story from Aug. 31, 2020.³

In some states such as Michigan, hospital systems are looking at immediate strategies to help alleviate the problem. Due to the timing issues discussed above related to code changes, the AAPD has encouraged the PPA network to pursue all such local efforts. Also, due to variance in SMA methodologies for determining facility fees, in some cases a direct appeal to the SMA to boost such fees for dental cases is possible. This was successfully pursued in Oklahoma in 2016 by pediatric dentist Dr. Wavel Wells.

Simultaneous with the above efforts, AAPD will provide additional CE and guidance for members regarding options for Ambulatory Surgery Center (ASC) usage. Recently released was a PEDO TEETH TALK podcast with moderator Dr. Joel Berg interviewing Dr. Roger Sanger regarding ASCs. AAPD also plans to engage Powers Law to prepare a White Paper analyzing ASC options for pediatric dentists, either as participants or co-owners. It is recognized that, financial issues aside, dental cases are often considered less urgent to hospital administrators in allocating operating room time as opposed to more serious medical conditions such as pediatric cardiac disease. However, the types of procedures typically performed in an ASC are generally on par with or much less serious than dental cases involving severe early childhood caries.

Finally, the in-office option for deep sedation/general anesthesia should also be considered, in states that allow it with involvement of a dental or medical anesthesiologist.⁴ Dental anesthesiology is now a recognized dental specialty and many dentist anesthesiologists provide services to pediatric dentists. Now that pediatric dentists are back in the practice, the AAPD is making an official rollout this fall of an endorsed sedation accreditation program with the American Association for Accreditation of Ambulatory Surgery Facilities (AAAASF).⁵ It is a voluntary program for pediatric dental practices to consider.

For further information, please contact Chief Operating Officer and General Counsel C. Scott Litch at (312) 337-2169 or slitch@aapd.org.

¹ <https://www.powerslaw.com/> known as Powers Pyles Sutter & Verville PC.

² <https://www.cms.gov/Medicare/Coding/MedHCPCSGenInfo>

³ <https://www.ada.org/en/publications/ada-news/2020-archive/august/pediatric-dentists-sound-alarm-about-being-denied-or-access>

⁴ See this AAPD Best Practices document: https://www.aapd.org/globalassets/media/policies_guidelines/bp_anesthesiapersonnel.pdf

⁵ For more details see: <https://www.aaaasf.org/programs/outpatient-programs/outpatient-pediatric-dentistry-faqs/> and page 20 of this issue.

Call for 2021-22 Nominations

The AAPD Nominations Committee is accepting nominations for the 2020-21 election of **Secretary/Treasurer and Academic At-Large trustee**. The term of the current Academic at-large trustee, Dr. Homa Amini, expires in 2021. Per the AAPD bylaws, any nominee for this position must be a full-time educator who devotes a majority of professional time, in no case less than two days a week, to educational endeavors in a dental school or graduate pediatric dentistry program accredited by the Commission on Dental Accreditation.

Nominations must be received by the AAPD headquarters office no later than Dec. 1, 2020. This date reflects procedures for the Nominations Committee, per the current *AAPD Administrative Policy and Procedure Manual*.

A nominee's submission must be on the standard AAPD Nominations Committee Candidate Consideration form. The required materials from nominees are the following:

1. The completed and signed Nomination form;
2. A one-page essay explaining their interest in serving in the specific office and summarizing their leadership skills;
3. A background description suitable for publishing in *Pediatric Dentistry Today*;
4. A photograph in electronic format suitable for publication in *Pediatric Dentistry Today*.

Letters of recommendation: Nominations for Secretary/Treasurer and At-Large Trustee must have three letters of recommendation from active, life, or retired members of the Academy.

The Nominations Committee will meet in January 2021, at which time they shall interview all nominees either in person or via teleconference or web conference or other appropriate technology. All nominees must agree to participate in this interview process. All nominees for the 2021-22 academy year will be published in the March or May 2021 issue of *PDT* and voted on by the membership at the 2021 General Assembly.

For further information, please contact Chief Executive Office John S. Rutkauskas at (312) 337-2169, ext. 29, or jrutkauskas@aapd.org.

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(1) Paid/Requested Outside-County Mail Subscriptions Stated on Form 3541. (Include advertiser's proof and exchange copies)	8,928	9,272
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(3) Sales Through Dealers and Carriers, Street Vendors, Counter Sales, and Other Non-USPS Paid Distribution.	0	0
(4) Other Classes Mailed Through the USPS	608	711
c. Total Paid and/or Requested Circulation [Sum of 15b. (1), (2), (3), and (4)]	9,536	9,983
d. Free Distribution by Mail (Samples, complimentary, and other free.)		
(1) Outside-County as Stated on Form 35416845	0	0
(2) In-County as Stated on Form 3541	0	0
(3) Other Classes Mailed Through the USPS	0	0
e. Free Distribution Outside the Mail (Carriers or other means)	0	0
f. Total Free Distribution (Sum of 15d. and 15e.)	0	0
g. Total Distribution (Sum of 15c. and 15f.)	9,536	9,983
h. Copies not Distributed	550	517
i. Total (Sum of 15g. and h.)	10,086	10,500
j. Percent Paid and/or Requested Circulation (15c. divided by 15g. times 100)	100%	100%
16. Extent and Nature of Circulation		
a. Paid Electronic Copies	0	0
b. Total Paid Print Copies (Line 15c) + Paid Electronic Copies (Line 16a)	9,536	9,983
c. Total Paid Distribution (Line 15f) + Paid Electronic Copies (Line 16a)	9,536	9,983
d. Percent Paid (Both Print & Electronic Copies (16b divided by 16c x 100)	100%	100%

17. Publication of Statement of Ownership is required. It will be printed in the November 1, 2020 issue of this publication.

18. Signature and Title of Editor, Publisher, Business Manager, or Owner

John S. Rutkauskas, Chief Executive Officer

Date: October 1, 2020

I certify that all information furnished on this form is true and complete. I understand that anyone who furnishes false or misleading information on this form or who omits material or information requested on the form may be subject to criminal sanctions (including fines and imprisonment) and/or civil sanctions (including civil penalties).



AAPD 2021

Boston, Mass. May 27 – 30, 2021

Preconference Course: Pediatric Medicine Update

Scientific Program

Pharmacology and Pain Control: Karen Baker

Trauma Guideline Update: Anne O’Connell

Immune Health in the Era of Pandemics: Tieraona Low Dog

AAP Section: Structural Racism & Child Health, How Pediatric Dentists Can Address and Ameliorate the Effects of Racism on Children and Adolescents

Addressing Systemic Racism and Its Impact in Dentistry and Building the Right Treatment Plan: Laila Hishaw, Jaha Howard, Paula Coates, Karan Estwick

Rethinking ECC in the Era of Precision Medicine: Novel Clinical Insights Gained from Human Genome, Oral Microbiome, and Machine Learning Applications: Kimon Divaris

Dental Benefits Symposium

Coffee Clutch: Networking Rounds for Office Staff

Screen Time and Its Effects: Michael Rich

Speed Learning: Back to Basics, Peg Laterals and Impacted Canines: John Taylor

Nutrition Update for the Dental Team: Tieraona Low Dog

Bioactive Materials: Gerard Kugel

International Oral Presentations

Safe Sedation for the Pediatric Dental Practice: Jason Maynes

Early Career Dental Course

Learning Labs

MiniClinics

String of Pearls

AAPD Abstract Submission Deadline

Jan. 15, 2021

Graduate Student Research Awards (GSRA)

My Kid’s Dentist & Orthodontics Research Poster Competition

Sunstar Research Fellowship

International Oral Presentations at AAPD 2021

The AAPD recognizes the importance of research that is taking place globally and wants to offer an opportunity for these international colleagues to share their knowledge. The Academy is seeking oral presentations from pediatric dentists outside of North America to give a 15-minute presentation on their research at AAPD 2021 in Boston. In this format, each presenter will bring a single idea or concept and will share it with the audience. One winner will be selected for a monetary prize. Submit your abstract today, the deadline is Jan. 15, 2021. For additional information, contact Meeting Services Manager Caroline Oliva at coliva@aapd.org.





Living in a world where in person events and face-to-face communication and learning with colleagues, friends, family and loved ones is few and far in between in our new normal. AAPD Staff and Leadership miss seeing our membership dearly, and we are counting down the days until we can meet again. Pediatric dentists are communicators, they thrive off of in-person interactions and networking, and we see that so clearly at our CE courses, social events and more.

We don't want the communication and connections with our members to go away at this time. Instead, we want to strengthen these connections, even if that means a virtual format is a must.

AAPD's Education Passport offers our membership the opportunity to gain CE and knowledge, while being in your chosen setting. We've shifted in these current times and are providing live CE opportunities that allow you connect and network with our world-class speakers and maybe even send a chat or two to your friends and peers while doing so. We also have plenty of pre-recorded CE options as well from our QE Prep Course to Safe & Effective Sedation and even Annual Session packages dating back to three years ago.

Annual Session Packages

***Available in Audio Only & CE**

2020 (Virtual)

2019 (Chicago)

2018 (Hawaii)

2020

AAPD Journal CE

Bundle Discounts

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2019

QE Prep

Safe & Effective Sedation

The NEW Comprehensive Review: Advances in Pediatric Dentistry

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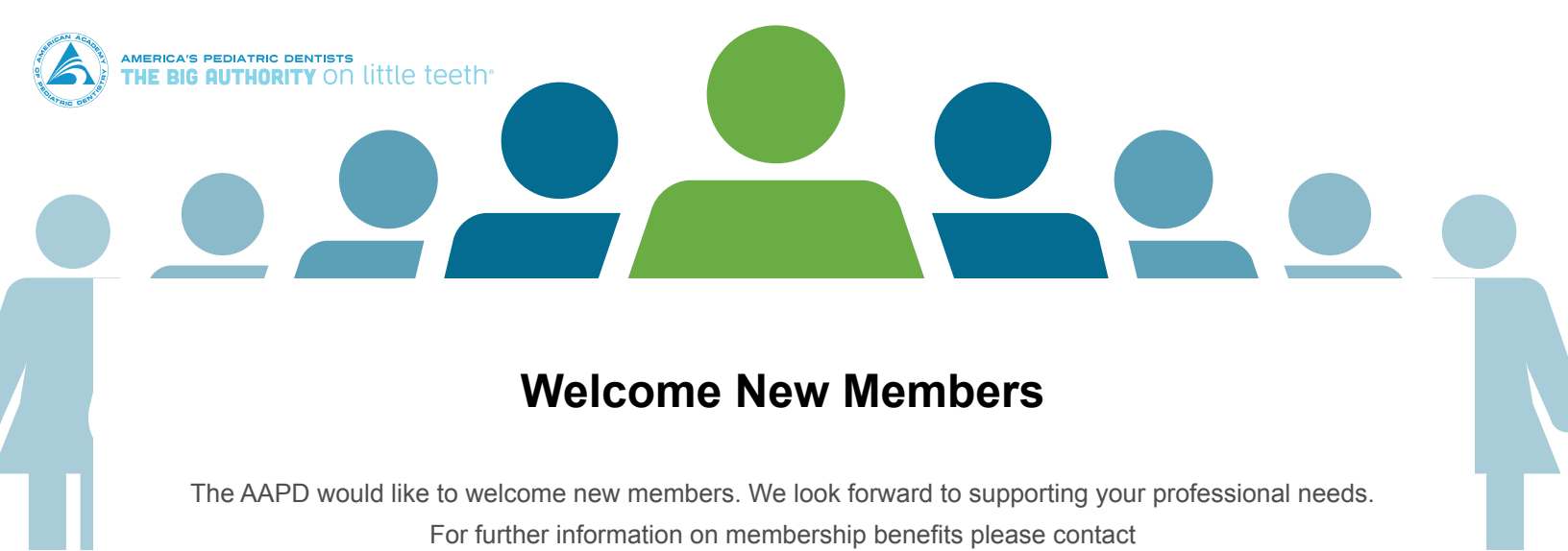
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Welcome New Members

The AAPD would like to welcome new members. We look forward to supporting your professional needs.

For further information on membership benefits please contact
Membership Department at (312) 337-2169 or membership@aapd.org.

Member Benefit Spotlight

MPLC Umbrella Agreement

Many pediatric dental offices have long shown tv and movies to entertain and relax patients of all ages. What you may not have considered is that this content is intended for personal use only and requires a license when shown in public spaces like a dental or medical practice. In 2011, AAPD negotiated an agreement with MPLC for the convenience of its members. The agreement provides AAPD members with a **discount** on the Umbrella License®, an annual license that protects your office from copyright infringement when movies, TV programs and other content are shown. The 2020 annual Umbrella License fee for AAPD members is \$325.

To learn more about the MPLC and the Umbrella License, please visit the MPLC website (<https://dentist.mplc.org/>). MPLC Licensing Representatives are also available to answer any questions about the affordable annual license at (800) 462-8855.

Please contact please contact Chief Operating Officer and General Counsel C. Scott Litch with any questions about the AAPD member discount at (312) 337-2169 or by email slitch@aapd.org.

Member News

AAPD Past President Dr. James Nickman Installed as President of the Minnesota Dental Association



Dr. James Nickman, a pediatric dentist at Metropolitan Pediatric Dental Associates and associate clinical professor at the University of Minnesota School of Dentistry, has been installed as president of the Minnesota Dental Association for the 2020-2021 term at the Association's (MDA) annual House of Delegates meeting.

Nickman is actively involved in organized dentistry. He currently serves as the chair of the Minnesota Dental Political Action Committee (MINDENPAC) and the American Academy of Pediatric

Dentistry (AAPD) Committee on Dental Benefit Programs and serves as the AAPD representative to American Dental Association Code Maintenance Committee (CMC).

Nickman is a Diplomate of the American Board of Pediatric Dentistry, a member of the Pierre Fauchard Academy, a fellow in the American College of Dentists, and a fellow in the International College of Dentists. He is also a past president of the AAPD and of the Minnesota Academy of Pediatric Dentistry. Additionally, he has served on the Board of Trustees of the American Academy of Pediatric Dentistry and is a member of the MDA's Barriers to Care Committee, Legislative Affairs Committee and the Minnesota Mission of Mercy Committee.

Nickman takes an active role in charitable dental activities, volunteering his time and services to the Minnesota Mission of Mercy and Healthy Smiles Healthy Children Foundation Dental Home Day.

Nickman graduated from the University of Minnesota School of Dentistry in 1997 and obtained a Master of Science degree in Pediatric Dentistry from the University of Minnesota in 1999.

In his spare time, Nickman enjoys spending time with his family, the outdoors, and traveling.

Military Service and Dentistry

By Dr. Michelle P. Zin, D.D.S.

As a pediatric dentistry resident in Augusta, Ga., I often get asked where I am from when I meet new people. When I tell them that I'm from Southern California, I often get a surprised look of astonishment of how a girl from the West Coast found herself across the country living the South. My journey to pediatric dentistry has been somewhat nontraditional but incredibly rewarding.

I was born in Myanmar and immigrated to Southern California with my family when I was 9-years old. Since my father is a general dentist, I always had an interest in dentistry and was drawn to the personable and service aspects of the profession. After college, I was fortunate to be accepted into dental school at University of Southern California. After the initial excitement and thrill of realizing my dreams of becoming a dentist would be coming true, the cost and financial burden of dental education also weighed heavily on me.

After assessing my options, I applied to the Army Health Professions Scholarship Program (**HPSP**) and was awarded the scholarship. During my second year in dental school, I soon realized my passion for pediatrics after volunteering at our monthly mobile clinics and participating in dental mission trips abroad to Colombia, Mexico and Guatemala. Because of my commitment to the HPSP program, I was unable to pursue a pediatric residency right after graduation. However, I was accepted into the Army 12 Month AEGD program at Fort Benning, Georgia. While I was apprehensive and anxious to be moving away from home and living on the other side of the country, I was also excited about new opportunities and the new environment. Living in Georgia for the first few months was a culture shock but it allowed me to appreciate the small-town lifestyle and the community aspect of the military. My AEGD education was unparalleled due to the guidance and instruction of my mentors. I had the opportunity to learn from top specialists in their fields, utilize state of the art technology and was continually challenged to provide the best clinical care. My AEGD residency also taught me resiliency, discipline, commitment and learning to cope with new challenges physically and mentally.

After residency, I was stationed in Arlington, Va., to serve and treat our nation's military men and women serving in the Pentagon and the National Capitol region. Because of my interest in pediatrics, my commander provided me with the opportunity to work with and shadow two pediatric dentists at Walter Reed National Military Medical Center. My involvement further solidified my passion for pediatrics after experiencing and caring for special needs patients and children with developmental and intellectual disabilities. I also appreciated the interdisciplinary aspect of pediatric dentistry and how we must work closely with other health care professionals in order to provide the best comprehensive care for our patients.

As my commitment with the military was coming to an end, I never lost sight of my drive and desire to work with the pediatric population. My progression in the military as a general dentist enabled me to become a better clinician and hone my clinical skills. It also allowed me to work with a diverse population and learn more about my patients' unique experiences of serving and defending our country. As I start my final year in pediatric residency and reflect back on my journey, I realize how thankful I am to have had this experience and training in the military which has taught me to provide superior care to our pediatric patients. The military has challenged me both personally and professionally. It pushed me outside of my comfort zone and forced me to persevere through unfamiliar situations and environments. These life lessons not only made me a better clinician, but also a more well-rounded provider because of my experiences in working and caring for our diverse military population. Behavior management and effective communication with parents are a huge aspect of pediatric dentistry and my military background has allowed me to understand, empathize and connect better with my patients and their families in residency. It has truly been an honor and a privilege to serve our nation and provide dental care to our men and women in uniform. I have gained lifelong lessons and friendships and this journey has allowed me to embrace challenges and welcome new opportunities.



Dr. Michelle P. Zin, D.D.S., is currently a second-year pediatric resident at The Dental College of Georgia at Augusta University. She grew up in southern California and completed her undergraduate education at University of California, Irvine in 2010. After receiving her D.D.S. degree from University of Southern California in 2015, she served in the United States Army as a Commissioned Dental Officer from 2015-2019. During her active duty service, she completed a 1-yr residency in Advance Education in General Dentistry at Fort Benning, Ga., in 2016, and was stationed in Fort Myer, Va., from 2016-2019. She enjoys hiking, traveling and learning to cook new recipes.

OUTPATIENT PEDIATRIC DENTISTRY



Of course you make safety a priority in your practice. But do your patient families truly understand that? An excellent way to enhance a sense of trust between providers and families seeking care in pediatric dental facilities is a voluntary accreditation program. That's why the American Academy of Pediatric Dentistry (AAPD) partnered with the American Association for Accreditation of Ambulatory Surgery Facilities (**AAAASF**) to develop a voluntary sedation/general anesthesia accreditation model for pediatric dental practices. This program is in response to the commitment by pediatric dentists to continue to provide safe environments in which to treat children, and is designed for practices interested in demonstrating that commitment to their patient families. As we find ourselves in the middle of the COVID-19 pandemic this has become even more important.

In 2017, the American Academy of Pediatric Dentistry (AAPD) and the American Association for Accreditation of Ambulatory Surgery Facilities (**AAAASF**) first began exploring an accreditation pro-

gram specifically designed to meet the needs of pediatric dentists. Three years later and amid a global health pandemic, accreditation has become an even more important concept and a commitment to a culture of patient safety that requires diligence and protects not just the patient receiving care but the staff and entire community. Such a cultural commitment can help wage the wars against the coronavirus and future pandemics.

When AAPD's Safety Committee and AAAASF began collaborating about a pediatric dentistry accreditation program, the primary objective was to ensure the safest possible delivery of anesthesia, patient monitoring, and ability to respond to emergencies for children. The program was intended to offer facilities the opportunity to demonstrate their compliance with best practices and clinical practice guidelines of the AAPD related to sedation and general anesthesia in the dental office via review and accreditation by a well-recognized independent organization.

For nearly 40 years, the AAAASF's mission has been patient safety in the outpatient surgical area. Pediatric Dentistry accreditation intended to aid safety measures in ambulatory facilities performing the following dental procedures on pediatric patients under sedation or general anesthesia: Dentoalveolar, Simple and Complex Extractions, Dental Restorations, Pulpal Treatment, Soft Tissue Graft, Frenuloplasty, Frenectomy, Space Maintenance, Trauma (Hard and Soft Tissue Trauma, Lacerations, Hard Tissue Dental Fractures including Alveolus, Pathology (Hard and Soft Tissue, Management of Odontogenic Infection, Soft and Hard Tissue Biopsy).

Our goal is to establish and maintain the highest level of safety and preparedness in pediatric dental facilities. This is achieved, in part, by proper credentialing and training of dental and anesthesia providers and focusing on training and education in additional areas including emergency equipment and medications. This process sends a clear message to patients and regulators that AAPD and the individual facility is fully committed to the safety of its patients.

To learn more about the Pediatric Dentistry accreditation program, please visit <https://www.aaaasf.org/programs/outpatient-programs/outpatient-pediatric-dentistry/>.

Frequently Asked Questions

- 1. Why is the AAPD involved in this collaborative effort?** The AAPD supports accreditation through AAAASF because it promotes patient safety in the outpatient surgical area, the highest level of safety and preparedness in pediatric dental facilities, proper credentialing and training of dental and anesthesia providers, and a focus on training and education in additional areas including emergency equipment and medications. The AAPD sees the proactive value of an accreditation opportunity for pediatric dental offices. Three years ago, the AAPD evaluated several existing accreditation organizations and ultimately selected AAAASF because they were willing to include: 1) the AAPD's input to establish the dental accreditation standards, 2) pediatric dentists on the evaluation teams that go into offices and 3) pediatric dentists on their advisory board
- 2. Why AAAASF?** AAAASF's Standards, viewed by many as the Gold Standard, may be considered the strongest of any agency that accredits ambulatory surgery facilities. Credentialing requires 100% compliance with each standard to become and remain accredited. AAPD had significant input in coordination with AAAASF to develop the adopted Pediatric Dental Standards. There is no other independent accreditation organization that has standards tailored for pediatric dentistry.
- 3. Is it mandatory to become accredited?** NO, this voluntary accreditation process by an independent organization is part of a safety effort by the AAPD since 2017. Pediatric dentistry has seen a significant shift toward general anesthesia and deep sedation services offered in dental offices. State regulatory agencies/boards have increasingly required further oversight for these anesthesia services. The intent is to establish an accreditation process developed specifically for pediatric dentistry.
- 4. Is this a new collaboration?** AAPD is in the third year of this collaboration with AAAASF. For example, AAAASF had an exhibit booth at the 2019 AAPD Annual Session in Chicago and at the Fall 2019 Safety Symposium in Chicago. Initial work required the training of a cadre of pediatric dentists to serve as evaluators/site visitors. With the training of initial pediatric dentist evaluators/site visitors completed, the AAPD had planned a "hard launch" of the program at the 2020 Annual Session in Nashville. However, due to the COVID-19 pandemic and transition of the 2020 Annual Session to a virtual format, the official launch of the program was postponed until the fall of 2020.
- 5. Is the AAPD benefiting monetarily from this collaboration with the AAAASF?** NO. The AAPD receives no royalties or any other payments from this program. The biggest benefit is the potential of increased safety for its members, their employees, and the patients they serve.
- 6. How often are participating practices inspected?** Every three years, and self-evaluation occurs yearly.
- 7. My state doesn't require accreditation. Why should I consider it?** General Anesthesia and deep sedation are increasingly transitioning into dental offices as operating room access in hospitals and ambulatory surgery centers is becoming more limited. Practitioners and the public demand greater demonstrations of safety by independent facility accreditation. State agencies/boards in many cases are applying their hospital/surgery center model requirements and not making modifications applicable to dentistry. States Health Boards and State Dental Boards across the U.S. are increasingly requiring independent accreditation/permitting for general anesthesia, deep sedation and moderate sedation services provided in offices and outside of hospitals/ surgery centers. Here is an opportunity to become accredited within a structure created for pediatric dentistry.
- 8. Who can apply?** Any outpatient pediatric dentistry facility interested in standing out as a practice that exhibits the highest standard of care for their patients.
- 9. If I don't pursue this accreditation, is my risk of liability increased?** The standard of patient care in a pediatric dental practice is determined by several factors, including adherence to AAPD best practices and clinical practice guidelines. Accreditation does not change the standard of care, but may prove helpful for a pediatric dental practice to demonstrate to the public and regulators that an independent agency has reviewed your practice as meeting the very highest standard of safety.
- 10. Will all pediatric dental offices need to be accredited in order to be reimbursed by third-party payers?** No, and the AAPD would strongly oppose any such proposal.
- 11. How to apply?** Review the Outpatient Pediatric Dentistry Standards and Manual and submit the new applicant materials to AAAASF at 7500 Grand Ave, Suite 200, Gurnee, IL 60031 or fax to (847) 775-1985 or alternatively scan and send to reception@aaaasf.org. Your documentation will be reviewed within 10 days.

Application materials: Standards Manual and Checklist V1, HIPAA Business Agreement, Random Case Review Form, Authorization to Release Form, Facility Identification Form, Staff Identification Form, Director Attestation Form.

Obituary

AAPD Honorary Member – Dr. Jens Ove Andreasen

Jens Ove Andreasen, the father of Dental Traumatology and AAPD Honorary Member, passed away on Sept. 26 2020.

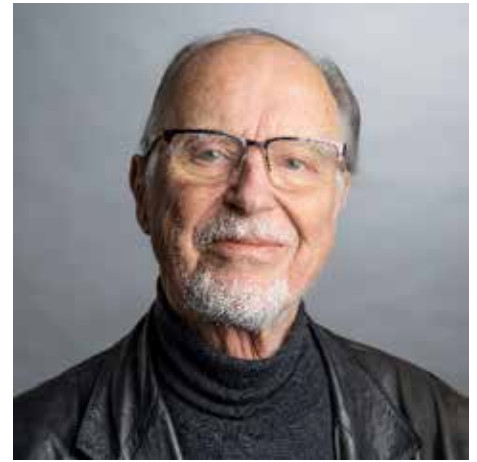
Andreasen graduated from the Royal Dental College, Copenhagen, in 1959. He did his postgraduate training in Oral and Maxillofacial Surgery at the University Hospital in Copenhagen where he has been serving all his life. Already as a young surgeon, early in his career, he became interested in helping all victims of dental trauma, which he met daily in his profession. He realized there was not much knowledge in this field at that time.

For this reason, he started research and was a leader in the world started registering all trauma cases in a careful and systematic way already in the 1960s. He also took initiative to in-vivo experimental studies reproducing treatment scenarios of various dental traumas affecting both permanent and primary teeth, resulting in pioneering scientific articles, which have become classic and is the foundation of today's knowledge in dental traumatology. He also took initiative to the foundation of the International Association of Dental Traumatology in 1989 and was its first president. This organization has since then arranged 21 World congresses on Dental Traumatology worldwide. He also realized the importance of a reaching out in science and was one of the initiative takers to start a scientific journal in dental traumatology

1989 and the scientific journal *Dental Traumatology* is today the main journal in this field.

In 2008, he founded the interactive internet based Dental Trauma Guide, which today is a non-profit evidence-based platform available to all dentists worldwide. It contains information from his experiments and a trauma database from clinical long-term studies of all types of traumatic dental injuries carried out at the trauma centre in Copenhagen. With the help of this database the clinicians all over the world can get immediate assistance with diagnosis, treatment, follow up and prognosis of their trauma cases. He also took initiative to the Copenhagen symposium which gathers colleagues interested in traumatology and related fields from all over the world in Copenhagen every year.

Jens Andreasen has authored 400 publications and 12 textbooks, covering not only dental traumatology, but also autotransplantation, tooth eruption and tooth impaction. His *Textbook and Color Atlas of Dental Traumatology*, also called "the trauma bible" is the gold standard worldwide and is now in its 5th edition. Andreasen has received four honorary doctorate degrees and has lectured in 49 countries. His lectures always attracted and inspired people.



Few researchers and teachers in Dentistry have reached out the way Jens Andreasen has done with his impact worldwide. We, who had the privilege working close together with him, were always impressed with his high energy and visions, always inspiring us all in a positive way and conveying empathy for patients, colleagues, friends and staff of all categories. He was unique.

He was a true professional, leading colleagues worldwide, but also a devoted family man and our thoughts are with his wife Anna-Lena and his family. He will be missed by many colleagues and friends worldwide, and his legacy will live on forever.

The legacy of Jens Ove Andreasen, the Dental Trauma Guide, will continue to be the world leading tool in the field of evidence based dental traumatology, providing easy-to-follow animated treatment procedure. The Copenhagen Symposia and the Copenhagen Webinars, also founded by Jens Ove Andreasen, will continue as well.

Inspiring Young Pediatric Dentists

AAPD recieved this article written by 11th grader Fadie Arabo from Troy, Mich. Arabo hopes to become a pediatric dentist!

Why Pediatric Dentistry Is Such A Rewarding Specialty

by Fadie Arabo

Can you think of a better job than helping children maintain their oral health? I can't and if you can't either; you may want to consider going into the field of pediatric dentistry. Pediatric dentistry is one of the most rewarding careers one can have and I'm here to tell you why.

1. Pediatric dentistry teaches kids to maintain their oral health and sets a good example for the future.

Let's all be honest with one another; we see those vaping products on every street corner. It's a sad reality, but as a pediatric dentist, you can help with this epidemic. By teaching children how to stay away from harmful chemicals at a young age, children are more likely to follow these warnings and in the end, stay away from these dangerous products. By teaching kids young, we can help children recognize dangers and better help them maintain a healthy lifestyle.

Longtime Dean of Pacific's Dentistry School Passes Away

During his long career, including 28 years as dean, Dr. Arthur A. Dugoni helped University of the Pacific's school of dentistry become one of the best in the nation.

Dugoni passed away on Sept. 30, 2020, at his home in Palo Alto. He was 95. He is remembered as an energetic educator and fundraiser, whose motto was "at Pacific we grow people, and along the way they become doctors."

The San Francisco-based school was named the Arthur A. Dugoni School of Dentistry in his honor in August 2004, while he was still dean. He became the first and only person in the United States or Canada to have a dental school named in their honor while holding the position of dean.

Dugoni served as dean of the dental school from 1978 to 2006. His prior roles at the school included serving as assistant professor of operative dentistry; assistant professor of pediatric dentistry; assistant professor of orthodontics; chairman of the department of orthodontics; associate professor of orthodontics; and professor of orthodontics.

In addition to leading the dental school for 28 years, Dugoni served as president of the California Dental Association, the American Dental Association, the American Dental Education Association and the American Board of Orthodontics. He presented 1,000 lectures, papers, clinics and essays during his career, and published more than 175 articles.

"Dentistry and dental education are stronger today because of Dugoni and his passion for people and the profession," said Dr. Nader A. Nadershahi, dean of the Dugoni School of Dentistry. "The Dugoni School family honors his legacy and how he touched our lives by building on our defining characteristic of humanistic education and commitment to excellence. Thank you to an incredible mentor and role model."

During his tenure as dean, the school saw advances in digital dentistry, creation of a state-of-the-art simulation lab, the launch of the International Dental Studies program and expansion of clinical services.

He also had a passion for philanthropy and supporting students and others in the community. Under his leadership, in 1996 the school completed the largest dental school capital fundraising campaign at the time in the U.S (\$65.7 million).

He received University of the Pacific's Order of Pacific, the school's highest honor, for 55 years of service in 2006. At the World Dental Parliament meeting of the FDI World Dental Federation in Barcelona, Spain, in 1998, Dugoni was elected to the List of Honour, the highest award the FDI can bestow on a member.

Dugoni was born in San Francisco on June 29, 1925, and began his dental education at the University of Missouri-Kansas City before earning his D.D.S. degree in 1948 from the College of Physicians & Surgeons in San Francisco (the forerunner of the school that would ultimately bear his name). He practiced as a pediatric dentist in South San Francisco for 14 years before deciding to go back to school to earn his orthodontics degree in 1963 from the University of Washington in Seattle.

Dugoni had seven children and 15 grandchildren. The family requested memorial gifts be made to The Art Dugoni Scholar Fund, an endowment that will support a Dugoni dental student selected on need, merit and leadership potential. Please call the dental school's Office of Development at (415) 929-6406, or go online to www.dentalgifts.org to make a donation online.



2. Pediatric dentistry has one of the most welcoming environments for children.

You have probably been to a dentist in your life. When you walk in, can you recall what you see? I recall dark walls, magazines, and a sign-in sheet. With pediatric dentistry, you can transform the office into a sort of "Playground", where children feel happy to go to their appointments. By showcasing a positive environment, children can have fun and worry less about the procedures and such.

3. Pediatric dentistry offers a one to one bond with children.

Pediatric dentists go through extra schooling to study children's behavior and psychology. This extra schooling is evident in the bond we see between pediatric dentists and children. Pediatric dentists get to understand each child's situation and see them progress at uniquely different times.

From infancy to adulthood, pediatric dentistry is one of the most rewarding specialties and you may just want to consider it if you plan on going to dental school.



The *Incisor's* Guide to Social Media

by Lily Snyder

AAPD Web and Social Media Manager

In just twenty short years, we have gone from using landlines, email and letters to using social media and smartphones as our main forms of communication. It is crazy that so much has changed in such a short amount of time. Currently, 3.6 billion people are on social media globally, and that number is projected to grow by at least one billion within the next five years.¹ Just think about that, the global population is just under eight billion! Nearly half of the global population uses social media. Just why is that though? Well, Facebook, Instagram, Twitter, LinkedIn, Pinterest and more have found ways to be one-stop shop platforms for news, family and friends updates, games, shopping and business information.

Having a social media presence has become incredibly important to stay in the loop with what is happening in our world. The most used social media platform is Facebook. Since its start on the Harvard campus in 2004 by founder Mark Zuckerberg, Facebook has blown up to be a social media conglomerate with 2.7 billion users. Each day 1.62 billion of those users are active on the platform.² In this case, active means opening the application on one's phone or via desktop browser and scrolling through the page for any amount of time within 24 hours. During this time, users may be just mindlessly scrolling or looking for something specific, but regardless of what their user path is, they are being exposed to hundreds of pieces of information in one place.

Having everything in one place seems overwhelming for most, but Facebook's personal algorithm has everything you want to see in one spot and things that you are not interested in for the most part have been filtered out. For example, let's say that you are a huge football fan, and your favorite team is the Green Bay Packers. You like pages about the Packers, you post about the Packers and your friends also like the Packers, so with the Facebook algorithm, your page will be, no pun intended, but PACKED with Green Bay Packer updates. Chicago Bears and New England Patriots news will be hidden from you unless it has something to do with the Packers. How crazy is that, that

Facebook has learned who you are based on what you like and has figured out what you should see.

So, you are probably thinking, how does this have anything to do with being a pediatric dentist? Well, it actually has a lot to do with it! By having a personal social media profile and/or a business page you are able to cater your page/profile to you and to your business! Just like the Green Bay Packer example, a lot of Facebook users follow parenting pages and have kids. By knowing this, you are able to share a lot about your profession and dental clinic on Facebook to be seen by whomever follows you and those who are interested in what you have to say about pediatrics.

For the most part, Facebook Business Pages are going to be the best place to share information about your business and profession to those in your area and to your followers. This may sound very basic, but just by creating a page, you are humanizing your office and your team. You are no longer just a website or a brick and mortar building, you have instead created a page where news can be shared from a more personal source. You can also include a link to your website, your hours, address, a small description of who you are and also an invite for your followers or those interested in learning about your business to message you. As mentioned before, Facebook is a one-stop shop place for user information.

Some of you already have your Facebook Business Page established and can hopefully attest to the fact that setting the page up was pretty simple. Facebook walks you through each step with the goal of getting as much information about your business on your page prior to even publishing it. Whether you personally are doing this, or someone from your office is managing it, it should be a pretty stress-free project to start. The more difficult part comes when it is time to start posting updates and gaining followers. These two items go pretty hand in hand, but they need to be broken down a little bit more to keep it as simple as possible.

To have a successful business page, you need updates for followers to see and also followers to see your updates. A good place to start is filling your page with posts that help show what you do and what you care about. If your office specializes in special needs oral health care, start sharing articles and photos that you find interesting about special needs patients. It should be noted here though that the pieces you share should be more geared toward the potential client, i.e. a parent versus someone with a medical background. As mentioned before, the more you do this, the more likely your page will show up as a suggested business to follow for those who have their Facebook algorithm set with parenting news.

Another way to get things started is by having friends and family share your posts to help get it off the ground. This will then have your posts showing up in the Facebook feeds for their Facebook friends to see. Contests are also a great way to gain followers and to also have engagement and material on your page! Do something with a brightest smile contest and the winner gets a small gift card or something like that. You can also do a like, comment and tag X friends to

get the contest started! This is an easy way to share your page with a minimal financial investment. All you need is a post that says something along the lines of: "We are having a summer prize giveaway of a gift card! To be entered to win, you must comment your favorite memory of going to the dentist, like our page and tag three friends in the comment section below. Winner will be announced on TBD date!" This gets your name out even more, which then can turn followers into prospective patients, which ultimately is the end goal.

Money talks with all of this as well. If you don't have the time, energy or resources to maintain a Facebook Business page and are looking for an easy way to gain followers, there is the option to promote your business in general or to boost a specific post. What this means is that you can put money behind something that you post. Facebook has made this fairly easy as well by allowing you to enter your credit card information securely and then to choose how much you want to spend and who you want to target these posts at. By using the analytical capabilities that are built into Facebook, we have at the AAPD learned that most of our demographic are women between

the ages of 24-46, which includes moms and caregivers along with our fastest growing membership age group. By monetarily targeting these groups, we are able to market ourselves by providing information that is digestible for both parents and caregivers along with providing materials for our membership to use within their offices or at home. The price to promote to a targeted group is also not too hefty and can be paused and stopped at anytime. To discover who your main demographic is on Facebook, you can login to your account, click manage page, insights and then scroll down to people.

So, we have talked a lot about Facebook, but that isn't the only social media platform that businesses use. Twitter is popular with individual and some businesses, but less so for clinics. On the other hand, Instagram is extremely popular for pediatric dentists! Instagram is mainly for photos and videos, so this is a great place to humanize your office by sharing photos of your office, employees, patients (with permission of the caregivers) and more. Anything that you can do to let the world know about yourself and your office is a great thing!



There are lots of programs online that can help make your social media presence easy and clean to manage. Canva.com is a wonderful website that can help create images to post on social media, flyers to print out and email templates to send to mailing lists. All you have to do on Canva is pick which template you want, insert your information and download it. The best part is that the basic version is free! Hootsuite is another wonderful and free social media time saver. Hootsuite lets you link up all of your social media profiles and then you can schedule your posts in to go out on certain days. You can schedule items months in advance too, which is a big-time saver and helps keep your pages consistent. Anything that can give you more time with patients and less time on social media is a good thing to look into.

As much as social media can help your business, it can also in very rare times, hurt it. Negative reviews on social media have been a hot topic lately. If you ever receive a negative review on Facebook, Yelp or Google Reviews, it is very impor-

tant to take a deep breath and to hold yourself back from reacting negatively in your comments right away. Potential clients and patients are often deterred by owners who react negatively and rash to negative reviews. In most instances, it is best to respond with something along the lines of: "We are so sorry that you had this experience. Please give us a call, so that we can learn more about what we could do better." AAPD produced a Social Media toolkit in 2018, that offers advice about handling negative reviews.³

A second source of controversy that has become extremely relevant in the past year is when businesses use social media as a platform for personal opinions. Whether it be political, sports or even what fruit is the best fruit, someone is going to disagree with it on social media. With social media acting as the main news source for many, it is important to note that personal opinions in some cases can affect business. Some users have stated that they will boycott a business if its opinions don't align with theirs. To avoid this problem, it may be a good

idea to keep opinions on your personal pages with privacy settings on the profile. By privatizing your personal profiles, only your friends can see what you are posting, not your patients. This helps allow you to share what you want on your personal pages without it affecting your business on your public business page.

AAPD is here to help with anything that we can social media related. We have a Social Media Resource section on our website at <https://www.aapd.org/resources/social-media/> that can help you further your social media knowledge. We also have <http://mouth-monsters.mychildrensteeth.org/> which is a wonderful resource to find kid and parent friendly resources to share on social media. The most important resource is one that we can't provide, but you can... it's your patients! Nothing says come to our office for treatment and care more than a smiling child and parent post check-up on social media. So, with all of this information, which may or may not be new, go on out, post with confidence, and watch your following grow.

¹ <https://www.statista.com/statistics/278414/number-of-worldwide-social-network-users/>

² <https://sproutsocial.com/insights/facebook-stats-for-marketers/>

³ <https://www.aapd.org/globalassets/assets/1/7/socialmedia101.web.pdf>



Save the Date

Annual Joint Academic Day – Wednesday, May 26, 2021

Planning is underway for the Annual Joint Academic Day, to be held on **Wednesday, May 26, 2021**, in Boston, Mass. Details of the days' planned activities will appear in the January 2021 edition of *PDT*.

AAPD / AAPD Foundation Proudly Announces a Revamped Master Clinician Scholarship Program

After many years of offering this well received and highly sought after scholarship program, the AAPD and AAPD Foundation explored ways to improve upon it. Now known as the Leadership in Education and Administration Program (**LEAP**), expanded courses are available.

Building on the momentum of the past several years, the Academy for Advancing Leadership's (**AAL**) Institute for Teaching and Learning (**ITL**) course will still be offered, but now scholarships for AAL's Chairs and Academic Administrators Management Program (**CAAMP**) will also be awarded.

The difference between the two programs:

- **ITL Focus:** Educator proficiency, pedagogical theory, best practice applications for clinical and didactic education, IPE, faculty development, and trends in education
- **CAAMP Focus:** Best practices for leadership and management, professional development, team dynamics, and strategic planning topics

Both courses are held in Atlanta, Ga. The scholarship covers tuition only.

The ITL course is designed as a program to help participants achieve better student outcomes by refining their teaching skills and enhancing the quality of their interactions with students. CAAMP is an interactive program designed to address the unique challenges faced by new, current, and aspiring administrators.

Selected scholarship recipients will also receive complimentary registration to the AAPD Comprehensive Review of Pediatric Dentistry continuing education course. Scholarship applications are available under Awards and Fellowships/Leadership in Education and Administration (LEAP)-Formerly known as Master Clinician Scholarship Program on the AAPD website at: <https://www.aapd.org/resources/member/awards-and-fellowships/>.

Applications must be received by April 21, 2021. Please contact Education Development and Academic Support Manager Leola Royston at (312) 337-2169 or royston@aapd.org for further information.

ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry.

AAPD FALL CE COURSE 2020



NOVEMBER

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

Tethered Oral Tissues Symposium: Breastfeeding and Beyond

Nov. 13-14, 2020

NOW VIRTUAL

Our members health and safety is top of mind, which is why the AAPD has made the difficult decision to cancel our in-person fall Tethered Tissues Symposium. We are excited to bring you the same course, the same amount of CE hours and the same world-class speakers just in a virtual format! The course will still take place the same weekend, Nov. 13-14. We are offering exclusive registration rates for this online format! Head to aapd.org to register and find out more!

Assessment, diagnosis, and treatment of tethered tissues is an area of interest across dental and medical disciplines. Yet, there is no consensus on terminology or management. This conference will host national and international renowned providers in the areas of dentistry, orthodontics, otolaryngology, sleep medicine, lactation, and speech pathology to present current research and clinical perspectives. These experts represent diverse background and ample time will be provided for a robust discussion of how best to provide care for families.

Course Chairs and Speakers

Janice Townsend, D.D.S., M.S.
Jade Miller, D.D.S.

Speakers

Eyal Botzer, D.D.S.
Bobby Ghaheri, M.D., E.N.T.
Ann Kummer
Nikki Mills, E.N.T.
Anna Mesner, M.D., E.N.T.
Shannon Sullivan, M.D.
Samantha Weaver
Gina Weismann, D.M.D., R.N.
Audrey Yoon, D.D.S.

CE Credits: 16+

Who Should Attend

Dentists, physicians, hygienists, lactation consultants, speech pathologists, myofunctional therapists, and sleep disorder health care providers who wish to review the evidence and perspectives from clinicians of tethered oral tissues.

If you have any questions, please contact Kelly Stancato at kstancato@aapd.org.

To register, visit www.aapd.org/events

ADA CERP® Continuing Education
Recognition Program

Adapting Oral Hygiene Recommendations for Individuals with Special Health Care Needs

by the AAPD Special Health Care Needs Committee

Children or adults with special health care needs (**SHCN**) may require adaptations to achieve optimal oral health care. Modifications may be needed in order to provide oral hygiene care at home and in the dental office. The purpose of this communication is to give a brief overview of modifications that may benefit your patients with special health care needs.

While many providers may be familiar with these adaptations, the purpose of this communication is to place a focus on this population, remind pediatric dental providers of these techniques, and provide this information for those pediatric dentists who may not know this information or are not currently comfortable seeing this population in their practice. It is also to provide resources on oral hygiene adaptations for your caregivers of individuals with SHCN.

Here is a compilation of different adaptations, tips and tricks to help the provider ultimately help the parents and caregivers of individuals with special healthcare needs. These simple adaptations can have everlasting effects on individuals with SHCN's oral health care and overall health and quality of life.

Toothbrush adaptations:

For those who are able to brush their own teeth, an electric toothbrush may make brushing easier and more efficient once they adapt to it. However, for individuals that are unable to accomplish brushing using a traditional or powered toothbrush, there are simple ways to modify brushing with different tools, instruments, and positioning. Here are some quick and easy tips to modify a toothbrush to make it more usable for different abilities.

- 1. Expanded grip capability.** For some individuals, adding a larger grip to the toothbrush allows them to hold and manipulate the brush themselves. This can be done by:
 - Purchasing a brush with a larger handle. Some companies already produce toothbrushes with a bigger handle for better gripping.
 - Making a slit into a tennis ball and sliding the bottom of the toothbrush handle into the tennis ball.
 - Sliding the bottom of the toothbrush into a bicycle handle grip or any type of rubber or even foam tubing.
 - Wrapping a small cloth around the bottom of the brush.
 - Attaching a Velcro strap around their hand and the toothbrush or a wide elastic or rubber band around the hand and toothbrush for added stability, ensuring they are not too tight.

- 2. Change to toothbrush shape or dimensions.** Some individuals might require changes to the shape of the toothbrush to make it angled for better access to their teeth. This can be done by:

- Purchasing a brush that is bent to a more useful angle for brushing. Some companies produce bendable brushes available at local convenience stores.
- Running the toothbrush handle (avoiding the bristles) under hot water so that you can gently bend the plastic according to your needs.
- Other individuals might need a longer brush to better reach their mouth to be able to brush on their own. To elongate the toothbrush materials can be added, such as taping several popsicle sticks to the bottom of the brush or adding some type of tubing to the bottom.
- Purchasing a triple-headed toothbrush (Specialized Care Co, Hampton, N.J.) is very helpful for either the patient or caregiver to use to brush all surfaces of the teeth at the same time.

Toothbrushing adaptations for caregivers:

For those individuals who are unable to complete oral hygiene tasks independently, a challenge for their caregiver may be keeping their mouths open long enough to accomplish tooth brushing. Caregivers can buy commercial products to use at home, such as the Open Wide Mouth Rest (Specialized Care Co, Hampton, N.J.), available at various websites. Other commercial products widely available include the molt mouth prop and bite block. Practitioners should inquire what caregivers are using to accomplish oral hygiene and discuss proper safety precautions of these products. Caregivers can also make their own device to help keep their children's mouths open with common household items. Examples of these are a clean rubber door stopper, three to four popsicle sticks taped together, or a rolled moistened cloth.

Some individuals are not able to complete oral hygiene tasks independently. And some may move or struggle, making completing oral hygiene difficult for their caregivers. Here are several positioning techniques to consider that may assist the caregiver.

- 1. Therapeutic wrap.** This is a gentle and light wrap that will calm the individual and limit his or her movement making it quick and easy to brush for them. One or two simple wide sports wraps can be used, purchasable at any sporting goods store or pharmacy. Place the individual in a chair or their wheelchair, place their arms on the sides of their body, place the wrap behind the back around the front and Velcro closed to keep their arms down. If needed,

repeat with a second wrap higher than first wrap. The caregiver should ensure the wrap is soft and that it is not too tight. It is imperative that these wraps not be used to 'straighten' patients who are spastic at rest or have a restricted position.

- 2. Caregiver sitting in a chair.** One way to make brushing easier is to sit in a chair and position the individual sitting on the floor facing away from you in between your legs. This is very simple and allows you to have easy access and control. Position the individual in between your legs while you sit in the chair. If they begin to move, you can lighten tighten your legs or even wrap your legs around them. Position one hand under the chin so that their head is reclined for better access and visualization to the mouth.
- 3. Using a couch/ bed/ floor.** While you sit on the couch or bed, position the individual to have their head on your lap. This allows you easy access and control. Position the individual's hands by their sides. If they move a lot, cross the individual's hands and have a second individual hold the hands. If you do not have a second individual, you can position your legs so that they cross over the individuals' arms. Use one hand to support the head and place the chin up for visualization.
- 4. Using a bean bag chair.** Have the individual sit in a bean bag and then you are able to position yourself behind him or her. Position yourself behind the individual- either sitting or standing depending on how tall the individual is on the bean bag. Position the individuals' arms to the side. If the individual is moving, then have a second individual help hold the arms. Position your hand under the chin to lift and support the head.

Floss:

For individuals who need assistance with oral hygiene, caregivers can use the suggestions above to help keep their mouth open while flossing, either with a floss holder or with regular string floss, depending on the individuals' ability to tolerate this task.

Toothpaste adaptations:

Many parents with children or adults with special health care needs, specifically those with oral sensitivity, struggle to find a toothpaste that their child can tolerate. The individual is most likely sensitive to either the taste or the consistency of the toothpaste. The importance is to find a toothpaste with fluoride that the individual can tolerate. To combat sensitivity to the taste, encourage parents to try untraditional toothpaste flavors such as those produced by Hello Products with fluoride (Montclair, N.J.), Tom's of Maine with fluoride (Kennebunk, Maine), and Tanner's Tasty Paste (New London, Conn.). Recent unconventional flavors have been developed such as vanilla and chocolate ice-cream, orange, mango and

even matcha. While others are unable to tolerate any taste at all, Oranurse Fluoride (UK) toothpaste with zero flavor can be a great alternative. Not all of the products listed have the ADA seal of approval and practitioners should evaluate products prior to recommending their use.

Many individuals with oral sensitivity are unable to tolerate the foaming nature of toothpaste. This foaming is attributed to the ingredient commonly found in toothpaste, Sodium Lauryl Sulfate (**SLS**). More recently, many toothpaste companies have products that are SLS free and would say specifically so on the toothpaste tube or packaging.

For others who are unable to tolerate the consistency of toothpaste or for individuals who build up calculus easily, the caregiver can dip the toothbrush in an alcohol-free mouthwash with fluoride and then brush normally. If all else fails, if the child lives in a fluoridated water community, the parent can always brush with tap water.

In communicating with caregivers, emphasize the key is to find adaptations that work for the caregiver and individual with SHCN, which can be challenging and take time. Also, keep encouraging caregivers to accomplish oral hygiene every day. For individuals living in a group facility, practitioners should write oral hygiene recommendations for the staff. If the individual is too tired or not tolerating toothbrushing at the traditional brushing times, find a time in their schedule when they will be more tolerant of it. Also, if time is limited due to cooperation, the caregiver can start on one arch for the first brushing and complete the other arch at the next brushing time so at least all teeth are brushed once a day.

Ultimately, by providing individuals with SHCN and their caregivers such simple tips, their everyday challenges can be overcome. A simple change, such as finding a tolerable toothpaste, can help these individuals infinitely and improve their overall experience with the provider and with their future oral health care. As many dental providers outside of pediatric dentists are not formally trained in caring for this population, by improving oral health and oral hygiene, this ultimately can reduce or even eliminate difficulties that these individuals can face later on. And if these individuals are transitioned to a general dentist in adulthood, pediatric dentists can provide this information to their colleagues to help ease the transition. Individuals with SHCN and their caregivers have everyday hardships and hopefully with some encouragement, information like what is given here, and a dental home, oral hygiene can be a manageable task for them and optimal oral health can be achieved.

Additional information, pictures, and videos of these recommendations can be found at the following websites:

- www.exceptionalsmiles.org
- <https://www.nidcr.nih.gov/sites/default/files/2018-10/dental-care-everyday.pdf>

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1 2 3 4 5
6 7 8 9 10



LCP Dental Team Coaching (formerly Julie Weir & Associates) is recognized as the premier consulting firm specializing in pediatric dentistry since 1996.

Ten Ways to Provide an Extraordinary Patient Experience

Many doctors and dental teams are opposed to change and openly resist it due to comfortability, making exceptions for why things do not work out, or even more likely, fear of taking risks. When we change a system, idea, or process, it comes with risk—risk of failure, risk of vulnerability, or risk of feeling uncomfortable. Albert Einstein once said, “The world as we have created it is a process of our thinking. It cannot be changed without changing our thinking.” Let us challenge the status quo and work on shifting our mindset about change and embrace the opportunity that change brings. If the COVID-19 pandemic has taught us anything, it is that we must get comfortable with being uncomfortable. Dental practices are changing, and most patients and parents expect new, next level experiences. We encourage you to step outside of your comfort zone, embrace new opportunities for excellence, and consider adopting one or more of the ideas below to create new, extraordinary experiences for your patients and parents.

1. Doctor and team member pictures in a frame

- It is hard to build relationships with patients and parents when they cannot see your face. Even to existing patients, you may look much different than you did before with the added PPE.
- Consider taking a picture of each team member without their PPE and put the picture inside a frame. You can place each frame in an operatory, next to the computers in the open bay, or at the front desk.
- Keep the frames close to where the team member normally sees patients and encourage each person to show the patient their picture so they can recognize who they are without the added protective gear.
- Another creative option is to have the team members’ faces printed life size on poster board and affix them to tongue depressors. Your team could hold them up for patients so they know what they look like without their protective gear.

2. 30-second welcome video for new patients

- Create a short, 30-second welcome video for all new patients so they have a chance to meet the doctor without PPE. In the video, the doctor should welcome the new patient to the practice and even consider giving a short tour of the office. This can quickly be done with an iPad or smart phone.

- Avoid using patient names so one recorded video can be used for all new patients. Prior to the new patient appointment, the video should be sent through your patient communication software to the new patient along with a short welcome message.
- Consider adding any additional information that is helpful to the welcome email, such as new COVID-19 guidelines and precautions, procedures for patient arrival, and any other practice information they should be aware of before arriving for their appointment.
- The video helps to establish connection and trust. Doing this from the start is imperative to building a lasting relationship with the patients and parents.
- “Hi, my name is Dr. Jones and I am the dentist at Smiling Kids Pediatric Dentistry. I wanted to share a little bit about myself, so you know who I am at your visit! I may look a little different the next time you see me since I will be wearing a mask. (Consider showing what you look like with a mask). During our visit, I will count your teeth, show you how to brush properly, and give you tips for keeping your teeth nice and clean! I look forward to seeing you soon!”
- Consider including team members also sharing their names/positions and welcoming the patient and parent.

3. Short video after new patient appointment

- Create a short video for your new patients at the end of each day thanking them for coming to your office. Let them know you appreciate their time spent with you and that they can call, text, or email anytime with questions about their child's needs.
- The videos should be specific to the new patient and use both the parent and patient name.
- "Hi Mrs. Jones and Johnny, it was a pleasure meeting you both today. Thank you for coming to see us and sharing about what makes you so special! I cannot wait to hear about your school play the next time I see you. Please let me know if I can help you with anything in the meantime. I look forward to seeing you soon!"

4. Video tour of the office

- Since COVID-19 has limited patients touring your office, consider taking a video to put on your website that shows new patients all your practice has to offer.
- Start the video at your front door and walk them through what a typical appointment flow would look like. Share with them the front office, the clinical area, and any other significant practice features.
- This is also a great opportunity to share with new and existing patients any new changes you have had to implement due to COVID-19 restrictions.
- You may consider showing them how all patients will have their temperature taken upon arrival, follow a team member to the clinical area, and any new contactless options you have available to keep them safe.

5. Give parents choices about their children's care

- It is important that parents feel informed about their child's treatment recommendations. A patient and parent experience could be drastically diminished if a parent feels unheard, invalidated, or unimportant.
- If teledentistry options are available in your practice, make sure parents are aware of this service, its benefits, and how to utilize it.
- If parents wish to discuss treatment options in more detail, be sure they understand there are virtual visits available so they can meet with the doctor from the safety of their own home.

6. Share on social media your "behind the scenes" infection control

- More than ever, parents want to know how you are going to keep their children safe. Post on social media "behind the scenes" footage that shows your team sterilizing instruments, sanitizing the rooms, and changing your PPE.
- Post a video role playing with your team so they know what precautions you are taking. Have one team

member play the parent and another team member playing the child. In the video, open doors for them, show them how they can pay with contactless options, avoid touching pens and clipboards, and any additional measures you have taken to ensure safety.

- These videos can also be posted on your website along with the tour of your office.

7. Digital dazzle cards

- Surprise your patients with fun, thoughtful personalized texts with digital dazzle cards.
- Each week, team members should send digital dazzle cards to 1–3 patients. Make sure the note is thoughtful and attentive toward a patient's specific situation.
- Consider having your clinical team provide the front office team with the message at the end of each day. The next day, your front office team can send the two-way texts through your patient communication software.
- Examples:
 - **Thoughtful:** "Dear Johnny, it was fun seeing you today! It has been quite a while. We missed you. You brightened my day with your stories about your vacation. I am so glad you're our patient!"
 - **Apology:** "Dear Mrs. Smith, I apologize Johnny's treatment took so long today. We appreciate your cooperation and patience. We make a promise that next time we will get Johnny in and out on time. See you soon!"
 - **Star Patient:** "Dear Sammy, you did so well today! I know you were a little frightened when you got to the office, but you were very brave and helped us take care of you and your teeth. I am very proud of you! You were my "Star Patient" of the day!"
 - **Complimentary:** "Dear Susie, I absolutely loved your pink sparkly shoes today! I wish I had pink sparkly shoes just like you! We can't wait to see you at your next visit!"

8. Speak in patient-friendly terms

- When speaking to parents and patients regarding oral hygiene, treatment recommendations, and dental anatomy, use terms and vocabulary that they understand.
- Many doctors and dental teams use language that is much too technical for parents to fully comprehend.
- Practice with your team members and role play conversations. Discuss which terms you are using that may be confusing to patients and parents. Identify simpler vocabulary terms and keep them in mind for your next consultation.
- Be proactive and create a list of common terms for children to have a comfortable experience. Have a list of "Words We Use During Your Child's Visit" posted on your

website. This can even be a short and fun video (i.e. sleepy juice instead of shot, wiggle your tooth instead of pull your tooth, silver hat instead of crown, vitamins for your teeth instead of fluoride, counting your teeth instead of exam, pictures of your teeth instead of X-rays).

9. Share marketing calendar for theme days on your social media platforms and website

- Patients love seeing the dental teams dress up for theme days! Make it interactive by sharing your theme day calendar on your website.
- When parents schedule, share with them that day's theme, if there is one, and encourage them to have their child get involved.
- For example, if the child is scheduled on Superhero Day, let the parent know that the team will be wearing superhero outfits and if the child has one, wear it to his/her visit!
- Share the monthly theme day calendar on your social media platforms and highlight each week's theme day(s).

10. Focus on FUN!

- There is something so special about pediatric dentistry. It is easy to get caught up in the hectic schedule and stress of COVID-19 precautions, but keep in mind the reasons you wanted to provide dentistry for children in the first place.
- Do not forget the simple things, such as an air high five, a thoughtful compliment to the patient and parent, and the appreciation for their coming to see you. Enjoy all you have accomplished and the great service you are providing to the children who need it. You only get to see them for a short time, after all.

This pandemic has forced all of us to modify how we lead our teams and run our businesses. We have been pushed, stretched, and bent past what we thought we could handle. Nonetheless, this is our reality. Let us reflect on where we have been and enter the next stage of this new season with a clear vision on where we are headed. As you reflect on new opportunities for better patient experiences in your practice, ask yourself: are you ready to take your practice to the next level?

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ASK YOUR DENTIST ABOUT
SEALANTS

SEALANTS

THE BIG AUTHORITY on little teeth!

What are sealants?
 Sealants protect the grooved and pitted surfaces of the teeth, especially the chewing surfaces of back teeth where most cavities in children are found. Made of clear or colored plastic, sealants are applied to the teeth to help keep them cavity-free.

What is the treatment like?
 The application of a white-tooth and invisible, it is relatively painless. The tooth is first cleaned, it is then conditioned and dried. The sealant is then brushed over the prepared tooth and allowed to be hardened by a special light. Your child will be able to eat, talk, play after the appointment.

How do sealants work?
 Some of your child's teeth and their surfaces, by its ability to "seal" the surface, it is able to the grooves and pits on the teeth. Seal and bacteria build up on these surfaces, placing your child at a higher risk of cavities. Sealants "seal out" food and plaque, thus reducing the risk of decay.

How long do sealants last?
 Research shows that sealants can last for "many years" if properly cared for. However, your child will be provided the highest dental care possible. If your child has good oral hygiene and avoids biting hard objects, sealants will last longer. Your pediatric dentist will check the sealants during regular dental visits and recommend an application or repair when necessary.

Which teeth should be sealed?
 The second line of baby teeth help the primary, permanent teeth that have not fully erupted, and the first line of baby teeth. Sealants are most effective on the first and second lines of baby teeth. Sealants also help to protect the permanent teeth that have not fully erupted. The sealants, which are applied to the teeth, reduce the possibility of cavities. Tell us your pediatric dentist, so you, child's dentist knows!

If my child has sealants, are brushing and flossing still important?
 Yes! Sealants are only one step in the plan to keep your child's teeth free of cavities. Brushing, flossing, balanced nutrition, limited snacking, and regular dental visits are still essential to a healthy, healthy smile.

The American Academy of Pediatric Dentistry (AAPD)
 The American Academy of Pediatric Dentistry (AAPD) is the national authority on children's oral health. As advocates for children and family, the AAPD promotes evidence-based pediatric and dental guidelines, education and infection prevention, practice and guidelines, and other health care professionals who have research and provide excellent pediatric dental care for the pediatric dentist and general dentist who care for children. Founded in 1942, the AAPD is a non-profit professional membership organization representing the specialty of pediatric dentistry. Its highly qualified pediatric primary care and comprehensive dental specialty dentists for children, children, adolescents and families with special health care needs. For further information, please visit the AAPD website at <http://www.aapd.org>.

THE BIG AUTHORITY on little teeth!
 211 East Chicago Avenue, Suite 1600
 Chicago, Illinois 60611
 TEL: 312-337-2169
www.aapd.org
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New Publication Explains Restorative Choices to Parents and Insurers

Check out the new technical brief from the Policy Center, "Treating Tooth Decay: How to Make the Best Restorative Choices for Children's Health," now available on the Policy Center under Research on the AAPD website.

It offers practical information and top-quality photos on restorative choices for children's teeth, including amalgams, stainless steel crowns, and tooth-colored fillings and crowns. Offering solutions for pediatric dentists, parents, policy leaders and insurers, the brief is a helpful support piece to aid all children in receiving the best treatment using proven restorative choices.

Here are ways to use the new brief in your outreach efforts with your patient families and public or private insurers:

- Refer to it in your case presentations – especially the photos and restoration comparison chart
- Use it as support material for virtual presentations
- Send it to insurers as valuable reference material
- Share with your referring dental and medical offices
- Post it on your office website

The Policy Center extends warm appreciation to the following contributing authors: Judith R. Chin, D.D.S., M.S.; Yasmi O. Crystal, D.D.S., M.Sc.; Edward Ginsberg, D.D.S.; Eugene McGuire, D.D.S.; and Maria Regina Estrella Yuson, D.D.M., M.S.



AAPD Town Hall: Mental Health and Taking Care of You

On Aug. 26, 2020, the AAPD hosted a town hall titled “Mental Health and Taking Care of You” with panelists Dr. Joel Berg, host of *Pedo Teeth Talk*; AAPD President, Dr. Jessica Lee; and guest Dr. Sheela Raja, Licensed Clinical Psychologist, Author and Associate Professor and Director of Clinical Behavioral Sciences at the University of Illinois at Chicago College of Dentistry. Dr. Raja turned our attention to pediatric dentist-specific mental health topics such as vicarious trauma, compassion fatigue and moral injury as we confront the ongoing challenges of the COVID-19 pandemic in our offices and communities. She left us encouraged to continue taking care of ourselves and being there for each other so we can do what we do best, caring for children’s health.

Resources to Keep You Healthy

- **ADA COVID-19 Mental Health Resources.** This ADA web page provides a variety of resources, including informational websites, podcasts, videos, online courses and hotlines.
- **NAMI COVID-19 Information and Resources.** This publication from the National Alliance on Mental Illness (NAMI) provides information from reputable sources on managing stress and anxiety, helpfully organized in a Q and A format.
- **Five Things You Should Know About Stress.** We all handle stress in our own way. Learn how stress impacts you and the tips to help you manage successfully from this short informational reference from the National Institutes of Mental Health.
- **Tips to Manage Anxiety and Stress.** From mental health leader, Anxiety and Depression Association of America (ADAA), this webpage is an excellent guide for times when anxious feelings arise.
- **Tips for Managing Financial Pressures.** Adapting to a new financial reality during the COVID-19 pandemic is difficult. This article from the American Psychological Association covers manageable strategies to help you cope.

- **Tips for Coping with Discrimination.** Confronting inequities and biases in your day-to-day experience causes chronic stress and takes a considerable toll on your health. Learn a few techniques to help reduce the ill effects, followed by a handful of resources, in this short article put together from the American Psychological Association, *Discrimination: What it is and How to Cope*.
- **Self-Care Resources from Tulane University.** This user-friendly site has information on meditation, at-home exercise, and connecting with friends and loved ones during social distancing.
- **HeadSpace Mindfulness App.** This highly rated app and website offer hundreds of articles on such topics as sleep, stress, meditation, exercise and healthy living.
- **PsyberGuide.** Among its resources, this website has 3-minute reading articles on using technology to mind your mental health and 40 things to do at home while you’re self-isolating.

National Suicide Prevention Lifeline

<https://suicidepreventionlifeline.org/>
(800) 273-8255

National Institute of Mental Health information and helpline

Call (800) 273-8255
Text HELLO to 741741
<https://www.nimh.nih.gov/health/topics/suicide-prevention/index.shtml>

Substance Abuse and Mental Health Services Administration National Helpline

(800) 662-HELP (4357), or TTY: (800) 487-4889

Slides for Your Next Virtual Presentation: What’s the Latest on Pediatric Dentistry?

When you are asked to give a presentation about careers in pediatric dentistry – or if you need a one-stop resource for the current state of your profession – you can turn to “Trends in Pediatric Dentistry 2020,” a newly revised PowerPoint presentation from the Policy Center.

The presentation provides up-to-date facts on such topics as:

- AAPD Member Demographics
- Pediatric Dental Practice Characteristics
- Access to Care for Underserved Populations
- Current and Projected Supply of Pediatric Dentists

Here is a sample of the information you will discover:

- Over 8,000 pediatric dentists practice in the U.S., making it the second largest specialty in dentistry.
- There are nine pediatric dentists for every 100,000 children under 19 years of age in the U.S., up from five in 100,000 in 2001.
- Pediatric dentists treat more than one in four of the patients under age 17 who visit a dentist in a given year in the U.S.
- About 70 percent of pediatric dentists accept Medicaid, CHIP or both.

AAPD members can access “Trends in Pediatric Dentistry 2020” here [https://www.aapd.org/resources/member/governance/under Other Governance, Pediatric Dentistry Facts](https://www.aapd.org/resources/member/governance/under%20Other%20Governance%20Pediatric%20Dentistry%20Facts).

Evidence-Based Dentistry Committee Update

The Non-Vital Pulp Therapy Systematic Review was published in the July/August 2020 issue of Pediatric Dentistry, and the Clinical Practice Guideline in the September/October Issue. The Evidence-Based Dentistry (EBD) Committee continues to oversee the evidence-based clinical practice guidelines currently under development:

- Clinical Practice Guideline on Behavior Guidance for Pediatric Dental Patients
- Clinical Practice Guidelines for Permanent Tooth Vital Pulp Therapy in Children and Adolescents
- Clinical Practice Guideline on Frenectomy/Frenotomy and Lactation for Pediatric Dental Patients

The Vital Pulp Therapy Systematic Review and Guideline, published in 2017, is scheduled for revision by 2022. The workgroup formed by the EBD Committee to produce the systematic review and clinical practice guidelines on permanent tooth vital pulp therapy in children and adolescents will assume this essential project as well. They will review the 2017 systematic

review and conduct a literature update to carry out qualitative analysis. Both quantitative and qualitative evidence will be analyzed to update the clinical practice guidelines and produce the plain language summary. This workgroup is comprised of Drs. James Coll (chair), Chia-Yu Chen, Yasmi Crystal, Vineet Dhar, Marcio Guelmann, Abdullah Marghalani, Shahad Al Shamali, Kaaren Vargas, and Zheng Xu.



The Permanent Tooth Vital Pulp Therapy in Children and Adolescents Workgroup is pleased to welcome Gerald N. Glickman, D.D.S., M.S., M.B.A., J.D., as its newest member to bring the perspective and expertise of an experienced endodontist and international author in permanent tooth vital pulp treatment. Glickman is a full professor in the Department of Endodontics at Texas A & M College of Dentistry in Dallas. He received a D.D.S. from the Ohio State University, a GPR Certificate from the University of Florida, a Certificate and MS in Endodontics from Northwestern University, an M.B.A. from Southern Methodist University, and a J.D. from Texas Wesleyan University. He is a past President of the American Board of Endodontics and the American Association of Endodontists.

The table below indicates the timeline of clinical practice guideline development.

Clinical Practice Guideline Topic	Systematic Review Publication Date	Guideline Publication Date
Sealants (completed)	08/2016	09/2016
Vital pulp therapy (completed)	01/2017	09/2017
Silver diamine fluoride (completed)	N/A	09/2017
Non-vital pulp therapy (completed)	07/2020	09/2020
Behavior guidance (in progress)	2021	2021
Frenectomy and lactation (in progress)	2021	2022
Vital pulp therapy (revision in progress)	2022	2022
Permanent tooth vital pulp therapy in children and adolescents (in progress)	2022	2023



AMERICAN BOARD OF PEDIATRIC DENTISTRY

Only certifying board for the specialty of Pediatric Dentistry
recognized by the American Dental Association

RESEARCH FELLOWSHIP

The ABPD Research Fellowship is a one-year, part-time program that positions early career dentists, and others with relevant advanced degrees, as future health care leaders. The program facilitates research in areas relevant to assessment, performance and quality improvement, continuing professional development, and initial and continuing board certification.

PROGRAM BENEFITS

- Support research that brings value to Research Fellows and their respective organizations.
- Discover an enhanced understanding of continuous certification, quality improvement, patient outcomes and professional development, and informing on those findings.
- Provide national recognition and dissemination of the research.
- Award \$15,000 to institutions designated by Research Fellows to offset direct costs of research, professional development expenses, and travel costs associated with program participation.

WHO CAN APPLY?

- Pediatric dentists who are in their early career, junior faculty, fellows, residents are eligible, those who hold a masters or doctorate degree in public health, as well as individuals who are engaged in health care research, public health administration and policy, and other relevant disciplines.
- Applicants should have a project that is ongoing or ready to begin, and an institutional research mentor selected. The project may build on existing research at the applicant's institution to help advance initial and continuing certification.

APPLICATION REQUIREMENTS AND PROCESS

- Research project description including research questions, plan, budget, expected outcomes, and timeline.
- Personal statement describing applicant's interests and goals for program participation.
- Two letters of support: one from the applicant's research mentor; and one from the applicant's department chair, associate dean/assistant dean, residency program director, or other supervisor.
- Current CV.
- The application period for the 2021-2022 Research Fellowship opens January 4, 2021 and closes May 15, 2021 at 5:00 p.m. CT.
- Notification of acceptance will be made in late August 2021, and program participation begins in September 2021.
- ABPD Research Fellows are selected on the quality of their proposed project, the likelihood of making substantial progress on the project during the scholar year, and on their project's relevance to dentist assessment, patient care quality improvement, and performance improvement.

To learn more about the ABPD Research Fellowship program, please visit www.abpd.org.



Coding Corner



Self-funded Plans Versus Fully-insured Plans

Medical and dental plan claims are adjudicated according to provisions established in the plan document or insurance contract. For self-funded and federal plans, this document is referred to as the plan document and these plans follow Employee Retirement Income Security Act of 1974 (ERISA) laws. Fully-insured plans follow the insurance laws of the state in which the plan was purchased and fall under the jurisdiction of the state insurance commissioner. This document is referred to as an insurance contract for fully-insured plans. For the purpose of this article we will use the term plan document.

A common provision of the medical and dental plan document is known as the family-related exclusion. The family-related exclusion means that a doctor or other healthcare provider cannot treat her immediate family member as defined by the plan or file a claim requesting reimbursement for services rendered. This provision applies to both in- or out-of-network providers. The language defining immediate family members of this provision varies by plan and may be stated in a variety of ways.

Some examples of language defining immediate family members include but are not limited to the following:

- “immediate family or immediate family of spouse”
- “enrollee’s spouse, child, brother, sister, or parent”
- “a person who lives in the covered person’s home or who is related to the covered person by blood or marriage”

Only the patient or plan subscriber (not the provider’s office) can obtain a copy of the plan document. This is not the plan summary given to the patient or subscriber at the time of enrollment. The plan document must be requested from the HR department if the plan is an employer sponsored plan or directly from the payer if the plan is an individual plan purchased directly from the payer.

Be aware of this provision and do not bill insurance for services rendered to immediate family members. Recoupment of monies paid by the plan can and often are made from providers who have received reimbursement for immediate family members.

For more information or questions please contact AAPD Dental Benefits Director Mary Essling at (312) 337-2169 or messling@aapd.org.

Contract Analysis

Stop, read and consider Insurance Provider Contracts before you sign! When you sign a contract, you make promises that will be legally binding on you. If you fail to do what you promise, the other party may be able to terminate the contract or may initiate legal action against you for breach of contract. It is, therefore, essential that you review any contract carefully before you sign it.

By signing the contract, what are you promising to do? Are you able and willing to do it? What promises are the other party making to you? What remedies will you have if something goes wrong?

The American Dental Association’s Legal team has created a useful guide for dental providers to follow prior to signing a contract. To view, visit https://www.ada.org/~media/ADA/Member%20Center/Members/DBIS_dental_provider_contract.pdf.

Media Mix

AAPD President Interviewed for National Tooth Fairy Day

AAPD President **Dr. Jessica Lee** was interviewed for blog-post, Celebrate the Tooth Fairy with Caribu, and Keep Track of Dental Care During the COVID-19 Pandemic, on National Tooth Fairy Day to encourage families to read books in the app about losing your teeth. The aim was to encourage good dental hygiene practices as kids learn to take responsibility for their own health. Caribu is an app designed for parents and grandparents to read books with their (grand) children in an interactive video call. Most of their users are parents or grandparents of children ages 4-7 (who fall right into the tooth fairy range!).

"It's tremendously important to have books on digital platforms now because children connect," said Dr. Jessica Lee, the president of the American Academy of Pediatric Dentistry (AAPD).

"The nighttime routine is the most important one," she said. "We don't want any of the plaque to sit overnight. Read a story, listen to music, integrate brushing your teeth into the nighttime routine, and it will become a habit for a lifetime."

<https://caribu.com/2020/08/21/celebrate-the-tooth-fairy-with-caribu-and-keep-track-of-dental-care-during-the-covid-19-pandemic/>



Stay up-to-date on AAPD Latest News by visiting the News Room on the AAPD website under the About section.





What are the Gaps in Your Risk Management Strategy? How Newly Established Dentists and Specialists Might Reduce their Risk Exposure

Jeffrey E. Wherry, CFP®, CLU®, ChFC® Director of Research and Planning
Treloar & Heisel Wealth Management
www.treloaronline.com

If you've been avoiding thinking about risk, now may be an appropriate time to open your eyes to it. Very few people can honestly say they like thinking about unpleasant outcomes, and yet by thinking about negative scenarios, we can actually face them, address ways to mitigate their impact, and then hopefully feel some of the weight lift from our shoulders. My colleagues and I witness this in our financial planning practice on a regular basis, as risk management is one of the six key areas of an individual's finances we address as part of our comprehensive approach. (In case you're wondering, the other areas are: cash flow management, investments, retirement, estate, and the impact of taxes.)

When was the last time you reviewed your risk management strategy? Perhaps you never had one. A risk management plan is a foundational part of a comprehensive investment plan. An investment plan that lacks risk management at its foundation is missing an important element.

This list is by no means comprehensive, but if you want a quick list for some of the most common insurance gaps we see, here they are – along with ways to fill the gaps.

Problem: Not having enough disability income coverage

Solution: Maximize your disability income policy.

This is something you just have to do. Your disability income policy is effectively your income replacement strategy. Were something to happen to you that would prevent you from working in the medium to long-term, this policy could kick in to help provide you with monthly income (provided you satisfy the terms and definitions of the contract.) Review whether your policy covers total disability specific to your specialty, a partial disability if you can still work while disabled but at a reduced income, and offers inflation increases while collecting benefits. In the unfortunate event that it is activated, you want to make sure you can cover your expenses, provide for your family, and

even save for retirement. Some companies offer special 'riders' (add-on features) that can help you cover retirement saving, student loan repayment, and other financial obligations or goals.

Problem: Exposure to lawsuits.

Solution: Make sure you have an umbrella policy.

An umbrella policy is a kind of property and casualty insurance that covers your belongings (like your car and home) when the limits on your car and home insurance have been exhausted. It may also protect you from liability and defense costs not covered by other kinds of insurance. For example, if your dog bites someone and they sue you, or if a contractor slips and falls on your property, or if your teenager gets into an accident and you are sued beyond the amounts covered by your auto policy. Generally, everybody should have an umbrella policy that goes on top of your auto and home policy; you should have at least a million dollars of coverage and more as your net worth grows.

Problem: Avoiding thinking about death because you're young and healthy.

Solution: Buy life insurance to protect and provide for the ones you love.

Many younger people don't feel the need to obtain life insurance – and yet, life insurance is generally most affordable when you're young and healthy. If you have loved ones whom you'd like to provide for, you should purchase life insurance. Those without families may also need it as collateral for a practice loan or practice buyout agreement as mentioned below. Term insurance is relatively inexpensive, but only covers you for a limited period of time (the "term" of the policy). Permanent life insurance is exactly as the name says – permanent and not restricted to a certain time period.

Problem: Not having a plan for your practice in the event that you or your business partner are disabled or die.

Solution: If you are in business with a partner, consider having an attorney prepare a buy-sell agreement with insurance provisions.

Buy-sell agreements are contracts between business owners for the purchase and sale of a practice in the event of death, disability or retirement. The buy-sell agreement will often establish a pricing formula for the practice, serve to have a ready

buyer for the practice and may be used to value the business interest for federal estate tax purposes. In the event of death or disability, the practice purchase under the buy-sell agreement is typically funded via insurance.

Consult with a financial professional.

Of course, one of the most sensible things you could do is to speak with an experienced financial professional, which is what we recommend to anyone who is wondering if they have appropriate coverage in the right places.



Treloar & Heisel is a financial services provider to dental and medical professionals across the country. We assist thousands of clients from training to practice and through retirement with a comprehensive suite of financial services, custom-tailored advice, and a strong service-focused support team. For more information, visit www.treloaronline.com.

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This information is intended for general informational purposes only and should not be construed as advice. Please consult with a licensed insurance professional.

TH-200086

Patient/Family Communications Materials to Brighten the Day for Your Patients

Brighten the day for your patients by sending them this new “Stay Home, Stay Healthy” poster from the AAPD – or posting it on your practice Facebook page. A Spanish poster is available too! For more free downloads of positive patient materials based on sound science, visit the AAPD parent and caregiver website. Pediatric dentists know that it’s all about the kids, and remember YOU are the big authority on little teeth within your own community.



Download yours now from the Mouth Monster hub at mychildrensteeth.org!

Opportunities

For information regarding placing a listing in *PDT* or *Pediatric Dentistry* please visit the AAPD Career Center at <http://jobs.aapd.org> or call (312) 337-2169.

SEEKING PEDIATRIC DENTISTS

CALIFORNIA—SAN DIEGO. Great opportunity for Pediatric Dentists in the San Diego County area. Join our team and be a part of something as extraordinary as the children you treat. With six locations, we are looking for someone compatible who is personable, enthusiastic, caring and someone who loves what he/she does. Currently, we're seeking both part-time and full time positions with GREAT compensations, relocation and sign on bonus packages. For more information on our practice, please feel free to check out our website www.thesuperdentists.com and see for yourself why The Super Dentists is San Diego's largest, most trusted and top awarded pediatric dentistry practice. Please send your resumes to nicki@thesuperdentists.com or call (619) 548-8772 for more information on the opportunity. Pediatric Dentist CA License.

FLORIDA—HILLSBOROUGH COUNTY. Tampa area - Florida Our long established and respected Pediatric Dentistry/Orthodontic group practice is looking for a Pediatric Dentist to join our Plant City, FL office. Our full time practice is open four days each week. You will have autonomy to practice your dental philosophy with the support of the staff, so you can focus on patient care. We are looking for a highly motivated, dependable and compassionate pediatric dental associate with excellent communication and clinical skills. Potential buy-in is an option. Compensation and benefits include a guaranteed daily base minimum and collection goal bonuses, professional insurance, health insurance, licenses and fees, paid time off, holidays, continuing education paid leave and CE financial assistance. Candidates must be licensed in the state of Florida, hold a sedation permit, and be Board certified or Board eligible to apply. Please contact us at tanyab.dds@gmail.com for more information. We look forward to meeting you!

GEORGIA—ATLANTA. D4C Dental Brands is looking for pediatric dentists on behalf of Dentistry for Children of Georgia to work in its pediatric dental practices. Specifically, we are looking for doctors who share our values and are as passionate about helping children achieve a lifetime of great oral health as we are! Come join our supported dental offices, where we do just that; support pediatric dentists by bringing them cutting edge technology, continued education, and mentorship while you build the practice of your dreams. The practice is doctor owned, doctor run and believes in advocating for patients while elevating the quality of care for kids by specializing in specialists. If you want to change lives, keep reading! Our ROCK STAR candidate has the following: Experience in pediatrics and LOVES working with children. Positive attitude with a great personality; excellent chairside manner and communication skills. D.D.S./D.M.D. from an accredited university. Completion of residency from an accredited pediatric residency program. Active Dental Board License. Current residents

are encouraged to apply. Dentistry for Children of Georgia offers doctors 401(k), medical, dental, and vision benefits, short and long term disability, PTO + paid holidays, state of the art facilities, equity opportunities, a deferred compensation plan, life insurance, malpractice insurance, etc. D4C Dental Brands, together with its affiliated practices, is an equal opportunity and affirmative action employer that does not discriminate in employment and ensures equal employment opportunity for all persons regardless of their race, color, religion, sex, sexual orientation, gender identity, national origin, or status as a qualified individual with a disability or Vietnam era or other protected veteran. For more information please contact alycia.tooill@d4c.com.

GEORGIA—BRASELTON. Privately-owned pediatric practice seeking an immediate opening in the northern suburbs of Atlanta. People are drawn to this area for the amazing balance of outdoor activities along with great school districts. This combination has led to our practice experiencing amazing growth between our two locations. We are a fun office that truly believes in presenting an experience for each patient that enters our facilities. We truly feel it's our privilege that families choose us and we strive to never allow our office to feel like a mill or dental factory. We are seeking a confident candidate that wants to find a practice to call home with exponential growth potential! This is truly a special opportunity for the right individual with a very competitive compensation package! Please send C.V. to amber@startlifesmiling.com.

ILLINOIS—NAPERVILLE. Full or Part-time Pediatric Dentists to join our existing team and busy practice. We have a quality oriented practice and are very proud of the positive response younger patients and their parents have to the doctors and team. This is an incredible opportunity if you: are a new grad, retired and want to get back in to practice, love the practice of dentistry but want someone else to manage the business, are looking for partnership opportunity, never want to own a practice, or want to own! We have an opportunity to meet your needs. We prefer a board certified pediatric dentist or one who has started the process. Our practice invests in technology to enhance the patient experience. We are in a great community of parents and patients that you will love treating. We have an excellent compensation package we can discuss during our call. Board Certification or in process. Able to practice in Illinois. For more information please contact iocdri@aol.com.

INDIANA—MUNCIE. D4C Dental Brands is looking for pediatric dentists on behalf of Dentistry for Children of Indiana to work in its Muncie, Indiana pediatric dental practices. Specifically, we are looking for doctors who share our values and are as passionate about helping children achieve a lifetime of great oral health as we are! Come join our supported dental offices, where we do just that; support pediatric dentists by bringing them cutting edge technology, continued education, and mentorship while you build the practice of your dreams. The practice is doctor owned, doctor run and believes in advocating for patients while elevating the quality of care for kids by

specializing in specialists. If you want to change lives, keep reading! Our ROCK STAR candidate has the following: Experience in pediatrics and LOVES working with children. Positive attitude with a great personality; excellent chairside manner and communication skills. D.D.S./D.M.D. from an accredited university. Completion of residency from an accredited pediatric residency program. Active Dental Board License. Current residents are encouraged to apply. Dentistry for Children of Indiana offers doctors 401(k), medical, dental, and vision benefits, short and long term disability, PTO + paid holidays, state of the art facilities, equity opportunities, a deferred compensation plan, life insurance, malpractice insurance, etc. D4C Dental Brands, together with its affiliated practices, is an equal opportunity and affirmative action employer that does not discriminate in employment and ensures equal employment opportunity for all persons regardless of their race, color, religion, sex, sexual orientation, gender identity, national origin, or status as a qualified individual with a disability or Vietnam era or other protected veteran. For more information please contact alycia.tooill@d4c.com.

IOWA—CEDAR RAPIDS. Iowa Pediatric Dental Center is looking for pediatric dentists to work in its pediatric dental practices in Coralville, Muscatine, and Cedar Rapids. Specifically, we are looking for doctors who share our values and are as passionate about helping children achieve a lifetime of great oral health as we are! Come join our awesome pediatric clinic, where we provide unmatched care for our patients by providing our team of doctors with cutting edge technology, continued education and opportunities for growth, and mentorship while you build the practice of your dreams. The office is doctor owned, doctor run and believes in advocating for patients while elevating the quality of care for kids by specializing in specialists. If you want to change lives, keep reading! Current residents are encouraged to apply. Sign on bonuses offered! Our ROCK STAR candidate has the following: Experience in pediatrics and LOVES working with children. Positive attitude with a great personality; excellent chairside manner and communication skills. D.D.S./D.M.D. from an accredited university. Completion of residency from an accredited pediatric residency program. Active Dental Board License. Des Moines Children's Dentistry offers doctors 401(k), medical, dental, and vision benefits, short and long term disability, PTO + paid holidays, state of the art facilities, equity opportunities, a deferred compensation plan, life insurance, malpractice insurance, etc. Des Moines Children's Dentistry is an equal opportunity and affirmative action employer that does not discriminate in employment and ensures equal employment opportunity for all persons regardless of their race, color, religion, sex, sexual orientation, gender identity, national origin, or status as a qualified individual with a disability or Vietnam era or other protected veteran. For more information please contact alycia.tooill@d4c.com.

IOWA—WEST DES MOINES. Des Moines Children's Dentistry is looking for pediatric dentists to work in its pediatric dental practices in West Des Moines, Iowa. Specifically, we are

looking for doctors who share our values and are as passionate about helping children achieve a lifetime of great oral health as we are! Come join our awesome pediatric clinic, where we provide unmatched care for our patients by providing our team of doctors with cutting edge technology, continued education and opportunities for growth, and mentorship while you build the practice of your dreams. The office is doctor owned, doctor run and believes in advocating for patients while elevating the quality of care for kids by specializing in specialists. If you want to change lives, keep reading! Current residents are encouraged to apply. Sign on bonuses offered! Our ROCK STAR candidate has the following: Experience in pediatrics and LOVES working with children. Positive attitude with a great personality; excellent chairside manner and communication skills. D.D.S./D.M.D. from an accredited university. Completion of residency from an accredited pediatric residency program. Active Dental Board License. Des Moines Children's Dentistry offers doctors 401(k), medical, dental, and vision benefits, short and long term disability, PTO + paid holidays, state of the art facilities, equity opportunities, a deferred compensation plan, life insurance, malpractice insurance, etc. Des Moines Children's Dentistry is an equal opportunity and affirmative action employer that does not discriminate in employment and ensures equal employment opportunity for all persons regardless of their race, color, religion, sex, sexual orientation, gender identity, national origin, or status as a qualified individual with a disability or Vietnam era or other protected veteran. alycia.tooill@d4c.com.

MASSACHUSETTS—BROOKLINE. Our well respected pediatric/orthodontic dental office is seeking a part-time or full-time pediatric dental associate. Our modern, state of the art facility is located right outside of Boston, Massachusetts in the Coolidge Corner area of Brookline, Massachusetts. Our passion is creating a legacy of positive dental experiences for children. We develop positive attitudes for healthy smiles to ensure that "each child will leave the office taller than when they arrived." For 40+ years, we have gone above and beyond in our treatment and customer service, to provide high quality dental care for children and teens. We are considered an exemplary pediatric dental practice among pediatricians and families in the community. We form long lasting relationships that promote the well-being of each patient. Excellent behavior management and communication skills are a must. We are looking for an ethical, hard working, and motivated pediatric dentist who possesses great communication and leadership skills. We offer a competitive benefits package that includes health insurance, paid vacation, continuing education, 401K retirement plan and more. **QUALIFICATIONS:** Passion and skill to successfully treat pediatric patients. Effectively communicate dental information to non-dental audiences. Communicate professionally with patient families. Excellent clinical skills, in addition to good organizational skills. Outstanding interpersonal skills. If you are interested in having the opportunity to perform all aspects of pediatric dentistry in a fun environment, please email your cover letter and resume to dnesbarton@gmail.com. We look forward to hearing from you!

MICHIGAN—GROSSE POINTE WOODS. Toothworks is an established, fast growing, busy 3 dentist Pediatric practice looking for its fourth member. Toothworks is located on the campus

of a level 1 trauma center. The practice is located in a family oriented community with top ranked schools with amazing parks and access to water sports that are unique to Michigan. We are located 30 minutes from Detroit and 45 minutes from Ann Arbor, home to the University of Michigan. Toothworks serves a diverse clientele. The office has a robust restorative practice balanced with an established continuing care system. We believe in giving back to the community. The practice is affiliated with the Pediatric Dentistry Residency program at the Children's Hospital of Michigan. There are optional teaching responsibilities for the interested qualified candidate. We are offering a full time position to an energetic, hard working professional to complement our motivated team. Partnership is available for the right candidate. This position offers an excellent pay and benefit package. Check out our community at: <https://www.pbs.org/video/whats-your-pointe-if77ja/>. For more information please contact info@toothworkspc.com.

NEW JERSEY—HOWELL. Busy pediatric office looking for outstanding pediatric dentist to join our wonderful team three days per week. Compensation is based on a percentage of production. Monmouth County is a wonderful place to raise a family. Please send resume to DrJay@kdkinhowell.com.

NEW JERSEY—ROBBINSVILLE. Our growing, private pediatric dental practice is currently looking for two part-time pediatric dentists. Our practice is currently located in the rapidly growing area of Robbinsville, NJ and with continued growth will be opening a second location in the Hunterdon, NJ area. This part time opportunity would suit compassionate, energetic and personable doctors. Our mission is to provide an exciting and unique dental experience for children and their parents while improving the oral health of all families. We provide the highest quality of oral health care for infants, children, and teens, including those with special health care needs. Our services include comprehensive, preventative and restorative dentistry, in office sedation/general anesthesia and some interception orthodontics. Whether you are a new graduate or an experienced provider, we are confident you will find our practice both professionally and financially rewarding. For more information on our practice, please feel free to visit our website at www.kids2thdoc.com. If you are interested in joining our team, please email your resume to: robbinsvillekidsdent@gmail.com.

NEW MEXICO—ALBUQUERQUE. Albuquerque Pediatric Dental is in search of a friendly and motivated pediatric dentist willing to serve our family of patients. Our well established practice has been providing dental treatment to the children of New Mexico for over 40 years. We are looking for a pediatric dentist willing to form a long term relationship with our patients, local communities, and staff. Our office accepts most major private insurances as well as Medicaid. We strive to provide high quality dental care in both the traditional dental office setting as well as the hospital setting. We are proud of our caring, hard-working, and enthusiastic team of employees capable of handling the diverse needs of our patients. In fact, we are proud to say half of our employees are fluent in Spanish and our longest tenured employee has been with us for almost 20 years. We offer a dedicated staff, competitive salary with health benefits, paid holidays, malpractice insurance, modern treatment facilities, as well as the diverse

food, outdoor activities, culture, landscapes and the plentiful sunshine the southwest has to offer. Candidates must have completed a postgraduate residency in pediatric dentistry, and already have an established Medicaid ID. Although, current residents are free and encouraged to apply for this open position as well. Interested professionals should please submit their resume to: infodrcito@yahoo.com. Also, we would love it if you visited our website at: www.albuquerquepediatricdental.com and read some of the reviews our family of patients have posted. We look forward to hearing from you soon! D.D.S. or D.M.D. degree with dental license in the state of New Mexico and certificate from a pediatric residency program.

NEW YORK—COMMACK. Well established Pediatric Dental Office looking for an associate to join our team. We are located in Commack NY. Looking for a candidate that is energetic, patient & a team player. For more information please contact pjped@yahoo.com

NORTH DAKOTA—FARGO. Thriving pediatric dental office is looking for a motivated, hardworking dentist to join our private practice. (Full or part time opportunity.) Must have excellent communication and clinical skills, ambitious with positive attitude, be a kind and caring person with ability to get along with staff and other employees. We have a strong referral base and excellent office reputation. Potential ownership opportunity for the right candidate. New dentist will be guaranteed a base salary, as well as the opportunity to earn more based on percentage of collections. Fargo is a wonderful community with a low cost of living, great schools, eclectic art community, and numerous opportunities to participate and enjoy a wide variety of outdoor activities. We are also home to the North Dakota State University Bison Football Team—eight-time Division 1 champions! For more information and to email your C.V., contact info@pediatricdentistrytld.com.

OHIO—CLEVELAND. D4C Dental Brands is looking for pediatric dentists on behalf of Dentistry for Children of Ohio to work in its Cleveland pediatric dental practices. Specifically, we are looking for doctors who share our values and are as passionate about helping children achieve a lifetime of great oral health as we are! Come join our supported dental offices, where we do just that; support pediatric dentists by bringing them cutting edge technology, continued education, and mentorship while you build the practice of your dreams. The practice is doctor owned, doctor run and believes in advocating for patients while elevating the quality of care for kids by specializing in specialists. If you want to change lives, keep reading! Our ROCK STAR candidate has the following: Experience in pediatrics and LOVES working with children. Positive attitude with a great personality; excellent chairside manner and communication skills. D.D.S./D.M.D. from an accredited university. Completion of residency from an accredited pediatric residency program. Active Dental Board License. Current residents are encouraged to apply. Dentistry for Children of Ohio offers doctors 401(k), medical, dental, and vision benefits, short and long term disability, PTO + paid holidays, state of the art facilities, equity opportunities, a deferred compensation plan, life insurance, malpractice insurance, etc. D4C Dental Brands, together with its affiliated practices, is an equal opportunity and affirmative action employer that does not discriminate in employment and

ensures equal employment opportunity for all persons regardless of their race, color, religion, sex, sexual orientation, gender identity, national origin, or status as a qualified individual with a disability or Vietnam era or other protected veteran. For more information please contact alycia.tooill@d4c.com.

OHIO—NEAR TOLEDO. Sign on Bonus, Bonus, Student Loan! If you're looking to make your professional mark on a community, this is your chance. Build valuable relationships with patients and get involved with the greater community of Oregon, Ohio while providing top-notch dental care. Well established practice, long term team members, great location! Our talented and dedicated support team will work alongside you to help ensure your success. Mentorship is available working along side an experience pediatric dentist. Office is a very stable and busy practice with long term employees. Option to add EFDA to team if wanted. As an associate pediatric dentist you'll enjoy the following: Base salary with performance incentives to earn more. Sign-on bonus of \$10,000 (Full-time, partial for part-time) Relocation package. Student Loan Repayment Assistance Program. Full time benefits include yearly CE allowance, paid professional liability, 401K with company match and group health/wellness plans. Practice 2-5 days per week with family friendly days/ hours. Job Link: <http://puredentalbrands.com/careers/?gmk=job&gni=8a7887a8688e28cf0168a78c0682efc&gns=Company+Website>. Equal Opportunity Employer/Drug Free Workplace. www.puredentalbrands.com. Candidates must be licensed to practice in the State of Ohio with no board reprimands or issues. New residency grads welcome to apply!

OREGON—HOOD RIVER. Title: Pediatric Dentist: Immediate Opening with Signing Bonus. Have a passion for helping others have a wider and brighter smile Join our team at A Kidz Dental Zone. Where patient interaction is focused on Happy Kidz, Healthy Smiles, for a Lifetime! At A Kidz Dental Zone our main focus in providing an inviting environment for all our patients and their families through a caring staff and exceptional dental and orthodontic care. A Kidz Dental Zone has an immediate opening for an experienced, compassionate and motivated pediatric dentist interested in opportunities to provide care focusing on prevention and community involvement. About A Kidz Dental Zone. We have been in practice since 1999 in the heart on Hood River and opened our doors to The Dalles community in 2013. We are surrounded by Mountains, rivers, streams, biking & hiking trail and all of the outdoor adventures the Gorge brings. At A Kidz Dental Zone we believe that every child deserves quality dental care. We work hard to ensure that all the children in the communities that we serve have access to specialized dental care and strive to become an integral part of the community that we serve. Why Should You Apply: Competitive Compensation. Signing Bonus. Production Bonus Potential. Top benefits including: Health Insurance, 401K Retirement Plans, Profit Sharing, and Health Savings Account. Paid Professional Liability Insurance. Paid Vacations. Continuing Education Reimbursement. Opportunity for future partnership. Team that focuses on family and individuals. A Kidz Dental Zone of Hood River is committed to maintaining a drug-free and safe workplace. A post-offer drug test to detect the use of illegal drugs is a part of our hiring process. A Kidz Dental Zone of Hood River does not discriminate on the basis of race, color,

national origin, sex, age, or disability in its health programs and activities. For more information please contact sue@akidzdenalzone.com.

OREGON—SALEM. "Be the change you want to see in the world"- Mahatma Ghandi. My name is Dr Tim. I started Acorn Dentistry for Kids in 2017 with the vision to fill a significant void in our area of Oregon and change the way pediatric dentistry is done. With personal investment, a lot of sweat equity, and more great doctors coming on board, we have grown to five great clinics within 3 years, and we are not close to being done yet. We are a group of entrepreneurial-minded doctors that don't believe the trend of big corporate takeover is good for us or our patients, instead valuing the group practice model that is owned by doctors who are actually seeing the patients. We are looking for more pediatric dentists to be a force for good in the Pacific Northwest. If you are entrepreneurial minded and want to be a part of creating a legacy group dental practice, keep reading. Acorn Dentistry for Kids is leading the way in creating the ultimate patient and family experience for ALL families in the community. Most dentists around here—including pediatric dentists—got into school claiming they want to help the underserved, yet close their doors to those most in need of their help and compassion once they get into practice. We choose to take care of every child in our community regardless of which insurance they have (or lack thereof, and have our own in-house membership plan). We also do not segregate private and Medicaid insured kids on our schedule. We stand for equal access and quality treatment for ALL kids and take ownership of that stewardship. We have zero tolerance for poor treatment of employees that help us serve our community. We pay them well, provide benefits and do not see them as "disposable" like many offices do. We spend a lot of time and resources on developing our team, starting with a full two weeks of culture and communication training upon hire. Doctors take the lead role in cultivating that positive culture we all want to have. A positive work environment is not a gift - it is a result of our cumulative efforts. Together we have developed our core values that provide the framework for the Acorn Culture: 1. We Are One; 2. Lead With Compassion; 3. Be Emotionally Proactive; 4. Be Yourself and Let Your Passion Shine; 5. Seek Personal Connection with Patients and Each Other; 6. Be a Little Acorn; 7. Be a Lifetime Learner; 8. Innovate and Embrace Change; 9. Be Humble; 10. Be Grateful. We train as a team each month on these values, and performance reviews use our values as the framework for our discussions and decision making. These are led by the doctor, NOT an office manager. We have no lead dental assistants and no office managers. Instead, we have created a leadership structure where anyone who chooses to put in the work and qualify for it gets to be in the leadership group, creating accountability for each individual as well as the team. No one wakes up in the morning and says, "I can't wait to be managed today." But we do wake up and say, "I want a good leader" and "I want leadership opportunity." That is the environment we are creating. IF YOU SEEK TO BE A LEADER FOR GOOD IN EVERY ASPECT OF YOUR LIFE, this is the opportunity you have been looking for. Come join an incredible group of doctors and team members that love and support each other and our patients each and every day, as we continue to grow and serve. Mentorship by more experienced doctors is built-in, but is also great for an experienced provider to jump right in and add

to the momentum we now have. We all help each other be the best doctors and leaders we can be. We offer equal equity ownership after only one year, I am not keeping majority ownership as the founder. This is truly a legacy project for me, to be passed on to other doctors over the years. Guaranteed \$250,000+ during first year associateship (all associates currently earning more than that), plus all professional fees and CE covered, with medical/dental/vision plan in place. Oh, and by the way, you also get to live in the pristine Pacific Northwest where all sorts of outdoor adventures await. The Pacific Ocean, snow sports, water sports, hiking, biking, farm tours, city life and quaint small towns are all at your fingertips. The foodie culture's not too bad either :) Come discover why Oregon is such a desirable place to live. Please respond to this ad to find out more about this incredible opportunity. We look forward to sharing it with you. Must be entrepreneurial minded, be a long-term thinker, and want to be a team leader. For more information please contact timrichardsonds@gmail.com.

RHODE ISLAND—NEWPORT. Immediate associate position in a reputable pediatric dental practice in beautiful, historic Newport, Rhode Island seeking a confident, motivated, highly skilled pediatric dentist. Effective communication skills, friendly disposition and understanding of quality of care is of primary importance in this practice that serves a small and tight-knit community. Opportunity for operating room privileges in a local hospital. Competitive compensation package available. Please email C.V.: accounts@drennondmd.com.

SOUTH CAROLINA—CHARLESTON. Coastal Kids is looking for pediatric dentists to work in its Charleston, South Carolina pediatric dental practices. Specifically, we are looking for doctors who share our values and are as passionate about helping children achieve a lifetime of great oral health as we are! Come join our supported dental offices, where we do just that; support pediatric dentists by bringing them cutting edge technology, continued education, and mentorship while you build the practice of your dreams. The practice is doctor owned, doctor run and believes in advocating for patients while elevating the quality of care for kids by specializing in specialists. If you want to change lives, keep reading! Our ROCK STAR candidate has the following: Experience in pediatrics and LOVES working with children. Positive attitude with a great personality; excellent chairside manner and communication skills. D.D.S./D.M.D. from an accredited university. Completion of residency from an accredited pediatric residency program. Active Dental Board License. Current residents are encouraged to apply. Coastal Kids of South Carolina offers doctors 401(k), medical, dental, and vision benefits, short and long term disability, PTO + paid holidays, state of the art facilities, equity opportunities, a deferred compensation plan, life insurance, malpractice insurance, etc. Coastal Kids is an equal opportunity and affirmative action employer that does not discriminate in employment and ensures equal employment opportunity for all persons regardless of their race, color, religion, sex, sexual orientation, gender identity, national origin, or status as a qualified individual with a disability or Vietnam era or other protected veteran. For more information please contact alycia.tooill@d4c.com.

SOUTH CAROLINA—COLUMBIA. Wild Smiles is looking for pediatric dentists to work in its Lexington, South Carolina pediatric dental practices. Specifically, we are looking for doctors who share our values and are as passionate about helping children achieve a lifetime of great oral health as we are! Come join our supported dental offices, where we do just that; support pediatric dentists by bringing them cutting edge technology, continued education, and mentorship while you build the practice of your dreams. The practice is doctor owned, doctor run and believes in advocating for patients while elevating the quality of care for kids by specializing in specialists. If you want to change lives, keep reading! Our ROCK STAR candidate has the following: Experience in pediatrics and LOVES working with children. Positive attitude with a great personality; excellent chairside manner and communication skills D.D.S./D.M.D. from an accredited university. Completion of residency from an accredited pediatric residency program Active Dental Board License. Current residents are encouraged to apply. Wild Smiles offers doctors 401(k), medical, dental, and vision benefits, short and long term disability, PTO + paid holidays, state of the art facilities, equity opportunities, a deferred compensation plan, life insurance, malpractice insurance, etc. Wild Smiles is an equal opportunity and affirmative action employer that does not discriminate in employment and ensures equal employment opportunity for all persons regardless of their race, color, religion, sex, sexual orientation, gender identity, national origin, or status as a qualified individual with a disability or Vietnam era or other protected veteran. For more information please contact alycia.tooill@d4c.com.

SOUTH CAROLINA—SUMMERVILLE. Pediatric Dental Associate Needed. Summerville, South Carolina. Awesome opportunity for a part/full time rockstar pediatric dentist with path to future ownership and competitive compensation. Located near beautiful Charleston, South Carolina This well established private practice is located in a growing area of Summerville, South Carolina. This is a turn-key opportunity for an experienced pediatric dentist to run their own office without the administrative headaches. The office is equipped with a digital xray system, new pediatric dental software and open operator floor plan. Building is shared with well established and highly respected orthodontic practice. Candidates should: Be motivated and passionate professionals with the desire to learn and grow, both individually and with our practice. Have strong communication and interpersonal skills and seek to build lasting relationships with both patients and their team. Understand that if you put the patient first, everything else will follow. Be Goal driven, with an interest in networking and becoming part of the Summerville/Greater Charleston community. Have interest in a long term partnership and growing a practice for future ownership. Compensation and benefits are competitive and negotiable. Please contact drlindsay@grossoorthodontics.com. Must get a pediatric dental license in South Carolina Board Certification not required but recommended.

SOUTH DAKOTA—RAPID CITY. Dakota Dental 4 Kids is seeking a pediatric dentist to join our amazing team! For more informatin please contact chadmcarter@gmail.com.

TENNESSEE—KINGSPORT. Looking for a energetic, motivated, hard-working, full-time (or part-time) SUPER STAR pediatric dentist to add to our team. Our mission at Kingsport Pediatric Dentistry is to provide excellent patient centered care involving parents/guardians to ensure the best and healthiest results with outstanding customer service. The practice sees children as young as one day old for tongue/lip tie release procedures to age 18 for total oral health care. We take pride in the brand that we have built in our community and surrounding areas and are excited to add to our team so we can continue to grow. Kingsport is centrally located to Asheville, NC, Johnson City, TN, and Bristol, VA. These beautiful East Tennessee communities are family-oriented areas surrounded by mountains and lakes with a variety of outdoor activities! If you ever dreamed of living on a lake, this is the place to do it! Please contact or send CV: aleighia_barker@hotmail.com. Offer includes: \$250K salary, 4-day workweek, not DSO Or thirty-five percent [35%] of Employee's Collections. 4 weeks Vacation plus holidays. Partnership potential. No Medicaid, all private insurance or cash-paying. Malpractice Insurance. Relocation Bonus. Optional Health Insurance. Continuing Education reimbursement. Tennessee Dental License or eligible for licensure. Completion or soon to be completed Pediatric Residency Program.

TEXAS—AUSTIN. We are a Pediatric Dental Practice, located in and around the Austin area with multiple locations to fit the needs of our diverse population. Our commitment is to provide the highest quality comprehensive dental and orthodontic care to the children and teens of the Austin community in a compassionate and caring environment. We truly believe that each patient is



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unique. We take the time to develop the perfect treatment plan for each child that sits in our chair, treating everyone on a case-by-case basis. Austin is consistently rated one of the best cities to live in and for good reason. It is a hub for live music, the food is amazing, and there are more outdoor activities than you could ever get to. One of the keys to long term happiness and success is the ability to work and live in a city you love. We know you will love your time in Austin! We offer a comprehensive compensation package: -Full Medical Benefits -Company Paid Life Insurance -Company Paid Long Term Disability Insurance -401K with up to 3.5% company matching New grads welcome to apply. TX License.

TEXAS—BELTON. We are a clinician owned group that consists of board certified Pediatric Dentists, Orthodontists and Oral Surgeons with an Associate Pediatric Dentist opportunity available in the https://en.wikipedia.org/wiki/Killeen-Temple-Fort_Hood_Metropolitan_Statistical_Area. This is a growing community with opportunities to settle down outside of the fast paced urban lifestyle while still being only an hour away from all that the Austin area offers. Copperas Cove is known as the "Five Hills" area due to its beautiful creeks and valleys and the Belton area has a wonderful school district that received the Texas Education Agency's highest accountability rating (met standard) based on student performance on the State of Texas Assessment of Academic Readiness. Please email your C.V. to joinourpractice2010@gmail.com for more information. TX License.

TEXAS—CORPUS CHRISTI. Our fun and energetic office is looking for a pediatric dentist to work part-time or full-time in our upscale and state of the art new office. Our office is located in beautiful Corpus Christi where everything is a short drive away. Beaches, fishing, surfing, bird watching, shopping, a rich blend of culture and outdoor life without the big city noise and traffic. Please send resumes to rojascandelas@yahoo.com Experienced dentists and new grads are welcome to apply! Board Certified, or Board Eligible.

FACULTY POSITIONS

CALIFORNIA—LOS ANGELES. The Herman Ostrow School of Dentistry of USC seeks applicants for a full-time, clinical track position at the rank of Assistant/Associate Professor of Clinical Dentistry in the Division of Dental Public Health and Pediatric Dentistry. This position is to serve as Clinic Director for the Postdoctoral Pediatric Dental Clinic at the Herman Ostrow School of Dentistry of USC. Responsibilities as Clinic Director include overseeing aspects related to the delivery of patient care and the mentoring and supervision of postdoctoral pediatric dental residents assigned to this clinic. Expertise in the training and supervision of residents in treating patients under oral conscious sedation is preferred. Additionally, research, didactic and service-related activities will be expected. Candidates with previous teaching experience, including

care for children with special healthcare needs, are strongly encouraged to apply. Candidates must have a D.D.S./D.M.D. degree, a certificate in pediatric dentistry from an ADA approved program and should be a Diplomate of the American Board of Pediatric Dentistry or a Board Candidate. A license to practice dentistry and an oral conscious sedation for minors permit in the State of California is required. Interested applicants must submit a cover letter, complete curriculum vitae, and arrange to have at least three letters of reference sent to the division. Consideration of applicants will begin immediately and will continue until the position is filled. USC is an equal opportunity, affirmative action employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, protected veteran status, disability, or any other characteristic protected by law or USC policy. For more information please visit <https://usc Careers.usc.edu/job/los-angeles/assistant-associate-professor-of-clinical-dentistry-open-rank/1209/17098097>.

PENNSYLVANIA—PITTSBURGH. The University of Pittsburgh, School of Dental Medicine (UPSDM) invites applications for a non-tenure stream, senior faculty position in the Department of Pediatric Dentistry at the Associate Professor/Professor level who will assume the Chair position of the Department of Pediatric Dentistry. The candidate should be board-certified in pediatric dentistry; possess or be able to obtain an appropriate license for clinical practice in the Commonwealth of Pennsylvania; have developed an area of clinical excellence; and have proven administrative experience. Favorable consideration will be given to those with additional training credentials such as other advanced degrees. Salary will be commensurate with the candidate's qualifications, experience, and credentials. We are seeking an outstanding individual with excellent leadership skills to lead all aspects of the clinical practice, educational programs, and research activities of the Department of Pediatric Dentistry. The Chair of Pediatric Dentistry must be a role model for faculty, students, residents and investigators. The position requires an outstanding clinician who is a distinguished national and international leader in the field as well as an extraordinary mentor with a strong background and accomplishments in scholarly activity. The desirable candidate will have administrative experience in a sizable research enterprise. The ideal candidate will be able to develop a dynamic and strategic vision with a plan for short and long-term growth with the ability to foster the development of this historic program. The Chair will be overseeing financial management, personnel and faculty development, space planning, strategy development, philanthropy, and all other business, operational, and administrative functions. The University of Pittsburgh is a top ranked public research institution and is currently ranked 9th among U.S. universities in NIH funding. The UPSDM is ranked 10th in NIDCR funding among U.S. dental schools for FY2019. The UPSDM is located on the University's main campus in Pittsburgh, contiguous with the other five health science schools. The Department of Pediatric

Dentistry is comprised of three full-time faculty and a full complement of administrative staff. The Department works as a key partner within the School of Dental Medicine and has interactions with the University of Pittsburgh Medical Center (UPMC). UPMC is an internationally renowned academic medical center and health care enterprise with a robust infrastructure to support clinicians with innovative clinical programs, and biomedical and health sciences research—making discoveries that save lives and change the landscape of patient care. As part of the clinical practice and faculty of the University of Pittsburgh, the Chair will have the opportunity to collaborate with clinicians, innovators, and investigators from around the world, and become part of a vibrant community of health care providers dedicated to making a difference in their chosen field—and in the lives of others. The Department of Pediatric Dentistry is situated in one of the most dynamic healthcare delivery and University environments built for innovation available anywhere. The platform provides a unique and rich ethos for the development of transformative scientific discovery and the translation of intellectual property and clinical solutions. The Chair will have the opportunity to collaborate across multiple platforms and help transform the field. To apply, send curriculum vitae, a letter of intent, and a statement of the leadership vision via our online application system: https://cfopitt.taleo.net/careersection/pitt_faculty_external/jobdetail.ftl?job=19008491&tz=GMT-04%3A00&tzname=America%2FNew_York Chair of the Search Committee. Dr. Joseph Giovannitti, School of Dental Medicine, University of Pittsburgh, 440 Salk Hall. swfrench@pitt.edu. The University of Pittsburgh is an Affirmative Action/Equal Opportunity Employer and values equality of opportunity, human dignity and diversity, EOE, including disability/vets.

PRACTICE FOR SALE

TEXAS—HOUSTON. New to the market is a steady pediatric practice on the outskirts of Houston, Texas. The practice is located in an office building with 3,000 square feet to work with. The current doctor has practiced in the community for over two decades and is therefore ready to sell and retire. With over 7,000 active patients, the practice is prime for growth! For an overview of this pediatric practice in the Southeast Texas, read below: 7 fully equipped operatories. Collections of \$885,000. Adjusted EBITDA \$360,000. 16 new patients per month. Friendly community, outside Houston. Houston, Texas is one of the fastest growing metro areas in the U.S. The practice is located 20 miles from downtown Houston. Therefore making it the perfect combination of quaint neighborhood feel and easy access to the metro area. Additionally, the most diverse big city in the nation is also one of the most affordable. With a low cost of living and low taxes, the area is ideal for young families. Finally, if you're ready to learn more, email Kaile Vierstra with Professional Transition Strategies: kaile@professionaltransition.com or give us a call: (719) 694.8320. We look forward to hearing from you <https://professionaltransition.com/houston-tx-area-pediatric-practice-for-sale>.



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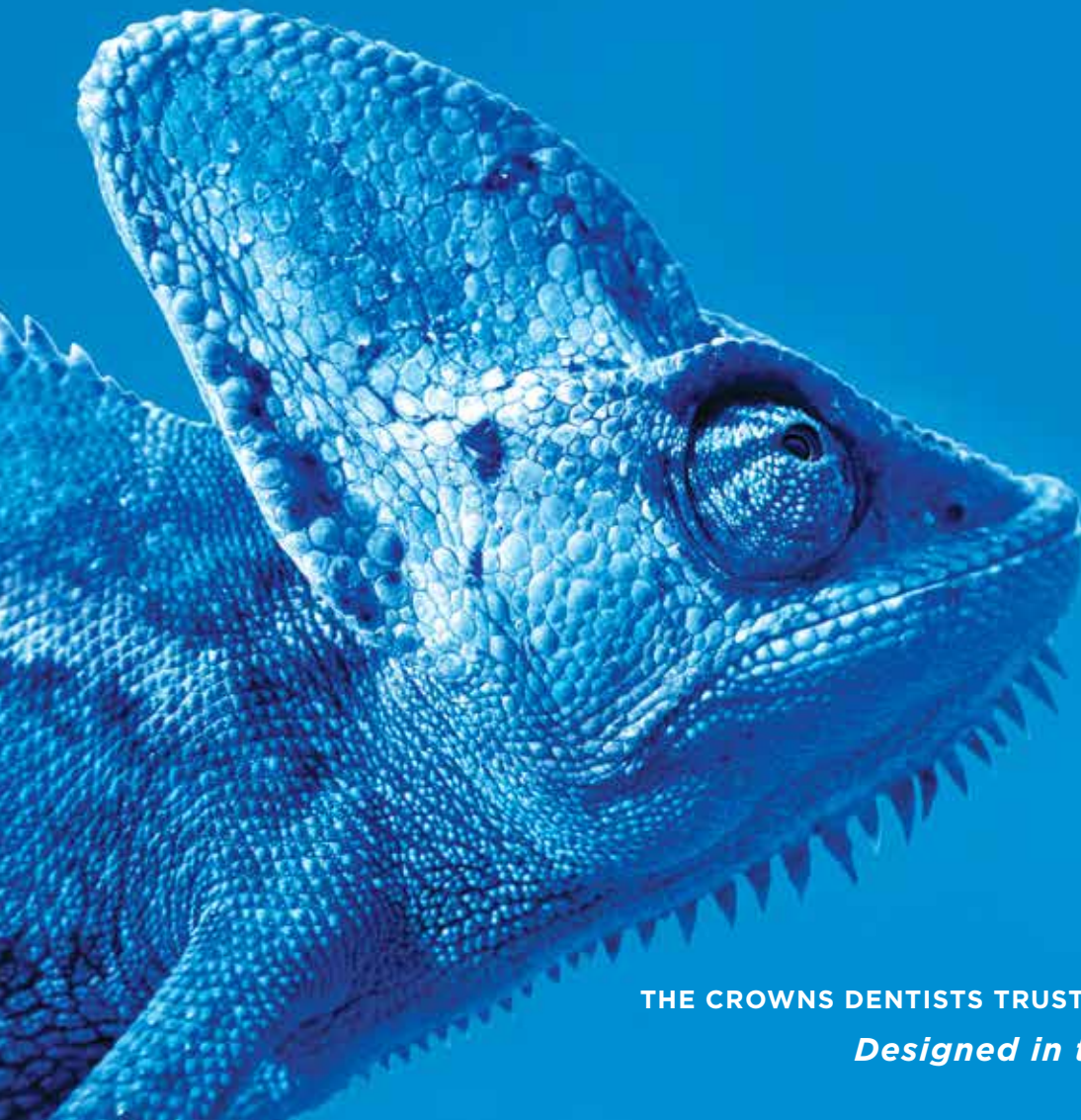
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