



## BULLETIN

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DATED MATERIAL

## Say What?

TCDS members attending the New Dentist Mixer in July were asked, "What was your first job after receiving your dental license and what are you doing now?"



**Jamie Pragasam,**  
Redlands, First job and Now:  
"Worked and work for my father [Al Pragasam, DDS]."



**JD Bilbao,**  
Highland, "After my dental license—working for our private practice. Now: Own my own practice in Highland."



**Jeff Hwang,**  
Redlands, First job: "Working as an associate at Brookside Dental Specialties in Redlands." Now: "Continuing to work as an orthodontist and doing a lot of traveling."



**Phil Cho,**  
Moreno Valley, First job: "Working for one of the awesome offices in Yucca Valley (Dr. Lombardo)." Now: "Working for myself at Moreno Valley"



**Thanh Luu,**  
Moreno Valley, "I just got my license and am looking for a job."

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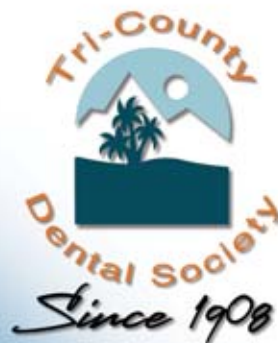
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# BULLETIN

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## Mission Statement

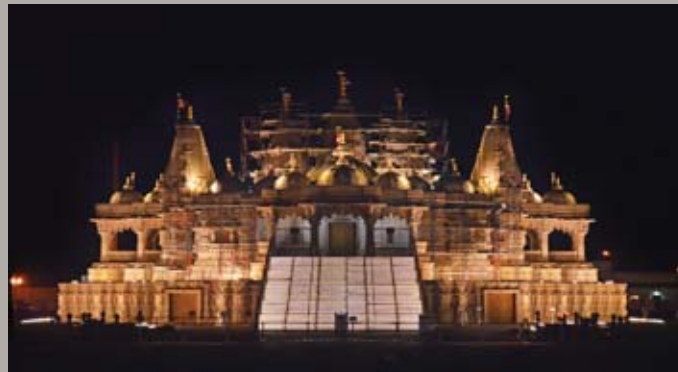
It is the mission of TCDS to be the recognized source for serving the needs of its members and the dental community.



## Featured Member City

### Chino Hills

Hindu Temple just East of the 71 FWY between the Central and Chino Hills Pkwy off-ramps. Visitors are welcome but...no pictures allowed inside the very beautiful Temple.



## Featured Cover Photo

Dr. Rick Nichols, Redlands, gives care to a pediatric patient during CDA Cares San Jose. To find out more about CDA Cares and to volunteer for CDA Cares San Diego, see the article on page 17





## Ethics of Patient Dismissal: What would a reasonably prudent dentist do?

*Jeffrey D. Lloyd, DDS*

**W**hether you want to be or not, just trying to navigate in today's modern world, you're likely someone who wears a lot of different hats. At least, that's

the way it is for me.

One of the many hats that I wear is being a member of CDA's Judicial Council. As such, I recently was asked to author an article on patient abandonment. Thinking that you might find the information useful, it follows for your purview.

Today's dentist must be prepared to treat a variety of patients in a variety of situations. In order to deliver quality dental care, it is critical that there be trust, openness, and cooperation. The patient always has the right to choose to discontinue the relationship. When does the dentist have that right? If treatment outcomes are negatively affected by a patient who is not cooperating, the dentist has the right to dismiss the patient, and the obligation to provide transitional care, without causing harm in the process.

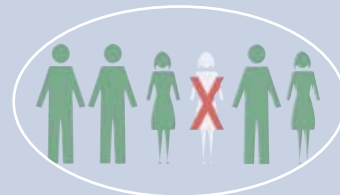
Advisory Opinion 1.B.1 of the CDA Code of Ethics states:

**Patient Abandonment:** Once a dentist has undertaken a course of treatment, the dentist should not discontinue that treatment without giving the patient adequate notice and the opportunity to obtain the services of another dentist. Care should be taken that the patient's oral health is not jeopardized in the process.

Key points to remember in dismissing a patient without causing harm:

- Patient interests come first. Know where you can stop treatment without causing harm.
- Respect patient autonomy. However, when a patient requests treatment that is below the stan-

dard of care, a dentist has the obligation to avoid providing treatment that can cause harm to the patient.



- Acceptable reasons to dismiss: noncompliance, abusive behavior or nonpayment. In cases where you want to dismiss for nonpayment, finish treatment or get the patient stable first; then deal with the collections later.
- Unacceptable reasons to dismiss include, but are not limited to: race, religion, gender, color, national origin, sexual orientation, HIV status or other bloodborne pathogens.
- When patients are noncompliant or missing for long periods of time, they may be putting their health in danger. It is the patient's choice to pursue treatment or not, but before you dismiss the patient, you have an ethical obligation to communicate with the patient regarding the health benefits and consequences of their choices. Be sure to document your contact efforts.
- Provide the dismissal notice in writing, sent certified mail, return receipt requested. Offering a 30-day notice is reasonable, but longer may be necessary. Provide a referral source by putting the patient in contact with their insurance company or the dental society for assistance in locating another dentist.
- Your office policies should specify the dismissal policy.

Key ethical point to remember: **do no harm**

*Additional information about patient abandonment is available on the CDA Compass ([cda.org/compass](http://cda.org/compass)). For further guidance, talk with a member of Tri-County Dental Society's ethics committee.*



## ADA Library packing up – Do we have leaders?

Daniel N. Jenkins, DDS

I would venture to guess that most ADA members are not aware of the ADA library. The library was started eighty years ago and has been housed on the 4th floor in the ADA building. As a

member benefit, an ADA member could request research information on any dental topic and one of the librarians would search the topic or a specific article desired, copy it off, and either email a pdf or snail-mail a hard copy to the member at no charge!

I toured the library early last year. I learned that it housed many historic documents such as: Pierre Fauchard's text book; G.V. Black's set of textbooks; dental journals from around the world; and...the Tri-County Dental Society Bulletin!

At the last ADA House of Delegates, a proposal from the ADA Board of Trustees (BOT) was approved to implement cutbacks on the library to fifty per cent of the 2012 level. This came about because a contracted management company recommended that each section of the ADA should be profitable. With the library not charging enough to cover their expenses, (mainly the staff), the cutbacks were suggested.

Last year the staff was composed of ten full-time and three part-time employees. Now the staff is down to five full-time.

I was told this week that the staff is in the process of "weeding out" the library. Many publications that have not been accessed in a long time are being "eliminated" from the library. This is in preparation for moving the books and other publications to possibly two medical libraries. The hope is to develop the ADA library into a digital library that would cut down on expenses of the space, (the rent on the 4th floor space would bring in a lot of money for the ADA!), and the number of the staff needed. However, the expense of digitizing all the current books and doc-

uments would be very expensive. This was pointed out to the ADA leaders when they proposed this change.

There are many who have utilized the ADA library and are in hard line opposition to the changes. Some have threatened to drop their membership. Some have had impassioned talks with the ADA president and executive director.

The American Association of Dental Editors, (AADE), has taken a stance in support of maintaining the library as it was. This stance is based on the feeling that the ADA has a responsibility to be the holder of dental history and resources – not divided between two medical libraries.

Other ADA leaders, such as District Trustees and delegates to the HOD, have also been contacted. A special sub-committee of the ADA Board of Trustees has met this year to analyze the situation and come up with recommendations. Their recommendation came out in June and the recommendation was to do what the ADA Board of

Trustees had already recommended! (Does that sound like the U.S. Congress?)

This year our dental society has been emphasizing the development of new leaders for our society, for the California Dental Association, and for the ADA. I know many dentists do not like to get involved in the politics of organized dentistry. The politics in dentistry is not like running your own office.

You may have the greatest ideas for the organization but you have to have an agreement with at least the majority of the other leaders...at least the ones that vote.

Politics in a democratic system is not an efficient machine for change. It does give the opportunity for all members to be involved. At all levels of organized dentistry, when proposals such as radically cutting back on the ADA library are introduced, too many delegates will go along with whatever the BOT has proposed. Similarly, too



*continued on page 6*

many trustees will also just go along with what is proposed to the BOT, by a president or executive director.

There are possible reasons behind the “sheep” attitude of those who are supposed to be leaders. They might be assuming that the other leaders know what they are doing and do not feel like they should question their judgment. The topic might not be something they know that much about and since they have a busy practice to worry about they do not feel they have the time to study up on the proposal – if they even know ahead of time what is being brought up. They might have plans to move higher up in the organization; either go from TCDS to CDA or from CDA to ADA...or to become president of the ADA! They may feel that if they go against the crowd they will not make their ultimate goal.

Whether the issue is the ADA library or something minor in the local dental society, a leader still needs to lead. I agree that many times it may not matter in a proposal. One example would be whether TCDS serves cookies or cupcakes at our open house party this year. Some of us may say “Both!”

If you have any desire to see TCDS, CDA, or the

ADA develop in a way you think would be good, (whether changing or staying the same), I encourage you to get involved. The basic level of getting involved is to just let your elected leaders know your opinion. If you don't know their email address, contact the TCDS office and ask for it. If you would like to be more involved there usually is room on most committees for another member – especially one that is willing to share his/her opinion. Once you get involved as a selected or elected leader, I encourage you to: 1. Lead...don't be a following sheep; 2. Even if you have desires to go to the top in organized dentistry, let your conscience speak up. You may not make your ultimate goal because of it, but you will have fulfilled your duties you have in your office at the time; and 3. Plan on the time needed to study each proposal that comes up.

The Tri-County Dental Society, CDA, and ADA are in need of leaders and while you may not feel the inclination right now please look for an opportunity with which you will feel comfortable. You won't get paid with lots of money, but you will be rewarded with the satisfaction of filling in the small pieces that make up the larger organization.

By the way, the previous cost to run the ADA library was \$8.00 per member!

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## The Winds Of Change Are Blowing



*Douglas M. Brown, DDS,  
TCDS Vice President*

I graduated from dental school in 1981 and joined my father's general dental practice as an associate.

Shortly thereafter, a special meeting was called for the members of the Tri-County Dental Society to discuss a long forgotten issue that could possibly affect the practice of dentistry in the state of California. My father could not attend, so he sent me to listen and report back. It would be my first exposure to organized dentistry. The meeting was held at the Mission Inn in Riverside. I dressed in business attire, jacket and tie, but found myself sorely out of place; surrounded by myriads of dentists wearing shirts with several top buttons open, gold chains adorning each neck and white, patent leather shoes afoot. I thought, "What did I get myself into?"

Organized dentistry, that's what! Had I not had my father to spur me on, and the support of many of the other dentists who were involved in the leadership of TCDS, I might never have attended another meeting. But I did, and soon found myself comfortably associated with the organization. I must add that I did not have to start wearing gold chains or white, patent leather shoes to try and fit in. Fortunately, the popularity of such fashion died out soon thereafter.

Back in the day, when I first joined TCDS, there was a high level of membership involvement through monthly continuing education meetings. The meetings were held in a large ballroom at a hotel on a Wednesday afternoon. Following the afternoon course we were served a nice dinner that was then followed by an evening meeting of an hour or two. The frequency of the meetings and the social aspect of the dinner made it easy to get to know, befriend and commiserate with other members of the society.

As you are all well aware, things have changed since then. At that time, one of the primary benefits of membership was the easy, inexpensive opportunity to earn continuing education credits. The local society meetings, CDA convention and an occasional course offered by the dental schools were the

only opportunities of satisfying the continuing education requirements. Now days the society competes against ethnic dental groups, dental suppliers, local specialists (oral surgeons, periodontists, etc.) and even the internet as a provider of CE. It is no longer a prime motivating factor for membership in TCDS.

I recently attended the ADA membership recruitment and retention conference held in Chicago. The take-home message from that meeting was that organized dentistry, especially on the local level, will need to change if it is to remain a viable entity. And it is not just because of the change in availability of CE. What is really going to drive the change is the difference in the generations that fill the ranks of dentists.

While it is not my intent to stereotype individuals, each generation as a whole has different characteristics from the next, due in part to the environment and circumstances with which each generation was reared. These differences will affect the focus, goals and methods of operation of TCDS in the future.

I come from the Baby Boomer I (1946-1954) generation. Members of this group experienced good economic growth overall and are generally optimistic about the future. While we experienced the assassinations of President Kennedy and Martin Luther King, lived through the Civil Rights movement and either fought in or protested the Viet Nam War, we still believed that governments and organizations are focused on helping us to achieve the American Dream. We tend to be conformists. It is our nature to join and renew membership in the ADA, CDA, TCDS tripartate simply because it is the "right thing to do."

Baby Boomer II's (1955-1965) were coming of age at the time of Watergate. They began to lose much of the trust in government and optimistic views held by the Boomers I. They suffered economic struggles, such as the oil embargo of 1979, at some of the most critical stages of their career. This fostered a sense of looking out for oneself since governments appeared to not have the best interest of





the individual at the forefront. They, as a whole, are more wary about joining organizations and need to have some compelling reason or benefit (i.e., TDIC) to join and remain a member.

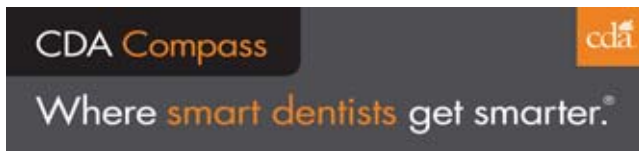
Generation X (1966-1976) is sometimes referred to as the “lost generation.” Many experienced the divorce of their parents, were shuffled between houses, exposed to lots of daycare or became “latchkey” kids. They had less interaction with their parents, who were either a single parent, working or both. They were generally raised with game systems as the babysitter and experienced the coming of age of new technology. As a group, they are characterized as having high levels of skepticism and are more cautious and pragmatic in forming families or joining organizations than previous generations. Before aligning themselves with an organization, they need to know “what’s in it for me?” Generation Y, or Millennials, (1977-1994) are those who are just graduating from dental school. Some have referred to them as the “Trophy Kids” because on sports teams and in school, each child, regardless of capability, was often given a certificate or award simply for having participated rather than for achievement as with previous generations. They were also subject to participation in multiple activities all at once such as school, sports, music lessons and social activities and often found themselves “over-scheduled.” They are incredibly sophisticated, technology

wise, having experienced a huge explosion of “smart” devices, and social media. To them, time is of the essence, and if they join an organization that requires “time,” there better be a good return on their investment.

So what will organizations like TCDS look like in the future? I cannot answer that, I’m from the ‘old’ generation. For one thing, it will certainly have a greater technological flavor. CE meetings, and perhaps even for TCDS management, will probably take place somewhere in the “cloud.” Will legislative advocacy still be important to you? Will the low cost of liability insurance that resulted from CDA’s formation of TDIC be enough to keep you engaged? Will rubbing shoulders of fellow dentists, sharing ideas and complaints, help keep you grounded and your spirits up?

Change is in the air, but the future of TCDS is in your hands. What will be the benefits of membership and what will you receive as a return on your investment? That will be up to you Generation X, Y and Zers because TCDS is your organization. Volunteer for a leadership position NOW to make an impact on organized dentistry for decades to come.

*Editor’s note: To become active in Tri-County Dental Society, contact Ken Harrison, Leadership Development Chair at [kjharrison5@verizon.net](mailto:kjharrison5@verizon.net) or call the TCDS office, (951) 787-9700.*



## CDA Compass Tip

### CDA Compass set to launch new website

The CDA Practice Support Center will incorporate the Compass website into [cda.org](http://cda.org) this month to better communicate its business services and resources to members.

The new Compass site, which can be found at [cda.org/compass](http://cda.org/compass), includes, among other things, an improved navigation system that allows users to find what they are looking for with ease.

The new site will be branded to be consistent with industry standards and with other CDA sites for better integration and exposure for the Compass content across CDA’s flagship [cda.org](http://cda.org). The new Compass site will feature several key enhancements.

#### Top enhancements:

- Ease of navigation
- Ask-an-expert function
- Improved resource packaging
- Accessible guides and manuals on the homepage
- Visual appeal and less clutter

In addition to these upgrades, the new site will include drop down tabs, standardized location of utilities such as login, search, FAQ and contact fields. Streamlined with [cda.org](http://cda.org), the new Compass also will be mobile friendly so members will have easy access to the site on smartphones and tablets.



## Torabinejad honored at LLU graduation



From left: Dr. Charles Goodacre, Dean, LLU/SD; Dr. Richard Hart, President and CEO, Loma Linda University; Dr. Mahmoud Torabinejad, Professor and Program Director, LLU/SD; Dr. Ronald Carter, Provost, Loma Linda University

During the graduation ceremony on May 26, 2013, Tri County Dental Society member and past president of the American Association of Endodontics (AAE) and its Foundation, Mahmoud Torabinejad, DMD, MSD, PhD received the Loma Linda University (LLU) Distinguished Investigator Award for his pioneering scientific investigations and outstanding research contributions.

This award is in recognition of his commitment to research endeavors, external research funding, publications and citations that has had significant impact on the programs at Loma Linda University as



It is important to have legislators in Sacramento who understand the profession of dentistry. Dr. Jim Wood, a practicing family dentist, is running for the 2nd Assembly District, which includes Del Norte, Trinity, Humboldt and Mendocino Counties, plus northern and coastal Sonoma County. To learn more about Dr. Wood and/or to support his campaign visit his web site at [jimwoodforassembly.com](http://jimwoodforassembly.com).

well as for the larger national /international community.

Dr. Torabinejad is currently Professor of Endodontics and Director of the Advanced Specialty Education Program in Endodontics. In addition to co-authoring four textbooks, he has published 220 peer-reviewed scientific articles and book chapters as well as 87 scientific abstracts. He is the top-cited author in endodontic journals; with authorship in 16 articles of the top-100 list.

His discovery of Mineral Trioxide Aggregate (MTA) in the early 1990s has had a significant and meaningful impact on the practice of clinical dentistry. The use of MTA has saved millions of teeth that would have been extracted if MTA were not available. In addition to its contributions to the dental profession, his innovations have generated significant royalty income, which has been one of the major funding sources supporting research activities at LLU.

Dr. Torabinejad has received multiple highly recognized awards, including the 1986 Ralph F. Somers award of the American Association of Endodontists (AAE), 1993 Louis I. Grossman award of the AAE, 1997 Philanthropist award of the AAE Foundation, 2006 LLU Centennial Van Guard award for Healing, and 2008 LLUSD Distinguished Research Award.

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## Learning to Lead

Marcus Paulson, DDS  
Chair, New Dentist Committee

*Besides having fun, networking with other new dentists, and learning about leadership in organized dentistry, Dr. Paulson realized a benefit for his own practice.*



Former TCDS member Dr. Al Ochoa (left) and Dr. Marcus Paulson take time out during the New Dentist Conference to attend a ballgame.

I had the pleasure of attending the American Dental Association's 27th annual New Dentist Conference in Denver this past July. I was representing our Tri County Dental Society, as the new dentist committee chair. The conference featured various

forums, courses, and sessions.

The first day focused on leadership and developing the skills that new dentists need to stand out. The premise is all new dentists have a tremendous opportunity to contribute to organized dentistry at the local, state and national level. I learned through working together we can create resources and events that engage recent graduates and strengthen the tripartite. From the ideas of planning to final steps of execution, I gained insight on how to unite new dentists in unique ways.

My favorite session zeroed in on three qualities necessary for good leadership: focus, communication, and trust. The session discussed how leaders must influence, motivate, and inspire others around them. Taking home these few points to my own staff, I see how leadership growth is essential for effective working relationships.

I would describe myself as: excited, honest, and optimistic. However, I learned that these

qualities, even though great, can become obstacles to leadership growth. Self-assessment is key for translating qualities into behaviors and faith in principles is also necessary for growth.

The second and third days focused on new dentistry, dental practice techniques, and other various legal, medical, and marketing ideas. Additionally, there was a vendor area where if you completely filled out a bingo card, showing you visited each vendor, your name would be entered to win a new IPAD.

Suffice to say, I did not win but sure had fun meeting different dentists and vendors.

I went home feeling that I had had the chance to share challenges and successes with other dental society members throughout the country. It gave us the opportunity to learn from one another. If you would like to contact me to discuss ideas or questions regarding the future of your practice and profession, I am available through email at [DrPaulson@HPOrtho.com](mailto:DrPaulson@HPOrtho.com).

If you are a dentist who has graduated in the past 10 years, I invite you to our New Dentist Study Club, next meeting on September 17. See <http://www.tcds.org/events> for more info.



# A to Z

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**cda**

## Ronald Dailey appointed dean, LLU School of Dentistry



**R**onald Dailey, PhD, executive associate dean, Loma Linda University School of Dentistry, has been appointed by the University board of trustees to serve as the

School's fifth dean, effective July 1, 2013. He will replace Charles J. Goodacre, DDS, MSD, who has served in that position since 1994.

Richard Hart, MD, DrPH, president and CEO, Loma Linda University Health, announced the appointment Tuesday evening, February 26, to a large gathering of LLUSD faculty and staff. "After a careful search process, Dr. Dailey's name was selected for presentation to the University's board of trustees. Dr. Dailey's long track record makes him an obvious choice for dean and our board confirmed that recommendation. I am delighted to welcome Ron into that position."

Dr. Dailey was first employed by the School of Dentistry in June 1975 as an instructor in the Department of Preventive and Community Dentistry, while completing a Master of Arts degree in Educational Psychology at Walla Walla College.

In July of 1978 he was promoted to assistant professor, and became director of Admissions and Student Affairs; in 1986 his title changed to assistant dean for admissions and student affairs.

On September 30, 1993, Dr. Dailey was appointed associate dean for academic affairs, the same year that he successfully defended his doctoral dissertation which focused on a re-analysis of the relationship of psychomotor and perceptual skills to student performance in dental school.

With the acquisition of his Doctor of Philosophy Degree in Higher and Professional Education from USC in 1994, Dr. Dailey was promoted to associate professor, Department of Dental Educational Services; and a year later (September 1995) he was named the Department's chair, a position he

maintains.

One of the more meaningful accomplishments of Dr. Dailey's teaching and administrative career has been writing, with LLU professor of biostatistics Jay S. Kim, PhD, a ground-breaking textbook, *Biostatistics for Oral Healthcare*, published by Blackwell Munksgaard in 2008 (344 pp.), that M. E. Munn calls the "first solid biostatistical text completely devoted to oral health research."

On June 1, 2009, after 15 years as associate dean for academic affairs, Dr. Dailey was named executive associate dean, Loma Linda University School of Dentistry—a position that justified an accumulating list of duties he was already performing.

Dr. Dailey joins a limited fraternity of dental school deans who are not trained as dentists among them the current dean, University of California, San Francisco, School of Dentistry dean, John Featherstone, MSc, PhD.

Among the honors Dr. Dailey has received is his honorary membership in Omicron Kappa Upsilon—a society that was established in 1914 at Northwestern University Dental School in Lincoln, Nebraska, to promote and recognize scholarship and character among students of dentistry. He has also been selected for Teaching Excellence awards in 1986 and 1987; and the School of Dentistry's Distinguished Service Award in 2001.

Dr. Dailey retains a seat on the Loma Linda City Council that he won in 2009. He is married to Karen Winston, MD, a Loma Linda University pediatrician, and has three adult children: Casey, Colin and Katie.



## Dr. Robert Handysides appointed School of Dentistry associate dean for academic affairs



**R**obert Handysides, DDS, associate professor and chair, department of endodontics, has accepted an appointment to associate dean for academic affairs in the Loma Linda University School of Dentistry.

A native of Canada,

Dr. Handysides participated in a nomadic lifestyle through his early years, living in various continents and countries with his missionary family until he returned to North America for higher education. He arrived at LLUSD in 1989 with a Bachelor of Science degree in zoology from Andrews University, and earned his Doctor of Dental Surgery degree with the School of Dentistry's class of 1993.

Remaining at the School for a short period of time following graduation he returned to his homeland to establish a solo practice in Kingston, Ontario that he maintained for five years.

Dr. Handysides returned to Loma Linda in 1999 to earn a certificate in endodontics that he completed in 2001 from the School's advanced specialty education program in endodontics. The return to an academic way of life resurrected a passion for education in Dr. Handysides, and embraced the role of full time educator serving the department of endodontics in a variety of roles: course director, lecturer, clinical educator, and researcher. In 2003 he became the director of the LLU Faculty Endodontics practice where he

*continued on page 19*

## Unclassifieds

*Be sure to visit Classified Ads on the TCDS web page at [www.tcds.org](http://www.tcds.org).*

**Practice for Sale in Apple Valley.** Two ops equipped with two x-ray units + digital x-ray/computerized office. Take over equipment lease payments of \$ 1305.00 per month. Low rent .Call 909-908-5033 or email at [kyeturu@gmail.com](mailto:kyeturu@gmail.com).

**Office Space For Rent.** Dental office on Arlington Avenue in Riverside has office space for rent. Good opportunity for Orthodontist or Specialist to start or relocate practice in Riverside. 4 operatories ready for use. Call for more information (951) 785-1209.

We are looking for a **Dentist to work part-time in Rialto.** Office has operating Microscope, digital x-rays and well-trained staff. General Dentist to send resume to [jj2thfixer@roadrunner.com](mailto:jj2thfixer@roadrunner.com) or fax to (909) 820-2280.

**Office space available** in Redlands on beautiful Brookside Avenue. 300(4 rooms)-2000((11 rooms) Sq/feet @ \$2/ft includes utilities. Perfect for specialty dentist (orthodontist, oral surgeon) or dental lab looking to expand into the Inland Empire. Separate reception area, restrooms. Close to downtown, shopping, restaurants, bus, movie theaters. Contact Dr. James Patrick Caley at (909) 798-5117 or [nsczolgist@aol.com](mailto:nsczolgist@aol.com).

**CHINO** – Excellent opportunity for a specialist with numerous referring dentists nearby- 3 GPs and an Oral Surgeon in the long standing dental professional complex. 1450 sq feet, 3 ops, mint move in condition. Features include consultation room, private office and staff room. Great location and access. Available now. Call (909) 628-4287 or e mail [lovelydentist@gmail.com](mailto:lovelydentist@gmail.com).

## Hot Shorts



**The Fifth Annual CDA Dental Motorcycle Ride** is planned for September 13-15, 2013. Join your colleagues for a weekend of FUN and EDUCATION! The ride will be based at the Hampton Inn and Suites, 8937 Brooks Road South, Windsor, CA – in the heart of fantastic motorcycle riding and world-class bicycle rides. Rides will be planned through the northern coast and wine country. C.E. will be conducted in the morning leaving plenty of time for the rides. Speakers include Drs. Michael Perry, William K. Tom, and James D. Wood. The area offers a multitude of activities for participants, family and friends who choose not to ride! For more information and to see photos of previous rides - <https://sites.google.com/site/dentistrides/>. All net proceeds are contributed to the CDA Foundation.

# Top Ten Reasons Why You Should Volunteer at Tri-County Dental Society



Ken Harrison,  
Leadership Development Chair

**T**en years ago if a colleague had asked me why I wasn't volunteering with my local dental society, I could have spewed out the excuses with the best of them: 1) I didn't have the time 2) I didn't have enough experience to help 3) I was too busy with my family/ practice/ church/recreational activities. 4) I had no interest in organized dentistry, etc. etc. etc.

Today, if you ask me why I still volunteer or more importantly why you should begin to volunteer, I can give you a much more meaningful top ten list: 1) **It is good for you.** Experts state that if you focus on someone/something other than yourself, it interrupts the usual tension-producing patterns in our lives. 2) **It promotes personal growth by stretching your comfort zone.** 3) It strengthens your resume. 4) **You feel involved and more useful.** 5) **You learn from others through networking.** 6) **You develop new skills.** 7) **You make new friends.** 8) **You have a chance to give back to the dental profession.** 9) **You make a difference.** 10) **You feel involved and have fun.**

On behalf of TCDS and the Leadership Development Committee, I would like to personally invite you to take your first step into the world of dental volunteerism. TCDS is beginning to form committees for 2014. We need volunteers to step up and help with the everyday business of running our great dental society. Most committee assignments only involve 2-3 meetings per year! So, take a chance and invest 6-8 additional hours of time per year in your profession.

Committees/task forces needing volunteers include: Dental Education, Membership, Give Kids A

Smile, Give Adults A Smile, Peer Review, Leadership Development, Ethics, Finance, Governance and New Dentist (10 years or less of practice).

A few thoughts from some great world leaders: Ben Franklin said, "Tell me and I forget, teach me and I may remember, involve me and I learn." The legendary coach John Wooden stated, "You can't live a perfect day until you do something for someone who will never be able to repay you."

And finally from Dr. Martin Luther King, Jr., "Everybody can be great...because anybody can serve. You only need a heart full of grace. A soul generated by love."

*Please contact Leadership Development Chair Ken Harrison @ [kjharrison5@verizon.net](mailto:kjharrison5@verizon.net) or the TCDS office @ (951) 787-9700 or (800) 287-8237 for more information about beginning your path to service.*

**"I don't know what your destiny will be, but one thing I know: The ones among you who will be really happy are those who have sought and found how to serve."**

**-Albert Schweitzer**

**Show your love of dentistry and the Tri-County Dental Society by serving on a committee during 2013. Most committees meet only 1-3 times during the year.**

**Contact Leadership Development Committee Chair Ken Harrison at [kjharrison5@verizon.net](mailto:kjharrison5@verizon.net) or the TCDS office at 951-787-9700 to begin your road to 'real happiness.'**





## What's Happening?

*Register for any TCDS event online at [www.tcds.org](http://www.tcds.org).*

Day/Date	Event Details
Mon. Sept. 2	Labor Day TCDS Office Closed
Tues. Sept. 10	Board of Directors Meeting TCDS Office 6:45 p.m.
Tues. Sept. 17	New Dentist Study Club TCDS Office 6:00 p.m.
Thurs. Sept. 19	Continuing Education Meeting TCDS Office Social Hour: 5:30 p.m. Seminar: 6:30 – 8:30 p.m. “OSHA” Kathleen Lewand 2 CEUs – Seating is Limited
Fri. Oct. 25	All Component Caucus Gateway Sheraton, LAX
Oct. 31 – Nov. 3	ADA Annual Session New Orleans
Tues. Nov. 12	TCDS Pre-House Caucus TCDS Office 6:45 p.m.
Nov. 15-17	CDA House of Delegates Sacramento
Tues. Nov. 19	Board of Directors Meeting TCDS Office 6:45 p.m.
Thurs. Dec. 5	TCDS Annual Open House TCDS Office 5-9 p.m.
Dec. 7-8	CDA Cares San Diego Del Mar Fairgrounds

## Short Abstract

### Effect of phytic acid used as etchant on bond strength, smear layer, and pulpal cells.

Nassar M, Hiraishi N, Islam MS, Aizawa M, Tamura Y, Otsuki M, Kasugai S, Ohya K, Tagami J. Eur J Oral Sci. 2013 Jun 20. doi: 10.1111/eos.12064.

**Source:** This study aimed to evaluate the effect of phytic acid (IP6), used as etchant, on resin-dentin bond strength, smear layer removal, and the viability of pulpal cells. Flat dentin surfaces with smear layer were etched with 1% IP6 for 60, 30, or 15 s; in the control group 37% phosphoric acid (PA) was used. Dentin surfaces were rinsed, blot-dried, and bonded with an etch-and-rinse adhesive, followed by composite build-ups. The specimens were subjected to tensile testing after 24 h of water storage at 37°C, and failure modes were determined using scanning electron microscopy. The effectiveness of IP6 to remove the smear layer was observed using scanning electron microscopy. To evaluate the effect on pulpal cells, solutions of 0.1 and 0.01% IP6 and of 3.7 and 0.37% PA were prepared and rat pulpal cells were treated with these solutions for 6 and 24 h. Cell viability was measured using the 3-(4,5-dimethylthiazol-2-yl)-2,5-diphenyltetrazolium bromide (MTT) assay. The results demonstrated that all application times of IP6 produced bond-strength values that were significantly higher than that of the control. Phytic acid effectively removed the smear layer and plugs, thus exposing the collagen network. Phytic acid had a minimal effect on pulpal cells, whereas PA resulted in a marked decrease in their viability.



## Go big or go home: Creating your own experience



*Lenora Milligan  
Salt Dental Practice Management*

*At a Glance : ??????????????*

I recently spent time visiting family and friends. One thing that really struck me was the number of “I don’t know why this is happening to me,” and “My life is out of control, nothing is going right,” conversations I had with them. Most of them seemed not to understand that regardless of our circumstance we still have some control over our experiences in life. They seemed happy to blame others and skip the part of life that calls for personal accountability.

I found myself falling back on the information gathered by reading Dr. Phil’s Life Strategies. We own our lives. We own our results. If we suffer from a chronic illness, are missing a limb or have recently gone into bankruptcy, we own it. You may not be responsible for the drunk driver that hit you and caused you to be disabled, but you are accountable for how you choose to respond and go on with your life. If you are not happy with the way your life is working out, then make changes and make it better. Recognize what you did or did not do to contribute to your results. Change your attitude.

Maya Angelou says, “When you know better you do better.” I say it needs one more step. Once you know better you must act on it. Doing better doesn’t happen by itself. It takes effort. I don’t know anyone who wants to be surrounded by people who suffer from “victim-stance.”

Woe is me is pretty draining when listened to on a regular basis. I’m not without empathy or even sympathy, but I do believe once the shock of something is behind you, you must gather your thoughts and create the experiences you want to have.

As consultants, we deal with everyone’s personal and practice issues all day every day. There seem to be plenty of situations where victim-stance, rationalization, justification and the need to be right, block people from going forward to achieve their dreams.

So let’s apply this life lesson to your practice. As an example, let’s say your most experienced, long term, beloved office manager just married and announced she is moving to North Dakota with her husband. You have two weeks to replace her. Since she has

been with you from the beginning, you have relied on her exclusively to run your practice. She knows everything and everyone, and handles all with adept efficiency and you haven’t had to worry about taking care of anything in years.

You know chaos is coming and you do not want to deal with it. How on earth are you going to find someone to handle the job and get them trained in such a short time? You ask your office manager to give you more time. She says she would love to but simply cannot. Perhaps you feel frustration or anger; after all, you’ve paid her very well and given benefits over and above what most receive. Surely she could make an effort here.

Do you recognize the victim-stance in this thinking? Guess what? You created this result. You did. The important part of this acknowledgment is figuring out how you created it. Did you lose focus or drive? Not follow up on the training of other team members? Did you lack involvement in day-to-day activities? Allow yourself to become complacent? The behavior you identify is what created your results.

The faster you accept that fact the faster you get your act together and get the problem solved. Don’t waste time feeling put out or justifying the situation, get done what needs to get done and then make sure in the future no one in the office has so much responsibility you cannot imagine living without them.

Cross train, set up systems, become more involved. You create your own experience. No matter what is going on in your practice, you are accountable. Accepting that means you understand you possess the answers. While others spin their wheels blaming, justifying and trying to be right, you can be on track and achieve great things. Perhaps this example is something you’ve never had to deal with. I would imagine you’ve had team members go on vacation, get sick, or take a leave of absence. The exact situation is not the critical factor. Your acknowledgement of accountability is.

One client went through this process with us and the results were really astonishing. He hired us to help him increase his productivity and collections. He said his team was excellent and well trained; he really had no other challenges. So, we went to work and

helped him increase by 400,000 in short order. During the process of doing our due diligence, we discovered his office manager was placing the bills payable into a drawer and just letting them sit there. Taxes, labs, suppliers were not paid, and no one said anything. When the young lady was asked why the bills were not paid she said the doctor kept taking money out of the account and she didn't want to upset him by telling him there wasn't enough left over to pay everything. "After all, he works so hard, who am I to tell him what he should do with his money?"

You can imagine the frustration and anger the doctor felt when he realized what a financial mess he was in. Who created this result? The doctor certainly thought his office manager was at fault, and yes, she certainly carried some blame. But ultimately the doctor had to let go of his blaming and take full responsibility. He created this result by turning over his finances to someone who was not educated in finances, not properly trained and never supervised. He created his own experience.

Once he wrapped his head around that he quickly went to work to rectify the problems. He hired and trained, and supervised someone who did have the education to handle the payables and now he has a system in place that will allow him to know exactly what is going on and make necessary changes before the IRS gets involved.

Get together with your team, your spouse, or other advisors and put together a list of every experience in your practice you do not like. How did you allow these things come about? What did you do or not do to contribute or create those problems? How can you change your behavior to get different results? Accept responsibility for each item on the list. You will find when blame is removed from the equation everyone settles down and works hard to find solutions.

When you have your list together and have found ideas to implement to create better results for yourself, ask yourself what experiences you want your patients to have. How will you find out what they feel their experiences with you are like? You may consider asking them while they are in the office, through social media requests for reviews or an emailed survey. Regardless of how you acquire the information you may expect that if you have not been happy with your experiences, some of them will have the same feedback for you. Knowledge is pow-

erful, however it still requires action.

Start creating better experiences from today forward.

For more information please visit us at [www.salt-dpm.com](http://www.salt-dpm.com) and follow our blog at <http://salt-dental-practicemanagement.blogspot.com/>

### American Dental Association Offers Updated Coding Books

The American Dental Association (ADA) is offering two updated dental coding books to help dentists stay up to date on the proper codes to use when billing their patients for dental procedures.

The new "CDT 2014" contains the Code on Dental Procedures and Nomenclature, which is the standard for recording dental services in patient records, on paper claim forms and on HIPAA standard electronic claim transactions. The new book is the only official source for the latest dental procedure codes. The manual has been improved to reflect real world dentistry such as:

- Providing codes that clearly document a service to a patient
- Considering how the latest clinical advances and evidence-based dentistry affect the way you code
- Reducing your workload by eliminating the need for narrative reports for certain codes
- Developing more specific codes to the procedures you perform, including new codes for caries risk assessment and implants, and a new subcategory for carriers

The ADA worked with the American Association of Endodontists and the American Association of Orthodontists to revamp the endodontic and orthodontic sections to convey recent developments in these specialties. "CDT 2014" is a spiral bound book that lays flat for easy reference and includes a searchable CD-ROM for quick code look up. The CDT book (J014) is available for \$39.95 for ADA members and \$59.95 retail price. "CDT 2014" includes:

- 29 new procedure codes
- 18 revised procedure codes
- 4 deleted procedure codes
- 7 changes to the subcategories and their descriptors
- Fillable 2012 ADA Dental Claim Form

*continued on page 16*

The ADA is also offering the “Dental Coding Made Simple: Resource Guide and Training Manual, 2013-2014” to help dentists and their staff understand the basics — and the complexities — of today’s dental coding system. “Dental Coding Made Simple” (J443) is available for \$49.95 to ADA members and \$74.95 retail price. Key features include:

- 151 of the most common questions and answers
- More than 25 coding exercises
- An illustrated dental implant section
- New HIPAA Compliant 2012 ADA Dental Claim Form and completion instructions
- Continuing education (CE) examination with five CE credits

The “CDT 2014/Dental Coding Made Simple Kit” (K214), which includes both the “CDT 2014” and “Dental Coding Made Simple” books, is \$75.00 for ADA members and \$112.50 retail price. To purchase any of the books, please visit [adacatalog.org](http://adacatalog.org) or call the ADA Member Service Center at (800) 947-4746.

**TCDS NEW DENTIST STUDY CLUB MEETINGS**  
*dine and discover*



**2013 SCHEDULE**

**September 17 & November 19**  
*~ Reserve your space Online ~*

**C.E.:** 2.0 UNITS

**COST:** MEMBERS- \$0, NON-MEMBERS- \$45

**TIME:** 6:30- 8:30 PM

**LOCATION:** TCDS BOARD ROOM  
 3993 JURUPA AVENUE, SUITE 104  
 RIVERSIDE, CA 92506

Tri-County Dental Society | [shehara@tcds.org](mailto:shehara@tcds.org) | [www.tcds.org](http://www.tcds.org)  
 951-787-9700 | F.951-787-9703



## TCDS Membership Status Report

Active/Recent	1,408
Life Active	86
Life Retired	159
Retired	28
Post Grad	29
Faculty	44
Disabled	10
Military/Public Health	8
Provisional	218
Hardship	2
Pending Applications	12
<b>TOTAL</b>	<b>1,939</b>

**HMO Consumer Complaint Hotline**  
**(800) 400-0815**

**State Dept. of Corporations Consumer Services division**

## Toll-Free Numbers

ADA.....	(800) 621-8099
CDA.....	(800) 736-8702
CDA Member Resource Center.....	(866) CDA-SMILE (866) 232-7645
Practice Support Center.....	(866) 323-6362
TDIC.....	(800) 733-0634
TDICIS.....	(800) 733-0633
TCDS.....	(800) 287-8237
Denti-Cal Referral.....	(800) 322-6384

## Contact Your Dental Society Staff

*(951) 787-9700 or (800) 287-8237*

### Penny Gage, Executive Director

Administration  
 Governance/Ethics  
 Advertising/Exhibitors  
 Extension 23 – [Penny@tcds.org](mailto:Penny@tcds.org)

### Sally Medina, CE Coordinator

Continuing Education  
 Give Kids A Smile/Community Health  
 Extension 21 – [Sally@tcds.org](mailto:Sally@tcds.org)

### Shehara Gunasekera, Membership Coordinator

Recruitment/Retention  
 New Dentist Services  
 Dental Student Services  
 Website Assistance  
 Extension 22 – [Shehara@tcds.org](mailto:Shehara@tcds.org)



# TRI-COUNTY DENTIST anesthesiologists

Our members are dentist anesthesiologists who truly understand the unique challenges of providing anesthesia in the dental environment. We have dedicated ourselves to our practices and have the knowledge, experience and training to safely treat children, adults and patients with special needs in your office.

**Siamak Eshaghian, DDS**  
310.498.6424  
siamak.eshaghian@gmail.com

**Barry Krall, DDS**  
909.835.7940  
office@bkanesthesia.com

**Michael Mashni, DDS**  
714.349.4700  
mashnids@aol.com

**S. James Park, DMD**  
714.309.9390  
sjpsed8@aol.com

**David E. Rogers, DDS, Inc.**  
909.499.2172  
dr.rogers@drsedation.com

**Sam Sardaryan, DDS, MPH**  
949.733.2846  
anesthesia.driven@gmail.com

**Chad Tomazin, DDS**  
951.333.1107  
chad.tomazin@gmail.com



Horace Wells, a Connecticut dentist who pioneered the use of anesthesia in both dentistry and medicine.  
Horace Wells, 1815 - 1848

## Volunteers needed for CDA Cares San Diego



A CDA Cares free dental clinic is scheduled for Dec. 7-8, 2013, at the Del Mar Fairgrounds in San Diego County. To help provide oral health care services to the large number of expected patients, the CDA Foundation needs volunteer dentists, dental and health professionals, lab technicians, nurses and pharmacists.


Additionally, community volunteers are needed to assist with registration, clinic setup, data entry, escorting patients, translating and much more.

Patients will receive cleanings, fillings, extractions, oral health education and assistance in finding a dentist for follow-up care.

In 2012, the CDA Foundation and CDA hosted two clinics that provided \$2.8 million in dental care to 3,676 patients thanks to the generosity of volunteers and sponsors.

Tri-County member, Dr. Rick Nichols, volunteered at CDA Cares in San Jose in May. "With the elimination of adult Denti-Cal, cuts in the child Denti-Cal, combined with the poor economy and loss of benefits provided by employers, the need is higher than ever," he observed. "When you look into the eyes of the people, most of whom have been waiting outside in lines for 2 days, seeing their pain and desperation, and then hearing the words and seeing the tears of appreciation, the experience becomes more enriching for those providing the care than for those receiving it." (For more about Dr. Nichols' experience at CDA Cares, read a feature article about him in the September issue of the CDA Update.)

Your Tri-County Dental Society staff will be volunteering in San Diego; come join them! Registration for CDA Cares San Diego opened in July. To learn how you can get involved, go to [www.cdafoundation.org/give/volunteer/cda-cares-free-dental-clinics](http://www.cdafoundation.org/give/volunteer/cda-cares-free-dental-clinics).



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## Welcome New Members

### **Sergio Aguila, DDS**

General Practitioner  
Univ Autonoma de Guadalajara, Mexico, 1982  
13790 Bear Valley Rd., Ste. E-5  
Victorville, CA 92395  
760.955.2273

### **Franco Audia, DDS**

Oral Surgeon  
LLU/SD, 1997 (DDS)  
LLU/SD, 2001 (OMFS)  
3763 Tibbetts St  
Riverside, CA 92506  
951.779.4911

### **Jack Bourklian, DDS**

General Practitioner  
Tishreen Univ, Syria, 1995  
University of Colorado, CO, 2012  
15290 Bear Valley Rd., Ste B  
Victorville, CA 92395  
760.951.1138

### **Joseph Danesh, DDS**

Oral Surgeon  
LLU/SD, 2006 (DDS)  
UCLA, 2007 (GPR)  
Newark Beth Israel, NJ (GPR)  
Episcopal Hospital, PA (OMFS)  
255 N. Gilbert St., Suite A  
Hemet, CA 92543  
951.652.2474

### **Brianne Hama, DDS**

Pediatric Dentist  
Herman Ostrow School of Dentistry of USC, 2008  
NYU, NY 2010 (Pedo)  
131 W. Ontario Ave., Ste. 102  
Corona, CA 92882  
951.734.4543

### **Glenda Joson, DDS**

General Practitioner  
University of the East, Philippines, 1988  
1301 W. Arrow Hwy., Ste. 120  
San Dimas, CA 91773  
909.592.8338

### **Oscar Maldonado, DDS**

General Practitioner  
Univ Francisco Marroquin, Guatemala, 1997  
No Practice Address Available

### **Ivan Rees, DDS**

General Practitioner  
LLU/SD, 2009  
St. Barnabas Hospital, NY, 2010 (GPR)  
St. Barnabas Hospital, NY, 2011 (GPR)  
LLU/SD, 2013 (GPR)  
No Practice Address Available



*continued from page 8*

maintains a busy practice.

In 2007 Dr. Handysides was added to the LLU Faculty of Graduate Studies as associate professor, and in 2008 was promoted to associate professor status with the department of endodontics. One of his capstone moments in endodontics came in November of 2008 when he completed his board certification to become a Diplomate of the American Board of Endodontists.

In 2009, when Dr. Bakland announced he was relinquishing the department of endodontics chair, Dr. Handysides was selected to assume the position of his mentor and friend.

Based on the long list of committees and boards on which he has served, Dr. Handysides appears to enjoy direct involvement in the decision-making and implementation of both clinical and academic activities essential to the maintenance, integrity, and growth of the School.

He has authored or coauthored a number of peer reviewed articles and textbook chapters in endodontics and dental education. He has also presented numerous continuing education seminars both nationally and internationally, enjoying the various cultures and customs of the places he has visited.

In his pursuit of lifelong learning, and to deepen his educational background, Dr. Handysides embarked on the pursuit of an EdD in Higher Education at the University of Southern California in 2011.