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ARTICULATOR



LEADERSHIP UNPACKED

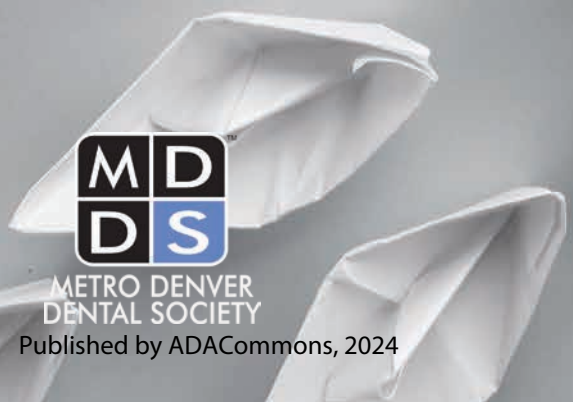
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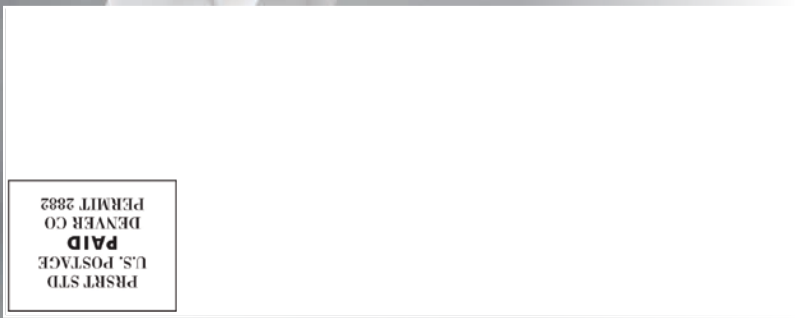
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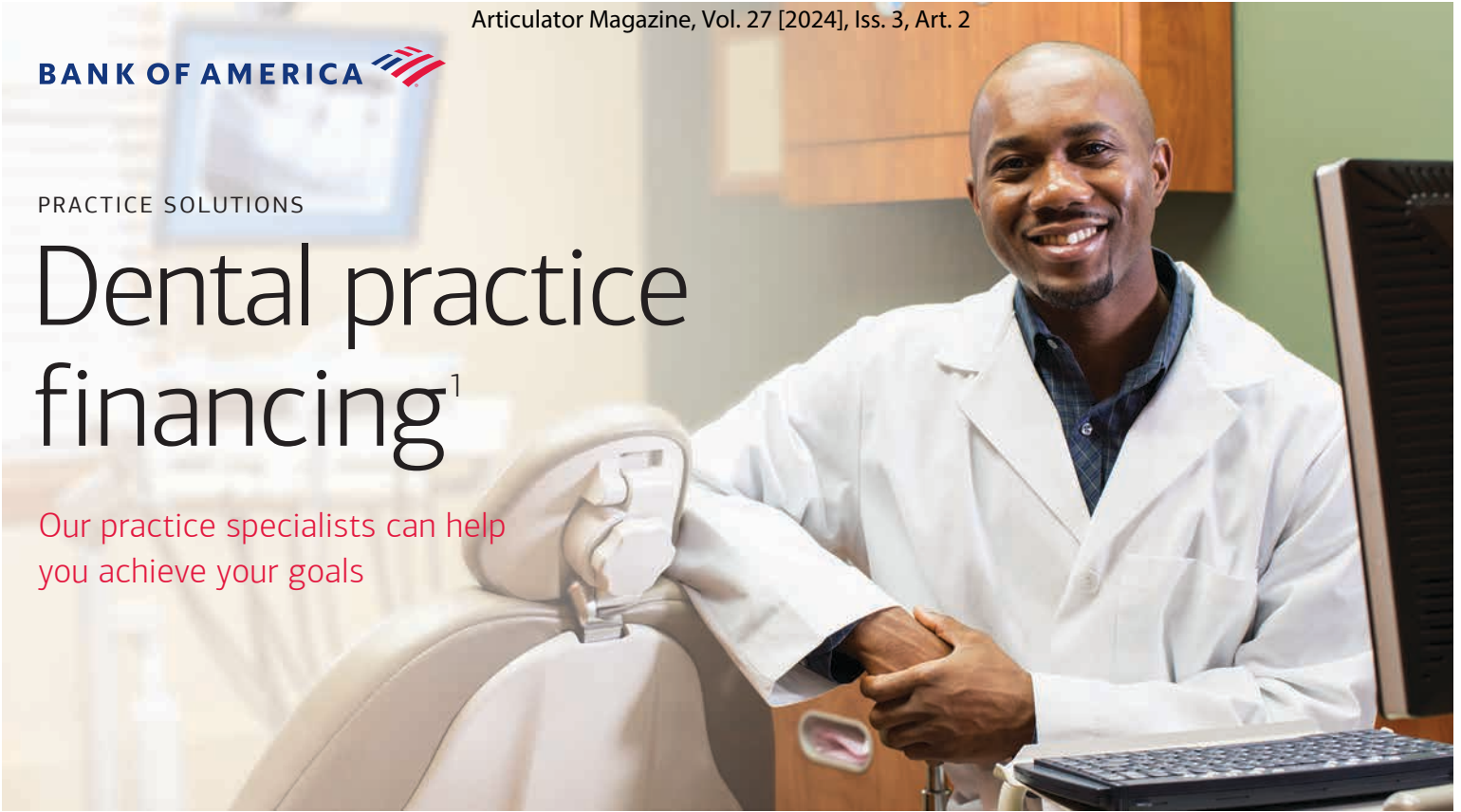
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what's inside?

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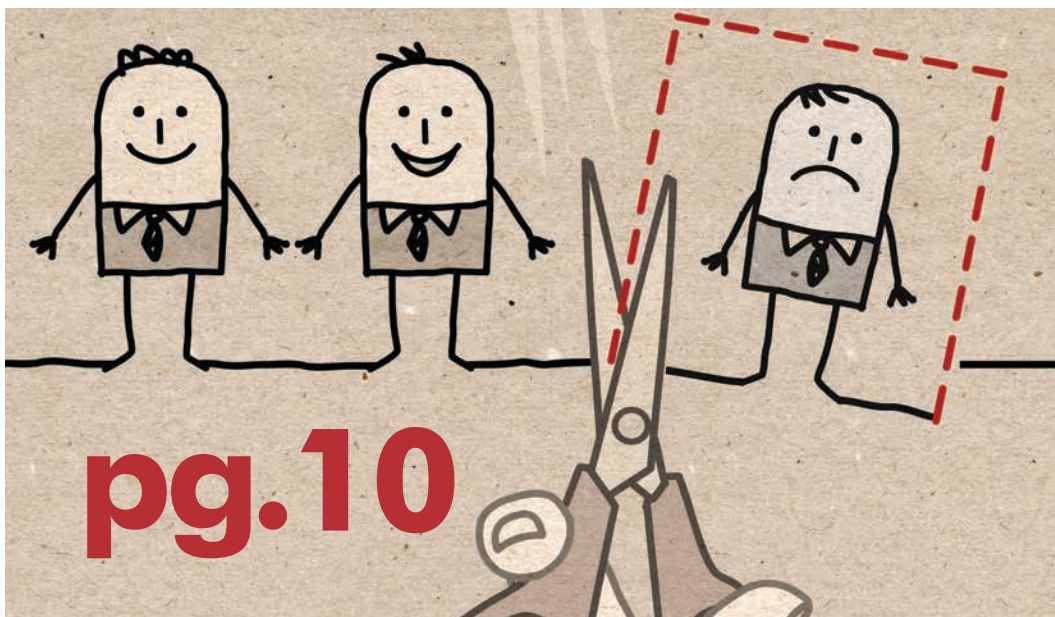
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Growth Through Leadership

By **Patrick Prendergast, DDS**



You did it! The 2022 Rocky Mountain Dental Convention (RMDC) was a wonderful success. Thanks to endless effort, you brought the RMDC back to an event that let us see the smiling faces of our friends and colleagues as we learned and laughed together. My deepest gratitude to the hundreds of MDDS volunteers, and MDDS team for relentless work in a changing environment. I especially wish to thank Dr. Nicole Furuta, this year's RMDC Convention Chair. Dr. Furuta and her family dedicated many hours of time, concentration and talent to weave together such an important meeting. Simply seeing the constant smiles on the faces of dental teams, vendors, and our hosts in the Convention Center, showed each of us how important social interactions are for learning and life. For those of you unable to be with us in person, we were pleased to also offer a whole virtual convention. And, over forty on-demand courses. Plans are well underway for the 2023 RMDC, as we look forward to another wonderful event.

"The RMDC is just one example of numerous events brought to us each year by volunteer leaders in our Society. Your colleagues freely give of their time and talent in so many ways to create the energy that brings your MDDS to life."

The RMDC is just one example of numerous events brought to us each year by volunteer leaders in our Society. Your colleagues freely give of their time and talent in so many ways to create the energy that brings your MDDS to life. There are so many places and ways to join in and leave your mark on the spirit of MDDS. Our committees are as varied as our members, and they all hunger

for new ideas, perspectives and energy. Volunteering helps each of us grow, and teaches us how to become better leaders for our families, our practices, our society and our community. These skills are learned and are available to anyone willing to help. It all starts with a simple phone call to a colleague or anyone on the MDDS team. Chances are if you have an idea or passion, MDDS has a place to turn that into action and measurable change. Please join us! One of the pandemic's biggest casualties has been the spread of fear. In these uncertain times, we have all grown more comfortable withdrawing than engaging. Sadly, the mental health aspects of this fear are showing up more clearly every day. Come engage with fellow dentists at MDDS.

Leadership is how progress advances by design, without it we stumble on by default. Both approaches create change, but the former brings far fewer dead ends we must endure. There is a leader in each one of us, and it blossoms only when we feed and allow it to grow. If you wonder how tall and beautiful a leader can become, look to a tree for example. How tall it will grow depends on its nourishment and support system. As it grows, it becomes stronger, able to endure the forces that would stunt or even kill its progress. Like trees, leaders

can eventually grow dormant and return to the earth to give their energy and support to those coming after them.

Let your leadership grow...you will amaze yourself. ■

New Members, Welcome!

Dr. Raed Ammari

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MEMBER SPOTLIGHT

Evin Worthington, DDS
Lowry Main Street Dental
Denver, CO

You decided on dentistry as a second career. How did you make the leap from real estate to the dental profession?

"I always wanted to be a dentist, I just got sidetracked there for a bit. Real Estate was a great way to learn about finances and the art of negotiation, but my true calling has always been dentistry. They say that 'Dentist' stands for doctor-engineer-artist. My favorite part about dentistry is the artistry involved, how it affects my patients and the potential it has to change their lives."

What made you decide to become more involved in organized dentistry?

"I have always enjoyed being in a leadership position within my profession. I like to know how my industry is being affected by policymakers, and most importantly, I value advocating for my peers."

What is something you have learned since joining the MDDS Board that you wish other dentists knew?

"That there is a group of Dentists who come together, on a regular basis, to ensure that the dental community is being represented and advocated for. Not only that, but this group of Dentists is quite diverse, which further speaks to the care and consideration given to our dental community as a whole."

As a world traveler, what has been your favorite place? And how do you think experiencing different cultures and places impacts your dental career?

"To date, my favorite has definitely been Bali. The culture, the rich history, the scenery, and of course, the beaches. Visiting different countries, particularly those with populations living in poverty, sheds light on the disparities that exist in terms of access to healthcare. This definitely makes me want to return in the future so I may lend my professional skills to help these communities."

If you weren't practicing dentistry, what would you be doing?

"I'd be fulfilling my other dream of being a professional ballerina. Too bad I'm too old for that now..."

What advice would you give someone trying to determine what career path is best for them?

"Decide what aspect of dentistry you are most passionate about, whether it be public health, emergency, pediatric, esthetics, etc. and really start to hone in on those skills. Get as much CE as you can, stay up to date on the newest techniques, and always be humble enough to take advice from those who have been at it longer than you."

The Path to Becoming an Ideal Leader

By **Amisha Singh, DDS**



The new year trickled in slowly this time, settling into the familiar curves and crevasses of the life which we have been living. In some ways, this new year felt like an extension of the past two years. Still battling a pandemic which many of us would never have predicted to last this long, still emotionally numb from so many changes to our life, we forged onward in uncertainty. Our hearts still ached from both historical assaults and new losses. Some of us had colleagues and friends who lost everything in the Marshall fire. The Omicron variant numbers were impacting almost one in three Coloradans. Our home, our land, and our history reeled in fear and hope alike. We persisted. We gathered in community (social distanced, in person and remote). We sprinkled acts of kindness as we moved forward. We centered our humanity.

I started this new year by spending a week on Zoom with my doctoral cohort. I am getting my doctorate in education, and we have “intensive weeks” throughout the year, weeks in which we finish three graduate credit hours in less than four days. Yes, it is as crazy as it sounds. After my first intensive week, I learned quickly why they are called “intensive.” They certainly live up to their name. In this course, a class on leadership, the schedule could not have been timelier. One member of our cohort, a local chief of police, was dealing with the aftermath of the fire between classes. Others, who are in higher leadership at schools across the country, were hopping on calls to discuss flipping to remote learning for the first half of January. In class, we discussed leadership, and, during our breaks, we lived it. So, as we wrote papers and did group projects and worked on our day-jobs in the small moments we could find, I had a unique opportunity to intentionally think about what successful leadership looks like. In our practices and communities, we are all leaders, whether we want to be or not. I remind my students of this every day. With the opportunity our doctorate brings us, there is also responsibility. We owe it to our communities, our team and our patients to be the best version of ourselves, as leaders, doctors and individuals. So, what does this look like? Is there a magic formula? It turns out, the evidence says there is not. BUT, there are themes that we can follow to craft our own ideal. Three elements of leadership which I have tried to embrace over the years include authenticity, humility and trust.

For the longest time, I held a very narrow and constricted view of a leader. Part of it was being socialized by media and society. Part of it was my own inhibitions and imposter syndrome. Without ever consciously realizing it, I took an inventory of the pieces of me that made me who I am and chose which ones I needed to diminish to fit into the box of ambition, at least in the public eye. I could not smile too wide or be too emotional, lest the world see me for who I am: a young, hopeful, sometimes unsure BIPOC woman. I felt like I did not check any of the boxes. But slowly, I began seeing people break the mold on my TV or news feed. We elected a half-South Asian VP.

“Three elements of leadership which I have tried to embrace over the years include authenticity, humility and trust.”

All politics aside, she smiled wide, with all of her teeth showing. And I saw myself in her joy, in her authenticity. Representation matters and this power of recognizing that the truths I previously held were shattering helped me find the leadership which I had in me all along. Now, I could embrace it.

Leadership’s path is also strewn with imperfection. It is impossible to get anything right on the first try, yet I still expected this of myself. I expected this as a new associate, as a young practice owner and as a teacher. I demanded perfection from myself, even though it was unattainable. It is very real that leaders are often judged for the most challenging moments in their careers. As a society, we have come to expect perfection from our leaders and to accept little else, which in turn can diminish their humanity and create an environment that does not lend itself to vulnerability or transparency. So

many leaders today lead from fear without even knowing it, especially in crucial times similar to the era in which we live. When something bad happens, leaders know that they will be under the microscope. This stops us from being bold, real and responsive to the needs of our community. It inadvertently causes us to reach for risk mitigation in high-stakes moments which can lead to a poverty of ambition and empathy. So how can we change this culture? What does creating a little space for our humanity in our leadership look

like? How can we shift the dynamic while not ignoring the real concerns all leaders have for self-preservation? In a cancel culture, we cannot change the culture in a silo. How do we rectify this in our own leadership and practices? We can lend ourselves and others a little humility and a little grace.

Lastly, one of the most dynamic shifts I have experienced in my life is by leaning into trust. During one of the hardest moments I have endured, I had a friend who told me that I needed to learn to trust myself again. I was shocked. It was in that moment I realized that, along the path of learning and growing in my 20’s, shrouded in self-doubt, I had forgotten what it felt like to rely on my intuition. So many of us, myself included, get overwhelmed during critical moments of leadership. A classmate in our program brought up the comment, “change what you do not feel peace about,” and it resonated. Each of us, in our hearts, knows what we need. We have access to the collective knowledge of what our patients, our colleagues, our teams and our communities need. But in order to gain access to that knowledge, to be open enough to learn and to listen, we must first relearn to trust ourselves, to pause and listen when our minds and bodies are talking to us.

Through work in leadership, I have come to realize that I did not need to seek the answers externally of who I am and who I am becoming. Those answers have always been written inside me, first and foremost. I just have to create calm enough to listen and that will unlock the next chapter of my life-long learning, of unfolding into the ideal leader that I know I can be. ■



It's Personal

There are a lot of differences between being a Member of the Trust and just another policy number at a large, commercial carrier. Both give you a policy the Practice Law requires, but that's where the similarity ends.

Who do I talk to when I have a patient event, claim or question?

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Them: Claims call center (likely in another state).

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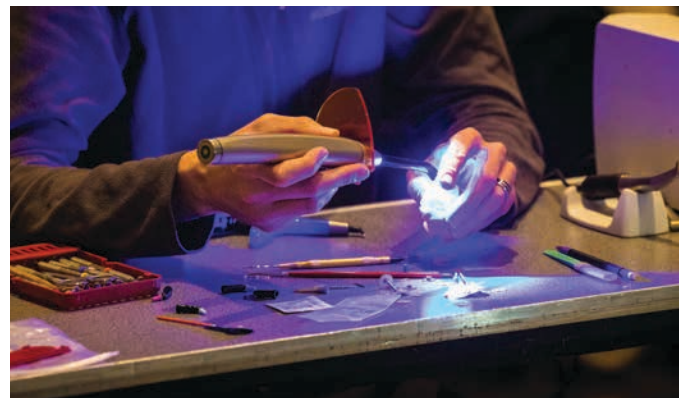
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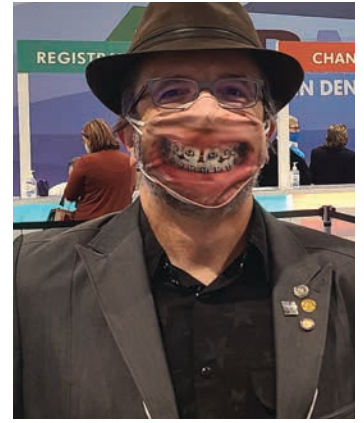


WE'RE BACK!

2022 RMDC WAS A HEART-WARMING SUCCESS!

More than 5,300 dental professionals from across the Rocky Mountain region registered to attend more than 75 in-person lectures and hands-on workshops, learn about new products and technology in the Expo Hall, connect with colleagues and watch 48 on-demand lectures. RMDC looks forward to welcoming world-class speakers, cutting-edge vendors and MDDS members back to the Colorado Convention Center January 19-21, 2023.





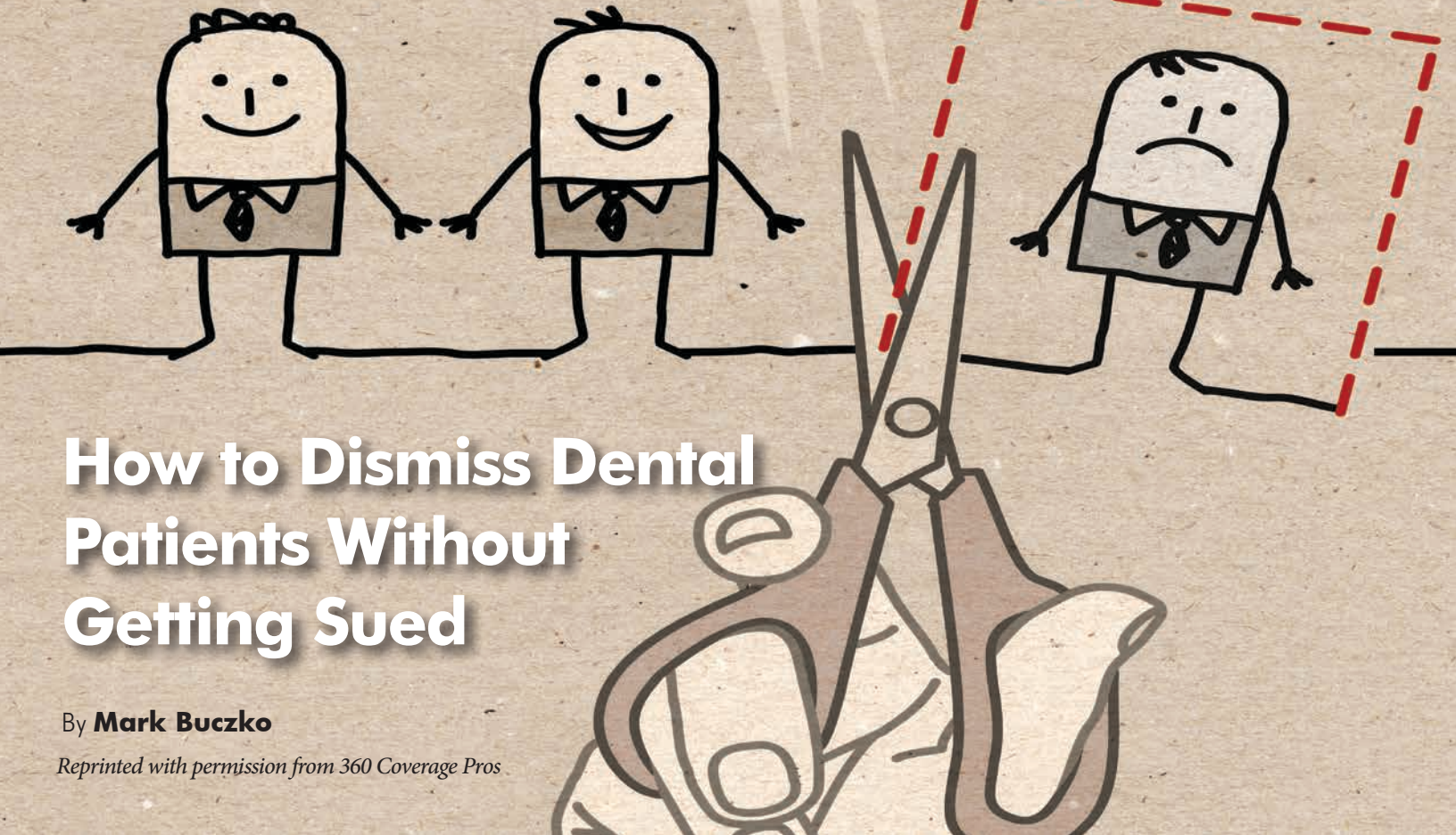
MAKE YOUR VOICE HEARD!

Are you interested in impacting the dental profession in Denver?

MDDS has open committee member and delegate positions.

Contact Shelly Fava, MDDS Executive Director, at director@mddsdentist.com or (303) 957-3273 to learn more and get involved.





How to Dismiss Dental Patients Without Getting Sued

By **Mark Buczko**

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Harry Truman's most famous quote as president was, "The Buck Stops Here." He proudly displayed this plaque on his desk when he was President. As the leader of your dental team, you must make difficult decisions throughout your career. One of those is when and how to dismiss a patient. The following article from a malpractice carrier in Florida is an excellent summary of best practices for dismissing a patient. As a dental board consultant, third party reviewer, and an expert witness over my career, one cannot overemphasize the importance of documentation. This includes complete and comprehensive clinical chart notes, communications both verbal and written from anyone in your practice that interacted with the patient. Most importantly, please remember that if it is not in the record, it did not happen. As always, please contact your malpractice carrier with any concerns. - Dr. Allen Vean, MDDS Co-editor



Have you ever "fired" a patient? Then you know how challenging it can be. Read on for guidance on how to dismiss problem patients without getting sued.

As a dentist, you probably don't like dismissing disruptive patients. That's because you prefer to help them and to grow your practice rather than shrink it. Still, some people may become so abusive or so non-compliant that dismissing them is your only option. However, it should be a last resort, handled with great care to prevent future litigation.

Although many dentists are naturally reluctant to dismiss patients, it's important to understand you don't have to treat every person who wishes to become a patient or all patients who want to remain under your care. You have the right to be selective in determining whom to treat. But when you refuse treatment, you must do so in a way that doesn't violate state law or dental-board standards. You

must also give problem patients sufficient notice so they can find another dentist before you remove them from your practice.

When to "Fire" Patients

In some cases, patient behavior is so egregious you'd be foolish not to dismiss them. For example, experts say you're justified in "firing" patients who engage in any of the following behaviors:

- Being abusive or violent to practice staff. For example, screaming to another on your team or making physical threats should result in a one-way ticket out the door.
- Repeatedly missing appointments or violating other office policies. People whose behavior ends up costing your practice too much time or money, thereby affecting the care you can provide to other patients, should not remain as patients.
- Engaging in drug-seeking behavior. Dismiss those who lie to you in order to receive prescription opiates—or who try to get drugs from other medical providers while under your care—as soon as possible. They are simply too risky to continue treating.
- Making sexual advances to you, your staff or other patients. Patients who behave in sexually inappropriate ways subject you to legal liability if you don't react swiftly to their conduct.
- Not complying with your prescribed treatments. Patients who disregard your clinical recommendations are likely to see their conditions get worse.

When that happens, they may hold you accountable and perhaps sue you, even though you did your best to treat those problems. For this reason, it makes sense to remove non-compliant patients from your practice after exhausting other measures to encourage compliance.

Not all practice dismissals result from inappropriate patient behavior. Sometimes they relate to factors in your background or in your practice overall. For example, you might lack the advanced skills to properly treat someone. Or you might lack the mental or physical capacity to deal with the person or open yourself to an ethical or legal conflict by treating. Finally, dentist and patient personalities may clash. If you don't work well with a person, you may want to refer the patient to another dentist, either within or outside your practice, who has a more compatible temperament.

"You have the right to be selective in determining whom to treat. But when you refuse treatment, you must do so in a way that doesn't violate state law or dental-board standards."

Because firing a patient is stressful and may generate blowback, it's best to do it for clearly justifiable reasons. According to a study in JAMA Internal Medicine, 67% of medical practices reported dismissing between one and 20 patients within the last two years. But the reasons were usually clear-cut. For example, 81% said they dismissed a patient because the person was "extremely disruptive and/or behaved inappropriately toward clinicians or staff." Meanwhile, 78% fired patients because they violated chronic pain and controlled substance policies. In third place for patient dismissals was repeatedly missing appointments, which accounted for 74% of firings.

Patient Abandonment Defined

Even in cases where patient dismissal is justified, be sensitive to charges of patient abandonment. What is abandonment? It's when a dentist unexpectedly dismisses a patient without providing a reasonable excuse and/or leaving enough time to find a new dentist before the dentist/patient relationship ends. The rules that prohibit abandonment vary by state. But in general, patients must meet four tests in order to prove they were abandoned:

1. A doctor/patient relationship must exist.
2. They must be able to prove you suspended care when they were still in active treatment.
3. The care suspension must have been so abrupt they were unable to find a replacement provider in time.
4. The gap in care seriously harmed them.

To avoid abandonment charges, think through the following questions:

- Is a dismissal legal and compliant from a state statute and dental board perspective?
- Is there little or no chance a patient belonging to a protected class will accuse you of discrimination?
- Will you suspend care when continuous treatment is no longer medically necessary?

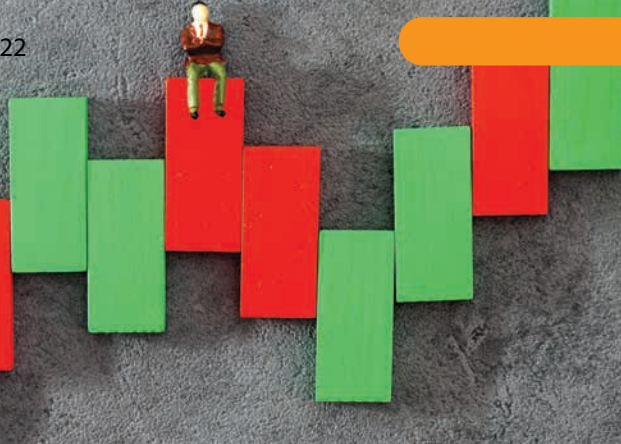
- Will you be able to give adequate notice to the patient (usually 30 days) so the person can find a new dentist?
- Can you help the new dentist by transferring the patient's chart and giving report on the person's clinical history?
- Are you willing to provide emergency coverage to the person during the transition period?

If you can answer these questions affirmatively, your dismissal will likely be on firm legal and ethical grounds. But don't stop there. Familiarize yourself with these additional dos and don'ts.

Patient Dismissal Dos

- Check state statutes and dental licensure rules. Common requirements include 30 days written advance notice, providing guidance on finding another dentist and forwarding patient charts to the new provider.
- Develop a patient termination policy for your practice. This document should establish the conditions under which you will decide to dismiss a patient. When you have a written policy, it becomes the justification for dismissing someone, making your decision more legally defensible.
- Beware of high-risk dismissal situations. These include patients who have acute and/or critical dental problems, who are receiving highly specialized care from you that won't be easy to replace, who have HIV/AIDS or who are part of a government-protected class. Also, be careful when the person owes you a large balance, but otherwise has been a good patient. In financial delinquency cases, you might want to seek legal counsel before dismissing the person.
- Demonstrate patience and give clear notice. You want to give patients every opportunity to change their behavior. So give several warnings before making a final decision. Document the warnings and the precipitating patient behaviors on patient charts. In your dismissal notices, be explicit on why you're turning them away.
- Focus on how notice is given. There should be no doubt about what's happening and why. Ideally, meet with patients face to face to explain why you can no longer be their dentist. At this session, also provide written notice. If a personal meeting is impossible, send a notice letter via certified mail and request a signature to confirm receipt.
- Confirm when the notice period is over. When the 30-day period is over, send another certified letter to patients reminding them you're no longer their dentist.
- Be flexible. In some cases, you may want to give patients longer than 30 days to transition to a new provider, especially if they're in active treatment.
- Provide continuous care. Never leave dismissed patients in the lurch. Agree to provide emergency care during their transition to a new provider, with a limit on how long the transition should last.
- Set the stage for future care. Write a letter documenting a person's ongoing dental problems and/or future needed treatments. Then have the patient sign it. This stops the person from alleging later that you let a problem slip through the cracks during the transition.

THE UPS AND DOWNS OF THE STOCK MARKET



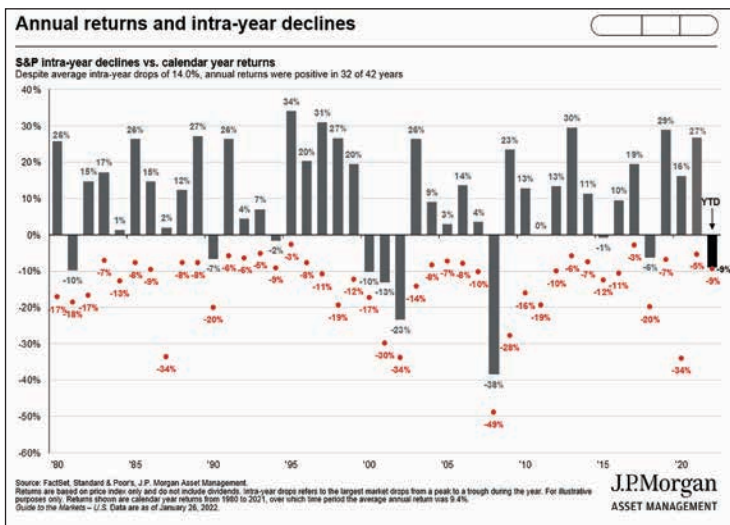
By **Steven Karsh**



The U.S. stock market at the beginning of 2002 seemed like a roller coaster ride at times; big ups, followed by big downs. Despite erratic market movements, often referred to as volatility, long-term investors have been rewarded by staying patient and riding out the volatility. The most recent example happened just over two years ago when COVID-19 caused the global economy to essentially shut down. The S&P 500 experienced its fastest 30% decline in history, taking only 30 days!

Investors who remained calm and added money to stocks to reach their target allocations reaped big rewards when the market rebounded to new highs in just over four months. In fact, from the low on March 18, 2020, to December 31, 2021, the U.S. stock market more than doubled, returning an astonishing 106% in just over 21 months. Even more astounding is that after the stock market was down over 50% during the Global Financial Crisis (GFC) in late 2008 and early 2009, the market rose over 580% from the 2009 lows through December 2021! Even if you include the 57% decline during the GFC, the market is still up over 180% from October 2007 through January 2022.

The chart below from JP Morgan shows that intra-year declines in stocks are normal. Since 1980 stocks have fallen an average of about 14% in any given year. Another chart that shows how taking advantage of stock market dips by adding



to equities can lead to significantly better long-term performance than a buy-and-hold approach. The worst approach was to panic and take some money out of the market after prices had fallen.

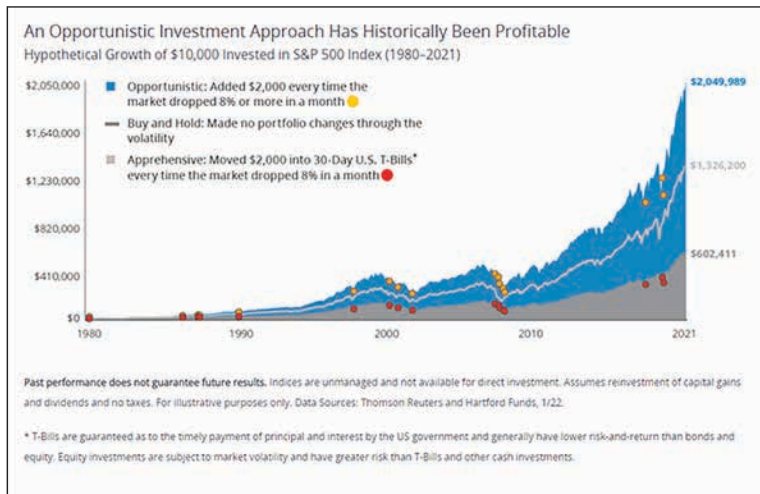


Chart courtesy of The Hartford

Keeping in mind that past performance is no guarantee of future returns, history has demonstrated that large dips have been buying opportunities, not reasons to become more risk averse. Market rebounds have rewarded patient investors and those who keep their focus on the long-term.

The most pressing question during a downturn is why? Many factors can cause a down market, depending on the economic environment. Many believe the recent volatility has been caused by the sharp rise in inflation and the Federal Reserve's plans to reduce it, ranging from increasing interest rates to quantitative tightening (taking liquidity out of the market). Other factors for the recent downturn may include geo-political events such as Russia/Ukraine and China/Taiwan. And we can't forget another ongoing variable, the persistence of COVID.

Regardless of the reasons for pullbacks in stocks, if you have a long-term time horizon, the ups and downs of the market shouldn't cause you to panic and make emotional investment decisions. Time and again, the market has trended upward and adding to stocks when they are down can be beneficial for your long-term investment results. ■

About the Author

Mr. Karsh is a Principal at Innovest Portfolio Solutions, a Denver based independent registered investment advisor. For more information you may contact Steven at skarsh@innovestinc.com or by phone at (303) 694-1900 x308.

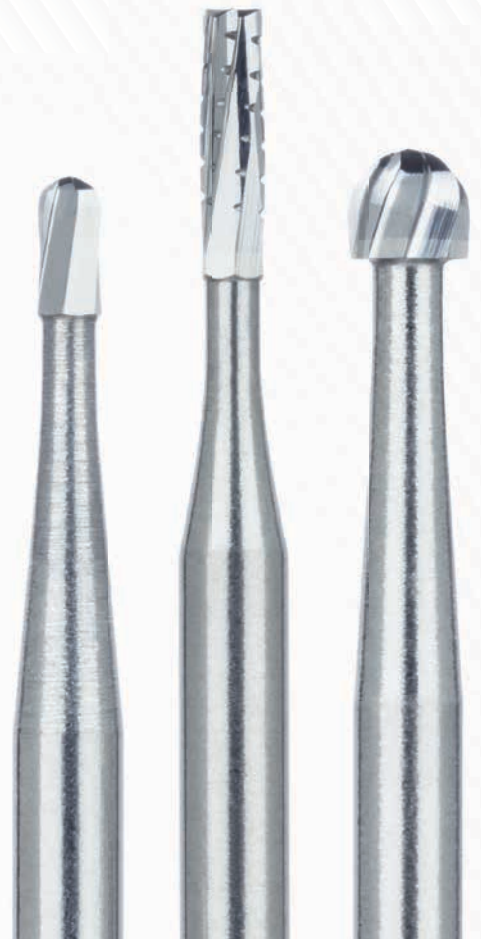
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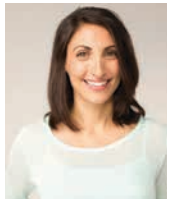
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LEADERSHIP STARTS WITH YOU

By **Dr. Laura Brenner**



Ever wonder why some organizations run like well-oiled machines, and others face problem after problem?

At times you may have felt it's impossible to find good help, or employees are unreliable. Maybe as an associate, you feel no one respects you because you're not signing their paychecks. And, in any role in the office, it can feel as if no one listens to your ideas for improvement.

These common challenges have haunted many of us at some point in our careers. If you find yourself experiencing any of these problems, they are likely real. Not everyone is the right fit for you or your practice.

However, what if these common daily challenges are a result of your leadership, no matter which role you have in the office?

Though it's sometimes hard to admit, office dynamics all come down to one thing: leadership.

I invite you to pause and ask yourself how your leadership might be creating an environment where team members don't feel valued or inspired? What if your energy or attitude is why others aren't living up to your standards?

We often think leadership is how we motivate and inspire others, but there is more to it. Leadership is also how we motivate and inspire ourselves. In fact, all leadership begins with us.

The idea of leading yourself sounds kind of weird, doesn't it? The truth is, how you lead others is always a reflection of how you lead yourself.

When you look at your office, whether you're an owner, an associate, a hygienist, an assistant or administrator, you have the opportunity to show up as a leader in different ways. It can be hard to turn the mirror on yourself and ask what your role is in any given situation, but it can also be an opportunity. Evaluating yourself objectively and taking responsibility for your role creates the opportunity to be proactive about creating solutions.

If you want to be the best leader for others, start with managing how you lead yourself.

I recently had a conversation with a very successful dentist who used to struggle with her leadership. Her employees thought she was mean, she had a lot of staff

turnover, and she felt angry most of the time. People were quitting and leaving her high and dry, creating massive stress in her life. She was very unhappy in practice.

Then something opened her eyes, and she realized the problem was... her.

She couldn't control her team, but with leadership coaching, she was able to change the way she was leading everyone, starting with herself. Now she has a loyal team, and she knows her own boundaries. Recognizing her stressors allows her to draw boundaries, so she can set herself and her working relationships up for success.

What kind of leader do you want to be to yourself? Let's look in that mirror and take stock.

How do you motivate yourself to get into action, be productive, and achieve successful results?

Based on our life experiences, we all see the world through different lenses. These lenses determine how we interpret things. Do you bully yourself into getting things done through sheer grit, or do you inspire yourself with the excitement of opportunities and possibilities that you can create? There is no right or wrong way to lead yourself but notice how those around you are getting the job done. You might be surprised to see that some of the qualities you dislike the most are the same qualities you see in yourself. This is a great opportunity to assess which path you are on while practicing an alternate one.

Life is about the balancing act. If you're a pushover with yourself, maybe you want to add some more sheer will to your repertoire. If you're all dictator and no compassion, filling that void would add the warm fuzzies that some team members might need.

Notice how you treat yourself when you make a mistake.

It's easy to go home at the end of the day and berate yourself for imperfect actions or outcomes. There is a fine line between responsibility and blame. If you blame and punish yourself with negative self-talk, it's hard to feel excited and inspired about your work. You'll create an environment for yourself that is unforgiving. Instead, practice taking responsibility and practicing self-compassion. This will allow you to own it, assess the situation more objectively and move onto creating solutions. You can then model this for others, teaching them to take more responsibility while having more compassion for others.

Get curious.

We often judge ourselves for being human. While we try to do perfect dentistry, we also often want to have perfect thoughts, feelings and behaviors. If you notice you don't like something you thought, felt, or did, try not to judge yourself. Judging never solves the problem. It only creates more shame. To get a sense of how much you judge yourself and others, try writing a judgment journal. In the journal, list all the judgments made throughout the day. When you see it on paper, you'll be amazed by how much we judge everything. This practice can give you an opportunity to be conscious about each judgment and question the validity of your judgments. Extending this curiosity to your team will prevent a lot of frustration when you don't understand their actions.

Be your own cheerleader.

It's okay-- no one will accuse you of being arrogant. Celebrating our wins creates a habit of acknowledging successes instead of always noticing when we fail. It helps us appreciate the good things we do, so we don't only focus on the negative. Start with yourself then create a daily practice where the whole team gets to celebrate individual and collective wins.

"We often think leadership is how we motivate and inspire others, but there is more to it. Leadership is also how we motivate and inspire ourselves. In fact, all leadership begins with us."

et al.: Articulator ~~04-2022~~ with your why.

Dentistry is stressful. It's easy to get caught up in the routine and live life on autopilot. Reconnecting with the meaning in your work will get you more engaged and inspired to show up. Be real with yourself. If you are so burnt out that you can't connect with your why, work with a coach or, in some cases, a therapist. Facing the problem head-on will help you solve it. You'll stop taking everything out on yourself and those around you. It will impact the energy of the entire office.

No matter what, the energy of an organization always comes from the leadership.

If you're at the top of any organization, know that it all comes down to you. If you want positive, supportive, leaders in your organization, give them the chance. Let go and allow them to spread their leadership wings. If you're in any other position in the organization, know that how you inspire and motivate yourself to lead matters. If you can come together, and intentionally step up to the leadership plate, then you'll get to work in a well-oiled machine. ■

About the Author

Dr. Laura Brenner graduated from Baylor College of Dentistry in 2001 and moved to Denver to establish her dental roots. She worked in private practice for 10 years until she left clinical dentistry behind for good. As the author of the Lolabees blog and "10 Reasons Your Dentist Probably Hates You Too," she began connecting with other dentists from around the world who wanted more from their careers. This work inspired her to become a Certified Professional Coach who is passionate about helping dentists find joy in their careers again.



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Goal Setting Sessions:



Taking Your Team to the Next Level

By **Dr. Aaron Stump**



We know quality feedback is critical for the professional development of dental teams. The question is: how should leaders efficiently give quality feedback to maximize its impact? Traditionally, performance reviews were the standard way of providing feedback and instruction. However, the performance review is an outdated model. The new method is what I call a Goal Setting Session (GSS).

I developed the GSS because the traditional performance review was not working due to poor motivation, little accountability, and lack of proper follow-up. I understood motivation for lasting change is best achieved in a positive, supportive environment where individuals are empowered and self-motivated to make change rather than being forced or coerced. The performance review setting does not provide this. It centers on past performance, not on positive change for the future. I was also having a hard time keeping my team accountable because there was little documentation on what was discussed or what specific steps were needed to make positive changes. Furthermore, there was poor follow-up because reviews were done once per year. That is simply too long to go between evaluations. Just think, students have four report cards during the school year. Dentists should be doing the same with their "students." All this considered,

I needed to be a better coach for my team and using the performance review as a tool was not helping achieve my goal.

The most important factor in creating a successful and sustainable practice is developing a healthy culture. The GSS is one of many pieces in cultivating and nurturing healthy culture. A supportive and safe environment where trust is built and one can be vulnerable are key cornerstones in building a healthy culture.

It is essential as a leader you take on the responsibility of helping individual team members reach their goals. Why? Because the success and growth of the office depends on it. The theory of growth is simple: growth is reciprocal. If a team member is growing, then so will the practice. If everyone in an office is hitting their goals, then the office as a collective will grow exponentially.

The GSS method is based on motivational interviewing. This process is defined as a collaborative, goal-oriented style of communication and particular attention to the language of change. It is designed to strengthen personal motivation of commitment to a specific goal by exploring the person's own reason for change. Motivational interviewing is designed to empower people to change by drawing out their meaning, importance, and capacity for change.

The objective of the GSS is to promote positive change and growth by providing a safe place for the team member to self-direct and self-motivate using their own words. The GSS is essentially trying to invoke positive change by encouraging the team member to “speak their goal into existence.” Accountability and success are more readily achieved if one verbalizes their goals and holds themselves accountable. What sets the GSS apart from the performance review is the words of change are coming from the team member and not the person conducting the review.

The four components of conducting a productive GSS are 1) Scheduling; 2) Leading/Guiding; 3) Documentation; and 4) Follow-up.

Scheduling

The first step is to block time in all parties involved schedules so there is adequate time for the GSS. This includes setting time for the current session as well as the next one. I find that 40 minutes is sufficient for each GSS.

Leading/Guiding

Leading/Guiding requires active listening skills and asking questions to help guide the team member to verbalize their goal.

Documentation

Documentation requires three things. One, clearly state the goal. Two, establish a specific action plan. Three, set a realistic timeframe for completion. Documentation needs to be provided to the team member, so they also have a reference. This step aids in solidifying success and accountability because their leader has heard and transcribed their words on a living document that will be reviewed in a few months.

Follow-up

Follow-up should be done in three to four months. Change is best achieved in small increments while consistently reinforcing feedback. Positive change is like fluoride: low concentration and high frequency for maximum benefit. The follow-up process is simple: review the goals and see if they were achieved. If so, it's time to celebrate! Let them know how their positive change has contributed to the overall success of the practice. If not, ask them why they did not achieve their goal and encourage them to try again.

The secret to conducting a productive GSS is encouraging proper goal setting using the motivational interviewing process. This takes time and practice. It may be three sessions before a person really gets the hang of it. Be patient. To maximize success, the team member should be encouraged to verbalize only 2-3 goals. Goals need to be specific, realistic and attainable. For example, “be a rockstar chair-side assistant” is not an effective goal. A more specific goal would be, “be thoroughly prepared for each restorative appointment so I don't have to go looking for dental supplies or instruments in the middle of an appointment.” Prompting verbal commitment to change is essential. This can be done by asking open ended questions such as, “Why is this important to you? Are you committed to achieving this? How do you plan on doing this? What obstacles

do you anticipate and how will you overcome them?” In event of a standstill, the person conducting the GSS should interject and ask permission to comment, “I think I have some insights. Do you mind if I share them with you so we can discuss them?” Remember, the essence of the motivational interviewing process is to have the individual verbalize their acknowledgement of the need and desire for change and not to directly tell them what to do. It is more important for them to verbalize it than it is for the leader to assign it.

Remember we cannot expect the team to take the practice to the next level

"Remember you cannot expect the team to take the practice to the next level if they are not provided with the resources to make positive changes."

if they are not provided with the resources to make positive changes. One way to further help the team member personally verbalize, hence solidify their commitment to change, is to ask: “What can I do to help you?” This takes the pressure off the leader to find the solution and helps cultivate a more collaborative environment. Furthermore, a deeper trust is created when the leader

delivers on their promise to help in ways the team member asked and not how they deemed appropriate. This lets them know they were heard and they are valued. The leader is there to help them succeed and attain their goals as a team.

Being able to create a healthy work culture is a great blessing and opportunity. We are in a unique position to positively impact many people in our lives and communities. The GSS will allow you to more effectively produce positive change and growth from yourself and the team. This enhanced performance from the team as a collective will culminate in massive overall success of the practice. Ultimately, you and the team will consistently provide high quality dental experiences and continually be taking the office to the next level. ■

Resources:

- Coyle, D. (2017) *The Culture Code*. Bantam Books.
- Miller, W.R. & Rollnick, S. (2013) *Motivational Interviewing: Helping people to change* (3rd Edition). Guilford Press.
- Ramsey, D. (2011) *Entreleadership*. Simon and Schuster.
- Sinek, S. (2014) *Leaders Eat Last*. Penguin Random House.

About the Author

Dr. Aaron Stump is the owner of Charlottesville Pediatric Dentistry in Charlottesville, VA. He has been a practice owner for eight year and has "ridden the wave" of private practice ownership. Creating a positive team dynamic and healthy team culture is a passion of his.

5 Ways to Build and Preserve Team Culture

By **Kim McGuire**



The last two years have provided all of us, especially the dental community, ample opportunity for leaders to learn how to embrace change, be flexible, pivot our focus and continue to provide excellent patient care. We have found dental practices that are not only surviving, but thriving, are those who have taken leadership and vision focus to the next

level. Practices of all shapes and sizes have faced staff turnover in one form or another due to various reasons. A visit to your local restaurant or retail outlet certainly means you have experienced this as a customer.

We know if you take the very best care of your patients, the money and profits will follow! And to do that you must have a solid team culture. So how do you find, retain and grow your team? What we know is people come to a job for money, however that is not why they stay. They stay because they feel connected to the culture of your organization and the purposeful work you do.

Values, Vision and Agreements

Defining your core values is the first step in creating a strong culture. Taking the time to decide what is most important to you will help define your vision. Do you

have values around health and wellness, compassion, service, technology, quality? Next, creating your vision statement is a process that will further clarify where the practice is going, how you take the very best care of patients, the environment you want to create and who you ideally want to serve. Finally, adopting a set of team agreements will establish a code of conduct the team can follow to execute that vision. An example of an agreement would be, “We agree not to subgroup (gossip) about our patients or each other;” or “We agree to accept responsibility for our actions and to provide a supportive environment for our teammates.” This process will align your culture so you can attract and retain team members.

Choose the Right People

Here are some steps to finding the right members to join the team:

- Know what technical and emotional skills are needed in a team member (review core values and vision as stated above).
- Make your ad stand out - use personality, brag about great culture and let candidates know what kind of experience the patient has at the practice.
- Potential candidates are reviewing social media, website and reviews; make sure the online presence represents the culture an ideal candidate wants to join.

- Embrace excellent temps...you never know when someone is done temping and wants to join a great team like yours.

Generally speaking, you want three things in a potential hire: beliefs, values and attitude. If one of these is not aligned with you or the rest of your team, you will be disappointed. Of course, clinical team members must come with the proper know-how; the rest you can teach if they have a great attitude. Danny Meyer says in his book "Setting the Table" to hire 49% for technical skills and 51% for emotional skills. Emotional skills need to be aligned with your core values as well as include high emotional intelligence. Are they able to communicate effectively and deal with people well? New team members must believe they can make a difference and they must value high quality care and service.

"We have found dental practices that are not only surviving, but thriving, are those who have taken leadership and vision focus to the next level."

Establish Consistent Systems

If I asked any of your team members about systems in the practice, would they answer in a similar manner? If you are bringing new team members in and there have not been established systems, you may be setting them (and the rest of your team) up for failure. Systems should be documented, trained on and discussed. I am referring to the scheduling to goal system, the hygiene recare and reactivation system, the new patient experience system, the internal marketing system of asking for referrals and reviews, the huddle system.... And, the list goes on.

Invest in Training

Not only will new team members need to fit into the practice's culture, but they will also need to know what a good job looks like. Too often we see experienced team members join a team and the practice assumes they know it all. Everyone needs to learn exactly how your team does things. Show them a Success Criteria. Similar to a job description, a Success Criteria shows a team member specifically what success looks like in their position. If there seems to be a misalignment as to what the team member thinks is most important and what the doctor and/or office administrator believes is most important, create clarity and train well! Create a safe environment for the new team members to contribute ideas as to what has worked in other practices.

By investing in training, you will 'slow down to speed up' so to speak. For example, have the new hygienist shadow the lead hygienist for a few days so they will know exactly what is expected in each appointment, what the period standard of care is, how the new patient experience looks and finally how to co-discover and hand-off potential restorative treatment to the Doctor during the exam. Keep the lines of communication open for any feedback from either party. A checklist and a plan for the first few weeks can create clarity and get a new team member off to a great start.

Be the Culture Keeper

If you want an "A" team, don't keep "C" players. I realize this is difficult in the current environment however, we do see the job market moving in the right direction. If you are keeping people on the team who do not fit the culture and are creating a toxic environment, you must get rid of them in order to keep the other team players. How many times has someone who was toxic left and you cannot believe the culture shift? This happens all the time; we don't realize how negative the energy is until that person leaves. Be mindful of this and make a commitment to giving people an opportunity to 'step up' or not be a part of the practice. You will be preserving the culture you have worked so hard to establish. There is an old saying by John Maxwell, "Don't send your Ducks to Eagle School." Keep that in mind when investing in the team - are they eagles worth investing in?

Finally, a few more tips:

- Build relationships with your team members - ask them about their personal lives. Know what is most important to them and the things they value. Work is just a part of our lives... let them know you care.
- Have fun! Dentistry is about serving others. You can have fun doing it and the patients will feel that energy and want to refer their friends and family to the practice.
- Be enthusiastic and create an environment where people want to come to work!
- Inspire and reward the team with things like a BAM (basic amount of money) Bonus system that is based on profitability or a daily reward system like "grab bag." Have them be a part of the financial success of the practice.

When the leader is walking the talk of values, vision and culture team members notice. Create a culture that you can be proud of! ■

About the Author

Kim McGuire is an Executive Coach with Fortune Management. She brings over 20 years of Dental Executive Coaching and practice management knowledge to the Colorado Dental community. She is a Key Business Strategist and knows how to grow dental practices. Kim is passionate about leadership coaching that enhances communication, relationships and accountability. She advises doctors and teams to implement strong, repeatable systems for maximum effectiveness. Kim also has a deep understanding of the Business of Dentistry. As a certified Life Coach, she has experience in personal growth and professional development so her clients become their best self!

Elevating the Colorado Dental Association Through Resilience

By **Greg Hill, JD, CAE, CDA Executive Director**



In 2016, the Colorado Dental Association unveiled a strategic plan titled, "Building a Successful Future" designed to give the association a modern governance structure, to create the infrastructure for member recruitment and retention, and to streamline operations ensuring an efficient and viable organization for the future.

Prior to the 2016 plan, membership in the organization had been on a seven-year market-share decline. Through a refocused membership strategy, the CDA became a national leader in market share growth and continues to be recognized for its membership programs and innovation. Unknowable to us as we developed this plan was the COVID-19 pandemic which would disrupt the profession like nothing ever before. The 2016 plan presented the organizational capacity that enabled us to lead effectively through the pandemic. We significantly updated our technology to work remotely and ensured we had the tools to run the business of the association at a higher level of efficiency.

"Through a refocused membership strategy, the CDA became a national leader in market share growth and continues to be recognized for its membership programs and innovation."

For the past year, the CDA has been working on its new strategic plan, building upon the work and successes gained since 2016. I have spoken a great deal about resilience this past year, the idea of not returning to where we were prior to the COVID crisis, but instead springing forward to a new reality, where transition and change is happening at a much faster pace. This resilience concept is the framework of our new strategic plan.

Our 2022 plan builds upon the work of 2016 and sets those three priorities as the foundation. The organizational efficiency achieved through the significant technology advances over the past few years will now be used to create a customized member experience and to proactively support dental practices. By connecting our membership growth strategy with modern organizational efficiency, the CDA is finalizing a launch of a Customer Resource Management (CRM) software solution this spring to provide customized member service and solutions with the business intelligence needed to serve our members through a highly digital business model.

There are five keys to the updated plan. These have been developed leveraging membership surveys and strategic planning sessions with the board. They include:

1. Digital transformation of the CDA's membership interaction platform and internal operations
2. Proactively advocating on behalf of Colorado Dentists with regulatory and legislative bodies
3. Proactively supporting the Colorado Dentists with expanded guidance on navigating the increasingly complex compliance environment
4. Proactively supporting the Colorado Dentists with products and services that enable them to improve practice performance and increase profitability
5. Developing alternative revenue streams for the CDA that lessen the dependence upon dues from members

The plan strategy is built from the Master Brand Statement the CDA adopted in March 2019 which states the following:

We empower our member dentists to build thriving practices and careers by providing government affairs, professional development, tools that can enhance management of a dental practice, and insurance and regulatory support and services. By fostering a community that helps dentists focus on their passion of providing patients with the best level of care, we are helping ensure superior oral health in our state.

We believe our strategic plan positions the CDA as even more of a national leader and elevates our technology stack as a model for other associations to follow. More importantly, it will provide the ability for us to provide quicker member support through modern digital tools used effectively in the private sector for years.

At the CDA, we recognize that the way in which we serve our members, conduct our internal operations, and support the profession, must be future focused. Our commitment to you is to ensure that your professional association operates at optimal efficiency to provide the highest quality of member services and support possible. ■

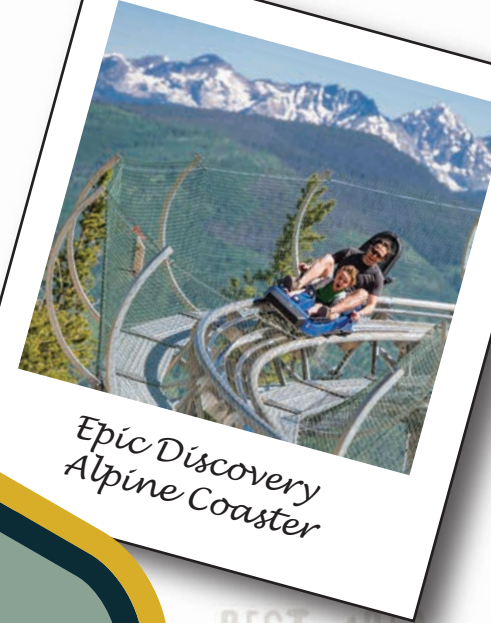
About the Author

Greg Hill, JD, CAE has served as the Executive Director of the Colorado Dental Association since June of 2014. Prior to joining the CDA, Greg was employed by the Kansas Dental Association for 15 years and served as the Assistant Executive Director of the CDA and Executive Director of its Foundation. Mr. Hill is a 1999 graduate of the Washburn University School of Law in Topeka, KS and a 1994 graduate of Kansas State University with a Bachelor of Science in Economics. He became a Certified Association Executive (CAE) in 2016. In addition, he serves as Co-Chair and Treasurer of Oral Health Colorado; on the Board of Directors for the Colorado Dental Lifeline Network and the Colorado Mission of Mercy; and is a member of the Denver Tech Center Rotary Club. He and his wife, Gwen, are the parents of daughter, Haven, and son, Camden.

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COMMITTEE SPOTLIGHT: Member Services Committee

By **Cara Stan, Director of Marketing & Membership**



If you have ever enjoyed cocktails at an MDDS social, connected with a colleague on an MDDS hike or even had documents shredded at the annual Shred Event – you have the MDDS Member Services Committee to thank!

The Member Services Committee is led by Dr. Jack Nguyen and Dr. Artemis Khazaie and is a group of dedicated volunteers from a variety of backgrounds and practice models. This committee is charged with new ways to bring metro area dentists together to make powerful professional connections, developing programs and services to benefit members and welcoming all dentists into the Society. Past events and benefits planned by the committee include quarterly socials, snowshoe hikes, Rapid's soccer games, patient info sheets and more. In addition, the group is committed to representing the diverse nature of dentists in Denver and the surrounding suburbs. The committee recently developed a Diversity, Equity and Inclusion policy statement for MDDS which has been approved and adopted by the Board of Directors.

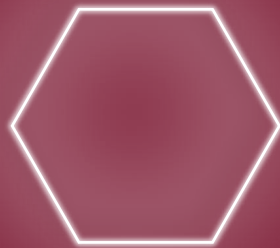


MDDS members gather at Postino for a quarterly social.

The Metro Denver Dental Society strives to model diversity, equity and inclusion in everything we do. We believe this fosters an innovative and dynamic culture and leads to sustainable results. This environment allows us to further advance the dental profession in the metro Denver area, improve the oral health of the public and promote equity and access to oral health.

We resolve to promote and maintain an environment that honors and respects the dignity, uniqueness and worth of each person in order to empower each member of our organization to participate in our vision of improving oral health for our community. ■

If you are interested in learning more about the MDDS Member Services Committee or would like to volunteer your time and talents, please contact Cara Stan, MDDS Director of Marketing & Membership at membership@mddsdentist.com or (303) 957-3270.



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FOR SALE

General Dental Practice for Sale: North Central Colorado (CO 2121) - General Practice for sale in North Central Colorado. Occupies 1,100 square feet and consists of 3 fully equipped operatories. Doctor works two and half days a week. The office also includes a reception area, lab, sterilization area, staff lounge and a bathroom. The practice produced \$510K in collections. For information email: jed@adsprecise.com or call 303-759-8425.

General Dental Practice for Sale in West Denver, CO (CO 2120) - General Dental Practice for Sale in West Denver, CO (CO 2120) Great location! Collections of \$864K. Practice occupies 2,255 square feet and consists of 6 fully equipped operatories. Dr retiring. For information email: jed@adsprecise.com or call 303-759-8425.

Gen. Practice for sale in Boulder County (CO 2123) - This beautifully built out practice is 3,090 sqft and consists of 5 operatories with opportunity for an additional Op. The office also includes a reception area, a private doctor's office, a business office, a lab area with nitrous closet, a sterilization area, consultation room, a dental storage room, restroom, employee break room and laundry. The practice collected \$900K + in 2019 and is 100% FFS (Fee For Service). Doctor works 3 days a week. For info contact jed@adsprecise.com or call 303.759.8425 Listing # CO 2123

OMS Practice for Sale North Denver Metro (CO 2122). Annual Collections \$1.7M, 3 ops, Professional building, Office Condo also for sale, Excellent location, Dr. retiring. The practice produces \$510K in collections. For info contact jed@adsprecise.com or call 303.759.8425

General Practice for sale in North Central Colorado (CO 2121). Occupies 1,100 square feet and consists of 3 fully equipped operatories. Doctor works two and half days a week. The office also includes a reception area, lab, sterilization area, staff lounge and a bathroom. The practice produces \$510K in collections. For info contact jed@adsprecise.com or call 303.759.8425

General Dental Practice for Sale in West Denver, CO (CO 2120) Great location! Collections of \$864K. Practice occupies 2,255 square feet and consists of 6 fully equipped operatories. Dr retiring. For information email: jed@adsprecise.com or call 303-759-8425.

Beautiful General Dental Practice for Sale in Central Mountains CO (CO 2118). Located near multiple mountain resorts. Approx. \$2M in collections, very profitable two doctor practice. Practice occupies 2.657 sqft consists of 6 fully equipped operatories, with room for an additional op. The office also includes a reception area, a private doctor's office, a business office, a large lab area, a sterilization area, two restrooms, and two supply closets. There is a large, finished basement used for storage, laundry, and a separate break room for staff. Doctors are relocating. For info contact jed@adsprecise.com or call 303.759.8425

Orthodontic Practice for Sale in Northwestern Denver Area, CO (Listing #:CO 2116) Collections of \$400K. Practice occupies 1,400 square feet and consists of 4 chairs. For information email: jed@adsprecise.com or call 303-759-8425. For more listings visit www.adsprecise.com.

General Dental Practice for Sale in Boulder, CO (listing # CO 2111) Collections of \$650K. Practice occupies 1,800 square feet and consists of 3 fully equipped operatories with room to expand. Dr retiring. For information email: jed@adsprecise.com or call 303-759-8425. For more listings visit www.adsprecise.com.

General Dental Practice for Sale in Denver, CO (listing # CO 2112) Collections of \$350K. Practice occupies 1,410 square feet and consists of 4 fully equipped operatories. Building also being sold with practice sale. Dr retiring. For information email: jed@adsprecise.com or call 303-759-8425. www.adsprecise.com.

General Dental Practice for Sale in Aurora, CO (listing # CO 2113) Collections of \$320K. Practice occupies 1,400 square feet and consists of 3 fully equipped operatories. Doctor retiring. For information email: jed@adsprecise.com or call 303-759-8425. For more listings visit www.adsprecise.com.

General Dental Practice for Sale in Littleton, CO (Listing # CO 2114) Collections of \$700K. Practice occupies 2,400 square feet and consists of 4 fully equipped operatories and possibility to have a 5th Operator. For information email: jed@adsprecise.com or call 303-759-8425. For more listings visit www.adsprecise.com.

Established GP for sale in Denver. Great Location! 3 Ops, \$450K in collections. Dr. Retiring. For information email: jed@adsprecise.com or call 303-759-8425. Listing Reference Number: CO 2109. For more listings visit www.adsprecise.com.

Established GP for Sale in South Metro Denver (listing# CO2015) Collections of \$1.1M. Practice occupies 1,530 square feet and consists of 5 fully equipped operatories. Dr retiring. For information email: jed@adsprecise.com or call 303-759-8425. For more listings visit www.adsprecise.com.

GP for sale in North Denver Metro area (listing # CO 2013). Annual Collections \$400K, 3 Ops, 1,100 sqft - Dr. retiring. For more information call 303-759-8425 or email: jed@adsprecise.com. For more listings visit www.adsprecise.com.

GP for Sale: Colo Springs (listing # CO 2010) Annual Revenues \$319K, 3 Ops fully enclosed, 1682 sqft - Dr. Retiring. Sale price \$199K. For more information call 303-759-8425 or email: jed@adsprecise.com. For more listings visit www.adsprecise.com.

Perio practice for Sale: North of Denver Metro area (listing # CO 1909) Annual Revenues \$500K, 3 Ops, 1,323 square feet. For more information, please contact jed@adsprecise.com or call 303.759.8425. For more listings visit www.adsprecise.com

GP for sale in Colo Springs (listing # CO 1908) Collections \$465K, 2,043 sqft, 5 OPS. Sales price \$250K. For more information, please contact jed@adsprecise.com or call 303.759.8425. For more listings visit www.adsprecise.com.

GP for sale in Colorado Springs (listing # CO 1904) 4 Fully Equipped Ops, \$250K in collections, 2540 sqft, Dr Retiring. For more information, please contact us at jed@adsprecise.com or call 303.759.8425. For more listings visit www.adsprecise.com.

GP and free-standing Building (sold with practice) for sale in beautiful Pikes Peak area (listing # CO 1803). Dr retiring, 5 OPS. Room for growth! Practice price \$200K and Building price \$495K. For more information please contact jed@adsprecise.com or call 303.759.8425. For more listings visit www.adsprecise.com.

GP for Sale: Northeastern CO (listing # CO 1735) 4 Ops, approx. \$900K in collections, Stand-alone bldg. sold w/practice. Dr. retiring. For more information, please contact us at jed@adsprecise.com or call 303.759.8425. For more listings visit www.adsprecise.com.

GP for Sale: Pueblo, CO (listing # CO 2006) 4 Ops, 1900 sqft office, \$393K in collections. Dr. retiring. For more information, please contact us at jed@adsprecise.com or call 303.759.8425. For more listings visit www.adsprecise.com.

Pediatric Practice for sale (listing # CO 2019) in beautiful resort mountain town with 7 OPS. \$900K annual collections. For more information, please contact jed@adsprecise.com or call 303.759.8425. For more listings visit www.adsprecise.com

MDS April 1
Advanced Chairside Assistant's Role with Dental Implants and Surgical Assisting
 -Dr. Brian Butler, Dr. Dennis Waguespack, Dr. Jamie Boyesen
 Mountain West Dental Institute
 925 Lincoln St Unit B
 Denver, CO 80203
 8:00am – 12:30pm

MDS April 7
CDA/MDDS Leadership Series: Leadership HR
 -Dr. Brad Guyton
 Mountain West Dental Institute
 925 Lincoln St Unit B
 Denver, CO 80203
 6:00pm - 8:00pm

MDS April 12
CPR & AED Training
 -CPR Choice
 Mountain West Dental Institute
 925 Lincoln St Unit B
 Denver, CO 80203
 6:00pm – 8:30pm

MDS April 14
MDDS Social Hour
 Colorado Campfire
 400 E. 19th Ave
 Denver, CO 80203
 6:00pm - 8:00pm

MDS April 22
Botulinum Toxins (Xeomin, Dysport, Botox) and Dermal Fillers Training, Level 1
 -American Academy of Facial Esthetics
 Mountain West Dental Institute
 925 Lincoln St Unit B
 Denver, CO 80203
 8:00am – 5:00pm

MDS April 23
Frontline TMJ & Facial Pain Therapy, Level 1
 -American Academy of Facial Esthetics
 Mountain West Dental Institute
 925 Lincoln St Unit B
 Denver, CO 80203
 8:00am – 12:00pm
 May 13

MDS Oral Surgery Techniques for Predictably Great Outcomes
 -Dr. John Alonge
 Mountain West Dental Institute
 925 Lincoln St Unit B
 Denver, CO 80203
 8:00am – 3:00pm

MDS May 14
MDDS Friends & Family Social
 Colorado Rapids vs Los Angeles FC
 Dick's Sporting Goods Park
 6000 Victory Way
 Commerce City, CO 80022
 11:30am – 3:00pm

MDS May 20
Navigating the World of 3D Imaging
 - Dr. Peter Green and Dr. Michael Moroni
 Mountain West Dental Institute
 925 Lincoln St Unit B
 Denver, CO 80203
 8:00am – 3:00pm

MDS May 21
Nitrous Oxide/Oxygen Administration Training
 -Dr. Jeffrey Young
 Mountain West Dental Institute
 925 Lincoln St Unit B
 Denver, CO 80203
 8:00am – 4:00pm

MDS August 25
CDA & MDDS Celebrate Diversity Block Party
 Edgewater Public Market
 5505 W 20th Ave
 Edgewater, CO 80214

MDS September 16
Botulinum Toxins (Xeomin, Dysport, Botox) and Dermal Fillers Training, Level 1
 -American Academy of Facial Esthetics
 Mountain West Dental Institute
 925 Lincoln St Unit B
 Denver, CO 80203
 8:00am – 5:00pm

MDS September 17
Frontline TMJ & Facial Pain Therapy, Level 1
 -American Academy of Facial Esthetics
 Mountain West Dental Institute
 925 Lincoln St Unit B
 Denver, CO 80203
 8:00am – 12:00pm

MDS September 17
MDDS Shred Event
 Benefitting the Colorado Orthodontic Foundation
 Peebles Prosthetics
 909 Wadsworth Blvd
 Lakewood, CO 80214
 9:00am - 12:00pm

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