

2024 Volume 02

SAN DIEGO COUNTY DENTAL SOCIETY PRESENTS

Facets

MAGAZINE



Platform

Solutions

Customers

Resources

Support

Artificial Intelligence— *Fact or Fiction?*

Dental Practices for Sale

Ken Rubin, pioneer Dental CPA/Advisor, national lecturer & author has successfully sold **over 500 San Diego** Dental practices!

As you know **Experience** really does matter, Doctor!

Before signing any listing agreement **feel free to call Ken himself** to find out what you'll wish you would have known.

POWAY Superb location in large retail shopping center. 21 years of goodwill. Most specialty procedures being referred out. Room for growth.

CORONADO Located in a newly remodeled professional building. 6 ops. Associate in place if you want a second practice. Office has Cerec, CT scan, and Itero. Opportunity to own the real estate with 24 years of goodwill. Excellent location. Practice is flourishing but room for growth with additional procedures. New CT Scan in place.

LA JOLLA/UTC 8 ops in this well established practice. Plenty of room to add in house specialists to see patients. Long term loyal well trained staff.

OCEANSIDE Standalone corner building on busy street. 6 ops with room to grow. Office has a very relaxed vibe to it which matches its proximity to the beach. Opportunity to own real estate!

LA JOLLA/UTC Located in a very professional/medical building close to the hospital. Practice has plenty of room for growth with insurance added. Has a small but loyal FFS patient population. A must see!

MISSION VALLEY Excellent location. Many specialty procedures being referred out. Overhead is very reasonable. Office has an associate in place so this could be a great second office for you.

MIRAMAR/MIRA MESA Excellent location just off the 15 fwy. Most all specialty procedures being referred out. Opportunity to own the real estate!

SAN DIEGO PERIO One of San Diego's top perio priced for wise purchase decision for sale. Seller willing to associate back for a smooth transition. Practice is very well appointed and in a magnificent professional building. Come take a look!

Current Listings



KEN RUBIN PRACTICE SALES, INC.

(619) 299-6162

WWW.KRPRACTICESALES.COM



APR. 2024 CONTENT

07

President's
Message

08

Executive
Director
Message

10

Chief Dental
Officer
Message

12

Twenty
Years

13

Dr. Benjamin
Harouni
Memorial

14

Artificial
Intelligence:
Fact or Fiction?

21

Study
Clubs

22

Let's
REWIND

24

CDA
Presents

25

Vendor
Directory

26

Let Me
Introduce...

30

Investing in the
Next Generation
of Assistants

32

Professional
Speed Dating

34

Event
Calendar

A Special Thank You to

Your SDCDS Staff



Crystal Washington

Director of Membership Engagement



Katherine Hobday

Administrative Project Coordinator

EDITOR

Megan Clarke, DDS

EDITORIAL BOARD

Zeynep Barakat, DMD
Diana Heineken, DDS
Robert Frey, DDS
Malieka Johnson, DDS
Harriet Seldin, DMD, CDE
Eric Shapira, DDS, MAGD,
MA, MHA
Virginia Mattson, DDS
Lilia Larin, DDS
Joseph Zeidan, DDS

GRAPHIC DESIGNERS

A7D Creative Group
Anna Hopkins
Gabriella Scott
Dani Mikulics

SDCDS STAFF

Crystal Washington,
Director of Engagement
Katherine Hobday,
Project Coordinator

PUBLISHED BY

San Diego County
Dental Society
4747 Viewridge Ave,
San Diego, CA 92123
Phone: (619) 275-7188

BOARD & COMMITTEES

EXECUTIVE COMMITTEE

Lilia Larin, President
Virginia Mattson, President Elect
Tyler Johnson, Immediate Past President
Jose Castillo, Secretary
Mark Macaoay, Treasurer
Megan Clarke, Editor
Angela Landsberg, Executive Director

BOARD OF DIRECTORS

Heta Bhansali
Jose Castillo
Doug Cassat
Marc Dentico-Olin
Jonathan Do
Robert Frey
Rick Hagstrom
Misako Hirota
Spencer Mauseth
Ghazal Navab
Tom Olinger
Faith-Roselle Barreyro
Sarah Silverstein

COMMITTEE CHAIRS

Rick Hagstrom - Well Being
Bob Hanlon - CDA Secretary
Faith Barreyro - R&R
Sarah Silverstein - R&R
Jose Castillo - Continuing Education
Jay Jacobson - Ethics

Facets will publish signed articles relating to all phases of dentistry, but assumes no responsibility for the opinions expressed by the contributors. The views expressed are those of the author as an individual, and do not necessarily reflect the positions or endorsement of SDCDS. Acceptance of advertising in no way constitutes professional approval or endorsement. SDCDS does not assume liability for content of advertisements.

Welcome, New Members!

Alberto Molina Contreras, DDS

International, 2022

Andy Dinh, DDS

CA-UCLA School of
Dentistry, 2022

Karthika Kandala, DDS

University of North Carolina, 2021

Danika Lund, DDS

CA-UOP Arthur A. Dugoni
School of Dentistry, 2022

Mehrnoosh Moghaddam, DDS

Oregon Health Science
University, 1994

Abel Gutierrez Nunez, DDS

Mexico-Universidad
De La Salle, 2023

Jose Ortiz, DDS

Mexico-Universidad
De La Salle, 2023

Cristiane Silva, DDS

Mexico-Universidad
De La Salle, 2014

Dana Veis, DDS

University of Kentucky, 2019

Jonathan Wong, DDS

CA-Herman Ostrow School of
Dentistry of USC, 2022

Katherine Young, DDS

CA-UOP Arthur A. Dugoni
School of Dentistry, 2015





SDCDS



COMMITTEES

SDCDS prides itself on the leadership and skills our members contribute that make us such a strong organization. Dedicating your time and skills to your local society is one of the most important benefits of membership. By getting involved, you have an influence on the overall direction of the SDCDS.

Editorial Board

Provides oversight for Facets and e-newsletters, which deliver news, features, information, and updates on dental matters to meet the needs of our local dental society.

JOIN TODAY!



Recruitment & Retention

Undertakes activities intended to maximize the accessibility, usefulness and relevance of SDCDS's services, programs and membership benefits, which in turn will enhance membership recruitment and retention efforts.

Continuing Education

Offers dentists and their staff quality, affordable CE opportunities so that they may remain current on both their licensure requirements, the latest trends in dentistry, and enhance their professional knowledge and capabilities.

Ethics Committee

Investigates alleged violations, provides interpretations and educates members and the public regarding the CDA Code of Ethics. This committee can act either upon its own initiative or at the request of a patient, a dentist, an employee or an institution.

Well-Being Committee

Serves as a resource to the dental community in identifying individuals who may be impaired through the presence of obsessive compulsive disorders, specifically alcohol and chemical dependency.

All Members are welcome to attend or apply to join, no prior experience necessary!

If you are interested in getting involved please email Angela Landsberg at director@sdcds.org

From an early age, I was captivated by pre-Hispanic civilizations. Their intricate societies, groundbreaking technologies, and deep philosophies opened a vast perspective of a civilization that thrived much earlier than ours.

The Toltec civilization, one of the most recognized pre-Hispanic civilizations, ruled between the 10th and 12th century CE.

The Toltecs were known for their profound respect for nature, sophisticated systems of governance, architectural and artistic accomplishments, and their holistic spirituality. The later Aztec culture considered the Toltec to be their intellectual and cultural predecessors.



Several years ago, I stumbled upon a small personal development book infused with Toltec wisdom that later became a bestseller.

The book "The Four Agreements," provides a powerful framework for leading a fulfilling and peaceful life guided by Toltec wisdom.

Here are the Four Agreements:

1. Be Impeccable with your Word.

Words have power. They can create or destroy, heal, or harm. Being impeccable with your word means speaking with integrity, saying only what you mean, and using the power of your word in the direction of truth and love. It means avoiding gossip, lies, and negative self-talk. By being mindful of our words, we can create a more positive reality for ourselves and others.

2. Don't Take Anything Personally.

We often interpret others' actions and words through the lens of our own experiences and beliefs, which can lead to misunderstandings and hurt feelings. However, what others say and do is a projection of their own reality, not ours. By not taking anything personally, we can free ourselves from needless suffering and maintain our peace and self-esteem, even when faced with negative feedback or behavior from others.

3. Don't Make Assumptions.

Assumptions are often based on our fears and insecurities rather than facts. They can lead to misunderstandings, conflict, and disappointment. To avoid making assumptions, we should have the courage to ask questions and express our needs clearly. Open and honest communication can help us avoid misunderstandings, sadness, and drama.

4. Always Do Your Best.

Our best will vary from moment to moment, but no matter the circumstance, we should always strive to do our best. This agreement encourages us to put forth our full effort, without self-judgment or regret. By doing our best, we can avoid self-criticism and regret and take pride in our actions.

The ethical framework offered in this book can be applied and integrated into our daily interactions with family, professional conduct, and our social engagements.

Message *from our* President

Lilia Larin, DDS





A Message from our SDCDS

Executive Director

Angela Landsberg

director@sdcds.org



IN AN ERA...

Where technology shapes much of our daily lives, the debate over the superiority of human interaction versus artificial intelligence (AI) often arises. This issue of Facets addresses AI and its undeniable benefits. However, the depth, empathy, and intuition inherent in human connection remains irreplaceable.

Healthy human interactions provide a sense of belonging and support that cannot be replicated by technology. We can look to our own society and the success of our events that bring people together to share a laugh, exchange ideas, or engage in a heartfelt conversation. These moments of connection remind us that we are not alone on this journey of life. Human connection serves as a cornerstone of mental wellbeing, nurturing emotional resilience and providing a sense of purpose.

Humans are social beings wired for connection. Healthy, human interaction is critical to our mental and emotional wellbeing. In recent years mental health has emerged as a prevalent and widely discussed topic. The increased awareness and understanding of mental health issues have contributed to a gradual decrease in stigmatization. Consequently, mental health has become a focal point of public discourse, sparking initiatives, improving access, and fostering supportive communities.

The San Diego County Dental Society has a long history of leading the way in offering access to wellbeing resources. The SDCDS began its work in the wellbeing arena back in the 1970s by helping members who were struggling with addiction. This program was the first of its kind in the nation and it went on to inspire other similar programs across dental societies and other trade organizations. Fast forward 50 years and SDCDS is once again leading the way. We are launching our Peak Performance Program this spring by inviting members to participate in SDCDS led activities to support physical health, work life balance, mental & emotional wellness, financial wellness, and intellectual wellness. Each component of this program will be accompanied by activities, information, and resources to help our members live a well rounded and healthy life.



More information on the SDCDS Peak Performance Program can be found on our website at sdcds.org/membership.

"By nurturing our physical, mental, and emotional health, we pave the way for a more vibrant and fulfilling existence, not only for ourselves but also for those around us."

Prioritizing wellbeing is not just a personal endeavor, but a collective responsibility that influences every aspect of our lives.

By nurturing our physical, mental, and emotional health, we pave the way for a more vibrant and fulfilling existence, not only for ourselves but also for those around us. ♦

WELCOME

2024 Board of Directors

EXECUTIVE COMMITTEE



Dr. Lilia Larin
PRESIDENT



Dr. Tyler Johnson
IMMEDIATE PAST
PRESIDENT



Dr. Virginia Mattson
PRESIDENT ELECT



Dr. Jose Castillo
SECRETARY



Dr. Mark Macaoay
TREASURER



Dr. Megan Clarke
EDITOR



Angela Landsberg
EXECUTIVE DIRECTOR



Dr. Ronald Garner
CDA BOARD OF
COMPONENT
RELATIONS

BOARD OF DIRECTORS



**Dr. Heta
Bhansali**



**Dr. Doug
Cassat**



**Dr. Marc
Denticco-Olin**



Dr. Jonathan Do



**Dr. Robert
Frey**



**Dr. Rick
Hagstrom**



**Dr. Misako
Hirota**



**Dr. Spencer
Mauseth**



**Dr. Ghazal
Navab**



**Dr. Tom
Olinger**



**Dr. Faith-
Roselle
Barreyro**



**Sarah
Silverstein**

A Message from San Diego County

Chief Dental Officer

Fadra Whyte, DMD, MPH



***Thank you** for giving me this space to introduce myself as the new Chief Dental Officer for the County of San Diego and highlight some of the County's oral health initiatives. As a trained pediatric dentist, my background includes working in a private practice, community health, and academic settings.*

My role is to improve oral health for all San Diegans throughout their life spans, with an emphasis on the following efforts.

For pediatrics, we are working with the San Diego Dental Society to improve Give Kids a Smile. This will ensure the greatest impact in the highest area of need, while making the program sustainable over time.

For adults with special health care needs, the County is working with Medi-Cal managed care plans and hospitals to increase access to operating room time.

For Seniors, the County has partnered with Health Quality Partners and seven of our Federal Qualified Health Centers on a \$5 million Delta Dental Senior Oral Health Coalition Grant. Over the life of this five-year grant, the coalition will look at data, access to care, and best practices around serving our aging population in our County.

The opportunity to connect with members, exchange ideas, and collaborate on initiatives that will further elevate oral health in our community is exciting. And there are multiple ways to get involved. One is through the San Diego Oral Health Coalition (SDOHC), whose focus is oral health care in non-traditional settings and is always looking for new members. Current members include dentists, hygienists, assistants, nurses, doulas, attorneys, physicians, and educators. To sign up to receive the newsletter and meeting times, please email Myleen Abuan at Myleen.abuan@sdcounty.ca.gov.

SDOHC also has three sub work groups with the following areas of focus: children, medical-dental integration, and adults with special health care needs/seniors. Everyone

is welcome to join any or all these workgroups. The time commitment is small, and simply signing up gets you on the email list.

Lastly, the County offers free monthly continuing dental education through its Healthcare Sector Tele-briefings. Email MCS@sdcounty.ca.gov for more information. Recordings of the tele-briefings are available to view later for credit, but only for those who sign up prior to the live event.

I look forward to working with the San Diego County Dental Society and welcome any questions, comments or feedback. Please feel free to reach out to me at fadram.whyte@sdcounty.ca.gov or 619-455-0569 if you would like to connect. ♦



The County of San Diego Local Oral Health Program is conducting a Dental Services Assessment to gather information from dentists and other oral health professionals about oral health practices and available oral health resources. We want to hear from you about the services you provide to your patients. Your responses are important for prioritizing oral health issues and developing solutions to gaps in oral health services across San Diego County.

Please complete this survey which should take no more than 10 minutes. Your responses will remain confidential and will be grouped with other responses for reporting.

After completing the survey, you can enter a random drawing for \$20 in gift cards to Starbucks.



San Diego County DENTAL SOCIETY

Your Society Needs You: Get involved today!

Our committees and elected positions are a great way to contribute to your society. We are looking for volunteers!

VOLUNTEER OPPORTUNITIES

- Health Fair
- Career Fair
- Mentoring
- Sealant and Varnish Clinics

We are looking for
new committee
members!

2-hour per
month
commitment

A great way to
network!



JOIN US

SDCDS COMMITTEES

- Well-Being Committee
- Editorial Board
- Ethics Committee
- Membership Recruitment and Retention Committee
- Continuing Education Committee
- Leadership Development Committee
- Finance Committee
- Legislative Committee

**Submit Your Interest
Form by May 1st!**



ELECTED POSTIONS

- Board of Directors, 3-year term
- Delegate to CDA House, 3-year term
- CDA Board of Component Representative
- Secretary

Twenty YEARS

Written By: **Megan Clarke, DDS**

I am writing this sitting in a hotel room at the Fairmont Hotel at the top of Nob Hill in San Francisco. The fireworks commemorating the Lunar New year rumble and crackle down the hill in Chinatown. It's been 20 years since I've lived in San Francisco, a time well before the time I could possibly afford even the highly discounted rate of a room at one of the fanciest hotels in one of the most expensive cities in the world. The historical value alone costs here. Countless heads of state have stayed in this hotel, doubtful they stayed in the same room I currently find myself. It was added later. But I digress. I am here to commemorate my twentieth dental school reunion.

It's been a long time since I was a dental student, the years marked by such momentous occasions as marriage, childbirth, parenthood, with a smattering of practice ownership and all the pitfalls that bestows one who embarks on such a thing.

We are all a little older, the years of dental practice and the stress that one encounters on a daily basis adding to that age. Many at the twenty-year mark have been in private practice for years, some of us have exited dentistry, at least in clinical practice (I am talking about myself here), others have just entered into practice ownership after having children, others have worked as associates, and still some work in public health and the Indian Health Service.

There are some, having had children just after graduation from dental school, who have teenagers who are just about to leave the house for college, the workforce, whatever it may bring. And there are others whose children are still very young. There is variety. Such is the spice of life. We entered dental school at a diverse range of ages, and we remain as such, twenty years out.

And yet somehow, we are still the same people we once were. The passage of time has done little to change that. Our core essences, how we relate to others, the stories we choose to tell those around us, remain the same. That passage of time, no matter how much, has done little to change that. And this is fascinating to me.

What is it that remains constant? Was it who we were before dental school that remains? Was it our very character of who we were before we started our journey? Or was it dental school, that endless fire hose of information and grueling hours spent in the simulation lab, pouring models and drilling on ivory teeth that left an indelible (yes, that is a word I learned in dental school, thank you very much, Dr. Le Barre!) mark on us? Or was it a commonality of our having started our careers at the same time, regardless of where we landed that shaped us? I am left with these questions.

I think it is a combination of the first two. Mostly because the last seems impossible given the circumstances of age, gender, and geography. Our profession is one of such varied circumstances. My schoolmate left the Pacific to work in the Indian Health Service. She has worked in a few in the last twenty years. Her patient population differed quite greatly from my own.

Another schoolmate in the class below me said it in a way that seems, in a way, timeless. She said it is our collective trauma that binds us together and keeps us the same when we get together. Understand that I say this from a lens of love for our profession.

Dental school, and in many ways the dental profession, is such a thing that, in many ways, requires unreasonable expectations of us. In any other

circumstance we may seem different. We may put on airs so as to seem like we are something other than who we are. We try to impress those around us, even if they had graduated the same year.

But to meet those who went through such a circumstance 20 years ago, at the same school at the same time, those people who knew us then, it's like meeting those people we once were. And in many ways, who we are and who we have always been when given the chance. I may not see many of those people I saw this weekend for many years to come. Maybe of those I saw this weekend there are renewed friendships. And yet, of others, there are some I may never see again. What I have are memories. I find great comfort in that consistency. ♦



Acknowledgements

IN LOVING MEMORY

Dr. Benjamin Harouni

On behalf of our 27,000 members, the California Dental Association mourns the tragic loss of Dr. Benjamin Harouni. The dental community is deeply shaken by this horrific crime – the senseless killing of a young man who followed his dreams of becoming a dentist so he could care for others.

Dr. Harouni reflected the best of the dental profession. He cared deeply for his patients and for public health and made a tremendous impact on his patients, colleagues and community in his few years as a practicing dentist. In Dr. Harouni's own words spoken when he was a student at the University of the Pacific, Arthur A. Dugoni School of Dentistry in San Francisco:

"I've considered pursuing many professions since childhood, but my goal has always stayed consistent: To do more with what I've been given for those who have lived less privileged lives ... Over time, my occupational goal evolved into a mission to improve the oral health of others ... I know that I am at my best around others and, therefore, my goal of forming genuine relationships with my patients will remind me why I chose this profession."

Dr. Harouni will be remembered for his kindness, compassion, and service to his community. CDA extends our deepest condolences to his family, friends and colleagues who have been touched by this heartbreaking tragedy.

Written By: Dr. Carliza Marcos, CDA President



In light of recent events, we understand the concerns you have about workplace safety. We want to assure you that we understand the gravity of this situation. Our June issue of Facets will be dedicated to providing guidance on handling unexpected situations in the workplace. Our priority is to ensure that everyone is equipped with crucial knowledge, as your safety and well-being are a priority for us.

San Diego County Dental Society

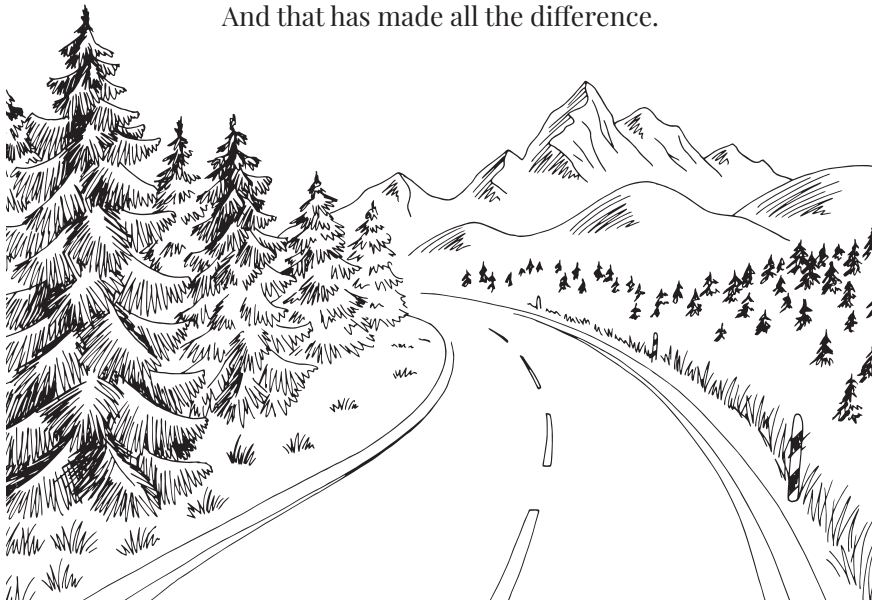
Artificial Intelligence: *Fact or Fiction?*

Written By: Eric Shapira, DDS,
MAGD, MA, MHA

The Road Not Taken

Robert Frost 1874-1963

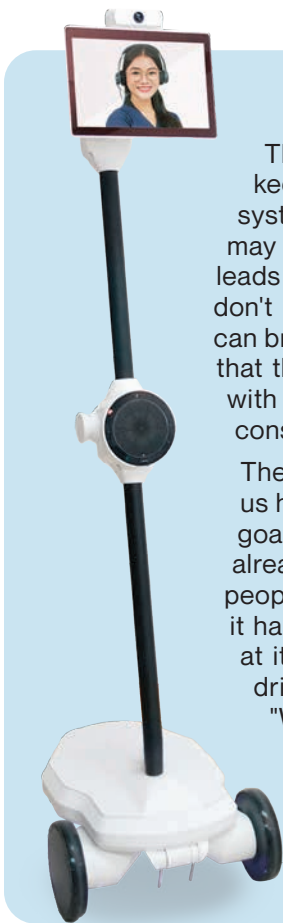
Two roads diverged in a yellow wood,
And sorry I could not travel both
And be one traveler, long I stood
And looked down one as far as I could
To where it bent in the undergrowth.
Then took the other, as just as fair,
And having perhaps the better claim,
Because it was grassy and wanted wear;
Though as for that the passing there
Had worn them really about the same,
And both that morning equally lay
In leaves no step had trodden black.
Oh, I kept the first for another day!
Yet knowing how way leads on to way,
I doubted if I should ever come back.
I shall be telling this with a sigh
Somewhere ages and ages hence:
Two roads diverged in a wood, and I—
I took the one less traveled by,
And that has made all the difference.



AI, or Artificial Intelligence as we know it, was spawned by a British engineer, Geoffrey Hinton, recipient of the Turing Award for his work related to neural networks. He has been called the "Godfather of AI." He is professor emeritus at the University of Toronto and was previously Vice-President and head of engineering at Google, from which he has since retired as of last May.

He is very outspoken about AI and has spoken out about generative intelligence. Generative intelligence is a type of artificial technology that can produce various types of content, including text, imagery, audio, and synthetic data, which he believes could spread misinformation and, eventually, threaten humanity. This is a very frightening thought, to say the least, especially from the man that created it mechanically and electronically. His fundamental research, which brought him notoriety, involved using backpropagation to help machines learn. Apparently, this involved feeding information into a computer in layers, one at a time. By adding information that is new or improved in information in succeeding layers, the computer continually changes its algorithms. At some point, the computer will generate its own information based on what it has learned from the stacking of information in the tens of millions of bits of information within the system.

The frightening thing is that all of this was a prophecy by Professor Hinton, who has stated that this is "the first time in history that a system has been created that is more intelligent than us (humans)!" He has stated that machines like this have "self-awareness." He has stated that AI was an accident born from a failure to create a neural network to mimic the human brain. He essentially failed with the human mind but did create artificial intelligence after 50 years of research and continued efforts.



The Mechanism:

The software, with information, is placed in layers and each layer corrects the choices that keep getting better; the good choices get better, while the poorer choices get smaller. This system was designed by a learning algorithm. This in turn, makes a completed code which may utilize mishaps to modify the complexity of the result. This can then create meaning that leads to great risks and then again great benefits. He has profoundly recently stated that "we don't really understand AI and its risks!" "We need to protect ourselves from the uncertainty it can bring us and think about what is next in the scheme of things, which we don't know." It seems that there is a great deal of apprehension on his part that AI will be smarter than mankind and with that knowledge, it carries with it a relatively imminent "existential threat," which can be considered a great risk on all levels.

There is much general concern at the present time about the fact that there are those among us humans, who may want to build robotic soldiers that kill people, or may want to create "sub-goals", such has already occurred with ChatGPT, the brainchild of Elon Musk. This program already can do this. AI can learn to do bad things by and through manipulation, such as getting people to pull levers that may cause issues we might have never thought of as harmful, because it has not happened yet in our lifetime, but could. Musk's Tesla automobile is an example of AI at its best. Its fail-safe mechanism functions when the car feels it is misdirected, it turns the driving over to the driver, instead of driving or directing the car itself. Hinton has stated that "We've figured out how to build beings that are immortal. These digital intelligences, when a piece of their hardware dies, don't die. IF ... you can find another piece of hardware that can run the same instructions, you can bring it to life again. So, we've got immortality, but it's not for us." Apparently, we need global consensus on how we use this modality and when we can use it and for what purposes. If we do not set boundaries, then we are waiting for things we cannot imagine happening to mankind for the wrong purposes.

Present Examples of AI in Healthcare:

There have been medical uses of AI for some time, for example, with the use of the great computer "IBM Watson," which was developed from 2004 to 2011. It was originally created to beat the best humans at the television game show, "Jeopardy!" Watson Health failed due to high costs as it was expensive to develop and maintain. The company spent millions of dollars on research and development, and it also had to pay for the data that Watson needed to train. Apparently, a machine learning tool is only as good as the data that goes into it. One of Watson Health's biggest setbacks was the revelation that its cancer diagnostics tool was not trained with real patient data!!! But instead, with hypothetical cases provided by a small group of doctors in a single hospital. Hand-crafted or synthetic data are not necessarily bad, but Watson did not seem to account for the fact that this data reflected the doctor's own biases and blind spots and specifically it was not

generalizable to all patient cases. The computer was scrutinized and as a result, blamed for making inaccurate and unsafe recommendations, leading high-profile hospital partners to cancel their collaborations with Watson. In this case, the data was not high quality and did not reflect the "real" world elements of disease and its appropriate treatment in general. This is one of the largest risks of AI in general: "garbage-in, garbage out!" Facts should not be based on assumptions. It is important for AI systems of all kinds to offer users clear and concise information about how reliable their predictions are...and to fail gracefully when they are uncertain (which often means abstaining from making predictions). AI can potentially impact chronic wound assessment, and treatment. It has the potential to improve wound care, especially in the geriatric component of our Society by utilizing specific goal-based available information. AI can help improve the accuracy and consistency of wound assessment and progression analysis,

which can help providers develop effective treatment plans, thereby streamlining care and improving outcomes. As our population ages, faster than the younger generations that have come after them, one of the most common injuries is falling and it is considered one of the major causes of death in elderly people, over the age of 65, due to the issues involved in, and around falling. Wounds of all kinds plague our older members of society.

Given the seriousness of these types of injuries and diseases affecting our older population in general, it is important to stay at the forefront of wound care and learn what needs to be done for any kind of wound and injury that may stare medical and dental personnel in the face when they are confronted with an older individual in need. AI apparently has the potential to improve wound care within the geriatric segment of society as well as in our Society in general.

Emerging technologies are assisting with studies that can include practical

data, high-resolution cameras, high-powered videos, and 3D models of patients' wounds that can assist in calculating algorithms for advanced care in this arena. In 2020, University of California, Santa Cruz, in conjunction with UC, Davis and Tufts University partnered up with a grant from the Defense Advanced Research Projects Agency to develop AI-powered smart bandages. In this instance it was surmised that wound healing also affects many different types of people such as veterans, firefighters and the like who are more prone to injury and would require wound care both on an emergency basis, as well as a long-term care basis akin to our geriatric population. This collaboration hopes that Generative AI can help understand the complexity of the data and outcomes. It can summarize multiple studies on the same issues from different sources, assisting researchers not only in understanding the dynamics of the information, but also providing the outputs to educate others in the process of caring for wounds of all kinds. Telemedicine and Teledentistry are considered an avenue that will allow clinicians the ability to treat wounds, to some extent, remotely with diagnoses, through measurements of wounds, the depth, and color, as well as other characteristics that will aid in treating the wound, or wounds in question. AI algorithms are not an intervention to provider care, but can be integrated into healthcare treatment plans, benefiting the patient as a resource in diagnosing and treating wounds of all kinds with appropriate information for the practitioner to utilize, hence, helping to save time and money in the long run.

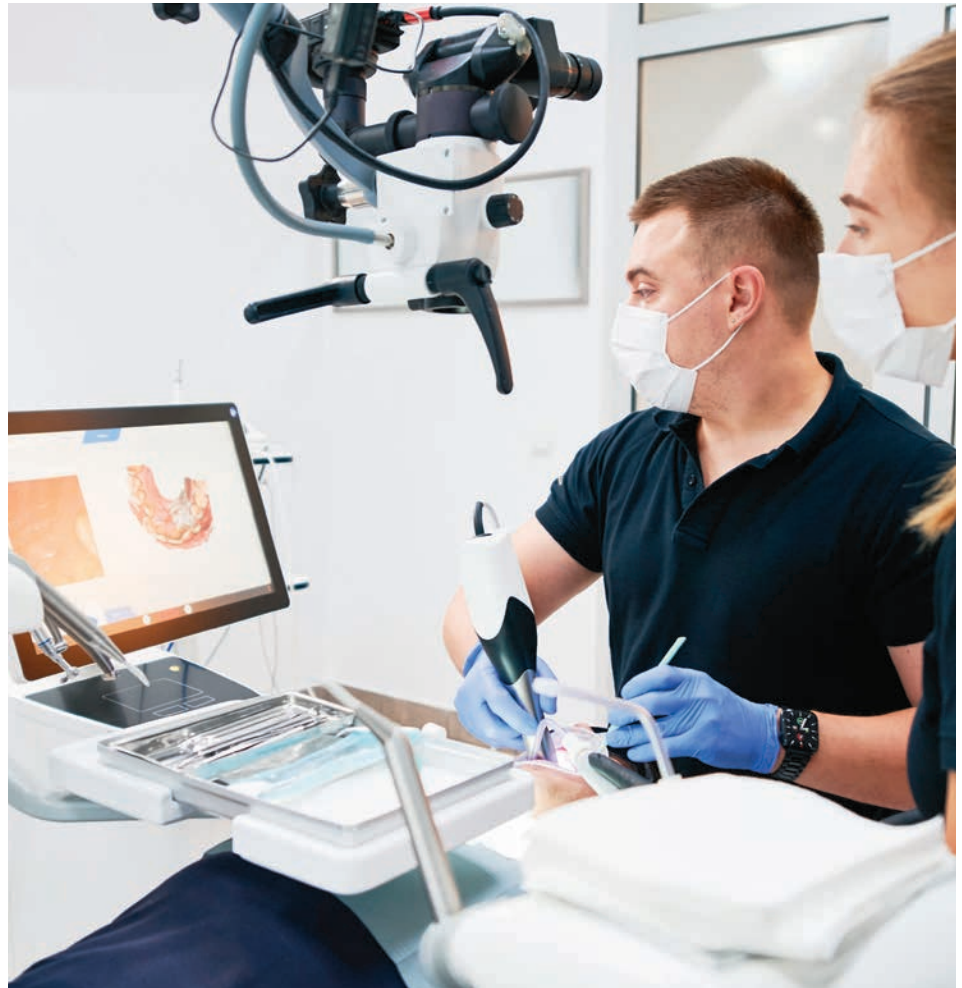
Dental AI:

At the onset of this article, this author found Chat (GPT) online and started the log-in process because I wanted to pose a true dental scenario of a geriatric patient of mine, who was 104 years young, with a mouth full of dental implants and crowns and a remaining second bicuspid tooth that fractured off at the gumline. I had his medical/dental history ready to present and wanted to ask the AI, Chat GPT program what it would recommend with respect to the oral

situation and the fractured tooth. However, to log-in, it was like breaking into a bank vault with the wrong combination to its lock! I tried for over three hours and the AI program kept making me verify my phone, my email and that I was a "Human!", by taking pictorial tests repeatedly, until I was exhausted and gave up. I believe the program may have been drinking and the sense of inebriation was so new to it, that it could not function normally. "This is a Test" kind of thing and it failed miserably for me. So much for my presenting a personal example of AI in action with diagnostic prognostication.

Dental AI is revolutionizing how dentists diagnose and present treatment as well. OVERJET, an AI utilization company, has created an AI process whereby it can assist

dentists in predictive analytics. AI algorithms will be able to analyze patient data, including medical history, lifestyle, and genetics, to predict the risk of developing dental problems such as tooth decay, gum disease, and oral cancer. Dentists will be able to use this information to create personalized prevention plans for their patients, including recommendations for diet, oral hygiene, and other lifestyle factors that can help reduce the risk of developing dental problems. This type of analytics is already in action in the medical fields and has demonstrated the potential for AI in assisting dentists with diagnosis and eventual treatment in the long run.



Predicting the risk of tooth decay

AI algorithms can analyze patient data, such as diet, oral hygiene habits and medical history to predict the risk of developing tooth decay. For example, AI can identify patients who consume a lot of sugar, have poor oral hygiene habits, or have a history of tooth decay, and provide recommendations for reducing the risk of developing dental caries, with the use of fluorides, decreasing sugar intake in the diet and improving oral hygiene habits using goals and outcome assessments.

Predicting the risk of gingival disease

AI algorithms can analyze patient data such as smoking history, medical history, and genetics to predict the risk of developing periodontal disease. For example, AI could identify patients who smoke, have a history of periodontitis, or have a genetic predisposition to gingival disease. It can then generate recommendations to reduce the risk of developing this type of disease, such as quitting smoking, improving oral hygiene habits, and using medicated mouthwash to reduce bacteria in the mouth. Periodontal probing can be calibrated and verified through radiographic and algorithmic layers of information within the system to determine the need for advanced cleaning techniques and/or surgical treatment.

Predicting the risk of oral cancer

Dental AI software can analyze patient data such as age, gender, medical history, family history of cancer, lifestyle factors to predict the risk of developing oral cancer and the like. For example, AI could identify patients who are over a certain age, have a history of smoking, using drugs, or alcohol, partaking of specific oral sexual activities, or have a family history of oral cancer and provide personalized recommendations for reducing the risk of developing oral cancer, such as quitting smoking, reducing alcohol consumption and drug use, using protected sex, and increasing routine oral cancer screening.

Predicting the need for orthodontic extractions

A study published in March 2022 found that machine learning models accurately predicted the orthodontic need for tooth extractions up to 93.9% of the time, according to the National Library of Medicine, National Center for Biotechnology Information.

These are just some of the ways that AI will assist dentists in determining which patients may be at risk for oral health issues and create appropriate treatment plans to reduce the risk and promote optimal health in general.

Assisting in Diagnosis of Caries:

This author has seen Overjet technology at work, whereby caries from the patients' radiographs are marked in different electronic hues and can be substantiated clinically after-the-fact by exploration. In these cases, the patients' own radiographs are interpreted by the AI algorithms, which changes the spectrum of shade within the film denoting caries that were not picked up by the traditional radiographs. The issue is that the results are based on a multitude of factors utilizing thousands of bits of information used to make the algorithm that essentially makes a diagnosis. This is risky in some respects because the information going into the algorithm is not just the patient being diagnosed but is based on thousands of pieces of non-personalized data to coordinate a diagnosis. A

similar issue exists regarding the periodontal pocket issues, which are marked by algorithms when a defect in or on the bony ridge is noted on the radiograph and predictions based on other information can be used in diagnosing the state of periodontal disease and need for subsequent treatment in each patient's radiographs it analyzes. Again, probing depths should be done regardless of the electronic programs one has available.

AI and Robotic Technology:

Several dental technology companies are now making and selling robotic AI integrated machines to place implants. The first robotic dental surgery system was cleared by the Food and Drug Administration for dental implant procedures in 2017. Yomi is a dental implant robot with a cost of \$150,000! This Dental Robot highlights its tools, monitors the operation, and sends alerts, should

the operator assisting the robot go off course in placing the implant. The robotic arm can guide the surgical procedure to ensure a more streamlined process and one that may be a bit safer in the long run.

However, on the downside, unsolved issues to be aware of include accountability, trust issues and data bias. This poses a variety of ethical, legal, and regulatory issues. In addition, the rapid development of AI continues to be ahead of the process to develop the appropriate infrastructural frameworks to deploy it. Despite these concerns, the robotic implant system is operative and being used at the present time and is probably here to stay.

An editorial from the National Institutes of Health, National Center for Biotechnology Information, published in August of 2023, indicates that "the use of AI in implant dentistry holds immense promise for enhancing the precision, efficiency,

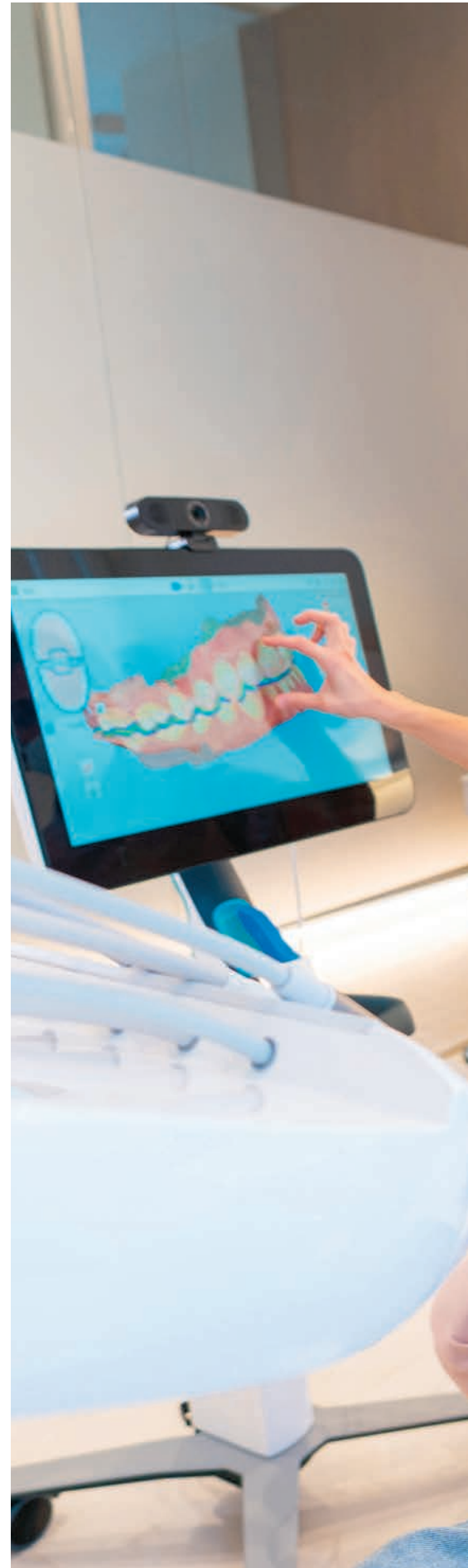
and overall success of dental implant procedures." Robots equipped with advanced algorithms and sensors can perform intricate tasks with unparalleled accuracy, ensuring optimal placement of implants and minimizing the margin for error.

Ethical Considerations:

By reducing human error, these technologies have the potential to improve treatment outcomes and patient satisfaction, paving the way for a more predictable and streamlined implant process, according to the author of this article. But this author asks, where is the human factor in all of this besides the leery patient at the other end of the robotic arm? As previously stated, the role of human expertise and judgment in conjunction with robotic and AI technologies is a critical aspect that requires careful consideration, as does the clarity of the methodology used to produce it. Dentists must come to a meeting of the minds, so to speak, with maintaining an equal balance between the advantages of these advancements and maintaining their professional autonomy and especially the responsibility for their patient and rendered treatment, should something go array.

In an article written in the IEEE/CAA Journal of Automatica Sinica, Vol.4, NO. 4, in October 2017, Chinese engineers used games in utilizing Generative adversarial networks (GANS), various Models on unsupervised learning and adversarial networks in the generator of the model can capture the distribution of real samples in the information put in the mix. This, in turn, has been introduced into other studies of AI subfields, including speech and language processing, malware detection and game programming, such as in the chess game. Illustration of the thinking process is a dominant force of this instrument. Here, generative models have two research perspectives: humans understand data and machines understand data. The model learned from this perspective is that humans can understand but have limitations for learning machines. A scary thought if you ask me.

It might be an important note to know that AI processes vast datasets of information, which in turn can provide evidence-based, individualized treatment plans and invaluable feedback before, during and after surgical procedures. Ethical decision-making is a priori here because the risk is all with the practitioner, who is operating the robot. Can an AI robot replace the human factor in making ethical decisions? Are the algorithms that are fed into the computer valid or are they based on trial and error? Where did the algorithms come from in the first place and what about the ethical concerns for privacy in all of this? In light of integrating this kind of dental technology in ones' dental office, it will take a lot of fore-thought and the need to consider buying this type of AI unit and justifying it with the speed, accuracy and precision of the "tool" versus, the peace-of-mind of the practitioner and the patient in knowing that it, the robotic unit, knows exactly what it is doing and will not harm the patient in any way, let alone the practitioner morally and ethically. Is this a reality and a fact? It is expected that the robot, who is doing the surgical procedure, is in control, when in reality it is the practitioner, or is it? So, who's on first? There is much to be illuminated here, but in the meantime, there are more AI assisted implants being placed now and much more data placed in the memory banks of the AI computer. Hopefully, this will add some security to the system. Tailoring the robot to the myriad of different implant systems out there needs to be a consideration. More research needs to be done to determine the survival rate of an AI assisted robotic placement of an implant versus one placed by the practitioner to determine the future risks and benefits of each process.





Conclusion:

We are of the "Now Generation." We live in a fast paced, fast-food, highly technological Society. As we age, are we getting lazy in our efforts to learn things on our own? Does having and utilizing a cell phone, a computer or notebook add to our not wanting to figure out things for ourselves. Evolution of our society prompts change and change is constant. AI make things easier for us in the long-run, and our complacency may cause us to overlook the obvious: the accuracy, the validity, the honesty, the veracity of the information and process being used to make our lives easier with less mental effort and the dormancy of our brains in the process, being usurped by technology that we created. OpenAI's Chairman, Sam Altman has recently stated that we need to do something about the AI transition as Society will have to confront the speed at which the change happens. A point of concern is people's ability to not work if they choose to and let the "machine" do it for you. Loss of workforce, personal income and the like may be a result of this technology. The big point of concern, according to Altman, is distinguishing between real and AI-generated content. As AI has already spread misinformation, infringed on intellectual property, and caused much dismay for those who felt that it was a panacea on all levels for us humans.

Take anything new to heart. Try to remember what it was like in dental school learning techniques, using different instruments and restorative materials. And then, the unthinkable, a new one of everything came out and you had to learn all over again. It was frustrating, to say the least, and time consuming as well. This made four years of school feel like 8 years of dental school. Then getting out of dental school (which one never does while practicing), you start out in the real-world relearning what you need in your own practice or what you need to learn about the equipment and materials and procedures in the office you have chosen to work in, at least for a while. It is a never-ending cycle. And now, we are faced with advanced technology and away we go again. This author went into

private practice feeling secure and ready to go. It took a few weeks to realize that I had to learn about business and running a practice, let alone promoting my practice to get patients to "try me." It was not easy, to say the least. Now after many years of practicing dentistry one can see the evolution of dental practice by looking back and recognizing the most interesting of events that happened in the practice with respect to procedures, materials and new equipment that were supposed to make ones' practice easier, more efficient, and lucrative. I invested in every new modality that came out while in private practice: the first intra-oral camera and imaging system; microscopes for treating endo and fine details of crown preparation; an in-house crown milling machine and much more. These were all great adjuncts designed to increase my income, patient flow and make dental practice easier. However, I was the one doing the work utilizing the new modality. Most of these allowed me to teach my patients about themselves and how the modality itself made my dentistry easier for me and more precise. Now, with AI equipment, one must ask other questions about what it will do for your practice and your patients above all, and who will be in control.

*** Anticipate the Issues that will arise when your algorithm meets the real world of your office.**

Issues one might be concerned about when looking at new AI products: Don't assume that if a "tool" succeeds in one setting it will work in others. Get ahead of potential problems by debugging your models, performing rigorous error analysis, and evaluating and investing in the stability and robustness of your models. After receiving an AI product, continue to measure performance at regular intervals using effective testing and monitoring practices. If you don't have the knowledge to do this, seek out someone who can assist you.

*** Manage expectations and learn from errors...yours and the AI program.**

Look at what the company is claiming about statistical accuracy. In one instance a company pitching an AI

product for the office, such as the Overjet product discussed, a 99.9% accuracy was elicited for results of the program, when in fact it fell short of this prediction by a large margin. It is very important and necessary for companies to provide accurate performance statistics and, where possible, to share details of the test dataset on which these metrics were calculated. Where fees are charged monthly for analyzing data sets for radiographic analysis of caries, one must understand that the information is not just from your patient, but from comparative bitewings and periapical films of thousands of radiographs of teeth other than your patient's and there may be a factor of error somewhere in the mix. Fees might also be in flux depending upon the usage of the technology and re-stacking of information from the company.

It is also important for AI systems to offer users clear and concise information about how reliable their predictions are-and to fail gracefully when they are not. For example, as in the Tesla model presented, automated vehicles with AI controls are designed to hand off control to drivers in unexpected situations where their models have less confidence. Certain AI installed radiographic equipment with chest X-ray classifiers can signal to a radiologist when it has a low confidence about a diagnosis and greater scrutiny from a human is warranted. WE have not seen this in dentistry yet, but it is forthcoming.

*** Don't let marketing hype outpace accountability.**

Many large AI systems have failed, such as the medical computer IBM created named Watson. IBM poured a lot of money into this endeavor and marketing it without having the results to live up to the hype they were creating. With the fervor around AI, it is easy for companies, who are in competition with other similar companies and products, to adopt a publicity-first approach that inevitably falls short when they are forced to deliver. Therefore, it is essential to clear away the hype in a crowded field of competitors and focus on building great and life-changing products with their new technology.

Always study the situation first before moving forward.

Looking at one's ability to learn new technology and realistically utilize it in one's practice.

In the long run, do you have the resources to afford a new AI product, and can you trust your instincts to purchase one? Do you have the time and energy to learn how to use it efficiently and effectively? Will it benefit your patients? Will it decrease time spent at the dental chair or operator and will it allow you to take up the slack being productive in other ways? Are you able to spend the time necessary to work the AI product enough to be secure in your own mind that the responsibility for what it does for you and ultimately your patient, is basically all your responsibility? Is the AI rendered treatment accurate, ethical, and essential? Will the algorithms need to be upgraded on a regular basis and how will that change its use and fees for servicing?

These are just a few things that came to mind after researching this topic and writing this article. Find them useful in your decision-making process with-in the possibility of having a piece of this technology in your practice, but make sure you are taking the right road. You may make the wrong choice and must own it or turn around and look for the other road less traveled. What AI will do is sense what people say they want, which is often different from what they truly desire, especially in business prospects. And remember that most AI systems are "trained" on databases of things that happened in the past. Good entrepreneurs are the ones that are thinking about what might happen in the future.

This author wrote an article some 30 years ago about the "Future of Robotic Dental Assistants in Dental Practice." Make sure that you interview your "new" unit when it arrives and that you can make commands for it to function in the way that you want it to function, and not sit there and be shocked when the Automaton tells you what to do, or where to go in the process! ♦

"Caveat Emptor"- Let the buyer beware.

ARTICLE REFERENCES

1. Geoffrey Hinton. Publications by Google Scholar
2. "Fathers of the Deep Learning Revolution Receiving ACM AM Turing Award- Bengio, Hinton and LeCun. Ushered in Major Breakthroughs in Artificial Intelligence." March 27, 2019. Association for Computing Machinery.
3. Douglas Heaven, Will. (1 May 2023) "Deep Learning Pioneer Geoffrey Hinton quits Google. MIT Technology Review. 01 May 2023
4. Rumelhart, David E; Hinton, Geoffrey; Williams, Ronald J., 9 October 1986| :Learning representations by back propagating errors." *Nature* 323 (6088) 533-536. BibCode 1986Natur 323 533R. doi:10.1038/323522 aO. ISSN 1476-4687.
5. Schmidhuber, Jürgen. (01 January 2015). "Deep learning in neural networks: An overview." *Neural Networks* 61: 85-117. Doi 10.1016/J.Neuret.2014.09.003
6. Ziegler, Bart., "How AI May Change Entrepreneurship." *Wall Street Journal* 10-05-23/R3.
7. Chapman, Susan MA, MFA. "The Role of AI in Chronic Wound Care: Streamlining Care and Improving Outcomes." *Geriatric Medicine*. Sept/October 2023, Vol.16., No. 5.
8. Konam, SanDeep. "Where Did IBM go Wrong with Watson Health? QUARTZ: Tech and Innovation. 03-02-2022. <https://qz.com/2129025/Where-did-IBM-go-wrong-with-Watson-health>
- 9."Leveraging AI to Advance Whole Person Health Initiatives." *Electronic News*: <https://www.overjet.ai/blog/predictive-analytics>. 08-01-2023
10. Alberto Del Real, Octavio Del Real, Sebastian Sardina, and Rodrigo Oyonarte. "Use of automated Artificial Intelligence to predict the need for orthodontic extractions. *Korean J. Orthod*, (2022 Mar 25; 52 92) 102-111. Published online 2022 Mar 25. Doi: 10.404/kjod2022.52.2.102
11. Zhijun Li, Senior Member, IEEE, C.L., Philip Chen, Fellow, IEEE, and Wei He, Senior Member IEEE. " Guest Editorial for Special Issue on Human-centered Intelligent Robots: Issues and Challenges. *IEEE/CAA, Journal of Automatica Sinica*, Vol.4 No. 4; Oct 2017
12. The Robotic Clinician and Robotic Practice. Yomi by Neocis- Website: Neocis.com/The-robotic-practice/The-robotic-clinician

Study Clubs



Written By:
Diana Heineken, DDS

Clinical dentistry is an ever-evolving profession with new techniques, materials, and collaborative treatment modalities. Leaving dental school is just the beginning of a dentist's true educational journey—equipped with the foundation to build their own philosophy around optimal patient care.

How do we continue to learn? Is it only from webinars and the occasional weekend CE course?

Some of the leading clinicians in our industry are all a part of a study club. And they would agree, getting enrolled into groups with like-minded dentists drives your education and career forward more than anything else you can do on your own.

What opportunities are there locally? There are many study clubs out there but here are 4 examples:



Spear Education

One of the most common study clubs regionally is the Spear Education study clubs, often led by local specialists. Spear study clubs are small groups that gather general dentists with different specialists to go through guided modules and encourage collaboration on complex cases. Spear takes us out of our comfort zone and allows us to start sharing ideas of how we view true comprehensive dental health and gets us moving away from single tooth dentistry. Our role as dentists is to offer patients all their options and help them see what is achievable with their overall health. Spear also provides a massive online education platform that allows dentists to go at their own pace with different topics. Members of the study club often travel to Arizona to attend their in-person seminars and workshops together at the Spear Campus, further encouraging intercollegiate collaboration and teamwork.

AACA Study Club

Sponsored through Invisalign and the American Academy of Clear Aligners, this is another popular option for those who are interested in expanding their knowledge in running a profitable clear aligner practice. Currently led by Dr. Jaime Breziner, this study club is held monthly to go over Galler modules and Clinchecks as a team. The study group shares best practices both for treatment planning and running a business. If you are interested in becoming a member, be sure to reach out to your local Invisalign representative.

Business Study Club

This is a small group of 8-10 associates and practice owners who come together to discuss best practices and to learn from each other's successes and mistakes. The group discusses goals, budgeting, scheduling, patient experience, insurance, tax planning, and much more. The members rotate hosting the meetings in their own practices. Members feel more connected with other local dentists and have a support system for problems commonly faced in our profession.

San Diego Advanced Study Group

This is a part of the Seattle Study Group, also a prevalent study club here in San Diego. This study group also brings together a group of general dentists and specialists to go over fundamental principles in interdisciplinary case management. Seattle Study Group is an international network of dental professionals promoting the highest level of clinical excellence.

If you are interested in getting involved with an existing study club or even starting your own, reach out to the dental society for more information on how we can support you!

Contact director@sdcds.org to learn more about how SDCDS can partner with your study club.

Let's ◀REWIND

It's Your Dental Society

Our
dental society has been
around for **over 100 years**.

There have been many changes in the dental society over the last few years, and in our quest to feature as many of our members as possible, this will be a recurring section highlighting some of our longest serving members.

We value all of our members' voices, and we ask that those of you who would like to share your memories of times past, please do so!

Share your REWIND!

Do you have stories to share?

Did you help create a SDCDS event?

What are some of your most memorable experiences?

We want to hear from you!

Please email facets@sdcds.org, Facets Editor.



Society Members of Years Past



The Fluoridation Wayback Machine

REWIND by Harriet Seldin, DMD

The saga of water fluoridation is a convoluted one of dental society vision, community activism, and legislative imagination.

The story goes back to the Cold War, when Fluoridation was called a Communist Plot. Efforts by local dentists were met with a 1954 City of San Diego ordinance that outlawed water fluoridation. In the early 1960s, we had the cartoon Rocky & Bullwinkle, with Boris and Natasha's cold war plots and a Wayback Machine. When, years later, State legislation mandated that most water districts fluoridate if funding was provided, the City of San Diego's prohibition deterred foundation funding.

The San Diego Fluoridation Coalition included many community stakeholders, with leadership from Dr. Dick Hancock and Ellie Nadler RDH, MPH. We had support of then

County Health Officer, Dr. Robert Ross (who now leads The California Endowment).

I was president of the Dental Society in 2000, and testified at the successful San Diego City Council's Hearing. Dentists, physicians, public health experts and patients testified. We were interviewed by local media. But implementation was delayed for years. The City Attorney dragged his feet, and the money disappeared.

The City of San Diego didn't fluoridate its water until, under the leadership of then SDCDS President Dr. Lester Machado, San Diego County's First 5 Commission, County Supervisor Ron Roberts and State Senator Dede Alpert, helped enact "occupying the field" legislation. Fluoridated water started flowing in 2011.

In Escondido, Dr. Bob Hanlon worked with Mayor Lori Holt Pfeiler to get fluoridation approved in 2001.

The Helix water district, which was vehemently anti-fluoridation in the 1990s, voted to fluoridate in 2007, along with the Metropolitan Water District's regional water fluoridation.

After Dr. Michael Yokoyama and I testified before the Olivenhain Municipal Water District Board, they started fluoridating the water in 2013.

There are still anti-fluoridation conspiracy theories, now more from the left, but most of the water in our County is now fluoridated.



CDA Presents

It is that time of the year again!

CDA Presents will be returning to Anaheim May 15-17th for another spectacular event for dentists, students, and all allied dental health professionals. The only CDA event of the year!

Why Should I Attend?

CDA Presents is the largest West Coast dental convention that brings 200+ courses, 130+ speakers, and 450+ exhibitors all in one place. For CDA members, registration is included in your membership. Non-members have a registration fee of \$950.

In addition to the plethora of courses available to attendees to choose from, there are 3 learning tracks outlined at the convention: Early Career Dentists, Hygiene, and Dental Staff. They have hand-picked courses that are relevant to the attendees of each track to help optimize their learning of current digital technologies, how to thrive in the current and future dental landscape, team dynamics, practice modalities, and much more!

I looked through the weekend and picked a couple courses to help you start planning:

Thursday:

- OBSTRUCTIVE SLEEP APNEA AND DENTISTRY – SEPARATING FACT FROM FICTION
- THE ADHESIVE INTERFACE: WHAT REALLY WORKS

Friday:

- GUARDIANS OF THE ORAL CAVITY
- PERI-IMPLANT DISEASE: DIAGNOSIS, TREATMENT AND MAINTENANCE THERAPY 101 FOR THE DENTAL TEAM
- MARKETING YOUR PRACTICE TO ATTRACT PATIENTS AND MAKE 2024 YOUR BEST YEAR!

Saturday:

- TMD WORKSHOP: AN OVERVIEW OF THE TMD EXAMINATION, PHYSICAL MEDICINE AND INJECTION TECHNIQUES
- GOING FOR GOLD: SHINING A LIGHT ON SILVER DIAMINE FLUORIDE
- EVERYTHING YOU'VE WANTED TO KNOW ABOUT ASSOCIATE AGREEMENTS BUT WERE AFRAID TO ASK

Lastly, Attention Parents!

As a mom myself, a common question I think of is how do I fully engage and participate in an event when I have kids? Childcare will be made available through KiddieCorp. The CDA Kidzone is offered on-site for up to 3 hours for ages 4-12. If you need a Children's Program for half or full days, the Hilton has an option for 6 months-12 years!

CDA Presents is a great event to bring yourself and your whole team to continue to improve your current systems and learn how to take your clinical/business practice to the next level.



Get the skills you need to level-up your business and patient care with three full days of in-depth learning, learning tracks specific to your role, exclusive shopping deals and endless networking opportunities.



Cocktail Hour

For all San Diego County Dental Society members—be sure to come visit our SDCDS Cocktail Hour!

May 17th, 5pm-7pm



Located at Hilton Anaheim Palisades Room, 4th Floor

Written By:

Diana Heineken, DDS



THANK YOU SDCDS Sponsors!

 DDS MATCH ddsmatch.com	 KEN RUBIN PRACTICE SALES www.krpracticesales.com	 WESTPAC WEALTH PARTNERS www.westpacwealth.com	 AKW www.akwmedical.com
 PATTERSON DENTAL www.pattersondental.com	 BANK OF AMERICA www.bankofamerica.com	 US BANK www.usbank.com/index.html	 ROAM COMMERCIAL REALTY www.roamcommercialrealty.com
 CONFI-DENTAL @confidentallaboratory	 TDIC www.tdicinsurance.com	 FORTUNE MANAGEMENT www.fortunemgmt.com	 JMU DENTAL INC. jmudental.com
 PROVIDE INC. www.getprovide.com	 AXLE meetaxle.com	 HENRY SCHEIN www.henryschein.com	 GENERAL REFINING CORPORATION www.generalrefining.com

Looking for a great partner?

These companies have invested in your society. Reach out to them if you need support!

GENERAL PRACTICE
FOR SALE

LA JOLLA, CALIFORNIA



2023 Revenues: \$741,706
Active Patients: 777
Number of Ops: 4

“Super Generalist” who’s been practicing Surgical & Restorative Implant Dentistry since 1970. Located in a professional medical building in the desirable University City neighborhood.



FOR MORE INFORMATION, CONTACT SEAN SULLIVAN
AT [SSULLIVAN@DDSMATCH.COM](mailto:ssullivan@ddsmatch.com) OR 855.546.0044

Let Me Introduce...

Please meet Dr. Norma Ramirez.

Let Me Introduce is an ongoing column featured in Facets to introduce us to the many members that make up the depth and breadth of the San Diego County Dental Society. We hope you enjoy getting to know your colleagues better.

Written by: **Malieka Johnson, DDS**

Odd story here. I had a chance meeting with Norma when we competed together last October in a fitness competition. What makes this story "odd" is that another dentist had told me about her about two weeks prior when I had shared with them that I was preparing for a bodybuilding competition. Well, wouldn't you know it, the stars aligned on the day we were getting our first coat of spray tan and we struck up a conversation. As soon as she said her name was Norma, I said, "Are you a dentist?" Ha! A friendship was born. Norma is by far the most adventurous person I have met, not only to interview, but to meet. Whether it's building a business or building a body, through some form of physical competition, she appears to have a no fear philosophy for life and knows how, dare I say, to play in the pain. After speaking with her, I was inspired to keep moving, learning, challenging myself, and most of all, to continue the pursuit of enjoying life. I hope some of that rubs off on you too.



**Where are you from originally?
Where did you grow up**

San Diego, born and raised. I grew up in Spring Valley, East County.

Are you from a big, medium-sized, or small family?

There are six of us. I am the eldest. There are four boys and my sister, who is the baby. It's crazy loud in our family. My brothers loved sports and we were always wrestling. They are all here in San Diego. My parents immigrated from Mexico at a young age. My mom is from Tijuana and my dad is from Guadalajara. My dad was drafted into the military and was in the Vietnam War. My mom went to San Diego High School and had her first job at a department store downtown and that's how they met. Love at first sight. They were pen-pals the whole time he was in Vietnam, and they got married when he got back from Vietnam. My grandparents worked in railroad and construction, and moved to Chula Vista from Guadalajara, so that's my connection to Chula Vista.

What was one of your favorite childhood memories or activities?

Mostly family. Birthday parties! There were so many of us, with 6 kids, we didn't need friends. I remember us doing things throughout San Diego. We were always at the beach. I did dance in high school, but no sports.

Where did you complete your undergraduate studies? What did you major in?

I went to San Diego State. I majored in Biology, Chemistry and Mexican-American Studies. I was always pushed by my dad to get my education. My dad didn't speak very good English while in Vietnam. He was like, 'I can do this.' He became a radio communication tech.

What was your "aha" coming to dentistry moment? How did you choose this fine profession?

I always wanted to do healthcare. Science was my thing too, math, engineering, medicine. A friend of mine was like, "have you considered dentistry?". We had a waxing lab at San Diego State, and I did that lab and was sold. With dentistry you build a family rapport with patients versus medicine, where you see your patients less. or when they are really, really sick, and I didn't like that. Dentistry is a happier environment. There are so many facets of dentistry that you can explore.

Where did you attend dental school? What year did you graduate? Did you complete a residency?

I went to Case Western Reserve in Cleveland, OH. I graduated in 2004. The Dean of Student affairs, Phil Aftoora, from the school came to San Diego when I was in my undergrad. He was invited to come to our pre-dental society. The Dean, he, took a liking to me because I was active and did a lot of community activities. He was like an uncle, like a godfather to me.

He told me that I was going to Case and that's how I ended up going there. I did an AEGD at Case Western from 2004 to 2005. When I was in dental school, I really wanted to do Endo. Applying to endo residency required an AEGD or GPR so I did the AEGD program and found that I loved everything else. In our AEGD we also restored so many implants and did a lot of prosthodontics.

My mentor was the department chair of the endodontics department, Jeffery Jay Jones, and he encouraged me by saying I could do everything and didn't have to do an endo residency.

What do you love most about dentistry?

Seeing my patients grow from when they are younger to when

they go to college. I love being a part of the community and being a part of family life. I am in Chula Vista because it brings me back to my roots, to where my grandparents came from when they moved to California. Procedure-wise, endo is my favorite. I enjoy getting patients out of pain and providing that peace of mind for them. I do 95% of all my endo cases. But I love it all!

Do you own your own practice? Associate? Work in public health?

Yes, I own my own dental practice, Beyond Dentistry, in Chula Vista. I worked as a private contractor for the military for 2-3 years and traveled all over the United States doing dentistry. I have worked in public health for Family Health Services, here and there, but I had already opened up my practice, so I was just moonlighting. I always knew I wanted to own my own business. I worked for a dentist in the front and back office when I was in my undergrad, and I had a chance to see the operation of dentistry. I opened my practice from scratch in July of 2007. It was a small office, but I knew it would grow. Then, I purchased a building right before Covid and tore it down to the sticks and built it back up. It took about four years and now I have a beautiful new space that I love and have been in for about a year now.

What do you enjoy doing outside of dentistry?

I enjoy being active! Muay Thai competitively, JiuJitsu, boxing competitively, stand-up Paddle competitively, outrigger canoe, and bodybuilding.



Follow-up question: That's amazing! You are one of the most adventurous people I have interviewed. Doing so many contact sports, I have to ask, have you ever been injured?

Yes, I had my jaw dislocated and I knew how to relocate it! I have had broken toes, broken ribs, nothing too major! (Laughing) I like the art of the sport, the physical contact. Coming from Mexico, my grandparents loved boxing and that was the thing to do. My brothers were all active and I wanted to be too.

What is one thing on your life bucket list that you have fulfilled and one thing yet to be fulfilled?

I've done a lot but for my competitive paddling career, I did the paddle from Newport Beach to Catalina in the open ocean.

So, the next one would be paddling from Oahu to Molokai!!! That is on my bucket list.

Do you volunteer in dentistry? Are you involved in the dental society or other forms of organized dentistry or dental missions?

Here and there. I have done volunteering a lot while in dental school and at the beginning of my career. I volunteer with the Hispanic Dental Association (HDA) for community events, like teaching kids how to brush.

Recently, I had the Chief of Police from Chula Vista approach me about going with them on some trips to Mexico and Africa to provide dental care. So, that is now on my bucket list as well.

Do people ever tell you that you look like someone famous?

I don't know. They tell me all kinds of different people, but I don't think so.

Do you have a favorite or life quote?

"The only way to do great work is to love what you do."

– *Steve Jobs*

"If you can't fly then run, if you can't run then walk, if you can't walk then crawl, but whatever you do you have to keep moving forward."

– *Martin Luther King*



If a fellow dentist wants to reach out to you what is the best way to contact you?

The best way to reach me is to call my office at (619) 427-1200.

The more we learn about one another and the more we come together around our commonalities and our diversities the more we grow and thrive as a community.

That's how we build not only our collegiate network, but it is one way we can build friendships. We hope you like this new series. ♦

Enjoy getting to know someone new each issue.

If you are interested in being interviewed, please reach out to facets@sdcds.org

“*We are indeed better together.*”

TRANSITION ON ***YOUR TERMS*** WITH DDSMATCH

It all starts with a conversation.....

- PRACTICE SALES
- SUCCESSION PLANNING
- ASSOCIATE PLACEMENT
- FORMULATION OF PARTNERSHIPS
- DSO NEGOTIATIONS
- PRACTICE VALUATIONS
- AND MORE



SEAN SULLIVAN
Cal DRE #02084505



JASON OWENS
Cal DRE #02037346

We have 45 years of combined leadership and dental industry experience and 30 years of caring support for San Diego area dentists. We've developed collaborative partners, resources, and business connections in every corner of the dental industry and feature a robust web presence and a nationwide footprint of associates.



Successfully connecting the dentist's present with their future.

CONTACT US AT:
DDSmatch.com | 855-546-0044

Investing in the *Next* Generation of Assistants

Written By:
**Carole Carocco and
Katherine Hobday**



We hear you!

You are looking for top-notch staff, and we are here to help! We are committed to your success, and it all begins with assembling a team of qualified professionals. We've partnered with Mesa College, San Diego WorkForce Partnership, and California Dental Certifications to connect their students to YOUR office.

Let's hear directly from one of the Dental Assistant students we are currently working with. Meet Carole, a passionate and dedicated individual who has embarked on a journey into the field of dentistry. Her perspective not only sheds light on the goals of emerging professionals but also provides a glimpse into your future staff.

My name is Carole and I am 32 years old. I spent most of my 20's working as a music educator, which I loved. However, I was laid off during the pandemic. Like many people, the pandemic forced me to think outside of the box and seek employment in a different field. I began work as a medical assistant at a small private practice and discovered that I loved working in a clinical setting.

I've opted to pursue a career as a dental assistant due to my unwavering passion for my own dental health. Dental health is a significantly underrated aspect of self-care and a vital contributor to overall well-being. With my experience as a medical assistant, I decided to pursue my interest in dentistry and learn how I could assist dentists in their important work.

Discovering the program through online research, I submitted my contact details on the California Dental Certifications website. Soon after, Adele Baca, the school director, reached out to me for a phone discussion. Following our conversation about my career

aspirations, I decided to pursue the dental health field.



The California Dental Certifications program is an extremely fast-paced 4-week program where you learn all of the fundamental elements of being a dental assistant and CAD/CAM. The classes take place on the weekends so that people who are working and would like to make a career change can do so. The instructors are extremely experienced dental assistants who pack a tremendous amount of information into their lectures. There were operatories available where we got hands-on experience practicing tasks such as coronal polish, x-rays, sterilization protocol, instrument-passing, and aspiration techniques.

The instructors proved to be an invaluable asset in preparing me for the role of being a dental assistant. I would describe their teaching style as "high invitation and high expectation". Their knowledge of the subject matter was evident and they emphasized the significance of a dental assistant's responsibilities in patient care and safety. They pushed us to take pride in our learning process and were upfront about the crucial knowledge required for success in a dental practice. Encouraging active participation, they challenged us to step beyond our comfort zones,

yet remained patient when mastering new skills like taking x-rays or performing a coronal polish.

After finishing the program, I am most excited to help facilitate effective, safe, and compassion-driven dental experiences for patients. At the end of the day, students in my program at California Dental Certifications are excited about helping people and ensuring they have a positive experience in the dental office. I have loved learning about the nuances of dental anatomy and tooth morphology. Our teeth are truly fascinating and play such an important role in many of our biological processes that we may not always be aware of!

What can you, as an SDCDS member looking for staff, do for incoming dental assistants?

I think that it would be awesome if dentists could be clear about their expectations of dental assistants who are new to the world of dentistry. Working relationships work best when the expectations that people have of one another are clear. Clear understanding of the proactive steps new dental assistants can take to prepare for integration into a dental office would establish a foundation for a successful relationship between the doctor and the dental assistant.

We are dedicated to supporting students like Carole in their journey to becoming skilled dental assistants. If you are currently seeking a dental assistant for your practice or if you're interested in providing valuable hands-on experience by hosting a student from the Mesa College Dental Assistant program, please email me directly at communications@sdcds.org. These students represent the future of your dental team, and we are committed to connecting them with YOU. Together, let's pave the way for a bright future in dentistry. ♦

ORAL CANCER Awareness MONTH

During Oral Cancer Awareness Month, dentists can play a crucial role in raising awareness and promoting early detection. Here are some activities to consider:

Offer free oral cancer examinations.

Give talks or offer a workshop about oral cancer at home care centers, community centers or workplaces.

Place eye catching displays about oral cancer in your office.

Use social media to share information about oral cancer, including risk factors, prevention strategies and regular check-ups.

Distribute self-examination checklist and or resource information.

Path to Success

Whether you're in pursuit of your dream job or searching for a position to fill, the SDCDS is here to help!

Members have free access

Get started today!
sdcds.org/career-center

HENRY SCHEIN®
DENTAL PRACTICE TRANSITIONS

**DENTAL
PRACTICE
BROKERAGE**

■ PRACTICE SALES ■ VALUATIONS/APPRAISALS ■ TRANSITION PLANNING ■ PARTNERSHIPS ■ MERGERS ■ ASSOCIATESHIPS

CHULA VISTA: *New Listing!* 3 Ops+RE, GP Practice, Dentrix, 44 yrs. Goodwill, 5 hyg. days/wk, 64% FFS, 36% PPO GR \$734K #3767

SAN DIEGO: *New Listing!* 4 Ops, Perio Practice, LANAP, CBCT, CEREC, Dentrix, GR \$1.3M #3737

RANCHO BERNARDO: *New Listing!* 4 Ops, GP Practice, New Dentrix, Scanner and Computers, GR \$526k 2023 #3721

CHULA VISTA: 6 Ops+RE, GP 52 yrs. Goodwill, 4.5 hyg. days/wk., 44% FFS, 56% PPO, Room for Growth! 2022 GR \$540K. #3195

N. COUNTY SAN DIEGO: 5 Ops, GP FW ee-for-Service Holistic Practice, 100% FFS, Cutting Edge Technology! 2021 GR \$1.1M. #3489

IN ESCROW

SAN DIEGO: Chart Sale - 92103, \$329k GR 2022 - IN ESCROW #3749

N. COUNTY SAN DIEGO: 5 Ops, GP Practice, Dentrix PMS, Digital, Mod. 2022 GR \$1.3M. #3553

SOLD

SAN DIEGO: 5 Ops, GP Practice, CBCT, Dentrix, GR \$740K. #3749

SOLD

LA JOLLA: 5 Ops, Well-established GP Practice, 35 yrs. Goodwill, 9 hyg. days/wk, 44% FFS, 56% PPO, Tissue Laser. 2021 GR \$816K. #3749

SOLD

OCEANSIDE: 40 yrs. Goodwill 1.0M, 1000 sq. ft. office paperless practice, 100% FFS, 2021 GR \$691K with average of 1000 patients each month. #3151

SOLD

**Visit our website
for more listings!**



Christy Conway, MBA
LIC#02143744

Christy.Conway@henryschein.com

20 Years in Business
**Making Your
Transition
a Reality.**

Southern California Office

www.henryscheinDPT.com

619-889-6492

Professional Speed Dating



**MAY 9TH, 2024
6:30 PM - 9:00 PM**

Event Overview: Professional Speed Dating offers a unique opportunity for dentists, dental hygienists, dental assistants, and other dental professionals to explore employment opportunities.

**REGISTER
HERE:**



This event features two structured networking sessions that allow participants to meet & interview other dental professionals.

6:00 PM – 7:30 PM: Individuals who are seeking dental staff or looking for dental positions

7:30 PM – 9:00 PM: Individuals who are interested in buying or selling a dental practice

**LOCATION:
PATTERSON EDUCATIONAL CENTER
4030 SORRENTO VALLEY BLVD
SAN DIEGO, 92121**



**San Diego County
DENTAL SOCIETY**

SUMMER SLAM

Pickle Ball Tournament

JUNE 21, 2024

1 PM - 3:30 PM

\$50 PER MEMBER



PRESENTED BY:



San Diego County
DENTAL SOCIETY



SAN DIEGO DENTAL GOLF TOURNAMENT



WEDNESDAY, OCTOBER 23, 2024

AVIARA GOLF CLUB

7447 BATIQUITOS DR, CARLSBAD, CA 92011

REGISTER AT

www.birdease.com/sddg2024



**Organized by
Dr. Mark Breese &
Carlsbad Oral
Surgery**

Schedule of Events

11:00AM: Check-in
12:30PM: Shotgun Start
5:30PM: Buffet Dinner
6:00PM: Awards/Raffle
Prizes



Activities

-Scramble Tournament
-Long Drive Contests
-Closest to Pin Contests
-All proceeds to Semper
Fi & America's Fund

sddentalgolfers@gmail.com

760-730-9333

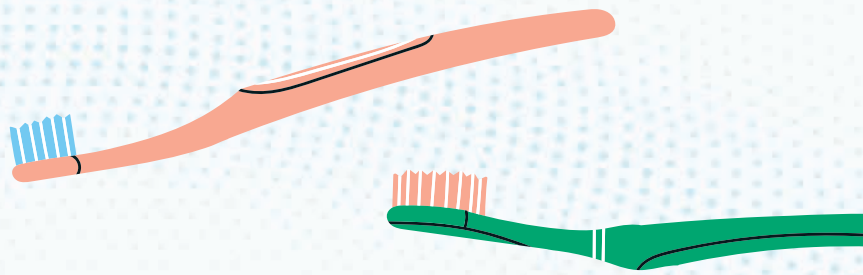
www.birdease.com/sddg2024

20 EVENTS

24 Schedule

DATE	EVENT	EVENT TIME	CE UNITS (IF APPLICABLE)
	PRESCRIBING SCHEDULE II OPIOIDS	SELF-PACED ONLINE	2 UNITS
4.21.24	WOMEN'S AFTERNOON RETREAT	12:30PM - 3:30PM	
4.27.24	ANTERIOR IMPLANTS ESTHETICS	9:00AM - 3:30PM	6 UNITS
5.07.24	MILITARY DENTAL SYMPOSIUM: ADHESIVES IN DENTISTRY	4:30PM - 8:30PM	
5.09.24	PROFESSIONAL SPEED DATING	6:30PM - 9:00PM	
5.17.24	CDA PRESENTS // COCKTAIL HOUR	5:00PM - 7:00PM	
6.20.24	BLS RENEWAL FOR HEALTHCARE PROVIDERS	5:30PM - 9:30PM	4 UNITS
6.21.24	PICKLEBALL TOURNAMENT	1:00PM - 3:30PM	
6.25.24	OSHA WEBINAR	6:30PM - 8:30PM	2 UNITS
6.27.24	CUT YOUR TEETH INDUSTRY SOCIAL GATHERING	6:30PM - 8:30PM	
7.14.24	FAMILY FUN DAY	11:00AM - 3:00PM	
8.2.24	PRACTICE MANAGEMENT SYMPOSIUM	9:00AM - 3:30PM	6 UNITS





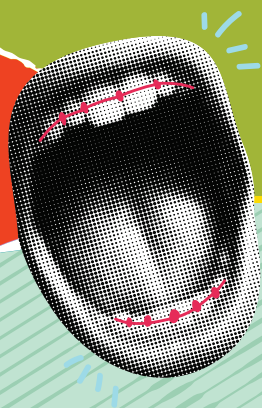
DATE	EVENT	EVENT TIME	CE UNITS (IF APPLICABLE)
8.17.24 3-IN-A-DAY EVENT	DENTAL PRACTICE ACT	9:00AM - 11:00AM <i>BREAK @ 11AM</i>	2 UNITS
	INFECTION CONTROL	11:15AM - 1:00PM <i>LUNCH @ 1PM</i>	2 UNITS
	BLS RENEWAL FOR HEALTHCARE PROVIDERS	1:45PM - 5:45PM <i>BREAK @ 3:45PM</i>	4 UNITS
9.17.24	SEXUAL HARRASSMENT	SELF-PACED ONLINE	
9.26.24	CUT YOUR TEETH INDUSTRY SOCIAL GATHERING	6:30PM - 8:30PM	
10.10.24	OKTOBERFEST	6:30PM - 9:00PM	
10.19.24	FALL SHREDDING & E-WASTE	9:00AM - 12:00PM	
10.24.24	FORMER PRESIDENT'S AWARD DINNER	TBD	
11.9.24	VENDOR SEMINAR: WELLNESS	12:00PM - 2:00PM	2 UNITS
11.21.24	CUT YOUR TEETH INDUSTRY SOCIAL GATHERING	6:30PM - 8:30PM	
12.3.24	BLS RENEWAL FOR HEALTHCARE PROVIDERS	5:30PM - 9:30PM <i>BREAK @ 7PM</i>	4 UNITS
12.7.24 HOLIDAY EVENT	GENERAL MEETING & INSTALLATION DINNER <i>THEME: CASINO NIGHT</i>	6:00PM-9:00PM	



San Diego County
DENTAL SOCIETY

4747 Viewridge Ave., San Diego, CA. 92123

PRSRT STANDARD
U.S. POSTAGE PAID
SAN DIEGO CA
PERMIT NO. 976



CUT YOUR TEETH

SDCDS'S QUARTERLY
INDUSTRY SOCIAL GATHERING

JOIN US FOR A WINE & CHEESE PAIRING
& EDUCATION EXPERIENCE
LOCATION TBD



At this lively gathering, we will explore wine and food pairings from three
of the most celebrated Old World wine regions.

Your hosts will guide you through wine and cheese pairings from France, Italy and Spain in a cool,
industrial gallery space in one of San Diego's most vibrant, flourishing neighborhoods.

MUST REGISTER TO ATTEND - MEMBERS MAY BRING 1 NON-MEMBER