

# BULLETIN

**Incoming TCDS executive director,  
John Fields, ushers in new era...**



*Proudly representing the dentists in Riverside, San Bernardino and eastern Los Angeles Counties*

## Board of Directors

### Executive Committee

President – Douglas M. Brown, DDS  
 Immediate Past President – Arthur D. Gage, DDS  
 President Elect – Evangelos Rossopoulos, DDS  
 Vice President – Judy Wipf, DDS  
 Secretary/Treasurer – Michael Mashni, DDS

### Board Members

Director – Katherine J. Cooke, DDS  
 Director – Deborah M. Hutton, DDS  
 Director – Hemant N. Joshi, DDS  
 Director – Wayne S. Nakamura, DDS  
 Director – Denine T. Rice, DDS  
 Editor – Daniel N. Jenkins, DDS

### Trustees

Gerald M. Middleton, DDS  
 Narendra G. Vyas, BDS

### Ex-Officio

Ron Dailey, PhD – Dean, LLU/SD  
 Steven W. Friedrichsen, DDS – Dean, WesternU/CDM  
 John C. Fields – Executive Director

## Leadership

### Committee Chairs

Dental Education – Judy Wipf, DDS  
 Ethics – Robert D. Kiger, DDS  
 Finance – Michael Mashni, DDS  
 Community Health – Vijay B. Patel, DDS  
 Governance – Clelan G. Ehrler, DDS  
 Leadership Development – Joan E. Dendinger, DDS  
 Membership – Evangelos Rossopoulos, DDS  
 New Dentist – Mauricio Dossantos, DDS  
 Nominating – Gerald M. Middleton, DDS  
 Peer Review – Mark Harris, DDS

### Editorial Team

Editor – Daniel N. Jenkins, DDS  
 Managing Editor – John C. Fields  
 Publisher – Fred Lamb Design



## *In This Issue...*

Presidential Message.....	3
Editorial .....	4
Bringing the New Executive Up To Speed. ....	7
Nominating Committee Selects Slate for 2016 .....	9
CDA Anaheim / Fairwell to Penny .....	10
Dental Insurance Fairness Act. ....	12
Yelp!!! .....	13
Short Abstracts .....	16
Dental Humor.....	16
City Wide Assessment of Oral Hygiene .....	18
CDA Establishes The Dentists Service Company. ....	19
Pros and Cons of Buying vs Leasing Office Space....	20
Unclassifieds .....	21
Welcome New Members .....	22
What's Happening .....	23

## *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*

### BAKER

The famous Baker Thermometer as it hits 99 degrees... A cool day in Baker



## *Featured Cover Photo*

TTCDS President, Dr. Doug Brown, Past President Dr. Butch Ehrler, and TCDS Executive Director, John Fields, welcome CDA Executive Director, Peter DuBois, who spoke to the TCDS Board of Directors on May 12, 2015.

# Presidential Message

## At a Glance :

*All of the information included came from research using CDA's Practice Support section of CDA.org. In my opinion, it is one of the most valuable benefits to members of CDA.*



## Seven things you probably didn't know...

**Douglas M. Brown, DDS**

**I**t has been a bit of a challenge developing an idea for this article. I try to make my messages light reading, but interesting enough to capture your attention. I thank each and every one, of the six or seven of you, who actually read it; and hope that you will have learned something that you did not already know.

1) Cadaver carving: For those of you who have fond memories of anatomy lab, and have been dying to get your hands back on a stiff, waxy, formaldehyde soaked cadaver, your wait may be over. There will be a workshop at CDA Presents in San Francisco titled Anatomy of the Masticatory System: Clinical Application and Dissection. Attendees will work in dead earnest, in two-member groups, each group dissecting half of a cadaver specimen. Homayon Asadi, DDS, associate professor and course director of advanced head and neck anatomy at the University of the Pacific, Arthur A. Dugoni School of Dentistry stated "We're trying to show them how complex the human system is and help them understand the nerve pathways, which will help them in their private practices. By seeing and touching these human cadavers they will better understand the anatomy and physiology of what they're trying to achieve and incorporate what they learn in their day-to-day practice." In dental school I had a favorite saying "I love the smell of formaldehyde in the morning" (a twist on one of my favorite lines about napalm from the movie Apocalypse Now). This is a full-day course that will earn attendees 4 core C.E. units. Yes, just like in school, you get cheated on credits in lab courses.

2) Guide for the New Dentist: If you haven't already done so, check out CDA's Guide for the New

Dentist in the Practice Support section of CDA.org. In it you'll find everything from advice on laws and regulations to building relationships with dental labs, supply companies and dental specialists. Although the name seems to indicate that it is only for the new dentist chapter 2, titled Insurance, breaks down the types and needs for various insurance policies beginning with 0-5 years in practice to 11-20+. Chapter 3 is an excellent resource for everyone practicing dentistry in California. Check it out. Even an old doc can learn new tricks. (Okay, that was a bad pun)

3) Fictitious name: You worked hard to earn that D.D.S. or D.M.D. behind your name just so you can practice under the name Happy Go Lucky Dental. Did you know that, in order to do so, you need a special permit from the Dental Board? Dental practices operating with a Dental Board-issued fictitious name permit also must comply with another state requirement. California requires all for-profit businesses that use a fictitious business name to file a fictitious business name statement with the clerk of the county where the business is located. Such statement shall be filed no more than 40 days from the time the business starts transactions. Specific information is required in the statement, and the statement must be published in a general circulation newspaper within 30 days of filing the fictitious business name statement. The statement must be published once a week for four consecutive weeks. A fictitious name statement typically expires five years from the date it was filed.

4) State Dental Director: The establishment of a state dental director position —the priority goal of CDA's access proposal— was successfully accomplished within the 2014-15 state budget, which allocated \$474,000 to fund both the director, who must be a licensed dentist, and an epidemiologist. In response to outside influence for the creating of mid-level dental providers CDA developed an access proposal titled Phased Strategies for Reducing the Barriers to Dental Care in California. Recognizing that there must be a

*Continued on pg 6*

*What will dentists do to compensate for the increase in employee compensation? In discussing this with various business owners the most common response is, "I will raise the price of my product."*



## The \$15/hour Minimum Wage

**Daniel N. Jenkins, DDS,  
CDE-DDS**

**Y**One current hot topic is raising the minimum wage in the USA to fifteen dollars per hour. Some cities, such as Seattle and Los Angeles have already passed laws to implement the \$15/hour minimum wage. The reason for this change is to allow entry level workers to be able to earn a "living wage." Some politicians have stated that if workers are earning a higher wage there will be more that want to work – and thus, lower the unemployment and welfare rolls. Of course, they also state that with the increase in pay they will spend more money and that will boost the economy!

Many are concerned with what affect this will have on society as a whole. Will the increase in minimum wage end up causing an inflationary spike due to companies having to increase the price for their products or services? This reminds me of a cartoon in the Riverside Press-Enterprise in the 1970's. It showed a man with a hard hat in solitary debate as to whether his union should strike for higher pay. He said, "I think we should be paid more. But...I know if I'm paid more it will raise the cost for the company to do business. That will end up costing more for everyone else to live...including our own union members. If the price of goods and services start going up, the government may enact price controls. No one likes price controls. We could go into a recession. If we go into a recession many of us might lose our jobs!" Then, he is shown contemplating. Finally he says, "We will just have to get used to price controls. But FIRST..." (As he puts on his hard hat and raises his strike sign), "We strike!"

Now, while I have yet to hear of a strike in dental offices, I have known of a whole office walking out

on a Friday morning during a procedure with the schedule packed full! (Not my office!) That walk-out was over more than a low pay rate but, it indicates what can happen with an unhappy staff.

What can happen are employees leaving to work in higher paying dental offices or in fields other than dentistry. I've had many patients express how they used to work as a dental assistant but left to work in something else. When I would ask, "Why?" they typically answered that it was for better pay.

There are many dentists that have most of their staff working at a pay rate below \$15/hr. This could have a damaging effect on their overhead. The typical payroll overhead for dental offices is 30%. (Some do manage less.) If an office is producing \$400,000/year, the payroll would be around \$120,000. If that office's payroll jumped by 50%, (Signifying a jump from minimum wage to \$15/hr.), the payroll would go up to \$180,000/year or an increase of \$60,000. This would be an overall office overhead increase of 15%. While the frequently mentioned ideal overhead figure is 50% I have talked privately with many dentist friends whose overhead is over 80% and some that is up to 90%. That could mean an increase in overhead to 95% for those running at 80%!

What will dentists do to compensate for the increase in employee compensation? In discussing this with various business owners the most common response is, "I will raise the price of my product." That is a natural response for business. But, while there is a business aspect of dentistry there is a wrinkle that business typically does not face – price controls.

Many dental offices are signed up with various insurance plans that hold them to an agreement for the fees set by the insurance company. It does not matter if the cost of dentistry overhead increases, the contract is binding as long as the dentist is accepting the insurance company's subscribers to be his patients. Many dentists do not feel they can



afford to drop their agreements with the insurance companies – they are going to have to figure something out about this potential problem.

I asked a dentist friend in Seattle how she felt about Seattle voting to increase the minimum wage to \$15/hr. She said, "It does nothing to redistribute the wealth to entry level employees as it is intended. The business will either lay off employees to afford the kept \$15 ones or it will pass the costs onto the customer. We have no entry level employees in our office so we are not affected that way but we use labs and other services whose costs will increase, they will pass that price onto us and we will absorb it until it hurts and then raise our fees as needed." In her case, while the employees all earn over \$15/hr the side effects will be an increase in other overhead costs such as lab fees, supplies, and probably even rent. If each area of overhead increased by one percent it could add another 5% - which would be more than devastating for those at 80% and over for their overhead. I should add that there is the possibility that those staff members that are already earning above \$15/hr will argue that they too should receive a 50% increase in their pay – or at least a \$6/hr increase!

Some ideas I've heard and thought of to adjust to the increase of minimum wage are:

1. Reduce staff and reassign cross trained duties.
2. Hire advanced trained staff at a higher rate and use fewer staff.
3. Work fewer hours and pack schedule tighter.
4. Hire consultant to figure this out.
5. Drop all insurance plans that do not raise their fee allotments appropriately for your zip code.

(By the way...a dental insurance company whose name starts with a color has already filed papers to decrease their fee allotments by 10% this year!

This is a topic that will need much more discussion and I encourage all members, whether you accept insurance programs or not, to not only "be aware," but try to come up with creative ways to help our fellow dentists. One of our purposes of having a dental organization is to help each other provide better care for our patients – how can we do that if we can't stay in business?

## Dental Humor

### "Don't Look at Gift Horse in the Mouth..."

down at the head table, he suddenly realized that he had forgotten to get his false teeth. Turning to the man next to him he said, "I forgot my teeth." The man said, "No problem." With that he reached into his pocket and pulled out a pair of false teeth.

"Try these," he said. The speaker tried them. "Too loose," he said. The man then said, "I have another pair...try these." The speaker tried them and responded, "Too tight." The man was not taken back at all. He then said, "I have one more pair...try them." The speaker said, "They fit perfectly." With that he ate his meal and gave his address.

After the dinner meeting was over, the speaker went over to thank the man who had helped him. "I want to thank you for coming to my aid. Where is your office? I've been looking for a good dentist." The man replied, I'm not a dentist. . . I'm the local undertaker. into the garbage disposal. So, I need a new set!

# Help is one call away.

## The CDA Well-Being Program

Concerned that you or a dental professional you know may have an alcohol or chemical dependency problem? Support is available.

**Northern California**  
530.310.2395

**San Francisco/Bay Area**  
866.430.0922

**Southern California**  
818.437.3204 / 714.814.7732

**San Diego**  
619.275.7180



strong foundation on which to build any future programs and initiatives CDA focused their initial efforts to help establish a sufficiently staffed state office of oral health, led by a strong dental director with significant status in the state Administration, who can develop a plan of action, secure available federal and private funding, and coordinate oral health programs throughout California. Another win for dentists due to CDA!

5) Licensure by Portfolio: Dental students in California will soon officially be able to graduate with a “portfolio” model exam process over the course of their final year in dental school. In November, the Dental Board of California finalized the regulatory process of approval for the portfolio examination model and California’s dental schools can now begin the implementation process. This is the first licensure-by-portfolio-exam program in the nation. Those of us who remember the grueling 3-day California Dental Licensure Examination will now be able to say “When I finished dental school I had to prep, cast and cement a 16-unit bridge (or something to that effect) in order to practice dentistry in California” to the young, whipper-snappers just graduating from California dental schools and going right to work.

6) Paid Sick Leave Law: Beginning July 1, 2015 all small businesses (read dental practices) must begin offering three-days (24 hours) of paid sick leave. On 5/28/15 CDA published answers to important questions regarding this new law (go online to read it). If you already offer employees paid-time-off (PTO) for vacation, equal to or greater than the mandated three-days, have you satisfied the requirement? The answer: If an employer provides PTO instead of separate benefits, your policy must indicate that the employee be allowed to use the time for sick leave under the new law. Keep in mind that unlike vacation time, sick time is not paid out at the time of termination. From an administrative standpoint, separating the benefits might be beneficial. 7)

HIPAA Business Associate Agreement: HIPAA requires a dental practice to have a business associate agreement with any entity, individual, or organization that creates, receives, maintains, or transmits patient health information to perform nonclinical functions, such as claims processing

or information systems management, on behalf of the dental practice. Examples of dental practice business associates include

- Insurance claims clearing house
- Practice management software vendor
- Electronic file sharing service
- Online data back-up and storage service
- Practice management consultant

In addition, in the event of a malpractice law-suit you must have an agreement with your malpractice insurer and all attorneys who are involved. Dental laboratories, other dentists to whom you refer or receive referrals from, and the practice workforce, that includes employees, independent contractors, students and interns, are not business associates and do not require an agreement. Additionally, California law requires you to obtain specific patient authorization to share patient information with those business associates who are not third-party payers; entities that require access to the information in liability, arbitration, peer review, quality assurance, quality assessment, or medical necessity cases.

That sums it up. All of the information included above came from research using CDA’s Practice Support section of CDA.org. In my opinion, it is one of the most valuable benefits to members of CDA. Hope you all have a fantastic summer!



## Bringing The New Exec. Up To Speed New Developments at Your Dental Society

*John C. Fields, Executive Director*

**H**ard to believe 2015 is half over... It seems the last six months have been a blur, racing by at an accelerating pace. For the past four months, I've had the pleasure of serving as your executive director here at the Tri-County Dental Society and I've been immersing myself in every aspect of the position. In early April, I spent two full days at the CDA in Sacramento, meeting with all the different facets of that fantastic organization. The wide array of essential services and important benefits that are provided to our members through tripartite membership represent an outstanding value. Truly, there's a lot of power in "The Power of Three." Working in the non-profit sector for 35 years and serving as the executive director for both regional and state-wide membership associations, I can tell you this unique tripartite arrangement makes all the difference in the world. For a member to be able to make one annual dues payment and simultaneously be a member of the national, state, and local counterparts of a professional organization is a great benefit to the member and to all three levels of the organization. It fosters consistency, coordination and unity. Everyone wins, the member, most of all.

I have started serving on the advisory committees for: the San Joaquin Valley College Dental Hygiene Program in Ontario, the Concorde College Dental Hygiene program in San Bernardino and both the Dental Hygiene and Dental Assistant programs at Moreno Valley College in Moreno Valley. Former executive director Penny Gage had served on these advisory committees before me and I will continue to represent TCDS, assisting these programs to grow and flourish.

In April, I attended the ADA Recruitment and Retention Conference in Chicago, along with Dr. Evangelos Rossopoulos and Shehara Gunasekera. We received an in-depth tour of the organization and got to meet ADA President Dr. Maxine Feinberg. Once again, what a tremendous wealth of services and information! Later in April I attended Western University's Honors Day and gave a raffle prize to a lucky senior on behalf of TCDS. We closed out April and opened May coordi-



nating our TCDS Hospitality Suite at CDA Presents Anaheim.

Check out our Tri-County Dental Society Facebook Page <https://www.facebook.com/TriCountyDental->

*Continued on pg 8*



Society and please “Like” us. We’ve made a few improvements and recruited a lot more followers. Please review the page and tell us what you think... This is YOUR organization and your input is always welcome. We’ll be beefing up our LinkedIn page next! Stand by... I joined Dr. Archana Sheth at a special dinner at the Mission Inn honoring Congressman Ken Calvert and at our May 12th board meeting, we were honored by a special visit and presentation from CDA Executive Director, Peter DuBois. (Check out our cover photo). On Friday of that same week, we coordinated a “Give Families A Smile” Clinic in Redlands. Special thanks to Dr. Stephanie Calvillo for her graciousness and willingness to lend a hand, to our Community Health Committee, and to TCDS staffer Sally Medina for coordinating the clinic. That same day, we met with key leadership at the Western University - College of Dental Medicine to determine how we can better assist students and recent graduates. Dean of the College, Dr. Steven Friedrichsen, shared a presentation with us regarding the past, present and future of the dental program at Western and then gave us a comprehensive tour of all the venues associated with the program. Linking mentors with mentees appears to be a major priority.

Also in May I got my first taste of our Peer Review process. Working with Dr. Mark Harris, I scheduled two separate review panels, one in Upland and another in Temecula.

The following week, I attended the graduate ceremony for the Western University dental graduates in Pasadena and the awards ceremony for the Loma Linda University – School of Dentistry in Loma Linda. That same day, as I returned from Loma Linda, we closed out the week with a very successful shredding event. Despite some intermittent sprinkles throughout the day and a second shredding truck that mysteriously got lost somewhere between San Dimas and Riverside for 90 minutes, we processed over 500 boxes of material. Special thanks to Drs. Archana Sheth, Narendra Vyas, Leonard Raimondo, Mike Mashni, and Doug Brown for going above and be-

yond... and to our Membership Committee and TCDS staffer Shehara Gunasekera for coordinating a great event.

June proved to be a busy month as well. More peer review panel scheduling, one in San Bernardino and the other in Riverside. In June we met with key leadership at the Loma Linda University - School of Dentistry to determine how we can better assist students and recent graduates. Drs. Daley, Stacey, and Richardson gave us their insights on how we could best serve current students and recent graduates and, once again, it was clear that linking mentors with mentees is a major priority. Later that same evening, we coordinated a continuing education course featuring Victor Rodriguez. Special thanks to our sponsor BioHorizons, our Continuing Education Committee and to TCDS staffer Sally Medina for another successful event! Another important event included the Special House of Delegates meeting on Friday June 19 in Sacramento. TCDS was well represented as important decisions were made regarding the establishment and funding of The Dentists Service Company (TDSC).

Have a great summer and please let us know how we’re doing. Feedback and new ideas are always welcome. Help us to help you. Thanks, John





## Nominating Committee Selects Slate for 2016

As required by the Tri-County Dental Society Bylaws, the Nominating Committee is presenting its recommendations for the officers to serve on the board of directors for 2016. The committee, headed by Dr. Gerald M. Middleton, presents the following slate:egates, October 16-18, 2015, in Sacramento.

President:	Evangelos Rossopoulos
President-Elect:	Judy Wipf
Vice President:	Wayne S. Nakamura
Secretary-Treasurer:	Michael Mashni
Director:	Deborah M. Hutton
Director:	Denine T. Rice
Director at Large:	Paul Simetays

Other board members who remain on the board are:

Douglas M. Brown, Immediate Past President  
Hemant N. Joshi, Director  
Katherine Cooke, Director  
Gerald M. Middleton, CDA Trustee  
Kenneth Harrison, CDA Trustee  
Daniel N. Jenkins, Editor  
Steven W. Friedrichsen, Dean, WUHS/CDM  
Ronald Dailey, Dean, LLU/SD

Additional nominations for officers and directors may be made by an active, dual or life member of the Society, provided such nomination is supported by the endorsing signatures of 15 active, dual or life members and received in the Tri-County Dental Society office by August 10.

Candidates nominated for an office or to serve as a director, if unopposed, shall be declared elected at the close of the 30-day nominating period and will take office on January 1, 2016. In contested elections, voting will be held by mail ballot.



Practice Support

Where **smart** dentists  
get smarter.®

### REMINDER: Use professional judgment when disclosing protected health information

HIPAA allows the use of professional judgment when determining whether to disclose protected health information to a patient's family or friends. It is not necessary to have the patient's authorization to speak with those involved in the patient's care or payment for that care. For more information on HIPAA requirements, log onto [www.cda.org/compass](http://www.cda.org/compass) and go to [http://www.cda.org/LinkClick.aspx?fileticket=2oKFSMz43\\_M%3d&portalid=0](http://www.cda.org/LinkClick.aspx?fileticket=2oKFSMz43_M%3d&portalid=0).



# cda. *Anaheim 2015*







*Farewell  
Penny...*





# Dental Insurance Fairness Act

Congressman Paul A. Gosar D.D.S (AZ-04)

**I**t is only common sense that proper and affordable dental insurance be just as accessible as proper and affordable health insurance since they are inexorably linked. Today, it is universally accepted that poor dental hygiene is correlated to other serious health issues. When a person does not have proper check-ups to monitor the circumstances of their oral health and receive proper treatment and preventative measures, the consequences can be detrimental to a person's overall well-being. Tooth decay and periodontal disease can cause pain and dysfunction. It has also been linked to diabetes, heart disease, stroke, and premature, low-weight births.

For far too long, medical and dental insurance has not effectively worked together despite their obvious and necessary connection. Furthermore, consumers have not been able to coordinate these benefits from multiple insurers to use services outside of a network when necessary. These two bureaucratic barriers are holding back not only the future of dentistry but also the quality of care we can provide for our patients. These reasons are why I have been a leading advocate in Congress for implementing common sense solutions into actual practice, which is the foundation behind legislation I introduced this year - the Dental Insurance Fairness Act.

This legislation would require all health plans that offer dental benefits to provide uniform coordination of benefits. When a consumer is covered by more than one plan, the secondary insurer should be responsible for paying the remainder of the claim. The Dental Fairness Act will also permit consumers to designate payment of dental benefits to a provider who is not participating in the network known as "assignment of benefits," so that the patient does not have to pay for covered services out-of-pocket and wait to be reimbursed by the plan. To do otherwise provides the insurance industry with an unfair gain at the expense of beneficiaries. If this legislation passes it would provide a more equitable system for dental patients and one that makes dental care more affordable and accessible for consumers.

Like all dentists, nothing is more important to me than striving to provide the highest quality of care for my patients. I find it a shame that circumstances around insurance premiums, and benefits not being paid, is preventing many from receiving the proper care they need or at an elevated cost to them. We need to change a system that isn't working so people that need care can get it, especially since many are already paying for it. It's time people get their money's worth; and the Dental Insurance Fairness Act is a good first step in the right direction.



Austine Etchevery, ClickBits  
Creative Media.

*At a Glance : Yelp is another marketing tool that can be effective for the dental practice. Austine provides important considerations to make it most effective for you.*

In my last article, we focused on the benefits of LinkedIn and how it could enhance your customer base. This article focuses on Yelp and the Do's and Don'ts of using it.

Yelp is a simple on-line business tool that allows patients to tell the world if you are a quality dentist, or if your office team needs a lesson or two in customer service. Yelp can be easily setup and will include information on your business - such as hours, can include photos - so prospective patients can get to know you before they arrive, and can provide the office with feedback in the form of reviews. Getting an account set-up on Yelp is free and it does not cost you or the patient any money to use. Customers use Yelp to add quick details about your business and to let other customers know if they should visit your office. Yelp can be a fantastic benefit or a dark enemy. Nevertheless, it doesn't change the importance of using this social media platform to let patients know whom you are and what you have to offer. Yelp has been helping business owners since 2004. They seem to know what people searching for a business want.

Signing up for your free Yelp account is simple and requires a few easy steps. You will need to add your name or the name of your business; zip code, birth date and create a password. Once that is done you can add photos. Choose professional quality photos of you, your office exterior and then perhaps some of the team and the interior of your business suite. Update address and telephone information as well as add a few details about your business, such as hours of operation. Yelp is similar to Facebook and Twitter in that you can also add people to follow or write reviews for other businesses. The best way to benefit from your Yelp account is to also use your Yelp account to review

other businesses.

Choose an active email account to link to Yelp. Once you have set up and claimed your business account, information will be sent directly to this email address. This email address is where you will be notified of comments and reviews. Next look to the left-hand side on your dashboard, there will be a window, which allows you to find friends. If you have patients who are already friends with your business page on Facebook you may want to invite them to join this page as well.

**Why Yelp You Ask? It may seem simplistic and not worth your time when it comes to social media. However, this powerful tool allows multiple people to find your information every day and any time of the day."**

Once you have set up your account, you will want to scroll to the bottom section of Yelp and click the tab that says, "claim your business." This will link your business in Yelp to other social media pages you have and will allow patients to find your business among the list of other dentists.

Spend some time adding information about your business. This does not need to be as extensive as other social media sites, but there is a spot for you to add extra photos, information about the type of business you are and some specific information about you as a dentist. You may want to add where you went to school or any organizations you are a part of. Like any other social media site, you'll want to follow a few people. Don't go crazy with the following, there is no reason to follow hundreds of people, but ten or twelve can encourage people to follow you back.

Once you have confirmed your address, you are ready to have patients begin to write reviews. A few words about Yelp reviews: Yelp is a community of users who search for businesses, check-in when they arrive at the establishment, provide tips or short reviews, provide longer reviews, and many times, share photos. Yelp, in its logarithm, gives more credence to the following: Patients who have reviewed via Yelp before, patients

who have checked-in to a business before and left tips, patients who have accounts and actively search for businesses through Yelp and those who actually live and are active in the general area in which your business is located. In other words, if your patient lives in New York and gives you a shining review, it may not show up as a recommended review. And when a negative review is posted it is difficult to get it removed. Still, Yelp is incredibly important as a search and recommendation center for patients.

Yelp does not recommend you ask for reviews, but let's be honest – it's what we need to do. Be strategic and think and ask those patients who use Yelp and are happy to review you there. (Patients who do not use Yelp can certainly go other places to review your business and you should let them know what other options are available.) Reviews are critical to new patients in the area who will look to see what others are posting about you before they schedule a visit to your dental office.

Why Yelp You Ask? It may seem simplistic and not worth your time when it comes to social media. However, this powerful tool allows multiple people to find your information every day and any time of the day. If one of your potential new patients reaches out to gain information about your business, in the click of a button you can respond to what they need. If there was a problem when they were in the office you can also quickly respond in a way that lets them know you're going to help rectify the situation immediately. The power of Yelp is not lost on customers. Sometimes it is unfortunate, but you may receive a negative review. There is no limit on who can post and for the most part, what they post is not censored. When you find yourself in the situation where you have received a negative review, employ the twenty-four-hour rule. Allow twenty-four hours to pass before responding to ensure you are replying in a positive, helpful way. Provide the unsatisfied customer with an option. While you may feel you do not owe them anything, a simple response from you can sometimes diffuse a situation. They may just need to know someone is monitoring the site. Also, please know, Yelp users can modify their review or completely change it based upon the actions you take.

If you find someone has erroneously reviewed you (a non-patient) there are steps you can take to attempt to get the review removed. This is also true if you find a patient is very miserable and is posting negative remarks that are untrue about your practice.

Don't forget to update your Yelp account regularly and to check in weekly. We know you and your team are busy, and this may seem the furthest from your mind, but you don't want to forget about this impor-

tant social media outlet. If people are posting positives, you want to thank them for their time, and if there are negative reviews, you want to address them quickly. Letting this site go without monitoring puts your business at risk.

Photos are important. With Yelp the words people say are as powerful as the photos that are posted. You may want to take a photo with a patient and allow them to post it on Yelp, or have your front office person take a few photos of the latest staff outing to post. The online photos should remind existing patients of your office and help potential new patients feel more comfortable. Photos can help to build a picture of your office and your team for patients and get them feeling like they have met you before.


Treat your Yelp page as an extension of your business. If you have updated procedures or technology you are using in your office, talk about it. If you are running a special, let Yelp users know. Invite brand new patients to join and follow your Yelp page in order to get to know you, and welcome them when they do join. Utilize all the features of Yelp to create an online presence that wows your patients and excites your soon-to-be-patients.

Focus on the positive. As always, in social media, you'll want to focus on those patients who rave about your office. Those are the patients who are telling their friends about the local dentist they have visited recently. Make an effort when they are in the office to let them know; your business is on Yelp, and you would be very appreciative of them if they were willing to review you there. If your patients, who you are following, post a review about another business, you may want to post a response. This helps build a relationship and lets them know you are paying attention to the pages beyond your own business one.

Social Media takes time to build. For more information on the Do's and Don'ts of your social media contact Austine Etcheverry at [Clickbitscreativemedia@gmail.com](mailto:Clickbitscreativemedia@gmail.com).

*Austine Etcheverry is a positive, dedicated professional with over 10 years of experience in the dental field. Austine has a keen eye for designing websites and blogs. She has experience in social media and search engine optimization.*



A smiling woman with dark hair, wearing a black sleeveless top, is seated in a green dental chair. She is holding a dental instrument (a mirror) in her hands. The background shows a window with a view of trees.

**You are not  
a policy number.**



And at The Dentists Insurance Company, we won't treat you like one because we are not like other insurance companies. We were started by, and only protect, dentists. A singular focus that leads to an unparalleled knowledge of your profession and how to best protect you. It also means that TDIC is in your corner, because with us, you're never a policy number. You are a dentist.

Endorsed by the  
Tri-County  
Dental Society

**Protecting dentists. It's all we do.®**

800.733.0633 | [tdicsolutions.com](http://tdicsolutions.com) | CA Insurance Lic. #0652783

## Short Abstracts

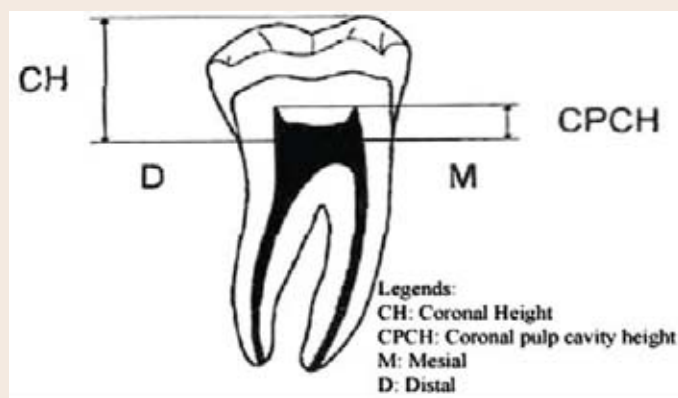
### Age estimation using lower permanent first molars on a panoramic radiograph: A digital image analysis.

Talabani RM1, Baban MT2, Mahmood MA3. J Forensic Dent Sci. 2015 May-Aug;7(2):158-62. doi: 10.4103/0975-1475.154597.

A study was carried out to analyze the efficacy and practical application for age estimation using digital panoramic radiograph to exploit image analysis to obtain metric measurement of morphological parameters of permanent mandibular first molar on Sulaimani population.

In the present study a population of known age and sex was studied and subjected to digital panoramic radiographic examination. The correlation between the reduction of coronal pulp cavity and chronological age was examined in a sample of 96 individuals distributed into four age groups: 20-29 years (29 cases), 30-39 years (29 cases), 40-49 years (26 cases) and 50-59 years (12 cases). The height (mm) of the crown (CH = coronal height) and the height (mm) of coronal pulp cavity (CPCH = coronal pulp cavity height) of 96 of first molars from all subjects was measured. The tooth-coronal index (TCI) after Ikeda et al. was computed for each tooth and regressed on real age.

<http://www.ncbi.nlm.nih.gov/pubmed/26005307>



### Using a guide template with a handpiece sleeve to locate the abutment screw position of a cement-retained implant restoration.

Kang HW1, Lee DH2. J Prosthet Dent. 2015 May 23. pii: S0022-3913(15)00204-8. doi: 10.1016/j.prosdent.2015.03.020.

The existing techniques for drilling a screw access hole in cement-retained restorations are limited by inaccurate drill guidance and ineffective cooling of the drilling area. An approach for fabricating a guide template to provide screw retrievability using computer-aided design and computer-aided manufacturing (CAD/CAM) is described. A handpiece sleeve was made by 3-dimensional printing and incorporating it into a vacuum-formed template. The handpiece

sleeve not only guides the head of the handpiece accurately but also enables the cooling water to reach the area of drilling directly.

<http://www.ncbi.nlm.nih.gov/pubmed/26013071>

## Dental Humor

### "Don't Look at Gift Horse in the Mouth..."

A dinner speaker was in such a hurry to get to the hotel that when he arrived and sat down at the head table, he suddenly realized that he had forgotten to get his false teeth. Turning to the man next to him he said, "I forgot my teeth." The man said, "No problem." With that he reached into his pocket and pulled out a pair of false teeth.

"Try these," he said. The speaker tried them. "Too loose," he said. The man then said, "I have another pair...try these." The speaker tried them and responded, "Too tight." The man was not taken back at all. He then said, "I have one more pair...try them." The speaker said, "They fit perfectly." With that he ate his meal and gave his address.

After the dinner meeting was over, the speaker went over to thank the man who had helped him. "I want to thank you for coming to my aid. Where is your office? I've been looking for a good dentist." The man replied, I'm not a dentist. . . I'm the local undertaker.

### What can a CPA do for You?

We have extensive experience with Dental Practices. The professional staff of Frank W. Stearns offers a wealth of knowledge in financial practice management. We tailor our services to meet your specific needs. We offer the highest quality of professional services designed to improve the profitability of your practice while enhancing productivity and performance.

We can assist you with:

- Practice Acquisition/Mergers
- Tax Planning and Preparation
- Dental Practice Accounting
- Computerization
- Payroll Accounting
- Retirement and Estate Planning

If we can assist you in any of these areas, please call Frank (Chip) Stearns.

#### Frank W. Stearns

Certified Public Accountant, Inc.  
2453 Falling Oak  
Riverside, CA 92506  
951-780-5100

## TCDS Membership Status Report

Active/Recent	1440
Life Active	104
Life Retired	158
Retired	29
Post Grad	13
Faculty	42
Disabled	7
Military/Public Health	4
Provisional	66
Hardship	3
Pending Applications	12
<b>TOTAL</b>	<b>1878</b>

## Toll-Free Numbers

ADA.....	(800) 621-8099
CDA.....	(800) 736-8702
CDA Member Contact Center .....	(800) CDA-SMILE
	(800) 232-7645
Practice Support Center.....	(866) 232-6362
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

### John C. Fields, Executive Director

Administration  
Governance/Ethics  
Advertising  
Extension 23 – John@tcds.org

### Sally Medina, CE Coordinator

Continuing Education  
Community Health  
Exhibitors  
Extension 21 – Sally@tcds.org  
Advertising Coordination  
Website Assistance

### Shehara Gunasekera, Membership Coordinator

Recruitment/Retention  
New Dentist Services  
Dental Student Services  
Website Assistance  
Extension 22 – Shehara@tcds.org

### HMO Consumer Complaint Hotline

(800) 400-0815

State Dept. of Corporations Consumer Services division



Plan your CE Calendar for 2015. Look at what TCDS is offering:

**September 18-** Infection Control & California Dental Practice Act *with Leslie Canham—4 CEUs*

**September 24-** Mini dental implants *with Dr. David R. Powers—2 CEUs*

**November 19 -** Your lips are moving, but I can't hear what you say-Effective patient communication for case acceptance

*with Dr. Sudhakar R. Chokka—2 CEUs*

For further details or to register go to [www.tcds.org](http://www.tcds.org) or call (951) 787-9700

Register Early  
and Save \$20.00

"Be sure to take advantage of the early bird reduced registration fee"





# A City-Wide Assessment of Oral Hygiene Needs of 1st Grade Children

**Margie Arnett, MS, Bonnie Nelson, DDS, Loma Linda University School of Dentistry**

Oral health is an essential component of overall health, but low-income and inter-city school children often do not have the essentials to provide them even the most basic level of hygiene and decay prevention.<sup>1,2</sup> Dental problems keep California students out of school an estimated 504,000 days each year, costing schools about \$29 million in lost attendance based-funding.<sup>3</sup> One approach to bridging this gap is the participation of dental schools and their students in community-based dental education (CBDE).<sup>4</sup> Oral hygiene instruction through educational intervention with school children has shown to reduce plaque and improve oral hygiene.<sup>1, 5-8</sup> Experts recommend providing hands-on training, in addition to lectures to serve as a motivational tool for the school children.<sup>6</sup>

## OBJECTIVES

The purpose of this study was to teach oral hygiene to all first-grade children enrolled in public education at schools in the San Bernardino City Unified School District (SBCUSD), which includes 42 schools in the city of San Bernardino and five schools in the city of Highland in California. We assessed self-reports of children who reported not having a toothbrush, children who shared their toothbrush, children without available toothpaste, and children who perceived having some current pain in their oral cavity.

## METHODS

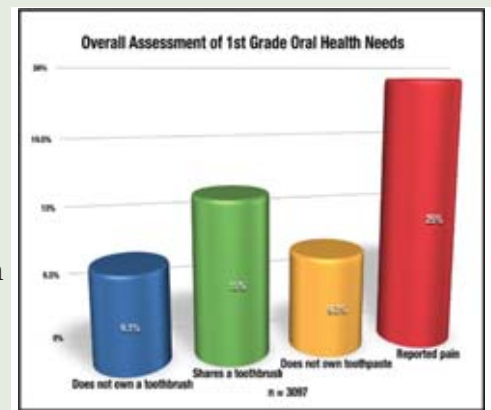
Subsequent to IRB approval and approval from the school board of the city of San Bernardino schools, forty-seven elementary schools were contacted to participate in the study. Oral hygiene instructions were

provided in assembly format and then a four-question survey was presented to each individual child.

On average, schools had 20 students in each class, with four classes at each school, and a total of 3,097 first grade children were surveyed. The students were provided with oral health kits; consisting of a toothbrush, toothpaste, and a flyer directing them to a community clinic available to them for any necessary dental treatment.

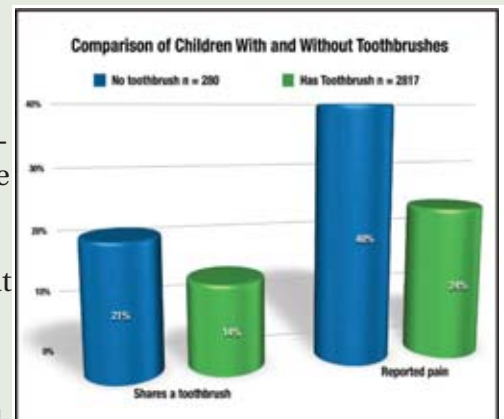
## RESULTS

Of the 47 schools visited, 3,097 children were participants in the preventive education sessions and in the submission of answers to the four question surveys. The findings from this study revealed 465 first grade children in San Bernardino share a toothbrush (15%), 288 do not own a



toothbrush and 280 do not own toothpaste (10%) and 785 self-report some sort of mouth pain (25%). (Figure 1) Of the 280 children who did not own a toothbrush, 21% of them reported sharing a toothbrush with a sibling and 40% of them reported being in pain. Of the 2,817 children that owned a toothbrush, 14.4% of them reported sharing their toothbrush and 24% of them reported being in pain. (Figure 2)

At three of the San Bernardino schools, more than 20% of the children did not have a toothbrush, with the highest percentage of first grade children without toothbrushes (30%) at one of the elementary schools. In the city of Highland,



*Continued on pg 22*

**R.E.O. X-PRESS**  
  
**Diamantina Ochoa Broker - Realtor**  
 Connection For All Your Real Estate Needs  
 Southwest Riverside County Association Of Realtors

Broker I.D. 01049085  
 N.R.D.S. 193519843  
 r.e.o.xpressrealestate@gmail.com

Office (951) 309-3196  
 Cell (951) 437-0419  
 Fax (951) 241-0535

#### Connection For All Your Real Estate Needs

- Be Your Own Landlord
- No More Rent Increases
- Direct Lender Referrals For All Real Estate Needs
- Qualified Buyers Can Secure Financing With As Low As 10% Down Payment For Commercial



**Diamantina Ochoa, Broker**



#### Offering Over 22 Years Experience In Dental Brokering

- No long Term Listing Agreement
- Reasonable Brokers Commission Structure
- Broker Will Personally Pre-Qualify Buyer Before Introducing To Seller
- Broker Will Personally Show Practice To All Qualified Buyers
- Broker Providing Hands-On Attention Throughout The Entire Transition Process & Will Provide Seller With Weekly Updates

While serving the Dental Industry I was frequently asked to find Real Estate for Dentist who already had an established practice but desired to purchase a building. I came to realize this was an essential need for most Dentist. I started my professional career in the 80's selling Real Estate, so I decided to combine both services in order to better serve the needs of Dental Professionals. Sign up with R.E.O. X-PRESS NOW, and allow my services to help you find your new location.

If you are thinking of selling your Dental Practice and desire personal attention, then look no further. My goal is NOT to handle a quantity of listings, but to provide quality service in a timely manner using the right strategies and matching client requirement. Call NOW, to see if your practice meets the required criteria.

Office (951) 309-3196 Cell (951) 437-0914 E-Fax (800) 532-0739  
 tinaochoa.dentalbroker@gmail.com r.e.o.xpressrealestate@gmail.com



## CDA establishes The Dentists Service Company

**C**DA is constantly looking for new ways to support members in their practices and has created a new subsidiary called The Dentists Service Company (TDSC), which has been approved by the CDA House of Delegates.

TDSC will support members with the business side of their practices and help them be more competitive and efficient. While ensuring all clinical-care decisions and practice ownership remain with dentists, TDSC plans to offer group purchasing of supplies, practice advising, marketing, human resources and assistance with forming group practices.

“Members have expressed a strong interest in CDA pursuing a management services company,” said CDA President Walter Weber, DDS. “We are committed to building TDSC to support members’ needs with a goal of helping them achieve efficiencies in their practices.”

During the next couple of years, TDSC will be in a development phase. Following that, TDSC’s services will be available to all CDA members, both general dentists and specialists, and the group-purchasing option will be accessible, along with existing Practice Support resources, as a CDA member benefit. “We are very excited about TDSC and the new opportunities it will provide to members — all coming from a trusted source, CDA,” Weber said.

CDA has a long history of responding to member needs — from the malpractice crisis that led to TDIC’s formation in 1980 to the more recent creation of CDA Practice Support and Practice Advising. As CDA moves forward with TDSC’s development and implementation process, we will continue to share information with members in the CDA Update, e-newsletter and on cda.org.



**Jeff Grandfield and Dale Willerton**

## *At a Glance :*

*Leasing or purchasing a space is a major decision. Dale and Jeff provide several pros and cons for the dentist to consider. You may want to keep these handy as your career journey proceeds so when the opportunity comes you are ready.*

## **Pros and Cons of Buying vs. Leasing Space for Your Dental Practice**

**W**hen it comes to running a dental office, you can either lease or purchase commercial property to practice from. Which option is better? Much of this depends on your own situation, comfort level, and future plans. Yet another consideration is that leasable space is much more plentiful while retail properties for sale are not.

Dentists can dream of purchasing land or constructing their own building. The main reason that dream cannot, or does not, come to be is this: approximately 98% of all suitable commercial space is for lease, not for sale. Yes, it's that simple. Many good locations for a dental practice such as office towers and strip plazas are already owned by a landlord who does not want to sell you the property, but rather wants you as a long-term, rent-paying tenant (and dentists, typically, are very desirable, steady tenants who can remain in the same property for 20 – 30 years – and beyond when the practice is sold).

Now, if you are in the enviable position to consider purchasing a site, there are several opportunities in which you may be able to purchase property: a business condo where you occupy the one unit, a strata title unit, small strip plazas or centres where you're now a landlord to other tenants as well, or stand-alone buildings on a small piece of land. Major factors that impact this decision for the average dental tenant are the long-term commitment of purchasing a building and the ability to obtain the financing. Before you buy or lease commercial property however, here are just a few of the pros and cons for each process for you to carefully consider:

**Pro 1:** It is better to pay a mortgage than a lease because eventually you will pay off the mortgage whereas lease payments are forever. More often than not, the monthly mortgage payment is also very

close to the monthly rent payment.

**Pro 2:** Your equity in your property will typically increase over time. The building and the land value can both increase. Obviously, appreciated value will vary from location to location and city to city.

**Pro 3:** You don't have landlord hassles; you feel in control and can open and close your practice when you want. Yes, ownership is empowering and it feels great (most of the time).

**Con 1:** You might have to sacrifice on location – strength or visibility. Many of the ownership opportunities are in secondary locations and not on the busier streets.

**Con 2:** You would have to move out or away from your current space giving up a well-established location that another dentist might lease. Landlords almost always try to replace one industry tenant with another so the possible competition should be a potential concern to you. If you are vacating an existing location, you may be leaving a great opportunity for a competitor to move into your practice location.

**Con 3:** You may have to become a handyman or deal with various ownership issues like Heating, Ventilation and Air Conditioning (HVAC) units, building maintenance, grass cutting, snow removal, etc. that otherwise a landlord would have taken care of for you.

### **Case Study**

We remember a dentist who hired The Lease Coach to negotiate his lease renewal. He was in a typical strip plaza – located across from a grocery store. We successfully achieved a \$4.00/square foot rent reduction; however, the dentist explained that he would prefer to own his own property. We scoured the prime retail areas; however, there were not any suit-



able buildings for sale, but we found him a parcel of land and recommended the dentist build his building as big as possible (within the city's restrictions to allow for green space and parking around the building). While the dentist did not need the extra space himself, we explained that another tenant could lease it (supplying additional income) and facilitated a deal with an Optometrist to work alongside. When we met this dentist again, he genuinely thanked us for our recommendation. His investment had worked out very well and he knew he could keep the building long after he retired and sold his practice.

As a final note, when making the decision to purchase or lease, don't decide to purchase simply for the sake of owning real estate. Consider purchasing a space or property only if you would be prepared to lease that same location anyway.

For a complimentary copy of our CD, Leasing Do's & Don'ts for Dental Tenants, please e mail DaleWillerton@TheLeaseCoach.com.

*Dale Willerton and Jeff Grandfield - The Lease Coach are Commercial Lease Consultants who work exclusively for tenants. Dale and Jeff are professional speakers and co-authors of Negotiating Commercial Leases & Renewals For Dummies (Wiley, 2013). For more information call 1-800-738-9202, e-mail DaleWillerton@TheLeaseCoach.com, or visit [www.TheLeaseCoach.com](http://www.TheLeaseCoach.com).*



**A to Z** Everything a dentist needs, for less.

You can start saving today. Check out all the details at [cdaendorsedprograms.com](http://cdaendorsedprograms.com)

**cda**  
ENDORSED PROGRAMS

## Unclassifieds

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

**For Rent.** Dental office for rent in Riverside. Plumbed for 5 operatories. Prime location. Well maintained. Excellent parking. Call Mina Boyd for more information. (909) 241-8907.

**Position open** in Palm Springs, Palm Desert, and High Desert CA for a motivated and experienced periodontist to add to our busy group general practice. Work 2-4 days a month in our state of the art offices, excellent compensation and flexible scheduling. Must have a CA license and more than one year of experience preferred. For more information please call (818) 389-7288, or send your resume to [periodontalproviders@hotmail.com](mailto:periodontalproviders@hotmail.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.

**Fully Built Out Dental Office Space With High Visibility Frontage.** Great opportunity for a Dental Group/Specialists to expand into upscale Rancho Mirage area with prominent location. 4113 sq ft with fully built out 11 operatories, Drs. Offices, modern lab, consult rooms, custom reception, two restrooms, storage and ample parking. Meeting Rooms available on facility. Please visit [www.thedesertpearl.com](http://www.thedesertpearl.com). Call 760-904-4119 for inquiries.

**Whippany dental office space available** (1700 sq. ft + storage). Set up for orthodontic practice. Chairs and equipment negotiable. Parking. Perfect for start-up or satellite practice. \$20 /sq ft. 973-386-0300.

**Dentists needed** to be Clinical Screeners for Denti-Cal. Must have 10 years of clinical experience. Do not have to be a Denti-Cal provider. Contact : Sholi Rotblatt D.D.S. Clinical Screening Program Manager 916-861-2524 [srotblatt@delta.org](mailto:srotblatt@delta.org)

of those children who didn't own a toothbrush, 67% of them reported being in pain. In San Bernardino, 37% of the children without a toothbrush reported pain.

#### CONCLUSIONS

Dental disease transmission from shared toothbrushes and dental decay from the lack of having available decay-preventing fluoridated toothpastes are known to be a significant public health problem in young dentition. There is a growing body of evidence that links the health of teeth and gums to the rest of the body; thus reinforcing the importance of oral health on overall health.

#### RECOMMENDATIONS

Earlier efforts in the Kindergarten classes to provide motivational education and supply children with the most basic of hygiene aids might prove beneficial. A sealant program could have success in the prevention of oral pain and dental disease in young children. Additional studies could better identify the problem, by evaluating school absences related to dental care and assessing the oral needs of children in other grades.

#### REFERENCES

1. Culyer, LM, Brown EF, Kelly KA. Oral health care for underserved children in the United States. J Comm Health Nurs. 2014;31(1)1-7.



**Setareh Aghabak Lavasani, DDS**  
General Dentist  
University of Texas, San Antonio,  
TX, 2014  
309 E. Second St.  
Pomona, CA 91766

**Rosalinda Allen, DDS**  
General Dentist  
USC, 1999  
3686 Riverside Dr Ste G  
Chino, CA 91789-4158  
909.591.1299

**Ryan Falke, DDS**  
Oral Surgeon  
LLU/SD, 2009 (DDS)  
LLU/SD, 2015 (OMFS)  
11092 Anderson St.  
Prince Hall, OMFS Dept  
Loma Linda, CA 92350-1706  
909.796.3621

**Hamed Ghorbanian, DDS**  
General Dentist  
Marquette University, WI, 1989  
2031 River Rd.  
Norco, CA 92860-3307  
951.372.9094

**Effuah Harris, DDS**  
General Dentist  
USC, 1996 (DDS)  
309 E. Second St. Pomona, CA  
91766 909.469.8642

**Ayed Hawatmeh, DDS**  
General Dentist  
USC, 2001  
3495 Concours # A  
Ontario, CA 91764  
909.483.1379

**Shiang Bor Huang, DDS**  
General Dentist  
LLU/SD, 2014  
81955 US Highway 111 Ste 106  
Indio, CA 92201-5445  
909.557.5860

**Anne Le, DMD**  
General Dentist  
Tufts University School of  
Dental Medicine, MA, 1994  
3903 Tyler St.  
Riverside, CA 92503  
951.353.9824

**Richard Lim, DDS**  
General Dentist  
LLU/SD, 2013  
No Practice Address Available

**Maria Molano, DDS**  
General Dentist  
International, 1995  
LLU/School of Dentistry  
No Practice Address Available

**Katie Ngo, DDS**  
General Dentist  
UCSF, 2003  
800 Magnolia Ave #118  
Corona, CA 92879-3123  
951.735.2224

**Yen Shih, DDS**  
General Dentist  
USC, 1998  
2413 S Grove Ave.  
Ontario, CA 91761-6225  
626.454.0865

**Ronald Simus, DDS**  
Orthodontist  
LLU/SD, 1990 (DDS)  
LLU/SD, 1993 (Ortho)  
7170 Indiana Avenue  
Riverside, CA 92504  
951.248.0567

**Sutheep Srikureja, DDS**  
General Dentist  
LLU/SD, 2013  
No Practice Address Available

**Cecilia Xijie Yang, DDS**  
General Dentist  
Shanghai Medical University  
Dental School, China, 1984  
919 E. Main Street  
Barstow, CA 92311  
760.256.2425

2. Edelstein BL. The Cost of Caring: Emergency Oral Health Services. National Center for Education in Maternal and Child Health, policy brief. May 1998.
3. Center for Health Policy Interview Survey, UCLA, 2007.  
<http://ask.chis.ucla.edu/main/DQ3/output.asp> Accessed on July 30, 2013.
4. Arnett, MR, Forde, R. Increasing Student Diversity and Cultural Competence as a Part of Loma Linda University School of Dentistry's Service Mission. 2012; 76(6): 721-727.
5. Rodrigues JA, dos Santos PA, Baseggio W, Corona SA, Palma-Dibb RG, Garcia PP. Oral hygiene in direct instruction and periodic reinforcements:

- effects on index plaque in school children. J Clin Ped Dent, 2009; 34(1):31-4.
6. Goel P, Sehgal M, Mittal R. Evaluating the effectiveness of school-based dental health education program among children of different socioeconomic groups. J Ind Soc Ped Prev Dent, 2005; 23(3):131-3.
7. Worthington HV, Hill KB, Mooney J, Hamilton FA, Blinkhorn AS. A cluster randomized controlled trial of a dental health education program for 10-year-old children. Journal of public health dentistry 2001; 61(1):22-7.
8. Kapadia H, Stallard, Volpe, Rustogi, Butler M. Evaluation of a curriculum for dental health in 3rd grade school children in in Mumbai, India.

## What's Happening?

Day/Date	Event Details
Fri. July 3	Independence Day Observed TCDS Office Closed
Sun. Aug. 16	TCDS Annual Meeting and Party Fiesta Village, Colton 10 a.m. – 2 p.m.
Aug. 20-22	CDA Presents San Francisco
Tues. Sept. 7	Labor Day TCDS Office Closed
Tues. Sept. 8	Board of Directors Meeting TCDS Office 6:45 p.m.
Fri. Sept. 18	Continuing Education Meeting TCDS Office Seminar: 8:30 a.m. – 12:40 p.m. "Infection Control & CA Dental Practice Act" Leslie Canham, CDA, RDA 2 CEUs – Seating is Limited
Fri. Sept. 24	Continuing Education Meeting TCDS Office Social Hour: 5:30 p.m. Seminar: 6:15 – 8:30 p.m. "Mini Dental Implants" Dr. David R. Powers 2 CEUs – Seating is Limited

**Office Based Dental Anesthesia Services**  
**IV Sedation to General Endotracheal Anesthesia**  
**Ages: Pediatrics To Adults**

**Jen Sun, M.D.**

Licensed, Board Certified, Insured

*For More Information:*

**40winksanes@gmail.com 206-948-2468**

**\* SUPPORTED AUTONOMY**

**You want to work with people who share your passion and values.**

Hear what numerous supported owner dentists have to say about the advantages of **PRIVATE PRACTICE +<sup>®</sup>** at: [PacificDentalServices.com](http://PacificDentalServices.com)

For more information about associate and owner dentist opportunities, email: [socaldentistrecruiters@pacden.com](mailto:socaldentistrecruiters@pacden.com)

[f](#) [t](#) [in](#) [p](#) [y](#)

**Sonny Chokka, DDS**  
Multiple-Office Owner Dentist

**PACIFIC DENTAL SERVICES<sup>®</sup>**





## BULLETIN

3993 Jurupa Ave., Suite 104  
Riverside, CA 92506  
(951) 787-9700 • (800) 287-8237  
FAX (951) 787-9703

ADDRESS SERVICE REQUESTED

PRESORTED STANDARD  
US POSTAGE  
PAID  
SAN DIMAS CA  
PERMIT NO 104

*The opinions expressed in this newsletter are those of the author(s) and do not necessarily represent those of the Tri-County Dental Society. TCDS does not assume liability for contents of advertisements.*

DATED MATERIAL



# TRI-COUNTY DENTAL SOCIETY'S ANNUAL MEETING AUG. 16<sup>TH</sup> FROM 10AM-2PM

## ALL-ACCESS PASS

UNLIMITED WATERSLIDES,  
MINI GOLF, GO KARTS,  
AMUSEMENT RIDES, ROLLER  
SKATING AND ONE MISSION  
OF LAZER TAG

- Party games for children with raffle prizes donated by Fiesta Village (ie -Golf Passes, Dairy Queen Treats & Lazer Tag Passes)
- Our Bogey and Slugger mascots will make an appearance & interact with the kids
- Parking is free!

LOCATED AT



INCLUDES  
A DELICIOUS  
STEAK HOUSE  
MEAL!



Chang's Joints



909-824-1111 • FIESTAVILLAGE.COM

1405 E. WASHINGTON ST. COLTON, CA

RESERVE YOUR SPACE @ [HTTP://BIT.LY/1BITY0Z](http://bit.ly/1BITY0Z)

THANK YOU FOR BEING A TCDS MEMBER

