SAN DIEGO COUNTY DENTAL SOCIETY PRESENTS

Facets

MAGAZINE

2026 Volume 02

COVER ARTWORK
Painting by Eric Shapira, DDS, MAGD, MA, MHA, FICD, Facets Editor

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Written By:
Eric Shapira, DDS, MAGD, MA, MHA, FICD, *Facets Editor*

EDITORIAL

2026 Is Here...But What Have we Left Behind?

What Did we Learn? What Did we Take With us? And What did we Choose to Forget?

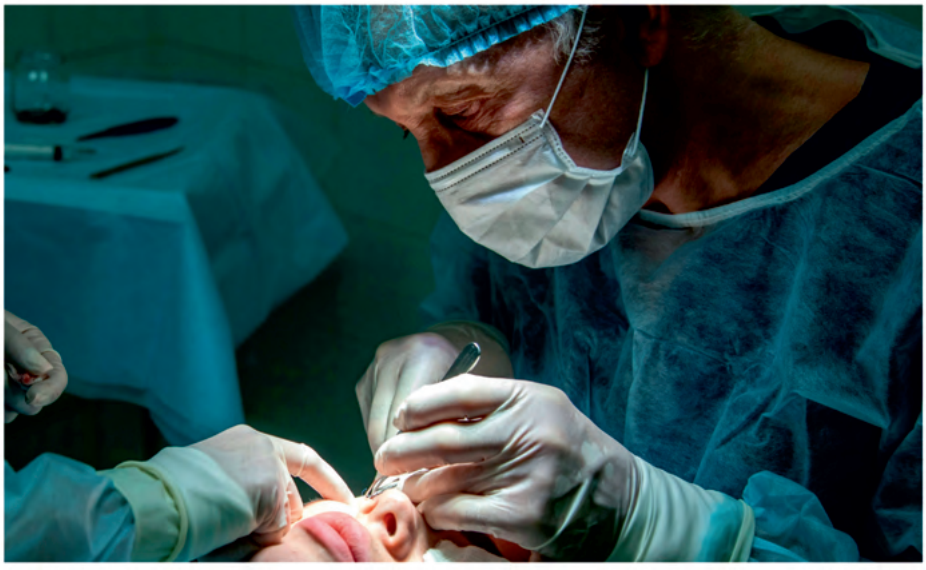
Every year as we close our books and try to make ends meet, we might not listen to our inner-selves gasping for air, so-to-speak, in an effort to ease the pressures of not just working in a dental practice we may own, or associate in, but the release of pressure from the constant demands of our patients and staff alike , as well as the laws and rules that govern our practicing dentistry.

After practicing Dentistry for over 50-plus years, I feel both the pain of not being in my own practice again or working for someone as well. I also feel the pain of missing those patients whom I admired, enjoyed, and literally got to know well over the course of years that I had them as patients. Even today, many of my patients still contact me to discuss their long-term dental health with the new or ongoing practitioners that they have had for some time now, as well as personal information about themselves and families. Many of my patients, who have aged along with me, have kept in touch, just to see how I have been or ask me pertinent questions not only about their dental health, but their physical health as well. I know that I have managed to make trusting relationships throughout the years by extending "mutual respect" to my patients and my ability to " listen" to them as well as teach them about themselves, and not just the dentistry I provided them. Many of them I consider friends for life. However, there were those people who did not like what I had to say to them, mainly the truth about the condition of their oral health, or the need to see a medical doctor, or another dentist with more expertise in a specialty of some sort than what I could give them with respect to their issues at hand. I wonder what happened to these people and hope that they found satisfaction in another practice that afforded them the care they deserved and needed.

I left behind a large legacy for, and of myself. I treated people in the best possible way I knew how, a lot of which I learned in graduate schools and not dental school, as well as taking courses in communication and teaching both this and dentistry for over 50 years as well. My legacy is mostly the knowledge I conveyed by teaching my patients about their dental and medical health as well as increasing their longevity and general health by doing this kind of thing.

My head and neck exams were exemplary and I saved many a life by this action, as well as finding things that most practitioners might not look for, such as: various sizes, shapes and colors of malignant tumors on the skin of the head and neck, intra-oral cancers, and other deleterious issues that one can have in as much as being Human and subject to these life-threatening entities. I know that I have saved myself from the grief of these maladies as well because of the accumulated knowledge I gave myself in this venture, as well as teaching my patients about themselves as well.

I left my practice after a car accident whereby someone ran into me at high-speed causing me to have several subsequent neck surgeries and having to sell my practice thinking that I would never practice again...but I did later in life as a part-time practitioner, but only part-time. After many years of working part-time I was able to see the difference in the way that I practiced and the manner in which the owner, dentists, or clinics practiced. It was interesting to see the



loss of empathy and communication in some cases and just watching the dentist "fix" or try-to fix a dental issue the best way they knew how. We are all trained, but we all went to different schools together, learning different things besides the basics and just a minimum of personal communication and empathy. Working in "'Special Needs" Dentistry for many years for both younger and older individuals, I learned patience, empathy, how to do a good job under stress and how to educate my compromised patient's families about dental home care and care in general. It was an eye-opener for them. In the beginning of this type of practice, it was for me as well. As Chief of Dentistry for a long-term care facility for 25 years, besides running my own practice, I worked with many challenged people and staff who had no idea how to treat their patients dentally. I tried to make it my job to teach the staff as well as families how to care successfully for their patients and relatives alike. It was a very difficult position and one where I did not get paid for in over 25 years of volunteering there! From this type of education, I was able to transfer some of what I learned to present day practice and teaching others.

But my empathy was taught to me when I was a youngster by my mother, a part-time nurse at the local VA Hospital. She set an example for me in assisting those who might need assistance by asking with respect and maintaining dignity on my side as well as theirs. I don't see this much today in a lot of the practices I have worked in either as a sub or part-time practitioner. I also worked in the San Diego County prison system for about three years doing dentistry, treating in a cadre of seven prisons. This was an entirely different level of communication and treatment at a minimum for basic pain and suffering. I taught the prisoners dental hygiene, but they were not allowed floss or anything like it due to the risk of harming themselves or others. There was also limited treatment for pain and suffering and no basic cosmetics. I tried my best to make it a good experience for them, even in the face of fear. There was a guard in the room with me at all times in each prison I worked at, but that did not remove my innate fear that something might happen to me in the process or working on one of the prisoners who had no respect or patience for sitting in a dental chair for some length of time. I also have worked in multiple Native Health Facilities within their Dental Clinics. These were well equipped and there were other dental professionals working there as well. I made some good friends from the various tribes who participated in the care clinic that was offered. I still hear from a few of these people now and then asking me my opinion about their dental and medical health, as well as asking me when I might return. Just getting to know them gave me joy and understanding of their lives and the difficulty a lot of them had in life in general. I left this behind not because I wanted to, but because of personal reasons and the way I was treated by some of my peers in the clinics. I was happy to leave the emotional pain, prejudice, and harassment behind that I had suffered at the hands of the people in charge, and those who were jealous of me and the relationships I formed with my patients and some staff. However, I took the memories of the wonderful patients I had come to know with me.

With respect to not remembering certain things from the previous year... Well, I think that comes with advancing years and the possibility of having too much on one's mind at any one point in time. Sometimes, life gets in the way of ones' best intentions...

Carpe Diem. EZS

MESSAGE FROM SDCDS *PRESIDENT*

JULY

JOSE C. CASTILLO, DDS, MA, MMSC

Moving Forward with Purpose

It is both an honor and a privilege to serve as President of the San Diego County Dental Society during a time of such meaningful progress. As I reflect on our recent Board of Directors meeting, I am struck by a deep sense of pride and humility—pride in what we are accomplishing together, and humility in witnessing the level of dedication our volunteer leaders bring to this organization.

We are, quite simply, a Board that works.

We show up. We roll up our sleeves. And we remain committed to advancing the mission of the SDCDS in ways that are thoughtful, strategic, and impactful.

At our most recent meeting, we took several important steps that will shape the future of our organization.

We began laying the groundwork for our next three-year strategic plan (2027–2029) by approving a strategic planning consultant and forming a Strategic Planning Task Force. Importantly, this task force will include newer dentists—an intentional effort to create meaningful leadership pathways and ensure that fresh perspectives help guide our future.

We also continued strengthening the infrastructure of our organization. From refining internal governance practices—such as conflict-of-interest procedures and risk management—to approving a Member Representative Travel Policy that supports those who volunteer their time to represent our Society, these efforts ensure that SDCDS remains both accountable and inclusive.

Our commitment to our members was further reflected in the approval of a Dues Waiver Policy, providing a compassionate and confidential pathway for those experiencing financial hardship. This is who we are as a society—we support one another.

At the same time, we are listening closely to our membership. The upcoming Dental Practice Valuation Survey will provide members with meaningful insights into the true value of dental practices across our region, empowering members to make informed decisions about their practices—whether planning for growth, transition, or long-term strategy.

We also celebrated the continued success of our mentorship and leadership development efforts, including the Mentor & Leadership Study Club. The positive feedback we are seeing—greater connection, increased confidence, and stronger peer engagement—reinforces the importance of investing in people, not just programs.

And importantly, we are making data-driven decisions. Through updates on membership trends, event analytics, and engagement strategies, our team is ensuring that we are not only active—but effective.

One of the highlights of our meeting was the Board's decision to allocate additional funding to the SDCDS Academy of Learning, our dental assisting school. This reflects our shared belief that investing in education is investing in the future of our profession.

Every decision we made reflects a common thread: intentional progress.

As President, I feel incredibly grateful to serve alongside a group of leaders who are not only thoughtful and strategic, but also deeply committed to service. There is a strong sense of alignment around our mission, and that alignment allows us to move forward efficiently and with purpose.

We are building something meaningful together—not just for today, but for the future of organized dentistry in San Diego.

Thank you for being part of this journey.

MESSAGE FROM SDCDS *EXECUTIVE DIRECTOR*

JULY

ANGELA LANDSBERG

The Power of the Handoff

San Diego dental leaders and community advocates come together to support evidence-based policies and protect access to community water fluoridation, including advocacy efforts with Olivenhain Municipal Water District.

When I was in high school, I ran track, and to put it kindly, I was not exactly setting records. I was certainly not the fastest person on the team, and there were definitely moments when I wondered whether I was contributing enough to matter. But one of my coaches (thanks, Coach Mitchell, if you're reading this) told me something that stayed with me for years: relay races are often won or lost in the handoff.

It wasn't just about speed. It was about trust, timing, communication, and knowing how to pass something important from one person to the next without dropping it. One runner could give everything they had, but if the baton exchange failed, the whole team felt it. The strongest teams were the ones that learned how to move together, support one another, and keep momentum going from person to person.

One of the examples of this has been the collaboration between the Society and the Children's Dental Health Association in helping build the San Diego County Dental Society's Academy of Learning Dental Assisting program. What has made this partnership meaningful is that it has been mutually beneficial. Through this collaboration, SDCDS has been able to use CDHA's space to help grow and strengthen the program, while CDHA has benefited through increased community exposure, engagement with future dental professionals, and additional funding that helps support its mission-driven work.

Our collaboration with the County of San Diego has also expanded in powerful ways, especially around community water fluoridation efforts. The work accomplished over the past year with the Olivenhain Municipal Water District demonstrates what can happen when advocacy, science, and community engagement sit at the same table.

We've also strengthened meaningful partnerships with the California Dental Association & TDIC. Together, we've worked to support initiatives surrounding Medi-Cal and concerns regarding proposed budget cuts that directly affect patient care and provider sustainability. CDA & TDIC have also become invaluable partners in developing our new six-part leadership series for early career dentists. By sharing survey insights gathered from young professionals and TDIC's expertise on topics that matter most, their collaboration has helped us shape programming around real-world needs and experiences.

Perhaps most importantly, collaboration happens every day between our SDCDS staff, committee members, and Board of Directors. In a nonprofit organization, success does not come from one person carrying the baton the entire race. It comes from the handoff that builds trust, communication, and shared responsibility.

While my running style probably looked more like a startled giraffe escaping a predator than a competitive athlete, I did become fairly good at handing off a baton without creating a full-scale relay disaster. And honestly, that may have been the most important skill all along.

SPONSORED CONTENT

Inside Inspire Smiles: The Practice of Dr. Elona Gaball

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Dr. Elona is a cosmetic and rehabilitative dentist whose career reflects a rare combination of clinical excellence, systems-driven practice growth, and a deeply integrated wellness philosophy. With over 26 years in dentistry, she has built a reputation for elevating both the patient experience and the operational standards of a modern dental practice.

Born in Russia and immigrating to the United States at age 15, Dr. Elona's trajectory has been defined by discipline and accelerated achievement. She completed her undergraduate studies in just three years, gained early acceptance into dental school, and graduated in the top 10 of her class. This early pattern of high performance has carried through her clinical career, where she has focused on comprehensive, cosmetic, and rehabilitative dentistry with an emphasis on long-term systemic health outcomes.

Dr. Elona is the founder of **Inspire Smiles**, a high-end, concierge-style dental practice that has become a model for intentional, value-centered care. After acquiring a small patient base from a retiring dentist, she successfully quadrupled the value of the business. Her approach was not based solely on production growth, but on the deliberate design of every patient touchpoint. From communication systems to clinical delivery, each element is structured to eliminate fear, anxiety, and friction while delivering world-class outcomes.

A defining feature of Inspire Smiles is its full spatial transformation. The practice has undergone a comprehensive interior redesign to support a refined, wellness-centered patient experience. The environment itself functions as an extension of care—calm, elevated, and highly intentional. Today, this space is also utilized by other dental and medical professionals who deliver high-quality services within the same concierge-style setting, further expanding its impact as a hub for elevated healthcare delivery.

Clinically, Dr. Elona emphasizes comprehensive diagnosis and interdisciplinary thinking, integrating oral health with systemic wellness. Her model aligns with a growing demand for dentistry that goes beyond symptom-based care and instead addresses whole-body health. Her work demonstrates that a wellness-centered approach can coexist with high clinical standards and strong business performance.

Her leadership philosophy is influenced by principles from Extreme Ownership, emphasizing accountability, preparation, and disciplined execution. She has built her team with a selective, mission-driven approach—prioritizing individuals who align with the vision and are capable of delivering consistent, high-level results. This has resulted in a cohesive culture that supports both patient experience and clinical excellence.

Beyond private practice, Dr. Elona is the founder of **Inspire Changes**, a nonprofit initiative dedicated to restoring the smiles, health, and dignity of human trafficking survivors. Over the past seven years, the organization has contributed more than $500,000 in donated dental care, creating life-changing transformations for women in need and demonstrating the profound social impact of dentistry.

She is also the creator of **Inspire Lives**, her Certified High Performance Coaching program, where she mentors professionals and business owners to elevate their performance, leadership, and personal discipline. Her coaching integrates structured routines, mindset development, and wellness practices to support sustainable success.

Expanding her platform for impact, Dr. Elona launched the podcast **"Live Inspired with Dr. Elona,"** where she highlights local individuals with inspiring life stories, bringing attention to resilience, growth, and purpose-driven living.

Dr. Elona has been married for 30 years to Curtis Gaball, MD, a facial plastic and reconstructive surgeon who served in the U.S. Navy. Together, they have three daughters, ages 26, 22, and 18, and have built a life grounded in resilience, service, and shared commitment to health and purpose.

Dr. Elona's career represents a comprehensive model of modern dentistry—where clinical mastery, intentional business systems, personal development, and social responsibility intersect to create meaningful, lasting impact.

Practice
Inspire Smiles | inspireemilessd.com

Non-Profit: Inspire Lives: "For Patients" Tab of the practice website

Coaching
Text Elona directly at (858)925-3142

Podcast
Live on Apple Podcasts and all other platforms

Volunteers Needed

Written By:
Ronald E. Fritz, DDS, MPH, FACD, FICD
Loma Linda University, 1972
Ronaldefritz.dds@gmail.com

Dear SDCDS Members,

I have a need to share some joy I receive on a routine basis, some right here in San Diego. I found out years ago that one does not need to get on a plane to provide service to those in need.

I began my career after Loma Linda graduation in 1972, in mission service, having been sent to Hospital Bella Vista in Mayagüez, Puerto Rico. After almost leaving after 6 months due to culture shock, I ended up working there for 6 years. I found out that in serving others, we ourselves are blessed. It led me into a life of mission projects in Mexico and Central America. Now that I transitioned into exclusively volunteer work about 10 years ago, I find myself finishing my career and life also in mission work. The joy it brings me is almost addictive, and I have a need to share that joy and encourage my colleagues. When someone is burned out from the daily grind of dentistry, I inform them that I have a prescription for them that has never failed to cure the burnout: a long weekend or week of service to people who could not otherwise receive care is medicine for the soul. We have a great group of volunteers helping at Cura Smiles, but we need more of you. You will not be disappointed!

We have several clinics in San Diego and Solana Beach that need volunteers. I am driving down to Cura Smiles tomorrow to treat patients who would otherwise go without. One third do not speak English, one third have no insurance or way to pay, and one third are in recovery from drugs or alcohol. The clinic has new equipment, thanks to donations, and a fine, capable team to assist. We even have an EF assistant, Darlene, who does most of the prosthetics. I can't tell you how many patients give me hugs, a few give me kisses, and many leave a thank-you note as they leave. And it is such a pleasure to work without fee schedules, insurance claims, accounts receivable, etc.

We need more colleagues to join in for the Joy of Service. We recommend one day a month unless you can do two. We have some specialists who volunteer their time and talent, either in their own offices or there at the clinic. More than $1 Million in treatment has been given to people in need. I know that your life will be blessed by participating with Cura, and even more people will get the help they need. I highly recommend it for a more fulfilling life in our beloved profession. I have always believed that it is not only our privilege to help others, but also our responsibility as dental professionals. My mentor, Albert Schweitzer, MD, PhD, once said: "I don't know what your destiny will be, but one thing I do know: The ones among you who will be truly happy are those who have sought and found how to serve."

I recommend you check your schedule, call the clinic (619-789-1832), and agree on a day. You will be blessed beyond measure in the 4-5 hours of service, as you receive more than you can give!

The Heart of the Matter:
Why the CDHA is the Best-Kept Secret in San Diego Dentistry

Written By:
Dr. Chris Pham

For most of us, the path to becoming a dentist began with a vision that had very little to do with overhead, insurance codes, or P&L statements. We were drawn to this profession by a simple, powerful desire: to help people. But as we move deeper into our careers, the realities of private practice can sometimes feel like they are built to pull us away from that original spark. I'll be the first to admit that it is deeply frustrating to stand in a high-tech office and realize that there is a "silent epidemic" of dental decay happening just a few miles away—one that the traditional dental business model simply isn't equipped to reach.

That specific frustration is exactly what led me to the Children's Dental Health Association (CDHA). In a world where healthcare often feels increasingly business-like and detached, the CDHA is a bridge back to the heart of why we do what we do. Founded in 1952 by visionaries like Dr. Carl B. Stansbury and Dr. Gil Kuha, we have spent over seven decades serving as the safety net for San Diego's most vulnerable children. We aren't just a clinic; we are a legacy of the San Diego County Dental Society's commitment to the community that helped found the CDHA.

The Hidden Gem of High-Impact Giving

I often call the CDHA the best-kept secret in nonprofit care. In the world of charitable giving, donors often worry about how much of their money actually reaches the finish line. At the CDHA, we operate with a lean, 100% volunteer-led board of directors, which allows us to direct 90% of every dollar raised straight into patient programs.

The impact of that efficiency is staggering. When we talk about "access to care," we are talking about the 51 million school hours lost annually across this country due to dental pain. We are talking about children who cannot eat, cannot sleep, and cannot concentrate in a classroom because of preventable infections. Through our 24th Street Dental Center and our School-Based Program, we provide a "dental home" to over 5,000 children every year. We meet these kids in their schools—nearly 30 locations across the county—to stop decay and dental disease before it starts, ensuring that a child's zip code never dictates their ability to smile.

Specialized Care, Beautiful Outcomes

What truly sets our "hidden gem" apart is that we don't just provide basic care; we provide excellence. Our orthodontic department is one of our proudest achievements, transforming lives by making beautiful, healthy smiles accessible to families who would otherwise have no path to specialty care. This department is a powerhouse of clinical talent, led by our Clinical Director of Orthodontics, Dr. Joe Mullins, alongside Dr. Bilal Chaudhary. Together, they ensure that the children of San Diego receive the same high-caliber results we strive for in our private offices.

Overseeing the entire clinical operation is our Dental Director, Dr. Mariluci Byrnes. Her leadership across both the clinic and our mobile school programs is what allows us to maintain a seamless continuum of care. Because of her, a child identified with an urgent need at a school screening in January is sitting in a specialist's chair in our clinic by February.

The Heartbeat of the Clinic: Decades of Dedication

While the doctors provide the care, the true soul of the CDHA lives within our staff. There is a level of commitment here that you rarely see in any workplace. When you walk into our clinic, you aren't just met by employees; you are met by pillars of the community who have dedicated their lives to this mission.

Bertha Hernandez, our front office lead, has provided 25 years of service. She is the face of the CDHA for generations of families who have come through our doors. In our ortho bays, you'll

find Suzanne Ghosn, an RDA with 16 years of dedication, and Maria "Betsa" Garcia Marquez, who has spent 13 years crafting smiles with us. This isn't just a job for them; it is a calling. That institutional memory and compassion are what make our clinic feel like a home rather than a facility.

To keep this mission thriving, we rely on the camaraderie of the San Diego dental community. Our annual "Day at the Races" isn't just a fundraiser; it's a 52-year tradition of our profession coming together for a common cause. This year, I am personally inviting you to join us on August 23, 2026, at the Del Mar Thoroughbred Club.

Come sponsor a table at Il Palio, enjoy a gourmet buffet, and share the thrill of betting on the horses with your colleagues. It is the most fun you can have while making a massive difference. If you can't make it to the track, I ask you to look at the QR code in this article. A gift of $60 sponsors a full exam and cleaning for a child who has never had one. $100 covers critical sealants for a family of three. This is the highest ROI you can find in philanthropy—where the dollars you invest go directly into a child's mouth and a child's overall future health.

The Next Generation of Leaders

Above all, we need you. We are looking for more than just donors; we are looking for Board and Committee members to help lead our strategic growth. We need your expertise in marketing, your passion for fundraising, and your vision for the future of San Diego public health.

Serving on the CDHA board is a way to reclaim that initial spark that drew you to dentistry. It is a way to solve the problems that frustrate us in private practice by building a better, more equitable system for our city. Come see what makes us a hidden gem. Help us ensure that every child in San Diego has a reason to smile.

Advocacy in Action: From the Operatory to the Capitol

Written By:
Dr. Roslyn Joseph, DMD

Practicing dentistry can feel isolating. On any given day, we navigate the intersecting demands of patient care, insurance logistics, and office management. At Advocacy Day in Sacramento, that isolation was noticeably absent. The San Diego County Dental Society was well represented, with dentists from public health and private practice, as well as both pediatric dentists and general practitioners. Despite varied backgrounds and settings, there was a clear sense of common ground.

To learn more, scan the QR code.

In carpools and between meetings, conversations reflected the different ways we approach practice. While preparing to speak with legislators, one colleague was simultaneously fielding messages about a plumbing emergency at her office. This reflects the reality of practice ownership. Dentists are frequently required to troubleshoot immediate operational leaks while simultaneously working to secure the future of the profession. That level of multitasking shaped the perspective we brought to the legislative table.

Supported by the CDA's legislative team, our San Diego delegation focused on ***three critical priorities:***

For dentists who have worked in Medi-Cal settings, the impact of funding decisions is clear. Patients often face transportation barriers, limited appointment availability, and constrained benefits. The proposed $1 billion cut to Medi-Cal dental funding would reduce the program by roughly one-third, bringing it back to 1990s funding levels.

These cuts are not abstract. They affect access to care and the providers who continue to serve these populations. Survey data suggests that nearly half of Medi-Cal dentists would leave the program, with many others reducing the number of patients they see. Practices that treat children, provide sedation services, and serve as community safety nets depend on sustainable funding.

2. Insurance Transparency and Reform (AB 1629 and AB 2029)

Insurance access and accountability remain major hurdles. AB 1629 addresses gaps in dental plan networks and the burden placed on patients seeking out-of-network care. In many cases, patients are required to pay the full cost upfront and wait for reimbursement, even when their plan does not offer adequate in-network options. Requiring assignment of benefits and improved reporting of network data would reduce barriers to care.

Broader transparency efforts, including AB 2029, aim to improve access to accurate benefit information during treatment planning. This supports better alignment of coverage with patient needs and reduces financial surprises for patients.

3. Addressing the Workforce Shortage (AB 1952)

Workforce shortages are a consistent challenge across all practice settings. AB 1952 proposes a pathway for internationally trained dentists to become registered dental hygienists. Many practices continue to experience difficulty hiring hygienists, leading to reduced appointment availability and delays in preventive care. Expanding the workforce through qualified, trained providers would help address these gaps while strengthening dental teams.

The Power of Showing Up

Advocacy Day is a reminder that the challenges we face in practice are not isolated. They are shared across specialties, practice settings, and communities. Taking the time to show up, share experiences, and engage in these conversations reinforces that progress in dentistry depends on collective effort. While much of our work happens independently, meaningful change does not.

Serving Communities Through Flying Samaritans

Written By:
Kamlyn Huang

Every month in Tijuana, Mexico, patients line up hoping for something many people take for granted: access to dental care. Flying Samaritans at SDSU holds student-run clinics to provide medical, optometry, and dental services through an organized system, with the use of EHR. For the majority of our patients, these clinics are not simply an option for treatment, but their only option. Our purpose is to help underserved communities receive free healthcare that can relieve pain, restore confidence, and improve overall quality of life.

Volunteer providers and students work together to deliver essential dental services, including extractions, restorations, cleanings, oral health education, and preventative care. Beyond treatment itself, we strive to create an environment where everyone feels respected, cared for, and heard.

Flying Samaritans is also an incredible learning environment for the next generation of healthcare professionals. Through hands-on experience and hard work within a clinical setting, students not only develop skills, but also gain a deeper understanding of healthcare disparities.

As our organization continues to grow, so does the need for our support. We are hoping to expand the number of patients we treat, improve clinic equipment, strengthen our outreach, and continue building a better future for our dental clinic.

For providers, being a Flying Samaritan is far more than a volunteer opportunity. It is a chance to directly impact lives and inspire a determined group of pre-health students along the way. For donors, every contribution helps us continue delivering quality care to patients who otherwise may have to make the decision of not having the needed care.. Together, we can continue making meaningful and immediate differences in the lives of the communities we serve.

If you are interested in contributing to our mission, please reach out to our Dental Clinic Coordinator, Kamlyn Huang.

khuang4963@sdsu.edu | (619)-361-0813

Redirecting Dental Emergencies Away from the ER: **A California Perspective**

Written By:
Raymond L. Wright III, DDS, MS

Emergency room (ER) visits for dental conditions continue to place a significant burden on hospitals across the United States and in California. Most dental-related ER visits involve non traumatic dental conditions such as abscesses, pulpal pain, caries, or swelling that could be more appropriately managed in a dental office setting. However, many patients delay treatment until pain becomes severe enough to seek care in a hospital emergency department.1

Nationally, emergency departments receive between 1.6 and 2.5 million dental-related visits annually, with costs now estimated between $2 billion and $3.9 billion per year. Although the overall rate of dental ER visits has declined somewhat since 2014, the cost per visit continues to rise sharply. In 2022, the average emergency department visit for a non traumatic dental condition cost approximately $2,437, compared to a fraction of that amount for a routine dental office visit.1

California has experienced the same trend. More than 83,000 Californians visited hospital emergency departments in 2007 for preventable dental conditions, and more recent estimates indicate that more than 50,000 Californians still seek ER care annually for disorders of the mouth that emergency departments are not equipped to definitively treat.2

This is problematic because ERs rarely have dental professionals on staff. In most cases, patients receive only temporary relief through pain medication, antibiotics, or referrals. The underlying dental problem often remains untreated, increasing the likelihood of repeat ER visits. More than one-quarter of patients with dental-related ER visits return for additional emergency care.3

The impact on the health-care system is substantial. California hospitals are already facing growing emergency department crowding, with the statewide median number of ED visits per treatment station increasing 18% between 2021 and 2023. Potentially avoidable emergency visits contribute directly to longer wait times, reduced ER capacity, and greater strain on physicians, nurses, and hospital resources.4

Dental complaints are particularly well suited for diversion away from the ER because most are non-life-threatening and can be effectively triaged. Studies suggest that nearly 80% of dental-related ER visits fall into semi-urgent or non-urgent categories. These patients typically need evaluation, pain management, antibiotics when appropriate, and prompt referral for definitive treatment rather than hospital-level emergency care.6

One solution is the expanded use of teledentistry. California formally incorporated teledentistry into its dental practice laws in 2014, creating an opportunity for hospitals, dental providers, and community clinics to collaborate more effectively. Through synchronous teledentistry, a dentist can evaluate a patient remotely in real time, review photographs or radiographs, assess the severity of infection or swelling, and determine whether the patient truly requires emergency intervention or can be redirected to a dental office or an urgent care dental clinic. Asynchronous "store-and-forward" models also allow ER staff to transmit records, photographs, and imaging to an off-site dentist for review and treatment planning.6

This type of triage model could significantly reduce the burden on emergency departments. By diverting semi-urgent and nonurgent dental cases to teledentistry-supported referral systems, hospitals could preserve ER capacity for true medical emergencies while reducing unnecessary spending.

These savings could then be reinvested into expanded clinic hours, mobile dental programs, community partnerships, and improved access for underserved populations.3,6

The issue is particularly important in California because access to routine dental care remains uneven. Patients with limited dental coverage, Medi-Cal beneficiaries, uninsured adults, and those living in rural or under-served areas are more likely to use emergency departments for oral health problems. Research has shown that reductions in adult Medicaid dental benefits are associated with increases in dental emergency visits and higher costs.5

Ultimately, dental disease should not become an ER problem. Most dental pain, infection, and swelling can be prevented or managed earlier through timely access to dental care. Strengthening community referral systems, expanding teledentistry, and improving access to routine and urgent dental services can help reduce unnecessary ER visits, lower costs, and improve patient outcomes across California.

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How Members **Shape SDCDS**

Written By:
Katherine Hobday

This issue highlights the many ways dentistry extends beyond the operatory. From volunteer clinics to community outreach, there are countless ways to give back using your clinical skills and make a direct impact. At the same time, there is another side of involvement that looks different.

At SDCDS, members have the opportunity to contribute in ways that step outside of day-to-day dentistry. You might find yourself helping welcome and engage new members or shaping programs we bring to our membership.

For those who enjoy writing or editing, the editorial board offers a chance to help shape this very publication. This is a tangible piece of work you can see, contribute to, and be proud of for years to come.

Others may be drawn to legislative efforts, learning more about issues affecting dentistry at the local level, the state level in Sacramento, or on a broader platform in Washington, DC. You can also get involved in continuing education, helping evaluate speakers and identify topics that are relevant, practical, and worth bringing to our members.

There is no single path to getting involved. Some roles are hands-on, others are behind the scenes, but all play a meaningful part in moving this organization forward.

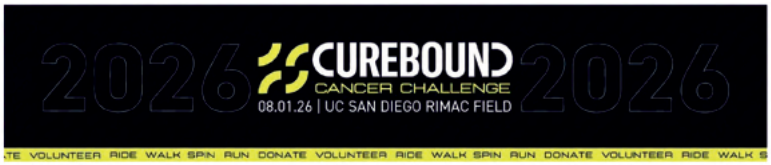
If you are looking to give back or explore a different way to contribute to dentistry, there is a place for you at SDCDS. Members are always welcome to attend a meeting, get a feel for a committee, and decide if it is the right fit. There is no pressure, just an open invitation to experience and be a part of a mechanism that benefits everyone involved.

To be included in this great venture, scan the QR code or reach out to our Executive Director, Angela Landsberg, at director@sdcds.org.

Join Us on the Road to Cure Cancer. The Curebound Cancer Challenge

Written By:
Jayme Rubenstein

Questions? Ask our Team Captain **Crystal Washington** or SDCDS' Curebound staff liaison:
Jayme Rubenstein | jayme@curebound.org
Thank you for your support!



This year, SDCDS is participating in the Curebound Cancer Challenge, an annual walk/run/ride fundraiser to support San Diego-led cancer research projects. **It takes place Saturday, August 1, at UC San Diego.**

The Cancer Challenge attracts thousands of fundraisers to a daylong, family-friendly celebration of our efforts to accelerate cures for cancer in our lifetime. 100% of donations go directly to research through a thoughtful grant process overseen by Curebound's own Scientific Advisory Board. Last year, the event raised a record $4 million.

Visit SDCDS's Curebound page to join our team (colleagues, family, and friends are all welcome). Or make a 100% tax-deductible donation to accelerate the next test, treatment, or cure for all forms of cancer.

CancerChallenge.donordrive.comteams/6142

Beyond the Operatory: Remembering Dr. Irv Silverstein Through Curebound

Written By:
Dr. Sarah Silverstein

When Crystal asked me to write an article about my dad, the impact he had on the San Diego dental community, and how we are honoring him through Curebound, I didn't know where to start. My dad, Dr. Irvin (Irv) Silverstein, was well known throughout the San Diego dental community and beyond. He was a periodontist in La Mesa with a practice for almost 30 years, but he was also a mentor, educator, and community leader.

Dr. Silverstein started his dental career at Northwestern University, followed by a General Practice Residency at UCLA. After completing the program at UCLA, he helped start the GPR program at USC and then went on to complete his Periodontal Residency at USC while also receiving his Master's in Education. Upon finishing his program at USC, he began practicing in San Diego, where he also became involved in organized dentistry. To name just a few organizations he was involved with, he was president of the San Diego County Periodontal Association, was a founding member and board member of the Seattle Study Club, and was on the board of the San Diego County Dental Society for three terms.

Not only was my dad involved in organized dentistry, but he was also a part of educating our dental workforce. He was on the faculty of the Southwestern College of Dental Hygiene Program starting in 2003. Also in 2003, Dr. Silverstein became involved with the UCSD Pre-Dental Society and Student-Run Free Dental Clinic Project. He spent countless hours organizing meetings for the Pre-Dental Students and mentoring them–providing insight into dental school and what they needed to do to be a successful applicant. Not only did he revamp the existing Free Dental Clinics to ensure that they ran smoothly, but he personally recruited dentists to volunteer in the clinics, and solicited donations of much needed new equipment and supplies. His impact went far beyond the borders of San Diego as he helped establish a program to place volunteers aboard the US Navy's hospital ships,

the USNS Comfort and USNS Mercy. The hundreds of students he mentored through UCSD are now practicing dentistry throughout the United States.

In 2016, my dad was diagnosed with pancreatic cancer. Over the following 6.5 years, he went through multiple surgical procedures, several rounds of chemotherapy, and finally immunotherapy. His treatment would not have been possible without the innovative cancer research that allowed for these options to be available. It has been almost 4 years since my dad passed away, and this year, the San Diego County Dental Society has decided to honor his memory by creating a team for Curebound - Smiles Inspired by Irv.

Curebound is a San Diego-based nonprofit that raises and invests funding into cancer research projects that are aimed at accelerating new discoveries into clinical applications. It is committed to investing in collaborative cancer research in San Diego to make the vision for cures in our lifetime a reality. Curebound was launched in 2021, uniting two highly respected cancer organizations, Padres Pedal the Cause and Immunotherapy Foundation. There are many ways to get involved with Curebound, including joining the Curebound Cancer Challenge on August 1 at UCSD by riding, walking, running, or participating in group classes. There are also virtual options and volunteer opportunities.

My dad measured success by the people he helped. Through Curebound, we have an opportunity to continue helping - supporting research, creating hope for patients and families,

and honoring a life dedicated to service. While pancreatic cancer took him too soon, the impact he made continues to grow through the many lives he touched. Please join our team, Smiles Inspired by Irv, on August 1, 2026, to honor him and his legacy in the San Diego dental community.

Photo Captions from Left to Right:
1. Dr. Irv Silverstein at his Periodontal Residency graduation. 2. Dr. Irv Silverstein with his daughter, Dr. Sarah Silverstein, and his grandsons, August 2022. 3. Dr. Sarah Silverstein and her father, Dr. Irv Silverstein, in his office in 2003, now the office she proudly calls her own.

SDCDS Event Spotlight

Board Retreat

SDCDS Board members and committee chairs gathered at the Bahia Resort for the annual Board Retreat. Through group discussions and leadership development activities, participants worked to establish priorities, align on organizational goals, and set the groundwork for a productive year ahead!

Leadership at SDCDS often begins with committee involvement and grows into service on the Board of Directors. We are grateful to our Board members and committee chairs for volunteering their time, sharing their expertise, and helping lead the Society throughout the year.

Written by:
Eric Shapira, DDS, MAGD, MA, MHA, FICD, *Facets Editor*

Dental Bites
An Abbreviated History of Dental Instruments

Dental instruments, obviously used to assist a dentist in a particular "germy" area of the body," the mouth", have gone from archaic and unsanitary to modern and sterile in only a matter of several lifetimes. Sterilization improvement, better instruments, and techniques have paved the way into a disease-limiting future in modern dental care.

The Bow Drill (7000 BC) has a history in what is now, geographically Pakistan and India. The similarities between bow drills used in dental treatment and bow drills used to create fires are somewhat similar. With the spinning drill motion, one was able to somewhat successfully drill teeth to correct issues within the teeth. Essentially, rubbing two sticks together as fast as one can, either to start a fire or to make an opening access into a tooth, was painful on the hands, to say the least. Recovery time of the provider's hands...unknown...?

The Dental Pelican (1600'S) is an instrument that somewhat resembles a pelican's beak. The tool was used from the 14th century to the late 18th century, as a "prying" instrument to lift out teeth and roots.

The Oral Speculum (1600's) was used to open a mouth and hold it open for extended periods of time during a dental procedure. Apparently, the function itself resembles a reversed vice and functions as such. Maybe spawning the words "Lock Jaw?"

Goats Foot Elevator (1700' s) was a device that resembled a goat's cleft foot, with a dual pointed tip and hooking mechanism. This was commonly used in conjunction with a Goat's Foot Extractor and was labeled a Dental Pelican.

Dental Key (1810's) is another instrument in which the design was taken from another industry: Locksmithing. The dental key was based on the locking and rotating mechanism that a key uses. I suspect that it was used for holding a tooth while extracting it from the mouth.

Secateurs (1810's) was an orthodontic instrument, however, it was used for holding onto infected or misaligned teeth, and in both instances for extraction. The instrument would "lock" on to the tooth and remove it from the gumline.

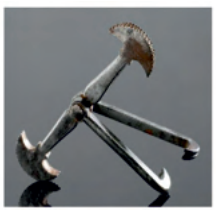
Dental Screw Forceps (1850's) were an American invention and it allowed the dentist to simultaneously drill while holding a tooth in place. I am assuming the patient was able to relax with this procedure, as they were not asked to hold their own teeth while being removed by this handy-dandy dental tool?

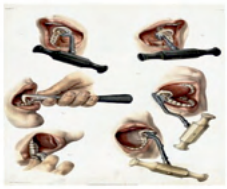
These primitive "tools" of the dental trade were just the basics and refined from earlier, more primitive tools and ways of working on and with teeth, most of which were removed in the earlier days of dental treatment.

THE PRESENT:

Today's Dental Instruments continue to improve in both function and design, well into the 21st Century, allowing for faster, more exacting, and more comfortable patient treatment and care.

Recently, (AI)- Artificial Intelligence, has broached the "Star Wars" barrier of the dental profession, by being able to electronically analyze a treatment, such as an implant placement, and computerize its' coordinates for electronic and computerized placement by the hand of the dental provider managing the computer and the dental equipment. Where will technology go next? A Robotic Dentist perhaps!





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WED Jul 22

Speaker Spotlight Building the Modern Practice: Communication, Case Acceptance, and Long-Term Strategy

6:30 PM - 8:30 PM | 2 CE Units

Speakers: Dr. David Chotiner, Dr Victor Cedillo Felix

Ignite sparked by BBB: 4747 Viewridge Ave, Ste 200, San Diego, CA, 92123

SAT AUG 15

Three CE Courses in a Day: Dental Practice Act, Infection Control, and Basic Life Support

Infection Control: 9:00 AM - 11:00 AM

Dental Practice Act: 11:15 AM - 1:00 PM

BLS Renewal for Healthcare Providers: 1:45 - 5:45 PM

Up to 8 CE Units

Speakers: Nancy Andrews Dewhirst (DPA/IC) and Tyler Kowalski (BLS)

Westpac Wealth Partners: 5280 Caroll Canyon Rd, Suite 300, San Diego, CA 92121

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SAT AUG 1

Curebound Cancer Challenge - Join the SDCDS Team!

Join the SDCDS team at the Curebound Cancer Challenge, a community event supporting cancer research in San Diego. Walk, run, ride, or participate your way while fundraising for a meaningful cause.

SAT DEC 5

Save the Date: Golden Hour: End of the Year Party and Installation Dinner

6:00 PM - 9:00 PM | Bonita Golf Course

Hyper-Local, Mega-Impact: The Upcoming San Diego Dental Survey

Written By:
Angela Landsberg
SDCDS Executive Director

The San Diego County Dental Society is proud to provide our members with resources and information that support the success, and long-term value of their practices. One of the most valuable tools for making informed business decisions is access to reliable benchmarking data that reflects the realities of practicing dentistry right here in San Diego County.

We are grateful to Sean Sullivan and Blue and Company for partnering with SDCDS to bring this opportunity to our members.

The article that follows offers an overview of the San Diego Dental Survey that will be distributed to members later this summer. The survey is designed to gather confidential, practice-specific data that will ultimately provide participants with valuable local benchmarks related to compensation, overhead, productivity, and other key performance indicators.

We encourage all members to review the information below and watch for the survey invitation in the coming months. Your participation will help create a stronger, more informed dental community while providing valuable insights for your own practice.

Written By:
Sean Sullivan, Owner/Partner, DDSmatch So Cal

How does your practice truly compare to the one just down the street? It is a question almost every practice owner secretly asks. While national benchmarks offer a broad perspective, they cannot capture the unique economic realities of our own neighborhoods. As highlighted in Blue and Company's 2025 National Dental Survey, critical factors like staff compensation and overhead are deeply tied to geography. That is why the San Diego County Dental Society is launching a hyper-local Dental Survey modeled directly after Blue and Company's renowned methodology.

This survey is your opportunity to satisfy that curiosity with hard, anonymized data, giving you a clear window into hyper-local benchmarks. Understanding your Key Performance Indicators (KPIs) isn't just about daily survival; it is the foundation of your long-term legacy. Whether you are looking to optimize today or preparing for a future practice sale, buy-in, or transition, clear data is your greatest asset.

Blue and Company's data shows that top-performing "Best Practices" achieve an 80% higher income per patient by reducing overhead and optimizing production. To replicate that success and maximize your practice's valuation for a future transition, you need to know exactly where you stand locally on key metrics:

- Wages and Recruitment: See if your hourly rates match local percentiles to retain top talent.
- Operational Efficiency: Compare your patient visits, productivity indicators, and overhead expenses against San Diego standards.
- Market Trends: See how local offices navigate PPO versus FFS models and utilize in-office membership options.

Your participation is completely confidential. Look for the survey link in your inbox soon; your data strengthens our entire community!

SDCDS Leadership Study Club Series

Fifteen early-career dentists recently completed the SDCDS Leadership Study Club, a four-session program designed to build practical leadership skills within the first ten years of practice. Through interactive sessions, participants gained real-world tools to lead with purpose in their practices and teams.

The program was led by Dr. Megan Clarke, whose sessions focused on communication, decision-making, and personal leadership development.

Building on this momentum, SDCDS is launching its new Leadership Series this year. This expanded program will feature six in-depth Saturday sessions, each diving deeper into key areas of dentistry through a leadership lens, with the first session beginning in June.

Written By:
Katherine Hobday

ADA Lobby Day, with Partial **Government Shutdown**

Written by:
Harriet Seldin, DMD, MBA

The Tooth Party reconvened in Washington, D.C. in March. Drs. Lilia Larin, Sarah Silverstein and I represented SDCDS. Dental students from San Diego joined our congressional meetings.

We were lucky, given the partial government shutdown affecting airports, that we were able to accomplish our goals.

In addition to legislative visits, the meeting included networking with dentists from around the country. The CDA dentist/student dinner with newly appointed ADA Executive Director, Dr. Nader Nadershahi, was especially meaningful, as it was his first day at work! Dr. Nadershahi was previously Dean of the Dugoni School of Dentistry before moving to the ADA.

Our legislative "asks" included three topics:

- Student loans and debt (H.R. 2028/S.942), the REDI Act to provide interest-free student loan deferment during dental and medical residencies.
- Federal Oral Health Infrastructure, to restore oral health leadership at CMS, CDC, HRSA and NIH.
- Dental benefits/ targeted ERISA reform (H.R.7931) to allow patients who work for large employers with self-insured plans to use the patient protection system already in place at the state level.

In addition to meeting with staff from the offices of Congressmembers Mike Levin, Juan Vargas, Sara Jacobs, Scott Peters and Darrell Issa, we met personally with Congressman Darrell Issa. San Diego dentists and dental students joined colleagues from around California to meet with Brian McNeil, MD (Fellow with Senator Adam Schiff).

Legislation at the federal level can take years. It is a discussion and a relationship with legislative staff and Congressmembers. The ADA often collaborates with other healthcare associations to accomplish our agenda for our profession and our patients. We send the staffers thank-you notes and they reply. Luckily, with the help of ADA staff, there is education, understanding, and hopefully, improved public policy overall.

Drs. Harriet Seldin, Lilia Larin, Sarah Silverstein and 2025 CDA President Dr. Max Martinez and several California dental students met with Senate Fellow Brian McNeil MD (back row, 3rd from the right). Dr. McNeil is a Fellow with US Senator Adam Schiff.

Sarah Silverstein, Lilia Larin and Harriet Seldin on the Capitol Steps appreciating the opportunity to advocate for our profession and our patients.

Recognizing: Dr. Harriet Seldin **SDCDS President's Award**

Dr. Seldin was awarded the 2025 SDCDS President's Award by then SDCDS president Virginia Mattson at the Yacht Rock event. Awarded for advocacy; the award plaque stated, "With Gratitude for your years of service and dedication. Your lasting contributions have set a standard of excellence for future generations."

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On Saturday, April 25, 44 of our women dental community members gathered at the Prado Restaurant in Balboa Park to gather in community with their fellow women dental colleagues. Appetizers, a delicious buffet lunch along with dessert were served.

The speaker, Lauren Paige, a leadership and executive coach, spoke about the Psychology of Change, a very impactful topic and presentation. She spoke at length about how we make mindset shifts in our thinking about the changes we want to make in our lives, both personally and professionally.

Our president, Jose Castillo, who attended with his wife, was present to commemorate the occasion. What began in 2015 by our longtime Facets writer, Dr. Maleika Johnson, as an afternoon tea, has continued every year except for one during Covid. Please consider attending next year

*Check out **page 19** for upcoming SDCDS events—you won't want to miss them!*

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