Feature Story

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AAPD Headquarters Update

Chief Operating Officer and General Counsel C. Scott Litch was one of four Honorary Fellows inducted into the American College of Dentists (ACD) at their ceremony on Sept. 5, 2019. This was in recognition of his “exceptional contributions to the dental profession.” ACD Honorary Fellowship is bestowed on individuals who do not hold a dental degree but have significantly advanced the profession of dentistry or oral health care and have shown exceptional leadership. It is the highest award the ACD confers on non-dentists. Litch has worked for the American Academy of Pediatric Dentistry for 20 years and for the American Dental Education Association for over 11 years prior to that. He was nominated for honorary fellowship by Drs. Joel H. Berg, Warren A. Brill, Steven D. Chan, John S. Rutkauskas, Jade Miller, Jerome B. Miller and Heber Simmons Jr.

Below is a summary of recent staff promotions that were effective July 1, 2019:

- **Tom Jurczak** – Senior Business Services Director
- **Leola Royston** – Education Development and Academic Support Manager
- **Lily Snyder** – Web and Social Media Manager
- **Suzanne Wester** – Senior Membership and Marketing Director. We also congratulate Suzanne on obtaining her CAE certification (this stands for Certified Association Executive). She was recognized along with other new CAEs at the Annual Meeting of the American Society of Association Executives in Columbus, Ohio, in August.

We’re pleased to announce that **Ken Berry** has been promoted to Publications Coordinator, effective in October. Congratulations Ken!

We congratulate **Margaret Bjerklie** on achieving CAP (Certified Administrative Professional) status.

We also want to acknowledge the work of our 2019 Summer Interns: Government Affairs Intern **Hannah Fogel** (going into her senior year at Loyola University Chicago) Communications Intern **Zoey Degen** (going into her senior year the University of Missouri), and Government Affairs Intern **Atif Osmani** (going into his junior year at the University of Chicago).

*We can’t wait to see you in Nashville!*  
#aapd2020
The horrific events in California, Texas and Ohio are sobering reminders that hate still plagues us as a country. I felt that I needed to comment for myself, our leadership, and for our entire Academy about our unwavering belief in the dignity of all children and their families, and our continued dedication to optimal health and safety for all children, everywhere.

I believe it is apparent to all of our members, that our Academy has been and will always remain color-blind. The best example is our long-standing dedication to elimination of oral health disparities. Minority and poor children suffer most from dental caries and we have steadfastly approached its elimination for decades with the dream of a caries-free generation across all the world’s children. Our specialty’s overwhelming commitment to care of Medicaid children among dental providers should be of no surprise. It is who we are.

Politically, our advocacy efforts have embraced all children supporting programs and laws that include everyone. A deeper look at our policies, continuing education, and advocacy show attention to cultural backgrounds and child-specific considerations, reinforcing the recognition and need to look at every child in our care as an individual, both with respect to their uniqueness and the world in which the child lives.

Just look during one of our annual sessions at the diversity of our colleagues. There should be no doubt that what drives us, across any set of differences, is the shared love and caring for children and that is why we look like we do and will continue to change well into the future. You may not have thought this way, but in our specialty, respect for one another stems from our shared purpose in caring for children and scientific integrity. These qualities come in all colors and can be seen in the interactions we have with one another.

So, I encourage all of the AAPD membership to reflect on what we can do to help eliminate hatred and its roots, in what we do and how we live. I know that I won’t change my commitment to all children, but maybe now just pay a little more attention to the need to convey to all my little patients and their families that I care for them for who they are and that they are safe in my care.
Call for 2020-21 Nominations

The AAPD Nominations Committee is accepting nominations for the 2020-21 election of Secretary/Treasurer, Affiliate membership trustee, and At-Large trustee. The at-large trustee also represents the member of the Federal Services. The term of the current At-large Trustee, Dr. Tegwyn H. Brickhouse, expires in 2020.

Nominations must be received by the AAPD headquarters office no later than Dec. 1, 2019. This date reflects procedures for the Nominations Committee, per the current AAPD Administrative Policy and Procedure Manual.*

A nominee’s submission must be on the standard AAPD Nominations Committee Candidate Consideration form. This form can be obtained by contacting Governance and Operations Manager Margaret Bjerklie at mbj@aapd.org. The required materials from nominees are the following:
1. The completed and signed Nomination form;
2. A one-page essay explaining their interest in serving in the specific office and summarizing their leadership skills;
3. A background description suitable for publishing in PDT (Pediatric Dentistry Today);
4. A photograph in electronic format suitable for publication in PDT (Pediatric Dentistry Today).

Letters of recommendation: Nominations for Secretary/Treasurer and At-Large Trustee must have three (3) letters of recommendation from active, life or retired members of the Academy. Nominations for Affiliate Membership Trustee must have a letter signed by five (5) AAPD members signifying support of the nominations. One of the signatories must be a voting (i.e., Active or Life) member of the Academy. It is recommended that one of the signatories be the president of the state chapter where the Affiliate member practices.

The Nominations Committee will meet on Wednesday, Jan. 15, 2020, at which time they shall interview all nominees either in person or via teleconference or web conference or other appropriate technology. All nominees must agree to participate in this interview process. All nominees for the 2020-21 academy year will be published in the March or May 2020 issue of PDT and voted on by the membership on the 2020 General Assembly.

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

*All members have online access to the most recent version of the AAPD Administrative Policy and Procedure Manual, which is periodically reviewed and updated by the Policy and Procedure Committee with oversight and approval by the board of trustees. The Policy and Procedure Manual can be found on http://www.aapd.org, under Governance Documents in the Governance section of Member Resources.
PAC Corner

It’s District Competition Time

Again this year, the AAPD PAC is instituting a competition among the five AAPD districts to determine for each calendar year which district is the top AAPD PAC supporter in terms of number of contributors and total hard dollars raised.* The standings below are as of Oct. 31, 2019, indicating that the Southeastern district is currently in the lead for number of contributors, but the NorthCentral district is in the lead in terms of total hard dollars. Note that in 2018 the Southeastern District had the largest number of contributors and the highest average contributions, while the NorthCentral district contributed the most in hard dollars.

Thanks to the many of you that have already supported the AAPD PAC via the voluntary PAC contribution “check-off” on your 2019-20 dues statement.

If you have not yet given this year, we need your support. The voluntary recommended support level for new dentists is only $100. If you have been a regular PAC contributor at recommended level of $250, why not jump up to the next level of support such as Cabinet ($500-999) or Patriot ($1000 and above)?

With an increase in your level of support, the AAPD PAC can achieve even greater success. You can contribute online at: https://www.aapd.org/advocacy/pac_contributions/.

*Remember that if you want your dollars applied directly to candidate support, please make your PAC contribution via a personal credit card or check. Such support counts as “hard dollars” for a PAC. Contributions from a corporate account must be applied to “soft dollars”, which can be used for PAC administrative and related advocacy expenses but not direct candidate support. Contributions to the AAPD PAC are not tax deductible.

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

Warren A. Brill
PAC Steering Committee Chair
Organized Dentistry Coalition Supports Repeal of Section 1557 Language Posting Requirements

On Aug. 13, 2019, the Organized Dentistry Coalition (ODC), which includes the AAPD and ADA, submitted a regulatory comment letter to the U.S. Department of Health and Human Services Office for Civil Rights (OCR) supporting a proposal to amend portions of the Section 1557 Final Rule. This is the provision of the Affordable Care Act that prohibits health care entities that receive federal financial assistance from discriminating on the basis of race, color, national origin, age, disability and sex. Implemented in 2016, the final rule applies to health care providers who receive certain funds through HHS, including Medicaid and the Children’s Health Insurance Program. Among other provisions of the OCR’s proposal, there would be a repeal of the Section 1557 requirements for covered dental practices to post taglines in the top 15 non-English languages spoken in the state and notices of nondiscrimination. The proposal would also expand permissible use of audio-based interpretation services for individuals with limited English proficiency. The ODC letter said each dental coalition member “strongly supports non-discrimination in health care and equal access to care for all patients without regard to race, color, national origin, sex, age, religion or disability,” but noted, “dentists have reported ‘great difficulty’ complying with this provision of the rule.” Further, coalition members “believe that the repeal of these requirements will lead to cost savings and will allow staff to spend time on appropriate patient care and communication instead of time on interpreting and complying with the regulations.” The coalition also expressed support for the proposed rule’s exemption from the auxiliary aids and services requirements for covered entities with fewer than 15 employees.


AAPD and ADA Oppose Replacement of Federal Sealant Measure by HRSA

On Aug. 27, 2019, the AAPD and ADA wrote the Health Resources and Services Administration (HRSA) urging them not to replace the measure of Dental Sealants for Children Between 6-9 Years. This measure is utilized in HRSA’s oversight of its community health centers program. HRSA had requested public comment on a proposal to replace this measure with one titled Primary Caries Prevention Intervention as Offered by Primary Care Providers (CMS74v9).

The letter, signed by then-ADA President Jeffrey M. Cole, ADA Executive Director Kathleen T. O’Loughlin, AAPD President Kevin J. Donley, and AAPD Chief Executive Officer John S. Rutkauskas stated: “Research has shown that sealants are effective in preventing occlusal carious lesions in the molars of children when compared with controls without sealants.” The letter referenced the evidence-based clinical practice guideline released in 2016 by the ADA and AAPD that found sealants could minimize the progression of noncavitated occlusal carious lesions and effectively prevent and arrest pit-and-fissure occlusal carious lesions of primary and permanent molars in children and adolescents compared with the nonuse of sealants or use of fluoride varnishes. The letter also stated:

“... there is in fact evidence to suggest the superiority of resin-based fissure sealants over fluoride varnishes applied to prevent decay in permanent molars.”

“While both topical fluoride as well as dental sealants are important caries preventive modalities, we fail to see the agency’s rationale for removing the focus on improving sealant rates, especially given the improvement health centers have made.”

As reported by 1,362 HRSA-funded health centers, their performance improved more than 10 percentage points between 2015 — when the sealant measure was first adopted — and 2018. Nearly 53 percent of children 6 to 9 years old who are at an elevated risk for caries received the recommended sealants. Thirty-six states also performed better by at least five percentage points on the measure from 2015 to 2017. The AAPD-ADA letter indicated that a performance gap continues to exist and that now is not the time for HRSA to move away from a focus on this measure.

HRSA’s rationale was that the fluoride varnish measure would increase the target population from high-risk children who are 6 to 9 years old to children and adolescents as old as 20 and also include oral health preventative measures that health centers without dentists can employ. However, the AAPD-ADA letter pointed out that the fluoride varnish measure would track only one application of varnish during the measurement period, although topical fluoride should be applied every three to six months in children at an elevated risk for caries. It was further noted that the sealant measure was developed and tested by the Dental Quality Alliance (DQA), which maintains the measure through a periodic review process to align it with emerging science and implementation experience. The AAPD actively participates in the DQA as a member of its Executive Committee.

Visit aapd.org to see all the latest news in AAPD Advocacy!
Data Privacy Protection: The Impact of GDPR

While most pediatric dental offices have heard of compliance practices based on the federal HIPAA law, few have probably heard of the General Data Protection Regulation (GDPR). Adopted by the European Union Parliament in 2016 and effective since May 2018, this regulation mainly impacts for-profit corporations who maintain data on European customers, and non-profit associations that have members in the European Union (EU). However, the impact may spread.1

GDPR applies to any organization that maintains data on just one EU-based individual. Violation of the regulations can be as high as $24 million, or up to four percent of global revenue. This has caused associations like the AAPD to take notice, even though associations do not usually maintain highly sensitive personal data on members or contacts, and also have a much more positive reputation than entities such as credit collection companies. While GDPR is targeted at large companies, associations still need to make a good faith effort to comply to the fullest extent possible. GDPR can also be applicable where there are meetings and events in the EU, or customers/sponsors/exhibitors in the EU.

GDPR covers both processors and controllers of personal data, also known as personally identifiable information (PII). Individuals have the right to access their personal data, including a new “right of erasure” or “right to be forgotten”, which as the terms imply means erasure/deletion of personal data. There are also data breach reporting obligations similar to breach notification requirements for covered entities and business associates under HIPAA.

What does GDPR compliance mean? That all processing of personal data must be lawful, meaning:

• Data subject has given consent.
• Processing is necessary for legitimate interest.
• Processing is necessary for performance of a contract to which data subject is a party.
• Processing is necessary for compliance with legal obligations.
• Processing is necessary to protection vital interests of the data subject or another person.
• Processing is necessary for performance of a task carried out in the public interest or in the exercise of official authority.

For associations, the key GDPR implication has been development of a data consent form for EU residents (this is courtesy of the AAPD’s outside law firm, Barnes and Thornburg):

“By clicking on “I Accept” below, you are providing Association with your express consent for your personal data to be used as follows:

• Association uses the data you provide to it to service your membership, to inform you of Association’s products, services, conference, and events, and for such other purposes which are within the scope of Association’s exempt purpose and mission; and
• Association shares the data you provide to it with vendors and other third parties in order to process your request including online purchase and conference registration, to inform you of products and eservices which may be of interest to you, and for such other purpose as Association may approve from time to time.

For more information regarding your personal data rights, please review the Association Privacy Policy located at: ____________.

(Visit AAPD’s at: https://www.aapd.org/privacy-policy/)

The GDPR structure requires the organization to determine if data use is based on legitimate interest or consent. Usually it’s a legitimate interest to an association for internal use of PII provided by members and customers, but requires consent as to third party use—when information leaves the organization (such as mailing list rentals or providing attendee lists to exhibitors). Informed consent must be an “opt in”, and specific, unambiguous, and plainly worded. Organizations also need to designate a Data Protection Officer which can be an existing position in senior management as AAPD has done. AAPD has worked directly with our association management software company, ACGI, to ensure compliance in terms of the AAPD membership database system.

You might ask if the EU can actually enforce GDPR in U.S. courts. The answer is YES.
Do health care providers need to be concerned? For larger health care systems, including academic health centers, GDPR could apply in situations such as: a research sponsor or vendor collecting personal data from individuals in the EU; a research clinical trial recruiting individuals within the EU (as opposed to an EU citizen living in the U.S.); or a U.S.-based health care system using an EU-based cloud storage system with subjects’ data transferred to the EU-based storage site.

Finally, other countries are looking at GDPR-type laws, and California has already moved forward with a similar law. They passed the California Consumer Privacy Act of 2018, AB-375, which brings some of the EU protections to California residents on Jan. 1, 2020. Only larger organizations are covered under the California law: those having annual revenues of at least $25 million or retaining personal information of at least 50,000 California residents, households, or devices. The law does not apply to non-profit organizations.

Since GDPR only went into effect in 2018 and the California law is not effective until 2020, it is still too early to determine the scope of enforcement impact on organizations in the U.S. Note that some larger corporations, including the Los Angeles Times and Chicago Tribune, decide to shut down all online access to anyone in the EU. However, for associations such as AAPD that have international members, some based in the EU, this is not an approach that will be taken.

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.

1 Thanks to these resources:
Ebner T. Countdown to GDPR. Associations Now, 3-4, 2018, pp. 51-53
Williard, B. What Associations Need to Know About GDPR. Forum, October 2018, pp. 32-35.
AAPD 2020
Nashville, Tenn.
May 21-24, 2020

The AAPD invites you to join us in Nashville for a weekend of phenomenal education and plenty of fun in Music City!

Wednesday
Joint Academic Day

Thursday
Preconference Course
Early Career Dentist Happy Hour

Friday
Opening Session and Keynote Address with John Rich and Josh Sundquist
PALS/BLS
Targeted Behavioral Interventions to Manage Fearful Patients: Purnima Hernandez
Minimally Invasive Management of Caries (including SDF, ITR/ART and Hall Technique): Jeanette Maclean & Yasmi Crystal
There IS and I in Team: Rosemary Bray
Creating a Culture of Accountability: David Schwab
Recognizing the Need for Interceptive Orthodontic Treatment and How to Steer Through the Timing, Planning and Delivery: Nagaar Sagafi
Challenging Conversations: How to Handle Non-Dental Topics in the Dentist Office: Susan Fisher-Owens, Patty Braun, Anu Tate, Amanda Dempsey
Dental Benefits Symposium
Exhibit Hall
My Kids Dentist & Orthodontics Poster Competition
Learning Labs
Evidence Based Training Workshop
Identification and Management of Chemical Dependency and Opioid Use Disorder in Pediatric Dental Practice: Randall Lout
Career Fair
State Public Policy Advocates Luncheon
Early Career Dentist Course
Speed Learning, Back to Basics: Gustavo Oliveira, Negaar Segafi, Brandon Schwindt
Sedation Safety in Pediatric Dentistry: Steve Yun
Health & Wellness Session: Erin Oprea, Ander Wilson, Amy Lynn Green
PAC Reception
International Reception
Affiliate/Alumni Reception
AAPD Foundation Donor Gala

Saturday
Coffee Clutch for Office Staff
PALS/BLS
MiniClinics II
GSRA Presentations
Exhibit Hall
My Kids Dentist & Orthodontics Poster Competition
Learning Labs
Evidence Based Training Workshop
Identification and Management of Chemical Dependency and Opioid Use Disorder in Pediatric Dental Practice: Randall Lout
Career Fair
State Public Policy Advocates Luncheon
Early Career Dentist Course
Speed Learning, Back to Basics: Gustavo Oliveira, Negaar Segafi, Brandon Schwindt
Sedation Safety in Pediatric Dentistry: Steve Yun
Health & Wellness Session: Erin Oprea, Ander Wilson, Amy Lynn Green
PAC Reception
International Reception
Affiliate/Alumni Reception
AAPD Foundation Donor Gala

Sunday
Exhibit Hall
String of Pearls
Sores and Bumps 101: Juan Yepes
General Assembly
President’s Farewell Dinner: Country Music Hall of Fame
Opening Session and Keynote Address
Josh Sundquist
One More Thing, One More Time
Friday, May 22, 2020

Josh Sundquist has accomplished becoming a National Bestselling author, surviving cancer and participating on the USA Paralympic Ski Team, and he’s just getting started. His experiences thus far in life have taught him to adopt the 1MT1MT (one more thing, one more time) mentality. Plan to be inspired by this motto through Josh’s high-energy blend of humor and storytelling.

Josh’s journey will be sure to remind us of how all of our stories are truly interconnected. Sometimes, even our smallest actions and decisions can impact the world around us. Through your newfound commitment to the 1MT1MT motto, Josh will show you how to face adversity with strength and courage, be resilient during times of change and plan for the future with an expanded vision of what could be possible.

Career Fair
Saturday, May 23, 2020

Immediately following the Early Career Dentist Course

The annual Career Fair is a great opportunity for hiring organizations to network with both early career pediatric dentists seeking their first practice position, as well as experienced pediatric dentists who are looking for a change in their career.

New this year, the Career Fair will feature a happy hour! This is the perfect time to grab a drink and connect with fellow AAPD colleagues and exhibiting companies.

For more information, contact Meeting Services Associate Kelly Katona at (312) 337-2169 or kkatona@aapd.org.

*Career Fair is free for all AAPD 2020 attendees to attend. The cost for exhibiting companies is $150 (member rate) and $500 (recruiter rate).

Preconference Course
Fundamentals and Emerging Approaches to Management of Dental Trauma in Children

This exciting CE offering course 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.

AAPD Abstract Submission Deadline
Jan. 15, 2020

Graduate Student Research Awards (GSRA)

My Kid’s Dentist & Orthodontics Research Poster Competition

Research Fellowship
International Oral Presentations at AAPD 2020

The AAPD recognizes the importance of research that is taking place globally and wants to offer an opportunity for these international colleagues to share their knowledge. The Academy is seeking oral presentations from pediatric dentists outside of North America to give a 15 minute presentation on their research at AAPD 2020 in Nashville. In this format, each presenter will bring a single idea or concept and will share it with the audience. Submit your abstract today, the deadline is Jan. 15, 2020. For additional information, contact Meeting Services Manager Caroline Oliva at coliva@aapd.org.
Welcome New Members

The AAPD would like to welcome new members. We look forward to supporting your professional needs. For further information on membership benefits please contact Membership Department at (312) 337-2169 or membership@aapd.org.

Member Spotlight

Why I am a Member of AAPD

Dr. Jonathan Gerik – Fairbanks, Alaska
Affiliate Member
Joined: December 2017

I became a member of AAPD because of the large and ever growing number of children I see in my dental practice and my desire to provide the best care possible for my patients. As with adolescent and adult dental care, pediatric dental research, technology, and equipment continues to change quickly over short periods of time. My favorite benefits of the AAPD include the meetings, research updates, web-based resources and contacts available. All of these benefits have proven extremely helpful with updating and maintaining current high quality treatments, methods, procedures and materials. Generally speaking, general dental continuing education tends to only revolve around basic adult dental care. I highly recommend AAPD membership for any dentist that either treats or has an interest in treating children of any age range.

Dr. Gerik began his career as an Air Force general dentist after graduating from Baylor College of Dentistry in 2009 and completing a General Practice Residency at Keesler AFB, MS. After completing his active duty commitment at Eielson AFB, AK, he and his wife decided to stay and purchase an existing practice in Alaska. In addition, he continues to serve as a dentist and traditional guardsman in the Alaska Air National Guard. Gerik is married, has two children, and enjoys fishing, hunting, boating, skiing, traveling, in addition to many other outdoor activities.

Pedo Teeth Talk

AAPD Podcasts

Join AAPD leaders, experts in the field of pediatric dentistry and other professionals for Pedo Teeth Talk. We’ll be discussing scientific, clinical and the most up-to-date, relevant information out there for anyone and everyone in the pediatric dental community. Be sure to subscribe and stay up-to-date on all of the most recent episodes!
Member Benefit Spotlight

Power Resources for Members

AAPD has partnered with multiple organizations to provide you resources to help in your in both professional and personal life.

SoFi – Student Debt Refinancing

AAPD has partnered with SoFi to offer members a 0.125 percent rate discount when they refinance through SoFi.com/AAPD. For many in the dental community, student debt is a reality that many people have to face. SoFi evaluates borrowers holistically to offer low rates that ultimately can save borrowers thousands. You can check your rate in two minutes with no impact on your credit score. Residents can refinance as well!

There’s no obligation/impact on your credit score to check your rates in two minutes.

Office Depot/Max – Use for Home and Office

Office Depot and OfficeMax are one company! AAPD Members can save up to 75 percent on over 93,000 products. Great for your printing, cleaning and office needs. Shop online or in any Office Depot or OfficeMax store. Enjoy FREE next-day delivery on online orders over $50!

Visit http://officediscounts.org/aapd/to shop online or print off a FREE store purchasing card.

Motion Picture Licensing for Dental Offices

Many pediatric dental offices show movies to entertain and relax patients and families. Since exhibitions of copyrighted motion pictures (and other programs available for rental or purchase) outside of private, home use, such as in a dental office, require a public performance license, the AAPD reached an agreement with the Motion Picture Licensing Corporation (MPLC) for the convenience of our members. AAPD members may receive a discount on the MPLC Umbrella License, an annual license that protects your office from copyright infringement when movies and other programs are shown. The discounted annual license fee is $310.

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

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AAPD Resident’s Corner

The AAPD Career Center

by Jessica M. Baron, D.M.D.

The second the clock struck midnight on July 1, 2019, the unsettling wave of dread sunk in – I am about to embark on my last year of residency. In addition to my clinical responsibilities, I somehow have to manage my board studies, my research and finding a job.

Where do I even begin to look for a job? Google? Craigslist? Word of mouth?

Luckily, there is a resource that I am familiar with through the AAPD website, the Pediatric Dental Residents Committee, and from my colleagues called the AAPD Career Center. This useful resource is accessed through the AAPD website under Resources – Member – Career Center. The AAPD Career Center is a more tailored version of Indeed/Monster.com where pediatric dentists, dental schools, residency programs, corporations, and DSOs can directly advertise. Simply log into the website using your AAPD credentials and immediately at your disposal is a list of job opportunities that you can apply for. All you have to do is fill out a profile with questions ranging from previous job experiences to what type of employment you are seeking (part-time, seasonal, PRN, etc). You can then apply to as many or as few opportunities that suit your needs. You can also upload your resume directly, and prospective job employers can contact you. The website version of the Career Center offers more current positions than the classifieds in the PDT magazine.

For Korosh “Eric” Armakan, D.D.S., the AAPD Career Center was a valuable resource in his second year at Montefiore Medical Center. He started to lightly peruse in November, but ramped up his efforts in the Spring. He mainly used the website version of the AAPD Career Center since he was more able to filter through his selection. He knew that he wanted to end up in the D.C.-area, so he confined his search to Virginia, Md., and D.C. Through his efforts, he found an appealing ad for Dentistry for Children – a dental service organization (DSO) where you can invest in the company/practices. Five years later, he happily became a multi-practice doctor owner in the company. For him, the ad was very accurate and the process was seamless to find the initial opportunity.

Diana Do, D.D.S., also had a positive experience with the AAPD Career Center. Before moving to Kailua Kona, Hawaii, she practiced in Austin, Texas, in a job that she found through the AAPD Career Center. She states that the website was “fairly easy to use and useful in that there was a way to upload your resume directly to have recruiters contact you based on your interests.”

There is no right time to start looking through the AAPD Career Center, but it is useful to start brainstorming early on to become familiar with all the resources the Career Center has to offer. Maybe you will find your first job, or even last job, through the AAPD Career Center!

ABOUT THE AUTHOR

Jessica M. Baron, D.M.D., is a second year pediatric dental resident at Montefiore Medical Center in the Bronx, N.Y. She grew up in Charleston, S.C., and completed her undergraduate education from Duke University in 2010 with a B.A. in Public Policy and minor in Art History. She graduated from the James B. Edwards College of Dental Medicine at the Medical University of South Carolina in 2015. She has earned a general practice residency certificate from Yale-New Haven Hospital and a dental oncology certificate from Memorial Sloan Kettering Cancer Center.

AAPD Career Center

Job title, keyword... Location

141 Job Listings

128 Employers Hiring

SIGN UP NOW

or Sign in if already registered
We would like to give special thanks to our faculty advisor, Dr. Eileen Cocjin, who is always there to support our goals, provide avenues of opportunity, and encourage young aspiring dental professionals.

Our club looks forward to creating more opportunities to give back to the community and to the pediatric population specifically so we can help create smiles – ONE CHILD AT A TIME! ONE SMILE AT A TIME!
Doc Bresler’s Cavity Busters Pediatric Dentists

Dr. Jason Bresler, Dr. Tracey Bresler and Dr. Josh Bresler Inducted as 2019 Fellows,
International College of Dentists USA Section

Sept. 25, 2019, Philadelphia, Pa. – Doc Bresler’s Cavity Busters is proud to announce that Dr. Jason Bresler, Dr. Tracey Bresler and Dr. Josh Bresler were recently inducted as Fellows of the International College of Dentists USA Section.

The International College of Dentists (ICD) USA Section is the pre-eminent honorary organization of the world’s outstanding dentists involved in “serving others.” The ICD is dedicated to the recognition of outstanding professional achievement, meritorious service and the continued progress in the profession of dentistry for the benefit of all humankind.

Drs. Jason Bresler, Tracey Bresler and Josh Bresler were inducted as Fellows of the International College of Dentists, at its 85th Annual Convocation in San Francisco, Calif., earlier this month. The exemplary award as “Fellow” was awarded to each, “for their conspicuous service rendered in the art and science of dentistry”.

ACD Pediatric Dentistry Inductees 2019

The AAPD congratulates the following pediatric dentists who were inducted as Fellows of the American College of Dentists (ACD) at their ceremony on Sept. 5, 2019:

Regency 1: Douglas B. Keck
Regency 3: Cynthia L. Hipp, Kimberly K. Patterson
Regency 4: Juan F. Yepes
Regency 5: Colleen Greene, Kecia S. Leary
Regency 6: Suzanne Fournier
Regency 7: Joseph C. Creech, Jr.

Congratulations are also in order for Dr. Heber Simmons Jr., who received the ACD Lifetime Achievement Award, presented to Fellows who have been a member of the College for 50 years.

Only 350 dentists from the U.S. and abroad were inducted into the College at this year’s ceremony, witnessed by over 1,000 members and guests. The College, with representative chapters in more than 123 countries, has over 11,600 members including 6,500 in the U.S.

Founded in 1982, Doc Bresler’s Cavity Busters is home to eight office locations throughout Philadelphia and the suburbs, Red Lion Surgicenter and Special Touch Dentistry, all providing experienced, warm and friendly pediatric dentistry to infants, children, teens, and children with special health needs. Visit www.cavitybusters.com to learn more!

Download the Complete

Mouth Monster Defense Kit

Meet the Mouth Monsters

Stand up to the Mouth Monsters – those little mascots for tooth decay, the number-one chronic infectious disease among children in the U.S. Help your kids keep the monsters out of their mouths with our handy posters, fact sheets and other fun stuff available for download on our website at https://mouthmonsters.mychildrensteeth.org/mouth-monster-defense-kit/.
Your Trusted Source for Silver Diamine Fluoride.

- Tinted for enhanced visual placement.
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Mouth Monster Marketing
Utilizing the Mouth Monsters in Your Practice

By Dr. Jarod Johnson

INCEPTION

The American Academy of Pediatric Dentistry (AAPD) first launched the Mouth Monsters in January of 2014. Over the last five years, the campaign has grown in scope and has been highly successful. Tooth D.K, Tartar the Terrible, and Ginger Bite-Us have become popular and are wonderful tools to engage with patients at your practice. The campaign does an excellent job of keeping dentistry fun for kids, and provides a strong educational message for parents. It has been easy to incorporate into my office as the AAPD is always producing new content.

BRAND AWARENESS

Creating a brand, or shared vision for a dental office is an important aspect of marketing. It can be done in a variety of ways. Whichever way the office chooses to brand themselves should be in alignment with the office’s goals for patient care. There are a lot of opportunities for the dental office to create a personality that is welcoming to children. Many offices will choose an overall theme that is friendly to kids, such as one focusing on superheroes, a jungle, ocean, farm or the mountains. Other offices will correlate the name to common landmarks in the surrounding area, for example, member Dr. Brittany Adamiak who practices in Nashville, Tenn., has chosen to name her practice Green Hills Pediatric Dentistry, after the enclave Green Hills.

While it is important to have an overall brand presence that fits with the office’s values, using the Mouth Monsters as part of the dental office exhibits affiliation with the AAPD. Specifically, with the Academy’s website for caregivers mychildrensteeth.org. A strong association with the AAPD amplifies trust in parents with the dental office. I have personally found the use of Mouth Monsters in my office to complement our branding to be very successful.

AVAILABLE CONTENT

The AAPD is continuously creating new content; I recommend visiting the Mouth Monster Hub frequently, and following the AAPD on social media.

USES

The Mouth Monsters can be used to promote education, fun, and your office. Since every dental office has different needs, not every office will utilize them in the same way. This allows one to customize their use to fit the specific needs of their practice. These are a few ways that I have highlighted the Mouth Monsters in my practice.
MOUTH MONSTER TRUCK

Dental surgery can be a scary situation for many children. One of the biggest hurdles for many kids is separation anxiety from their parents when heading back to the operating room. One of my best uses for the Mouth Monsters was the creation of a Mouth Monster Truck. The truck was made using a child sized motorized vehicle, and adding custom decals of my office logo, as well as the Mouth Monsters. It creates a more positive and fun experience for children to travel to the operating room, and I have noticed a huge improvement in the number of children that come back with a smile on their face instead of tears in their eyes. It has also helped instill confidence in parents that they are in the right place.

To create a truck, it is important to work closely with the hospital or surgery center. Select a vehicle that has a seat belt for safety and the ability of a responsible adult to override the direction of the vehicle. It is also important that the hospital or surgery center create standard work documents for it prior to the purchase—this will help make sure it is used safely. Our office allows other surgeons to use the Mouth Monster Truck, and we have had parents comment on the positive experience their child had when undergoing surgery for other medical procedures. In return, our office is marketed to possible new patients and allows for many more children to have a positive hospital experience.

HAVE YOUR CAKE AND EAT IT, TOO!

Wishing your patients a “happy birthday!” can be the icing on the cake. While automated systems are useful for sending out appointment reminders, many of them also have the capability of sending e-mails to patients on their birthday. Our office uses a fun e-mail template with Tooth D.K. eating a piece of cake. Feel free to edit the template to brand your office: https://www.canva.com/design/DADOQ1fZoJo/remix. We often receive responses back from parents thanking us for the additional reminder! We often have seniors and parents who are new to our practice ask our team for ideas on how to draw attention from those passing by the office. They help draw attention to the office as people drive by and attracts the eyes of parents and children that the office is focused on Pediatric Dentistry. Get creative with the office staff and market-some incentives using the AAPD logo. Together, we’ve created a lasting image in the community.

Welcome Your Patients

Make the AAPD logo and the Mouth Monsters the first thing families see when they walk in the door. When they see that your office is affiliated with the AAPD, rapport between you and the parent will be established immediately. Parents will know they are in the right place. The logo can be placed on a front window or door along with the Mouth Monsters. A company can also make a custom rug to place as a doormat in the entryway. The guidelines for the use of the AAPD logo are available online: https://www.aapd.org/about/about-aapd/using-the-aapd-logo/.

SCREEN SAVERS

Screen savers are a great way to protect patient information and ensure HIPPA compliance. They can be automatically setup to come on the screen after a few minutes, or when the computer is locked. It may be helpful to involve an IT company to help set this up. Generally, when a staff member leaves the computer, it should be locked to prevent patients from browsing and searching for information. In most instances, the images for a screen saver can be stored on the server, and individual workstations can be setup to load the images. This will make it easy to change out the images over time. The AAPD offers a wide variety of images that can be used for patient education and marketing. They can be accessed on the website at https://mouthmonsters.mychildrensteeth.org/.

GET INKED

Temporary tattoos are also a fun way to market a dental office. Many children will get excited about the idea, and the Mouth Monsters are the perfect cartoon characters to meet the fascination of kids. They are a very cost-effective marketing strategy, as each tattoo is similar in price to a sticker, and they will last for days after placement. Adding one’s practice logo below to the temporary ink will create a lasting image in the community.

Stickers are also a great reward for kids that do well at their appointment. Consider having Mouth Monster stickers available in addition to the office’s normal collection of cartoon characters.

CHECK OUT WITH TOOTH D.K.!

Who doesn’t love a vacation? The AAPD offers plush Mouth Monsters. They can be used to market your office when children are on their vacations. One may have seen the AAPD posts of Tooth D.K. around Chicago prior to the 2019 Annual Session. Allowing a family to check out a plush doll and post pictures while they are on vacation can add great fun to an office. Be sure to have the family tag one’s office and offer an incentive to post the images. Some incentive ideas include: allowing the family to keep the plushie or offering an entry-level electric toothbrush if the family returns the plushie and posts a minimum number of photos.
WHO ARTED?

Kids love to color. The AAPD has provided coloring pages for parents and offices to download related to the Mouth Monsters. There are a wide variety of coloring activities posted on the website. These activities can be provided to children in the waiting room or be offered for children to take home. One idea is to create a coloring contest for the dental office and award a prize for the kids. It could also be possible to sponsor an art project at a community art center in conjunction with oral health awareness. Recently the AAPD released The Little Teeth League: https://mouthmonsters.mychildrensteeth.org/bring-the-little-teeth-league-to-life-with-color/.

SOCIAL MEDIA

The AAPD provides its members with access to a social media toolkit. This can be useful for members to consult when deciding what is appropriate to post on social media and what is not. In general, being active on social media in a positive way is beneficial to the dental practice. Offices should focus on building a relationship and providing educational material. When a family is at an appointment, we can provide focused one-on-one patient education, but only for a short period of time. One can create a brand that has more potential to engage patients in oral health education through social media.

For instance, let us take a non-dental related problem, i.e., a leaky faucet. It is well known that plumbers can fix leaks, but they cost money. So, if there was an easy fix, wouldn’t one want to save money? Commonly, people will turn to the internet and social media to find an answer to the problem. What if a plumber had a highly rated post that saved someone money so one wouldn’t need their services? Surely that plumber would get the business over another if a more serious problem arose, because they already built a trusting relationship, even though the customer never called.

The same can be done in the dental profession by using the Mouth Monsters to create educational content that solidifies the office as The Big Authority on Little Teeth. Plus, it will raise awareness of dental disease and prevention within the community.

CUT-OUT PERSONA

Another way to provide a way for patrons to interact with your business is by placing a Fat-Head on the wall of a Mouth Monster for patients to pose with. Offering a small giveaway to those who post the picture to their social media page provides one more opportunity to gain visibility with families.

MOUTH MONSTER DEFENSE KIT

Most of the Mouth Monster content can be adapted for placement on a poster for display in the office. The “Wanted Posters” included in the Mouth Monster Defense Kit, are perfect to display in a hallway or treatment room. If the kids have had an awesome visit and are Mouth Monster-free, they can be provided with a certificate and be a part of the office’s “No Cavity Club.” Within the kit there is also a brushing calendar that can be provided to patients. Families that complete the calendar and brush two times a day for two minutes each, could be incentivized with a reward certificate, or one’s office could offer a small prize each month for a completed calendar. Check out the Mouth Monster Defense Kit online at: https://mouthmonsters.mychildrensteeth.org/mouth-monster-defense-kit/.

SEASONAL CONTENT

Looking for ways to engage patients around the holidays? From the start of New Year through St. Patrick’s Day, Easter, Halloween, Thanksgiving and Christmas, the AAPD has your office covered. There is Mouth Monster content available to celebrate holidays at the office. Followers will quickly become familiar with the characters and the campaign.

PATIENT EDUCATION

The Mouth Monsters are a great membership benefit. They provide members with a way to directly connect with their patients and provide an educational experience. When an office affiliates with the Mouth Monsters it can help solidify the relationship with the AAPD and provide families with confidence in the provider they have chosen to treat their children. As pediatric dentists, our goal is to establish relationships with families and provide the best dental experience for children possible given the circumstances. Generating excitement around Tooth D.K., Ginger Bite-Us, and Tartar the Terrible in the office is in alignment with the mission of the AAPD to, “advocate policies, guidelines, and programs that promote optimal oral health and oral health care for children.”

A MESSAGE FROM THE AUTHOR

As pediatric dentists, we make a positive impact on the quality of life of children within our communities. However, dental decay remains prevalent in the United States, and is still the number one chronic disease of childhood. While most of us see underserved children, there is still an unmet need for children in the United States. I fully support the AAPD Foundation’s mission of establishing Dental Homes for children in need. If this publication has inspired you or provided valuable information that will help grow your office, please consider making a donation to the AAPD Foundation with your annual dues or online at www.aapdfoundation.org. Every new individual donor and every gift counts. Together, we can all make a huge difference toward the Foundation’s goal of providing Dental Homes for ONE million kids by 2022.

ABOUT THE AUTHOR

Dr. Jarod Johnson received his D.D.S. degree from The University of Iowa College of Dentistry in 2013 and his certificate in pediatric dentistry from the University of Nevada, Las Vegas, School of Dental Medicine in 2015. He is also a diplomate of the American Board of Pediatric Dentistry and holds a position as an adjunct assisting professor in pediatric dentistry at The University of Iowa. Johnson is the owner/manager of Arctic Dental in Muscatine, Iowa, and is an active member of the community, serving on the board of Musser Public Library. Dr. Johnson and his wife, Laurie, have two children, Lydia and William. Together they enjoy cooking, grilling, and exploring the outdoors.
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Board Qualifying Examination Preparation Course
Feb. 7 – 9, 2020
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This course will help you prepare for the first step toward becoming a Diplomate - taking and passing the ABPD Qualifying Examination. It will be presented by leading educators and clinicians who will utilize a lecture format to review subjects and materials included in the board examination.

Learn about the various domains contained in the American Board of Pediatric Dentistry examination and how to be prepared for this type of high-stakes written examination. Participation in this course does not guarantee successful completion of board exams.

Speakers
Rebecca Slayton, D.D.S., Ph.D. (Chair)
Clarice Law, D.M.D., M.S.
Travis Nelson, D.D.S., M.S.D., M.P.H.
Juan Yepes, D.D.S., M.D., M.P.H., M.S., Dr.P.H.

Who Should Attend
AAPD members and student members preparing for the American Board of Pediatric Dentistry’s Qualifying Examination.

CE Credits
22 hours

Sponsor
DOXPedo ™ KSB DENTAL

Safe and Effective Sedation for the Pediatric Dental Patient
March 26 – 28, 2020
Grand Hyatt Tampa Bay, Tampa, Fla.

This course features the 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.

This course will offer opportunities to gain hands-on experience while learning airway techniques to rescue patients and will include breakout session 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
Alan Milnes, D.D.S., Ph.D.
Christine Quinn, D.D.S., M.S.

Who Should Attend
Any dentist who sedates children in their office and wants to be taught by the leaders in the field who wrote the current AAPD-AAP Guidelines.

CE Hours
22 hours

Sponsor
Sedation Resource

Pediatric Sedation Emergencies

Simulation Course
March 29, 2020
Center for Advanced Medical Learning & Simulation, Tampa, Fla.

While no one ever expects an emergency situation to arise, attending this course will help you and your team to be more prepared should the unexpected occur. 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, 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
Alan Milnes, D.D.S, Ph.D., F.R.C.D.(C)
Christine Quinn, D.D.S., M.S.

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

Annual Joint Academic Day

Planning is underway for the Annual Joint Academic Day to be held on Wednesday, May 20, in Nashville, Tenn. A full description of the days’ activities will appear in the January 2020 edition of PDT.

Graduate Student Research Awards

The Graduate Student Research Awards (GSRA) were established in 1989 for pediatric dentistry residents and recent graduates. Finalists receive complimentary registration to the Annual Session for themselves and a guest, reimbursement for travel expenses, a cash award and plaque presented during the General Assembly.

Applications for the GSRA will be available during the first week in November by clicking on the Awards and Fellowships page under the Member Resources at www.aapd.org.

2020 Master Clinician Scholarship Program

Building on the momentum of the past several years, we are proud to announce the 2020 Master Clinician Scholarship Program.

Scholarship recipients will attend the Institute for Teaching and Learning in Atlanta, Ga., as well as complimentary registration to the AAPD Comprehensive Review of Pediatric Dentistry continuing education course.

Scholarship applications are available by clicking the Awards and Fellowships link under the Member Resources at www.aapd.org. Applications must be received by April, 24, 2020.

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

Which one should I take?

- You’re a pediatric dentist in practice or academics, who wants a refresher, as well as relevant and exciting case presentations
- You’re a general dentist who treats pediatric patients
- You’re a current resident who is planning to take the QE course in May of their final year of residency
- You’re a practicing pediatric dentist who is not yet board certified and is initiating the board certification process

The NEW Comprehensive Review Advances in Pediatric Dentistry

Board QE PREP Course

www.aapd.org
The Ideal New Patient Experience

A patient’s first visit to your office is a significant event. When handled appropriately by the doctor and team, it affirms the patient’s decision to return to your office for another visit. New patients drive the growth of a practice through increased production and thus, increased revenue. Build your new patient base by providing a stellar experience and a high level of care and customer service.

The new patient experience begins before they contact your office. Your office must be easy to find online with an updated, mobile responsive website. If it has been a while since your website has been updated, consider refreshing its look with new photos and a fresh, renewed design. This should be done every two to three years. Evaluate your online reputation to identify your practice’s strengths and areas for improvements. Most parents rely on positive reviews to make the decision to contact your office. What are parents reading about you online?

INITIAL PHONE CALL

- The initial phone call is one of the most critical steps in the new patient experience. This call can be the difference between capturing a new patient or losing a prospective patient to your competitor.
- Create a warm, friendly, welcoming and professional impression. The parent will assess the entire office from this initial phone conversation.
- Set aside distractions and focus on the conversation. Be sure to speak slowly and clearly. The parent does not want to feel rushed.
- “Thank you for calling Dr. Awesome’s office, this is Sally, how may I help you?” or “I can help you!”
- Gather the new patient information, insurance information (if applicable), and ask about a special interest of the child to bring up during their first visit. Make them feel like a valued member of your dental family.
- “Johnny is going to love Dr. Awesome and our entire team. Our office is decorated (describe theme) and we have great toys and games. He will have a great experience.”
- Schedule the appointment and let them know they will receive an electronic confirmation by (text or email) and to click the confirm option to be sure the appointment is confirmed. This only works if they filled out their new patient registration forms online in advance. If you do not utilize online new patient forms, consider adding this feature to your website to improve your new patient experience and increase efficiency in your schedule.
- If a parent does not fill out the new patient forms online in advance, consider adding an early arrival reminder with your patient communication software. This feature allows the parent to receive an earlier reminder time so that the patient registration forms can be completed prior to the patient’s scheduled appointment time.
- Let the parent know in advance your requirements for changing the appointment if needed.
- “If for any reason you need to change this appointment, please contact us at least two business days in advance. We appreciate your consideration and we look forward to meeting you and Johnny. Is there anything else I can help you with?”

OFFICE APPEARANCE

- Exterior: As your patient arrives, your signage, building and exterior appearance will make an immediate, lasting impression.
- Is your building and office easy to locate? Is there additional signage that can or should be added? Do you have a light-up sign?
- Walk through the front office of your office. Be aware of the landscape, sidewalk, signage, and exterior décor. Are there cobwebs that need to be removed? Would you be impressed as a new patient arriving for the first time?
- Take note of any updates that should take place: new foliage and landscaping, washing windows and exterior of the building, fixing imperfections in sidewalk or concrete.
- Interior: Have you taken a walkthrough of your office to see it through a patient’s eyes?
- How does your office look, smell and feel?
- In the reception area, be sure your chairs and furniture are clean and free of tears and marks.
- Is your décor warm and inviting?
• Identify areas that could use decluttering and organization.
• Your office space is a reflection of your services. Your patients will judge your work by the look and feel of your practice.
• Are the toys cleaned frequently? Are all video games in working order?

CHECK-IN PROCESS
• Upon the patient’s arrival, stand up and introduce yourself to the patient and parent. “We have been looking forward to meeting you.”
• If the new patient registration forms have not been completed online in advance, have the parent complete necessary forms. Make sure to thoroughly explain what each form is and where they need to sign.
• Consider having an iPad or tablet available to make registration forms easier to enter and read.
• Show parent where the refreshments (i.e. coffee, tea, water) and restrooms are located.
• Show the patient where games, photo booth and any other fun, unique things you have are located to make this a great experience.
• If you are on the phone when a new patient walks in, acknowledge them with eye contact, a wave, and a smile, letting them know they are important and that you will be with them soon.
• Inform the clinical team that the patient has arrived and when they are ready.
• Make the patient and parent feel at home and like the most important person in the world. This initial impression will set the mood for their perception of the team and for their entire visit.

NEW PATIENT APPOINTMENT
• A clinical team member walks to patient and parent in the reception area and introduces self by name and position.
• Ask the parent to go with you so that you can privately discuss their child’s information with them.
• Confirm the procedures/treatment that will be done that day. Be sure to communicate clearly the next steps during the appointment to make everyone feel comfortable.
• The clinical team member should bring up a special interest of the child that was discovered during the new patient phone call to create a relationship.
• Clinical team member performs the recommended procedures for the new patient (X-rays, cleaning, fluoride, etc.) and gives parent and patient oral hygiene instructions.
• Hygienist/assistant introduces the patient and parent to the doctor. This helps the doctor know the patient’s name without having to search for it.
• “Dr. Smith, this is my friend Johnny. He loves Batman and did such a great job today! This is his father, Bob.”
• Doctor introduces self to patient and parent and comments about the personal interest of the child. “Johnny, I also love Batman!”
• Doctor establishes a relationship: “We are here to help Johnny to develop good oral health. We want him to be excited about visiting the dentist and help him maintain healthy habits for life. I will let you know my findings, answer any questions and discuss options for treatment.”
• When the doctor goes over the findings with the parent, begin with the positives first. “The good news is…”
• The doctor then should explain the recommended treatment and tie it to benefits and motivators. Why is the treatment being recommended and why should the parent schedule? Explain the consequences of no treatment to the parent.
• The doctor should then hand off the patient to the clinical team member by asking the parent if they have any questions. The doctor should not discuss the financial aspects of the treatment.
• “Mr. Jones, if you do not have any other questions, please give (clinical team member) a moment to enter Johnny’s treatment and she will help you from here.”

HAND-OFF TO FRONT OFFICE TEAM
• The warm hand-off from the clinical team to the front office team is a critical step that cannot be missed. This reinforces the importance of any treatment recommended and brings together the entire appointment as one seamless experience.
• This process should be handled in a very respectful, carefully planned way and the intention is to never break the chain between patients/parents and another team member.
• Prior to dismissal, be sure that the route slip is ready and completed fully for the front office team to review.
• Check that the services posted to walkout are accurate and that the correct provider is attached to the services. Cross off anything on the route slip that was not completed.
• Walk the patient and parent up to the front desk to check out.
• Proper introductions should be made at the time of transfer. Reinforcing statements are made so the parent hears the information multiple times. The reason to return is emphasized again during this process.
• Clinical team member to front office team member: “Hi Sally, this is Johnny. Today we did (state treatment completed), and Johnny did a great job!”
• Hand the route slip to the person at check out. While facing the parent and front desk team member at the same time, let the parent know there is future treatment that needs to be scheduled.
• Reiterate to the parent the importance of keeping their child’s appointment and ask if they have any questions.

CONCLUSION OF APPOINTMENT
• The front office team member should have the treatment plan prepared with an accurate estimated patient portion.
• Present the financial responsibilities of the parent and be sure there are no objections. Parent signs or initials treatment plan and is given a copy. The signed treatment plan is scanned into the patient’s chart.
• Reserve the next appointments (restorative and recare) by offering two options for dates and times for each and let the parent decide which one works best.
• Reinforce the importance of keeping their child’s appointment.
• Say goodbye to the patient and tell them how great they were and that you are
looking forward to seeing them at their next appointment. Mention something that was of importance to the child. Tell them you wish them well with activity/sport/exam, etc.

FOLLOW-UP

• After the appointment, send a thank you card to the new patient and parent saying how nice it was to meet them and that you hope to keep them smiling for years to come.
• Use your patient communication software to send an automatic email to the parent at the conclusion of the appointment requesting them to leave a review. Be sure to include in this email that the highest compliment you can receive is the parent recommending them to a friend or family member.
• If a pre-authorization is sent to the insurance company for treatment, be sure to follow up with the parent to be sure they do not have questions.

The way your office and your team present will show patients and parents the type of service you provide. The little things that the team can do together to form long-lasting relationships with the patient and parents and make them feel part of your dental family make all the difference. To your patients and parents, their visit is all one seamless experience, so be sure it is also a seamless experience with your team. Consider taking a walkthrough of your office with your entire team from the view of a new patient. Begin in the parking lot, enter your doors to the reception area and through to the clinical area. Take note of small details that could be missed on a daily basis that may be having an impact on the new patient experience. Above all, the goal is a happy patient and parent.

“A person’s most useful asset is not a head full of knowledge, but a heart full of love, an ear ready to listen and a hand willing to help others.”

Unknown

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

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Your Slides Are Ready

A nearby hospital wants you to speak at its child birthing class. The local pre-school program has invited you to address its teaching staff. While both are good educational (and marketing) opportunities, who has the time? You do! Because your slides are ready.

*Big News for Little Teeth* is a new slideshow the AAPD has created for members to use during speaking engagements. Visually appealing, the presentation gathers the latest information and research on topics such as oral health care, oral hygiene, nutrition, injury prevention, and more. Potential audiences include expecting parents as well as parents/caregivers of infants, toddlers, school-age children, adolescents, and teenagers. It also works for school teachers, social workers, public health professionals, and the like.

The 80+ slide collection is divided into nine sections so you can choose which slides work best for the audience and speaking engagement. In addition to a section for soon-to-be-parents and five sections for different age groups of children, the slideshow includes sections on topics such as fluoride, sealants, and cosmetic dentistry. It is accompanied by speaker notes with AAPD policies related to visual information on the slides.

This members-only resource can be downloaded free at [https://www.aapd.org/resources/member/highlight-item/new-resource/big-news-for-little-teeth/](https://www.aapd.org/resources/member/highlight-item/new-resource/big-news-for-little-teeth/)

This slide from Big News for Little Teeth introduces topics for the expecting parent section.

*Slide show offers speaker notes with relevant AAPD policies.*
Updated Research Agenda

The Council on Scientific Affairs, chaired by Donald L. Chi, D.D.S., Ph.D., has updated and affirmed the 2019–2020 AAPD Research Agenda to guide the profession in relevant research that will help fill scientific gaps, better inform clinical practice, and improve individual patient and population oral health outcomes. We urge academic, state, federal, philanthropic and corporate funding agencies to devote resources to the following areas:

- Improved diagnosis, prevention, and management of dental and craniofacial conditions through the life course (e.g., emerging dental caries management agents, precision/personalized oral health care, technologies and strategies to monitor and promote health and self-care).
- Interdisciplinary research to understand and eliminate oral health disparities and promote oral health for all (e.g., basic behavioral and social determinants of health, applied microbiology and microbiome research, development of evidence-based public health interventions, clinical trials focusing on children and vulnerable populations, integration of dentistry into the broader health care delivery system, bioinformatics, quality of care, models of interprofessional collaboration, data sharing, training, and team science).
- Translational research to move scientific knowledge into practice and policy (e.g., dissemination and implementation of evidence-based care principles into clinical practice, barriers to dissemination and implementation, policy and practice partnerships).

AAPD Announces a Pediatric Dental Specific Voluntary Accreditation Process

For nearly 40 years, the American Association for Accreditation of Ambulatory Surgery Facilities’ mission (AAAASF) has been active in patient safety in the outpatient surgical arena. In 2018, AAAASF partnered with the AAPD to develop a voluntary sedation/general anesthesia accreditation model for pediatric dental practices. This is in response to the commitment by pediatric dentists to continue to provide safe environments in which to treat children, and is designed for practices interested in demonstrating that commitment to their patient families. Through this partnership, both AAAASF and AAPD will enhance a sense of trust between providers and families seeking care in pediatric dental facilities.

The intent is to offer an opportunity for pediatric dental offices to voluntarily choose to be accredited by an independent organization documenting safe and competent delivery of deep sedation and general anesthesia in their office setting. This accreditation process will then be expanded for in-office moderate sedation services.

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

Together, we look forward to being the driving force for pediatric dental patient safety worldwide.

State of Little Teeth Report Works for Community Outreach

The new second edition of the State of Little Teeth Report draws on the latest scientific research and best available expertise to examine the public health crisis of tooth decay among children in the U.S. In addition, it discusses our mission of patient safety, our approach to an evidence-based practice of pediatric dentistry, and our programs of child advocacy. Here are ways to use the new report in your outreach efforts to your patients and community:

- Offer a copy to school nurses—and school librarians
- Use it as support material for career day and other public presentations
- Provide a copy to local pre-schools and day care centers
- Drop one off at local pharmacies
- Send a copy to the PR department of the hospital with which you are affiliated
- Share with your referring dental and medical offices
- Email a copy to your local health department
- Place a copy in the “adult reading section” of your reception area
- Post it on your office website


Evidence-Based Dentistry Committee (EBDC) Update

At the Ad Interim Meeting in September, the Board of trustees approved the following topics for future clinical practice guidelines that the EBDC had selected based on the literature search and review.

- Frenectomy and Lactation
- Vital treatment of immature permanent teeth
- Caries risk assessment and oral health determinants

The EBDC continues to oversee the two new evidence-based clinical practice guidelines:

- Clinical Practice Guidelines for use of Non-Vital Pulp Therapies in Primary Teeth; and
- Clinical Practice Guideline on Behavior Guidance for Pediatric Dental Patients.

The Non-Vital Pulp Therapy Workgroup has developed a draft systematic review manuscript. The results of this systematic review will form the basis for the recommendations in the non-vital pulp therapy clinical practice guideline scheduled for completion in 2020. The Behavior Guidance Guideline Workgroup is awaiting the publication of the Cochrane systematic review on “non-pharmacological interventions for managing dental anxiety in children.” They will evaluate and appraise the systematic review.
Fire During Deep Sedation and General Anesthesia—Urban Myth or Real Nightmare?

Jung-Wei “Anna” Chen, D.D.S., M.S., Ph.D.

With the shift in parenting styles and practitioners’ preferences, the treatment paradigm has changed from traditional behavior management to increased use of office-based deep sedation/general anesthesia (DS/GA). A lot of safety issues have been mentioned and discussed about office-based DS/GA. However, one issue can cause severe complications and impact to both patients and practitioners yet is rarely mentioned: fire during DS/GA.

According to the American Society of Anesthesiologists’ Practice Advisory for the Prevention and Management of Operating Room (OR) Fires, an estimated 50 - 200 OR fires occur in the United States every year, with as many as 20 percent of reported fires resulting in serious injury or death. On the dental side, the real number is still a mystery. A recent article in the *Journal of the American Dental Association* (JADA) published a case report about a patient fire during dental care. Despite very few articles published in the dental field, as responsible practitioners, we should be aware of the risk of fire during DS/GA.

![Fire Triad Diagram]

**Let’s think about a scenario:** A pediatric dentist is practicing office-based DS/GA, and the anesthesiologist requests to use cut dry, which means using a high-speed handpiece with very minimal water irrigation. The patient was placed under DS/GA with high oxygen saturation around the nose and mouth. The throat pack is dry, and the dentist chooses to use a dull bur that touches the rubber dam clamp or zirconia or stainless steel crown, which can cause a spark. The dental assistant is also not using a high-power suction due to low/no water irrigation. This is a perfect storm for causing a fire, because the fire triad requirements are all fulfilled.

This is not just a hypothetical exercise or warning; it has happened. Safety requires an awareness of the real risk of fire during office-based DS/GA. Fires in office-based DS/GA cases are rare. However, the consequences from them can be detrimental, and fast emergency reactions are needed. The complications can be swelling and occlusion of the airway, up to third-degree (full thickness) burns to the mouth and throat, and most certainly, a psychological shock to the patient, parents, practitioners and health care provider team. In order to place the patient’s safety as the priority, pediatric dentists should review the fire risks prior to conducting office-based DS/GA.

The following tips can help dental practitioners prevent fires during office-based DS/GA.

1. Avoid having all components of the fire triad at the same time during DS/GA.
2. Do not cut dry, using a high-speed handpiece with minimal irrigation.
3. Use high-power suction during the entire DS/GA treatment.
4. Discuss the fire risks with your anesthesiologist before starting treatment, and review possible emergency protocols if one happens.

**Why does DS/GA have a fire risk?** First, we have to understand the fire triad—an oxidizer, an ignition source, and a fuel (Figure 1).

1. **Oxidizer:** During DS/GA, oxidizers can include oxygen and nitrous oxide.
2. **Ignition Source:** Ignition starts with a sudden increase in temperature. Repeated friction between hard or rough surfaces can cause an increase in temperature, which can spark and ignite. In dental office settings, ignition sources may include lasers, high speed handpieces with dull burs (especially diamond burs), electrosurgery units, titanium, and zirconia materials.
3. **Fuel:** During DS/GA, fuels include tracheal tubes, sponges, and drapes (throat packs).

**References**

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Gluten-free Vella is available in two package options: The sturdy Vella stick, or VellaMini, for the back-of-the-glove application technique. Use it and make everyone happy.

¹Data on file.
Coding Corner

Know Where Auditors Look for Fraud on the Dental Claim Form

The 2012 ADA Dental Claim Form is the most commonly accepted method of communicating treatments provided to patients in a consistent way, and is accepted by payers as the method to submit claims for reimbursement. https://www.ada.org/~/media/ADA/Publications/Files/z2019_ADA%20DentalClaimCompletionInstructions_2019May20.pdf?la=en.

There are certain responsibilities associated with claim submissions. Most importantly, it is necessary to realize that the claim form is a legal document, signed by the doctor. There is a moral and legal obligation that the information conveyed on that dental claim form is accurate and true. If completed with errors or inaccurate information, there may be some significant repercussions, even legal action.

This feature details some of the more common areas of concern.

BOX 1

If the procedure is anticipated, but has not begun, the predetermination box should be checked and there should be no associated dates of services listed. If the treatment has been initiated, but is not complete, check the box that indicates the claim is a “statement of actual services.” Fewer than five percent of dental plans allow service to be billed on the start date. The incurred liability date (the date the service may be billed) may be determined when verifying benefits or by calling the payer’s provider relations representative and asking the question, “May services that require multiple appointments be billed on start date?”

If the wrong box is checked and payment is received in error, return the EOB with a notification that the incorrect box was checked. Request that the claim be reprocessed as a predetermination. Do not cash the check or hold the check in anticipation that the service will be completed.

BOX 4

Always check the boxes that apply. If the patient has medical and dental coverage for their dental services, you must check both boxes to provide accurate information to the payer. Medical coverage is almost always primary and should be submitted first. When/if payment is received from the patient’s medical plan, attach a copy of the medical reimbursement EOB to the dental claim and check both dental and medical boxes, and identify the other plan covering the patient’s treatment in Box 11.

BOX 29

Always select the most accurate code to describe the service provided. Be careful to use the most current and accurate CDT code in Box 29. Using an incorrect code and receiving inappropriate reimbursement can be viewed as fraud. Even an “innocent mistake” may be viewed as “blind disregard for the truth” and can lead to significant challenges, especially if the errors are frequent and no compliance program is in place.

An outline of the mandated seven step compliance program can be found at https://www.reliasmedia.com/articles/130800-oig-s-7-elements-for-effective-compliance.

BOX 33

When pertinent to periodontal, prosthodontic (fixed and removable), or implant services, many plans require that all missing teeth be identified. This may be true even if the treatment only involves one missing tooth. Accurate information for the missing teeth will often prevent delays or requests for additional information from the payer before reimbursement is considered.

BOX 34 AND 34A

Some states and payers require this area be completed. Completion is most frequently required for government reimbursed plans.

BOX 35

This box is used to convey additional information for a procedure code that requires a report or to convey additional information necessary for the payer to process the claim. Remarks should be concise and pertinent to the claim submission. If the claim form is submitted electronically, only 80 characters should be transmitted. Longer remarks should be forwarded to the payer via attachment. Note that an entry in the “Remarks” section may prompt review by a person as part of claim adjudication, which may impact the overall time required to process the claim.

BOX 36

This box states: “I (the patient) have been informed of the treatment plan and associated fees. I agree to be responsible for all charges for dental services and materials not paid by my dental benefit plan, unless prohibited by law, or the treating dentist or dental practice has a contractual agreement with my plan prohibiting all or a portion of such charges. To the extent permitted by law, I consent to your use and disclosure of my protected health information to carry out payment activities in connection with this claim.”

A copy of a treatment plan signed by the patient should be maintained in the patient’s clinical record.
BOX 37

This box states: “(the patient) hereby authorize and direct payment of the dental benefits otherwise payable to me, directly to the below named dentist or dental entity.”

A copy of the patient’s dated and signed authorization of benefits to the practice should be maintained in the patient’s record.

Note: Some plans (including most Delta Dental Plans) will not honor this request, even if signed by the patient, unless the state has adopted legislation mandating that the patient request of assignment of benefits be honored. Check with your state’s dental association for information regarding the legislation in your state.

BOX 38

Place of treatment must be accurately identified. If the doctor has multiple locations or if the treatment was provided in a hospital setting, make sure the correct location is listed.

BOX 40

Is the treatment for orthodontics? The box should accurately reflect the reason for the treatment. This may seem straightforward, but orthodontic treatment could include extraction of teeth that are crowded as part of the orthodontic plan. All treatments provided in relation to or to aid with orthodontic treatment should be identified as part of the overall orthodontic treatment.

Ultimately, the dentist and team need to be aware that the claim form submitted to the payer for reimbursement is a legal document. All information provided on and with that claim, must be accurate.

Questions or concerns can be sent to Dental Benefits Director Mary Essling at (312) 337-2169 or messling@aapd.org.

BOX 45

If the treatment was necessary because of an occupational injury or accident, auto accident, or other accident (e.g., slip or fall), the appropriate box should be checked. When this is the case, any accident coverage would then become primary. The treatment should be submitted to the plan covering the accident (e.g., auto insurance, medical insurance, employer’s liability plan, etc.).

BOXES 48 – 52

These areas are completed if payment is directed to an entity other than the treating dentist. Do not complete this section if payment is to be directed to the patient.

BOX 53

Signature of the treating or rendering dentist and the date the form is signed should be accurate. This box should accurately identify the dentist who performed, or is in the process of performing, procedures, indicated by date. This includes accurately identifying the dentist who supervised a qualified individual performing the service. Under no circumstances should another provider be listed as the provider of service, regardless of the individual’s participation status.

Note: If the claim form is being used to obtain a pre-estimate or pre-authorization, it is not necessary for the dentist to sign the form.

Visit store.aapd.org today!
Media Mix

For more information on how to submit your media coverage, please contact Public Relations Director Erika Hoeft at (312) 337-2169 or erika@aapd.org.

AAPD Member Featured on Goodhousekeeping.com

Donald L. Chi, D.D.S., Ph.D., 2018 recipient of the AAPD Pediatric Dentist of the Year award, provides the lowdown about what to expect when baby teeth start popping through. He participated in an article titled, “When Do Babies Start Teething? The Facts Every Parent Should Know,” dispelling teething myths to help with the baby’s first tooth when it arrives.

AAPD Member on MarthaStewart.com

Dr. LaQuia Walker Vinson was interviewed for a story titled, “Dentists Say These Are the 10 Worst Foods for Your Teeth.”

AAPD President Addresses Tongue Ties with Romper.com

AAPD President Dr. Kevin Donly spoke with Katie Goldin who was writing an article answering the question, “Can a tongue tie come back,” either after surgery or after it resolves on its own.

New Mouth Monster Hub Content in Spanish

Dientes Saludables y los Niños con Necesidades Especiales: Lo que los Padres Necesitan Saber (Healthy Teeth and Children with Special Needs: What Parents Need to Know)

Join the Monster-Free Mouths Movement

Stand up to the Mouth Monsters — those little mascots for tooth decay, the number-one chronic infectious disease among children in the US. Help your kids keep the monsters out of their mouths with our handy posters, fact sheets and other fun stuff available for download on our website: mychildrensteeth.org/mouth_monsters
One Diplomate’s Journey

“The willingness to partake in this journey, regardless of how long or short, speaks to our commitment to excellence, lifelong learning and self-validation.”

The American Board of Pediatric Dentistry, which began in 1940 as the American Board of Pedodontics with only a handful of diplomates, now consists of 83% of eligible members of the American Academy of Pediatric Dentistry. While the certification process has evolved, ABPD’s commitment to clinical excellence, lifelong learning and self-validation endures. The journey to becoming a diplomate can be as meaningful as the achievement. In this issue of PDT, we wish to highlight the journey of one diplomate.

As this individual completed her residency training in the early 1990’s, the certification process transitioned from four to three parts to be completed within seven years. Within two years of finishing her training, she successfully completed the first and second parts, leaving five years to complete the last part by site visit or submitting four clinical cases that required pre- and post-treatment documentation of a minimum 12-month interval.

In spite of her ardent determination to complete the certification process, common life-changing events, such as relocation, job change, childbirths and family commitments, intervened. Also, there were practice parameters beyond her control; workplace less than ideal for a site visit and difficulty in locating archived records. She could think of many more reasons delaying her completing the process, and the seven-year deadline was fast approaching.

While she was on her second maternity leave, and within a month of her eligibility expiring, she called Dr. James Roche, the ABPD’s executive director, explaining her situation and hoping he would grant her an extension. Instead, he suggested she should quickly gather the cases she had prepared and submit them before the deadline; she could provide more documentation later if needed.

That was a more favorable response than an extension, but she was unable to convince herself to follow Dr. Roche’s advice. She believed that quickly submitting the cases would not represent her work well, and she would not relish the experience, compromising the essence of self-validation. After all, in spite of all her major life events, perhaps she did procrastinate, and she had no one but herself to blame. Also, optimistically, she trusted that preparing for a repeat examination would benefit her and her patients. That was 1999.

Eventually, in 2004, she retook the written examination and passed. Fortuitously, shortly after that, the certification process was simplified to the current two parts. She successfully completed the Oral Clinical Examination in 2006 and became board certified, finally, 15 years after completing her residency program.

Well, this happened to be my journey, and it was by no means unique. Indeed, many veteran diplomates endured the arduous four-part process and collected umpteen interesting and memorable hardship stories along the way. Some didn’t begin the certification process until many years after leaving their training programs. While becoming a diplomate was the goal, the journey itself was no less important. To me, it mattered immensely.

The willingness to partake in this journey, regardless of how long or short speaks to our commitment to excellence, lifelong learning and self-validation. As our specialty continues to thrive, and with ABPD’s goal for more eligible AAPD members to become board certified, these individual journeys are what define our achievements.

Dorothy Pang, DDS, MS
San Francisco, CA
Secretary & QE Board Liaison
Board Certified 2006

Eight Questions to Ask Your Malpractice Carrier

Ken Thomalla, CPA®, CLU®, CFP®
Chief Operating Officer
Treloar & Heisel, Inc.

You pursued pediatric dentistry to serve patients and make a difference — not to become knowledgeable about malpractice insurance.

Protecting yourself, and your practice, is one of the best steps you can take to pursue peace of mind as a dental professional. Making the right malpractice insurance decision is less daunting when you know what to look for in a carrier. Here are a few questions you should ask to find a malpractice product, and carrier, that will offer the strongest protection.

1. How financially strong is the carrier?

It’s important to understand a carrier’s financial strength, because malpractice insurance is a long-term promise. Independent agencies such as A.M. Best – determine insurance carrier ratings based on a number of factors. Typically, the higher the carrier’s rating, the more financially secure the agency believes them to be.

2. Will my policy have a pure consent to settle provision?

Every malpractice policy has a provision regarding who can “consent to settle” a claim – an insured or the company. But not every company offers a policy that gives the right to consent to settle a claim to an insured, without restriction. Not having these restrictions is also known as a “pure” consent to settle provision. Pure consent gives you control to refuse to settle a malpractice claim and is extremely important to have in your insurance policy.

3. Is Occurrence coverage an option?

Occurrence policies provide coverage for a claim based upon when an incident occurs, no matter when a claim is made. As a result, Occurrence policies provide coverage long into the future – no matter where you practice, if you take a break from your career, or change specialties. Both Claims-made and Occurrence policy types have specific benefits, and it’s important to understand the difference so you can choose the right fit for your career plans.

4. What happens if I move states?

An insurance company’s ability to move with you from coast-to-coast will make relocating a lot easier. That’s why you want to make sure the company you’re considering offers coverage in every state so you can make life changes without worrying about an interruption in your coverage.

5. Will I have access to risk management resources?

A malpractice insurance company should give you tools to improve patient safety and identify areas of risk in your practice. Look for an in-house risk management team that is able to provide real-time advice. A great company doesn’t just defend claims, it actively works to prevent them.

6. How experienced is the claims team?

What if you’re named in a malpractice lawsuit and feel confused and afraid? An experienced claims defense team trained to fight for you will help ensure you never feel alone and will usually walk away with winning results. After all, you’re paying for the promise that your insurance carrier will show up when you need them most – with an experienced team.

7. Does the carrier understand my specialty?

Pediatric dentistry is one of hundreds of healthcare specialties, and your malpractice insurance policy should be specialized to you and your scope of practice. As a specialist, look for a company that offers additional coverages addressing your industry’s needs, such as Medicare/Medicaid billing defense coverage, which will provide you with coverage if the government audits your practice with a formal records request. For example, a policy with MedPro Group includes limits for this coverage up to $25,000 per incident and $100,000 for total incidents in the policy period.

8. Is the policy competitively priced?

The best doesn’t always have to cost more – it may even cost less. A carrier should understand the value of comprehensive malpractice coverage that’s created with your specialty in mind, and commit to providing just that – at a competitive price. Look for a carrier who provides discounts based on your scope of practice, years in practice, or membership affiliations. For example, MedPro Group offers an exclusive 10% discount to any pediatric dentist who is a member of the AAPD.

We care about the protection of AAPD members. That’s why we’re proud to promote the services of MedPro Group – one of the nation’s leading dental malpractice insurance carriers. Through Treloar and Heisel, MedPro is able to give AAPD members customized coverage solutions and exclusive members-only discounts. Contact a member of the Treloar and Heisel team at (800) 345-6040 or visit our website at treloaronline.com.

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CALIFORNIA—SAN DIEGO. Great opportunity for Pediatric Dentists in the San Diego County area. Join our team and be a part of something as extraordinary as the children you treat. With five locations, soon 6, we are looking for someone compatible who is personable, enthusiastic, caring and someone who loves what he/she does. Currently, we’re seeking both part-time and full time positions with GREAT compensations, relocation and sign on bonus packages. Requirements: Pediatric Dentist CA License. For more information on our practice, please feel free to check out our website www.thedsuperdentists.com and see for yourself why The Super Dentists is San Diego’s largest, most trusted and top awarded pediatric dentistry practice. Please send your resumes to nicki@thesuperdentists.com or call (619) 548-8772 for more information on the opportunity.

COLORADO—BOULDER. Uptown pediatric practice is looking for full time pediatric dentist to start ASAP. This is an awesome opportunity to live in one of the top outdoor towns in America. We have a diverse patient base and a healthy mix of insurance and fee for service. Please respond with letter of intent and your C.V. to e-mail littlebridge@msn.com.

CONNECTICUT—BOZRAH. New London County Group Pediatric practice seeking a full time pediatric associate leading to partnership for the right person in our multi-location practice located in Southeastern CT. Our four offices are located within a 25 mile radius of each other half way between Boston and New York City. This is a great opportunity to become part of our successful, well respected, quality based practice that has been in business for more than 35 years. Salary guarantee, health insurance and 401K plan. Candidate should be hardworking, caring and dedicated to providing excellent pediatric dentistry to all types of children. For more information or to send resume please contact children.dental@net.net or visit our website http://www.cdanic.com. Hospital OR’s, Shared Rotation After Hours Call. Some Saturdays, PALS/BLS, AAPD Board Certified or eligible, CT Dental License.

FLORIDA—JUPITER. Seeking an amazing individual to complement our team. Pedo/ortho office in Jupiter, Florida seeking another pair of caring hands. Not many places as desirable to work and play. We continue to have explosive growth and need another skilled and compassionate provider. Fee for service and PPO insurance only, no medicaid or HMOs. Opportunity for comprehensive treatment including iv sedation, oral sedation and hospital dentistry. Seeking part time associate with ownership opportunities in time. Requirements: 1. D.M.D/D.D.S. degree. 2. Must have a specialty certificate in pediatric dentistry. 3. Florida dental license. 4. Diplomate status highly suggested. 5. PALS/CRP Certified. 6. Must love children! Please e-mail resumes to jasonmcnuck@yahoo.com.

FLORIDA—ORLANDO. Seeking pediatric dentist to join established and growing private practice in the Central Florida area. 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, oral sedation and N2O. Competitive compensation based on guaranteed minimum or percentage of collections (whichever is greater). Qualifications include: Board Certified or Eligible, Florida Dental License. Please e-mail resumes to Awesomepedojob@gmail.com.

GEORGIA—JOHNS CREEK—ALPHARETTA. The Johns Creek/Alpharetta area is noted to be one of the fastest growing, best places to live in the country. Atlanta has much to offer, from world class dining, cultural events and professional sports to some of the finest museums in the world. Children’s Dental Group, with its new winning 12,000 Sq. Ft. free standing facility boasts state of the art equipment and technology that makes us a leader in the industry. Our doctors are supported by a highly trained team of professionals that are dedicated to delivering an amazing patient experience. From the children of music moguls and movie stars to the average American family our patient base is 85% PPO and 15% private pay with No discount, DMO’s or state plans accepted. We are the top 1% - if you are looking for the opportunity of a lifetime, visit www. childrensentalzone.com and checkout our 600+ google reviews, then send a cover letter with your C.V. and a photo to Marcia@childrensentalzone.com.

ILLINOIS—NAPerville. Immediate opening for Pediatric D.D.S. in expanding multi-specialty practice. High end technology, western suburbs, F/T and P/T hours available. Looking to add to an amazing team! The office treats between 70-90 patients daily. We offer an outstanding compensation package. Full-time and part-time positions available. -Salary ranges between $250K-$350K (40% Net Production) 1 Year of Malpractice Insurance covered. -Sign on bonus. -Partnership Opportunity. -Benefits available to full-time employees. -Medical & Dental Insurance. -401k. Please e-mail resumes to: recruiter@innovativepediatricdentistry.com.

MARYLAND—ANNAPOLIS. Confidential review of your resume! We have a great location and excellent history of return patients. Our fun, modern office keeps up with current evidence based guidelines. I am looking for a Board Certified pediatric dentist. Please e-mail your C.V. and availability to dr.khoshkhou@gmail.com. Excellent facility. Beautiful location. Well established practice looking for long term pediatric dentist. Generous pay. Candidates must be Board Certified.

MASSACHUSETTS—LOWELL. Kangaroo Smiles is seeking a pediatric dentist for our offices north of Boston. Work in a clean, well-organized, brand new, and high-tech office. Doctors are well supported with highly skilled clinical and admin staff. This is not a corporate office, we are focused on high quality care and customer service. Part time and full time positions available. Offering $1,200 per work day compensation with future partnership potential for the right candidate. Great opportunity for new and experienced pediatric dentists. Candidates must be licensed in the state of Massachusetts. Have completed a pediatric dental residency or currently in a pediatric dental residency program required. E-mail resume to, info@kangarooSmiles.com.

MASSACHUSETTS—RAYNHAM. We are offering a part time career opportunity to a pediatric dentist interested in joining our upbeat, fast paced, and compassionate team. This individual should be flexible, outgoing, and friendly. We are experiencing rapid growth and expansion and are excited to bring on board a doctor who is as passionate about patient care as we are. We are committed to providing a safe and comfortable environment for our patient and parents as well as a rewarding and team oriented culture for our employees. Our modern office is equipped with digital x-rays with Dentrix and OpenDental as practice management systems. Commonwealth Pediatric Dental is located on Rt 138 in Raynham and Rt 6 in Dartmouth. Flexibility to work in both locations is required. Requirements: D.D.S. or D.M.D., 1+ years of pediatric dentistry experience. Nitrous oxide permit required. Have a good ethic with a positive attitude and great chair side manner. Please send resumes to sjansen@commonwealthdental.com.
OREGON—EUGENE. Our group is looking for a full-time pediatric dentist for our very busy clinic. You will have autonomy to practice your dental philosophy, support in training of your assisting staff and our management company handles the front-end portion of the clinic. This allows you to focus on patient care and back office efficiencies. Why We Feel This Opportunity is Unique: Our hope is that you love the practice, area and want to put down long term roots. This makes a win-win-win for the community, stability of the clinic and you. We give a lot of autonomy when it comes to formulating treatment philosophies. We also have a lot of experience with all of our group that love to collaborate. We are booking out many months for all treatment. Long story short, you will not have an issue keeping as busy as you want to be. We treat the entire population. Our clinics are a healthy mix of FFS and Medicaid patients. Oregon Health Plan (OHP/Medicaid) reimburses very generously compared to other states. This allows a mixed social demographic clinic to thrive and through good and bad economic times. You also get to treat a portion of the population that otherwise is under-served and families are very grateful. What the Group Management Provides: The group is tied together with a management company that handles: HR, financials, marketing, vendor relations, management of front desk staff, legal and insurance, patient and community relations. It provides a conduit for two-way reporting and quality feedback for the providers and business side of the clinic. This allows both sides to be supported in what they do best. About more about the Eugene/Springfield Area. The area wedged between the coast and mountains in the Northern Willamette Valley. Skiing at Mt. Hood nearby and Bend is just a couple hours away and a trip to the coast is only an hour drive. If you need a big city fix, Portland is right next door. The Willamette Valley is dubbed Napa North for award-winning wines. Organic farms support a great food scene with small restaurants serving a wide variety of cuisines all over town. If you are into great food, wine, the outdoors, low-cost and low-stress living, you are really going to enjoy living and working in the Newberg area! If you are interested in learning more we would love to pay for you to visit our doctors and tour our clinic. Please look at our website; www.Newbergkidsdentist.com We look forward to hearing from you soon. Please e-mail resumes to Eric@opdconline.com.

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in Austin! We offer a comprehensive compensation packages: - Full Medical Benefits - Company Paid Life Insurance - Company Paid Long Term Disability Insurance - 401K with up to 3.5% company matching. New grads welcome to apply. Requirements for this position: Have a TX License. Please e-mail resumes to joinourpractice2016@gmail.com.

TEXAS—RICHMOND. Looking for a Full-time Pediatric dentist. Very busy Pediatric Dental office looking for a Full-Time Pediatric dentist. Our very large practice is centered in a massively growing part of Houston. We are looking for someone who has a passion for serving our patients and the local community. We offer in-office conscious sedation, IV sedation, and hospital dentistry and two of the local hospitals. We are looking for a long term associate, and potentially offering a buy-in partnership to the right candidate. Requirements for this position: Board-eligible/qualified, or board-certified pediatric dentist. Level 2 or more sedation license. Please e-mail at dmh@thejonesfirm.com if interested. We are looking to fill this position soon.

TEXAS—SAN ANTONIO. Pediatric Dentistry practice in San Antonio is in search for an Associate with the option to buy. This Practice has been open for 11 years. Location is in the fast growing Northwest side of the city. Please contact dberndt71329@aol.com.

WASHINGTON—WALLA WALLA. Have a passion for helping children have a wider and brighter smile? Join our team at Craik Pediatric Dentistry. Where patient interaction is focused on Happy Kids, Healthy Smiles, for a Lifetime! At Craik Pediatric Dentistry our main focus is providing an inviting environment for all our patients and their families through a caring staff and exceptional dental care. Pediatric dentist: Immediate Opening with Signing Bonus. Craik Pediatric Dentistry has an immediate opening for an experienced, compassionate and motivated pediatric dentist interested in opportunities to provide care focusing on prevention and community involvement. About Craik Pediatric Dentistry: We believe that every child deserves quality dental care. We work hard to ensure that all the children in the communities that we serve have access to specialized dental care and strive to become an integral part of the community that we serve. Our office is located at the foot of the Blue Mountains in Walla, Washington, were wineries are beginning to rival the sweet-tasting Walla Walla onion as the hallmark of this lovely town. In fact, the combination of excellent wineries and appealing scenery has put Walla Walla on the map as one of the country’s hottest new wine touring regions. The town’s rich history, starting with the early pioneers, the establishment and subsequent tragic demise of a famous mission and then a gold rush, is also a tourist draw. Fascinating museums and historic attractions bring this past to life. Music and the arts are a vital part of this culturally conscious college town, which boasts one of the oldest symphony orchestras west of the Mississippi, frequent summertime blues and jazz concerts, arts festivals and at least 15 art galleries. A revitalized downtown features restored 19th-century buildings, restaurants, galleries and wine-tasting rooms. If you’re itching for outdoor fun, head east for hiking, mountain biking and fishing in the Blue Mountains or take the relatively short drive to the Columbia River Gorge, Oregon and back. Our clinic has 6 ops outfitted with ability to go to 8 in center of Walla Walla. We operate 4 full day schedules and use state of the art technology such as the Sola Laser and operate in office GA with our pediatric anesthesiologists. Why Should You Apply? Competitive Salary, Signing Bonus, Quarterly Bonus Potential, Top benefits including: Health Insurance, 401K Retirement Plans, and Health Savings Account. Professional Liability Insurance. Craik Pediatric Dentistry is committed to maintaining a drug-free and safe workplace. A post-offer drug test to detect the use of illegal drugs is a part of our hiring process. We are looking for a Full-Time Pediatric dentist. Where patient interaction is focused on Happy Kids, Healthy Smiles, for a Lifetime! At Craik Pediatric Dentistry our main focus is providing an inviting environment for all our patients and their families through a caring staff and exceptional dental and orthodontic care. A Kidz Dental Zone has an immediate opening for an experienced, compassionate and motivated orthodontist interested in opportunities to provide care for patients of all ages. About A Kidz Dental Zone. We have been in practice since 1999 in the heart on Hood River and opened our doors to The Dalles community in 2013. We are surrounded by mountains, rivers, streams, biking hiking trails and all of the outdoor adventures the Gorge brings. At A Kidz Dental Zone we believe that every patient deserves quality dental care. We work hard to ensure that all the children in the communities that we serve have access to specialized dental care and strive to become an integral part of the community that we serve. Why Should You Apply? Competitive Compensation, Signing Bonus, Production Bonus Potential, Top benefits including: Health Insurance, 401K Retirement Plans, Profit Sharing, and Health Savings Account, Paid Professional Liability Insurance, Paid Vacations, Continuing Education Reimbursement, Opportunity for future partnership. Team that focuses on family and individuals. A Kidz Dental Zone is committed to maintaining a drug-free and safe workplace. A post-offer drug test to detect the use of illegal drugs is a part of our hiring process. A Kidz Dental Zone does not discriminate on the basis of race, color, national origin, sex, age, or disability in its programs and activities. Please e-mail resumes to susan@akidzdentalzone.com.

FACULTY POSITIONS AVAILABLE

OKLAHOMA—OKLAHOMA CITY. The Department of Developmental Sciences at The University of Oklahoma College of Dentistry seeks qualified applicants for a full-time benefit eligible clinical faculty position. The successful candidate will join an energetic pediatric division committed to excellence in teaching, research and pediatric patient care. Responsibilities will include didactic and clinical teaching in Pediatric Dentistry. In addition, opportunities for research and intramural practice are also available. Applicants must possess a dental degree (D.D.S., D.M.D. or equivalent) and a certificate of advanced training in Pediatric Dentistry at an ADA Accredited institution, and eligibility for licensure in Oklahoma. Applicants must be educationally eligible for the American Board of Pediatric Dentistry examination. Initial review of applications will begin immediately. Please send a letter of intent and curriculum vitae to Dr. Timothy Fagan, Chair, Department of Developmental Sciences, University of Oklahoma College of Dentistry, 1201 N. Stonewall Avenue, Oklahoma City, OK 73117-1214 or via e-mail: timothy-fagan@ouhsc.edu. The University of Oklahoma is an EO/AA Institution http://www.ou.edu/eeo/. Individuals with disabilities and protected veterans are encouraged to apply.
WASHINGTON—SEATTLE. The University of Washington School of Dentistry, Department of Pediatric Dentistry invites applicants to apply for a full-time, non-tenure track Clinical Assistant Professor Dental Pathway position. Qualified applicants must have a D.D.S./D.M.D. or foreign equivalent; have completed a CODA-accredited advanced education program in pediatric dentistry with current standing as a diplomate of the American Board of Pediatric Dentistry; and have the ability to practice dentistry in the State of Washington. In addition, the candidate is expected to obtain a State of Washington permit to administer moderate sedation or moderate sedation with parental agents. The person holding this position is to be engaged primarily in teaching and clinical care; scholarship may be more broadly defined compared to tenure and research tracks. Responsibilities include the Directorship of the Pre-doctoral Program, clinical and didactic teaching at pre-doctoral and post-doctoral levels, participating in resident and student research projects, continuing education, and clinical practice including sedation and general anesthesia. Salary will be commensurate with the qualifications of the selected applicant. The applicant must exhibit a strong interest in teaching and be able to demonstrate a history of organizational and management skills required for a Pre-doctoral Program Director. The ideal candidate will exhibit passion, clinical expertise, resilience, grit, and a sense of humor. We are particularly interested in applicants with a diverse background and range of experiences. Applicants should submit a letter of interest, C.V., and names and addresses of three (3) references through the UW Interfolio Faculty Search engine: https://ap.washington.edu/ahr/academic-jobs/. Applicants to this position receive a free Dossier account and can send all application materials, including confidential letters of recommendation, free of charge. Screening of applications will begin immediately. The position will remain open until filled. The University of Washington is an affirmative action and equal opportunity employer. All qualified applicants will receive consideration for employment without regard to race, color, creed, religion, national origin, sex, sexual orientation, marital status, pregnancy, genetic information, gender identity or expression, age disability, or protected veteran status.

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NEW YORK—BROOKLYN. A Great opportunity for pediatric dentist to startup or expand your own practice. Dental Office is located in Bay Ridge with the address of 365 Bay Ridge Parkway 11209, Brooklyn NY. This Practice has been in business for more 45 years, providing high quality pediatric dentistry, sedative management loads of phase and phase 2 orthodontics. This 10 chair, 3 story practice is still state of the arts, and resembles a Disney World type environment. First and second level are for pediatrics and young adult sections, and the 3rd level is for non day to day business. The 3rd level provides and efficiency apartment ready and occupancy by the new owner or associate. Board Certified Diplomate of the ABPD preferred. Three thousand sq Foot, 10 Chair, multilevel pediatric office. Orthodontic bay next to two glass isolated operatives and business office on the 3rd floor. Practice limited to infants, children youth and young adults. Located in beautiful Bay Ridge 1 mile from the Verrazano Bridge. Please e-mail resumes to suzyincissor@gmail.com.

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