

SDC NEWSLETTER

**JUNE/JULY
2020**

June 2

New DDS Seminar

June 18

BLS Renewal

June 27

Shredathon

July 16

BLS Renewal

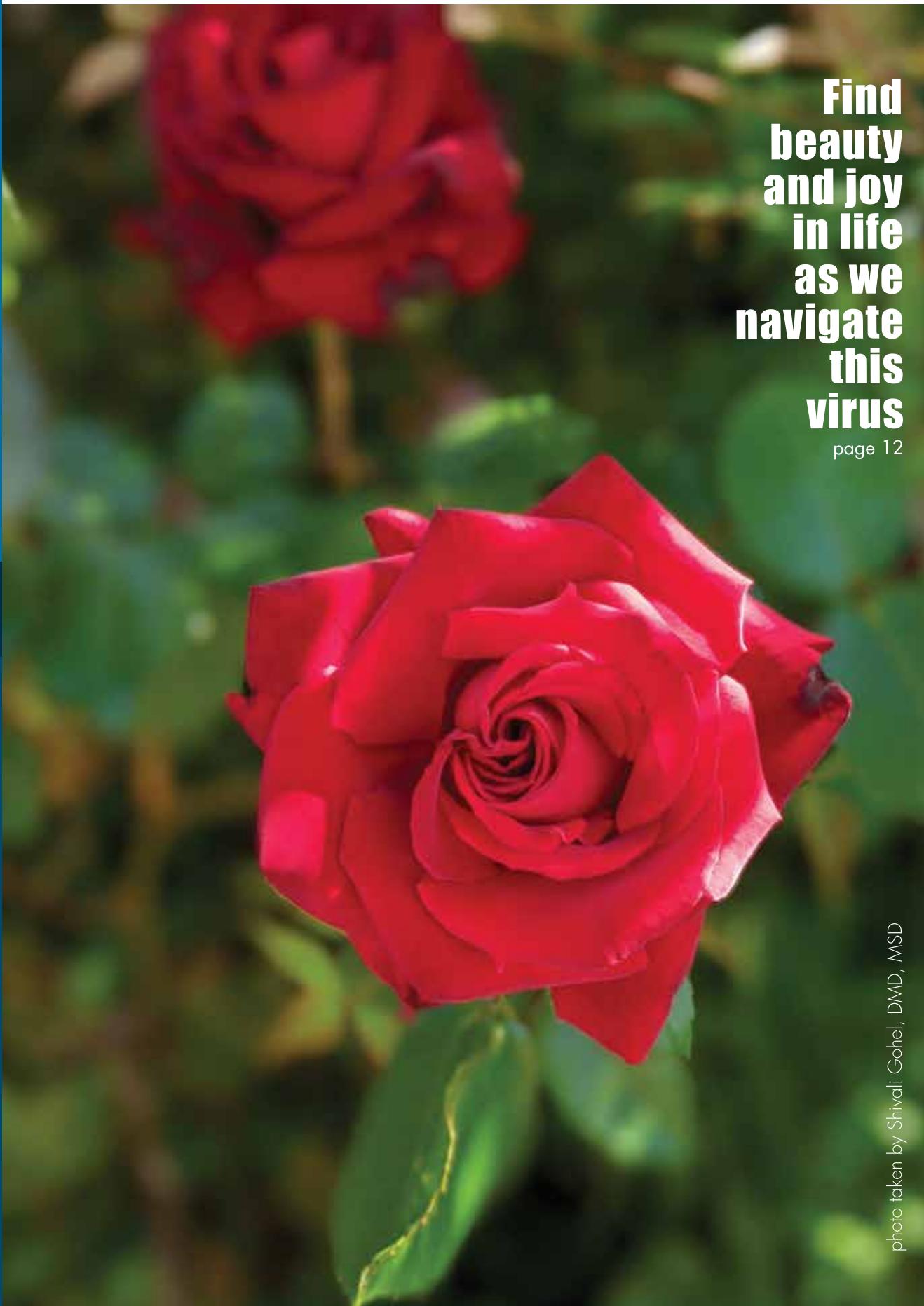
Aug 20

BLS Renewal

Aug 29
Women in Leadership



San Diego County
DENTAL SOCIETY



**Find
beauty
and joy
in life
as we
navigate
this
virus**

page 12

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CARLSBAD: 4 ops. Nearly new buildout in superb retail location. Next to Panera Bread. Motivated seller wants to downsize.

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KEARNY MESA: 5 ops. 29 years of goodwill. Centrally located in the heart of San Diego. Practice has excellent signage on one of San Diego's busiest streets. Long standing, large, loyal patient base.

ENCINITAS: 5 ops. Highly coveted North County coastal setting. Busy medical campus location with plenty of parking. Strong and loyal patient base. Well-trained skillful staff.

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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:

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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?



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“The best laid plans of mice and men often go awry”

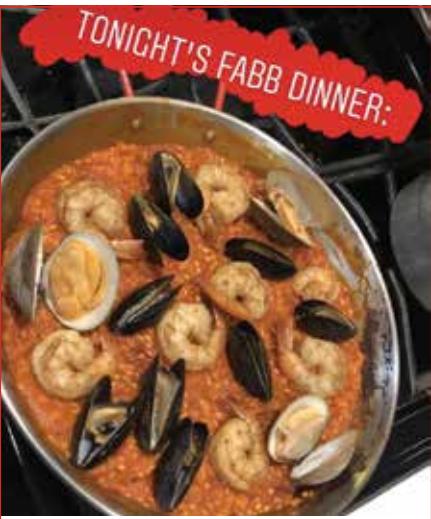
“The best laid plans of mice and men often go awry.” I think the COVID-19 virus took this adapted line from Robert Burns’ poem “To a Mouse” as a personal challenge. No one could have envisioned this year going the way it has, making a mockery of everyone’s detailed lives.

2020 will be a story of adaptation. The Safer at Home mandates forced a hard pivot from business-as-usual to a new reality, with much more free time on our hands (perhaps more so for those of us without children) and a dilemma on how to properly spend it. There are two basic opposing schools of thought: one of opportunities and taking advantage of them, and one of survival. One went with the premise that if you do not utilize this opportunity to do every project you always wanted to do, you never lacked time, you lacked discipline. The other is the thought we are all going through a massive scale global disaster, and the focus should just be on getting by without being shamed for not living an Instagram-worthy quarantine life. I think the reality for most of us is we fall somewhere between the two.

For the first month, I was really all-in on spending every moment of this newfound “bonus time” to the extreme. Every room in my house was cleaned, organized and decluttered. Next came the office. I deep cleaned every nook and cranny, finally organized instrument drawers and implemented protocols and systems I always wanted in my practice. I exhausted myself. The next day I power slept and caught up on rest. I didn’t get out of bed until almost dinner time. When would I be able to do that again? I cooked more at home, which I love to do, but not necessarily after a long day doing dentistry. I watched every webinar I could, and took advantage

of the sudden surge of free online CE courses that filled the void from all the cancelled CDA Presents courses in Anaheim. I really WAS living my best quarantine life!

Things would change during quiet times. I paused to reflect upon my life and examine what was going on around me. I lost my younger brother at the beginning of everything in March and was not able to properly grieve with family. Friends lost businesses they’ve worked most of



Above, Yummy Paella, for me, cooking helps, see how other SDCDS members are keeping sane during quarantine on page 12

I became realistic about setting my own expectations for myself and others. Of course, the New Yorker in me always strives for maximum efficiency. Only months ago, I privately wished for a magical extra week, or even a day, where I can catch up on all the things on my backburner that had been pushed aside for higher priorities. This was my chance, but I needed balance. Incredibly productive days were sandwiched around days of not reading any news, but just enjoying the simple act of opening a bottle of wine while trying a new dinner recipe. Playing with my dogs (who were the REAL winners in this stay-at-home mandate) was now a higher priority than it had been previously. Putting it all in perspective, this was especially important, given their relatively short lives with us. Connecting with family and friends through video chats were now one of my favorite things to do, and I don’t know why I wasn’t doing it more frequently before.

During this time of unpreceded change, how you manage your stress and your time will vary day-to-day and hour-to-hour. How you do so is your choice, and you should feel good that you managed it the best you can, given your circumstances. If devoting time to taking CE courses is realistic, the Dental Society is providing a member benefit of free online CE for members. Check our website sdcds.org for more info, if you haven’t done so already. More than anything, continue to stay safe, take care of family and loved ones, and I hope to see you at an event when the time comes. *



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“So many have died all at once.
30 patients died in just a single shift at a nearby hospital.
And three died during my shift yesterday.”

—Anonymous, April 8, 2020, one of a reported 25,000+ healthcare professionals who arrived in New York City to help.

Not a hero

“It is really bad out here, incredibly bad.
Words can’t do it justice.”

That’s what Anonymous, a friend who happens to be a registered nurse, told me on April 8 during a break from his rotation at a New York City hospital. He recently left his position in an intensive care cardiac unit of a major California hospital when he saw an opportunity to provide desperately needed help in New York. He chose to remain anonymous.

Unbeknownst to us, 799 New Yorkers died of Coronavirus disease on that day we talked, which was the highest number of COVID-19 deaths to occur in a single day in New York as of the time of this writing. Flatten the curve? New York shattered the ceiling.

What’s your typical day like? “It’s putting out fires,” he said. He is working in the emergency room and the intensive care unit at this New York hospital. “Patients are crashing fast and we do what we can.” He said his hospital has a sufficient number of life-prolonging ventilators, given the circumstances. Incidentally, he added, he’s in a very well-equipped hospital. Even so, there’s a shortage of sedation drugs like propofol. As a result, his department has had to resort to rapid administration of paralyzing drugs to intubate patients when placing them on ventilators. With the risk of deep coughing and exhaling from the patient, these intubations create a dangerously aerosolized environment.

Unfortunately, his hospital has a shortage of PPE supplies. He uses a powered air-purifying respirator (PAPR) and has another backup respirator that is built to handle industrial gases. The rub — this PPE wasn’t provided by his hospital — he purchased his own equipment to use. Frequently, staff resorted to fend for themselves to find their own life-saving PPE. And it wasn’t easy for these healthcare providers on the frontlines to find a respirator, when others, for legitimate purposes or not, were similarly scouring the internet looking for such equipment. Sure there

are facemasks available at his hospital, but not always in the necessary sizes and types to offer protection. N95 respirators are scarce. Out of curiosity, I had to search what PAPR looks like on Amazon. It’s actually what I imagined. It can make anyone look like Dustin Hoffman or Rene Russo fully dressed-up in a Richard Preston movie, or like Dave “open the pod bay doors, Hal” Bowman, or like anything in between.

Anonymous doesn’t see how healthcare professionals can protect themselves from this Coronavirus without proper PPE. “You need to feel safe,” he said. N95 respirators, faceshields, clinic gowns — so much equipment is important to protect against exposure. What about some of the interim CDC guidelines, like allowing health care providers (HCP) to use bandanas or “homemade masks” if proper PPE isn’t available? In my opinion, using the wrong PPE is more deadly than being a doctor in Russia near an open window in a COVID-19 wing of a tall hospital building.

Let’s dig a little deeper here. The CDC document “Strategies for optimizing the supply of facemasks” (downloaded May 5, 2020) states “HCP use of homemade masks: In settings where facemasks are not available, HCP might use homemade masks (e.g., bandana, scarf) for care of patients with COVID-19 as a last resort. However, homemade masks are not considered PPE, since their capability to protect HCP is unknown. Caution should be exercised when considering this option. Homemade masks should ideally be used in combination with a face shield that covers the entire front (that extends to the chin or below) and sides of the face.” I didn’t make that up. To be fair, CDC states: “This document offers a series of strategies or options to optimize supplies of facemasks in healthcare settings when there is limited supply.” I understand a “limited supply” means exactly that. So what does one do without any options? And with a COVID-19 patient? Obviously, we aren’t talking about putting on a scarf for protection while ringing up a quart of half-and-half with a cashier of a Ralphs supermarket during an “essential functions” shopping run. Anonymous

continued on page 13



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ENCINITAS: 6 fully equipped Ops, located in a busy retail center. Practice was remodeled 5 yrs ago w/ new equipment, utilizes Dentrix, Digital X-rays, Pano, and Laser. 4 hyg days/wk. 2018 GR \$813K. #CA574

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

NORTH COUNTY: *New listing!* Amazing! 5 Ops, 46 yrs Goodwill. The office features Dentrix, Digital X-rays, and E4D CAD/CAM. Strong hyg and recall office. Majority of specialty procedures referred out. 2019 GR \$1.1M+ w/ \$450K+ Adj. Net. #CA689

NORTH COUNTY PERIODONTAL: 4 Ops, 3 Equipped. Newer equipment including a CT Scanner, Digital X-rays, Dentrix. Located in well-maintained complex. Priced to sell quickly. 2018 GR \$269K. #CA605

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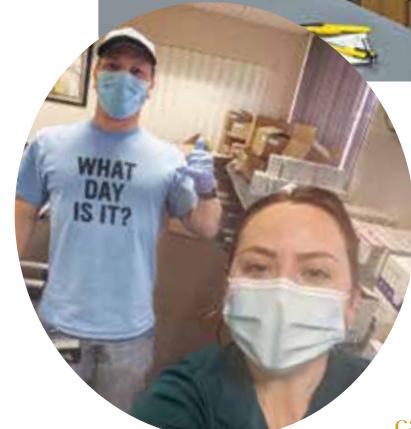
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We'd like to give a shout out to the County of San Diego for working with our dental society to provide dentists with masks, face shields and gowns. Early on, Dr. Wooten, San Diego's Public Health Officer, and her team recognized dentists as essential health care workers who need to get back to caring for their patients.

That has meant a huge donation of PPE over a two-week period numbering in the tens of thousands. Thanks are also due to the county's Chief Dental Officer, Dr. Tom Olinger, who has spent the last two months advocating mightily for dentists' needs.



San Diego Dentists Score PPE!

On the evening of May 7th, the California Department of Public Health released its "Guidance for Resuming Deferred and Preventive Dental Care". The County of San Diego worked through the weekend to publish their own guidelines on the following Sunday that mirrored the state's direction. On Monday, May 11th, San Diego County dentists had been given the green light to go back to practice provided they followed the proscribed protocols and had the appropriate PPE.

The problem was that few dentists had the PPE they needed to start treating patients. In stepped county officials again who, recognizing dentists as essential health care professionals, invited dentists to contact them to access their PPE warehouse. Within a short few hours, they were overwhelmed with emails and asked our dental society to act as a distribution center. At this writing, we have had 3 distribution days and are about to schedule our 4th to get desperately needed PPE into dentists' hands.

We would like to thank Dr. Wilma Wooten, Public Health Officer for the County of San Diego and her team, including Dr. Tom Olinger, Chief Dental Officer. Without their push to include dental in the category of essential health care, our members would likely not have resumed preventive and deferred care.

Stay tuned for more PPE. We will continue to let you know each time we receive additional shipments.

Coronavirus Disease 2019 [COVID-19]: Update and resources



Shivali Gohel, DMD, MSD is a Board-Certified periodontist practicing in Clairemont, is an Assistant Professor in the Department of Graduate Periodontics at Loma Linda University and is on the SDCDS Board of Directors. When she is not in the office and not under a COVID-19 lockdown, she enjoys exploring different neighborhoods of San Diego. She also enjoys spending time with her family, spinning, and practicing yoga, activities which she is grateful to be able to do at home.

Reflections of the quarantine

Dear Colleagues,

Our offices had been closed for eight weeks before California and the County of San Diego lifted their restrictions. I think it's fair to say that no one thought something like this was possible or would happen to this extent. Over these times, I experienced a range of emotions that are no doubt familiar to many of you: denial, helplessness, stress, anxiety as well as anger. It's hard not to experience the Kübler-Ross stages of grief. I imagine many of you felt frustrated with the rollercoaster of "can we"/ "can't we" work yet and then the confusion from conflicting regulating bodies. Rest assured that the San Diego County Dental Society was very active in getting clear answers.

Rather than staying stuck with negative feelings during the quarantine, I tried my best to get ahead of them, and took control of what I could. During this difficult time, I couldn't help but think and wonder: "Is this what we really needed? To have our lives forced to a complete stop and take a minute to catch our breath?" We're constantly moving and charging ahead. If we are not physically chauffeuring kids to/from school, soccer, or dance practice, then we are pushing ourselves to be better clinicians and stronger leaders in our communities. That's the thing. As dentists, we're designed to keep charging ahead — we always pursued our goals from the moment we decided to become dentists. First finish undergraduate requirements, then take the DAT, apply to dental school, graduate, find a job, etc. For me, I can look back at this quarantine as almost being a blessing in disguise. It offered me the opportunity to just be. To sit and breathe, and yes, to literally stop and smell the roses (We finally decided to pull all the weeds out from around the rose bush and sure enough, within a week we had beautiful blooms!)

I'm hoping that by the time you read this, we are all safely back to work taking care of our patients and adjusting to the "new normal." But at the same time, I hope that we still incorporate opportunities to be more present and to take stock in the things we have and cherish. My hope is this becomes daily practice. It's easy to get lost in day-to-day activities. And the most important thing to remember, we will get through this together. I truly believe our dental profession will come out stronger and will be seen by the public as advocates for overall health, even more so than before. Sure, things will not go back to "normal," but instead, we will create a "new normal" that will be better than what we had before.

In Solidarity,
Shivali Gohel, DMD, MSD,
SDCDS Board Member



A brief timeline (continued from our last issue)

- April 1st: Families First Coronavirus Response Act takes effect, expanding FMLA and Sick Leave requirements
- April 3rd: California partners with Google to provide 100,000 free WiFi spots to serve families, especially those who are homeschooling, and also donated 4,000 Chrome book laptops to students without computers at home
- April 7th: California strikes deal to obtain 200 million medical-grade masks per month; California Dept of Public Health released new directive for dental practices to postpone all non-urgent dental services until further notice
- April 8th: ADA urges all dentists to heed to April 30th postponement of all non-urgent and non-emergency dental procedures
- April 16: CDA urges Congress to approve relief legislation for dentists. Members asked to write to their congressional reps with a template
- April 17: Natasha Lee, DDS appointed to Governor's Economic Recovery Task Force to help dentists return to practice; ADA urges HHS to federally recognize dentists to administer Covid-19 tests
- April 18: ADA releases Interim Return to Work Toolkit for members along with information on masks types
- April 21: ADA releases statement on third party payer reimbursement for PPE recommending using D1999 to report use and cost of additional PPE per appointment
- April 23: Teledentistry reimbursement available to Medi-Cal Dental providers
- April 27: SBA opens applications for second round of CARES Act funding of \$380B for PPP
- April 28: TDIC gives premium refunds for policyholders in addition to dividend
- April 30: CDA Cares Long Beach postponed indefinitely

Thank you for your donations

April 9 update: For the third straight week, members donated hundreds of boxes of gloves, masks and other PPE to SDCDS which were then given to local hospital, police and rescue staff. Thanks to the following dentists who have contributed so generously. Also note other dentists have independently donated PPE items directly to their own communities: Drs. Tom Bierman, Joseph Boulos, Armin Hage, Misako Hirota, Robert Kim, John Mann, Coleman Meadows, Monica Palusso, Lindsay Pfeffer, Kurt Stormberg, Evelyne Vu-Tien, Filipino Dental Association, and the UCSD Student-run Free Clinic Program.

Resources and Ideas for Returning to Practice:

County of San Diego:

- View an updated resource list for dentists in the Health Professionals page: www.sandiegocounty.gov/COVIDHealthProfessionals then scroll down and click on "dentists"
- Receive County of San Diego updates and meeting invites. Send your Email address to the county at: MCSDCallCenter.hhsa@sdcounty.ca.gov

Download the CDA "Back to practice resources", a new suite of resources to prepare dentists and their staff in safely returning to practice, when permitted.

Additional Practice Resources to help return to practice:

- Spear members can participate in Practice Recovery Program at no additional charge
- Institute for Dental Specialists (IDS) offers 60-day free trial for dental specialists
- Fortune Management offering a 90-day practice recovery program
- Henry Schein offers free Practice Analysis for existing customers

Other Helpful Suggestions:

- Call your team members to check in on them
- Call your patients to check in and reassure them
- Organize your charts and create of list of patients with pending treatment
- Review Aging Reports from Third Party Payers

Positive Thoughts

What are you doing to stay positive? What activities are you enjoying? Are there any silver linings you have discovered during your time off? Send your comments to: facets@sdcds.org and we will share these comments in a future issue.

Or please use the hashtag:

#SDCDS covid19 SilverLinings

— take a look at this months responses on the next page —

Silver Linings Top 10

By Eric Shreffler
(Dr. Shivali Gohel's cousin in Michigan)

And now for a little bit of humor, we give you the COVID-19 Silver Linings Playbook. If you were a fan of David Letterman's late night talk show, these quips will give you some nostalgia and a little chuckle.

10. If COVID-19 happened in 1980: your Mead Trapper Keeper with extra-strength velcro would have provided you a significant organizational advantage.

9. Thanks to the Defense Production Act, the US motto is now "Land of Liberty - We Have the Meats!"

8. Not hugging your neighbor is now an act of heroism.

7. Hoarding toilet paper is no longer viewed as "Unabomber-like,"

6. TP squares are now considered an essential asset in your retirement portfolio

5. Kids growing up today can say to their grandkids - "When I was your age, after breakfast, I had to walk to school, ALONE. UPSTAIRS. BOTH WAYS!"

4. The N95 mask you unwittingly picked up at Home Depot last year to paint your garden gnomes are worth more than your house.

3. We have now learned all the words to the hold music of our bank, and insurance co.

2. Your dream of walking into a bank with a mask on has never been safer.

1. When this is over, we will all "party like it's COVID-1999!"

Keeping Sane During Quarantine

#SDCDS covid19 Silver Linings

What are you doing during the pandemic?



Making up for lost time with my baby girl.
— Jacquelyn K. Do, DDS

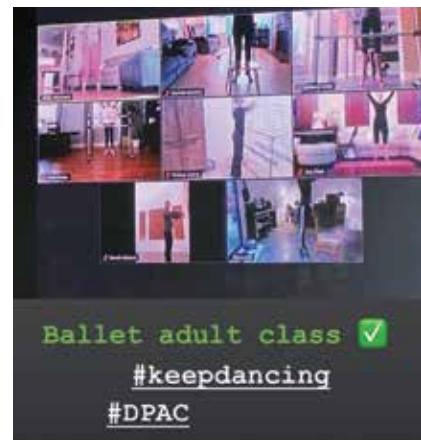


I refuse to be bored in the house. Refining my teeth making skills...got nothing but time.
— Leslie S. Strommer, DDS

Practicing social distancing in the classic way, building a fence. Expanding the paver patio in our front yard and built a picket fence from the lumber, nothing preformed.
— Paul H. Van Horne, DDS



Had so much FUN hosting my first Virtual Hygiene Study Club!
— Shivali Gohel, DMD, MSD



Quarantine = time to use those toys we have in the kitchen.
— Christine N. Altrock, DDS

Keep on dancing! Zoom ballet adult class
— Marnie E. Schreiner, DDS

“Well, when will we return to normal?

I don't think we return to normal.

I don't think we return to yesterday, where we were.”

— New York Governor Andrew Cuomo, April 27, 2020

NOT A HERO, continued from page 7

obviously doesn't agree with some of these interim guidelines put in place during this pandemic.

I told him a recent news report stated there is only a 20%-40% survival rate for COVID-19 patients placed on ventilators. “If even that,” he said. He said it's even worse if comorbidities exist, such as heart conditions, diabetes, obesity, respiratory problems and other factors. He is shocked at how quickly a patient can go from being admitted to developing full blown acute respiratory distress syndrome, requiring rapid intubation to try to prevent the onset of multi-system organ failure. “So many have died all at once. 30 patients died in just a single shift at a nearby hospital. And three died during my shift yesterday. 30 deaths in just one month alone is hard, compared to this.”

He didn't want to talk too much about specifics, but said he can keep the discussion in general terms, including not wanting this hospital to be named. Scout's honor. A friend told him about this opportunity from a Facebook post from an employment service. Now right in the middle of his twenty days of twelve-hour shifts, I ask him how this experience is affecting him? “I don't know,” he said with all honesty. “I guess I'll find out when it is all over.” When will he return home to California? He's not sure. This pandemic has created so much need in other areas of the country besides New York, he said. He may decide to go to another hot spot when this rotation ends.

He is currently staying in a hotel near Times Square, provided by his employment agency, just blocks away from Central Park. He is given safe transportation to and from the hospital, physically isolated from a possibly poisoned atmosphere. He once ventured out of his housing to stop and take a look around for a while. The usual frantically energized Times Square was eerily calm and empty. It was quite a first impression of this iconic location.

I caught up with him again on April 27th at the end of his rotation. He just had two days off for the first time since he has been

there. Not realizing how exhausted he was, he crashed and slept for 24 straight hours. It just took him by surprise.

By this date, the situation has dramatically improved. New York Governor Cuomo gave his daily briefing with an air of reassurance that there's light at the end of the tunnel. He even joked about his daughter's boyfriend who came for a visit and added for those who want to know, the boyfriend has left the premises. I mentioned to my friend that I read a recent article stated COVID-19 patients placed on ventilators have only a 10% life expectancy. He agreed. It's almost the same as what he said back on April 8, when New York City was at the peak of the first wave of its onslaught. We are still in the first wave.

What else has changed in New York City since we last talked? A few good signs: he is finally seeing empty beds, the administration rate at his hospital is down, and more nurses have been arriving at a significant rate. He has agreed to work four additional weeks at this hospital. It could become eight more weeks, according to his hospital administrator, based on performance. That period of time is practically a lifetime in our current world that has been violently shaken to its core, where news and facts seemingly change on a daily basis.



I said selfless people like him reinforces the great reputation that the healthcare profession deserves. Using a word that I believe can never get old, I said you and your fellow healthcare providers on the frontlines of this war against the Coronavirus are all heroes. He disagreed. He doesn't consider himself a hero.

He saw what was happening in NYC and decided he could do something about it. He just wanted to help. Just one of many. It's as simple as that. **Not a hero.** I hope and pray that he comes back to California alive and healthy, ready to continue to save lives. We live in a world kept alive by the sacrifices made by selfless individuals like my friend for the collective good of our existence. But we can be safer, just for one day (Jones DR, Eno B. “Heroes”, 1977).•

San Diego County Oral Health Champion: Irvin Silverstein, DDS

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. Silverstein to provide his story.



(l-R) Dr. Thomas Olinger, Chief Dental Officer, County of San Diego, Dr. Irv Silverstein, and Dr. Wilma Wooten, Public Health Officer and Director from County of San Diego

I was completely surprised to learn that I was selected to receive the [Live Well San Diego Oral Health Champion Award](#). I was watching TV and my wife was looking through our emails when she turned to me and said, "Congratulations! You are getting an Oral Health Champion Award!" The next two hours were spent on the phone, trying to change the "non-changeable" flight and hotel reservations that we had to attend the engagement celebration for one of our former students who is studying to become a prosthodontist at the Naval Hospital in Bethesda.

The idea of giving back to others is something that was instilled in me from the time I was a young child. Although we were very poor, my grandmother always encouraged me to put money in the tzedakah (charity) box since I was four years old. She told me that there were others who were poorer than us and needed our help. My mother and grandmother had survived the holocaust. They were separated for three years, starting when my mother was only seven years old. After the war, they spent four years as refugees and eventually came to the United States. My grandmother lost all her family and possessions in the war and started over again in Milwaukee, Wisconsin as

a cleaning lady. She never forgot about people who were less fortunate than her. Eventually, she became successful as one of the largest catering businesses in Milwaukee. She would always give food to people in need and inspire her employees to send their children to college. My grandmother has been my inspiration and this idea of helping others has stayed with me throughout my life.

I began working with vulnerable patients during my dental training and continued to do so throughout the time I was in private practice as a periodontist in La Mesa, California. In 2003 however, I became involved with the UCSD Student-Run Free Dental Clinic Project and Pre-Dental Society as their Director. This involvement has allowed me to become a champion of oral health for patients, students, and other health care professionals both locally and globally.

In a city where there is no dental school, I was able to develop a model through which the underserved could obtain comprehensive dental care at no cost, where dentists can give back to their community, and where students could learn first-hand about dentistry, the lack of access to care, and the importance of volunteerism. This is a win-win-win situ-

ation. When I was first asked to join the UCSD Student-Run Free Dental Clinic Project, it consisted of three clinics that operated intermittently. One clinic had to be shut down because it was not functional. I began fund raising and simultaneously recruiting local dentists and specialists to become involved by volunteering. Through the generosity of many organizations and individua

ls, these clinics have grown to the four free clinics. With over 38,824 patient visits, these clinics have provided more than \$11.3 million dollars of free care to the working poor, homeless, and veterans who would otherwise, lack access to care. Care is provided through a part-time Clinic Director and the volunteer efforts of over 60 dental professionals and 150 pre-dental students who manage the clinics and serve as chair-side assistants to the dentists delivering care.

Helping students learn about our profession and teaching them the importance of giving back, even at a young age, is critical to me. Through our Special Speakers Series, they hear from deans of dental schools and other renowned individuals in our profession about their career paths and issues involved in access to care. Being in the clinic enables students

to see first-hand the lack of access to care that is faced by vulnerable individuals, and how life-changing dental care can be for the underserved. This helps motivate students. Given their experiences within our clinics, it is not surprising that our pre-dental students are sought out by dental schools. I am very proud of the fact that over 1250 students have gone into various health professions. Most have gone into the dental field. Several have come back to volunteer in our clinics and two have opened free clinics in other cities. Many have become leaders in their communities.

The need for oral health care and the lack of access to care is vast. I am happy that I have also been able to assist the US Navy in their humanitarian efforts by putting physicians, dentists, optometrists, pharmacists, nurses, pre-dental students, engineers and students in these fields on board Navy ships including the USNS Mercy and the USNS Comfort Hospital Ships since 2006. These ships bring care to the underserved in some of the poorest countries all over the world. Many of the professionals and students who have volunteered on these missions have called them life changing. We also help with other international and local humanitarian causes.

In March, we had to temporarily close all of our programs because of the terrible pandemic. It gives me a sense of how things can change in just one day for everyone. My grandmother and my mother at 4 years old were captured in the first day of the war in 1939. Many righteous people did acts of kindness along the way that helped my grandmother and mother make it to the United States in 1949. I am very sad we had to close our clinics, but some of the dentists in our community opened their private offices to help our patients with emergencies. Even before this pandemic, many dentists gave up an evening or a morning to work in our clinics and mentor our students. Our patients are very grateful to have their smiles reestablished. Our help has enabled some of them to get jobs and rejoin the workforce. If you are interested, please consider volunteering in our clinics to help our community. *

Welcome New Members

Qussay Al Kaissey - Univ. of Colorado 2019

Prasad Gonavarum - USC 2004

Mohlab N.J. Al Sammarraie - Univ De La Salle - Mex. 2019

Nicole LaMantia - UCSF 2016

Nicholas Tapp - UOP 2016



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Wednesday, June 3

Diagnostic Oral Radiographic Images in the Pediatric Patient: From A to Z

Presenter: Dr. Juan Yepes
Thursday, June 4

Setting Performance Expectations for Employees

Presenter: Sally McKenzie
Wednesday, June 10

Glass Ionomer and Resin Modified Glass Ionomer Restoratives for Children

Presenter: Dr. Carla Cohn
Tuesday, June 16 or Wednesday, June 17

The Top 5 Reasons to Move Your Dental Imaging to the Cloud

Presenter: Dr. David Gane and Dr. Marty Jablow
Tuesday, June 16 or Wednesday, June 17

The Intersection Between Motivation and Behavior

Presenter: Kimberly Krust Bray, RDH, MS
Tuesday, June 23

Composite Dentistry in our New Dental World

Presenter: Dr. Peter Auster
Thursday, July 30 or Friday, July 31

Introduction to Thermally Assisted Composites Using Injection Molding Techniques

Presenter: Dr. Frank Milnar
Wednesday, August 12 or Thursday, August 13



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If you have trouble logging in please contact Fernanda, our CE Coordinator at (619) 275-7188 or admin@sdcds.org

A salute to the scientists

As I write this blog, the world is undergoing a catastrophic situation. But by the time this issue goes to print, I hope we will all be in better times. Meanwhile, there are multiple groups of people that deserve to be honored for their courageous work that helps us maintain our health and wellness during this crisis. I chose to focus on one group in particular who plays a vital role in human and plant disease eradication: the scientists.

Understanding the root of a larger issue and building a solution from the ground up is nothing new in dentistry. For instance, if our crowns are debonding, we think of material science or biomechanics to solve the issue. If our surgical site isn't healing, we return to our basic biology to discern what went wrong either locally or systemically.

Regarding the COVID-19 disease, the root of the issue, as we know, is tiny — very tiny. That reminds me of my undergraduate biology studies on diseases, long before I learned the cellular biology of periodontitis or even the pathology of oral lesions in dental school courses. Back then, we were taught the histology of healthy human cells. But we also learned that once under attack by microbes, these cells sometimes malfunctioned or even died in some instances. This is what some scientists study for their entire lives.

Recalling my virology class in college, I thought it was fascinating that scientists like my professor had a mission to unravel specific parts of a viral protein in order to disrupt a potentially menacing replication cycle. I remember thinking

viruses behaved like photocopy machines that made multiple copies of their own code, and that once they did, some broke the copier machine, AKA host cell, and started all over with another one.

I now have patients who are involved in the incredibly fascinating study of virology. Many of our eradicated diseases are because of those who have chosen a profession that delves into the complex mechanism of these pathological proteins. So I'm taking a moment to honor them and to think "microscopically" like a scientist would. While talking to them, I have had the privilege of catching a tiny glimpse of their work on antivirals and vaccines that they have sometimes focused decades of their lives to perfect. They may work on the "tiny", but their work is huge for all of us. •

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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.



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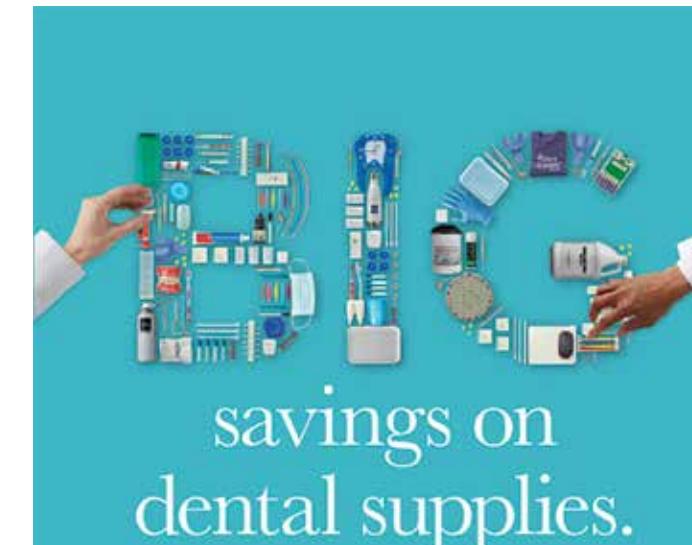
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Keeping office payments safe and secure

From facial recognition software to personal identification numbers, countless protections are in place to safeguard our private financial data. In the dental office, data encryption, anti-virus software and firewalls are the go-to preventative measures, not to mention the classic lock-and-key methods for securing hardware and other items of value.

Unfortunately, smart thieves can find, and have found, ways to outwit many of the most advanced security systems. In one case reported to The Dentists Insurance Company's Risk Management Advice Line, a thief broke into a dental office and made off with the credit card terminal, resulting in \$11,000 in charges from the dentist's account.

The dentist became aware of the theft after finding his glass office door broken. Upon reviewing the video footage, he witnessed the suspect, who was wearing a bandana, enter the office and take the credit card terminal. The entire incident took less than 60 seconds. The dentist reported the incident to his bank.

The bank initially refunded the money, but then the dentist received a letter from the bank stating that the bank wanted the money back. Apparently, the criminal used the terminal to post credits from the dentist's merchant account to prepaid credit cards. The credits were small, ranging from \$300 to \$400 each, totaling \$11,000. The prepaid credit card company also demanded repayment. Luckily, the dentist had reported the machine as stolen and the charges were made after it was taken from his office.

Credit card processors will typically refund fraudulent charges to a victim's ac-

count as long as the victim reports the crime immediately and follows the protocols laid out in their contracts. This usually requires the merchant to report the loss to the bank and police as soon as they are made aware of it.

Basic security measures, such as video cameras, motion sensors and alarms, can thwart most criminals. To keep your credit card terminals safe, TDIC recommends taking the following additional precautions:

- Lock the terminal away in a locked cabinet or drawer at the end of each day.
- Take the terminal home with you at the end of each day.
- Password protect your terminal, particularly for any refund functions.
- Upgrade your terminal to a self-disabling device, which requires the initial setup to be conducted if the terminal loses power. This also requires the issuing bank to be contacted in order to have your merchant number reassigned to the unit.

Dental practices may also want to consider alternative methods of accepting credit card payments. For example, mobile card readers, such as Square, plug directly into your smartphone or tablet and transfer data via an app. Virtual card readers operate similarly, connecting to a computer and processing transactions through a web-based platform.

While credit cards remain the gold standard in merchant payments, peer-to-peer payments are grabbing a stronghold as

well. These payment methods, which include companies such as Venmo, PayPal and Zelle, allow users to transfer funds directly from bank accounts or credit cards to merchants.

On-demand payments are certainly becoming the norm, as transactions can be made within seconds from any smartphone. While accepting such payments is convenient for patients, there are some considerations for dental offices, including fees and processing times. In addition, not all of them offer the same level of fraud protection and conflict resolution services offered by credit card companies.

One of the biggest concerns for dental practices with regard to peer-to-peer payments is privacy. Depending on the provider, transactions can be open to the public; in fact, some, including Venmo, allow users to connect with "friends" and allow transactions to be viewable to everyone in the network. Privacy settings can override this function, but it is up to the user to change their settings. And while financial data is encrypted on most peer-to-peer apps and servers, user identity isn't, which can open the door to liability claims stemming from potential HIPAA violations.

Every dental practice owner wants to make the payment process as fast and convenient as possible. But with convenience often comes risk. Taking a few steps to ensure the security of financial data can help mitigate those risks. Using security technology, following basic security best practices and offering alternative payment methods can protect your patients and your practice from fraud and theft.

TDIC's Risk Management Advice Line is a benefit to TDIC policyholders. To schedule a confidential consultation with an experienced risk management analyst, visit tdicinsurance.com/RMconsult or call 800-733-0633.

Email Safety Part 3: Phishing

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.



Below are some tips to aid in recognizing phishing emails to keep your sensitive information out of the hands of criminals:

1. Closely examine the sender of any email you receive. Phishing emails often come from a sender that is not the correct company's domain. For example, if you receive an email that looks like it is from the IRS, or Bank of America, but it actually came from a google, gmail, or yahoo.com email address, then that is a sure sign of a high risk phishing email. Sometimes the emails can be more subtle where it might appear to be a referring dentist colleague requesting you log in and send or view secure info having to do with a patient. In cases like this, making a phone call for to verify authenticity of the email is an important step before proceeding.
2. Check that the sender identity matches the name contained within the email body text. If joan@irs.gov sent you an email, but the person's name in the email is Bill, something is amiss and your suspicions of legitimacy should be on high alert.
3. As mentioned in prior articles, be very wary of clicking any embedded links that may take you to a URL that is posing as a legitimate site. If your bank is stating there is an issue to address, do not use the email's button or hyperlinks to get to the website. Instead use your web browser and go directly to the company website and log in directly, not through the links provided in the email.
4. Phishing emails often prey on emotions and therefore some form of urgency is stated to get you to react suddenly and possibly without taking the time to evaluate the sender, or studying a button's URL. Take your time assessing all URLs contained, and if you are uncertain about a button in an email, go directly to the company website using your web browser, not by means of the email's buttons or links.

Remember that phishing emails require your help in order to succeed. If you are on your game and carefully evaluate every email you receive the harm caused by phishing schemes can be avoided. Stay safe out there! •



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TUESDAY
Jun 02

New DDS Webinar



Summary: We will be holding our 2nd New DDS Seminar for 2020 as a webinar: "Clinical Pearls"
Time: 6 - 7:30pm
Register: sdcds.org/events membership@sdcds.org
Pricing: Free
Sponsor: Burkhardt Dental



THURSDAY
Jun 18

BLS Renewal for Healthcare Providers



FREE CE*

Summary: Register early if your CPR card is expiring; limited spaces available.
Time: 5:30-9:30pm (5pm check-in)
Includes: Pizza and salad.
Location: SDCDS Office
Register: sdcds.org
619.275.7188 or admin@sdcds.org
Pricing: member \$40...
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SATURDAY
Jun 27

Shred-a-thon

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



Summary: Stop by for this exclusive members-only event while we lighten your office load! We may not serve tacos and beer this year, so prepare for a drive-thru style event. Find info at 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: 12-3pm (Note new time)
Location: SDCDS Parking Lot
1275 - B West Morena Blvd
Includes: Tacos and Beverages
Pricing: Free
Register: sdcds.org/events membership@sdcds.org
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



THURSDAY
Jul 16

BLS Renewal for Healthcare Providers



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THURSDAY
Jul 30

Evening at the Ballpark



Summary: Phillies vs. Rockies
Pitch: 7:10pm
Includes: dinner, domestic and craft beer options.
Location: Petco Park
Register: sdcds.org
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POSTPONED



THURSDAY
Aug 20

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SATURDAY
Aug 29

Women in Leadership Conference

6th Annual Afternoon Tea



Keynote Speaker: Jennifer Chevalier



Summary: Mastering Work Life Balance.
Time: 12pm-3pm
Location: Paradise Point Resort
1404 Vacation Rd. SD, CA 92109
Register: sdcds.org
619.275.7188 or membership@sdcds.org
Pricing: Free. RSVP by August 25. 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



SATURDAY
Sep 26

SAVE the DATE

GALA CELEBRATION



Summary: Red Carpet, Old Hollywood
Time: Evening
Includes: Dinner, Silent Auction, Live Auction
Location: Del Mar Hilton
Register: sdcds.org
619.275.7188 or admin@sdcds.org
Pricing: member \$175
Sponsors: TBA

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