



## CORONAVIRUS

**APRIL  
2020**

**April 23**  
Shredathon

~~**April 26**  
Women's Tea  
postponed~~

**April 30**  
BLS Renewal

**May 6**  
Military Symposium

**May 7**  
New DDS Social

~~**May 14-16**  
CDA Presents  
cancelled~~

**Dental resource guide** page 12,13



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**SAN MARCOS:** 6 ops. Highly coveted north county location in busy shopping center. Relatively new CT scan, digital xrays, and intraoral cameras. Invisalign and implants can be added.

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## CONTENTS

APRIL 2020

- 5** ADA President: Chad P. Gehani, DDS
- 7** Editor: Brian Shue, DDS, CDE
- 9** Executive Director: Mike Koonce, MA, CAE
- 11** Oral Health Champion: Dr. Joseph Boulos
- 12** Coronavirus resource guide
- 14** Member Event Photos
- 16** Bulletin board
- 17** Chairside Musings/Blog
- 18** Classifieds
- 20** San Diego County Dental Foundation
- 21** Technology Editor
- 22** Announcements & Events

### AWARD WINNING FACETS

The International College of Dentists — USA Section, awarded Facets these publication honors in Division 2:  
2018 Newsletter Award  
2017 Newsletter Award, Honorable Mention  
2016 Outstanding Cover



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### Community Events:

Dentists, hygienists and assistants to volunteer as needed at community events.

### Adopt A Patient:

Dentists willing to “adopt” patients (adults and children) for immediate or emergency needs in their office.

### Health Fairs and School Screenings:

Dentists, hygienists and assistants to provide and assist with screenings and education.

### To Volunteer:

[support@sdcds.org](mailto:support@sdcds.org)



## FACETS NEWSLETTER

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# Thinking About Selling Your Dental Practice?

## Here Are Some Questions You May Be Asking Yourself?

- 1 Am I financially ready to retire or work less?
- 2 What is my practice worth?
- 3 How much will I net after paying off my practice debt, taxes, and transaction costs? Is that enough for me to retire?
- 4 How will I find a buyer that will take care of my patients and staff?
- 5 Should I keep the sale anonymous? If so, how can I do that?
- 6 Will I be able to continue practicing as an associate on a reduced schedule?



**JOHN HALE**

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- ✓ **\$1,045,000**  
4-op GP, Temecula, CA
- ✓ **\$650,000**  
4-op GP - Murrieta, CA
- ✓ **\$200,000**  
3-op GP - Laguna Beach, CA
- ✓ **\$325,000**  
3-op GP - Escondido, CA
- ✓ **\$600,000**  
4-op GP - San Diego, CA
- ✓ **\$1,165,000**  
7-op GP - Ramona, CA
- ✓ **\$949,000**  
7-op GP - Escondido, CA
- ✓ **\$1,850,000**  
5-op GP - Poway, CA

## A snapshot of the coronavirus crisis taken on March 16

Late yesterday, the CDA requested the cooperation of all California dentists during this state of emergency to help limit infections, "flatten the curve" and slow the spread of the new coronavirus (COVID-19).

— California Dental Association

As leaders in the healthcare profession, we must be proactive to limit the spread of this virus. Dentists are in one of the highest risk categories for transmission and contraction of the virus, with many routine dental procedures potentially transmitting the virus via aerosolization of fluids.

— Chicago Dental Society

The spread of COVID-19 will be determined by our collective actions now. We believe by taking these extraordinary precautions, dentists can make a difference in helping to preserve the limited supply of personal protection equipment critical for emergency dental care and frontline healthcare personnel responding to the pandemic.

— New York State Dental Association

As of March 16, 2020, 6pm Pacific Daylight Time, there are a total of 472 positive cases and eleven deaths in California (including one non-California resident). This total does not include passengers from the Grand Princess cruise ship currently docked in Oakland.

— California Department of Public Health

Effective 12:00 a.m. on Tuesday, March 17, 2020, and continuing until 11:59pm on March 31, 2020, the following will be in effect for San Diego County: All public or private "gatherings," (group of 50 people or more) are prohibited. All non-essential gatherings of any size are strongly discouraged.

— San Diego County Dept. of Public Health, March 16, 2020



Photo courtesy of Dr. Dan Jenkins, Tri County Dental Society.

ADA

Dear Fellow Dentists:

The American Dental Association (ADA) recognizes the unprecedented and extraordinary circumstances dentists and all health care professionals face related to growing concern about COVID-19. The ADA is deeply concerned for the health and well-being of the public and the dental team.

In order for dentistry to do its part to mitigate the spread of COVID-19, the ADA recommends dentists nationwide postpone elective procedures for the next three weeks. Concentrating on emergency dental care will allow us to care for our emergency patients and alleviate the burden that dental emergencies would place on hospital emergency departments.

As health care professionals, it is up to dentists to make well-informed decisions about their patients and practices. The ADA is committed to providing the latest information to the profession in a useful and timely manner.

The ADA is continually evaluating and will update its recommendation on an ongoing basis as new information becomes available. Please visit ADA.org/virus for the latest information.

If you have questions that are not answered by the FAQ posted at ADA.org/virus, please email MSC@ada.org

Thank you,

*Chad P. Gehani DDS*

Chad P. Gehani, DDS  
ADA President

Editor's note: Dr. Fabb's agreed to have his article removed in this issue in order to share this additional coronavirus news.



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## Medicare and dental benefits, part three: the proposed benefits

### Recap

There is significant nationwide interest in adding dental benefits to the Medicare program, which is the federal health insurance program for seniors (aged 65 and older). The 2019 CDA House of Delegates did not endorse such a change, but discussed and filed the CDA Medicare Task Force Report, which can be downloaded at [cda.org](https://cda.org). CDA concluded that if a dental benefit is added, it should increase access to dental benefits and services, support better healthcare integration, decrease medical care costs, and increase the opportunity for improved health outcomes for aging Americans. CDA also concluded there are also risks, including the risk of doing nothing, associated with this decision. Last month, I gave an overview of H.R. 3: *Elijah E. Cummings Lower Drug Costs Now Act*. Now I will detail the proposed dental benefit.

### SOTU

The revered U.S. House of Representatives has been the home of historical debates and great decision-making. You could say this is where our country's leaders uphold a higher standard. So it goes without saying that poor behavior on the floor of the House of Representatives during a President's State of the Union address probably goes against the grain of proper political discourse. So when you hear the words "You lie" shouted from the floor or you see a document — such as a printed SOTU — ripped apart behind the Speaker's podium in full camera view, you might consider such actions to "cross the line", so to speak.

That being said, did you hear shouts coming from the floor of the House during President Trump's SOTU address on February 4? I did. It was just after the President said (and I paraphrase), "send me a bill to lower prescription drug prices and I'll sign it immediately." That's when several on the floor proceeded to shout: "H.R. 3."

Yeah, that H.R. 3. As you read in my last editorial, Speaker of the House Nancy Pelosi and her Democratic House majority passed H.R. 3: *Elijah E. Cummings Lower Drug Costs Now Act* last December. As expected, it arrived DOA at the footsteps of Senate Majority Leader Mitch McConnell and his Republican-led Senate.

While the White House stated its opposition to H.R. 3 in a press release, it did not discuss H.R. 3's provision to add vision, hearing and dental benefits to Medicare. Speaker Pelosi's release does not discuss this either. Isn't this too important of an issue to be marginalized? Although H.R. 3 stalled in our current gridlocked political environment, it would not be a stretch to see future legislation to again propose to add these additional health benefits to the Medicare program. Would it require Democrats to take control of the House, the Senate, and the White House? I'll reserve that for another discussion.

Brian Shue, DDS, CDE



EDITOR

Regardless, let's dive deeper and look at the proposed dental benefits in title VI, section 601 in H.R. 3.

## Dental and Oral Health Care

### Preventive and Screening Services

- A Oral exams
  - a. two per twelve month period
- B Dental cleanings
  - a. two per twelve month period
- C Dental x-rays performed in the office of a doctor or professional.
- D Fluoride treatments

### Basic and Major Treatments

- A **Basic** treatments
  - a. Which may include basic tooth restorations, basic periodontic services, tooth extractions, and oral disease management services.
  - b. This is covered at 80%.
- B **Major** treatments
  - a. Which may include major tooth restorations, major periodontic services, bridges, crowns, and root canals.
  - b. This is covered at 10% of cost in 2025, and increases 10% each subsequent year until it reaches 50% in 2029.
- C Full or partial set of dentures.
  - a. Once per 5-year period.
  - b. Exception: if the dentures "do not fit the individual" as determined by a dentist or professional.

The payment for services will be "considered" using the rates paid to dentists for comparable services under State plans under title XIX under the Tricare program and by other health care payers, such as Medicare Advantage plans under part C.

### And the cost?

So what's this dental coverage going to cost? Brace yourself. \$237.8 billion. For that same amount, you could buy two California bullet trains and have spare change. This change to the Medicare program was proposed for 2020-2029, with vision and hearing coverage to roll in 2023 and dental services in 2025.

**Next time:** Medicare and dental benefits, part four: the costs. Remember, I am just the messenger.

Source:

U.S. House of Representatives rules committee, text of H.R. 3, Elijah E. Cummings Lower Drug Costs Now Act, December 6, 2019.





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EXECUTIVE DIRECTOR

Mike Koonce, MA, CAE



## Survey Says...

I mentioned in the Jan/Feb issue that we had hired Whorton Marketing and Research to help us mine the minds of our dentist members with a survey. While we're still a ways away from having a new marketing and communications plan, the survey has revealed some interesting results. With roughly 25% of our non-retired members responding to the survey, we have some significant data to examine.

Among the questions in the survey was, "What is the Single Most Important Reason you Joined SDCDS?" To that question, 28% of our members responded that 'supporting the profession' was at the top. This is not a surprise to us, and in fact, it's at the core of our mission. At the national, state and local levels, this is what we spend our days doing – helping dentists succeed.

As we drill down, the answers get more specific. An "opportunity to interact with peers" was second on the list coming in at 18%. At SDCDS we offer you opportunities to gather and network with your colleagues several times a year. Some of these favorite events included: Shredathon, Day at the Ballpark, Oktoberfest, Day on the Bay, Holiday Party, New Dentist Mixers, and the Women's Tea. I hope you're enjoying many of these.

Garnering 17% of your vote is, "To gain access to the services of ADA and CDA." Their benefits are numerous indeed, but I'll highlight just two. ADA's Seal of Acceptance has long been consumers' gold standard for evaluating the safety of dental products. That gives dentists and their profession important credibility. And CDA's Practice Support Center gives dentists hundreds of tools to run their practices on a day-to-day basis.

Number four with 13%, is, "Access to convenient, in-person CE credits". Already this year we've hosted clinical CE on infection control, restorative dentistry, and lasers & periodontal therapy. Take a look at our website to see the CE schedule for the rest of the year. Go to: [www.sdcds.org](http://www.sdcds.org). Coming up we have "Forensics" with Dr. Anthony Cardoza, as well as "TMD & Non-dental Tooth Pain" with Dr. Joseph Cohen. Also, be sure to take advantage of a number of practice management courses we have scheduled on evenings and weekends.

As we continue to analyze the results of our research, we'll further refine the offerings we bring to you. Meanwhile, let us know what you want by giving me a call! My direct line is 619-275-7199. •

## Welcome New Members

Denisse Macias,  
Univ. De La Salle 2019

John Zermeno,  
Univ. of N. Carolina 2014

Sandhya Ramanujam,  
Ambedkar Institute  
of Dentistry India 1994

Niknam Refahi,  
Univ. of Baltimore, MD 2006

Samer Namoo,  
USC 2015

Reny Chacko,  
Int'l 1991

McKenzie Sorensen,  
Univ. of Texas, San Antonio 2018

John LaFleur,  
UOP 1978

Kris Nip,  
Univ. of Colorado 2016

Travis Kinser,  
UOP 2017

Karli Will,  
LLU 2019

Galya Raz,  
UNLV 2013

Kevin Lin,  
Univ. of Penn 2016

Sung Tak (Alex) Kim,  
Univ. of Louisville 2014

Marya Polan,  
UOP 2013

P. Scott McMahan,  
Loyola Univ. at Chicago 1975

Tracy Evans,  
USC 2014

Lydia Mihovilovic-Humes,  
NY Dental School 2004

Steven Nytko,  
Univ. of IL at Chicago 1991

Molly Erdman,  
Univ. of Minnesota 2015

Linda Young,  
UCLA 2019

Adesuwa Bello,  
Howard U 2007

Fabriel Burquez,  
Univ. de Baja California. 1993

Michael Hanna,  
Univ. De La Salle –MX 2016

Megan Dietz,  
UCLA 2009

Mary Williams-Treesh,  
Univ. of KY 2005

Ramin Movafaghi,  
Tufts 2019

Danielle McCourt,  
Univ. of Houston, TX 2016

Anastasia Avina,  
UCSF 2011



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

**ENCINITAS:** 6 Ops, remodeled 5 years ago with new equipment and utilizes Dentrux, Digital X-rays, Pano, and Laser. Located in busy retail center. 4 hyg days/wk. 2018 GR \$813K. #CA574

**LA JOLLA UTC:** *New Listing!* Leasehold sale, Excellent location with strong retail anchors, 7 Ops, Digital, Dentrux, Practice does contain and currently sees patients. Priced for quick sale! #CA663

**NORTH COUNTY COASTAL ORTHO:** *New Listing!* 4 Chairs+ Consult Room, Desirable area, Digital Pan/Ceph, Excellent location. 2018 GR \$273K. #CA653

**NORTH COUNTY PERIODONTAL:** 4 Ops, 3 Equip. Newer equipment: CT Scanner, Digital X-rays and Dentrux. Excellent location in a well-maintained complex. Priced to sell quickly. 2018 GR \$269K. #CA605

**POWAY:** *New Listing!* 3 Ops, centrally located, busy strip center location with room to grow the practice. Practice features Digital X-rays, I/O Cam, Pano, and Laser. 2018 GR \$243K. #CA659

**SAN DIEGO COUNTY ORTHODONTIC:** Rare Opportunity in the San Diego County area, Established office with updated computer hardware. Paperless with many years of goodwill. Excellent location. This will sell quickly. 2019 Gross Receipts of \$656K. #CA615

**SAN DIEGO EAST COUNTY:** Spring Valley Area, family practice with 3 Ops located in a convenient smaller strip mall adjacent to busy street. PPO and no HMO, Digital X-rays, Dentrux, Dent practice software, excellent area of opportunity. Potential property ownership in future. 2018 GR \$466K. #CA636



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## San Diego County Oral Health Champion: Joseph Boulos, DDS

It was a complete surprise to me when I heard that I was selected to receive the *Live Well San Diego Oral Health Champion Award*. I did not know why I was selected, who nominated me, nor whether I was deserving of this honor.

I always felt the need to volunteer my services as a dentist, and that volunteering is the greatest job in the world. However, it is not feasible when you are trying to grow a business and have student loan debt to repay. I have considered volunteering at select health clinics in San Diego, but never did, because I could not find the time.

In the back of my mind, I have always thought about giving back to my community but was never able to make it a reality until *Survivors of Torture International (SOT)* approached us to see their patients. This is an organization dedicated to helping people from around the world who have been tortured and suffered atrocities. When Brittney Willis called to inquire about our dental services, I saw this as an opportunity to contribute to a great cause within the boundaries of our office.

We decided to provide SOT patients with free comprehensive examinations including FMX, intra-oral pictures, patient education, oral hygiene instructions, prophys and fluoride treatment. I think this has really impressed the SOT medical case manager, and she decided to start referring more patients to us. SOT tries very hard to find money that they can utilize to help their patients with medical and dental care, though funding being very scarce and limited. We decided to provide treatment at or below cost to better meet the financial needs of these patients being referred to us.

We found out early that this is not an easy situation. As dentists, we all know that treatment plans can change and simple procedures can become complicated ones. With that in mind, we can never ask SOT for more money in cases where a filling turns into a root canal, core, and crown. In my mind, it is our responsibility to absorb that cost and do what

is necessary to help our patients achieve stable and functional oral health. Deep down, I do not mind at all. I feel happy that I am able to give back to these patients that had endured such adversity in their lives.



Joseph Boulos, DDS,  
SDCDS Member (Pacific Beach)

### healtorture.org

*Survivors of Torture, International* is an independent nonprofit organization dedicated to caring for survivors of politically motivated torture and their families who live in San Diego County — as reported by *Live Well San Diego* ([www.livewellsd.org](http://www.livewellsd.org))



Dr. Boulos with staff

In some cases, we refunded SOT for procedures that were not needed, such as limiting our treatment to a filling when a root canal was anticipated. I think SOT was really taken aback by this, as they didn't expect to receive money back from a dentist.

Another point that is very important to mention is that most of our SOT patients have never seen a dentist. Thus, being able to communicate with these patients in their own language becomes crucial to educate and help the patients throughout the process. What impressed SOT is that we are able to communicate with many of their patients in their native languages. At our office, we speak 5 languages including Haitian, Arabic, and Spanish, which has been very useful in facilitating communication. Effective communication is essential when dealing with nervous patients that have suffered physical and mental abuse. This is especially important when your patients have dental problems resulting from torture. In order to put them at ease in the dental chair, it is crucial to explain to the patient in their native language what to expect before, during, and after each dental procedure. It is a big relief for the patient, who has escaped to this new world, and who does not speak English, to hear their native tongue being spoken. That is when I catch them, in my dental chair, smiling for the very first time, because they feel at ease.

Finally, I would like to add that we have received feedback from SOT that their patients feel very comfortable in our

office. I am very thankful to my staff who are so gentle, professional, and able to provide culturally responsive and compassionate care. Without the enthusiastic support of my staff, I don't think I would be able to provide this level of care to these patients that have survived so much.

*Editor's note: Four community partners received the Live Well San Diego Oral Health Champion Awards last year "in recognition of exceptional achievements advancing oral health in San Diego County" from the County of San Diego, Health and Human Services Agency. The ceremony was profiled in the March issue. Facets reached out to these awardees, who are all SDCDS members, to find out more about their service to our community. Facets asked Dr. Boulos to provide his story. Here is our first profile.*



# Coronavirus Disease 2019 (COVID-19): a resource guide

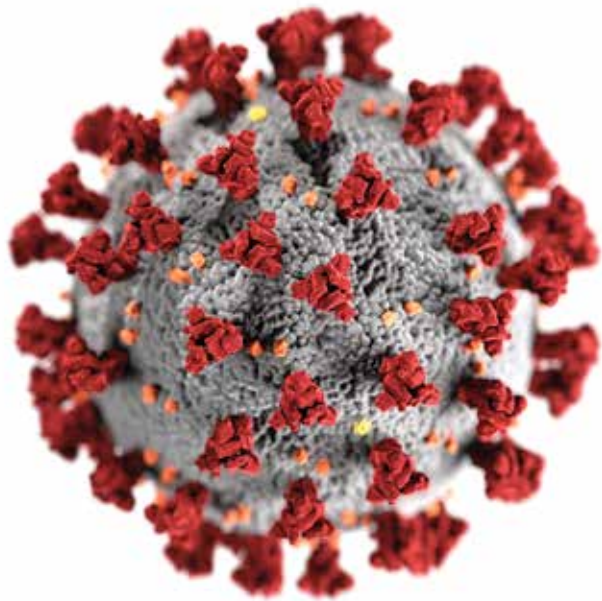


Image courtesy of CDC

## Resource Guide

Facets created this resource guide to help you keep up with the latest about coronavirus 2019 (COVID-19). Obviously, this guide isn't intended to print the latest breaking news — not even by a long shot. But use it to get to where you want to go to get the latest information. Facets is assembled well over a month in advance. A lot can happen in a news cycle — even in seven days — just ask Dow Jones. For example, on February 28 (the date this guide was initially written), news focused on the second patient diagnosed with COVID-19 in California by community transmission (unknown source of exposure). But the press release from the CDA website on February 28 “Coronavirus and patient screening: Recommended actions for dentists” discussed the existence of only one such California patient.

So by the time you read this issue sometime in Mid-April, either everything is under control and airtight — according to President Trump’s administration — or all hell is breaking loose, like in a Stephen King horror novel. So use this resource to get the latest information on your own.

### Source 1: CDC

**Go to:** [www.cdc.gov](http://www.cdc.gov)  
**and click on** “coronavirus disease 2019”.  
This is the CDC Novel Coronavirus mainpage. Take a step back from the trees and look at the forest. The CDC is the ultimate source for anything and everything, from how to address interim recommendations on large group gatherings — such as large conferences — or the latest news and bulletins. For pertinent information, click on the button “**Healthcare Professionals**”.

**March 10 announcement:** CDC Developing Guidance Regarding Responding to COVID-19 in Dental Settings: “As the expanding global outbreak of Coronavirus Disease 2019 (COVID-19) continues, the federal government continues to work closely with state, local, tribal, and territorial partners, as well as public health partners across the globe to respond to this public health threat. The Centers for Disease Control and Prevention (CDC) Division of Oral Health (DOH) is diligently working with CDC’s Emergency Operations Center to develop tailored COVID-19 guidance for dental health care personnel (DHCP). Once this guidance is available online, DOH and partners will promote these resources as well as any related events to the dental community.”

Healthcare personnel (HCP) are on the front lines of caring for patients with confirmed or possible infection with coronavirus disease 2019 (COVID-19) and therefore have an increased risk of exposure to this virus. HCPs can minimize their risk of exposure when caring for confirmed or possible COVID-19 patients by following CDC infection prevention and control guidelines, including use of recommended personal protective equipment (PPE). — CDC

### Source 2: ADA

**Go to:** [www.ada.org/virus](http://www.ada.org/virus)  
Find: “Infectious Diseases in the News: 2019 Novel Coronavirus (COVID-19)” then download “**informational handout**”.

An ADA informational COVID-19 handout is available for download from ADA called “Infectious Diseases in the News: 2019 Novel Coronavirus (COVID-19)” Go to the article at [ada.org](http://ada.org): “ADA releases coronavirus handout for dentists based on CDC guidelines” (authored by M. B. Versaci) and click on button “informational handout”. The article states: “The handout covers strategies for helping prevent the transmission of suspected respiratory disease in the dental health care setting and answers frequently asked questions related to the virus, based on guidelines from the Centers for Disease Control and Prevention” and “Patients with an acute respiratory illness may seek treatment at outpatient dental settings. The ADA recommends following standard precautions with all patients, at all times.”

### Source 3: CDA

**Go to:** [www.cda.org/covid19](http://www.cda.org/covid19)  
This is the CDA coronavirus information center. Additionally, CDA Practice Support is available at (800) 232-7645; however, due to the unprecedented nature of this pandemic, response times may be impacted.  
**New Resources for Voluntary Suspension of Non-Urgent or Non-Emergency Dental Care** (March 16 update)  
Late yesterday, the California Dental Association requested the cooperation of all California dentists during this state of emergency to help limit infections, “flatten the curve” and slow the spread of the new coronavirus (COVID-19).

In Following CDA’s strong recommendation that dentists voluntarily suspend non-urgent or non-emergency dental care for the next 14 days, the Practice Support team developed guidance and tools to use when considering limiting services to emergency care only and making determinations about essential care. Find updated resources at the information center on:

- FAQs on suspending non-urgent or non-emergency care, limited services, office closures and communicating to staff and patients
- Protocols for defining and treating patients who require urgent care
- FAQs on sick leave, employment, compensation and liability
- Contacts for economic hardship relief and tax assistance

### Source 4: San Diego County Health & Human Services Agency

**Go to:** [www.sandiegocounty.gov/coronavirus/](http://www.sandiegocounty.gov/coronavirus/)  
You will find local data for our county. As of March 15, there are 55 total positive cases of Coronavirus disease in San Diego County since February 14. They are as follows: San Diego County residents: 47; Federal quarantine: 4; Non-San Diego County residents: 4.

Compare that data to the information from February 28: “13 individuals on repatriation flights from Wuhan, China under federal quarantine at MCAS Miramar”, with 2 confirmed cases. 13 San Diego County residents have been tested and all negative, 5 additional are pending. 2 non-San Diego County residents have been tested, one negative, one pending. There are 141 persons in San Diego County under Public Health Supervision (actively being monitored), 249 who have completed their monitoring.

### Source 5: Imperial County Public Health Department

**Go to:** [www.icphd.org](http://www.icphd.org)  
Click on “2019 Novel Coronavirus” to get the most recent local information. As of March 16, Imperial County had no positive confirmed cases, 2 “presumptive positive” cases, 18 negative cases, and 9 pending results.

### Source 6: California Department of Public Health

**Go to:** [www.cdph.ca.gov](http://www.cdph.ca.gov)  
click on “Coronavirus Disease 2019 (COVID-19)” and get access to “News Releases” and “Guidance Documents”  
As of March 16, 2020, there were a total of 472 positive cases and eleven deaths in California (including one non-California resident). Positive cases: Travel related: 82; Person-to-person acquired: 75; Community acquired: 98. Approximately 11,750 people are self-monitoring after returning to the U.S. from travel. This total does not include passengers from the Grand Princess cruise ship.

### Source 7: World Health Organization

**Go to:** [www.who.int](http://www.who.int)  
Click on “Coronavirus (COVID-19) disease outbreak”  
On this website you can find international information from the WHO regarding the current outbreak of coronavirus disease (COVID-19) that was first reported from Wuhan, China, on 31 December 2019. Further click on daily updates called “situation reports”. Deaths: Not counting China, total deaths in the World on Feb. 28 was 67, and on March 17 it was 4,195.

### Deaths (notice the trends)

Country	February 28	March 17
China	2,791	3,231
Iran	26	853
Italy	17	2503
Korea	13	81
Japan	4	28
France	2	148
Philippines	1	12
UK	0	20
USA	0	58



## Dental Practice Act/Infection Control, January 25

SDCDS held a Dental Practice Act/Infection Control course at the Handlery Hotel in Mission Valley with speaker Diane Arns.

**Member benefit:** Did you know each calendar year, as a SDCDS member you can attend a *Dental Practice Act/Infection Control* or *BLS Renewal* course at no additional charge? Go to [www.sdcds.org](http://www.sdcds.org) to find out when we will be holding the next courses.



## Restorative Dentistry Update: Practical tips for clinical excellence. February 8

Richard Gray Stevenson III, DDS gave a SDCDS course presentation called Restorative Dentistry Update: Practical tips for clinical excellence” at the Handlery Hotel.



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**Par for the course**  
A great time was had by all at Dr. Kevin Kenny's Patriots Study Club golf tournament. We reached the goal to fund the UCSD free clinics for 2020. Special thanks to corporate sponsors Bank of America, Burkhart Dental, Patterson Dental, Wells Fargo, and all the doctors who contributed and played. "And who knew that Dr. Tina Beck could drive a golf ball 247 yards!!"



**Susan Lovelace's amazing CDA history article**

Why reinvent the wheel? Former SDCDS executive director and CDA managing editor Susan E. Lovelace's seminal CDA history article "A professional calling" from the July 1995 CDA Journal was just reprinted as the lead article in the March 2020 CDA Journal. CDA Journal says Lovelace did a "beautiful job" in capturing our history 25 years ago as the reason for reprinting. It is inspirational. Facets refers back to her original unabridged article quite frequently. She recorded so much California dental history comprehensively, there's no way to improve it. Drop me a line at [facets@sdcds.org](mailto:facets@sdcds.org) if you want me to send you her original detailed article.

Facets reached out to her to find out what's happening in her next chapter in life. She gratefully obliged. After serving 12 years as our SDCDS executive director, she retired due to health issues. With those resolved, a year later she accepted a position with Rady Children's Hospital, managing the Anderson Center for Dental Care as well as other educational and outreach programs. Beyond the job, she continued to exercise her writing skills by serving as assistant editor, and contributor, for the San Diego Garden Railroad Society newsletter. Fully retired now, Susan and husband Mark live in Texas, where she is compiling writings from her year in the mission field into a book; has just been asked to create a newsletter for the Tri-City Model Railroad Society; and has been tapped, along with Mark, to direct the 2020 Christmas Pageant at her church. We wish you success!



**Women in Leadership Conference** April 26, 12-3 PM  
See page 23 for registration and logistics

The San Diego County Dental Society is delighted to host the 6th Annual Afternoon Tea: Women in Leadership Conference on Sunday, April 26th from noon to 3pm at the Paradise Point Resort and Spa! This year our guest speaker is Jennifer Chevalier, the Chief Strategy Officer of Fortune Management. Jennifer is a businesswoman, writer and entrepreneur with a focus on dental practice growth. She has worked in dentistry since high school, occupying almost every front and back office position in a dental practice. These experiences led her to this career path at Fortune Management where she is involved in creating best practices and improving the standards in healthcare. Jennifer is also the founder of Virtual Training Innovation, the first ever online training system for dental practices, and the author of *Hire to Inspire*. Her experience will provide a wonderful lesson in leadership.

The theme of this year's event is *Mastering the elusive Work-Life Balance*. We wear many hats as women, including dental professional, entrepreneur, spouse/significant other, etc. These roles can become overwhelming when trying to "have it all." When focusing on work, often we feel guilty about neglecting another aspect of life and vice versa. Our goal in this year's conference is to be able to manage the many directions that life pulls us while still feeling a sense of balance. Guests can plan to have a wonderful afternoon setting goals, socializing with fellow colleagues, enjoying delicious bites and of course, sipping tea at the resort. If this speaks to you, please make sure to reserve your spot in advance as we have limited seating. The event is free with the help of our sponsors. We look forward to having you there!

Thank you!  
Shivali Gohel-Garg, DMD  
SDCDS Recruitment and Retention Committee



**Zeynep Barakat, DMD, FAGD**  
Dr. Barakat graduated from Boston Univ.School of Dental Medicine, completed an AEGD residency in Detroit and practiced in New England before moving to San Diego. She is currently in private practice and is the President of the San Diego AGD component. She is a regular contributor to the AGD's Daily Grind blog.



**Sit back and relax—in the dental chair**

Last week, a patient of mine sat in the dental chair and let out a surprising "Aaahh, it feels good to relax." Usually, the words "relax" and "dental chair" are not always associated with one another. But over the years, I have had many patients with very busy lives and commitments yearn for a quiet time to step away from it all. So for some of us, I suppose it has come down to the dental cleaning appointment as being one of few opportunities for a little "me time." While I welcome the opportunity to contribute to a patient's calm and relaxation in our chair, it validated how integral the chair must be to our patients.

Undoubtedly the dental chair has come a long way from its rudimentary design back in the day. It has thankfully evolved from an upright version to an adjustable one that reclines. Truthfully, I cringe both from a dentist and patient's perspective when I see some of those earlier designs, even though that was the norm for that

era. Today's contemporary dental chair almost seem to rival the comfort and fit of a luxury car seat, with the attention to detail on supportive and ergonomic features.

And why shouldn't they? Our patients can sit in those chairs for hours at a time, oftentimes accompanied by fear and anxiety, or just a basic unwillingness to be there. Some are disabled; some have arthritis; some just have difficulty staying in one position for an extended period of time.

It would seem obvious that the chair would be the very first thing we make comfortable and soothing for a patient. What the patient sees and feels in our chairs mean so much more to them than we may think. What's fascinating is that most patients won't voice their opinions until something (like an office chair being replaced) prompts them to do so.

Sometimes, one thing cancels out the other. So if the wall art is not appealing but there is a window to a pleasant view, patients will take comfort in the thing they like and find it refreshing. But if the chair is not comfortable or has a rigid headrest that is not adjustable, no art or window can negate that discomfort. In my view, the comfort of the chair itself supersedes all other environmental factors in the room and can be central to the patient experience. That was precisely what my patient tried to convey when she had her "Aaahh" moment while settling in the chair.

A long while after my mother had a devastating stroke which left her partially disabled, I accompanied her to her dentist and helped her into the chair. As she sat back, I asked her if she was comfortable. She replied, "Oh, very much so." That said it all. That's where it all starts. •



**Oral Health Foundation of Pierre Fauchard Academy**  
awards grants to two San Diego-based Projects

By Dr. Charles Eller, Past President PFA, Trustee OHFPFA, Past President, SDCDS

The Oral Health Foundation of the Pierre Fauchard Academy (OHFPFA) received 104 Grant requests in 2019 and 36 requests were granted. The Southern California Section Grants that were funded are as follows:

**John Geis Veterans Village**  
San Diego  
\$5,000

**CDA Cares**  
Long Beach  
\$5,000

**Thousand Smiles Foundation**  
San Diego  
\$7,500

**Conejo Free Dental Clinic**  
Thousand Oaks  
\$7,500

Total OHFPFA financing since 1995: \$4,478,824 in grants and \$2,357,400 in scholarships, totaling \$6,836,224. Southern California Grant totals: \$715,950 in grants have been given to Southern California projects, which is the largest funded Section of the OHFPFA. Of that total, \$508,920 has been given San Diego County projects. The only other Oral Health organizations in the United States have ceased to exist. Oral Health America and the ADA Foundation funding is only used for research. The OHFPFA now has 11 Regions, 142 Sections and over 11,000 Fellows worldwide. Grant requests for 2020 are due by June 1, 2020. For more information, please contact: [Teale@fauchard.org](mailto:Teale@fauchard.org)



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6 operatory practice available in desirable Hillcrest. Adec chairs, Adec cabinetry, x-ray units and Sirona Comfort Plus CBC.T. Lab area with custom cabinets and sterilization room with Adec cabinetry including a recessed Ultrasonic and room for 2 Autoclaves. Dry vac system, Amalgam Separator and much more. There are no patient charts. Leasehold, equipment and TI's only. Purchase is subject to negotiating a lease with landlord. Asking \$199,900. [john@countryclubdentistry.com](mailto:john@countryclubdentistry.com) 617.834.2805

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Go online for more info or to apply: [sdcds.org/mentorship-program/](http://sdcds.org/mentorship-program/)  
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Deadline for June issue is May 1, 2020,  
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## The charitable arm of the SDCDS

We are a charitable foundation established by dentists in San Diego County for the purpose of serving as an economically stable philanthropic entity dedicated to: funding dental health programs and dental education programs.

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Garrett Guess, DDS

Dr. Guess (pictured here with his family) is a Diplomate of the American Board of Endodontics, with a private endodontic practice in the La Jolla/UTC area. He developed EndoTrak, an endodontic practice management software program. Email: [endo@drguess.com](mailto:endo@drguess.com).



## Email Safety Part 1: Attachments

Based on sheer volume, email communications may represent the most common method of communication in today's dental practices. Yes, that means it is possible to send and receive more emails in a day than the number of phone calls. Is this the case in your practice? If you consider how much effort you spend training your front office staff on how to manage phone conversations, you should be spending a similar amount of time training them on email communications. While there are numerous phone scams to watch out for, email scams these days are far more prevalent and can be more dangerous for your practice's security due to their frequent nature and how easily they can create a problem. Training your staff on how to handle email attachments is a very important aspect of email security. Anyone using email in your practice must be able to identify and avoid dangerous email attachments.

Malicious email attachments are sent with the purpose of enticing a user to download and open them by means of playing on one's emotions of fear, curiosity and urgency. The purpose of a malicious attachment is to access, control and/or record information on your computer. Some attachments are capable of scanning an entire device to obtain email addresses for the purpose of spreading the malicious attachments to other users. These attachments can contain ransomware and spread to affect all of the devices on an entire network. Their security impact in a dental practice, or any situation, is clear.

### 5 Tips to help you and your practice avoid malicious attachments:

1. Treat any email attachment with a healthy suspicion.

2. Check the content: Is the attachment file type and tone of the email appropriate for what you were expecting from that sender?

In order to identify a dangerous email attachment, one must understand attachment File Name Extensions. There are many types of files that can be attachments and they all have different File Name Extensions, like .doc or .pdf or .jpg. Emailed files that are executable files and likely to be a malicious attachment will have a .exe extension and should be avoided.

It is important to note that files that

are compressed are not scanned by virus and malware scanning software. In cases where you received a compressed file (with a .zip extension, for example), you must be expecting that attachment from a known sender before you consider downloading it and opening it up.

Microsoft Office Documents can be particularly dangerous because they can contain macros which are small pieces of code that automate tasks which means a file with a malicious macro can be opened and infect your system. So be particularly wary of Microsoft Office Documents, and if possible, disable macro functionality in your Microsoft Office preferences by selecting the "Disable all macros without notification" option especially if

you tend to receive many of those types of attachments.

3. Seek confirmation: If you receive an email with an unexpected attachment from someone you know, seek independent confirmation by calling them or sending them a text to confirm they did indeed send the message and attachment. Confirmation is easy, and worth the extra steps.

4. Do an online search: If you get an email that seems suspicious, search the topic online and you'll likely get more information about common scams.

5. Remember step 1: Treat any email attachment with a healthy suspicion!



**SAN DIEGO ADVANCED STUDY GROUP**  
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 RSVP for events to May Tong 619-298-2200 Ext. 107

**April 15:** 8am – All Day Meeting / Doubletree Hotel \* Mission Valley Online Marketing-Best Practices for New Patient Growth  
**May 19:** 6pm/Scripps Mercy Hospital/Treatment Planning-Live Patient Single Case Presentation  
**June 5:** End of the Year Party (Details TBA)  
 Early Bird Registration for 2020-2021 Study Group Season  
**Sept 15:** Kick off Dinner

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COVID-19

All SDCDS events were scheduled to take place at the final newsletter edit. However, because of the lead time required for printing and shipping, and the changing landscape of the Coronavirus, subsequent cancellations may have been necessary. Please check our website for the latest information [sdcds.org/events](https://sdcds.org/events)

THURSDAY

Apr 23

OR

Sept 09

Shred-a-thon

*Tear into the Fun:  
2 dates at different locations*



**Summary:** Find info at [sdcds.org](https://sdcds.org) on what you can bring to be destroyed. **10 box limit, X-rays & metal prongs will need to be removed prior to collection.**

**Time:** 4-7pm

**Location:** SDCDS Parking Lot 1275 - B West Morena Blvd

**Includes:** Tacos and Beverages

**Sponsor:** Ken Rubin Practice Sales

**Next Shredathon:** Wednesday September 9, so if you miss this one or prefer a different location, go at 4:30 - 6:30pm to 135 Saxony Road, Encinitas, CA 92024



SUNDAY

Apr 26

Women in Leadership Conference

*6th Annual  
Afternoon Tea*



**Keynote Speaker:**  
Jennifer Chevalier



**Summary:** Mastering Work-Life Balance.

**Time:** 12pm - 5pm

**Location:** Paradise Point Resort 10000 Vacation Rd. SD, CA 92109

**Register:** [sdcds.org](https://sdcds.org)

619.275.7188 or [membership@sdcds.org](mailto:membership@sdcds.org)

**Pricing:** Free. RSVP by April 22. Credit card required to hold spot, \$25 fee only for no-shows.

**Includes:** Light refreshments and tea will be served

**Sponsors:** US Bank, Schein, ZimmerBiomet, Transition Advisors, CPR Chicks, Crest



THURSDAY

May 07

New DDS Social



**Summary:** Come have fun and be social!

**Time:** 5:30-8:30pm

**Location:** TBA

**Register:** [sdcds.org](https://sdcds.org)

619.275.7188 or [membership@sdcds.org](mailto:membership@sdcds.org)

**Pricing:** Free

**Includes:** Food and drinks



THURSDAY

Apr 30

BLS Renewal for Healthcare Providers

*FREE CE\**



4CE units

**Summary:** Register early if your CPR card is expiring; limited spaces available.

**Time:** 5:30-9:30pm (5pm check-in)

**Includes:** Pizza and salad, (please indicate special dietary needs when registering).

**Location:** SDCDS Office

**Register:** [sdcds.org](https://sdcds.org) 619.275.7188 or [admin@sdcds.org](mailto:admin@sdcds.org)

**Pricing:** member \$40... (or use your 1 FREE member benefit CE for 2020).

nonmember \$60

member staff \$50

**Sponsor:** Kunau & Cline, Inc.



WEDNESDAY

May 06

2CE units



2020 Military Dental Symposium

**Table Clinic:** 1600 - 1730

**Awards/ Dinner/ Lecture to follow:** 1730 - 2000

**Location:** Hilton San Diego Mission Valley 901 Camino Del Rio South, SD, CA 92108

**Register:** [www.sdcds.org](https://www.sdcds.org)

**Pricing:** \$85 military | \$99 civilians

**Includes:** Dinner (3 options)

**Dress Code:** Presenters: Summer Whites (w/ nametag, no cover)

All other Attendees: Business Attire

**Sponsors:**

San Diego Navy Dental Officers' Association, San Diego County Dental Society and the Patriots Study Club

Anterior Implant Esthetics: Strategies to Achieve the Best Outcome

In the anterior maxilla, implant esthetic is best achieved by immediate implant placement, and immediate implant provisionalization. However, it is not always possible to place an implant immediately after tooth extraction. If an immediate implant is placed, it is not always possible to provisionalize it. In some cases, the immediate implant will have complications or not osseointegrate. If plan A does not work, what is plan B? This lecture explores different practical approaches to replace and provisionalize a missing maxillary anterior tooth to achieve the best outcome.



Speaker Biography

Jonathan H. Do, DDS, attended UCLA for college, dental school, and advanced education in general dentistry, and postgraduate periodontics and implant surgery. He is a former full-time faculty member at UCLA. With the recent

birth of his daughter, Charlotte, Jonathan's teaching is now limited to didactic and continuing education at UCLA. Jonathan maintains a private practice limited to periodontics and implant surgery in Poway, CA.



THURSDAY

May 07

New DDS Social



**Summary:** Come have fun and be social!

**Time:** 5:30-8:30pm

**Location:** TBA

**Register:** [sdcds.org](https://sdcds.org)

619.275.7188 or [membership@sdcds.org](mailto:membership@sdcds.org)

**Pricing:** Free

**Includes:** Food and drinks



MAY 14 15 16

CDA Presents

*The Art and Science of Dentistry*

**Summary:** 17 CE Options and hands-on workshops about the latest technological advancements!

**Location:** Anaheim Convention Center 100 W Katella Ave Anaheim, CA 92802-3496







# San Diego County DENTAL SOCIETY

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