National Children’s Dental Health Month

Safety First

Safety at Home
Safety at School
Safety at the Dentist Office

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Practice Management and Marketing News

Revolutionize your Team in 2022 with Working Genius

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Meet the family.

Cheng Crowns’ roots date back to 1987, when our founder, Peter Cheng, developed a pre-veneered pediatric crown at his lab outside of Philadelphia. Cheng Crowns has been innovating—and earning dentists’ trust—ever since. In 2012, the company raised the bar for aesthetics and performance with Cheng Crowns Zirconia, and introduced Narrow Zirconia Posterior Crowns in 2018. Today, this family-owned company serves dentists around the globe. See why at ChengCrowns.com/PDT-1.
I believe the number one issue pediatric dentists are facing right now is staffing. While dentists are rebounding in their practices, getting used to new guidelines, scheduling differently and navigating access to operating rooms, the most stressful problem is finding the “right” employees. It has been more challenging than ever before.

Every business journal is reporting that all sectors of business are having employee hiring and retention problems, not just health care. There are so many factors contributing to this. Dental consultants are constantly trying to give advice on staff training and compensation.

There has been an upheaval in the workforce since the pandemic began. How do we keep our seasoned, trained, experienced employees during this unsure time with their own family and health concerns? This has given employees time to pause and re-evaluate their priorities. Then when we try to hire new staff, they tend to be young and have more demands on flexibility, compensation and their work/life balance.

I think we must always return to why we are pediatric dentists and our goals in treating patients. We are in a wonderful profession with the opportunity to change lives, help children educate families and improve their health. This huge task is so meaningful. We need to share our mission with possible employees to let them know how important the job is and how passionate we feel about it. As employees we must be creative to take care of our patients but in doing so take care of our staff.

Knowing we are not alone in restructuring our offices helps relieve our stress. Let’s continue these discussions when we meet in San Diego this May. We can empathize with each other and share successful ideas.

This annual session will celebrate our Diamond Anniversary as an association. In the early days of our Academy, members had to attend the Annual Session to maintain their membership. Now, we attend because we want to see our colleagues, learn the latest techniques, hear about the scientific discoveries and share our experiences. Let’s join our friends and know that we are in this together to help advance optimal oral health for all children.
Invisible Dental Support Organizations

(IDSOs) become your silent partner by purchasing 51% to 90% of your practice for cash now. You retain ownership at the practice and/or parent level and continue to lead your practice for years or decades with your brand, team and strategy.

**Big Opportunity for Great Doctors**

An IDSO will provide resources to help your practice grow bigger, better, faster. Support can include recruiting, marketing, lower costs and higher reimbursement rates. You are not micromanaged. The potential increase in value in your retained ownership can be stunning. Some doctors in 2021 achieved gains of 3x, 5x and even 10x+. You should understand this option.

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Large Practice Sales 2021 IDSO Transactions

<table>
<thead>
<tr>
<th>2021 RESULTS</th>
<th>$500+ MILLION DOLLARS</th>
<th>1.2x TO 4.6x</th>
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<tbody>
<tr>
<td>Value of transactions in 2021</td>
<td>Multiple of collections values achieved in 2021</td>
<td></td>
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<tr>
<th>18 U.S. States</th>
<th>Largest Transaction</th>
<th>$9.8M Avg.</th>
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<tbody>
<tr>
<td>24 IDSOs</td>
<td>$64M</td>
<td>Average value of transactions in 2021</td>
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<tr>
<td>$1.2M</td>
<td>Smallest transaction in 2021</td>
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</tbody>
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*I had two offers directly from DSOs, then contacted LPS. They got me six bids, and miraculously, one of the first groups to approach me increased their offer by $2,000,000! LPS then handled the details of closing, and I can’t imagine doing a deal without their help. I paid them nothing until the deal was closed.*

-Dr. J.P., Southeast U.S.

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Contact LPS for a no cost, no obligation analysis of the value of your practice to an Invisible Dental Support Organization.
Pediatric Dentistry and the 2021 ADA House of Delegates

by Dr. John S. Rutkauskas      AAPD CEO

In preparation for the American Dental Association (ADA) 2021 Annual Session this past October, the AAPD reviewed resolutions of interest to pediatric dentistry being considered by the ADA House of Delegates. We communicated the AAPD’s positions to AAPD member delegates and alternates and submitted written testimony to ADA Reference Committees on the select resolutions—augmented by in-person testimony from AAPD President Dr. Jeannie Beauchamp. All of the resolutions listed below were supported by the AAPD and adopted by the ADA House of Delegates.

**Resolution 3H – Proposed Policy, Anesthesia Coverage Under Health Plans**

**Resolved**, that the following policy titled Anesthesia Coverage Under Health Plans be adopted:

**Anesthesia Coverage Under Health Plans**

**Resolved**, the ADA supports the position that all health plans, including those governed by the Employee Retirement Income Security Act, should be required to cover general anesthesia and/or hospital or outpatient surgical charges incurred by covered persons who receive dental treatment under anesthesia, due to a documented complexity, behavioral, physical, mental or medical reason as determined by the treating dentist(s) and/or physician, and be it further.

**Resolved**, that the policy titled ERISA Reform (Trans.1998:738) be rescinded.

**Resolution 9H – Amendment of the Policy, Fee-for-Service Medicaid Programs**

**Resolved**, that the policy titled Fee-For-Service Medicaid Programs (Trans.1999:957) be amended to read as follows (additions are underscored; deletions are stricken):

**Resolved**, that the ADA support and encourage states to states should adopt adequately funded fee-for-service models for Medicaid programs to increase dentist participation and increase access to care for Medicaid participants.

**Resolution 10H – Amendment of the Policy, Medicaid and Indigent Care Funding**

**Resolved**, that the policy titled Medicaid and Indigent Care Funding (Trans.2006:338; 2014:499) be amended to read as follows (additions are underscored; deletions are stricken):

**Resolved**, that the ADA make lobbying for adequate funds American Dental Association supports adequate funding to provide oral health care to Medicaid and other indigent care populations a high priority and that the constituent and component societies be urged to do the same, and be it further.

**Resolved**, that the ADA and its constituent societies carry out an intensive educational program, subject to budgetary limits, to enlighten the public and government agencies of the value of oral health care and the consequences of untreated oral health disease to the overall health of our citizens and to health care payment systems, and be it further.
Resolved, that the appropriate ADA agency study how to improve health outcomes through greater accountability and responsibility of dental patients to the care, educational and preventive opportunities provided to them.

Resolution 27H – Amendment to the Policy, Support for Adult Medicaid Dental Services

Resolved, that the policy titled Support for Adult Medicaid Dental Services (Trans.2004:327) be amended to read as follows (additions are underscored; deletions are stricken):

Resolved, that the ADA adopt policy supporting the inclusion of adult dental services should be included in the federal Medicaid program as an integral part of overall health, and be it further.

Resolved, that the ADA take every opportunity to educate policy makers that, consistent with ADA's position on health system reform (Trans.1993:664; Trans.1994:656) oral health is an integral part of overall health, and be it further.

Resolved, that adult coverage under Medicaid should not be left to the discretion of individual states but rather, should be provided consistent with all other basic health care services.

Resolution 36H – Proposed Policy, Support for the American Academy of Pediatric Dentistry Policy on Early Childhood Caries

Resolved, that the following policy titled Support for the American Academy of Pediatric Dentistry Policy on Early Childhood Caries be adopted:

Support for the American Academy of Pediatric Dentistry Policy on Early Childhood Caries

Resolved, that the American Dental Association supports the Policy Statement of the American Academy of Pediatric Dentistry (AAPD) on Early Childhood Caries (2021):

The AAPD recognizes the unique and often virulent nature of ECC. Non-dental health care providers who identify ECC in a child should refer the patient to a dentist for treatment and establishment of a dental home (AAPD Dental home) immediate intervention is indicated, and non-surgical interventions should be implemented when possible to postpone or reduce the need for surgical treatment approaches. Because children who experience ECC are at greater risk for subsequent caries development, preventive measures (e.g., dietary counseling, reinforcement of toothbrushing with fluoridated toothpaste), more frequent professional visits with applications of topical fluoride, and restorative care are necessary.

Resolution 49H – Proposed Policy: Patients with Special Needs

Resolved, that the following policy be adopted:

Patients with Special Needs

The dental profession’s continued ability to effectively provide dental care for America’s special needs population is dependent on sustaining a strong educational foundation in this area. The ADA encourages efforts to maintain and expand the availability of courses and programs at the predoctoral, advanced and continuing educational levels that support practitioners in providing dental treatment to patients whose medical, physical, psychological, cognitive or social situations make it necessary to consider a wide range of assessment and care options. These individuals include, but are not limited to, people with developmental disabilities, cognitive impairment, complex medical problems, significant physical limitations, and the vulnerable elderly. The ADA encourages dental practitioners to regularly participate in continuing education in this area.


[editorially corrected by speaker at AAPD’s request to insert recommendation 2 that was inadvertently deleted in the original resolution]

Resolved, that the following policy titled Support for the American Academy of Pediatric Dentistry Guideline on Perinatal and Infant Oral Health Care be adopted:

Support for the American Academy of Pediatric Dentistry Guideline on Perinatal and Infant Oral Health Care

Resolved, that the American Dental Association supports the American Academy of Pediatric Dentistry Anticipatory Guideline on Perinatal and Infant Oral Health Care (2021):

Anticipatory guidance in the perinatal and infant period includes assessment of any growth and development issues that the parents should be aware of or need referral to the child’s medical provider. AAPD BP Periodicity Schedule Assessment of caries risk that should be considered in counselling the parents regarding the child’s fluoride exposure, including consumption optimally fluoridated water, appropriate frequency and quantity of brushing with fluoridated toothpaste, and need for professional topical fluoride applications. (AAPD BP Fluoride) Anticipatory guidance during this infant period also entails oral hygiene instruction, dietary counselling regarding sugar consumption, frequency of periodic oral examinations (AAPD Periodicity Schedule), and information regarding non-nutritive habits that if prolonged may result in flaring of the 30 maxillary incisor teeth, open bite, and a posterior cross bite. (Dogramaci and Rossi-Fedele, 2016). Counselling regarding safety and prevention of orofacial trauma would include discussions of play objects, pacifiers, car seats, electrical cords, and injuries due to falls when learning to walk.
Recommendations

1. Advise expecting and new parents regarding the importance of their own oral health and the possible transmission of cariogenic bacteria from parent/pri-
mary caregiver to the infant.

2. Encourage establishment of a dental home that includes medical history, dental examination, risk as-
essment, and anticipatory guidance for infants by 12 months of age.

3. Provide caries preventive information regarding: high frequency sugar consumption; brushing twice-daily with optimal amount fluoridated toothpaste; safety and efficacy of optimally-fluoridated community water; and for children at risk for dental caries, fluoride varnish and dietary fluoride supplements (if not consuming optimally-fluoridated water).

4. Assess caries risk to facilitate the appropriate preventive strategies as the primary dentition begins to erupt.

5. Provide information to parents regarding common oral conditions in newborns and infants, non-nutritive oral habits (e.g., digit sucking, use of a pacifier), teething (including use of analgesics and avoidance of topical anesthetics), growth and development, and orofacial trauma (including play objects, pacifiers, car seats, elec-
tric cords, and falls when learning to walk).

6. When ankyloglossia results in functional limitations or causes symptom, the need to surgical intervention should be assessed on an individual basis.

7. When a patient presents with a prematurely erupted primary tooth (i.e., natal or neonatal tooth), decisions regarding intervention should be individualized, based on the interference with feeding, the risk of detach-
ment and aspiration, and any medical or contributing considerations.

Resolution 58H – Proposed Policy, Oral Health Equity

Resolved, that the American Dental Association (ADA) defines oral health equity as optimal oral health for all people. The ADA is committed to promoting equity in oral health care by continuing research and data collection, advocating to posi-
tively impact the social determinants of oral health, reinforcing the integral role of oral health in overall health, supporting cultural competency and diversity in dental treatment, disease prevention education, and supporting efforts to improve equi-
table access to oral health care.

Resolution 63H – Proposed Policy for the Elimination of Wait Periods for Children in Dental Benefit Plans

Resolved, that the American Dental Association supports the elimination of wait periods for treatment, including orthodontic treatment, for children from dental benefit plans.

Resolution 64H – Amendment of the Policy Statement on Intraoral/Perioral Piercing and Tongue Splitting

ADA Policy Statement on Intraoral/Perioral Piercing, Tooth Gems/Jewelry and Tongue Splitting (additions are underscored; deletions are stricken):

Resolved, that the American Dental Association advises against the practices of cosmetic intraoral/perioral piercing, tooth gems/jewelry, and tongue splitting, and views these as invasive procedures due to the increased risk of negative health outcomes, sequelae that outweigh any potential benefit.

Resolution 74H – Proposed Policy, Dental Benefits within the Affordable Care Act Marketplace and a Public Option

Resolved, that within the Marketplaces established by the Affordable Care Act:

• Dental coverage should be available to consumers through Stand Alone Dental Plans.

• Diagnostic and preventive dental services embedded within Qualified Health Plans should be covered without any additional co-payment, co-insurance or deductibles.

• Dental care is essential across the individual’s life span.

• Individuals seeking to purchase benefits in the Marketplaces must be able to purchase dental benefits without having to first purchase a medical plan.

• Plan designs should remain flexible and offer consumers adequate choices balancing cost and benefit value.

• Dental Plans offered in the Marketplaces must be required to transparently report Dental Loss Ratios (DLR).

• Cost sharing assistance or premium tax credits should be available to consumers purchasing dental plans.

and be it further

Resolved, that if a public option plan that includes pediatric or adult dental benefit plans were introduced within the Marketplaces established by the Affordable Care Act, then such plans should:

• Allow freedom of choice for patients to seek care from any dentist while continuing to receive the full program benefit.

• Not force any providers, including those already participat-
ing in existing public programs, to join a Marketplace plan network and instead should support fair market competi-
tion, including meaningful negotiation of contracts and annual adjustment of fee schedules.

• Only include minimal and reasonable administrative re-
quirements to promote participation and provide mean-
ingful access.
Resolution 82H – Proposed Policy: A Culture of Safety in Dentistry-Voluntary Reporting

Resolved, that the American Dental Association acknowledges the value of self-reporting dental patient safety issues to a certified Patient Safety Organization that complies with the Patient Safety Rule of the Department of Health and Human Services, as critical to our professional responsibility for education and self-regulation, and be it further

Resolved, the American Dental Association encourages the voluntary reporting of near misses and adverse incidents to the Dental Patient Safety Foundation in an anonymous and non-discoverable manner, and be it further

Resolved, that the American Dental Association utilizes submitted reports to develop and report on improved safety measures for the profession of dentistry.

Resolution 83H – Establishment of a Medicaid Task Force

Resolved, that a Task Force meet virtually and develop a cohesive and broad-reaching strategy for federal and state Medicaid and Children’s Health Insurance Program advocacy to reduce Administrative burdens and create sustainable reimbursement for participating dentists. Issues addressed should include, but not be limited to:

- Credentialing
- Funding and reasonable reimbursement
- Benefit design and administration
- Appropriate auditing practices
- Coordination when multiple state program administrators exist
- Managed care design and implementation
- Requirements for stakeholder involvement
- Best practices and model programs to use as benefit and policy benchmarks

and be it further

Resolved, that the Task Force be comprised of representation from the Board of Trustees, Council on Dental Benefit Programs, Council on Government Affairs, Council on Advocacy for Access and Prevention, at-large Delegates or Alternate Delegates of the 2021 House of Delegates, with Medicaid provider experience when possible, and state dental association staff with public program advocacy experience, with such representatives and the task force chair appointed by the ADA President, and be it further.

Resolved, the advocacy strategy should include policy actions that the ADA and state advocates can pursue at the federal and state level, including adequate ADA public affairs support to ensure successful outcomes, and be it further.

Resolved, that the Task Force shall report its recommendations to the 2022 ADA House of Delegates.

Resolution 95H – Prioritizing the Mental Health of Dentists

Resolved, that the appropriate agency of the ADA, in conjunction with mental health consultants, analyze the availability of resources to support the mental health of dentists, and collect information regarding existing health and wellness programs from across the tripartite and other professional organizations including, but not limited to the American Medical Association, the American Student Dental Association, and the New Dentist Committee.

and be it further

Resolved, that the ADA then use the collected information to:

- Explore partnering with third-party mental health providers for our membership;
- Analyze the existing well-being conference for potential enhancement;
- Create a toolkit to help prevent dentist suicide, including a guide for responding to a suicide or unexpected death; and recommendations for practice coverage for short-term and long-term absences due to mental illness and permanent absence due to suicide or unexpected death;
- And identify best practices, then consider the creation of an effective mental health and wellness campaign for our members.

and be it further

Resolved, that ADA explore safeguarding dentists from punitive action by state dental boards as well as third party credentialing; with regard to mental health issues and report back to the 2022 House of Delegates with an actionable plan.
AAPD Member Delegates and Alternates

We thank those AAPD members who served in the 2021 ADA House of Delegates:

1st District (Conn., Maine, Mass., N.H., R.I., Vt.)

Delegates
Neha Das (Pittsfield, Mass.)
Annemarie DeLessio-Matta (Southbury, Conn.)
John Kiang (Providence, R.I.)
Alternates
Maritza Morell (Andover, Mass.)
Steven K. Rayes (Norwich, Vt.)

2nd District (N.Y.)

Delegates
Loren C. Baim (affiliate member) (Glen Falls, N.Y.)
Margaret Madonian (Liverpool, N.Y.)
Ioanna G. Mentzelopoulos (New York, N.Y.)
Alternate
Joseph Brofsky (Woodmere, N.Y.)

3rd District (Pa.)

Delegate
Marian S. Wolford (Erie, Pa.)

4th District (Air Force, Army, Del., D.C., Md., Navy, N.J., PHS, P.R., Veterans Affairs, Virgin Islands)

Delegates
Sonia A. Taylor-Griffith (St. Thomas, V.I.)
Mark A. Vitale (Edison, N.J.)
Alternate
Rachel A. Maher (Wilmington, Del.)
Jason P. Rosenfeld (Butler, N.J.)
Elisa J. Velazquez (Toms River, N.J.)

5th District (Ala., Ga., Miss.)

Delegate
James I. Lopez (Columbus, Ga.)
Alternate
Robert David Bradberry (Marietta, Ga.)
Lauren B. Moore (Mobile, Ala.)
Ryan M. Vaughn (Gainesville, Ga.)

6th District (Ky., Mo., Tenn., W. Va.)

Delegate
Rhonda Dawn Switzer-Nadasdi (Nashville, Tenn.)

7th District (Ind., Ohio)

Alternates
Kari A. Cunningham (Euclid, Ohio)
Daniel M. Gindi (Macedonia, Ohio)

8th District (Ill.)

Delegates
Cissy K. Furusho (Lincolnwood, Ill.)
Kenneth G. Rawson (O’Fallon, Ill.)
Alternate
Sharon J. Perlman (affiliate member) (Chicago, Ill.)

9th District (Mich., Wisc.)

Delegate
Clifford R. Hartmann (New Berlin, Wisc.)
Alternate
Naila S. Farooq (Commerce Township, Mich.)
Tommy Lau (predoctoral member) (Ann Arbor, Mich.)

10th District (Iowa, Minn., Neb., N.D., S.D.)

Delegates
James D. Nickman (North Oaks, Minn.)
Aruna S. Rao (Minneapolis, Minn.)

11th District (Alaska, Idaho, Mont., Ore., Wash.)

Delegates
Christopher Delecki (affiliate member) (Kirkland, Wash.)
Jane Gillette (affiliate member) (Bozeman, Mont.)
Bernard J. Larson (Mount Vernon, Wash.)
Alternate
Jessica Blanco (Juneau, Alaska)
John L. Gibbons (Silverdale, Wash.)
Mark D. Mutschler (Oregon City, Ore.)

12th District (Ark., Kansas, La., Okla.)

Delegates
Timothy R. Fagan (Enid, Okla.)
Christopher Paul Fagan (Enid, Okla.)
Jill Jenkins (Shawnee, Kansas)
Alternate
John T. Fales, Jr. (Olathe, Kansas)
Nick Rogers (affiliate member) (Arkansas City, Kansas)

13th District (Calif.)

Delegates
Paul Ayson (affiliate member) (Visalia, Calif.)
John L. Blake (affiliate member) (Long Beach, Calif.)
Lindsey A. Robinson (Grass Valley, Calif.)
Erin Shah (San Francisco, Calif.)

14th District (Ariz., Colo., Hawaii, Nev., N.M., Utah., Wyo.)

Delegates
Karen D. Foster (Greenwood Village, Colo.)
Jeffrey A. Kahl (Colorado Springs, Colo.)
Kirk J. Robertson (Flagstaff, Ariz.)
Alternate
Christopher C. Lee (Honolulu, Hawaii)
Jessica L. Robertson (Flagstaff, Ariz.)

15th District (Texas)

Delegates
Charles W. Miller (Arlington, Texas)
Rita M. Cammarata (Houston, Texas)

16th District (N.C., S.C., Va.)

Delegates
Scott W. Cashion (Greensboro, N.C.)
Roslyn M. Crisp (Burlington, N.C.)
Alternate
Shamik S. Vakil (Charlotte, N.C.)

17th District (Fla.)

Delegates
Natalie Carr-Bustillo (Riverview, Fla.)
Michael W. Stratton (Orange Park, Fla.)
Alternate
Stephen D. Cochran (Jacksonville, Fla.)
Casey Lynn (Apollo Beach, Fla.)
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National Working Moms Day is March 12

Let’s face it, moms have typically shouldered the bulk of the responsibility when it comes to ensuring their kids receive the routine (and not so routine) health care they need. For working moms, that responsibility can sometimes be difficult to manage when balancing their work schedules with the schedules of care providers.

While many employers recognize the demands placed upon working moms and have implemented policies and programs that allow women with children to flex their schedules, not all working women are so fortunate. The result is that some women, especially single moms employed in hourly roles, such as allied healthcare, hospitality, or food service positions have to make the difficult choice about whether or not to take time off to take their kids to appointments. The result is that for these kids, routine care such as preventative dental care, gets put off, or missed altogether.

The AAPD Foundation is committed to eliminating the barriers that prevent kids from receiving the dental care they need and deserve. By providing grants to pediatric dentists and clinics the Foundation increases the likelihood that all kids can receive high quality, compassionate, and convenient dental care at an office, at their school, or at community health fairs.

By giving to the AAPD Foundation, you are helping working moms gain much needed access to care and services they otherwise may not have been able to achieve for their kids. The AAPD Foundation does not rely upon membership dues to fund its access to care mission. Instead, the Foundation operates solely upon charitable contributions from AAPD members, the public, corporate sponsors, and other grant making organizations.

When you give to the AAPD Foundation, one hundred percent of your gift directly benefits a child. Your generosity makes a lasting difference in the life of a child, and makes an immediate impact on working moms by making it just a little bit easier for them to provide their little ones with the routine and special dental care they need.

Thank you for supporting kids and their working moms on March 12th by making a special gift to the AAPD Foundation. Donations can be made online at www.AAPDFoundation.org or by calling us at (312) 337-2169, ext. 22.

On behalf of working moms, AAPD grantees, and the children whose lives they touch through your generosity, thank you!

From the President

As dental professionals, we know that parental involvement is key to helping kids establish healthy oral care habits that last a lifetime.

As a pediatric dentist I’m inspired by working moms who balance the many demands of family life with their work life. I’m often impressed by the lengths working mom’s go to, to get their kids the dental care they need.

I’m also blessed to have many mom’s working in my own practice. Not only do they somehow make it all work for their own kids, the compassionate care they provide to my patients makes it easier for kids and parents to want to commit to optimal oral health.

National Working Mom’s Day affords us a unique opportunity to reflect on the difference these remarkable women make in the lives of their own children, and in the lives of our patients. Is there a particular colleague or member of your team who balances it all effortlessly? Honor her by making a gift to the AAPD Foundation and sharing her story. Use the QR code below to go right to the AAPD Foundation website. Use the what brought you to give dropdown menu and select National Working Mom’s Day, then in the comments section tell us who you honored with your gift and why. Email a picture to bdewitt@aapdfoundation.org and we’ll feature it on our website and social media channels. It’s fast, easy, and when you do, one hundred percent of the gift you make in her name will benefit a child.

Thank you for your support!

Dr. Charles S. Czerepak
AAPD Foundation
President
The AAPD Foundation Invests $1.6 Million to Sustain Pediatric Oral Health Care Access During COVID Pandemic

Your foundation, the American Academy of Pediatric Dentistry Foundation, is focused on giving every child a dental home, regardless of their parents’ or guardians’ ability to pay. We fund community-based initiatives focusing on a wide array of educational programs and clinical services that teach children and their families about the importance of good oral health care, and encourage consistent, regularly scheduled appointments for cleanings and exams to prevent tooth decay.

Since 2010, AAPD Foundation has awarded more than $6.5 million in grants and commitments to 139 organizations in 34 states and the District of Columbia, serving over 573,000 children. Last year, 26,676 children received pediatric dental services, who might not otherwise have been able to gain access to such care.

In addition to providing funding for critical access to care programs and services, the AAPD Foundation strives to support members of the American Academy of Pediatric Dentistry (AAPD). During the pandemic many members donated their own PPE materials to frontline workers. To help members get back to the business of caring for kids, the AAPD Foundation invested $1.6 million in marketing and outreach initiatives, including providing 4,200 AAPD members with KN95 masks to help ease their PPE burden.

As a nonprofit organization separate from the American Academy of Pediatric Dentistry, our capacity to fulfill our shared mission of optimal oral health for children does not stem from membership dues. Instead, we rely upon contributions from members like you, the public, and grants and corporate support to fund programs that ensure access to care for kids most in need.

May we count on your help in 2022 to ensure the best possible outcomes for kids? Please consider supporting the AAPD Foundation as a donor or volunteer today!

Sincerely,

Stefanie Dziedzic, M.S.
Director of Development
Not to Miss During AAPD 2022

Preconference Course
Diagnosis and Management of Dental Trauma in Children and Adolescents  PD, DT
Thursday, May 26
8:30 AM – 4 PM

This exciting session will offer busy clinicians an update on the current concepts and innovative approaches in diagnosis, management and treatment of dental trauma in children and adolescents. The format will feature a review of up-to-date fundamentals and emerging approaches most to be illustrated by case reviews. Hear from a group of internationally recognized expert speakers in dental trauma. Using the best evidence, we will discuss avulsion therapy from A to Z and bring participants up-to-speed with new concepts in avulsion care. The concept of decoronation and pulp regeneration will be presented and illustrated with clinical cases. Participants will also learn the best operative and orthodontics techniques to achieve optimal esthetic results. Be sure to plan on staying for the afternoon when the exciting area of tooth autotransplantation in children will be presented.

Upon completion of this course, attendees will be able to:
- Up-to-date science in the area of diagnosis for the permanent tooth in children and adolescents.
- Fundamentals of pulp regeneration.
- How and when to perform decoronation.
- Operative and orthodontics techniques to achieve optimal esthetic results.
- The emerging area of tooth autotransplantation.

Opening Ceremony and Keynote Address*  PD, DT, S
Ben Nemtin
Friday, May 27
7:30 – 9 AM

Ben Nemtin is the #1 New York Times bestselling author of “What Do You Want to Do Before You Die?” and a star of MTV’s highest rated show ever on iTunes and Amazon called The Buried Life. As the co-founder of The Buried Life movement, Ben’s message of radical possibility has been featured on The Today Show, The Oprah Winfrey Show, CNN, FOX, and NBC News. President Obama called Ben and The Buried Life “inspiration for a new generation” and Oprah declared their mission “truly inspiring.” An acclaimed keynote speaker, Nemtin has headlined business conferences and Fortune 100 leadership teams around the world, garnering standing ovations from AIG, Anthem, Amazon, FedEx, Harvard, Microsoft, Verizon, and more. Nemtin is recognized as one of the World’s Best Motivational Speakers as well as World’s Top Organization Culture Thought Leaders by Global Gurus (2019, 2020).

In his first year at college, he was unexpectedly hit with a depression that forced him to drop out. In an attempt to feel more alive, he created the world’s greatest bucket list with his three best friends. They borrowed a rickety old RV and crisscrossed North America, achieving the unthinkable. And most importantly, every time they accomplished a dream, they helped a complete stranger cross something off their bucket list. From playing basketball with President Obama to having a beer with Prince Harry, from reuniting a father and son after seventeen years to surprising a young girl with a much-needed bionic arm—Nemtin’s bucket list quest has inspired millions to thrive personally and professionally.

*You must be registered and have a badge to access the Opening Ceremony and Keynote Address.
Explore the Exhibit Hall

Enhance your time in the Exhibit Hall at AAPD 2022

**D4C Activation Station**
Be sure to check out one of the new hotspots in the Exhibit Hall, the D4C Activation Station. This highly energetic area will have a new activation every two-three hours. You won’t want to miss the fun activities and entertainment in this area!

**Elevate Oral Care Headshot Lounge**
Looking for a website headshot or LinkedIn profile refresh? Look no further than the Elevate Oral Care Headshot Lounge in the Exhibit Hall. We will have professional photographers there taking photos throughout the day.

**Podcast Studio**
New this year our extremely popular podcasts, Pedo Teeth Talk and Newly Erupted will have their very own recording studio in the Exhibit Hall. Check out the podcast studio and witness the magic of the podcasts led by our host Dr. Joel Berg.

**Sprig Walking Challenge**
The Sprig Walking Challenge is a great way to stay active during AAPD 2022. Take advantage of sunny San Diego while participating in this fun challenge with awesome prizes. More details will be available in regards to downloading the app and participating in the challenge. Be sure to have your walking shoes packed for the Sprig Walking Challenge during AAPD 2022!

Make sure to visit the AAPD Store and get your 75th Anniversary memorabilia!
Registration Information

Please review the following information to avoid delays in the processing of your registration or housing request.

*Times are indicated in Pacific Time

Who Needs to Register
Anyone (member or non-member dentist, dentists’ staff or dental student/resident) who wants to attend any portion of the Scientific Program or Opening Session and Keynote Address must register. All registration categories for AAPD 2022 include all education sessions (except those specified), complimentary beverages in exhibit hall and the Scientific Sessions. The guest registration is additional and must accompany that of an attendee; children are complimentary to the meeting but tickets must be purchased for Social Events. Guests do NOT earn any continuing education credit; if seeking CE Credits, spouses/guests must register as Office Staff.

Tickets to the Welcome Reception, President’s Reception for Dr. Kevin Donly and Dr. Jessica Lee, and President’s Farewell Dinner are an additional fee and must be purchased separately; see the Social Events section for more information.

Additional tickets to all Social Events must be purchased during registration; onsite tickets for these functions may be limited and are subject to availability.

The cutoff for the advance fee is Friday, April 1, 2022.

Note: To receive the member registration rate for the 2022 Annual Session, your 2021-2022 membership dues must be paid in full.

Residents
- Registration is complimentary if Students/Residents register on or before April 1, 2022.
- Students/Residents registering after April 1, 2022, or onsite are charged $150 in registration fees; no exceptions will be made.
- Students/Residents must purchase a ticket to the Welcome Reception. Visit the Social Events page when registering to purchase your ticket.
- Residents are encouraged to attend the Early Career Dentist Happy Hour on Thursday, May 26. Visit the Social Events page when registering to purchase tickets.
- Registration and poster submission are separate. Submitting a poster does NOT register you for AAPD 2022.

Registration Methods
Registrations are processed on a first-come, first-served basis. Registration must be done online or over the phone.

Online: annual.aapd.org
Phone: (864) 208-2617

Credit card only, no checks. Allow five days for processing and receipt of registration confirmation.

Registration Hours
Please pick up your badge and materials at Registration. Registration is available during the following locations/days/times:

San Diego Convention Center—Main Registration
On the Upper level in the Ballroom 6 lobby

Thursday, May 26
7 AM – 7 PM

Friday, May 27
7 AM – 7 PM

Saturday, May 28
8 AM – 5 PM

Sunday, May 29
8 AM – 12 PM

Questions
If you have any questions regarding registration or housing, contact AAPD Registration and Housing Service Center at (864) 208-2617 or visit annual.aapd.org for more information.
Registration Instructions
• Attendees must be registered for AAPD 2022 in order to make hotel reservations within the AAPD hotel block.
• Most educational sessions do not require tickets. Seating is on a first-come, first-served basis. Many optional sessions, activities and events require additional fees and must be indicated online when you register; applicable tickets will be included in your meeting materials.
• The Preconference Course, Learning Labs, PALS, BLS, PEARS and Evidence-Based Dentistry Workshop require additional fees.
• Registration forms must be submitted on or before April 1, 2022, to qualify for the discounted fees. Registrations received after April 1, 2022, will be automatically charged the higher registration fees.

Cancellation and Refund Policy
• All cancellations postmarked on or before May 1, 2022, will be refunded less a $150 processing fee ($50 for office staff and guests).
• All cancellation requests must be made in writing to AAPD Registration and Housing Services for processing on or before May 1, 2022.
• No refunds will be given after May 1, 2022. After this date, any extenuating circumstances must be submitted in writing to the AAPD c/o Vice President of Meetings & Continuing Education, Kristi Casale, at 211 E. Chicago Avenue, Suite 1600, Chicago, IL 60611. Approved refunds are processed after the Annual Session.
• Refunds are not granted for no-shows.

Registration Confirmation
Every effort is made to provide all advance registrants with a confirmation of their registration. This notice will verify whether we received your registration prior to the deadline, and if the tickets requested will be issued.

Name Badges
Name badges must be worn at all times by all registered attendees, including children, in order to gain access to any portion of the Scientific Program, Welcome Reception, access to the Exhibit Hall, hospitality areas and all social events.
Children’s badges are provided without charge up to the age of 20; their names and ages must be listed on the registration form.

Housing Information
Please read this information carefully. You must register for AAPD 2022 prior to booking your hotel reservation. All housing reservations must be made through the AAPD Registration and Housing Service Center.

Housing Reservation Methods
Online: annual.aapd.org
Credit card only. Allow 7-10 days for processing and receipt of registration confirmation.

Reservation Deadline
• All housing requests must be submitted by Tuesday, May 3, 2022, by 5 p.m. CST in order to receive the AAPD discounted room rate. Starting Monday, May 9, 2022, you may contact the hotels directly with reservation changes.
• Housing Information and Change/ Cancellation Policies
• Reservations are processed on a first-come, first-served basis.
• All reservations require a credit card guarantee and will only be charged if you fail to arrive on your scheduled arrival date or cancel after the stated cancellation policy indicated on your confirmation.
• Acknowledgement of reservation request is sent after each reservation is processed, as well as, each time a reservation is modified/changed and or cancelled. Please review acknowledgements carefully for accuracy. If you do not receive an acknowledgement within 14 days of submission, please call AAPD Registration and Housing Services Center at (864) 208-2617.
• All hotel room rates are subject to applicable state and local taxes in effect at the time of check-in.
• AAPD discounted room rates are applicable May 25 – May 29, 2022, subject to availability.
• Changes must be made on or before Tuesday, May 3, 2022, at 5 p.m. CST and online by accessing your registration/housing record or in writing via e-mail to aapd@maritz.com
• All cancellations must be received a minimum of 72 hours prior to arrival in order to receive a refund of your deposit. No refunds will be given for cancellations within 72 hours of arrival or for no shows.
• A portion of the room rate is used to offset the expense of registration and housing services.

Hotel Block
The Marriott Marquis San Diego Marina - Headquarters
Run of House: $291
Manchester Grand Hyatt
Run of House: $289
Omni San Diego Hotel
Run of House: $285
Rates are subject to additional fees for additional occupants and the current occupancy tax of 10.5%, San Diego Tourism Marketing District tax and $.77 Commerce Fee per room night. Tax rates are subject to change without notice.
Social & Networking Events

Early Career Dentist Happy Hour*
Thursday, May 26
5 – 7 PM
The Deck and Moonshine Flats
Sponsored by Treloar & Heisel and Medical Protective

Come on down for AAPD’s Early Career Dentist Happy Hour at The Deck and Moonshine Flats! Try your luck at some backyard games as you network and sip on local craft beer and delicious, moonshine-based cocktails. The Deck and Moonshine Flats are located in San Diego’s East Village neighborhood, a cultural hub for eating, drinking, listening, and shopping!

AAPD & AAPD Foundation Welcome Reception*
Friday, May 27
7:30 – 10:30 PM
AAPD Block Party in the Gaslamp Quarter
Sponsored by AAPD Foundation

The Historic Gaslamp Quarter will be the perfect setting for an enchanting evening filled with live music, themed characters, exciting games, interactive activities, and delicious local food and beverage. You and your guests will be able to spread your wings to network as you move through the various venues, restaurants, and shops in the Quarter. Historic charm and traditional accents will mix with whimsical lighting and larger-than-life themed décor to create a one-of-a-kind immersive experience. You won’t want to miss this magical event where the Tooth Fairies earn their wings!

The Kids Zone will boast interactive games with prizes, character photo ops, specialty snacks, and hands-on crafts.

To allow for a truly unique experience, AAPD will have exclusive access to a special portion of the Historic Gaslamp Quarter. Security will be on hand at each entry point to ensure a private AAPD event. Please stop by registration to pick up your wristband! A custom map will be distributed at the entrance showcasing the various restaurants and shops, entertainment, food, and beverage.

Career Fair
Saturday, May 28
3 – 5 PM

The Career Fair is a great opportunity for a new pediatric dentist seeking their first practice position or the more experienced dentist who is looking for a change to network with hiring organizations.

For more information on exhibiting or more info on the Career Fair, visit http://annual.aapd.org. The cost for AAPD Members is $150; recruitment companies may exhibit at the price of $500.

International Reception
Saturday, May 28
5:30 – 7:30 PM

This reception began in 2010 at the Annual Session and has continued to be a popular event for international members and attendees. Join members of the AAPD board of trustees, learn more about the AAPD, and network with fellow international attendees before enjoying your evening in San Diego.
President’s Reception to Celebrate Dr. Kevin Donly and Dr. Jessica Lee*

Sunday, May 29
6 – 7:30 PM
The Float at Coasterra
Sponsored by Align Technology

Come raise a glass to the AAPD presidents whose finales were celebrated virtually. We couldn’t let the opportunity pass to congratulate and thank our 2020 and 2021 presidents, Dr. Kevin Donly and Dr. Jessica Lee. This reception, immediately preceding the President’s Farewell, will take place on the Float at Coasterra with unobstructed views as we float in the middle of the harbor.

President’s Farewell Dinner*

Sunday, May 29
7:30 – 11 PM
Coasterra
Sponsored by Treloar & Heisel

Take in the beautiful San Diego skyline as you enjoy eclectic, coastal Mexican fair at Coasterra, San Diego’s premiere waterfront dining destination!

Floor-to-ceiling windows will set the scene and make guests feel like they’re floating in the San Diego Bay. As the sun sets, you will dine on extraordinary seafood, sip award-winning wine, and celebrate 75 years of AAPD success.

The party doesn’t stop after dinner—dance your way into the night under the glow of the moon bouncing off the bay!

*Ticketed Events

Early Career Dentist Happy Hour, Welcome Reception, President’s Reception, and President’s Farewell Dinner are ticketed events. Tickets must be purchased in advance when registering to attend AAPD 2022.

Council and Committee Meetings

Monday, May 23
12 – 5 PM
Executive Committee Meeting

Tuesday, May 24
8:30 AM – 5 PM
Board of Trustees Meeting

Wednesday, May 25
9:30 AM – 2:30 PM
Pediatric Oral Health Research & Policy Center

Thursday, May 26
8 AM – 12 PM
AAPD Foundation Board Meeting
8 AM – 5 PM
Pulp Therapy Workgroup

Friday, May 27
7 – 8:30 AM
Section Editors Meeting
9:30 AM – 12:30 PM
Council on Membership Communications Committee, Early Career Dentist Committee & Residents Committee
9:30 AM – 2:30 PM
Council on Clinical Affairs
12 – 4 PM
Council on Scientific Affairs
12:30 – 1:30 PM
Scientific Program Committee
12:30 – 2:30 PM
Council of Post-Doc Education
1:30 – 4:30 PM
Editorial Board Meeting
2:30 – 4:30 PM
Committee on Special Health Care Needs
4 – 5 PM
PAC Contributors Reception by Invitation Only

Saturday, May 28
7:30 – 9:30 AM
Council on Government Affairs, Pediatric Dental Medicaid and CHIP Advisory Committee
8:30 – 10:30 AM
Council on Pre-Doc Education
10:30 AM – 1 PM
Affiliate Advisory Committee/Caucus
10:30 AM – 12:30 PM
Committee on Sedation and Anesthesia
12 – 1 PM
PPA Luncheon by Invitation Only
1 – 3 PM
Post-doc Inservice Exam Committee
3 – 4 PM
Committee on Dental Benefit Programs

Sunday, May 29
7:30 – 9 AM
Board of Trustees Meeting
8:30 – 10 AM
Safety Committee Meeting
8:30 – 11:30 AM
Evidence Based Dentistry Committee
11:30 AM – 4 PM
Behavior Guidance Guideline Workgroup
12 – 4 PM
Board of Trustees Meeting
AAPD Nominations 2021

Scott W. Cashion
PRESIDENT-ELECT NOMINEE

Dr. Scott Cashion is a 1994 graduate of the University of North Carolina Adams School of Dentistry and finished his Residency and Masters in Pediatric Dentistry there in 1997. He is a board-certified pediatric dentist and a Diplomate of the American Board of Pediatric Dentistry. After 22 years in private practice in Greensboro, N.C., he sold his practice and joined the faculty at the University of North Carolina Adams School of Dentistry, Division of Pediatric and Public Health as an associate professor.

Cashion has served as a leader with the American Academy of Pediatric Dentistry (AAPD). He currently serves as the Vice President of the AAPD. In addition, he serves as the chair of the Pediatric Medicaid/CHIP Advisory committee and is Immediate Past President of the Medicaid/Medicare/CHIP Dental Services Association (MSDA). Cashion served on the Board of Trustees of the AAPD (2008-2011) and was Parliamentarian (2012-2013). In May of 2013 he was awarded the Merle C. Hunter Award for Leadership in the American Academy of Pediatric Dentistry.

Cashion currently serves as an ADA Delegate for the NC Delegation and has been a Delegate or Alternate Delegate since 2009. Cashion is a past president of the North Carolina Dental Society Foundation and current president of the North Carolina Services for Dentistry. In 2018, he completed his service on the ADA Council on Advocacy for Access and Prevention (CAAP, formerly CAPIR).

Cashion is past president of the North Carolina Dental Society (2015). He previously served on the Board of Trustees of the North Carolina Dental Society. Cashion is a member of the Guilford County Dental Society and served as president in 2005-2006. He was president of the North Carolina Third District Dental Society in 2004.

Cashion was awarded the North Carolina Dental Society’s Commendation Award in 2007. He is a fellow in the International College of Dentists, American College of Dentists and the Pierre Fauchard Academy.

Cashion is involved in the Greensboro Community and served on the Board of Habitat for Humanity, is active in his church and is a member of the Greensboro Sports Council. He is an avid runner and has ran three marathons.

Scott D. Smith
VICE PRESIDENT NOMINEE

Dr. Scott D. Smith received his D.D.S. from the University of Michigan in 1986, and his MS in pediatric dentistry in 1988. Upon completion of his Graduate and Post-Graduate studies at the University of Michigan, Dr. Smith and his wife Debbie moved to Denver, Colorado, to establish a private practice. He currently has offices in Denver and Centennial, Colorado. In addition to private practice, he is an Adjunct Assistant Clinical Instructor at both the University of Colorado and the University of Michigan, traveling back to Ann Arbor monthly.

Soon after arriving in Denver, he became involved in the Colorado Academy of Pediatric Dentistry and the Metro Denver Dental Society holding multiple offices with each group. In addition to being a founding member of the Rose Medical Center Cleft Lip and Palate/Craniofacial Anomalies Team, Dr. Smith has contributed to the Bright Futures Program with the American Academy of Pediatrics.

In 1996, Dr. Smith was appointed by the Governor of Colorado to the Colorado State Board of Dental Examiners and served as President of the Board from 2000-2004. During his tenure on the State Board he also served as an examiner for the Central Regional Dental Testing Service.

As a member of the AAPD, Dr. Smith has served on multiple Councils and Committees including Chair of Annual Session Local Arrangements Denver 2001, Council on Clinical Affairs Committee on Adolescent Health and the Council on Continuing Education. In June of 2017, he completed a three-year term on the AAPD Board of Trustees. In addition to Council and Committee Work, Dr. Smith has participated in the Leadership Institute at Kellogg and both cohorts of the Advanced Leadership Institute at Wharton.

Outside of his involvement in the AAPD, Dr. & Mrs. Smith enjoy an active Colorado lifestyle that includes skiing, cycling and fly fishing. Additionally, Dr. Smith plays ice hockey in an Adult Hockey League.
Dr. Thomas G. Ison is owner of a private practice in Newburgh, Ind. He received his dental degree and certificate in pediatric dentistry from the University of Kentucky College of Dentistry and Chandler Medical Center in Lexington, Ky., and completed a Fellowship in Pediatric Dentistry at Indiana University School of Dentistry. He previously held appointments as an assistant professor at the University of Kentucky College of Dentistry and Chief of Dentistry at Norton Children’s Hospital, in Louisville. He is a Fellow of the American Academy of Pediatric Dentistry and Diplomate of the American Board of Pediatric Dentistry. Currently the Parliamentarian of the AAPD, he has served as a consultant to the AAPD Council of Clinical Affairs, and as District III (now Southeastern) Trustee. While Trustee, he was on the Strategic Planning Committee and was liaison to the Council on Dental Benefits and AAPD PAC. He is a Past President of the Southeastern Society of Pediatric Dentistry and Kentucky Academy of Pediatric Dentistry. Ison has been an examiner for the ABPD Oral Clinical Exam as well as committee member and part leader for the Renewal of Certification Examination. He resides in Evansville, Ind., with his wife, Connie, and daughter, Maggie.

Dr. Gila Dorostkar received her dental degree from the University of Southern California School of Dentistry, and following a general practice residency at the West Los Angeles VA Medical Center, earned her certificate in pediatric dentistry from Children’s Hospital Medical Center in Cincinnati. She was board certified in 2004. Dorostkar has served on many levels in her local dental society, the California Society of Pediatric Dentistry, the Western Society of Pediatric Dentistry and AAPD, including President of CSPD, AAPD Parliamentarian, Western District member on the AAPD Nominations Committee and Chair of the Council on Membership for AAPD. She is a graduate of the AAPD Leadership Institute at the Kellogg School of Business, Northwestern University and the AAPD Advanced Leadership Institute at the Wharton School of Business, University of Pennsylvania. Dorostkar is in private practice in Greenbrae and Mill Valley, Calif.

Dr. Colleen Greene is a board-certified pediatric dentist and Section Chief of Dentistry at Children’s Wisconsin. She is a full-time faculty member in the pediatric dentistry residency program at Children’s Wisconsin. In 2020 she was elected Vice Chair of the Legislative Advocacy Committee of the Wisconsin Dental Association. She serves on the Political Action Committees of the American Dental Association, Wisconsin Dental Association and American Academy of Pediatric Dentistry. Her areas of academic interest and professional presentations include child maltreatment and advocacy. She is a Fellow of the Pierre Fauchard Academy and the American and International Colleges of Dentists. She graduated from Harvard University with a DMD and MPH in health management and policy. Prior to dental school she was a high school chemistry teacher in Chicago through Teach for America. She and her husband Jon have two young children.

Dr. Anupama Rao Tate is an associate professor of pediatrics at the George Washington University School of Medicine. She is a faculty member in the Department of Pediatric Dentistry in the Goldberg Center for Community Pediatric Health at Children’s National Medical Center. She serves as the Director of Advocacy and Research. She also is codirector of the District of Columbia Pediatric Oral Health Coalition. She currently serves as At-Large/International Membership Trustee for the Board of the AAPD. She is the Public Policy Advocate for District of Columbia for the AAPD as well. She serves as a member of the Executive Committee of the Section on Oral Health to the American Academy of Pediatrics. She is a member of the Pediatric Review Committee of the Commission on Dental Accreditation.

Tate received her dental degree from Harvard School of Dental Medicine and her MPH from Johns Hopkins Bloomberg School of Public Health. She received her Certificate in Pediatric Dentistry from Children’s National Medical Center. She is a board-certified pediatric dentist and an active member of the medical staff at Children’s National. She is involved in teaching, clinical practice, research and holds grants in community advocacy.
NOTICE TO ACTIVE AND LIFE MEMBERS

Constitution and Bylaws Amendment before the 2022 General Assembly

These amendments will be considered the AAPD Annual Session in San Diego, California, during the Reference Committee hearings and the General Assembly.

Note to readers: All line numbers reference the current AAPD Constitution and Bylaws as printed in the 2022 Membership Directory. Strikethrough words are to be removed; bold underlined words are to be added.

1. DELETION OF LEADERSHIP DEVELOPMENT COMMITTEE OF BOARD OF TRUSTEES

The following proposed change to the Constitution and Bylaws was prepared by the Constitution and Bylaws Committee at the request of the Board of Trustees.

Background: In 2016, the Board of Trustees recommended and the General Assembly approved a Bylaws amendment to create a Leadership Development Committee. This stemmed from a report to the Board from the Talent Pool Task Force. Among a number of recommendations, this task force recommended that the AAPD establish a permanent committee of the Board of Trustees solely focused on leadership development opportunities for AAPD members. It was intended that among other duties, this committee would evaluate the current AAPD programs, the Leadership Institute at the Kellogg School of Management/Northwestern University and the Advanced Leadership Institute at the Wharton School of Business/University of Pennsylvania, and make recommendations for their future continuation and direction. The committee would also actively work to identify volunteer leaders to assist the President-elect in the annual process of making appointments to the various AAPD councils and committees.

Distinguished leaders have served on the Development Committee since its creation. The Board of Trustees has evaluated the committee’s efforts and reached the following conclusions:

- The committee provided feedback on leadership development programs that has enabled the Board of Trustees to evaluate their effectiveness. This work is complete.
- A separate committee has not proven necessary for consideration of future leadership development programs; that is within the purview and expertise of the Board of Trustees.
- Based on committee feedback, the AAPD has revamped and updated its process for the identification and recruitment of volunteer leaders to serve on various councils and committees. This work is complete.

In conclusion, the Board of Trustees believes this committee’s work has been completed, programs noted above systemized, and therefore the committee is no longer necessary.

Therefore, the Board of Trustees believes this committee’s work has been completed, programs noted above systemized, and therefore the committee is no longer necessary.

Therefore, the proposed amendment would DELETE paragraph G under Chapter V, Section 18 (Committees of the Board of Trustees), and re-letter subsequent paragraphs in that section:

906—G. LEADERSHIP DEVELOPMENT COMMITTEE:
907—Composition:
908—The Leadership Development Committee shall consist of—
909—five (5) members: four (4) pediatric dentist current and/or past
910—members of the Board of Trustees appointed by the President,—
911—and the Chief Executive Officer, who shall serve ex officio with—
912—out a vote. The President shall appoint the chair. The committee may—
913—also utilize outside consultants who have an understanding and—
914—knowledge of the best practices in development of volunteer—
915—leadership in professional membership associations.—
916—Duties: The duties of this committee shall be to:
917—1. Evaluate results and outcomes from existing Academy—
918—professional leadership programs. The committee shall—
919—make recommendations to the Board of Trustees—
920—regarding continuation or modification of such—
921—programs.
922—2. Analyze other leadership training opportunities and—
923—make recommendations to the Board of Trustees.
924—3. Identify potential future leaders and provide such names—
925—to the President-elect during the annual appointments—
926—process for AAPD councils and committees.—
927—4. Regularly report to the Board of Trustees concerning—
928—such activities.
929—5. Perform such other duties as assigned by the President—
930—or the Board of Trustees.
Summary of AAPD Efforts to Protect Specialty Advertising

by C.Scott Litch  Chief Operating Officer and General Counsel

Overview

Over the past decade, despite the Federal Trade Commission’s (FTC) legal challenge to state dental boards’ regulatory authority, the AAPD has been proactive in supporting state dental board enforcement of specialty advertising standards. The AAPD also continues to remind members of our process for handling advertising complaints against AAPD Affiliate (general dentist) members, as well as the process for non-members that was developed in collaboration with the ADA’s Council on Ethics, Bylaws, and Judicial Affairs (CEBJA). A key point is that Affiliate member cases nearly always have a successful outcome in terms of modification in advertising, but the first step is that you must alert AAPD to any applicable situations in your geographic area.

State Dental Board Regulations

Recognizing growing concerns over the legal authority of state dental boards to regulate dentist advertising, the AAPD wrote a letter to every state dental boards in 2012, providing legal arguments for valid enforcement of specialty advertising regulations. More recently, in 2019 the AAPD and the Washington State Academy of Pediatric Dentistry wrote the Washington state dental board to urge their rejection of proposed regulatory language that would have permitted advertising of specialty status for disciplines that do not require CODA-accredited residency training. The AAPD Board of Trustees is also on record in supporting two years of residency training as the minimum standard for any dental specialty status.

The AAPD has also worked with the American Association of Orthodontists (AAO) and other dental specialty associations on similar issues with other state dental boards. We have coordinated efforts with each applicable state chapter’s Public Policy Advocate. Below is an excerpt from the 2019 CEO’s report to AAPD membership:

“Specialty Advertising

AAPD continued working closely with PPAs and their state chapters to promote reasonable state dental board regulation of specialty advertising announcements. The Iowa Dental Board stepped back from a proposal to eliminate all specialty advertising regulations, and is proposing to retain regulations with broader criteria (requiring certain minimum training hours) that would allow implant dentists and dentist anesthesiologists to announce as specialists (PPA Matt Geneser). The North Carolina Academy sent a comment letter to their board in early June 2018 and the board seems to have listened to concerns raised in that letter (PPA Beau Meyer). The Ohio dental board has proposed limiting specialty announcements to CODA-accredited programs (PPA Homa Amini). Oregon is considering legislation to bolster criteria for dental specialty advertising (PPA Natasha Bramley).
Unfortunately, the Virginia State Dental Board voted to drop all specialty advertising regulations, despite receiving over 200 comments in opposition including a joint letter from the VSPD and AAPD (PPA Patrice Wunsch). Additional actions are being considered. The underlying Virginia dental practice act statutory language does provide some protection, but having a regulation filling in additional details and accuracy is much more preferable.

A legal brief developed by the ADA via the law firm of Sidley and Austin in Chicago was supported financially by several dental specialties including the AAPD. This brief makes strong legal arguments for effective state dental board regulation of specialty advertising, and has been disseminated to PPAs for use in their state efforts. This issue has not gone away, although naturally in 2020 and 2021 state dental boards were rather preoccupied with focusing on the COVID pandemic.

It is worth reminding our members that the AAPD joined the ADA and North Carolina’s state dental board fight against the FTC’s regulatory overreach against state dental boards, financially supporting several amici (friends of the court) briefs as the case wound its way through the federal court system. Ultimately, the U.S. Supreme Court disagreed with our arguments in a decision issued in 2015. Unfortunately, this decision has made dental boards more reluctant to enforce their advertising regulations. However, this remains an AAPD priority per our 2021 legislative and regulatory priorities under state issues, and will continue to be a priority in 2022 and beyond:

“Ensure that state dental boards maintain and enforce regulations concerning appropriate advertising of specialty status and advertising guidance for general dentists treating children consistent with AAPD policies concerning Affiliate members.”

The AAPD has supported our state chapters seeking legislative changes, as occurred with Oregon in 2019:

“OREGON LEGISLATURE APPROVES DENTAL SPECIALTY ADVERTISING BILL
(from Oregon Public Policy Advocate Dr. Natasha Bramley)
In early June, the Oregon legislature approved SB 835, legislation supported by the state chapters of AAOMS, AAPD, and other dental specialties that would specify the requirements necessary to advertise as a dental specialist. The bill was signed into law by the Governor on June 13, 2019. The key provision of SB 835 is as follows:

“SECTION 2. (1) A dentist licensed by the Oregon Board of Dentistry may advertise that the dentist is a specialist in one or more areas of dentistry if the dentist:

(a) Has completed a post-doctoral residency program that is at least two years in length and is accredited by the Commission on Dental Accreditation, or its successor organization, and approved by the board by rule; and
(b) Is a specialist as defined by the National Commission on Recognition of Dental Specialties and Certifying Boards, or its successor organization, and adopted by the board by rule; or
(c) Has completed an advanced dental education program that is at least two years in length and is recognized by the United States Department of Education, and approved by the board by rule.”

While there is a process for reporting to the AAPD as described below, we want to keep open the option of filing a complaint with a state dental board. They obviously have far more legal authority in terms of regulating dentist licensing, whereas the worst sanction the AAPD can impose would be a loss of membership.

Alerting AAPD

The AAPD has provided guidance on how to file a complaint with AAPD against an Affiliate (general dentist) member, where after review and confirmation by the Credentials and Ethics Committee the AAPD will send a letter to the Affiliate member requesting a modification in advertising. A different approach must be taken for a non-AAPD member; in such cases the AAPD contacts ADA CEBJA who, after appropriate review, may correspond with the applicable state dental association raising the ethical issue that could impact tripartite membership. This paragraph from the November 2018 Litch’s Law Log in particular is critical:

“AAPD members should continue to alert us to situations where a general dentist is advertising using a term or phrase that would imply specialty status and is false and misleading in a material respect.”

As noted above, in almost all cases of AAPD Affiliate members, they are resolved successfully and amicably per AAPD’s request. Also, note that under the AAPD’s Bylaws Affiliate members have the following requirement:

“Affiliate or Affiliate Life members may not use the Academy name, membership status or logo, or imply special expertise or training in pediatric dentistry”

Further, the AAPD Policy and Procedure Manual has the following criteria for advertising by affiliate (general dentist) members:

“Advertising by Affiliate members

The AAPD Credentials and Ethics committee considers the follow phrases to be acceptable and consistent with membership obligations of the Affiliate (general dentist) category:

- Family Dentistry
- General Dentistry for Children
- General Dentistry for Children and Families”
Conversely, the Credentials and Ethics Committee considers the following phrases to be contrary to the membership obligations of the Affiliate category, and subject to disciplinary actions as provided in Chapter XIV of the Bylaws:

- Child Dentistry
- Children’s Dentistry
- Dentistry for Children
- Dentistry for Kids
- Pediatric Dentistry"

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.

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Reference Committee Hearing and Reports & General Assembly Meeting

Constitution and Bylaws amendments and proposed changes/additions to oral health policies and best practices of the American Academy of Pediatric Dentistry will be the subject matter for Reference Committee hearings at the AAPD 2022 Annual Session. Recommendations from the Council on Clinical Affairs concerning oral health policies and best practices will be posted as a Members-only document on the AAPD website (www.aapd.org) no later than sixty (60) days prior to the General Assembly. All members will be alerted to this availability via AAPD E-News.

Reference Committee hearings will take place on Saturday May 28, 2022, from 10 to 11 a.m., in room 14AB of the San Diego Convention Center. The hearings are open to all AAPD members, as well as non-members who are registered for the meeting. Non-members will be polled and asked to identify themselves by the chair, who also has the authority to determine whether a non-member may comment. These hearings are intended to be the venue for member discussion on any formal resolutions that will be proposed before the General Assembly. This is an opportunity for members to present testimony on proposed oral health policies and best practices, and other business to come before the General Assembly.

Reference Committee Reports will be available in the back of room 6CF of the San Diego Convention Center beginning at 8:30 a.m., on Sunday morning May 29, 2022, prior to the beginning of the General Assembly and Awards Recognition at 9:30 a.m. If available in time, copies will also be provided at District Caucuses on Saturday, May 28, 2022, from 1 to 2 p.m.

The General Assembly and Awards Recognition will take place on Sunday, May 29, 2021, from 9:30 to 11:30 a.m., in room 6CF of the San Diego Convention Center. The General Assembly is a meeting of Active and Life members for the purposes of conducting the business of the AAPD. Any AAPD member is welcome to attend, although only Active and Life members may vote. Final action on recommendations from Reference Committees takes place at the General Assembly.

This notice is being provided at least thirty (30) days prior to the General Assembly, as required by the AAPD’s Bylaws. An agenda for the General Assembly meeting will be posted under “Latest News” in the Members-Only section of the AAPD website (www.aapd.org) approximately one month prior to the meeting. All members will be alerted to this availability via AAPD E-News.

Rooms subject to change

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1https://www.aapd.org/assets/1/7/AdvertisingLetter.pdf
2https://www.aapd.org/assets/1/7/Litch_Law_Log.pdf
3This brief is available at: https://www.aapd.org/globalassets/statement-on-specialty-advertising-final-2018.pdf
4https://www.aapd.org/assets/1/7/LLL.March.2015.pdf
5https://www.aapd.org/globalassets/2021-legislative-priorities-for-website-final.pdf
8Chapter I, Section 3, i.
Federal–Workforce Goal
Seek FY 2022 appropriations for sec. 748 Title VII dental primary care cluster of $46 million, with directed funding of not less than $14 million going to pediatric dentistry in recognition of the demand for training grants and the increased need for pediatric dentists to treat insured children under the ACA. Obtain continued preference for pediatric dental faculty in the DFLRP as obtained in FYS 2017, 2019, 2020, and 2021. Encourage HRSA to especially focus future Title VII dental grants on priority 7 under current authorizing language:

“7) Qualified applicants that have a high rate for placing graduates in practice settings that serve underserved areas or health disparity populations, or who achieve a significant increase in the rate of placing graduates in such settings.”

OUTCOME:
FY 2022 HOUSE REPORT INCLUDED $14 MILLION FOR PEDIATRIC DENTISTRY. OUTCOME PENDING AS CONTINUING RESOLUTION TO FUND FEDERAL GOVERNMENT IS CURRENTLY IN EFFECT.

ALSO OBTAINED FAVORABLE REPORT LANGUAGE FOR PEDIATRIC DENTAL FACULTY PREFERENCE IN DFLRP (DENTAL FACULTY LOAN REPAYMENT PROGRAM).

HRSA ISSUED NEW FY 2021 DFLRP GRANTS PLUS CONTINUATIONS, MEANING 30 INSTITUTIONS ARE CURRENTLY FUNDED. AAPD CONTINUES TO FEATURE PEDIATRIC DENTAL FACULTY BENEFICIARIES IN OUR ADVOCACY MATERIALS.

HRSA ISSUED NEW FY 2022 NOTICE OF FUNDING OPPORTUNITY FOR DENTAL FACULTY DEVELOPMENT GRANTS (APPLICATIONS WERE DUE FEB. 14, 2022), AND FOR PREDOCTORAL DENTAL EDUCATION GRANTS (APPLICATIONS WERE DUE FEB. 7, 2022).

Federal–Medicaid Dental Reform Goal
Work with ADA and the Organized Dentistry Coalition to obtain continued Congressional report language directing CMS to appoint a new Chief Dental Officer, and work to maintain position of current Dental Officer on loan from the FDA.

OUTCOME:
ACHIEVED. PEDIATRIC DENTIST DR. NATALIA CHALMERS WAS APPOINTED CMS CHIEF DENTAL OFFICER IN AUGUST 2021. HER CANDIDACY WAS SUPPORTED IN WRITING VIA A JOINT LETTER FROM AAPD AND ADA.

Federal–Access to Care Goal
Obtain new dental rehabilitation code in CMS HCPCS level II category G in order to increase facility fee for hospital dental and ASC general anesthesia cases, so that pediatric dentists do not lose operating room access due to low facility fees for such cases.

OUTCOME:
AAPD, ADA, AND AAOMS HELD FOLLOW-UP VIRTUAL MEETING WITH CMS HOSPITAL AND AMBULATORY POLICY GROUP STAFF IN SEPTEMBER 2021, AND SUBSEQUENTLY SUBMITTED REVISED LANGUAGE FOR HCPCS LEVEL II CATEGORY G CODE FOR A FACILITY FEE FOR DENTAL CASES. THIS WOULD IMPROVE FACILITY FEE REIMBURSEMENT FOR DENTAL CASES. CMS REVIEW PENDING. IF APPROVED, ADDITIONAL WORK NEEDED TO MODIFY ASC REGULATION AND GAIN STATE MEDICAID AGENCIES ACCEPTANCE OF NEW CODE.
HAVE OBTAINED SUPPORT FROM SELECT CONGRESSIONAL OFFICES, AMBULATORY SURGERY CENTER ASSOCIATION, AND AMERICAN ACADEMY OF PEDIATRICS.

WORKING TO GAIN SUPPORT FROM BROADER ORAL HEALTH COALITION AND DISABILITY RIGHTS ORGANIZATIONS.

Federal–Access to Care Goal

Work with AAOMS and ADA to support reintroduction and passage of Ensuring Lasting Smiles Act (H.R. 1379 and S. 560 in the last Congress), that would require all private group and individual health plans to cover the full medically necessary treatment of patients with congenital anomalies, including related dental procedures.

OUTCOME:


Federal–Workforce Goal

Support reintroduction and passage of H.R. 996 and S. 359 (from last Congress), bills that would exempt DFLRP from taxation to individual faculty recipients. Include in any comprehensive tax legislation under consideration by Congress.

OUTCOME:

LEGISLATION REINTRODUCED IN MARCH 2021 AS S. 449 AND H.R. 1285. SENATE LEADERS ARE SENATORS BEN CARDIN (D-MD.) AND ROGER WICKER (R-MISS.) HOUSE LEADERS ARE CONGRESSWOMAN YVETTE CLARKE (D-9TH N.Y.) AND CONGRESSMAN/DENTIST MIKE SIMPSON (R-IDAHO 2ND). SEEKING INCLUSION OF BILL INTO ANY COMPREHENSIVE TAX LEGISLATION CONSIDERED BY CONGRESS. SUCH LEGISLATION IS DELAYED PENDING OUTCOME ON BUILDING BACK BETTER BUDGET RECONCILIATION BILL.

State–Medicaid Dental Reform Goal

Ensure that state Medicaid programs conducting provider audits, as well as auditors contracted by CMS, do so in an appropriate and fair manner, adhering to AAPD clinical recommendations and utilizing peer review by pediatric dentists. Work with PPA network to secure language in SMA dental provider manuals referencing AAPD clinical recommendations as the appropriate criteria for any audits of pediatric dental practices, and a dental advisory board for every SMA. Pursue dental auditor training initiative with CMS Center for Program Integrity. Assist state PPAs interested in pursuing model Medicaid audit reform legislation as passed and signed into law in Nebraska in 2020.

OUTCOME:

AAPD AND ADA OBTAINED HOUSE FY 2022 CONGRESSIONAL APPROPRIATIONS REPORT LANGUAGE:

“Medicaid Dental Audits.—The Committee has previously raised concerns that failure to use professional guidelines or established state Medicaid manual parameters in the auditing process can result in inaccurate Medicaid dental audits, negatively impacting dentist participation in the program and impeding patient access to care. While State Medicaid agencies (SMA) have significant responsibility in managing provider audits, the Committee believes that as part of CMS oversight of the Medicaid program it is appropriate to issue guidance to SMAs concerning best practices in dental audits and offer training in such practices. The Committee again urges CMS to develop such guidance for SMAs and report within 90 days of enactment of this Act on steps taken to develop such guidance.”

Federal–Workforce Goal

Support reintroduction and passage of H.R. 1554 (from last Congress), the Resident Education Deferment Interest Act introduced by Congressman Babin. This bill, supported by the Organized Dentistry Coalition and spearheaded by AAOMS, would halt interest accrual while loans are in deferment during residency training.

OUTCOME:

REDI ACT WAS REINTRODUCED IN THE HOUSE IN JULY 2021 AS H.R. 4122. 30 NATIONAL PHYSICIAN AND DENTIST PROFESSIONAL ASSOCIATIONS, INCLUDING AAPD, ENDORSE H.R. 4122. HOUSE LEADERS ARE CONGRESSMAN/DENTIST BRIAN BABIN (R-TEXAS 36TH) AND CONGRESSWOMAN CHRISSEY HOULAHAN (D-PA. 6TH). SENATOR JACKLYN ROSEN (D-NEV.) HAS AGREED TO INTRODUCE COMPANION BILL IN SENATE.

Stay up-to-date on AAPD Latest News by visiting the News Room on the AAPD website under the About section.
State–Medicaid Dental Reform Goal

Provide continued technical assistance to state pediatric dentistry chapters for Medicaid dental reform for their efforts with both state legislatures and state dental associations. Continue to promote states’ adoption of appropriate dental periodicity schedules consistent with AAPD guidelines, and update research and policy center dental periodicity schedule adoption map on website as appropriate.

Promote state Medicaid programs’ adoption of pediatric oral health quality measures developed by the Dental Quality Alliance (DQA). Continue to inform and educate key constituencies about reforms that work, including MSDA (Medicaid/CHIP State Dental Association), NCSL, NGA etc.

Work with research and policy center and CDBP to respond to Medicaid medical movement to managed care by:

(a) promoting dental managed care hybrid payment models that leave the risk with the plan contractor (or at least share it between the plan and the provider); and
(b) maintaining accountable dental fee-for-service plans.
(c) promoting SMA MCO dental contracting that adheres to criteria in the ADA’s 2015 guidance document Medicaid: Considerations When Working with the State to Develop an Effective RFP/Dental Contract.

OUTCOME:

PROGRESS WAS MADE IN OBTAINING MEDICAID DENTAL FEE INCREASES IN SEVERAL STATES IN 2021. THREE STATE SUCCESS STORIES HIGHLIGHTED BY AAPD ARE MINNESOTA, MISSISSIPPI AND WISCONSIN, PER INVOLVEMENT BY AAPD STATE PUBLIC POLICY ADVOCATES.
Currently, the AAPD is pursuing several critical issues at the federal level:

**TITLE VII PEDIATRIC DENTISTRY, INCLUDING THE DENTAL FACULTY LOAN REPAYMENT PROGRAM**

Title VII pediatric dentistry supports our post-doc residency and pre-doc training programs. For example, recent HRSA grants—made possible via AAPD’s advocacy efforts—have funded dental faculty loan repayment plus innovation and outreach in residency programs.

*Note that AAPD secured a funding preference for pediatric dentistry faculty.*

**ENSURING LASTING SMILES ACT (ELSA)**

AAPD supports the Ensuring Lasting Smiles Act (S. 754/H.R. 1916), legislation that would require all private group and individual health plans to cover the full medically necessary treatment of patients with congenital anomalies, including related dental procedures.

Even if you have already given to the AAPD PAC during the 2021-22 dues renewal cycle, I urge you to increase your support to the next level such as Cabinet ($500-$999) or Patriot ($1000 and above).

Sincerely yours,

Cliff Hartmann, D.D.S., F.A.A.P.D.
Chair, AAPD PAC Steering Committee
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.

Thank You! It is the support of you, our members, that makes it all possible.

We are stronger together!

AAPD Membership retention for 2021-22 is 91%
Active and Life Membership Retention is 94%

We couldn’t do all that we do without you.

Fellow of AAPD

More than 1,400 AAPD members have become a Fellow under the new guidelines. If you are board certified by ABPD and have been an Active Member of AAPD for five years (student membership is not include) then you are eligible to become a Fellow of AAPD. The FAAPD added to your credentials shows your commitment to organized dentistry, scholarship and community. It is a voluntary program that is renewed every five years.

The term Fellow in a professional association often refers to a person who has distinguished themselves above the standard norm, either by publications or contributions to the profession. AAPD wanted to create that opportunity.

The AAPD Fellow Program was revised, reintroduced and reenergize to the membership to bring fresh meaning and value to the designation. The focus of the fellowship program is to reward and encourage participation in organized dentistry, scholarly activity and community involvement. It is completely voluntary.

If you were a Fellow of AAPD under the previous guidelines and did not renew in 2017 it is easier to reinstate your Fellow status with 15 points from two of the four categories, and a $200 reinstating fee. Letters of recommendation are not needed for reinstatement.

For more information please contact Senior Membership and Chapter Relations Director Suzanne Wester at swester@aapd.org or visit www.aapd.org/resources/member/fellow/.
Member Benefit Spotlight

Licensing for TV and Movies at the Office

Offering television and movies can be a great way to relax and entertain patients in your office. As many pediatric dentists and orthodontists will attest, a little ambiance goes a long way in alleviating anxiety and creating a more positive experience for all parties. Toys and books in a waiting area or an underwater seascape in a treatment room are just a few creative ways to transform an office.

These days, you are as likely to find televisions in reception or waiting area as you are magazines. Televisions are even making their way into treatment rooms. If your practice shows or would like to show television or movies to enhance the patient experience, it is essential to ensure that you and your staff understand your copyright obligations.

The U.S. Copyright Act, Title 17 of the United States Code, gives copyright owners control over the public exhibition of their works. In nearly all cases, this means that a public performance license is required to show copyrighted content in public. Dental and medical offices are considered public spaces when it comes to copyright law. This legal requirement applies whether or not an admission fee is charged, and even if the content shown can only be viewed by a single patient.

Many dentists are familiar with copyright licensing requirements for music. Like music licensing, this requirement for a public performance license applies to public showings of movies, TV, and other audiovisual content enjoyed from sources like broadcast, cable, or satellite television; DVDs; downloads; or streaming services. Failure to comply with the Copyright Act constitutes copyright infringement and can result in liability for damages ranging from $750 to $150,000 for each illegal exhibition, plus court costs and attorney fees.

Ultimately, by showing television and movies without a license, dentists risk significant fines for copyright infringement. For even the casual infringer, the monetary repercussions can be significant. Office staff may not consider copyright law before turning on televisions or considering programming choices. When it comes to infringement, it does not matter who pushes “play.”

To increase awareness of this important issue, MPLC works to educate members about copyright compliance and provide an affordable public performance licensing solution. For several years, AAPD has worked with MPLC to provide a discount for its members on copyright licensing. As a result of AAPD efforts, member practices can secure an annual Umbrella License® for only $349 per location, per year. By comparison, non-members pay $429.

MPLC is exclusively authorized by motion picture studios and other copyright owners to grant the Umbrella License for the public performance of copyrighted television, movies, and other audiovisual content. MPLC issues the license your practice needs to show copyrighted content in compliance with federal copyright law.

The Umbrella License allows for unlimited exhibitions at your dental office with the assurance of copyright compliance. It provides coverage for old and new titles from more than 1,000 motion picture and television rights holders, including but not limited to Disney, CBS, Warner Bros., NBCUniversal, Paramount, ABC, Televisa, HGTV, Lionsgate, Discovery and many more. Once licensed, obtain content on your own from the source of your choice without the need to report times, dates, or titles shown.

The goal of copyright law is to protect creativity. To that end, fees from every Umbrella License are shared with MPLC rights holders, to support the next generation of movies and television. These productions employ thousands of people behind the camera, including writers, set designers, camera operators, and make-up artists, to name a few. Moreover, many of these productions film “on location” across the United States, providing an important economic boost to local businesses and communities.

If your practice wants to show television, movies, or other audiovisual content, a public performance license is required. AAPD encourages its members to comply with federal copyright law. To secure an Umbrella License for your practice, visit https://dentist.mplc.org/ or contact MPLC at (866) 552-MPLC (6752) or info@mplc.com. You may also contact AAPD with any additional questions about the need for public performance licensing in dental practices. Information is also available at the AAPD website by visiting https://www.aapd.org/about/about-aapd/member-benefits/powerful-resources/.
Resident’s Corner

Providing Care in Hawaii

By Drs. Joanna Lee, Mika Katsura, Yelizaveta Heron, Jaimin Desai and Nebyat Felix

NYU Langone is associated with clinics on multiple islands including Oahu, Lanai, Maui, and the Big Island. Hawaii’s keikei (children) have one of the highest prevalence of tooth decay in the United States. There are oral health disparities based on race/ethnicity with Micronesian and Other Pacific Islanders (Guam, Samoa, Tonga and Other Pacific Islands) having the highest prevalence of untreated decay. One of the biggest factors contributing to this is the lack of community water fluoridation. There is an urgent need to provide dental care and education to the families. Hawaiians are highly connected with ‘ohana (family, community), ‘aina (land, environment) and akua (spirituality). And so it’s important to have a cultural awareness of the people and land.

During the drive to the Waianae Coast Comprehensive Clinic in Oahu, you get the most wonderful long-stretch view of the bright blue ocean. The community is highly dependent on the clinic to provide medical and dental treatments. Over 80 percent of the visits are patients who are either uninsured or on Medicaid. Large families, many with five or more children under the age of ten, come in and each minute of the appointment is crucial—from reviewing medical history, thoroughly explaining OHI, and ensuring the proper treatment for each specific child, whether it is to provide intervening orthodontic treatment, emergency treatment, or referral to the children’s hospital. Here, we are able to adjunct treatment with nitrous or oral conscious sedation; provide orthodontics, and understand the process of referrals to hospitals. The clinic is fast paced and dependent on cohesive teamwork to ensure there’s a fluid flow in the schedule. With the patient pool that is generally at high caries risk, the clinic gives providers ample experience not only in treatment, but in communication skills to parents and other medical providers to ensure that all patients are getting the best treatment.

One of the wonderful parts of this residency program is the external rotations that are part of the curriculum. For six weeks, pediatric dental residents rotate through a pediatric hospital during an anesthesiology block. The unique part of Hawaii’s program includes personal one-to-one supervision from pediatric anesthesiologists and multiple private practice pediatric dentists with varying techniques who supervise the O.R. cases. The patients are referred from private offices, WCCHC, as well as from outlying islands, like Guam.

During our two years, residents complete rotations with various community health centers on neighboring islands. While this significantly enhances our exposure to clinical techniques, working environments, and patient populations, it also poses a unique set of challenges: residents must frequently contend with housing and transportation logistics, as well as navigate the cultural differences present between the islands. These rotations, which typically span a period of several months, cause residents to rely heavily upon the ‘coconut wireless’, aka insider knowledge, to find affordable short-term housing and contract with a local company to transport their vehicles. With the residents rotating through the different islands, it is imperative for us to be flexible and act as a team.

The Hawaii residency prepares the residents in more ways than just dentistry. In addition to our clinical rotation, each resident participates in a Leadership education in neurodevelopmental disabilities (LEND). This HRSA funded program trains future leaders in a variety of disciplines to improve the health of children who have or are at risk of developing neurodevelopmental disabilities or other similar conditions such as autism and intellectual disabilities. Through this program, residents can collaborate with students from other special healthcare team specialties like social work and speech pathology. Students learn to better advocate for their patients, and form relationships with mentors outside the dental specialty.

Our rotation in Big Island consists of two sites, as well as a Community Hospital in which second years complete GA cases. The West Hawaii Comprehensive Health Center is well organized and houses both Medical and Dental teams. With the ability to easily complete medical and behavioral health referrals, as well as collaborate with general dentists, we are better able to truly provide comprehensive care. Situated on Native Hawaiian Homestead land, the main clinic is an integral part of the local landscape, caring for patients of primarily Pacific Islander, Asian, and Caucasian backgrounds. While it is a slightly more conservative environment, particularly in regards to fluoride hesitancy, it is also a very tight-knit and loyal community, with many parents of our current patients once patients themselves.

Our rotation in Maui, at Malama I Ke Ola, or the Community Clinic of Maui, provides an excellent opportunity to work on one on one with our attending, while exposing us to a schedule typical of a busy dental center. At Malama, the residents are exposed to patients from so many different cultures: there is a strong Native Hawaiian presence, and we also treat many children of families who recently immigrated from the Micronesian Islands and the Philippines, or moved from the...
Mainland. The caries risk is very high in this community, and it is not uncommon to see a child with dental needs in all six sextants who has never seen the dentist before. We have a quiet room with Netflix, nitrous, and optional protective stabilization where we are able to see patients with behavioral and special healthcare needs. Accessing sedation services is challenging for patients on the outer islands; therefore, we do what we can to exhaust all other treatment options. Residents learn many behavior management techniques, atraumatic restorative treatment options, and how to provide for pediatric dental emergencies.

Our rotation in Lanai, at the Lanai Community Health Center, offers residents a full immersion into the world of rural dental care. With a total population of approximately 3,000 residents, a single school that serves the 800 students from K-12, and no traffic lights on the island, Lanai is truly a unique experience. As treatment in the OR requires a flight to either Oahu or Maui, it is crucial that all treatment alternatives are attempted on-island first. Residents work closely with their Pediatric attending and the two general dentists who routinely make the 45-minute flight commute, in order to provide comprehensive care.

The pediatric dental residency in Hawaii gives residents the opportunity to experience working within different ethnocultural communities. Each rotation is different and residents are welcomed to each new site like they are Ohana. The multitude of different hospital and clinical rotations pushes the residents to expand their skill set and knowledge. The unique challenges of navigating the rotation logistics on Hawaii teaches residents vital lifelong skills like excellent time management, resilience, adaptability, and perseverance. The interprofessional collaboration and exposure to many faculty allows for residents to make new friends and form lifelong mentorships along the way. From the Mauka (ocean) to the Makai (mountains) of Hawaii, there’s so much to experience, and we are grateful for our residency program on these islands. Mahalo!

Greater New York Dental Meeting Features Special Edition of the Dental Health Show with Dr. Amr Moursi

On Nov. 30, 2021, Dr. Amr Moursi, professor and chair of the Department of Pediatric Dentistry and the host of the Dental Health Show on Sirius XM’s Doctor Radio, moderated a special two-hour edition of the Dental Health Show onsite at the Greater New York Dental Meeting. Moursi’s guests included Dr. Effie Habsha, Section Head of the Oral Examination in Prosthodontics for the Royal College of Dentists of Canada, who addressed “Current Concepts in Esthetic Dentistry; Dr. Joel Berg, Commissioner, ADA Commission on Dental Education, who spoke about “The Latest In Oral Health Technology for Diagnostics, Prevention, and Treatment”; and Dr. Jeannie Beauchamp, President of the American Academy of Pediatric Dentistry, who spoke about “Current Issues and Recommendations in Pediatric Oral Health.”

The Dental Health Show

Hear the latest information on preventing and treating cavities, gum disease, orthodontics, and more. Hosted by NYU College of Dentistry’s Dr. Amr Moursi. Tune in the first Monday of the month at 3 p.m.

AAPD President Dr. Jeannie Beauchamp speaks on The Dental Health Show.

ADA House of Delegates

AAPD members representing the ADA’s 11th District: (l-r)- Drs. Mark Mutschler (Ore.), Jessica Blanco (Alaska), Bernard J. Larson (Wash.), Chris DeLecki (affiliate member-Wash.) and John Gibbons (Wash.).
February is National Children’s Dental Health Month (NCDHM), and the AAPD’s focus this year was on different aspects of dental safety. Whether a child is just starting to get their first tooth or they’re a pro at tooth fairy visits, proper pediatric dental care is an important step in a child’s overall health. During NCDHM, AAPD wanted to take this opportunity to share pediatric oral health care tips and steps to ensure safe oral health. Visit mychildrensteeth.org and share these tips with your patients and parents!

Creating safe and positive pediatric dental experiences starts at home, and it is never too early to start focusing on your child’s oral health! One of the first steps in this is finding your child’s dental home by the time their first tooth appears, or by age one. Even baby teeth can be an important indicator of your child’s overall health.

A healthy and balanced diet for your little one is another important aspect of dental safety. Ensure they have sources of protein, fruits, vegetables and grains, and encourage them to drink bottled water over juice boxes or other sugary beverages. The work doesn’t stop there! Don’t forget to brush and floss your teeth twice a day to keep the mouth monsters away!

However, sometimes teeth need a little extra help from sealants to stay safe from cavities. Many parents might think sealants are only for permanent teeth, but baby teeth can benefit from them as well. Nearly one in five children experience a cavity by age five, so sealant’s thin plastic coating prevents food and bacteria from getting in grooves of little teeth and can help fight off those cavities.
Once your child has established great oral health care at home, it’s time to practice at school. From tag on the playground to running on the field or court, dental injuries can happen at any time. It’s important to remember your pediatric dentist is available to help manage any type of oral injuries that your child may sustain. Since pediatric oral health care is important all year long, there is a chance your child may have to visit the dentist during school hours. Having a copy of your child’s school calendar with their school’s closed days can come in handy when scheduling their future dentist appointments and preventing any absences. If your child participates in school sports, a mouthguard is essential in protecting their baby and permanent teeth. Parents can find plastic mouth guards in sporting goods shops, and as children get older your dentist may suggest a custom mouthguard.

It’s time to talk about the best place to practice dental safety—the dentist office! Parents may understandably have some questions about the appointments, dental emergencies, and overall safety concerning the oral health of their children. Their safety and well-being are your dentist’s top priority and they are there to ensure you feel informed and safe, making sure to follow all cleaning procedures along with wearing protective equipment at all times. Parents must do their part too! Make sure to wash you and your child’s hands before entering the dentist office and wash them after you leave. Don’t forget to wear your mask unless directed differently and use plenty of hand sanitizer while you’re inside. If you and your child are not feeling well or have had a fever in the 24 hours before your visit, please stay at home and reschedule your appointment.

Let your child know that even though their experience at the dentist office may look a little different, their dentist will continue to provide the highest quality of care possible while keeping your child safe and comfortable during their visit.

We hope everyone had a safe and happy NCDHM! Remember to check out other resources on our site, mychildrensteeth.org, and stay safe out there!
Time is running out to get registered for the Safe & Effective Sedation for the Pediatric Dental Patient and Pediatric Sedation Emergencies: Simulation courses. Don’t miss your chance to join us this month in Tampa, Florida! Can’t join us in Florida? No need to miss out – you can purchase the Safe & Effective Sedation for the Pediatric Dental Patient recordings from 2021 in Education Passport to learn all about the latest techniques and procedures with online CE.

Safe and Effective Sedation for the Pediatric Dental Patient
March 24 -26, 2022
Grand Hyatt Tampa Bay
Please be sure to book within the room block here to take advantage of the fantastic group rate at the Grand Hyatt Tampa Bay.

Course Description
This course features recognized leaders in the field, both in dental anesthesia as well as pediatric dentistry. You’ll find didactic lectures, case studies, film clip sessions, panel discussions and hands-on breakouts with personalized attention. There will be dedicated forums to ask questions and talk about specific issues with course faculty, discuss techniques for effective communication with the patient and parent to address unusually challenging and complex situations. This course will offer opportunities to gain hands-on experience while learning airway techniques to rescue patients and will include breakout sessions with manikin practice with face masks, ambu bags and the insertion of nasal and oral airways; all in a personalized setting with real equipment and monitors.

Course Chair and Speaker
Stephen Wilson, D.M.D., M.A., Ph.D.

Course Vice-Chair and Speaker
Bobby Thikkurissy, D.D.S., M.S.

Speakers
Christine Quinn, D.D.S, M.S.; Scott Papineau, PharmD, D.D.S

Who Should Attend
Any dentist who sedates children in their office.

CE Hours
22 Hours

Management of Pediatric Sedation Emergencies: Simulation
March 27, 2022
USF Health CAMLS Simulation Center

Course Description
While no one ever expects an emergency situation to arise, attending this course will help you and your team be more prepared should the unexpected arise. This course is designed to simulate emergencies that may occur in a pediatric dental office. It will offer some didactic materials but will focus on team-driven assessment and responsiveness to situations that might arise during sedation of children for operative care. The course is intended for pediatric dentists who are currently using sedation techniques in their office and will allow for the participant to make quick assessments of patient status and simulate airway techniques in their office and will allow for the participant to make quick assessments of patient status and simulate airway techniques, while managing real-time trending of physiological status with the goal of stabilizing the patient. You will be able to immediately implement training protocols for your practice that you’ve learned in the course.

Course Chair and Speaker
Stephen Wilson, D.M.D., M.A., Ph.D.

Course Vice-Chair and Speaker
Bobby Thikkurissy, D.D.S., M.S.

Speakers
Christine Quinn, D.D.S, M.S.; Scott Papineau, PharmD, D.D.S; Brian Steele, D.D.S., M.S.D.

Who Should Attend
Pediatric dentists who wish to sharpen and practice their cognitive skills and rescue techniques involving emergent pediatric sedation scenarios using SimMan technology.

CE Hours
9* Hours
*two (2) hours required online learning in advance and seven (7) hours hands-on.

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.
Save the Date – Join Your Colleagues for the Annual Joint Academic Day

Wednesday, May 25, 2022
8 AM – 5 PM

The schedule is being finalized, but a list of topics being considered for this year can be found below. We hope to see you there!

Morning (Joint Pre and Post Docs)
- Structural Racism/Social Determinants
- Childhood Adverse Experiences
- Medical Dental Electronic combined records – experience from the field
- COVID Vaccination Protocols
- Behavioral Health for Teens
- Entrustable Professional Activities

Afternoon Post Docs
- Technology on Telehealth/Teledentistry – Showcase of platforms aimed for Pediatric Dentistry
- Burnout in Academics
- Vaping/CBD and Adolescent Drug Use

Afternoon Pre Docs
- PBL Simulations
- Paradigm Shift in Behavior Management
- Panel Discussion for Preparing Letters

Please contact the Education Development and Academic Support Manager, Leola Royston at (312) 337-2169 or e-mail lroyston@aapd.org for further information.

Sponsored by Elevate Oral Care

Title VII FY 2020 Grant for Postdoctoral Training in Pediatric, General, and Public Health Dentistry Spotlight

The Health Resources and Services Administration (HRSA) awarded 27 Title VII FY 2020 grants for postdoctoral training in pediatric, general, and public health dentistry. Six awards were directed solely to pediatric dentistry programs, and another ten include pediatric dentistry in collaboration with general dentistry and dental public health.

In each issue, we would like to highlight programs that received this grant. Today, we spotlight Boston University Henry M. Goldman School of Dental Medicine.

Boston University Henry M. Goldman School of Dental Medicine

Team-based Oral Health Care for Vulnerable Populations: Integrated Training, Practice and Leadership

Our first five-year HRSA award allowed the successful establishment of an inter-disciplinary team-based education model and an innovative practice focusing on vulnerable children. Now with the continued support from our second HRSA award we continue our training and practice activities while making important enhancements based on lessons learned.

Our novel collaborative program addresses focus areas 1 (improve the quality of care for underserved and vulnerable children and adults, with a primary focus on individuals with disabilities) and 3 (develop leaders in dental public health who will be prepared to effectively lead FQHC dental programs). Our program is designed to enhance the clinical and didactic training provided to postdoctoral trainees in two disciplines - pediatric dentistry and dental public health. The principal vision of this competing continuation proposal is to improve the oral health of the most vulnerable segment of our society, individuals with disabilities. We are working on enhancing the existing team-based care by introducing a range of innovations and expertise in developmental pediatrics and anesthesiology, working chairside with dentists and other healthcare professionals to care for individuals of limited financial means that suffer from physical, developmental, emotional and behavioral disabilities, including substance abuse disorders. Pediatric dentistry and dental public health need individuals that possess not only technical dental skills but also business, management and financial skills to effectively lead and manage non-profit healthcare organizations. Not-for-profit (NFP) community health centers are a critical resource to care for the most vulnerable.

To achieve the goal of developing leaders that retain in FQHCs we are enhancing the leadership training activities that engage the School of Dental Medicine and the School of Public Health at Boston University and our community-based clinical training sites. Ultimate outcomes of this program include an increase in the number of vulnerable, disabled patients treated in the ambulatory environment and the retention of our trainees after graduation in sites that care for the underserved. The total number of HRSA-supported Primary Trainees over the grant period (2020-2025) will be fourteen. Besides the primary trainees, a total number of about 70 residents (50 PD and 20 DPH) will benefit from the proposed program by being trained along with the Primary Trainees.
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info@treloaronline.com

* According to the ADA Health Policy Institute, on average, in 2017 a dentist retired at 68.9 years, while in 2001 a dentist retired around age 65. Source: www.ada.org/en/publications/ada-news/2018-archive/august/hpi-average-dentist-retires-later
LCP Dental Team Coaching (formerly Julie Weir & Associates) is recognized as the premier consulting firm specializing in pediatric dentistry since 1996.

Revolutionize your Team in 2022 with Working Genius

Many doctors and leaders attribute the failures and struggles of their team to having a bad attitude or not being smart enough. When they understand their team member’s areas of Genius and Frustration, they can better recognize if each team member is in the proper role, thus ensuring days run more effectively, which has an immense impact on productivity and satisfaction.

Our November 2021 PMM article offered successful hiring and training tips. This article gives insight into a cutting-edge tool that will revolutionize how to hire and understand team members for optimal success. Finding joy and fulfillment at work and in life is the ultimate prize. Everyone can be happy at work. According to an Oxford University Study, happy workers are 13 percent more productive, perform better as leaders, and make fewer mistakes. Why, then, do 80 percent of adults see work as something to be endured rather than enjoyed?

Patrick Lencioni, the founder of The Table Group and pioneer of the organizational health movement, may have uncovered the answer, “If you want to be successful and fulfilled in your work, you must tap into your gifts. That can’t happen if you don’t know what those gifts are.” According to Lencioni, our happiness may depend on doing the things we are good at naturally.

During 2020, Lencioni worked to find the missing piece to developing a happy, productive team and, as a result, created a way to measure a team’s potential with Working Genius, an 80 percent productivity and 20 percent personality assessment.

The six types of Geniuses are necessary to achieve results in any organization. However, no one is good at all of them. Lencioni’s tool helps us discover our combination of gifts, competencies and frustrations.

The assessment sorts the six types of Geniuses into three categories; Working Genius, Working Competency, and Working Frustration.

- **Working Genius** is considered a person’s two areas of strength. When they are working within these areas, they feel energized and fulfilled. Typically these are the areas of work that bring joy.
- **Working Competency** defines two areas where people are capable of working well in, may even be really good at, but they don’t necessarily bring joy or give energy. In some cases, these may be more draining than the final category.
- **Working Frustration**; just as the name indicates, these are two areas people can work in but may not be particularly good at doing.

Once the areas of Genius have been defined per team member, it will become easier for each of them to reach their full potential and for the practice to become more profitable. Adjusting the roles of your team to be in alignment with their Genius will increase satisfaction and production by ensuring they are working in their area of strength where they can be most effective. It will help fill in the under-represented gaps on a team when hiring. Every job is a six-letter job. At any point, people will have to tap into the other Geniuses and how much better when they know their strengths and can plan their day accordingly to get more accomplished.
Lencioni presents the Geniuses as cogs in a wheel. The imagery here is essential because it represents how all the Working Geniuses are required to accomplish their goal. If any of the cogs is missing, the team can’t perform at its optimum level, and the gears stop turning.

Lencioni has created a linear way to think about productivity.

1. It all begins in the Ideation phase. This phase includes the first two Geniuses of Wonder and Invention.
   - The Genius of Wonder will identify the need for change, always responding to the environment. The team members with this Genius will say, “There must be a better way,” and are always asking, “Why.” They aren’t necessarily the people who will come up with a game plan for the change; instead, they are helping to create the conditions for Invention.
   - The Genius of Invention will generate ideas and solutions. They hear there is a need for change, and they say, “I will figure out how to fix that.” This person, however, may not be the person to put the idea into action.

2. The second phase of Working Genius is Activation. This phase includes the Geniuses of Discernment and Galvanizing.
   - The Genius of Discernment is represented by team members who can assess the workability of the idea. Their intuition will tell them what will and won’t work. They then take charge and refine the plan.
   - The Genius of Galvanizing then steps in with the declaration, “That is a great plan! Let’s make this happen!” and inspires and moves the team into action. They tend to have the ability to push others outside of their comfort zone.

3. The final phase, known as Implementation, includes the Working Genius of Enablement and Tenacity.
   - The Genius of Enablement will move people and projects forward. While the word enablement typically comes with negative connotations, in this case, the Genius of Enablement is helping to move things forward and encouraging others. They answer the call of the Galvanizer and jump in to do whatever is required. They are responding to the need and saying, “Tell me what to do, and I will do it. I am on board!”.
   - The Genius of Tenacity brings it all home and ensures successful results. They will not quit until the task is complete and up to standard, even when others on the team may have fizzled out. These are the impatient people when the team has a brainstorming session that the Genius of Wonder and Invention enjoy the most. The Tenacity Genius thinks there is no time or need for meetings and to talk about ideas, yet those are vital for the continued success of any corporation. It is helpful to know that the Genius of Tenacity only needs to be told how to move forward and run with it.

Using the Working Genius Assessment for team application will revolutionize the way dentists and leaders view and work with their team members. It is an invaluable tool when hiring. It allows leaders to be confident that they have all members on their team assigned to the proper roles. Of course, everyone will need to work out of all six Geniuses in any position; however, being sure the majority of assigned tasks are in their area of strength will allow the team to function optimally. When team members know their Working Genius, they no longer make inaccurate and hurtful judgments about one another and no longer feel unnecessary guilt about their own shortcomings.

The impact when a team is underrepresented in each Working Genius is:
   - Wonder – they will often fail to identify problems. They may operate out of a stance of “get things done.” They may be missing the needs of the organization. The team may focus too much on being efficient rather than effective.
   - Invention – they may find themselves revisiting the same problems over and over. The problem has been identified, but no one has found a way to remedy the situation. Teams may rely on “the way we have always done it” and hope for a different result.
   - Discernment – they will find themselves trying to implement ideas or solutions just because they were suggested, not because they will be effective. This team will find themselves with high levels of failure, wondering why they can’t see these problems before they occur.
   - Galvanizing– they fail to generate the enthusiasm necessary to get the new idea off the ground. No one makes sure promising ideas get the attention and mobilization needed to move forward.
   - Enablement – their projects are likely to wilt and wither after starting. There will be no one to respond to the call of the Galvanizer. New ideas or projects are not supported or implemented.
   - Tenacity – their best ideas and projects that have been started fail to make it to completion. Focus and energy decrease over time without someone to ensure the team finishes well.
Anyone can take the Working Genius assessment at WorkingGenius.com. The power comes from working at a deeper level with a certified Working Genius expert. That is why Lilly, the owner of LCP Dental Team Coaching, chose to get certified. She recognized the value of these tools and how she could empower the dental teams she works with to have an advantage in the industry. “It is all about decreasing the inefficiency and frustrations of a team while simultaneously increasing their productivity, satisfaction, and ability to accelerate to their next level,” says Lilly. The LCP Coaching Team took the assessment and saw immediate improvements to their workday while only making slight adjustments.

This knowledge has elevated their productivity as individuals and a team. It has allowed them to streamline meetings as they now understand the purpose of each meeting more clearly and has helped them re-structure their days to spend more time in their areas of strength and given the team a new language to define their tasks and goals. They recognize what it means when a task requires an hour of Tenacity to accomplish, as well as the necessity to schedule a Discernment meeting to go over the ideas mapped in their Invention meeting.

“Far too many people in the world suffer needlessly because they don’t understand their personal areas of working Genius. As a result, they don’t do the kind of work that gives them joy and energy”

*Patrick Lencioni, Author and Creator of The Six Types of Working Genius*

Published four times a year, Practice Management and Marketing News is a featured column in Pediatric Dentistry Today.

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New Disaster Preparedness Resource Hub Helps You Expect (and Plan for) the Unexpected

Hurricanes, earthquakes, cyberattacks, pandemics – we have seen the devastation caused by natural and man-made disasters on our families, patients and livelihoods. Research suggests that these emergencies will not only continue to occur, but will likely become more frequent and extreme. The best way to protect both your patients and your practice is to have a disaster plan.

The Disaster Preparedness Resource Hub provides helpful information to prepare for emergencies, and includes action plan templates, emergency checklists, and the latest research on assisting children during times of crisis. Created specifically for pediatric dentists, it provides relevant information for pediatric dentists as both small business owners and healthcare providers who work with children. You can find the Disaster Preparedness Resource Hub on the AAPD Practice Safety webpage at https://www.aapd.org/resources/member/safety-toolkit/disaster-resources/.

New Brief on Value-Based Care in Pediatric Dentistry

Alternative Payment Model. Population-Based Payment. Pay-For-Performance. The jargon of different reimbursement models can be confusing! The newest addition to this ever-growing list is Value-Based Care (VBC). What exactly is Value-Based Care? And what does it look like in a pediatric dental setting? This technical brief de-mystifies this reimbursement system, defining key terms and describing in detail challenges and cautions in re-engineering the pediatric oral health care system to a VBC model. It proposes 15 recommendations for VBC programs to be successful in providing oral health services for children, and describes the methodology used to determine the most important criteria for a strong pediatric dental model. You can find this technical brief on the Policy Center Technical Briefs webpage.
Safety Committee Update

**Online Safety Toolkit.** Find the answers to your questions on dental waterline quality issues, cybersecurity safeguards and more in the American Academy of Pediatric Dentistry’s (AAPD) Safety Toolkit. This collection of resources is curated by pediatric dentists and contains current recommendations in major areas of dental practice related to safety. It includes best practice guides, training materials and office-friendly tools to help pediatric dentists maintain the safest environment for their patients. Members can also now peruse the new section on provider safety and learn what it takes to stay healthy and enjoy a long career in pediatric dentistry.

**Partnering with AAAASF in Voluntary Accreditation Program.** The Safety Committee encourages all members to learn more about the AAPD partnership with the American Association for Accreditation of Ambulatory Surgery Facilities (AAAASF) voluntary accreditation program. This program is meant to help members provide the highest level of care and safety to their patients. Visit their exhibit booth at this year’s AAPD Annual Session to learn more or visit the AAPD website.

Evidence-Based Dentistry Committee (EBDC) Update

**Permanent Tooth Vital Pulp Therapy in Children and Adolescents.** The members of the workgroup on Clinical Practice Guidelines for Permanent Tooth Vital Pulp Therapy in Children and Adolescents have met monthly since July, 2020. Its progress on the revision of the 2017 clinical practice guideline on vital pulp therapy in primary teeth has involved an updated literature search of over 27,000 articles with over 300 included articles. Forest plots and other findings are being created.

For the systematic review on permanent teeth, the workgroup screened titles/abstracts of more than 12,000 articles and conducted full text review of over 500 articles for exclusion or inclusion. After creating and finalizing a permanent tooth extraction form, the workgroup has started the data extraction process. The American Association of Endodontics (AAE) will announce its three selected representatives to review the draft of a jointly supported guideline in spring 2022. The Clinical Practice Guidelines will appear in both AAPD and AAE publications.

**Behavior Guidance for Pediatric Dental Patients.** The Behavior Guidance Workgroup has identified 86 systematic review articles and conducted full-text reviews for inclusion/exclusion in clinical guideline development for Guidelines on Non-pharmacological Behavior Guidance of the Pediatric Dental Patient. In addition, the workgroup has finalized PICO questions, drafted a data extraction instrument for Rating Importance of Outcomes and Quality, and is beginning the data extraction process.

The Behavior Guidance Workgroup is considering the development and distribution of a survey on use of behavior guidance techniques by AAPD members. This survey would not only provide useful data for a practical focus on the clinical guidelines, but would offer a valuable informational report/article for members treating patients needing well-chosen behavior guidance techniques.

**New Study Seeks Your Opinions on Novel Approaches to Caries Management**

Are we doing all we can to manage Early Childhood Caries? The AAPD is partnering with Columbia University to learn how pediatric dentists manage Early Childhood Caries and counsel families about caries prevention. As an active AAPD Member, you may be contacted for a 45-minute Zoom interview. In appreciation of your time you will receive a $150 VISA Bank Card.

This NIH-funded study aligns with AAPD’s policies and guidelines on Early Childhood Caries management, specifically the policy on “Unique Challenges and Treatment Options for Early Childhood Caries” calling for more emphasis on prevention and arrestment of the disease process.

We welcome your thoughts to inform the AAPD and its members about stronger preventive efforts for the oral health of children. Watch for your survey invitation in your inbox, and thank you in advance for your participation.

**Tips from EBD: Advancing Your Google Searches**

Did you know that Google has an advanced search feature? Go to the Settings at the bottom of the Google homepage to find it.

There are two main sections of the advanced search page; the search area for keywords and the limiters.

The search area for keywords is in the top half and looks like this:

The bottom portion of the advanced search screen can be utilized to limit your searches in a variety of different ways, such as language, region, and site domain, among others. With this approach, you won’t need to weed through 20,000 hits in your Google search, and you will have a more concise search strategy.
Introduction

Most dentists are familiar with the concept of a dental home¹, a physical metaphor for the ongoing relationship between a patient and a dentist offering care, information, and collaborative management of oral health. In the case of children, the traditional dental home embraces the family in recognition of the triangular constellation of parent, child, and provider. Not as familiar, or perhaps even unknown, is the concept of spatial justice which, very simply stated, is the recognition of the impact of where one lives on health.² Intuitively, and in fact, this concept explains aspects of access and availability of quality care. Distance is a very understandable aspect of spatial justice, but concepts such as nearby availability of services, comprehensiveness of locally available care, and the values and health care practices of that community are other aspects of the concept. Overwhelmed small community hospitals during the COVID-19 pandemic vividly illustrate the concept, along with vaccination obstacles due to ultra-refrigeration requirements in early versions.

In health as in real estate, it is location, location, location. The intersection of spatial justice and the dental home may not be obvious, but the lack of specialists or tertiary care facilities, existence of food deserts, lack of public transportation in rural locations, limited or no access to the internet in many communities, the prevalence of HPSAs, homes relying on well or lead-tainted water, and the longstanding maldistribution of dentists make the concept clearer. Some children can’t and maybe never will enjoy the ideal dental home. In those situations, what alternatives are acceptable? What scope and accessibility of services are adequate to provide a standard of care that can insure oral health? That question – and its answer – should be a major driver in developing and funding community-based programs for children’s oral health. A historical acceptance of “some care is better than no care” has led to inequities and their perpetuation.

The dental home concept was created to establish a touchstone against which to measure adequacy of oral health care for individuals. It also provides a yardstick for policy and programs. We remain a long way from determining measurable benchmarks to rate alternate dental homes against the idealized dental home, since confirmation of the benefits of the dental home has not faced rigorous scientific examination. The dental home was derived in large part from the concept of a medical home, which promotes the ongoing relationship between a patient and a provider. Not as familiar, or perhaps even unknown, is the concept of a dental home, since confirmation of the benefits of the dental home has not faced rigorous scientific examination.

The purpose of this commentary is to look at alternatives when the ideal is unachievable, raise issues about how they can go further to reach the benefits of a dental home, and whether the dental home concept needs an overhaul in today’s changing health environment.

Alternative Models of Care and the Dental Home

Barriers to dental care are multifaceted, and many are linked to social determinants of health. Multiple approaches have been employed to deliver dental care to vulnerable populations beyond traditional dental settings, including school-based oral health programs, medical-dental integration, and teledentistry and community partnerships.

School-Based Oral Health Programs (SBOHP)

School-based oral health aims to increase access to dental care for children in school settings who otherwise may not receive care. Programs vary as to type and range of services provided (preventive only vs. comprehensive care) and their logistical set-ups (fixed clinic inside the school, portable equipment, or mobile dental van parked on school premises). Advantages of these programs are delivering dental services to children where they are and eliminating barriers of transportation, missed school hours, missed work hours for parents, shortage of providers and difficulty with scheduling dental appointments – all factors working against a traditional dental home. These alternatives make it easier to get dental services to children, but are not without their own challenges. SBOHPs can struggle to meet the ideals of the dental home, including obtaining parental consent. This time and labor intensive process is typically completed for only 25-50 percent of eligible students.³ Another challenge resulting in low participation is parental fear of entrusting their child to someone they don’t know and wanting to be present at the appointment. Provider engagement and interaction with a caregiver is more limited in these settings compared to traditional dental settings. Comprehensiveness of services, a principle of the dental home, may not be possible. Many SBOHPs focus on preventive services, such as the provision of dental sealants and fluoride varnish. Referral of children with other treatment needs can be difficult. Coordination of care, another dental home principle, may be limited as relationships outside the SBOHP may be sparse or non-existent. Finally, sustainability can be problematic. Many programs are initiated with grant funding and rely on future grants as Medicaid revenues are often not enough to cover the cost of operation. In particular, programs utilizing mobile vans typically have high maintenance costs. Successful models tend to be part of health centers, hospitals, or school systems that have more reliable sources of funding.
Medical-Dental Integration

In this model, oral health services are provided in a primary medical care office either by a non-dental health professional or a dental hygienist embedded in the medical office. The type of services provided in these settings are typically limited to risk assessment, education, case-management and preventive services. Advantages of this model include increased access to preventive services and ease of utilization. In particular, for very young children with more medical visits early in life, this model can increase exposure to preventive services and may serve as the child’s first dental home.

Cost-benefit data analysis of fluoride varnish application in pediatric offices in Florida shows a positive financial benefit. This approach may offer sustainability through a financial incentive for medical providers to implement varnish application. However, based on claims data, the uptake of varnish application generally appears to be low among primary care providers. Less than eight percent of Medicaid-insured and fewer than five percent of privately-insured children receive fluoride varnish in medical settings. Lack of time and competing priorities are among the barriers medical providers experience that limit their engagement in oral health activities. To address these barriers, models of co-locating (independent hygiene) or embedding a dental hygienist in medical practices (Colorado) have been tried. Inability to provide on-site acute or comprehensive dental care is a major disadvantage of this model. Achievement of coordination and comprehensiveness may be difficult if dental referral sources are not there.

Teledentistry

Teledentistry includes use of various technologies for communication and sharing of clinical information, including images, to meet requirements for a remote dental visit. It can be synchronous (live interaction with the patient) or asynchronous (review of records without patient presence). The COVID pandemic accelerated its use in many places at varying paces and without time or a mechanism to assess quality of care. The limited services that can be provided by a dentist in this model include consultation and triage, oral health assessment, education, prescription, care coordination and supervision. If used in conjunction with supervision of allied dental professionals, it can also expand the range of dental services as permitted by the state dental practice act. Although the rules for teledentistry vary from state to state, services mostly include education, carries control, prevention, and care coordination.

Teledentistry can facilitate a “virtual dental home” model in community settings such as schools, Head Starts, and nursing homes. The advantage of this model is that it brings care to underserved populations and eliminates barriers of distance, shortage of providers and geographic isolation. It can result in cost-savings and add efficiencies to the system when the dentist is supervising auxiliaries remotely. This model falls short of meeting even a basic test of ideal dental home characteristics. It does not provide acute or comprehensive care, includes reliance on broadband/internet accessibility which might not be available in rural areas, and requires equipment set up and information security, as well as family literacy in technology.

Where from Here?

Defining the high bars of the dental home and their measurement means going beyond simply counting claims and other coarse indicators of utilization. To date, the Dental Quality Alliance of the American Dental Association comes closest to applicable measures, but those are still mainly indicators of utilization. The comprehensive measurement of the four “Cs” of the dental home and their applicability and contribution to health outcomes remains limited and should be a priority for research. Rather than look at an improved dental home model with integration of emerging concepts, policy often looks at unproven approaches such as increasing provider numbers, randomly trying new provider types, and surrendering to alternatives to traditional restorative and rehabilitative care that may not be in the best interests of children. Integrating models and evaluating a new and improved dental home concept is the better approach in both individuals’ care and oral health policy. Telehealth, for example, is here to stay and must be considered in a modernized version of the dental home in some way. The optimal dental home for a child, in a real world, will be found in linkages and incorporation of these alternatives into a more comprehensive, but less traditional constellation. That will be the dental home for our children in the future.

References

AAPD Member Dr. Laila Hishaw
Fighting to Bring Diversity to the Field

Oct. 10, 2021: “Dr. Laila Hishaw turned an “ah-ha” moment three years ago into a mentoring program for youngsters of color who might want to pursue a career in dentistry. Dismayed by the small number of black dentists in the United States—fewer than four percent of the total, according to the American Dental Association’s Health Policy Institute—Hishaw took action. What started as a small-scale social media campaign evolved into the Diversity in Dentistry Mentorship Program, a nationwide non-profit that promotes the profession to middle and high school students. It features dentist mentors to provide training and counseling to pre-dental students.”
https://jacksonvillefreepress.com/black-dentist-fighting-to-bring-diversity-to-her-field/

AAPD Foundation President Interviewed by ABC Chicago on Best Halloween Candy for Kids

Oct. 31, 2021: We are excited to share Dr. Czerepak’s interview on WLS-TV’s ABC Chicago (156,228 viewers and 4,474,201 unique visitors per month). The digital piece, “How to avoid tooth decay, cavities from your kids’ favorite Halloween candy” can be viewed at the link below. Dr. CZ did an excellent job relaying talking points, including multiple mentions of AAPD. The piece was also shared on the station’s Facebook (2.6M followers) and Twitter (799.6K followers) pages.
https://abc7chicago.com/halloween-candy-2021-tooth-decay-bags/11180488/

AAPD President Featured in Dec. Issue of Parents

December 2021: AAPD President Dr. Jeannie Beauchamp shares her top teeth tips and weighs in on oral health hygiene knowing snacking and sugar intake typically spikes timed to the holidays, via a syndicated news article.
MySanAntonio.com
SFGate.com
SeattlePI.com
Chron.com

AAPD Publication, Record Keeping, Highlighted Regarding Teledentistry

Dec. 2, 2021: “Record-keeping: More is Better. One bright note is an American Academy of Pediatric Dentistry publication entitled “Record-Keeping:” The academy has done a great job instructing dentists on proper record-keeping, which can be a template for any phase of dentistry.”
https://www.dentaleconomics.com/practice/article/14213460/teledentistry-avoid-these-potentially-fraudulent-mistakes

AAPD President Shares Holiday Teeth Tips

Dec. 18, 2021: AAPD President Dr. Jeannie Beauchamp shares her top teeth tips and weighs in on oral health hygiene knowing snacking and sugar intake typically spikes timed to the holidays, via a syndicated news article.
MySanAntonio.com
SFGate.com
SeattlePI.com
Chron.com

Stay up-to-date on AAPD Latest News by visiting the News Room on the AAPD website under the About section.
In October 2021, after months of careful and meticulous logistical planning, the American Board of Pediatric Dentistry (ABPD) was able to successfully administer the Oral Clinical Examination (OCE). With safety and protection of candidates, examiners, and staff in mind, rigorous COVID-19 protocols were implemented including vaccination requirements, negative PCR test result within 72 hours of arrival for everyone attending the examination, as well as mask wearing. In addition, antigen tests were routinely performed for examiners throughout the week.

A new site location was utilized this year: The AIME Center in Raleigh, NC. This state-of-the-art facility is home for the American Board of Anesthesiology clinical certification process and uses advanced technology such as iPads for vignette delivery and scoring as well as video monitoring of candidates and examiners. Due to the 2020 OCE cancellation, the decision to accommodate as many examinees as possible was made, placing board candidates’ best interests first. A total of 784 candidates were examined during this “marathon” week-long exam. ABPD is grateful to have such an incredible group of talented and experienced volunteer diplomates who left their daily practice routine to certify the next group of pediatric dentists.

Following the examination week, no cases of COVID-19 were reported, reinforcing the importance of adherence to Centers for Disease Control and Prevention (CDC) protocols. In a post-examination survey, 87% of candidates and examiners felt safe during the OCE. We all hope that the 2022 OCE can be performed under more flexible regulations. Nonetheless, if needed, a safety plan has already been successfully developed and tested.

Respectfully,
Marcio Guelmman, DDS
ABPD Secretary and OCE Liaison

Sincerely,

Emilio Agrait-Defillo
San Juan, PR
Alexander Alcaraz
Pasadena, CA
Sahar Alrayyes
Chicago, IL
Homa Amini
Dublin, OH
Salwa Atwan
Northville, MI
Kyoko Awamura
Kaiu-Kona, HI
Paul Bahn, III
Newtown, PA
Suher Baker
Portland, OR
Deepali Bhanot
Rockville, MD
Mark Boone
Virginia Beach, VA
James Boynton
Belleville, MI
Tegwyn Brickhouse
Richmond, VA
Jonathan Buenjemia
Phoenix, AZ
Mary Burke
Williamsburg, VA
Richard Burke, Jr.
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Glenn Canares
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Michael Cellitti
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Maria-Jose Cervantes Mendez
San Antonio, TX
Neeta Chandwani
Boston, MA
Willie Chao
APD, AE
Val Cheever
Riverston, UT
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Jennifer Criss
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Complex Orthodontics Case by a Pediatric Dentist
by Marc Leffler, D.D.S., Esq.

Background Facts

An 11-year-old boy presented with his father to a dental office in which two general dentists and a pediatric dentist practiced. The patient and his father met initially with a general dentist (the practice owner) to address the chief complaint of being “unhappy with how the teeth fit together.” On examination, the patient had a bimaxillary protrusion with a mixed dentition. The general dentist saw this as an orthodontics case, so he referred the patient to the pediatric dentist in the office.

The pediatric dentist (we’ll call him Dr. A) had completed his university-based specialty training about two years prior, during which he had been involved with 6 orthodontics cases under the supervision of orthodontists. Since going into private practice, he had completed two pediatric orthodontics cases and another was close to conclusion. None of those cases included the extraction of any teeth for space-gaining purposes.

Dr. A evaluated the patient clinically, as well as with panoramic and lateral cephalometric radiographs, and study models. He determined that the best treatment was to extract four bicuspids and then close the spaces created with full-arch orthodontics. Dr. A met with both parents and their child to discuss the plan, his view as to why the extractions were necessary as compared with realigning the teeth without extractions, the anticipated treatment time of 18-24 months, with retention following, and the fees. After considering for two weeks what Dr. A had discussed with them, the parents and the patient agreed to proceed. A written consent form setting all of this out was explained to — and signed by — the patient’s mother.

Dr. A asked the same general dentist (we’ll call him Dr. B) to perform the extractions of the four bicuspids, and documented that request clearly in the chart, specifying the reason. The extractions were performed uneventfully. After the initial post-extraction healing period, the patient returned for Dr. A to place upper and lower bands and brackets, and then wires, so that treatment to reduce the anterior proclination and close the now-edentulous bicuspid spaces could begin.

Several months into treatment, the parents received word from their dental insurance carrier that orthodontics was not covered under their plan. So, they asked the practice owner for a fee reduction, but he refused after what was later described as a “contentious discussion”. The parents were so upset that they decided to leave the practice, and took their son to see an orthodontist (we’ll call her Dr. C).

After performing her own work-up, Dr. C advised the parents that the extraction of the four teeth was not necessary, that the proclined upper and lower anterior teeth would best be “verticalized” without closing the edentulous spaces, and that the patient now needed to have implants placed into the four extraction sites, to be restored with individual crowns.

The parents contacted Dr. A, asking for copies of their son’s records to be sent to Dr. C, explaining what the orthodontist had told them. The office sent a copy to Dr. C, the orthodontist, as requested. However, Dr. A was very upset by the situation, and confronted the practice owner, Dr. B, saying that he felt forced into treating a complex orthodontics case beyond his abilities. This led to Dr. A resigning his position with animus feelings on both sides.

Dr. C completed the orthodontics case while working in tandem with another dentist who placed and restored four implants at the sites where the extracted bicuspids had been.

Legal action

After consulting with and retaining a seasoned dental malpractice attorney, the mother, on behalf of her son, filed a dental malpractice action against Dr. A. As would be expected, the claims in the case were that Dr. A was negligent in treating the case with the four extractions, and that he engaged in treatment which was beyond his experience and training.

The damages claims asserted that, due to the patient’s youth and expected lifespan, both the implants and restorations would need to be replaced multiple times over the course of his life. The plaintiff sought monetary damages to pay for the initial implant and restorative treatment, as well as estimates for the future costs, and pain and suffering associated with having lost four permanent teeth and emotional distress in connection with the multiple treatments planned for the future.

Discovery

The records of Dr. C, an experienced orthodontist, were obtained and they included clear statements that the extractions of bicuspids were unnecessary because this was not an extraction case. The records of the general dentist who placed and restored the implants, Dr. B, included the costs for that work, plus an estimate of costs over the patient’s estimated lifetime for replacing the implants and restorations on them.

Deposition testimony of the patient and his parents was entirely consistent with the events at Dr. A’s office and with the records of Dr. B and Dr. C. The deposition testimony of Dr. A revealed his limited experience with orthodontics as of the time of treatment, especially with regard to never before handling an extraction case, and also delved into his discussions with the practice owner regarding his having felt pushed into doing treatment beyond his comfort.
level. Dr. A, a young and introverted man, felt very intimidated by the process and “dreaded” what a courtroom trial experience would be like.

**Case Resolution**

Dr. A and his attorneys discussed the various ways the case could play out. Dr. A confided that he was losing sleep and professional confidence as the case moved along. His attorneys employed an expert, an orthodontist, who reviewed the records and deposition testimony. The expert believed that Dr. A’s treatment, but more importantly treatment planning, was appropriate, but that Dr. C’s approach would have been an acceptable alternative from the outset as well.

Considering the entire picture, Dr. A requested that attempts be made to try to settle the case before trial, and that took place in the lead-up to trial, leading to settlement.

**Takeaways**

With tuition amounts for dental school and non-residency specialty training programs as they are, the vast majority of recent graduates have a significant amount of loan debt, so their ability to obtain and maintain employment is more critical than ever. Therefore, pressures by employing dentists upon new dentists to perform procedures beyond their abilities can place these new dentists into positions of feeling that they must perform whatever treatment comes their way (even if beyond their professional abilities) in order to keep their jobs. This may put dentists into an internal battle, pitting ethical responsibilities to “do no harm” against financial obligations. It is a conflict without easy answers, but potentially severe repercussions.

That issue aside, this case raises a repeating theme in dentistry: the unabashed “throwing under the bus” of one dentist by another dentist — a concept referred to as “jousting.” Whether this is done through discussions with patients, in chart entries, by willingness to cooperate with plaintiffs’ attorneys, or all of these, dentists become engaged in this way far more frequently, at least anecdotally, than their colleagues in medicine. Why this happens is a matter of speculation, but the fact that it does lead to lawsuits, disciplinary complaints, and countless time and money spent in defense.

The often-referenced dental school quip of “put 10 dentists in the room and you’ll get 10 different opinions” has changed to “if our opinions differ, I’m right and you’re wrong”, which does not promote advancement of the profession, either among dentists alone or when involving patients. Perhaps elevating discourse in settings such as study clubs, continuing education classes, local dental society meetings, or publications would decrease this growing trend.

Disagreements between patients and dentists – especially about money – are common reasons that patients become plaintiffs. This case demonstrates one such example, namely the incorrect presumption by the parents that the treatment would be covered by insurance. While not always possible, obtaining insurance carrier responses to pre-authorization requests, before treatment is begun, will eliminate unknowns and presumptions in terms of dental costs, reducing the risk of financial disputes.

Related to this is the effect that a refusal on the part of a dentist to reduce fees, or even offer refunds under certain circumstances, can have. In this case, it was that rejected fee reduction request which started the unraveling of the dentist-patient relationship, which in turn led to seeking other care, and ultimately to litigation. It is not the purpose of this writing to advise dentists as to how to handle financial issues with patients, but it is a factor seen often by malpractice defense counsel.

Settlements of dental malpractice cases occur for various reasons. Sometimes, treatment is not able to be defended by experts, making settlement the preferred approach. But even when treatment is defensible, although questionable, pursuing the settlement option may be a matter of a dentist’s desire for resolution, so that practice and personal lives can normalize. Being involved in a lawsuit as a defendant is stressful and time-consuming, so prevention is the best medicine.

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SEEKING PEDIATRIC DENTISTS

ARIZONA—GLENDALE. Great opportunity to join our growing pediatric dental offices. We are searching for two associates to join our growing practices in Surprise and Glendale with the opportunity for future ownership/partnership. Our offices are private practices (not corporate/DSO), future ownership is not based on stock options/profit sharing, but actual business ownership. Check out our offices at www.paseoranchpd.com and www.surprisepd.com and be sure to visit the “about” tabs to learn more about our dentists and team. We are currently in search of one full-time associate (4-5 days per week) and one part-time associate (1-2 days per week), however the part-time position has the opportunity to grow into a full-time position. We have an amazing staff that is like a second family. Our offices have earned the respect and loyalty of the communities we serve. Quality of practice environment cannot be beat! Email your resume for consideration every day. With questions to: mathewjensen73@gmail.com or call or text (623) 606-2217. Must have Arizona Dental License.

ARIZONA—GOODYEAR. Part time, with potential Full time 4 to 5 days a week. Established full-time “growing” pediatric practices in 3 locations in Goodyear, AZ, Surprise, AZ, Buckeye AZ and 4th location coming to Scottsdale July 1st 2022. This successful Phoenix, West Valley, private practice group has a great advantage with an open concept. Four full time pediatric dentists and orthodontist in an open concept design. On average, our doctors are scheduled a four day work week, with one day a month (negotiable) of surgery under general anesthesia, including the local hospital. Expect minimal on-call duties, and a schedule proven to allow flexibility for family planning and personal time off. Private Insurance only - no Medicaid, 401k, and health insurance insurance available, competitive salary. Contract year to year. No weekends Good hours, Good Team Culture! Join Palm Valley Pediatric Dentistry & Orthodontics today! Doctorate D.D.S. or D.M.D. degree from a dental school accredited or eligible to become board certified through the examination process of the American Board of Pediatric Dentistry (ABPD). Must be actively licensed by the Arizona State Board of Dental Examiners. For more information please contact odolghier@gmail.com.

ARIZONA—MESA & GILBERT. We are looking for a full-time pediatric dentist to join our busy practice. We have 2 locations in Mesa and Gilbert, Arizona, and have grown consistently every year since opening over 15 years ago. We are fast-paced and see a large number of patients daily. Both practices strive to treat patients with kindness and fun - we have a great reputation and the families that bring their children to see us are very loyal to our team. The pediatric dentist that joins our practice will work 4 to 5 days per week, and we have a generous production-based pay structure. Please send your resume to azpediatricdentists@gmail.com so we can set up a phone call to give more details and get to know you better. We are looking forward to meeting you! Requirements: Dental Degree, Pediatric Dental Residency, Arizona Dental License and Oral Sedation Permit.

ARIZONA—PHOENIX/SCOTTSDALE. Part-time/Full-Time Pediatric Dentist position available. Looking for a hard working and highly skilled pediatric dentist for a busy private practice. Great opportunity to work for a highly regarded FFS practice that strives for high quality care and building relationships with our patients. North Phoenix/North Scottsdale area. Please email C.V. to lidithilhiby@gmail.com.

CALIFORNIA—CLOVIS. California KidDDs is looking for fun energetic Pediatric Dentists for the Central California area for our new office opening in Merced, CA. We are looking for someone who is kind, patient, and understanding to patients, parents, and staff. Production is 30% of both restorative and hygiene. The practice only accepts cash and PPO insurances. California KidDDs is a private locally owned large group practice of awesome pediatric dentists with the best management staff. A couple perks about the area is that it is within short driving distances to many cool places like the San Francisco Bay Area, Disneyland, Pacific Ocean, Yosemite and Sequoia National Parks, and Los Angeles. It’s a great place to raise a family with wonderful schools, affordable cost of living, parks, lakes, outdoor and community activities. Please email me at jkunkeldds@calkidds.com with any questions and your C.V. Please check out our website at www.calkidds.com to learn more about us. Requirements: California State Dental License. Board Certified in Pediatric Dentistry or in the process of Board Certification.

CALIFORNIA—PASO ROBLES. Compensation negotiable. This is a wonderful opportunity to join a professional, compassionate team with a mission of delivering quality dental care to the underserved children in San Luis Obispo County. If you are interested in working in a great, collaborative environment as well as living in a beautiful part of California, you should apply for this position. Relocation expenses negotiated based on the location. Compensation will be negotiated based on experience and workweek (3-5 days), starting range will be $172,000 - $285,000. Potential for loan repayment through SLRP and PSLF. Currently, we have offices in Paso Robles and San Luis Obispo as well as the Healthy Smiles school site program that utilizes Teledentistry. Learn more at www.tolosachildrendental.org. Live where others vacation, escape the traffic jams of the big cities and enjoy a vibrant community. With moderate weather year round, you have ample opportunity for hiking, water sports, golfing, biking and more! If you prefer indoors, we have performing arts, world famous wine and enough craft distilleries and breweries to keep you entertained. The local airport offers direct flights to 6 major cities and you can easily drive to Los Angeles and San Francisco for weekend adventures. Qualified applicants will possess a license to practice dentistry in California and will have graduated from an accredited pediatric dental residency program. Experienced dentists and recent graduates are equally encouraged to apply. If you are interested in joining our team, please contact Suzanne Russell, Executive Director, at (805) 238-2216 or suzanne@tolosadental.org.

CALIFORNIA—SAN LUIS OBISPO. Coastal Pediatric Dentistry is looking for an enthusiastic and dedicated Pediatric Dentist to join our dynamic team. This is a fast-paced and high energy practice focused on exceptional, state-of-the-art patient care with an individualized approach. Our practice is nestled in the charming town of San Luis Obispo on the beautiful Central Coast of California. Located in the heart of wine country, San Luis Obispo (SLO) is surrounded by endless hiking and biking trails, miles of spectacular beaches and coastline and, with an average 315 sunny days per year, boasts some of the best weather in the country. Coastal Pediatric Dentistry is a privately owned practice built on Dr. James Forester’s passion for providing positive dental experiences and helping kids build a foundation for a lifetime of healthy habits and exceptional oral health. We provide state-of-the-art oral care, utilizing Solea Laser Dentistry in most restorative care treatments, and maintain a completely digital practice with digital charting, x-rays, and scanners. Our practice utilizes advanced technologies including bioactive materials and ceramic crowns to improve treatment outcomes while maintaining an awareness of overall patient health. We also provide early interdisciplinary orthodontic treatment to minimize or eliminate later extensive orthodontics and to care for children affected by sleep disordered breathing. Coastal Pediatric Dentistry has built a highly respected, reputable, and progressive practice that would embrace a new associate with the same passion and desire to embrace new technologies and techniques that will benefit our patients. We are a PPO and FFS office with a very competitive compensation package, and an opportunity to pursue partial ownership within 1-2 years. Associate would start with 3 - 4 days per week, with an opportunity for future growth. Please send resume, cover letter, and personal goals to cpdentistryjobs@gmail.com. Ideal candidate is fast paced, willing to learn and grow, is full-hearted and loves to have fun at work. Candidates should have current California Dental license or be willing and eligible to license within California. Ideal candidate is Board certified or Board eligible with the ABPD.

COLORADO—COLORADO SPRINGS. My name is Josh Erickson, and I am a dual specialist in orthodontics and pediatric dentistry and I practice both disciplines. Together with my fellow docs, we are a three-location private practice specializing in both pediatric dentistry & orthodontics. We are seeking a full-time pediatric dentist to work in either our Denver Metro location or our Colorado Springs location. Two of our locations are in our own stand alone building with plans to build the third. We have built a reputation on a comprehensive smile and oral health model. We focus on high quality patient care and patient and parent experience. Individuals who would fit with our team are those who are compassionate and hard working, who are interested in treating people and not treating cavities. Someone who...
wants to connect with their community and other child health care workers. Someone who wants to grow with us and be apart of something bigger then themselves. This is a Full-Time position with medical premiums stipend, 401 (k), paid holidays, and a chance for ownership. Please email Josh Erickson at doctorwirebender@gmail.com with your cover letter and Curriculum Vitae. He can also be reached at (719) 439-9476. Requirements: Colorado Dental License, Colorado Sedation License and Graduation from an Accredited Pediatric Residency.

COLORADO—DENVER. Lowry Pediatric Dental Health’s award winning team has an exciting opportunity for a part-time (1-2 days/week) associate in beautiful Denver, CO. Our office is going on 10 years and we are looking to add a doctor to our practice. Our location is unique in that it is a large growing community and attracts a vibrant and energetic mix of patients. We offer flexibility, great pay, and a well trained staff to make your days flow easily. Check out our website at www.lowrykidsdmd.com. Please email C.V. to: lowrykidsdmd@gmail.com.

COLORADO—FORT COLLINS. Are you looking for a dream community surrounded by great outdoor activities? Fort Collins, CO, is consistently ranked as one of the best places to live. Our growing privately-owned pediatric dental practice is looking for a great doctor to join us in our beautiful Fort Collins office. We enjoy a vibrant downtown with great restaurants. There are lots of great hiking, camping, fly-fishing, hunting, and outdoor activities nearby. When you want a bigger city, Fort Collins is a quick drive to Denver—perfect for attending a show at the Buell theater, a concert at Red Rocks, or catching a Broncos game. Denver is also a great jumping off point to multiple fun destinations from its beautiful international airport. Our office is focused on providing patient-centered clinical care in a fun environment, maintaining a great team dynamic, and rewarding a strong work ethic. We strive to create a work family of long-term team members. We are looking for a candidate to join this work family who is hard-working, energetic, and focused on treating each one of our kids to the highest standards of care. This opportunity offers a great balance of autonomy, work/life balance, and space for mentorship. We maintain block time at our local surgery center. We treat each child in the way we feel will give them the best chance of having the most positive experiences possible. This position can be full- or part-time depending on the candidate. Both new graduates and experienced providers are welcome to apply. Compensation is competitive. Let’s talk! http://www.kidsfirstfc.com. For more information please contact luuwee@gmail.com.

CONNECTICUT—GALES FERRY. A well-established successful and growing multi-practice (general, pediatric and orthodontic) office located in New London County is seeking a full-time pediatric dentist. This is an excellent opportunity for a recent residency program graduate. Must be proficient in comprehensive care including oral sedation, in-office IV sedation with a dental anesthesiologist and hospital OR treatment. Full benefit package with compensation based on 50% of collections with a $1,500.00 per day guaranteed for the first three months. Please send resume to: Pat2lab@comcast.net or fax resume to (860) 464-0186.

FLORIDA—CORAL SPRINGS. American Pediatric Dental Group is looking for a pediatric dentist to work in its pediatric dental practice located in Coral Springs, FL. We are looking for a doctor who shares our values and is as passionate about helping children achieve a lifetime of healthy smiles! Come join our supported dental offices, where we do just that; support pediatric dentists by bringing them cutting edge technology, continued education, an industry leading quality care program, and mentorship. The practices are doctor owned and are dedicated to raising the standard of children’s oral healthcare! Our Pediatric Dentist Enjoy: Working for a doctor owned practice and being able to focus on patient care, while other professionals handle the business aspects of running a practice (HR, Payroll, Marketing, etc.). We also offer: Clinical Autonomy, Work/Life Balance and the ability to invest in your future - Full-time doctors have the opportunity to purchase equity in D4C. We cover your malpractice insurance, Medical, Dental, Vision and 401K. Candidate Requirements: D.D.S./D.M.D. from an accredited university. Completion of residency from an accredited pediatric program. Active Dental Board License. A positive attitude with a great personality; excellent chairside manner and communication skills. For more information please contact alex.english@d4c.com.

FLORIDA—MIAMI. Pediatric Dental Group with six locations in South Florida (Dade & Broward) is looking for Full/Part Time Pediatric Dentists. State of the art facilities. Central Nitrous Oxide. Open Dental. Saturdays available. Flexible schedules. 35% of production including prophylaxis, sealants, OH1 & X-rays. Providers daily compensation range: $1,200 to $2,100. Treatment under G.A. available at two hospitals. For more information please contact enacosta@pediatricdentalcenters.com.

FLORIDA—PENSACOLA/CRESTVIEW. We are looking for a kind and energetic Pediatric Dentist to join our private practice. We offer up to date treatment methods such as esthetic zirconia crowns, ICON tx, laser frenectomies for infants and older patients, in office IV sedation, conscious sedation, third molars, maxillary expanders for children with cleft lip or palate, treatment and create lifelong relationships with patients and their families. The Pensacola/ Panhandle area is such a great place to live and we hope you are interested in being a part of our family. We have a great team and we strive to provide quality treatment and create lifelong relationships with patients and their families. The Pensacola/ Panhandle area is such a great place to live and we hope you are interested in being a part of our family. We have a great team and we strive to provide quality treatment and create lifelong relationships with patients and their families. Our Pediatric Dental Group is looking for a pediatric dentist to work in its pediatric dental practice located in Coral Springs, FL. We are looking for a doctor who shares our values and is as passionate about helping children achieve a lifetime of healthy smiles! Come join our supported dental offices, where we do just that; support pediatric dentists by bringing them cutting edge technology, continued education, an industry leading quality care program, and mentorship. The practices are doctor owned and are dedicated to raising the standard of children’s oral healthcare! Our Pediatric Dentist Enjoy: Working for a doctor owned practice and being able to focus on patient care, while other professionals handle the business aspects of running a practice (HR, Payroll, Marketing, etc.). We also offer: Clinical Autonomy, Work/Life Balance and the ability to invest in your future - Full-time doctors have the opportunity to purchase equity in D4C. We cover your malpractice insurance, Medical, Dental, Vision and 401K. Candidate Requirements: D.D.S./D.M.D. from an accredited university. Completion of residency from an accredited pediatric program. Active Dental Board License. A positive attitude with a great personality; excellent chairside manner and communication skills. For more information please contact alex.english@d4c.com.

FLORIDA—WESLEY CHAPEL. This is a busy multiple doctor practice 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! Our Pediatric Dentists Enjoy: Working for a doctor owned practice, complete clinical autonomy and a focus on patient care without the hassle of administrative tasks. You will have the ability to invest in your future - all full-time providers have the opportunity to purchase equity in our organization. We also offer an attractive benefit package which includes Medical, Dental, Vision, Life Insurance, Disability Insurance, PTO and 401(k). SIGN ON BONUS! Candidate Requirements: D.D.S./D.M.D. from an accredited university. Completion of residency from an accredited pediatric residency program. Active Dental Board License and a positive attitude with a great personality; excellent chairside manner and communication skills. For more information please contact alex.english@d4c.com.
GEORGIA—ATLANTA. Dentistry for Children of Georgia has been experiencing tremendous growth in our patient base, and we’re looking for a Pediatric Dentist to join our dynamic practice. We offer clinical autonomy, great pay, ownership and a seasoned support staff that makes your job easier. Our Pediatric Dentists Enjoy: Working for a doctor-owned practice, complete clinical autonomy and a focus on patient care without the hassle of administrative tasks. You will have the ability to invest in your future - all full-time providers have the opportunity to purchase equity in our organization. We also offer Malpractice insurance coverage and a comprehensive benefit package which includes Medical, Dental, Vision, Life Insurance, Disability Insurance, PTO and 401(k). To learn more please visit: https://www.dentistry4children.com. Dentistry for Children of Georgia 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 other protected veteran. Required Experience: D.D.S./D.M.D. from a dental education program accredited by the Commission on Dental Accreditation. Completed a Pediatric Residency accredited by the Commission on Dental Accreditation or have at least 5 years of experience focused primarily on pediatric care. Valid, current license to practice dentistry in state where providing care (License must be in good standing) or eligible for licensure. Other certifications as required by state to include: CPR, DEA, etc. For more information please contact alex.english@d4c.com.

GEORGIA—CONYERS. Well established, thriving, solo Pediatric Dental practice in Conyers, GA seeks full time associate with serious interest in treating infants to adults. Our practice prides itself on providing exceptional care to all patients-many of whom remain in the practice into adulthood and place their trust in us to care for their children. Special needs patients are seen from infancy to adulthood. Ideal candidate will be interested in providing orthodontic treatment. Approximately 25% of revenue is generated from orthodontics. Our well trained, hardworking staff are warm and welcoming. Requirements: D.D.S./D.M.D., Certificate or MS in Pediatric Dentistry. For more information please contact pjproctordds.com.

GEORGIA—SAVANNAH. We are searching for a highly motivated, outgoing, and compassionate pediatric dentist with excellent communication and clinical skills to join our team! We seek clinicians who want to grow professionally and personally in a team-oriented environment. Recent graduates and experienced candidates are welcome to apply. We will consider both part-time and full-time candidates. We not only offer a daily guaranteed base salary, but also a generous incentive-based production bonus. Requirements: D.M.D./D.D.S. Graduation from an accredited pediatric dentistry program. For more information please contact admin@dogwoodsmissiles.com.

ILLINOIS—BUFFALO GROVE. Signing Bonus! We are seeking a licensed pediatric dentist who is team oriented, energetic and fun loving to join our practices in the cities of Buffalo Grove and Crystal Lake. These are large northwest suburbs with great patient sources. Our offices have a positive and cheery atmosphere. We are a ultra modern and high technology office. No HMO or public aid. Compensation includes health insurance, disability and life insurance, 401k, paid time off, malpractice insurance and a very competitive compensation. Come check us out at www.kidsmyl.com! For more information please contact nwilteteteethbigteeth@gmail.com.

ILLINOIS—CHICAGO. We are seeking a board certified/eligible, licensed pediatric dentist to join our team in the Chicagoland area. We are a FFS practice that provides care for infants, children, teens, medically complex and special needs patients. Full or part time positions are available. This position offers a generous salary, excellent patient base and future buy-in potential. Licensed pediatric dentist in the state of Illinois. Board certified or board eligible. For more information please contact pinendental@gmail.com.

ILLINOIS—FOREST PARK. We are seeking a board certified/eligible, licensed pediatric dentist to join our team in the Chicagoland area. We are a FFS practice that provides care for infants, children, teens, medically complex and special needs patients. Full or part time positions are available. This position offers a generous salary, excellent patient base and future buy-in potential. Licensed pediatric dentist in the state of Illinois. Board certified or board eligible. For more information please contact pinendental@gmail.com.

INDIANA—SOUTH BEND. Our busy, growing pediatric practice is looking for the right candidate to replace our senior dentist who is retiring from patient care. Compassionate, friendly and a desire to provide excellent care is what we are looking for. Our 20-year-old practice is led by four like-minded pediatric dentists and is fully staffed with excellent expanded duty dental assistants, hygienists and administrative personnel. We have two beautiful offices contemporary in design, space and function. Our practice provides the full scope of preventive and restorative care from ages newborn to 18 years. We have privileges at a local hospital, surgery center, as well as offering in-office general anesthesia. Our highly respected practice is the result of our commitment to providing personalized care in an environment comfortable for both parents and children of all ages. We are located in north central Indiana and enjoy a very reasonable cost of living with large city amenities available in nearby Chicago, Indianapolis and Detroit. We are a short drive to the beautiful west coast of Michigan with plenty of outdoor activities throughout the four seasons. Competitive compensation and benefits, associate leading to partnership as desired. Real estate ownership is an opportunity in future as well. We are willing to wait for the right person, so first-year residents are encouraged to apply. To learn more about us, please visit our website.
at www.northpointkids.com or feel free to contact me personally at djfish@gmail.com. If you are interesting in being considered for the position, please submit cover letter and C.V. to the email previously noted. Thank you. David F Fishbaugh, D.D.S., MSManaging Partner. North Point Pediatric Dentistry. Requirements: Board eligible or board certified necessary for out patient privileges.

INDIANA—SOUTH BEND. At The Dental Center of South Bend (Dentistry and Braces for Children and Teenagers), we begin seeing patients as early as age 12-18 months. Establishing rewarding and lasting relationships with our patients is important to us. We pledge excellence in all we do, and we are looking forward to helping you make the most of your smile now and for all the years to come. Experience the difference with The Dental Center of South Bend - Smile Safari. Pediatric Dentist w/Partnership Opportunity. We are currently looking for Full-Time Pediatric Dentists or General Dentists with strong interest in Pediatrics, to join our exceptional team of SPEYS/SLIs. We seek dedicated exceptional clinicians who want to grow professionally and personally. We offer an outstanding compensation package (including, salary + bonus, 401K, medical insurance, malpractice, CE, Sign-on Bonus, relocation), as well as, a partnership opportunity for those seeking a long term family-oriented position. Contact us and be excited by the many clinical opportunities we have available. We practice all phases of Pediatric Dentistry to include: Hospital Dentistry, SHCN, Tethered Oral Tissues, Space Maintenance, Early Orthodontic Treatment; Phase 1 orthodontics, and INVISALIGN. We also utilize DENTAL, Wave One Gold endodontic systems for simple definitive root canal treatments. Trained and well experienced Expanded Function Dental assistants are available to provide definitive care within their scope of practice. Contact us to find out more before making your next career move. We have been working diligently to ensure all our patients and staff feel safe and protected while in our office. We now have Plexi-glass Barriers in the reception area and in selected clinical areas. We have all the proper PPE for the staff and are CDC COVID-19 compliant.Requirements: Completion of Pediatric Dentist Residency. Licensed to practice dentistry in the State of IN. The Dental Center of South Bend Smile Safari is a highly successful affiliated specialty practice of Dental Care Alliance(DCA). Dental Care Alliance. Stronger Together. For more information please contact bannes@dentalcarealliance.net, or visit our website at www.dentalcarealliance.net.

IOWA—DAVENPORT. Alex Brandtner’s Children's Dentistry is looking for a pediatric dentist to work in its pediatric dental practice located in Davenport, IA. We are looking for a doctor who shares our values and is passionate about helping young children achieve a lifetime of great oral health! Come join our supported dental office, where we do just that; support pediatric dentists by bringing them cutting-edge technology, well trained support staff, and mentorship. The practice is doctor-owned and is dedicated to our mission of raising the standard of children’s oral healthcare! Our Pediatric Dentist Enjoy: Working for a doctor-owned practice and being able to focus on patient care, while other professionals handle the business aspects of running a practice (HR, Payroll, Marketing, etc.). We also offer Clinical Autonomy, Work/Life Balance and the ability to invest in your future - Full-time doctors have the opportunity to purchase equity in D4C. We cover your malpractice insurance, Medical, Dental, Vision, PTO and 401K. Generous sign on bonuses are offered! Current residents are encouraged to apply. Candidate Requirements: D.D.S./D.M.D. from an accredited university, completion of residency from an accredited pediatric residency program, an Active Dental Board License and a positive attitude with a great personality; excellent chairside manner and communication skills. For more information please contact alexenglish@d4c.com.

IOWA—URBANDALE. Children’s Dental Center of Iowa is looking for a pediatric dentist to work in its pediatric dental practice located in Urbandale. We are looking for a doctor who shares our values and is passionate about helping children achieve a lifetime of healthy smiles! Come join our supported dental office, where we do just that; support pediatric dentists by bringing them cutting-edge technology, well-trained support staff, and mentorship. The practice is doctor-owned and is dedicated to our mission of raising the standard of children’s oral healthcare! Our Pediatric Dentist Enjoy: Working for a doctor-owned practice and being able to focus on patient care, while other professionals handle the business aspects of running a practice (HR, Payroll, Marketing, etc.). We also offer Clinical Autonomy, Work/Life Balance and the ability to invest in your future - Full-time doctors have the opportunity to purchase equity in D4C. We cover your malpractice insurance, Medical, Dental, Vision, PTO and 401K. Generous sign on bonuses are offered! Current residents are encouraged to apply. Candidate Requirements: D.D.S./D.M.D. from an accredited university, completion of residency from an accredited pediatric residency program, an Active Dental Board License and a positive attitude with a great personality; excellent chairside manner and communication skills. For more information please contact alexenglish@d4c.com.

MARYLAND—BALTIMORE. Dentistry for Children of Maryland is looking for a pediatric dentist to work in its pediatric dental practices located in Davenport, Cedar Rapids, and Coralville. We are looking for doctors who share our values and are passionate about helping children achieve a lifetime of healthy smiles! Come join our supported dental office, where we do just that; support pediatric dentists by bringing them cutting-edge technology, well-trained support staff, and mentorship. The practice is doctor-owned and is dedicated to our mission of raising the standard of children’s oral healthcare! Our Pediatric Dentist Enjoy: Working for a doctor-owned practice and being able to focus on patient care, while other professionals handle the business aspects of running a practice (HR, Payroll, Marketing, etc.). We also offer Clinical Autonomy, Work/Life Balance and the ability to invest in your future - Full-time doctors have the opportunity to purchase equity in D4C. We cover your malpractice insurance, Medical, Dental, Vision, PTO and 401K. Requirements: D.D.S./D.M.D. from an accredited university, completion of residency from an accredited pediatric residency program, an Active Dental Board License and a positive attitude with a great personality; excellent chairside manner and communication skills. For more information please contact alexenglish@d4c.com.

MARYLAND—FREDERICK. Wonderful practice opportunity for a Pediatric Dentist in one of the fastest growing communities in the state of Maryland. Beautiful new office with state-of-the-art finishes and technology including Nitrous, digital imaging, and iTero scanner. Located in a family-oriented community in Urbana, MD featuring sought after schools, sports programs, and recreation. This office would make an excellent primary office or satellite office with the autonomy to make practice decisions including hours of operation and staff. Excellent potential for growth and longevity, and to grow your pediatric dental practice in a way that you have always envisioned, without all the risk and debt. For more information, please contact Dr. McTavish at (301) 704-4670 or email jmctavish@gmail.com.
MARYLAND—SILVER SPRING. Excellent opportunity for a pediatric dentist to join a well 7 years established pedo dental office in the Silver Spring, Maryland area. We are looking for an energetic and team focused Pediatric Dentist to join our growing team. This is not a corporation. The ideal candidate must hold a certificate in Pediatric Dentistry and have excellent clinical and communication skills. In office sedation, nitrous oxide, Hospital Dentistry is including in our job. Compensation is based on the production and the collection. Requirements: 1- At least 2 years experience as a Pediatric Dentist. 2- In office sedation. For more information please mention kidzfamilydental@gmail.com.

MARYLAND—SILVER SPRING. Do you love seeing smiles on the face of children? Would you like to work in an environment where you and your patients are treated like family? Join our team! Our beautiful state of the art practice is located right outside our nation's capital. We are in search of individuals with a passion for educating patients and parents in oral hygiene. Individuals who are kind, compassionate, confident and can listen as well as provide sound advice will thrive in our busy practice. We have a unique philosophy of idea sharing and practice management that allows you to focus on providing superior dentistry and leave the rest to us! Our hours are Monday through Thursday from 8-5 and 1-2 Fridays per month from 8-1. However, we will consider a part time position if requested. A Generous Benefits package is included for a full time position. Please email your C.V. to mandy@funsmiles.com. Requirements: Pediatric Dental Certificate, Dental License, DEA, MD CDS.


MICHIGAN—CHESTERFIELD. Well established pediatric dental and orthodontic office serving Metro Detroit area for over 6 years is seeking a motivated and caring pediatric dentist. Our practice, which is non-corporate has a passion for treating children. We are seeking both part-time and full-time opportunities. Experience is welcomed, mentorship available. We offer a very competitive salary and benefit package for the right person including CE allowance and malpractice insurance. We have 3 very modern offices with state-of-the-art equipment, OR privileges at two area hospitals, and in office GA available. To find out more information about our office, please contact Julie Spinek at julie@growingsmiles-md.com.

MICHIGAN—LINCOLN PARK. We are an expanding pediatric Dental practice located in Lincoln Park, MI. Our practice is dedicated to giving our young patients the best dental care available. We pride ourselves on providing a happy stress free setting for our little guys and girls by providing using AAPD behavior techniques and general anesthesia for comfort during dental procedures. We are searching for a Pediatric Dentist that is passionate about providing excellent dental health to our community. We have an amazing team here to help you achieve your personal goals as well as the practice goals. We average 130-150 new patients per month. Requirements: Active Michigan Dental License. Active Malpractice Insurance. Active Michigan Pediatric Dental License. Active DEA and Controlled substance for the state of MI. CPR certified, Basic Life Certification. Current C.V. should be e-mailed to kids1stdentistry@gmail.com.

MINNESOTA—SARTELL. Excellent opportunity for a pediatric dentist seeking to join a thriving, prevention based practice with multiple locations. Our new and recently renovated offices are located in central Minnesota, approximately one hour northwest of Minneapolis/St. Paul. It’s a wonderful community for individuals and families who are looking for a great place to work and live while enjoying all the recreation Minnesota has to offer. The greater St. Cloud area serves as a medical hub for all of central Minnesota which attracts many young and talented professionals. Downtown St. Cloud boasts a vibrant art scene (recently voted top 20 in the nation), active local businesses, and a variety of dining and drinking experiences. Excellent early childhood and parent educational programs are complemented by strong primary and secondary schools. Central Minnesota offers the opportunity to advance your career quickly while providing an ideal location to explore the great outdoors and enjoy the amenities of the Twin Cities. We are seeking a part-time or full-time associate with great clinical and communication skills as well as a strong work ethic. Partnership track is available for the right candidate with such aspirations. We pride ourselves on a generous, competitive compensation package that is based on collections with a guaranteed base salary. Benefits include, but are not limited to allowances for: health insurance, malpractice insurance, continuing education and membership dues, cell phone and auto. Previous and current associates have consistently surpassed their base salary their first year of employment. Please e-mail or send letter of interest, curriculum vitae and references to the address below: Dentistry For Children, Attention: Dr Mitch Kramer, 560 River Rd., Sartell, MN 56377. Phone: (320) 257-3380 (office), Email: kramer@dfckids.com. Web: www.dfckids.com.

NEW JERSEY—BROWNSTOWN. Excellent opportunity for a motivated and dedicated pediatric dentist to join our reputable and quickly growing pediatric dental practice in the Triangle area. Our practice is growing in leaps and bounds! Our office boasts hundreds of five star reviews and we pride ourselves on providing exceptional dental care and service at every visit. At Little Tooth Co, our team is highly qualified, highly specialized, child-centered and strictly dedicated to the specialty of pediatric dentistry. We understand the individuality that each child brings to our office, including those with medical and special needs, and treat all children from infancy to teenage years as if they were our own. Our office places value on efficiency, patience, mutual respect, prevention and education. We work hard to maintain the highest standard of care with personalized, innovative approaches, clinical excellence and emotional sensitivity - all in our modern and updated office. Our office offers services ranging from prevention, education, minimally invasive dentistry, anxious patients with nitrous oxide and/or Valium, as well as general anesthesia in both in-office and surgery center settings. In addition, we have the opportunity to place a zirconia crowns and diagnose/treat tethered oral tissues. Candidates must have excellent chairside manner, a positive attitude and strong communication skills. Must be either board-certified or board-eligible. New graduates of an accredited pediatric residency program are encouraged to apply. This is an excellent opportunity for either a seasoned pediatric dentist or a new graduate seeking mentorship. This is especially ideal for someone who is seeking a great work-life balance and the potential for partnership. Our office is located in Apex, within the highly desirable Triangle area of North Carolina. Weekend calls are limited to only two weekends per calendar year and office hours are lifestyle friendly. Generous compensation package includes: sign-on bonus, 401K with match, CE allowance, and a 2 year partnership track if interested. Please submit your resume to jeanyou.dds@gmail.com and we will be in touch with you. Serious inquiries only.

NEW YORK—CLIFTON PARK. The Smile Lodge is located in Clifton park New York and is looking to grow its team of dental marvels! Many of our doctors right out of school make over $350,000 in their first year. This job not only offers very competitive benefits, but also exponential growth for the right leader. We offer both a three day and four day a week option. Avenging dental disease and serving the underserved is what we do. Working as a high-functioning, passionate team is how we do it. One can only appreciate our hows and what’s once they have experienced our passion for our why. We invite you to visit The Smile Lodge at your convenience! Benefits Highlights: 6 Weeks of Vacation, Licenses, Dues, MLMIC, and CE Reimbursement. Healthcare Insurance Stipend. 401K Contribution. Long-term Disability Insurance. For more information contact The Smile Lodge at avengers@smilelodge.com.

NORTH CAROLINA—APEX. Excellent opportunity for a motivated and dedicated pediatric dentist to join a reputable and quickly growing doctor-owned pediatric dental practice in the Triangle area. Our practice is growing in leaps and bounds! Our office boasts hundreds of five star reviews and we pride ourselves on providing exceptional dental care and service at every visit. At Little Tooth Co, our team is highly qualified, highly specialized, child-centered and strictly dedicated to the specialty of pediatric dentistry. We understand the individuality that each child brings to our office, including those with medical and special needs, and treat all children from infancy to teenage years as if they were our own. Our office places value on efficiency, patience, mutual respect, prevention and education. We work hard to maintain the highest standard of care with personalized, innovative approaches, clinical excellence and emotional sensitivity - all in our modern and updated office. Our office offers services ranging from prevention, education, minimally invasive dentistry, anxious patients with nitrous oxide and/or Valium, as well as general anesthesia in both in-office and surgery center settings. In addition, we have the opportunity to place a zirconia crowns and diagnose/treat tethered oral tissues. Candidates must have excellent chairside manner, a positive attitude and strong communication skills. Must be either board-certified or board-eligible. New graduates of an accredited pediatric residency program are encouraged to apply. This is an excellent opportunity for either a seasoned pediatric dentist or a new graduate seeking mentorship. This is especially ideal for someone who is seeking a great work-life balance and the potential for partnership. Our office is located in Apex, within the highly desirable Triangle area of North Carolina. Weekend calls are limited to only two weekends per calendar year and office hours are lifestyle friendly. Generous compensation package includes: sign-on bonus, 401K with match, CE allowance, and a 2 year partnership track if interested. Please submit your resume to jeanyou.dds@gmail.com and we will be in touch with you. Serious inquiries only.

NORTH CAROLINA—BOLIVIA. Our Pediatric Doctors are celebrating 5 years and a new building! We are looking for a pediatric dentist that loves having fun at the beach. Could that be you? We are a well-established and growing pediatric practice located in coastal Brunswick County, NC. This area, is only minutes from the beach and a great place to live and raise a family. Our well-trained pediatric team has been providing comprehensive pediatric dental care; including interventional ortho
and airway treatments to this community since 2016. A new state-of-the-art building with more space and the latest technology will be waiting for the right doctor to join our busy pediatric team in August 2022. Don't wait to scoop up this unique opportunity to start your career in a great work environment, with solid values and room to grow. At Coastal Pediatric Dentistry we strive to provide the highest quality of dental care to children in a warm, caring, and fun-for-kids environment. Our team is committed to treating kids and their parents in an extraordinary way. We are never complacent; we are always seeking improvement. We have compassion and positive energy to share with patients and our team, and kids love it. We are highly professional but we like to have fun! An ideal candidate would be in sync with these values, enjoy working in a fast-paced well-organized pediatric office and appreciate being valued and rewarded. The best part is you can focus solely on pediatric dentistry! Our team will handle marketing as well as new patient generation and all administration. Our doctors regularly obtain more than the required CE to stay abreast of our newest technology and treatment. Our whole team is constantly pursuing improvement. Our owners are actively involved in day-to-day operations of the practice. They treat patients, train and mentor our doctors and the entire team. If you are interested in an opportunity with a practice that kids (and parents) LOVE coming too, please forward your C.V. or resume to careers@ccfmdmail.com. Hear from our doctors about our practice at https://www.youtube.com/watch?v=tbq7lpDuLCU. Benefits include: Relocation Package, Healthcare, Dental Benefits, 401K, Vacation, Malpractice Coverage, CE reimbursement, Mentorship, Community Outreach / Marketing.

NORTH CAROLINA—CHARLOTTE. We are a multi-location pediatric dental practice with offices in North Carolina and South Carolina. We value teamwork and collaboration with colleagues and staff, and look forward to building lasting relationships with our patient families. We have a diverse team of doctors that take pride in providing quality care to children. Our core value of inclusivity extends beyond our team of doctors and staff to our patient families, empowering us to bring happy and healthy smiles to the community. For more information please contact practiceadmin@southparkped.com.

NORTH CAROLINA—CHARLOTTE. The Top 10 Reasons to join Charlotte Pediatric Dentists: Privately Owned and Operated. Genuine Commitment to Team Member Satisfaction. Excellent Earning Potential. Multiple Locations with Full Schedules. Company Growth = Personal Growth. Emphasis on a Healthy Work/Life Balance. State-of-the-Art Offices. Well Trained Support Teams. Minimal Administrative Responsibilities. Learn from Nationally Recognized Award Winning Doctors. We currently have two exciting opportunities for associate doctors who want to join a growing group of practices with partners who genuinely care about every team member. Applicants who truly love working with children and embrace our “the patient comes first” philosophy will thrive. Offices throughout the Charlotte area with immediate opportunities to work at any one of our Charlotte Pediatric Dentists offices and one full time position open for the Kannapolis office. Enjoy a guaranteed day rate with unlimited earning potential - hard work and flexibility is rewarded. Compensation based on monthly collections: 30% up to $50,000, 32.5% up to $75,000, 35% at $100,000+. Benefits: 401(k), Dental insurance and Health insurance. Schedule: Monday through Friday, Expectation of one half day Saturday per month. Early finish Fridays for long weekends. Rare Emergency Call Flexibility. Supplemental Pay:Bonus pay. Signing bonus. Work Location: Multiple Locations Must have a love of treating children and a true commitment to flexibility where the patient always comes first. For more information please contact sean@fiftyeightllc.com.

NORTH CAROLINA—WINSTON SALEM. Excellent opportunity is waiting for you to join a prosperer private pediatric dental practice in Winston Salem North Carolina. If you are just getting started or want new experiences, come and join me as an associate dentist in our modern 4,000 square feet practice. We are paperless and we have Dentrix Software and Digital X-rays. Our roomy office is patient/parent friendly with multiple private rooms and 2 bay areas with N2O. We focus on preventative dentistry and have networked our clinical area with educational programming. Our friendly and bilingual staff is fully trained, and you have no administrative duties. Guaranteed Starting Salary $275,000.00 per year. This opportunity along with your guaranteed salary will include loan repayment, medical benefits, vacation, malpractice insurance and health insurance. Contact: Amelia Foster. Phone: (336) 451-1957. Office: (336) 230-0346. Email: pedodds@ pedodctor.com.

OHIO—DUBLIN. Haring Pediatric Dental has been experiencing tremendous growth in our patient base, and we’re looking for a Pediatric Dentist to join our dynamic team! This opening is in our established specialty practice in Dublin, OH. This is a busy multiple doctor practice where the needs of the patient always come first. It will be a rewarding opportunity for a doctor who is looking for clinically autonomy and enjoys working with other providers. We are seeking a provider who has a passion for working with children. Our practice focuses on educating our patients while creating a fun and comfortable atmosphere for children, parents and our staff. We offer clinical autonomy, great pay, equity, and a seasoned support staff that makes your job easier. Our Pediatric Dentists Enjoy: Working for a doctor-owned practice, complete clinical autonomy and a focus on patient care without the hassle of administrative tasks. You will have the ability to invest in your future - all full-time providers have the opportunity to purchase equity in our organization. Enjoy working alongside other pediatric dentists and orthodontists. Malpractice insurance coverage. Comprehensive benefit package which includes Medical, Dental, Vision, Life Insurance, Disability Insurance, PTO and 401(k). Requirements: D.D.S./D.M.D. from a dental education program accredited by the Commission on Dental Accreditation. Completed a Pediatric Residency accredited by the Commission on Dental Accreditation or have at least 5+ years of experience focused primarily on pediatric care. Current, valid license to practice dentistry in state where providing care (License must be in good standing) or eligible for licensure in state. Other certifications as required by state to include- CPR, DEA, etc. For more information please contact alex.english@d4c.com.

OHIO—UNIVERSITY HEIGHTS. Come Grow with Us! Established multi-location, state-of-the-art private pediatric dental practice in the suburbs of Cleveland, OH, is looking for a Pediatric Dentist. We are seeking a provider for 3-5 days a week as we offer comprehensive dental care: preventative, restorative, N2O, and hospital dentistry. The candidate should be passionate about creating a positive dental experience for our patients while partnering towards great oral health! The candidate must possess strong ethical values, a great personality, and value patient education. Applicant must be qualified to administer in office nitrous oxide and to obtain hospital privileges. Our fast-paced practice relies on a wonderful team that includes Hygienists, Dental Assistants, a Manager and Front Desk staff. In addition will work with a part-time senior Pedodontist. We offer a competitive salary including health benefits including medical, vision, and dental, malpractice reimbursement, 401k savings plan, CE paid time off and a generous signing bonus. Earning potential of $150,000 to $400,000. If you are passionate about providing excellent dental care with a highly experienced staff, please send your resume info@growingmilesoh.com.

OREGON—AROUND PORTLAND. At Acorn Dentistry for Kids, our mission is to promote health and well-being through Entertainment and Education in a Magical Environment of Safety, Comfort and Fun. To us, the experience we provide is more than just good dentistry. It is about creating a memory that kids and parents look forward to doing again and again. Are you a miracle worker that can transform that dental experience with us, or want to be mentored to become one? Our doctor group is humble, collaborative, and looking to grow both individually and as a team. Acorn Dentistry for Kids is a private practice with a public health mindset. We exist because of the belief that Every Child Gets A Smile, whether on private insurance, Medicaid, or no insurance. We make it possible for every child to have what we call “Magical Moments.” Do you align with that vision for the community in which you work? We are looking for purpose-driven pediatric dentists that want to grow along with our expanding private group practice. We are on track for opening a new pedo/ortho clinic as well as expanding a couple of our existing practices. We need you, and our patients need you! There are so many great benefits to living in the area around Portland, Oregon. Our clinic is centrally located for easy access to the Oregon coast. The Columbia River Gorge and Cascade Mountains with 4 season recreational opportunities are also near. Big city life and quaint small towns are equally accessible. Our temperate climate means we don’t have to worry about tornados, major floods, or hurricanes, and the local food is fantastic! Have you thought about doing international mission trips? We just started a non-profit organization named Acorn Kids International, whose purpose is to grow our magical moment emphasis around the world! This is bigger than a single clinic, we are starting a locally-led, globally-minded movement! Doctor benefits include a generous amount of doctor mentorship, a great signing bonus, a guaranteed daily base pay, 401k plan, medical/dental/vision insurance, all licensing and malpractice insurance fees paid, as well as a generous CE stipend. If you are thinking long term, we also have a simple path to partnership, a seasonally invested, and grow financially as part of our fast-growing group. Please email timrichardsomds@gmail.com to find out more about this remarkable experience. We look forward to sharing this incredible journey with you.
OREGON—GRANTS PASS. Full-time Pediatric Dentist Opportunity in Grants Pass, OR. 3-5 Days Per Week. At SmileKeepers, the perfect fit for our team is a caring and motivated person-people person with a strong work ethic and superior clinical skills. You choose what’s best for your patients. We are looking for a full-time Pediatric Dentist to practice at our Grants Pass, OR office. Generous sign on bonus provided. Location: Gentile Dental Grants Pass office - 1201 NE 7th Street, Suite A Grants Pass, OR 97526. Office Culture: Teamwork in the patients best interest. Quality patient care with clinical autonomy based on best practices in the patients best interest. New patients assigned equally on rotation basis. Your patients stay with you. This location is a National Health Service Corps (NHSC) Approved Site. Benefits Include: Healthcare Package (Medical, Dental, Vision, Short and Long term disability, 401k and additional Pre-tax saving plan. Life Insurance, CE credits, Malpractice, Additional CE credits and partial License and DEA reimbursement after 2 years. Position Qualifications: Must have completed a Pediatric Dentistry Residency. Active OR Dental License in good standing (or the ability to acquire one by time of employment). Other Licenses/certifications such as CPR, DEA, NPI. This position qualifies for Oregon loan repayment programs: We are proud to serve areas with low access to oral care. Because of this commitment, this location qualifies for the Oregon Health Care Provider Loan Repayment and the Scholars for a Healthy Oregon Initiative programs. Here you can receive up to $50,000 in student loan repayment per year, while still being within 20 minutes of the nearest regional airport. The area features everything from world class vineyards to national parks to growing towns and communities. Our offices are adhering to the current COVID-19 state mandates that require all employees who work in healthcare offices to be fully vaccinated as a condition of employment. For more information, please reach out to Jeff Farrell, Talent Acquisition Manager, at Farrell.Talent@InterDent.com.

PENNSYLVANIA—PITTSBURGH. Located in Pittsburgh, PA, we seek a dentist who has successfully completed a pediatric dental residency to join our team in a full-time or part-time capacity. You will be the 2nd dentist on staff with this successful and growing practice. Competitive compensation and we will work with you to achieve your professional and financial objectives. Generous benefits available. Successful completion of a pediatric dental residency is required. For more information please contact hr@terrificteethpd.com.

PENNSYLVANIA—PITTSBURGH. We are in search of a pediatric dentist to join our growing practice. We can offer 4 days per week, salary-based pay. Our offices are equipped to provide nitrous oxide and IV sedation, and all dental anxious patients. Local surgery center utilized for GA. Oral sedation is not used in our office. If you are interested, please send your C.V. to our office manager, Sara, at ssccrist.pds@gmail.com. To learn more about our practice, please check out our website. Requirements: D.D.S./D.M.D. Pediatric Dental residency completed.

RHODE ISLAND—CRANSTON. Well established pediatric dental office serving the Rhode Island community for over 35 years is seeking a motivated and caring pediatric dentist. Our practice, which is non-corporate is owned/managed by three Diplomates of the American Board of Pediatric Dentistry who have a passion for treating children. The position is initially part time or full time, with goal of full time leading to partnership track. Experience is welcomed, mentorship available. We offer a very competitive salary and benefits package for the right person, including health care, CDE allowance, malpractice insurance and more. If moving from out of state, we will reimburse packing/moving fees. We have two modern offices equipped with the latest digital technology including all digital radiographs. Our offices are located near the beach, a place with the best League institution, and the culture and diversity of Providence, RI. To find out more information about our office, please contact Nicole Robbio at ntrobbo@peddentist.com or call (401) 943-7535.

SOUTH CAROLINA—CHARLESTON. Coastal Kids Dental and Braces is looking for a pediatric dentist to work in its pediatric dental practices located in Charleston, SC. We are looking for a doctor who shares our values and is as passionate about helping children achieve a lifetime of healthy smiles! Our Pediatric Dentist Enjoy: Working for a doctor owned practice and being able to focus on patient care, while other professionals handle the business aspects of running a practice (HR, Payroll, Marketing, etc.). We also offer Clinical Autonomy and the ability to invest in your future - Full-time doctors have the opportunity to purchase equity in DPC. We encourage multi-specialty insurance. We are seeking: Medical, Dental, Vision, PTO and 401K. Sign on bonuses offered! Current residents are encouraged to apply. Coastal Kids Dental and Braces 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, sex, national origin, sexual orientation, gender identity, national origin, or status as a qualified individual with a disability or Vietnam era or other protected veteran. Candidate Requirements: D.D.S./D.M.D. from an accredited university. Completion of residency from an accredited pediatric residency program. Active Dental Board License. A positive attitude with a great personality; excellent chairside manner and communication skills. For more information please contact alex.english@d4dc.com.

SOUTH CAROLINA—GREENVILLE. Ashby Park Pediatric Dentistry has been experiencing tremendous growth in our patient base, and we’re looking for a Pediatric Dentist to join our dynamic team! This opening is in our established specialty practice in Greenville, SC. This is a busy multiple doctor practice where the needs of the patient always come first. We will be rewarding opportunity for a doctor who is looking for clinically autonomy and enjoys working with other providers. We are seeking a provider who has a passion for working with children. Our practice focuses on educating our patients while creating a fun and comfortable atmosphere for children, parents and our staff. We offer clinical autonomy, great pay, ownership and a seasoned support staff that makes your job easier. Rated “The South’s Most ‘Tasteful’ Small Towns” according to Forbes in 2020, Greenville continues to expand rapidly, which is evident from population growth. Office Culture: Teamwork in the patients best interest. Quality patient care with clinical autonomy based on best practices in the patients best interest. New patients assigned equally on rotation basis. Your patients stay with you. This location is a National Health Service Corps (NHSC) Approved Site. Benefits Include: Healthcare Package (Medical, Dental, Vision, PTO and 401K). Sign on bonuses offered! Current residents are encouraged to apply. Pediatric Kids Dental and Braces 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, sex, sexual orientation, gender identity, national origin, or status as a qualified individual with a disability or Vietnam era or other protected veteran. Candidate Requirements: D.D.S./D.M.D. from an accredited university. Completion of residency from an accredited pediatric residency program. Active Dental Board License. A positive attitude with a great personality; excellent chairside manner and communication skills. For more information please contact alex.english@d4dc.com.

SOUTHERN—KNOXVILLE. We welcome new and experienced pediatric dentists to apply. Excellent opportunity for a confident, highly motivated and professional pediatric dentist with great work ethic to join our friendly, well-trained team in the Knoxville, TN area. Possible purchase partnership available. Benefits: Upscale and modern fully digital office. Flexible scheduling including full time or part time options. Autonomy over treatment planning. Treatment options include in office IV sedation with anesthesia team and N2O. Working with well-seasoned collaborative group including dentists, dental assistants and dental hygienists. Working with pediatric population ages 0-19. In-office procedures include general restorative procedures. 7:30 am - 4:00 pm Monday-Thursday. Requirements: A certification in Pediatric Dentistry (or in a residency program to obtain certification). Please e-mail C.V. to michaeljkoehch@yahoo.com.

TEXAS—AUSTIN. Lone Star Pediatric Dentistry is looking for a pediatric dentist to work in its pediatric dental practices located in Austin, TX. We are looking for a doctor who shares our values and is as passionate about helping children achieve a lifetime of great oral health! Come join our supported dental office, where we do just that; support pediatric dentists by bringing them cutting edge technology, continued education, an industry leading quality care program, and mentorship. The practice is doctor owned, and is dedicated to our mission of raising the standard of children’s oral healthcare! Our Pediatric Dentist Enjoy: Working for a doctor owned practice and being able to focus on
patient care, while other professionals handle the business aspects of running a practice (HR, Payroll, Marketing, etc.). We also offer Clinical Autonomy, Work/Life Balance and the ability to invest in your future - Full-time doctors have the opportunity to purchase equity in D4C. We cover your malpractice insurance, Medical, Dental, Vision, PTO and 401K. Candidate Requirements: D.D.S./D.M.D. from an accredited university. Completion of residency from an accredited pediatric residency program. Active Dental Board License. The prospective candidate should be well versed in dental technologies including: chart-less system, electronic charting, built-in nitrous oxide system and in-office monitored sedation along with IV sedation. Please contact Bradley Harris, D.M.D. at cpdpuffin@gmail.com.

TEXAS—EL PASO. Hello Applicant, I am currently looking for an experienced pediatric dentist to join me full time at my El Paso office. Its a great opportunity for anyone looking to grow. We open Monday through Friday and offer a flexible scheduling. The pay is 34% of all production including radiographs, prophies, sealants, everything. New pedo grads welcome to apply too. The office is 3 years old and we are growing, its a very clean and modern office. The patients love us, over nine hundred 5 star reviews. One of the best parts of El Paso, the cost of living is very cheap and El Paso airport offers many direct flights to major airports. Texas Dental License required. For more information please contact drviera@kidsetaldentalpaso.com.

TEXAS—FORT WORTH. iKids Pediatric Dentistry and Orthodontics is looking for a pediatric dentist to work in its pediatric dental practices located in Fort Worth and Arlington. We are looking for a doctor who shares our values and is as passionate about helping children achieve a lifetime of health smiles! Come join our supported dental office, where we do just that; support pediatric dentists by bringing them cutting edge technology, continued education, an industry leading quality care program, and mentorship. The practice is doctor owned and is dedicated to our mission of raising the standard of children’s oral healthcare! Our Pediatric Dentist Enjoy: Working for a doctor owned practice and being able to focus on patient care, while other professionals handle the business aspects of running a practice (HR, Payroll, Marketing, etc.). We also offer Clinical Autonomy, Work/Life Balance and the ability to invest in your future - Full-time doctors have the opportunity to purchase equity in D4C. We cover your malpractice insurance, Medical, Dental, Vision, PTO and 401K. Candidate Requirements: D.D.S./D.M.D. from an accredited university. Completion of residency from an accredited pediatric residency program. Active Dental Board License. The positive attitude with a great personality; excellent chairside manner and communication skills. For more information please contact alex.english@d4c.com.

TEXAS—HOUSTON. A progressive and advanced Pediatric Dentistry Practice is looking for a Pediatric Dentist for long term associateship, with potential for an Equity position if desired. The company boasts to have multiple offices with high profitability and is in a continuous expansion and progression since its inception. The offices are located in great areas of Houston Metropolitan, are well equipped, fully digital with advanced technology like CBCT, iTero, IO cameras, Sensors, Digital Caries Detection among others being utilized for amazing patient care and experience. The teams, both clinical and administrative, are very motivated, helpful and geared towards operations to minimize stress and improve productivity of the dentist. All the interested candidates should respond with a detailed C.V. and photograph to careers@rcmdental.com. Also, provide a good day to contact you for a brief 30 min call. Thank you. RCM Dental Team. (903) 245-7245, (713) 822-5705. The prospective candidate should be well versed in procedures involving pediatric dentistry including Oral Conscious Sedation, IV Sedation and should be able to get credentialed at hospital systems. Board Certification is not but is mandatory. Mandatory qualities include good chairside manners, team player, patient care and production driven, punctual, honest, loyal and looking to associate for long term. The management is open to discussions about partnership with the right candidate. The compensation will be commensurate with improving the numbers and the bottom line.

TEXAS—KYLE. We are looking for a caring and energetic board certified pediatric dentist to join our practice - 3 - 5 days per week. Our office is located just south of Austin in one of the fastest growing cities in Texas. We offer state of the art equipment and highly trained and motivated staff. A great opportunity to practice without any corporate influence. New graduates and experienced pediatric dentists are welcome to apply. Please contact us at KyleDentaltosit@yahoo.com.

VIRGINIA—CHESAPEAKE. This is an incredible opportunity for a Pediatric Dentist to join a growing practice with offices in Chesapeake, Portsmouth, and Virginia Beach, VA. State of the Art Practice, Digital X-ray, Paperless Charting, as well as laser dentistry. Beautiful Office Setting. Great experienced staff! Team approach to patient care. Hospital Dentistry Available. Incredible earnings opportunity! For more information, contact Dr. Alex Horsley at weisteeth.com today to arrange for an interview. https://weispediatricdendtistry.com. Requirements: D.M.D. OR D.D.S. Licensed in or able to acquire licensure in Virginia. Pediatric Dentist Certification.

WASHINGTON—MARYSVILLE. Welcome to Puget Sound Pediatric Dentistry (PSPD), your new dental home. As pediatric dentists, we often want our patients to have a dental home, but when does our profession talk about what we need for the next 40 years of practice? At PSPD, we provide exceptional care for our patients while focusing on sustainable practice life for the doctor. Practice ads focus on money generated by fictional doctors that never make as much as advertised. At PSPD, we want you to be successful, but we also know your health and wellbeing will make your practice career sustainable. We offer all the same benefits that larger DSO-driven advertisements offer, but we also provide a core mentorship program that starts on your first day seeing patients. If you want to practice in the Pacific Northwest, enjoy being around wonderful patients and staff, and see yourself doing this career in 20 years, please consider PSPD. We look forward to meeting you and talking about your new dental home. For more information please contact Tanya@PugetSoundPD.com.
WASHINGTON—SPOKANE. Spokane Pediatric Dentistry is an established pediatric dental practice with a primary location in Spokane, WA and a growing clinic in Colville, WA. Opened in 2013, we are an energetic, patient-driven practice, striving to provide the highest quality dental care. Our clinics provide a comfortable, kid-friendly environment to serve our growing patient base. Our team performs comprehensive preventative and restorative dental treatments, sedations and in-office General Anesthesia. We are currently seeking a part-time or full-time Associate to join our team. The position includes a competitive salary and complete benefit package including employer-paid professional liability insurance, C.E. reimbursement, health insurance and 401(K) plan with match. Please send a letter of interest and C.V. to our Office Manager at om@spokanepediatricdentistry.com.

WASHINGTON—VANCOUVER. If you would like to work in a state-of-the-art dental practice, with experienced colleagues and staff and have a passion to work with children, and not chase after production goals, we might be the right fit for you! We are a true mom and pop pediatric dental practice in SW WA focused on providing excellent dental services to our community. We accept both Medicaid as well as PPO dental insurance plans. We are looking for a humble, energetic team player, with great chairside manner, who would provide high quality comprehensive dental care, with empathy and compassion for his/her patients and their parents. Four (4) days a week! (Most Fridays closed, some Fridays open for GA in the morning). Our W200 sq ft office has 9 separate operatory spaces, a total of 11 dental chairs. Our office is modern, state-of-the-art equipment. We use latest equipment and technologies, including multiple hard tissue lasers. We have a full-time restorative hygienist on staff, who assists with dental restorations as needed. We accept both Medicaid as well as PPO dental insurance plans. Sign-up bonus, Health Insurance, paid time off and 401K plan with profit sharing. Employer pays for professional liability insurance, DEA and licensure renewals. Pediatric Dentistry clinical experience is preferred but recent pediatric dentistry graduates welcome to apply including residents on F-1/OPT, will sponsor H-1B as needed. Apply via email: associate.classified@gmail.com. COVID vaccination mandatory. WA State Dental License required as well as OR State License for hospital privileges.

WISCONSIN—GREEN BAY. Kids Dental Experts is seeking an Associate Dentist to join our thriving practice in the Green Bay/De Pere, WI area. We offer guaranteed salary, a sign on bonus, 401k, profit sharing, medical insurance, a multi-doctor support system, and monthly bonuses. Option for buy-in available. We’re committed to providing high quality, patient-driven dental care with an emphasis on superior service for our patients and parents. You can expect a steady flow of new patients, a full schedule of patients, and a truly rewarding career. The right individual must be proficient in treating children with a high level of compassion and have aspirations to commit to our practice and thrive. We offer the service of dentistry for children including the use of conscious oral sedation, in office general anesthesia, general anesthesia at local hospitals, orthodontics/Invisalign, and 3D scanning for impression free treatment. The highly skilled Kids Dental Experts team provides you with the tools, resources, and support necessary for you to focus your days on providing quality patient care. The Green Bay, De Pere, and surrounding areas offer a great environment to raise a family with excellent school systems, restaurants, entertainment, major sports teams, convenient access to hunting, boating, fishing, paddle boarding, kayaking, walking/running/biking and cross country ski trails, and golf courses. Enjoy an area that offers the beauty and excitement of all four seasons. If you love working with children and desire a fast paced, well established and respected practice, please email your C.V. to mackenzie@kidsdentalExperts.com. Graduating residents are encouraged to apply.

WYOMING—CHEYENNE. Are you looking for a down-to-earth smaller community surrounded by great outdoor activities? Our growing privately-owned group pediatric dental practice is looking for a great doctor to join us in our Cheyenne, WY, office. We enjoy world-class mountain biking at Curt Gowdy State Park in summer, and alpine and nordic skiing in nearby Medicine Bow National Forest during the winter. Vedawoo offers world-class rock climbing. There are lots of great hiking, camping, fly-fishing, hunting, and outdoor activities nearby. When you want a bigger city experience, Cheyenne is a quick drive to Denver, perfect for catching a show or concert or attending a sporting event.Denver is also a great jumping off point to visit multiple destinations from its international airport. Our office is focused on providing patient-centered clinical care in a fun environment, maintaining a great team dynamic, and rewarding a strong work ethic. We have created a work family of long-term team members. We are looking for a candidate to join this work family who is hard-working, energetic, and focused on treating each one of our Super Kids to the highest standards of clinical care. This opportunity offers a great balance of autonomy, work/life balance, and space for mentorship. We maintain block time at our local surgery center. We treat each child in the way we feel will give them the best chance of having the most positive experiences possible. Both new graduates and experienced providers are welcome to apply. Compensation is competitive and will be determined based on experience. Let’s talk! https://pediatricdentistryofwy.com/.

CANADA

CANADA—TORONTO. Long-standing and established pediatric dental practice in Toronto, ON, Canada is looking for a full-time or part-time pediatric dentist. Centrally located in a vibrant, growing, and thriving neighborhood, with close access to two subway lines and a major highway, Toronto Children’s Dentist has steady new patient flow. A great chance to work alongside and be mentored by a senior, very progressive pediatric dentist. Retain true clinical autonomy while performing pediatric dentistry in a supportive environment. Clinic is equipped for oral and nitrous sedation with potential for Hospital privileges or in-office GA. Work Monday-Friday for a healthy work-life balance. Applicants should be ethical, hard-working, and focused on providing high-quality patient care. The ideal candidate will have a positive attitude, strong communication skills, and exceptional skill in working with children. Candidates must be eligible for board certification in Ontario. As part of one of the largest dental networks in Canada, our supportive and experienced team is ready to support your transition. Competitive compensation packages, relocation assistance, and a $10,000 sign-on bonus for applicable candidates. Access to mentorship programs and continuing education. This is an associate dentist position with partnership opportunities for those interested. For more information or to apply for the position, contact toothdrendcm@altima.ca. Requirements: Board Certified Pediatric Dentist or in progress of completing certification.

PRACTICE FOR SALE

MINNESOTA—DULUTH. The hidden gem cities along the shores of Lake Superior are constantly topping the lists of Best Places to Live. This family dental practice for sale is ideal for a pediatric or general dentist, as the practice sees a strong mix of both. The practice is located in a large free-standing building and the real estate is also for sale should the buyer be interested. For an overview of this well-established family dental practice, read below:

- 5 fully equipped ops. Collections of $1.1 million
- Seller’s Discretionary EBITDA $153,500, 2200 active patients. 10 new patients per month. The current doctors are interested in exploring their options, with retirement in mind. There is a massive opportunity for growth with additional days in office and marketing. The communities along the shores of Lake Superior are often an eclectic mix of people. Amazing outdoor recreation opportunities, lower cost of living and great career opportunities certainly encourage young families to stick around. To learn more about this practice, including the exact location, please contact Sam Schoenecker with Professional Transition Strategies via email: sam@PROFESSIONALTRANSITION.COM or give us a call: (719) 694-8320. We look forward to speaking with you!

MISSOURI—SPRINGFIELD. New to the market is a thriving pediatric dental practice in Southwest Missouri for sale! The current doctor has practiced in the community for fifteen years and is therefore interested in exploring all transition options. This includes both partnership or a buy-out with another a dentist or affiliation with the ideal dental group. Currently equipped with eight operators, there are three quiet rooms and five open bay chairs. Situated in an expansive office building, the real estate is also for sale if desired. For an overview of this southwest missouri pediatric dental practice for sale, read below: 8 operatories. Expansion opportunity. Collections of $1.9 million. EBITDA (LTM) $445,000. 4850 active patients. 115 new patients per month. Real estate opportunity. To learn more about this Springfield, MO area pediatric dental practice, please contact Sam Schoenecker with Professional Transition Strategies: SAM@PROFESSIONALTRANSITION.COM or call: (719) 694-8320. We look forward to speaking with you!

TEXAS—HOUSTON. America’s fourth-largest city is a cosmopolitan destination, filled with world-class dining, arts, hotels, shopping and nightlife. New to the market is a thriving pediatric dental practice with two locations. Each practice is in a desirable suburban community within an hour of downtown Houston. The practice supports multiple dentists, as well as the doctor-owners. For an overview of this suburban houston pediatric dental practice for sale, read below: 15 total operatories, collections of $3.886 million, EBITDA $1.628 million, 10,200 active patients, average of 240 new patients.
per month. Take a stroll through the historic Heights, spend the day exploring the Museum District or head down to Space Center Houston. Later on, grab a bite in one of dozens of award-winning restaurants, or hang out with the cool kids on Washington Avenue. There’s always something to do in this Southern hospitality meets urban chic city. To learn more about this two location, pediatric dental practice near Houston, TX please contact Sam Schoenecker with Professional Transition Strategies: SAMS@PROFESSIONALTRANSITION.COM or call (719) 694-8320. We look forward to speaking with you!

WISCONSIN—FOND DU LAC. Pediatric Practice for Sale. Long standing solo practice located in Fond du lac, Wisconsin. Owner wishes to retire and is looking for the right person to continue quality care for his patients. Email bstecker1@wi.rr.com for information. Fond du lac, Wisconsin.

FACULTY POSITIONS

PENNWSYLVANIA—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 8th among U.S. universities in NIH funding. The UPSDM is ranked 6th FY20 in NIDCR funding among U.S. dental schools. 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 please go to www.join.pitt.edu, select Faculty Positions and search 19008491. Please upload a curriculum vitae, and a statement describing interest in the position, qualifications and experience. The search committee will begin reviewing applications upon receipt. Only applicants who appear best qualified will be invited for a personal interview. The University of Pittsburgh is an Affirmative Action/Equal Opportunity Employer and values equality of opportunity, human dignity and diversity, EOE, including disability/vets. Board certification in Pediatric Dentistry. Must be eligible for a Pennsylvania dental license.
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Right; Stay N Place Chair Cushion (SPCC)