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Journal

OF THE MICHIGAN DENTAL ASSOCIATION

June 2022

2022 MDA Annual
Session Wrap-Up

Are Neoplasms a Risk
Factor for Peri-Implantitis?

Correction of Anterior Open
Bite Caused by Super-
Eruption of Third Molars after
Night Guard Use

The MDA Public Education Campaign: An X-Ray View



SEARCHING SYMPTOMS



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SYNDROME!

SPONTANEOUS
TOOTH COMBUSTION!!

SUDDEN TOOTH
DEATH!!!



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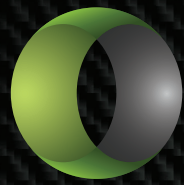


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COVER STORY . . . 34 The MDA Public Education Campaign: An X-Ray View

Exciting news and answers to your questions about the MDA's high-profile Public Education Campaign, which educates consumers about dental health and helps bring more patients to your practice.

By James Pond and Matt Maguy



Your July 2022 MDA Journal will be mailed July 1, 2022
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For more information contact Tina Sprague at 734-973-3337

Or visit

<http://health.wccnet.edu/dentalassisting/>



Journal

OF THE MICHIGAN DENTAL ASSOCIATION

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MDA VISION STATEMENT: The MDA is Michigan's oral health authority dedicated to the public and the profession.

MDA VALUES: We are guided by integrity and ethics; committed to the improvement of the public's overall health; we believe oral health is integral to overall health; in an inclusive environment that embraces diversity; that the profession of dentistry and the oral health team must be led by dentists to ensure the safety of the public; and that lifelong learning is critical to excellence in patient care.

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MDA DENTAL PAC

2022 PAC Competition Results Are In; Central/Livingston, Genesee Lead Winners

The Annual Session MDA Dental PAC Competition was back in-person this year for the first time since 2019. The PAC Competition has been one of MDA Dental PAC's main sources of funding for the last several years, and MDA members again supported it this year.

Throughout Annual Session (which took place April 27-30 in Novi), attendees made contributions to MDA Dental PAC and were entered for a chance to win an iPad, Apple TV, Apple Watch, or Apple HomePod, based on their contribution level. Components were grouped into Regions and their delegates competed to demonstrate the highest participation rate.

This year, the PAC Competition raised \$26,945 through 65 contributions. The average contribution was \$414.54; 13 dentists qualified for the President's Club, with contributions of \$1,000 or more. Thank you!

The individual winners of the Apple products were as follows:

- President's Club — Apple Watch: Dr. Jim Cantwil, of Flushing.
- Platinum — Apple iPad: Dr. Gigi Algenio, of Shelby Township.

- Gold — Apple HomePod: Dr. Mark Krull of Traverse City.
- Silver — Apple TV: Dr. Michael Palaszek, of Grand Rapids.

Region V, comprised by Central and Livingston Districts, led the way in total contributions, with \$5,800 raised. The winner of the highest participation award this year was Region VI, made up solely by the Genesee District Dental Society.

Take a look at the table below to see where your Region finished.

There will be another MDA Dental PAC Competition at next year's Annual Session, with more great prizes to be awarded. Thanks to everyone who entered and helped support Michigan dentistry's political action committee.

Compiled by Neema Katibai, manager of government and insurance affairs. Email him at nkatibai@michigandental.org. Sign up for MDA Legislative Text Alerts by texting MDA to 52886.



Region	Amount Raised	Contributors	Participation Rate
I — Gogebic Range, Copper County, Superior, Cloverland, and Sault Ste. Marie Districts	\$1,450	4	2.4%
II — Vacationland, Northeastern, Resort, and Manistee-Mason Districts	\$3,900	6	1.7%
III — Saginaw Valley and Ninth Districts	\$375	4	0.5%
IV — Muskegon and West Michigan Districts	\$2,520	10	1.2%
V — Central and Livingston Districts	\$5,800	9	2.14%
VI — Genesee District	\$3,750	7	2.9%
VII — Oakland District	\$400	3	0.35%
VIII — Northern Thumb, Thumb, and Macomb Districts	\$2,050	7	1.11%
IX — Detroit District	\$2,450	6	0.72%
X — Washtenaw District	\$1,650	5	1.02%
XI — Southwestern and Jackson District	\$100	1	0.44%
XII — Kalamazoo Valley and Lakeland Valley Districts	\$2,000	2	0.67%
Total	\$26,945	65 contributors	Region VI

MDA House Elects MDA Leadership Team for 2022-23 Administrative Year

The Michigan Dental Association named a new president, president-elect, and elected others to officer and leadership positions at its 2022 House of Delegates, held April 28 and 30 during the Annual Session in Novi.

More than 2,500 dental professionals attended the 2022 MDA Annual Session April 27-30 at the Suburban Collection Showplace in Novi, for the first in-person Annual Session since 2019. Preliminary figures show a total of 1,050 member dentists attending in addition to dental staff. CE headliner Dr. Frank Spear drew more than 550 to his full-day course.

Dr. Vince Benivegna, of East Lansing, will serve as MDA president for the association's 2022-23 administrative year. Dr. Eric Knudsen, of Escanaba, is the MDA's new president-elect and will take over as president in 2023. He formerly served as an MDA trustee and as MDA secretary-treasurer.

Dr. Chris Gorecki, of Warren, was elected as MDA secretary/treasurer. Gorecki is also executive director of Macomb District Dental Society. Dr. Mike Maihofer, of Roseville, who served as MDA president during 2021-22, was named the association's immediate past president. Dr. Todd Christy, MDA speaker of the House, and Dr. Chris Smiley, re-elected as MDA editor, will continue in their respective roles as they continue their terms.

Dr. Vincent Lizzio, of Canton, was re-elected to the MDA Board of Trustees. The House also elected Dr. John Hall, of Traverse City, and Dr. Darshika Shah, of Troy, to the Board.

The MDA House of Delegates also elected delegates and alternates to the 2022 American Dental Association House of Delegates. Delegates elected include Dr. Gabriel Holdwick, of Harbor Beach; Dr. Elizabeth Knudsen, of Escanaba; and Dr. Daniel Miller, of North Muskegon. The delegation to the ADA House also includes all current MDA officers and members of the MDA Board of Trustees (see Page 4).

Alternate delegates elected include Dr. Lisa Christy, of Bridgman; Dr. Mark Johnston, of Lansing; Dr. Naila Farooq, of Commerce Township; Dr. Margaret Gingrich, of Big Rapids; Dr. Graham Greenland, of Grand Rapids; Dr. Jason Mashni, of East Lansing; Dr. Debra Peters, of Grand Rapids; and Dr. Sarah Tomaka, of Bridgeport.

For more Annual Session and House coverage, see Pages 42-51.



Benivegna



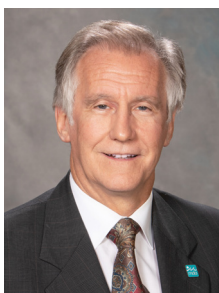
Knudsen



Gorecki



Christy



Maihofer



Smiley



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House Approves Bylaws Changes, Implicit Bias Resolutions

The MDA House of Delegates at its 2022 meeting in April adopted several resolutions, most by consent and with minimal debate on the House floor.

Two bylaws amendments were approved to eliminate obsolete membership categories, including the limited time practice/professional leave category and the non-dentist spouse category. The limited time practice/professional leave category was dropped because dues waivers can perform the same function. The non-dentist spouse category was created years ago to enable surviving non-dentist spouses to qualify for the MDA's former health insurance plan and is no longer applicable.

In other actions, the House:

- Approved a resolution urging the MDA Board of Trustees to pursue changes through the state of Michigan to allow mandatory implicit bias training to be considered within the required 60 hours needed by dentists for relicensure, and to allow for asynchronous training (the ability to do the training from a recorded webinar rather than being required to take a live course or webinar).

- Approved a proposal urging the Board to approve funding for two additional alternate delegates to the 2022 ADA House of Delegates, in order to create more opportunities for member involvement in governance.

- Changed the wording of MDA bylaws to eliminate

“his/her” “he/she” and “him/her” and instead use the words “they” and “their.”

- Urged the Board to revisit the objectives of the MDA Public Education Campaign and provide an informational report to the 2023 House.

- Updated Nominating Committee Guidelines to allow the current MDA president to serve as a non-voting member for transition purposes.

The House defeated a resolution proposing that the MDA Board research and prepare a report to the 2023 House regarding creation of a dental implant registry. Another resolution was defeated that would have added to the ADA/MDA *Code of Ethics* an MDA Addition on dentist/employee interpersonal relationships.

In other House news, Dr. Todd Christy, House speaker, announced that next year's House of Delegates would be his last in that position. Christy has served as speaker for the past five years. Next year's House will be his sixth as speaker.

For a copy of the unofficial House actions, contact the MDA's Michelle Nichols-Cruz at mcruez@michigandental.org.



Christy

Tip: Maintain Medical Coverage to Avoid Personal Liability for Medical Costs

One significant change in Michigan's No-Fault automobile insurance enables drivers to choose the level of Personal Injury Protection medical coverage that meets their needs and budget. PIP covers medical bills and other expenses if you're injured in an accident. People with Qualified Health Coverage may also choose to remove PIP medical coverage for themselves and/or household members.

Losing health coverage means there is no insurance available to pay for medical care for those who have opted out of PIP medical coverage.

So, quick action is necessary if your health coverage is canceled or changes and you have opted out of PIP medical coverage.

You have 30 days after losing QHC to add PIP medical to your auto insurance policy or find replacement health coverage, or you risk not having medical coverage for yourself and your family in the event of a crash. This applies to any family members on your no-fault policy who do not have PIP medical coverage, so be sure to review your auto insurance choices any time anyone in the household has a change in health insurance.

If you need more information, please contact MDA Insurance at 800-860-2272 and speak with one of the MDA Insurance auto and home agents.

—Source: MDA Insurance



Federal Extension Keeps Medicaid Patients Covered – For Now

The recent extension of the federal pandemic public health emergency means Medicaid patients cannot be removed from coverage at this time. However, dental offices should help Medicaid patients prepare for the redetermination process once the order ends in July.

States will have to determine the eligibility of Medicaid enrollees. Patients should ensure that Medicaid has their current contact information to receive important notices about this process. Dental offices should verify eligibility on the date of service and prior to treatment at each appointment (this includes Healthy Michigan Plan and Healthy Kids Dental enrollees).

New MDA Board Meets April 30; Welcomes New Trustees

The 2022-23 MDA Board of Trustees met briefly April 30 in Novi following the second session of the MDA House of Delegates, noting departing trustees and welcoming new Board members.

Leaving the Board were Dr. Erick Rupprecht, of Grand Rapids, whose term expired, and Immediate Past President Dr. Steve Meraw. New trustees joining the Board were Dr. John Hall, of Traverse City, and Dr. Darshika Shaw, of Troy. Both won election at the 2022 House, as did returning trustee Dr. Vince Lizzio, of Canton.

The reconstituted MDA Board conducted a brief agenda of business, summarized below.

ADA House of Delegates: Based on the recommendation from the 2022 MDA House of Delegates, the Board approved funding for two additional alternate delegates to the 2022 ADA House of Delegates in Houston. The MDA will send a delegation of 18 delegates and 10 alternate delegates.

Annual Session: The Board recognized Dr. Neeta Chesla, chair of the Committee on Annual Session, and Dr. Kevin Sloan, chair of the Committee on Continuing Education, for their efforts in making the 2022 MDA Annual Session a success.

Coalition for Modernizing Licensure: The MDA received a request from the ADA Council on Dental Education and Licensure to join the Coalition for Modernizing Dental Licensure. The coalition's mission is

to ensure patient safety, increase access to care, and promote professional mobility by modernizing the dental licensure process. Based on the MDA's licensure policies supporting the elimination of the single encounter, live patient, procedure-based clinical licensure examination format and the clinical dental licensure examination, the Board agreed to join the coalition.

CODA accreditation: The MDA received a request from the Washington State Dental Association to join it and several state dental associations in a letter to the Council on Dental Accreditation regarding standards for dental hygiene and dental assisting programs. The purpose of the letter is to encourage CODA to review and revise standards that are seen as overly prescriptive. The Board chose not to sign onto the letter, as the issues raised in the letter did not appear to be a concern in Michigan after checking with multiple stakeholders. It was not clear that addressing the identified standards would result in an increase in dental hygiene and dental assisting students.

MDA Foundation: The Board reviewed a report from the MDA Foundation Workgroup regarding governance and operations and approved recommended changes to the Foundation bylaws. The Board also reviewed candidates for the MDA Foundation Board of Directors and approved three new directors: Drs. Reem Al-Aboussi, Elizabeth Knudsen, and Shanelle Pearce.

KEEPING CURRENT

Events and Such

To publicize a local meeting or dental event in this space, contact Jackie Hammond at jhammond@michigandental.org. Continuing education courses are listed in the *Journal*/Continuing Education department on Page 92.

June 17 — MDAIFG Board of Trustees, 8 a.m.

June 17 — MDA Foundation Board, 9 a.m.

June 17 — MDA Shareholders, 3 p.m.

June 18 — MDA Board of Trustees, 8 a.m.

June 19 — MDA Board of Trustees, 8 a.m.

July 4 — MDA office closed in observance of Independence Day.

Welcome, New Members!

The MDA is pleased to officially welcome the following individuals into membership:

Detroit: Jacob Schering; **Lakeland Valley:** Periza Zaninovic; **Oakland County:** Hsuan Hsia; **Washtenaw:** Min Oh.

Member Reinstatement Applicant

Oakland County: Nezh Jajou-Bachuri.

BHS Disciplinary Report

Visit www.michigan.gov/lara to access the latest disciplinary reports for dentists, registered dental hygienists, and registered dental assistants. You may also check any licensee for disciplinary actions at the same web address.

Self-Reporting of Criminal Convictions and Disciplinary Licensing Actions

Section 16222(3) of Michigan's Public Health Code requires any licensee or registrant to self-report to the Department of Community Health a criminal conviction or a disciplinary licensing or registration action taken by the state of Michigan or by another state against the licensee or registrant. The report must be made within 30 days after the date of the conviction or action. Convictions and/or disciplinary actions that have been stayed pending appeal must still be reported.

Should the licensee or registrant fail to report, and the Department becomes aware of the conviction or action, an allegation will be filed against the licensee or registrant. Sanctions for failing to report can include reprimand, probation, suspension, restitution, community service, denial or fine. For more information contact the MDA's Ginger Fernandez at 800-589-2632, ext. 430.



Boost Your Success with the MDA Mentor Program

Whether you have a question on a specific topic, are looking for advice from a trusted colleague, or you just want to build your professional network, the MDA Mentor Program is a peer-driven resource to help you succeed!

The MDA Mentor Program's convenient, easy-to-use format makes finding expert connections simple and worry-free.

For more information and to start connecting, visit: www.michigandental.org/mentors

- Fully interactive!
- Easy to use – just click on the mentor profile you want to connect with by phone, email, teleconferencing, or in person.
- Search geographically or by topic.



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Names in the News

You may have noticed a “My View” opinion article by **Dr. Craig Spangler**, of Bloomfield Hills, which appeared in the March 7 *ADA News*. Titled “The Dental School ‘Exit Ramp,’” the article examined the problem of dental students who midway through their studies realize they do not wish to pursue a career in dentistry. Spangler noted: “It is time for the ADA, CODA, and the American Student Dental Association to develop an exit pathway for students who find dentistry is not the career for them.”

Spangler is a former program director of the general practice residency at St. Joseph Mercy Oakland, and is a member of the Michigan Board of Dentistry.

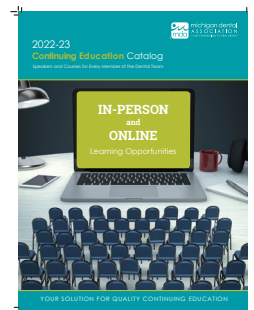


Spangler

CE Catalog Included in this Issue

Turn to Page 57 for this year's MDA *Continuing Education Catalog*, with full details on MDA one-day courses, weekend scientific sessions, MDA Insurance seminars, and more. Included are courses that meet new state requirements for implicit bias training, pain management, infection control, and dental ethics and jurisprudence.

Register for courses using the form on Page 83, or visit michigandental.org/CE-Courses.



Detroit Mercy Impressions Day — The MDA was one of several sponsors of the Student National Dental Association Impressions Day, held for pre-dental students at the University of Detroit Mercy School of Dentistry on April 16. The annual event hosted by the SNDA Detroit Mercy chapter drew a total of 55 in-person and eight virtual students. The students received presentations from the Detroit Mercy Admissions Office as well as the Diversity and Inclusion Office regarding the school's Summer Enrichment Program. They also participated in mock interviews with faculty, received school tours, participated in a simulation lab activity, and heard a “How to prepare for dental school interviews” presentation.

Updated MDA Bylaws Now Available

The MDA bylaws, containing actions from the 2022 MDA House of Delegates are now available. Any member wishing to receive a copy of the MDA Bylaws may do so by contacting Michelle Nichols-Cruz at the MDA at 1-800-589-2632, extension 414, or via email at macruz@michigandental.org.

The updated bylaws are also available on the MDA's website at www.michigandental.org/MDA-Manuals.

Foundation Sparkling Smiles Celebration Raises \$67,000 at Annual Session

The MDA Foundation's 2022 Sparkling Smiles Celebration took place April 27 during the Annual Session in Novi — and as in previous years, it was a big success. More than 170 people attended, and the event raised a total of \$67,000. For more details and photos, see Page 50.

In addition to donors and sponsors, eight community organizations that received grants from the Foundation and three scholarship recipients were also in attendance. They shared the impact the philanthropy of the MDA community has had on the dental health of Michigan's most in-need residents. And, a mini-grant of \$2,500 was awarded during the evening to Catherine's Health Center, of Grand Rapids.

Dr. Dan Peters, MDA Foundation president, said, "The MDA Foundation would like to thank everyone who attended the event and we look forward to hosting the Sparkling Smiles event next year during the 2023 MDA Annual Session in Grand Rapids."



Peters

Email Spear Phishing: A New Level of Scary

By Robert McDermott
President/CEO, iCoreConnect

Editor's note: This article was provided to the MDA by MDA-endorsed iCoreConnect.

Cybercriminals are exploiting current events like the crisis in Ukraine in order to steal personal information and money. This is a common — and growing — problem. And one of the most successful ways cybercriminals target you is through your email.

You've probably heard of *phishing*, where cybercriminals use email as their gateway to your personal information. But *spear phishing* takes email targeting to an entirely new level of scary. Your attacker actually gets to know you. These cyber attackers collect information relevant to you from across the internet so their email seems like an email you should expect. Sometimes you may be asked to click a link or attachment, or to respond. But beware — if you do, you've opened the door for malware to get into your practice management system, accounting, and other important applications.

Learn to spot the trick

Be cautious when you receive an email from the bank, your IT department, or a vendor; for example, an email stating that you need to reset your password or go to a website to update information. Reach out to the sender separately to verify it really came from them.

Don't click the link

A quick way to see if the link is suspicious is to just hover your cursor over it. The URL should point to the site to which the email claims it will be going. If it doesn't, or you have any doubts, alert your IT team.

Limit cybercrime access points

Protected Health Information should not travel in or out of your general email inbox (Gmail, Yahoo!, etc.). The safest HIPAA-compliant email:

- Meets all five required HIPAA safeguards.
- Transmits across a private encrypted network.
- Encrypts email in transit and "at rest" in your inbox.
- Requires you to initiate first email communication to those outside your network.

Recovering from an attack is much more difficult and costly than preventing it in the first place. So, provide ongoing staff education. Assess the security of your HIPAA-compliant email. And implement a plan to send the bulk of your emails through a truly secure HIPAA-compliant email.

iCoreConnect, an MDA Services endorsed partner, specializes in comprehensive software that speeds up workflow for dentists. iCoreExchange is an encrypted, fully HIPAA-compliant email. MDA members receive a discount on iCoreExchange. Book a demo at iCoreConnect.com/Mi1 or call 888-810-7706.

—From MDA Services



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These Great MDA Member Benefits Will Help You Succeed

The MDA's Mission is to "Help Member Dentists Succeed." Here's a quick look at some popular MDA benefits you'll find helpful:

MDA Mentor Program: The MDA Mentor Program is a great way to meet other dentists, share their experiences, and benefit from colleagues' perspectives and advice. The MDA created the Mentor Program after numerous requests for a formal mechanism to match members with experienced individuals willing to serve as mentors. For more information, visit michigandental.org/Mentors.

DiSC® Training: The leading personal assessment tool, DiSC® training can help your staff understand each other better, improving work productivity, teamwork, and communication. For more, visit discovermyteam.com or email the MDA's certified DiSC trainer Brandy Ryan at bryan@michigandental.org.

Digital Support Kits: The MDA's new Digital Support Kits can help you boost your social media presence to new heights! You can use the content to post to your professional pages on Facebook and Instagram. Included are step-by-step instructions and social media best practices. For more, visit michigandental.org/Digital-Support-Kits.

Student Debt Resource Center: The MDA's new Student Debt Resource Center assists dental students and recent graduates with understanding and managing loans and debt. Included is information on the basics of student debt, financial assistance, scholarship opportunities, impact stories from MDA members, and more. Visit michigandental.org/Student-Debt.

ADA Contract Analysis Service: The contract you sign with third-party payers is arguably the most important practice decision you can make. Use this free MDA/ADA service to make more-informed decisions for your future before you sign a contract. Contact Kesha Dixon at kdixon@michigandental.org for more information.

MDA Connection App: The MDA's handy smartphone app puts the MDA at your fingertips, plus helpful push notifications alert you to breaking news and information. Make sure you're connected — you can download the app at the Apple App Store or on Google Play.

Radiography Training Program: This program gives your office a convenient, affordable way for dental assistants to obtain radiography training required under Michigan law — without the need for classrooms, travel, and time away from work. Included is an innovative nine-part, online training program. Visit mydentalradiography.com for details.

MDA Job Board: Post a job, or find a job on the MDA Job Board at jobs.michigandental.org. It's a complete online resource for MDA members and staff. Fully interactive and easy to use, and it's always free to search for jobs or search applicant profiles.

Regulatory Compliance: You can rely on the MDA to provide you with the information and tools you need to make sure you comply with important governmental requirements. HIPAA, OSHA/MIOSHA and OIG compliance resources are available through Eagle Associates, endorsed by the MDA. The MDA also offers help with email encryption, computer security, e-prescribing, Section 1557 translation services, waste management, and amalgam separators. Visit michigandental.org/Regulations for complete information.

Some Facts You Should Know about Peer Review/Dental Care

By Harriett McGraw, DDS

Patients seeking dispute resolution with issues related to dental care they have received have several options for filing a complaint. They can retain an attorney, file a complaint with the Michigan Department of Licensing and Regulatory Affairs, — or go through the MDA Peer Review process.

MDA Peer Review/Dental Care is a member benefit as well as a public service. It affords patients and dentists a timely resolution at no direct cost and without the attendant fees associated with hiring an attorney. MDA members have the additional benefit of having complaints reviewed by their peers.

Peer Review cases are initially evaluated by member dentists at the component level, or by specialty committee members. After a complaint is filed, the patient and dentist are contacted by a component committee member in an effort to resolve the dispute through mediation. If a mediated agreement cannot be reached, the case is reviewed, clinically, by three members of the component peer review committee. Once a decision is reached, the dentist and the patient can appeal it to the MDA Committee on Peer Review Dental Care. The appeal is then evaluated at the state level.

In contrast, cases submitted to LARA are evaluated by members of the licensing board, not all of whom are dentists.

Peer review decisions are not public information and are not admissible in a court of law. Decisions made by the Michigan Board of Dentistry are available to the public and, unlike MDA Peer Review, are reported to the National Practitioner Data Bank. The MDA does, however, report member dentists to LARA if during the review process there is evidence of a violation of the Public Health Code.

Peer reviewers do not, and cannot, assess fines or penalties. The maximum amount a member dentist can be required to refund a patient is the amount

paid for services rendered. The one exception to this rule is when both parties agree to a refund in excess of what was originally paid. Again, in contrast, a complaint made to the Michigan Board of Dentistry can result in fines and penalties being assessed, which can include a dentist's license being suspended or revoked.

Because peer review is not a legal process, lawyers are not involved in the proceedings. Their only role is to provide releases for patients to sign when a decision results in monies being refunded by the treating dentist. Having legal representation is recommended when LARA adjudicates a complaint.

MDA Peer Review is a benefit that requires compliance on the part of member dentists. There are instances where dentists decide to drop membership to avoid complying with a decision, typically when a refund to the patient is involved. Doing so has consequences. If an application for membership is submitted at a later date, compliance with a peer review decision is taken into consideration. Another consequence can be the loss of health insurance

coverage. Several insurance policies through the MDA require individuals to be members. In dropping membership, those benefits are lost.

MDA Peer Review is a valuable member benefit and one that has a long history of success in dispute resolution. We are lucky to have this service available to us as MDA members. If you have additional questions on MDA Peer Review, please feel free to contact Ginger Fernandez, MDA professional review and practice management manager, at gfernandez@michigandental.org.



McGraw

*MDA Peer Review is a
valuable member benefit
and one that has a long
history of success in dispute
resolution. We are lucky to
have this service available
to us as MDA members.*

Dr. Harriet McGraw is a member of the MDA Committee on Peer Review/Dental Care.

48% of Dentists Have Already Been Victims of Embezzlement, Many Multiple Times

Few business problems are as painful as suspecting an employee is stealing from you. Unfortunately, embezzlement in dental practices is all too common. ADA research has shown that 48% of dentists have already been victims of embezzlement, many of them multiple times. In fact, the MDA has received several phone calls already this year from dentists who suspected embezzlement and were seeking assistance to uncover it.

If you suspect embezzlement is occurring in your office, or if you want to set up safeguards to lessen the likelihood of it occurring, please contact Prosperident, the newest MDA-endorsed company, for guidance. Prosperident is the world's oldest and largest firm providing dental embezzlement prevention and investigation services to general dentists and dental specialists. Prosperident's fraud examiner teams consist of former practicing dentists, former practice managers, practice management consultants, or others with backgrounds in practice management software training. And you won't spend your time educating them about the business end of dentistry. They know it, inside and out.



SCAN ME

Prosperident is giving MDA members free access to its Embezzlement Risk Assessment Questionnaire, a \$139 value. Scan the QR code on the left and complete the questionnaire. This will help you determine your risk of becoming an embezzlement victim and will provide insight into whether it may already be happening in your practice. You may be concerned your staff will know an investigation is happening. Rest easy — Prosperident can perform stealthy investigations into your practice's financial transactions. Your employees will not know that an investigation is taking place.

As important as identifying and stopping embezzlement is, it's equally important to take preventive actions to deter it from happening. Prosperident can help in both ways. The odds are nearly 50/50 that you'll be a victim of embezzlement in the future if you don't take preventive action now.

Contact Prosperident and find out how its highly knowledgeable team can help you identify and protect you from embezzlement. MDA members receive a 6% discount on preventive and investigative services.

Visit www.prosperident.com/michigan or call 888-398-2327. A confidential discussion with CEO David Harris will be arranged.

Best Card is the Best Strategy for Reduced Credit Card Merchant Fees

The cost of processing credit cards can take a real bite out of profits. But you'll get a great deal by switching to Best Card, the MDA-endorsed merchant services company. One Michigan office showed \$40,000 in savings for one year! On average, dentists save \$4,221 or 28% on processing costs, while getting superior service. Why surcharge your patients for using credit cards, or rely on a "consultant" to negotiate reduced fees and take half of what they save you, when you can work directly with a company that charges fixed and fair fees? Call Best Card at 877-739-3952 or visit BestCardTeam.com/MI. To see what you can save, send a recent credit card processing statement to compare@bestcardteam.com, or fax it to 866-717-7247.

Palladium Costs Soar in Wake of Russian-Ukraine Conflict

Russia produces 40% of the world's palladium, according to the U.S. Geological Survey – a supply that is threatened by the Russian invasion into Ukraine. As of late April, palladium was valued at \$2,358 per Troy ounce on the London metals market. Prices are expected to remain high while so much uncertainty exists.

This is the perfect time to submit scrap metals for refining with MDA-endorsed D-MMEX EasyRefine in a free insured D-MMEX shipping kit. Call 800-741-3174 or scan the QR code below. Members also get a coupon for an additional 2% bonus on the total value of your submission, in addition to the MDA member 5% bonus. Refining must be received by June 30.



SCAN ME

Maximize Your Web Presence with MDA-endorsed ProSites

Did you know 85% of consumers read up to 10 reviews of a business online, and 47% believe reputation is especially important for dentists? A recent study by ProSites found 68% of dentists surveyed feature patient reviews on their websites to start building credibility with potential patients from the outset. You have only five seconds to make an impact with your website. Contact ProSites at 888-932-3644 or prosites.com/mda to start getting more out of your website today.



Health Care Sector Hit Hard in 2021 by Ransomware Attacks; Be Proactive

Last year, the Internet Crime Complaint Center received 3,729 complaints identified as ransomware, with adjusted losses of more than \$49.2 million, according to the 2021 FBI Internet Crimes Report. Ransomware is malicious software that encrypts data on a computer, making it unusable. The data is held hostage until the ransom is paid. Cyber criminals threaten to destroy the victim's data or to release it to the public if the ransom is not paid, but paying the ransom is no guarantee that the data will be returned to the owner. The FBI urges victims to report ransomware incidents to their local FBI field office or the Internet Crimes Complaint Center to give investigators the information necessary to track ransomware attackers, hold them accountable under U.S. law, and prevent future attacks.

"Although cyber criminals use a variety of techniques to infect victims with ransomware, phishing emails, Remote Desktop Protocol exploitation, and exploitation of software vulnerabilities remained the top three initial infection vectors for reported ransomware incidents," the report states. Here's how to protect your practice:

- Patch and update your operating system and software.
- Train and retrain staff about phishing and the risks of suspicious links and attachments.
- Make an offline backup of your data. Backing up to the Cloud eliminates the threat of external hard drive failures or other types of hardware damage rendering your back-ups useless.

- Purchase cyber liability and data breach insurance.

Contact Melanie Adler at MDA Insurance by calling 800-860-2272 for help with cyber liability/data breach insurance.



insurance

MDAPROGRAMS.COM

Open Enrollment for Vision Insurance

If you don't have vision insurance, you can now enroll in the MDA's VSP vision insurance plan. There are three levels of coverage to choose from: exam only, basic and premium. The major difference between the basic and premium plans is that the frame allowance for premium is higher, and new frames can be purchased annually, rather than every other year. Visit mdaprograms.com and click on health, life and disability, then stand alone products. Or scan the QR code to complete an application online.



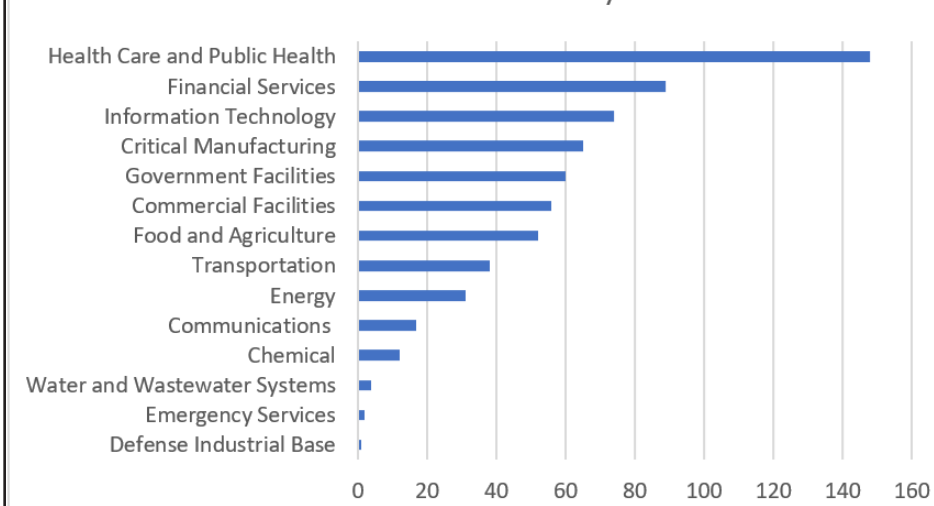
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Infrastructure Sectors Victimized by Ransomware*



*Federal Bureau of Investigation Internet Crime Report 2021, pg. 15.



By Christopher J. Smiley, DDS
Editor-in-Chief

The Teacher, Yoga, and the Third Eye

Heather, a dental assistant on my team, asked for advice. Parents at her son's elementary school were concerned that a teacher had told the students

that fluoride is harmful because it "clogs their third eye." Children were now refusing to drink fluoridated water or use products containing fluoride.

Heather wanted to know if there was an evidence-based approach she could take to resolve the alarm the teacher had created for her son and his classmates. Before I considered her question, I needed to know if her son's concern was about the safety of fluoride or the suggestion that he has a third eye!

What was meant by a third eye and where did the teacher get her information? A quick Google search produced a document from an Australian yoga festival asserting that our brain's pineal gland functions as a third eye that governs extrasensory abilities, intuition, discernment, psychic awareness, and expanded mind capacity. It went on to contend that community water fluoridation clogs these abilities and alters sleep cycles!

I discussed with Heather my critical appraisal of this "yoga article," the bias it showed, and identified its unsupported claims, adding that I wasn't confident how a study could show that individuals from a fluoridated community have decreased psychic awareness. I then referenced literature on the safe and effective use of fluoride that I found on health care database search engines, including PubMed and Epistemonikos.

Presenting the nuances of evidence supporting health care choices can be fraught with challenges, particularly in this instance where the teacher, a trusted, authoritative individual, promotes dubious claims to the students. The reality is that patients of all ages regularly present with challenging beliefs that shape their care choices with "alternative facts," often amplified by social media, and they have difficulty recognizing pseudo-science.

It is equally frustrating to overcome the misinterpretation of personal experiences that seemingly confirm a

patient's wrong conclusions. For example, when Grand Rapids became the first city to adjust fluoride levels in the community water supply, the city water department received calls from anxious citizens complaining that their teeth were falling out because of community water fluoridation. Callers claimed that they had gum sores and that the enamel was peeling off their teeth. These citizens demanded the city quit treating their water with fluoride, convinced that whatever they were experiencing, real or imagined, was related to fluoridation. This happened in 1945 before searchable databases with reliable evidence. Fortunately, city officials quickly assured callers voicing concerns, letting them know that the fluoridation initiative had not yet begun! Local newspapers reported the delay in the fluoridation initiative and related the premature calls the water department had received. Callers and their reported conditions immediately disappeared.

Promoting the best evidence isn't always this clear-cut. An evidence-based approach is needed to inform our patients by blending the best scientific evidence with the clinician's expertise and the patient's needs and preferences. Evidence presented must be valid and reliable and include a discussion of aspects of critical appraisal to explain why one study is more valid or reliable than another. It is best to present this information in plain language to allow our patients to make the best choices informed by the best evidence. We are obligated to provide care supported by the evidence, and the courts are looking for the best evidence to guide the standard of care.

Often, all we can do is place the options on the table to inform the patient's decision. A patient-centered approach presents the findings, recommendations, options, and supporting evidence to inform care choices. Patient satisfaction and desired outcomes are achieved by partnering with the patient in an evidence-based approach. Don't rely on intuition and a third eye to develop a treatment plan. ●

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By MDA Staff with Eric Tye, DDS
Chair, MDA Committee on Membership

A Recent Graduate Looks for Practice Data

Question: I recently graduated dental school and I'm looking to purchase a dental practice. To better analyze the practice's finances I was hoping

to find national and state averages for overhead percentage, collection percentage when compared to production percentage, dental supplies percentage of overhead, staff percentage of overhead, and so forth. How could I find data like this?

Answer: The MDA has a wealth of practice start-up resources, including a biennial fee survey, biennial dental staff compensation and benefit survey, an online *Establishing Your Professional Career* guide, and more. Additionally, the ADA offers a variety of online and print resources such as the Guidelines for Practice Success module and the Health Policy Institute Data Center. Your local dental society can also be a great confidential resource for settling into the area. For more detailed assistance, contact the MDA membership staff at membership@michigandental.org or at 517-372-9070.

Question: I attended Annual Session in Novi and had a great experience and really enjoyed the camaraderie at the meeting. What in-person CE courses are planned by the MDA for the rest of the year?

Answer: The next multi-day event is Summer Scientific Session. It will take place at Treetops Resort in Gaylord, July 22-24, with two days of courses totaling six CE credits, plus a golf outing. Many additional CE seminars are scheduled at MDA headquarters in Okemos and at various locations around the state. For details on all CE courses, visit michigandental.org/CE-Courses or leaf through the *2022-23 MDA CE Catalog*, in this issue.

Question: I'm starting a new position at a practice that's on the other side of the state from where I practice now. I attend meetings of my current local dental society and paid my dues this year to that society. How do I switch my local society? And what else do I need to do, and who

do I need to update about changing my address?

Answer: MDA staff can help! Contact the MDA Membership Department with your new address and they will update your contact info, transfer your local society membership, and connect you with your new local dental society.

You'll also need to update your changes to the Michigan Department of Licensing and Regulatory Affairs, the Drug Enforcement Administration, and your insurance carriers, to name a few other entities. For more guidance and details, contact membership@michigandental.org.

Question: I'm having a hard time finding someone to cover my practice while I take maternity leave later this year. Does the MDA have any suggestions?

Answer: The MDA's COVER Program is a locum tenens service that links members willing to serve in another member's practice during short or extended terms of absence. The MDA can provide you with a list of your peers who have notified us they'd be interested in short-term assignments just like yours. And of course, your local dental society may also be a great resource to identify dentists in your area willing to help. Contact the MDA Membership Department for more information.

Question: While I was at Annual Session I heard a member talking about volunteer dentistry — helping others who need dental care. I'm interested in volunteering. Could you point me in the right direction?

Answer: There are many organizations that need volunteers. One that is affiliated with the MDA is the Michigan Donated Dental Services (DDS) program. The DDS program is funded by a yearly grant from the Michigan Department of Health and Human Services and conducted through the donated services of dentists and dental laboratories. It serves disadvantaged elderly or disabled individuals who cannot afford needed treatment. Contact April Stopczynski, MDA manager of access and prevention, for more information at 517-346-9417 or astop@michigandental.org. ●

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State Budget Proposals and Dentistry: By the Numbers

By Neema Katibai, JD
Manager of Governmental and Insurance Affairs

Dentistry has been at the forefront of this year's state budget process, ever since February when Gov. Gretchen Whitmer proposed a historic investment to restructure Medicaid dental benefits. That proposal included targeted funding for outpatient hospital and ambulatory surgical centers that provide access for vulnerable populations to receive dental care. Additionally, the governor's proposed budget continued funding the grant that allows the MDA to operate the Michigan Donated Dental Services (DDS) program.

The MDA has been working closely with state legislators, the Michigan Department of Health and Human Services, the governor's office, and other important stakeholders to advocate for the MDA's priorities. In late April and early May, the House and Senate passed their separate budget proposals, which also touched on the MDA's priorities. Take a look at the charts on these pages, current as of press time, to see how all the proposals compare to the MDA's priorities.

What's next?

Throughout June, House and Senate leadership will meet with the governor's budget director to negotiate before the House and Senate Conference Committees meet. The focus of those negotiations is to determine

budget targets, which establish how much money will actually be appropriated overall and for each department. These negotiations are not technically part of the budget procedure, but they do occur.

If all sides reach an agreement, the Conference Committee will put out its Conference Report reflecting the agreement, and a bill will be passed by the Legislature, then go to the gov-

ernor to be signed. If an agreement is not reached, the House and Senate will move forward with negotiating their proposal and put forward a bill without the governor's input. Once the bill is sent to the governor, she will be able to sign it into law, line-item veto specific items in the budget and sign it, or veto it in whole.

The MDA will keep you informed as this process unfolds. ●

Medicaid Dental Restructure

Gov. Whitmer Proposal

- **\$243.3 million gross (\$68.6 million general fund)**, in addition to funding currently in place for Healthy Kids Dental, dental benefits under the Healthy Michigan Plan, and Adult Medicaid Fee-for-Service
- Combine all Medicaid dental programs into a single contract, modeled after the Healthy Kids Dental program
- Allow multiple dental health plans to administer the contract
- Increase reimbursement and strengthen networks available to the Medicaid population

MDA Proposal

- **Support Gov. Whitmer's proposal, with the following criteria:**
- Preserve the success of the Healthy Kids Dental program
- Issue all Medicaid patients private insurance cards
- Allow dentists to treat Medicaid patients without participating with private insurance companies
- Ensure a reimbursement rate at 60% UCR or more
- Require strategies to improve and strengthen provider networks, increase benefit utilization, and decrease patient no-show rates
- Require timely access to data and reports

House of Representatives Proposal

- **\$51.0 million gross (\$17.7 million general fund) funding for Adult Medicaid Fee-for-Service**
- Focus on increasing the fee schedule

Senate Proposal

- **\$41.6 million gross (\$14.4 million general fund) funding for Adult Medicaid Fee-for-Service**
- Focus on increasing the fee schedule

Facility and General Anesthesia Fee for Medicaid Patients

Gov. Whitmer Proposal

- **\$4.2 million gross (\$1.2 million general fund)** to increase the facility fee paid by Medicaid for dental procedures requiring access to an operator
- Increase outpatient hospital and ambulatory surgical center fees in the Medicaid fee schedule
- After Medicaid reduction factors, outpatient hospitals would receive \$829.15 and ambulatory surgical centers would receive \$538.95.
- No proposed funding to address anesthesia fee

MDA Proposal

- **\$10.6 million gross (\$3 million general fund)** to increase the facility fee paid by Medicaid for dental procedures requiring access to an operator
- Inclusion of language in legislation to require outpatient hospitals receive \$2,300 per dental procedure, and ambulatory surgical centers to receive \$1,495 per dental procedure
- Additional funding to improve the fee paid to anesthesiologists under Medicaid for dental procedures***
- Creation of a billing code for dental anesthesia***

House of Representatives Proposal

- **\$4.2 million gross (\$1.2 million general fund)**
- **Concurs with governor's proposal** to increase the facility fee paid by Medicaid to outpatient hospital and ambulatory surgical centers for dental procedures requiring general anesthesia
- After Medicaid reduction factors, outpatient hospitals would receive \$829.15 and ambulatory surgical centers would receive \$538.95
- No proposed funding to address anesthesia fee

Senate Proposal

- **\$10.6 million gross (\$3 million general fund)** to increase the facility fee paid by Medicaid for dental procedures requiring access to an operator
- Inclusion of language in legislation to require outpatient hospitals to receive \$2,300 per dental procedure and ambulatory surgical centers to receive \$1,495 per dental procedure
- No proposed funding to address anesthesia fee

***The MDA has been working closely with other stakeholders, the department, and legislative leadership to gather data to support a proposal to increase fees paid under Medicaid for anesthesia and sedation for dental procedures.

Michigan Donated Dental Services (DDS) Grant

Gov. Whitmer Proposal

- **Maintain MDHHS grant at \$150,000**

MDA Proposal

- **Increase MDHHS grant to \$200,000** to support the MDA's Donated Dental Services Program. The increased grant will be used to recruit new dentists to make up for retirements during COVID-19 and focus outreach to impacted communities with eligible patients

House of Representatives Proposal

- **Maintain MDHHS grant at \$150,000**

Senate Proposal

- **Maintain MDHHS grant at \$150,000**

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By Dan Schulte, JD
MDA Legal Counsel

Purchase Price Allocation When Selling Your Practice

Question: I'm working with a broker to sell my practice. We received an offer, and I was given a letter of intent. It contained an allocation

of the purchase price. How does this matter? The total amount I am being paid is pretty much what I asked for. Should I worry about this now, or is it not binding, like much of what is contained in this letter of intent?

Answer: Reducing the tax liability that you will incur upon the sale of your practice to the greatest extent possible should be one of the early considerations when planning a practice sale. You should be sure to involve your attorney and accountant in this process.

The purchase price and its allocation are not terms that should be binding in a letter of intent (in fact, there is no reason the allocation should be included at all). The only terms that should be binding in a letter of intent have to do with access/due diligence, exclusivity, an earnest money deposit, if any, and certain other non-economic terms. A binding agreement on the amount of the purchase price and its allocation should come later in connection with the negotiation of the purchase agreement and other documents necessary to close the sale.

The allocation of the purchase price can have a material effect on the amount of taxes the seller pays for the year the sale closes and the ability of the buyer to utilize tax deductions in future years. Most sales of dental practices are structured as sales of assets vs. a sale of stock or other ownership interests. This column will focus on an asset sale.

The seller and buyer are not free to allocate the purchase price in any way they choose. Instead, they must comply with Internal Revenue Code (Section 1060 and Form 8594). That law requires that the final purchase price be allocated in a certain manner, starting with tangible assets, and moving to intangible assets. The tangible assets of a dental practice being sold are usually supplies, equipment, furniture, etc. The intangible assets

consist of goodwill and a covenant not to compete. The portion of the purchase price first allocated to the tangible assets should be equal to their fair market value. The balance of the purchase price is then allocated to goodwill and the covenant not to compete.

Despite the requirements of the tax law making it fairly clear how to go about a purchase price allocation, there can be tension/negotiation between a seller and buyer in coming to an agreement. This is because of the differing tax consequences to each resulting from the allocation. The buyer will want to allocate as much as possible to the tangible assets, and the seller will want the opposite. This is because, first, the buyer will be able to depreciate (and possibly write off immediately) these amounts and obtain tax deductions much more quickly (right away or over three to seven years) than the amounts allocated to goodwill and a covenant not to compete (15 years). Secondly, amounts allocated to tangible assets will result in gain taxed to the seller at ordinary income rates vs. the lower capital gain rates applicable to the gain resulting from amounts allocated to goodwill and a covenant not to compete. The allocation of the purchase price to tangible assets should be based on a valuation or other reasonable estimate of their fair market value. A valuation/reasonable estimate usually cannot be obtained until after due diligence is completed and is unknown at the letter of intent stage.

The allocation of the purchase price can cost or save the parties thousands of dollars in taxes. It should be done after due diligence has been completed and a valuation of the tangible assets is available, or some other reasonable estimate of fair market value has been obtained. ●

Send legal questions for publication to Journal Managing Editor Dave Foe at dfoe@michigandental.org.



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By Jodi Schafer, SPHR, SHRM-SCP

More Tips for Hiring and Developing a Great Staff

Question: We are having such a hard time hiring staff for our practice. Not only are we struggling to find employees who are the right “fit” for

our culture, but we are really struggling to find an office/practice manager. It seems like we’ve tried everything as far as recruiting goes. Do you have any other ideas to help us?

Answer: You are not alone in this struggle. Employers everywhere are having a hard time finding employees to fill positions, at all levels. Since the pandemic began, many people have retired or left the workforce for a variety of reasons. And, the challenge of having enough employees to fill positions is not going away any time soon. So, practices must be more creative in recruitment, including developing partnerships with high schools, community colleges, and training programs. They also need to pay attention to their work culture to ensure that they don’t lose the people they have. Opportunities for continuous learning are key for retaining employees, so let’s take a deeper look at how you can create those opportunities within your practice.

Think about the key skills you need each role to have to be successful in your practice. Ideally, you have these key skills included in the job descriptions for each position. Things like communication, organization, conflict resolution, and working on teams are all skill areas that practices need. You may have others. What do these look like when they are happening effectively? What resources do you have in place to help build and enhance these skills? If you don’t have clear expectations of employees, this would be a great place to start.

Likewise, what are your processes for communication, organizing the work, and conflict resolution? Do you have policies and procedures in your employee handbook and/or additional training protocols for each position? Who is responsible for administering this training, and how is comprehension and proficiency measured?

Creating an internal training process for these critical areas of interpersonal and teambuilding skills goes a long way toward building shared awareness and understanding for what is expected. Without these structures, employees guess at what they should do, actions are inconsistent, and sometimes their habits do not fit well with your team and practice, creating conflict.

In addition to clarifying your internal systems, policies, and procedures, you should also begin building your training and professional development offerings. Now more than ever, practices need to look within to see if there are employees who can “grow into” new positions, as well as potentially be promoted into leadership roles. You may have someone in the practice who has some natural leadership abilities but needs additional support to take on an office or practice manager role. There are many trainings out there on supervision, communication, conflict resolution, etc. HRM is launching our own online training platform at www.HR hazmat.com to support our clients with these needs. We also provide on-site training, tailored to the needs of each client.

This is just one of many external resources/vendors available to assist you with leadership development. Regardless of the training you use, make sure that the learning objectives align with your goals and that it is delivered in a way that is engaging for your staff.

Training is one step in building new skills, but it is not sufficient by itself. Training plus ongoing coaching and mentoring at the practice level is what creates real change; helping employees refine their skills as they build new habits. This requires synchronization and ongoing effort on your part to ensure that your investments in training and development bear fruit. Whether you’re focused on growing leaders or building a talent pipeline, you’ll need to be heavily involved in the process.

This is going to be the way of the future when it comes to talent acquisition. While we may long for the days of “post and pick,” the truth is that this new path forward — while more time- and cost-intensive — is also more flexible, more predictable, and more likely pay off in the long run. ●

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By Craig Start, MBA
President, MDA Insurance

Pandemic Puts Consumer Focus on Life Insurance

One effect of COVID-19 has been to sharpen people's awareness about the need to have life insurance. And while many people think of life

insurance as a resource to pay for their final expenses, life insurance can do much more than that. Purchased in the proper amount, it can provide for the ongoing needs of your survivors, or it can supplement your retirement income.

As an insurance guy, people tell me a lot of surprising stories, but none are as shocking and sad as those related by the survivors of people who died without life insurance, or with too little life insurance. I've heard of people who stop paying their life insurance premiums when they are financially crimped — often without the knowledge of a spouse — and then die suddenly. Families are left with either nothing, if it is a term life policy, or only with the cash value that had accumulated in a whole life policy. Bereaved families struggle to get by with much less money to maintain their lifestyles. Mortgage foreclosure and bankruptcy often become inevitable.

How can such tragic situations be avoided? By working with a life insurance agent to buy a life insurance policy you can afford, and by keeping premiums current. If you do that, you'll be further ahead than about 48% of U.S. adults who have no life insurance. That figure comes from LIMRA, a life insurance market research organization. Interestingly, 56% of Black Americans own life insurance, according to LIMRA — a greater percentage than the overall average.

"Our research shows that the pandemic raised consumer awareness and demand for life insurance protection," says David Levenson, president and CEO of LIMRA, LOMA, and LL Global. "Three in 10 Americans tell us they are more likely to purchase coverage due to COVID-19.

This interest has translated into record sales."

Who is more likely to purchase life insurance due to COVID-19? According to LIMRA, these individuals include:

- 45% of millennials.
- 58% of Black Americans.
- 33% of men.
- 42% of those earning more than \$150,000 per year.
- 42% of those who tested positive for COVID-19.

Again, according to LIMRA, for the fifth consecutive year fewer women than men have life insurance, with just 47% of females insured. About 14% of women — more

than 18 million — lost their life insurance coverage in 2020, with more than 36% saying it was due to unplanned job loss. And 44% of uninsured and underinsured women say they need (or need more) life insurance.

One barrier to buying the coverage you may need is not knowing who you can rely on to provide unbiased and appropriate suggestions for insurance. Fortunately, as an MDA member you don't have to struggle with that problem. MDA Insurance is your trusted source for all your insurance needs. We offer individu-

al and group life insurance plans, as well as term insurance and permanent life insurance. We work with more than 20 carriers, and can find a competitively priced plan that will fit your needs. We can help you decide on the right *amount* of insurance and the right *type* of insurance, guided only by what is in your best interest.

There is no doubt that life insurance can be confusing. There are many kinds to choose from, and an experienced insurance agent will help you decide upon the plan that will best meet your financial needs and goals. For instance, if you are in a business partnership, you may need life insurance to fund a buy-sell agreement.

We don't like to think about our inevitable demise, but it is the responsible and loving thing to do. Call us at 800-860-2272 to help you choose a plan that's best for you. ●

**Bereaved families
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Are Neoplasms a Risk Factor for Peri-Implantitis?

By Farah Safieddine, BS, Naama Sleiman, MS, PhD, and
Melanie E. Mayberry, DDS, MS-HCM

A 58-year-old female presented to the clinic with failing implants in the upper left quadrant due to peri-implantitis, a pathological inflammatory condition surrounding implants resulting in progressive loss of supporting bone.¹ The patient reported a history of a “fibroma” in the upper-left posterior area that was excised and biopsied approximately five years previously. The biopsy was diagnosed as a benign neoplasm, specifically an ossifying fibroma. Teeth #13-#15 were extracted at the time of the biopsy. Two implants were placed six months ago in the area of teeth #14 and #15 by a previous dentist as shown in the radiograph below.

As clinicians, it is important to consider the risk factors associated with the development of peri-implantitis. While the patient had a benign neoplasm, neoplasms can be either a be-

In patients with dental implants, does a history of neoplasms compared to healthy tissue increase the risk of peri-implantitis?

Clinical Scenario



Patient presents with failing implants in area of previously excised neoplasm specifically an ossifying fibroma. The question arose by the student dentist if this could have contributed to the risk of peri-implantitis and implant failure.

Literature Search Strategies



PubMed
Mesh terms “dental implants,” “fibroma, ossifying,” and “Peri-implantitis.” Search was refined to include the term “neoplasms” and filtered to the last 10 years.

Evidence Summary



The EBD literature search concluded with a high level of evidence, a systematic review and meta-analysis, that ossifying fibroma with augmentation is a risk factor for peri-implantitis and that ossifying fibromas alone may or may not cause peri-implantitis.

nign or malignant mass of cells that develop when cells unexpectedly divide abnormally. Based on the patient’s history of implant placement in an area of a previously excised neoplasm, the question arose if this could have contributed to the risk of implant failure.

this case is healthy tissue. The outcome of interest is risk of peri-implantitis. Thus:

- P** = Patients with dental implants
- I** = History of neoplasm
- C** = Healthy tissue
- O** = Risk of peri-implantitis

Literature search pathway

For this PICO question only one database was used, PubMed. PubMed is a free resource that contains more than 33 million citations and abstracts.² The PubMed search was conducted using the following MeSH terms: “dental implants,” “fibroma, ossifying” and “peri-implantitis,” which resulted in the retrieval of no articles. The search was refined to include the term “neoplasms” and filtered to the last 10 years, at which a consensus re-

Figure 1



PICO question

Therefore, a PICO question was developed. The clinical question was formulated into a searchable PICO format: “In patients with dental implants, does a history of neoplasms compared to healthy tissue increase the risk of peri-implantitis?”

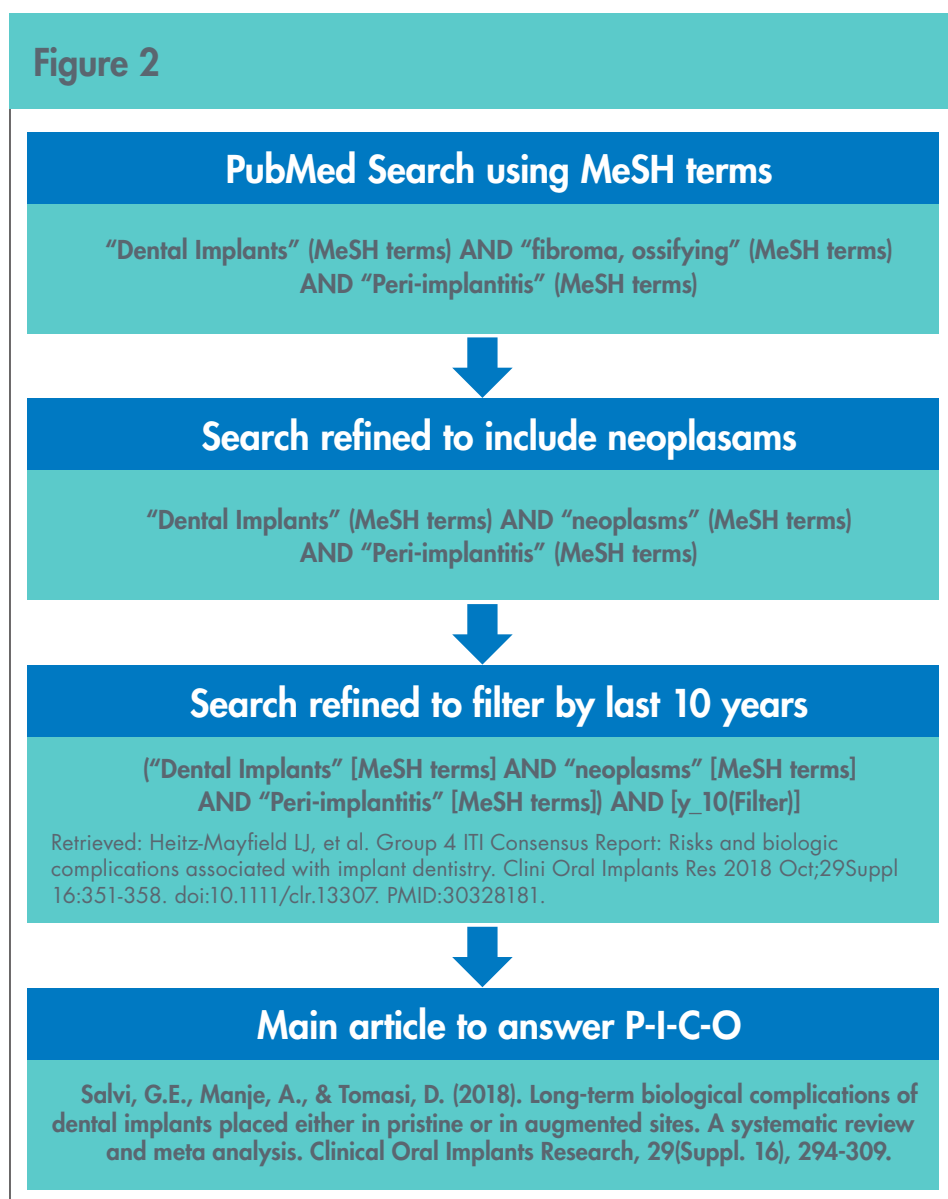
The population of interest is patients with dental implants. The intervention or exposure of interest is history of neoplasm. The comparison in

port was identified, Group 4 ITI Consensus Report: “Risks and Biologic Complications Associated with Implant Dentistry,” by Heitz-Mayfield, et al. This article also was used to identify additional articles that were relevant to our PICO question. We then identified the article titled “Long-term Biological Complications of Dental Implants Placed Either in Pristine or in Augmented Sites: A Systematic Review and Meta-analysis,” by Salvi, et al., to answer the PICO question.

Evidence summary

To determine whether the patient is a prime candidate for implant tooth replacement, it is important to consider the risk factors associated with the development of peri-implantitis. Risk factors that may be associated with the development of peri-implant pathology include, but may not be limited to, a history of periodontitis, the presence of foreign bodies, and/or pathology such as a neoplasm, or augmentation in the future site of an implant. The EBD literature search concluded that ossifying fibroma with augmentation is a risk factor for peri-implantitis, and that ossifying fibromas alone may or may not cause peri-implantitis.

Ossifying fibromas are benign tumors that are composed of “metaplastic bone, fibrous tissue and varying amounts of osteoid.”³ Early diagnosis of ossifying fibromas is important because this neoplasm can be locally aggressive in its growth, and can cause tooth loss, root displacement, and/or perforation.³ Once the fibroma is excised, the patient is often deficient in bone for sites of implants; therefore, bone grafting would be essential. However, in cases where implants were placed in augmented sites, it was concluded that there was “higher variability and lower predictability in terms of peri-implantitis.”⁴ Peri-implantitis was 10.3% prevalent in pris-



tine sites, while it was 17.8% prevalent in augmented sites.⁴

Although it was concluded that history of augmented sites in areas of ossifying fibromas are a risk factor for the development of peri-implantitis, it is unclear whether the presence of the neoplasm itself is the cause of peri-implant pathology. Implant failure was also found to be more prevalent in augmented sites vs. pristine sites. However, it was concluded that there were no statistically significant differences between implants placed

in pristine vs. augmented sites. It was found that implants that were placed in augmented sites yield a higher risk of developing peri-implantitis and subsequent implant failure.

Additional risk factors were also noted that may be relevant to this case. The pathogens that cause periodontitis have been shown to be similar to the pathogens involved in peri-implantitis infections.⁵ Probing depths ≥ 5 mm and bleeding on probing scores $\geq 30\%$ indicate a greater risk of

(Continued on Page 30)

10-Minute EBD

(Continued from Page 29)

developing peri-implantitis.⁴ This data strengthens the concept that periodontitis is a risk factor for the development of peri-implantitis, and patients with a history of periodontitis have a 2.15 higher chance of developing peri-implantitis.⁵ Specifically, periodontitis can cause future increased risk of marginal bone loss, implant loss, and the occurrence of peri-implantitis, which ultimately would decrease the likelihood of long-term successful implants.⁵ Along with periodontitis, the presence of foreign bodies, such as dental cement, is also considered a risk factor for the development of peri-implantitis.

Excess dental cement causes inflammation of the gingival tissue, and its neglect can lead to bleeding on probing, suppuration, and implant attachment loss and bone loss.⁶ This was concluded after histopathological review of specimens dominated by plasma cells in the inflammatory infiltrate.⁶ Although dental cement causing chronic inflammation can lead to peri-implantitis, further research needs to be done to determine its specific role in this process. On the contrary, sinus wall elevation via a lateral wall approach plays a significant role in the development of peri-implantitis.

According to Stacchi, et al., a cross-sectional study with a total of 156 patients was conducted in which patients underwent either a lateral or transcrestal sinus wall augmentation and received implants.⁷ It was concluded that a sinus wall augmentation via the lateral wall approach significantly correlated with the occurrence of peri-implantitis ($P < 0.001$).⁷ Sinus wall augmentation may be a necessary procedure in the case of neoplasms, such as ossifying fibromas,

which too are a risk factor for developing peri-implantitis.

In conclusion, factors such as ossifying fibromas, periodontitis, sinus wall elevation via a lateral approach, and the presence of foreign bodies play a role in the initiation of peri-implantitis. In this case, the patient's history of an excised ossifying fibroma may have contributed to the peri-implantitis. More research needs to be done to conclude if foreign bodies, such as dental cement, have a specific role in the development of peri-implantitis. ●

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Sleiman

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By Karen Burgess, MBA, CAE
MDA CEO/Executive Director

Without MDA Advocacy, Michigan Dentistry Would Look Very Different

Editor's Note: This report is adapted from Karen Burgess' remarks to the MDA House of Delegates, presented on April 28, 2022.

The last three years have been a somewhat surreal experience. While we are not out of the woods yet with COVID-19, I think that organized dentistry has come back, stronger than ever. Our membership is strong, our finances are strong, and our leadership is strong and forward-focused.

The dental profession here in Michigan has made a good comeback as well, although we are not yet at 100%. Your MDA has been working hard to provide members with practical resources to help you care for your patients and achieve practice success.

Perhaps even more critical is MDA advocacy on behalf of the dental profession and the public we serve. I was looking back over our advocacy initiatives since the time I've been executive director, and I realized something: Without MDA advocacy, dentistry in Michigan could look very different.

Let's take a look at that world.

First, COVID-19's impact on dentistry would have been huge. Dental practices would not have opened when other essential health care services did, and the rules and regulations for re-opening would have been very impractical. MDA advocacy made a difference.

Dentists and dental team members would have had a lower priority for COVID-19 vaccination. With MDA advocacy, dentistry was in Priority Group 1A.

Dentists would not have received any PPE through donations. Instead, the MDA, ADA, and local dental societies helped Michigan dentists access masks, face shields, and other PPE.

There would have been mass confusion in Michigan dentistry! But the MDA cut through the confusion and kept dentists up-to-date on the latest requirements.

Second, there would be additional, harmful regulations. Dentists would still be paying thousands of dollars for consulting help to get through the bureaucratic Certificate of Need Process to buy a dental CT. MDA advocacy was critical in getting dentists an exemption.

Dentists also would still be paying thousands of dollars each and every year in sales tax on dental prosthetics. The MDA got that tax eliminated. And, dentists not only didn't have to pay, they got money back.

OJT dental assistants would no longer be able to take radiographs unless they were licensed to do so, and dentists and dental team members would not be allowed to use handheld X-rays. The MDA stopped that bill.

Dentists would have to comply with onerous administrative requirements that don't really relate to dentistry, due to Michigan's surprise billing law. The MDA got dentistry exempted.

Third, critical regulations to protect the public wouldn't exist. More Michigan communities would be without community water fluoridation. MDA grassroots advocacy fought for community water fluoridation all across the state — and won.

Mobile dental operations would not be required to follow the same rules as regular dental offices. But the MDA got a law passed making sure they do.

Hygienists would have prescription-writing authority independent of dentists. The MDA stopped these efforts.

Dental therapists — if and when we get some in Michigan — would have had less training, less supervision, and the ability to do more-invasive procedures. The MDA tightened up the regulations to ensure future patient safety.

Fourth, there would be fewer dollars for dentistry. Healthy Kids Dental and the Michigan Donated Dental Services (DDS) program would not be fully funded in the state of Michigan budget. With MDA advocacy, funding has remained strong, and we are even looking at expansion of the successful Healthy Kids model to adults with the 2023 budget.

Dentists would not be able to bill for nitrous oxide analgesia under Healthy Kids. But the MDA successfully advocated to preserve this fee.

Finally — there would be no voice for dentistry on some key dental issues. For example, dental students and new dentists would have conflicting and confusing information on managing student debt. The ADA tells us that the class of 2021 graduated with an average of \$300,000 in debt. The MDA curates correct up-to-date info on the new Student Debt Resource Center at michigandental.org.

Specialists could not claim their specialty. MDA-supported legislation passed that recognized five new specialties in our state: oral medicine, orofacial pain, dental public health, dental radiology, and dental anesthesiology. The MDA will continue to monitor and seek legislation if new specialties are recognized at the national level.

Dental insurance companies would continue to cause

confusion and frustration for dentists and patients by leasing their networks to other insurance companies. The MDA is now working with legislators to bring forward a law to require transparency in network leasing.

Vulnerable Michiganders would continue to have little access to dental care in hospital and ambulatory care surgical centers due to low reimbursement rates to the facilities and anesthesia providers. The MDA currently is advocating for Medicaid reimbursement increases to solve the problem.

Teledentistry would be the wild west, with few regulations to ensure patient safety and maintain the appropriate standard of care. The MDA is advocating for legislation and regulations that enhance access to care safely and fairly.

The 2023 state of Michigan budget might not include increased funding for dentistry and dental Medicaid – critical dollars for enhancing access to care and fair reimbursement for services provided.

* * *

There's no doubt that a Michigan without the MDA would be a very different place. Our advocacy initiatives make a real difference, every day, for dentists and for patients.

As I reflect back on the last few years, I'm grateful to our MDA Board of Trustees, our Committee on Governmental and Insurance Affairs, our advocacy staff and lobbyists, our components that schedule legislative events, and especially to members who take the time to respond to Phone2Action alerts, attend in-district meetings, meet by Zoom with legislators and stakeholders, and contribute to MDA Dental PAC.

Thank you for all you do! ●

Contact Karen Burgess at kburgess@michigandental.org.

The MDA Public Education Campaign: An X-Ray View



By James Pond and Matt Maguy
JXM Advertising

Last year, the MDA Public Education Campaign efforts captured people's attention all across the state. Both of the elements of the campaign, Public Education and Find-a-Dentist, experienced banner years. In 2021, Michiganders watched a total of 40,000 hours of campaign videos (compared to 13,000 hours in 2020) and conducted 112,068 searches using the Find-a-Dentist tool. This year, the Public Education Campaign is not only on track to meet our goals of matching last year's engagement, it's exceeding them right from the start.

In the first quarter of 2022, the Public Education Campaign's "Teeth Have Feelings Too" initial installment was seen more than 914,000 times, and its "Cheat Day" video watched for more than 2,000 hours. Find-a-Dentist engagement was up 68% over the same quarter last year, for a total of 27,492 searches for MDA-member dentists. Both confirm that the Public Education Campaign is doing its job — reaching, educating, and

resonating with the people of Michigan.

Below, we will answer some of your most frequently asked questions about the MDA Public Education Campaign. We'll get into our target audience, touch on ad placement, present an overview of this year's efforts, and explain why you won't see MDA videos as commercials on traditional TV.

Here goes!

What is the Public Education Campaign?

Over the years, the MDA's Public Education efforts have become far more than public service announcements reminding folks to visit an MDA-member dentist. They've become a resource for people to rely on as they navigate their way toward wellness. After years of trust-building, careful messaging, and omnichannel digital advertising, the Public Education Campaign has worked to position the MDA and MDA-member dentists as the first partners people turn to guide them on that journey.

(Continued on Page 36)

Targeting Personas



Family Influencers

The parents, caretakers, and appointment makers who set the tone for the health of their whole family.



Blue-Collar Workers

Hardworking folks who are more likely to be in poor dental health but less likely to prioritize dental care.



Millennials

By age or online behavior, Millennials may postpone dental care due to misconceptions around cost or necessity.



Search-Based

Those who are actively looking for trustworthy information through Google or Bing searches.

Public Education Campaign

(Continued from Page 35)

Education always comes first and foremost, as the campaign is an informational resource — the public's connection to all things oral health. Campaign ads and materials never use scare tactics, fear, or shame to get people to go to the dentist. Instead, we use compelling storytelling and shareable educational content to guide people toward making oral health a priority. When someone who has seen ads for the campaign connects with an MDA-member dentist, they choose to prioritize their oral health — not because the MDA told them to, but because they want to. The MDA just helps them make the connections to get there.

How does this serve MDA-member dentists?

This year, as with last, the MDA allocated 80% of the total Public Education Campaign funds toward education efforts, and 20% toward promoting the SmileMichigan.com Find-a-Dentist tool. But support for the FAD tool and MDA-member dentists doesn't stop here. Beyond increasing awareness of oral health issues and promoting MDA-member dentists over non-member dentists, the campaign's efforts directly support MDA-member dentists.

The campaign intentionally makes it effortless for someone to go from seeing an ad to instantly searching for an MDA-member dentist. While we have people's attention, we make it easy for them to take action. Every ad in the Public Education Campaign leads to a corresponding interactive MDA campaign landing page on SmileMichigan.com that features and connects to the FAD tool. Social media ads incorporate actionable, linked phrases like "find a local MDA dentist," while digital display ads often include "Find an MDA Dentist" as their

clickable link button. Connection is as simple as following a link, completing a search, and calling and setting up an appointment — perhaps even with your practice!

What is the Find-a-Dentist tool?

The Find-a-Dentist tool is an integral part of the MDA Public Education Campaign! Right on the smilemichigan.com home page is a button that says "Find a Dentist" and a space for patients to enter their ZIP code. Potential patients are directed to a geocentric listing of MDA-member dentists in their area. Patients can search for MDA-member dentists within 15 miles, 20 miles, 25 miles, or all of Michigan. They can also search by specialty, or even by a dentist's last name.

Each month more than 4,000 Michigan consumers search for a dentist at smilemichigan.com. That means more patients to your office. Make sure your profile is updated with a photo and practice information so that potential patients can easily find you. A photo is very important, so don't skip that! Profiles with photos display first. Your profile is also included on the ADA Find-a-Dentist section at mouthhealthy.org.

What's in a campaign?

The MDA Public Education Campaign materials are entirely digital, designed to meet our audience where they live — online, and on their time. Every Public Education Campaign effort takes an omnichannel approach; its elements run as a combination of ad types across multiple digital platforms. These may include digital display, retargeting, online and over-the-top video, YouTube, connected TV, social media, and paid search, alongside interactive campaign landing website pages.

Who's our audience, and where do they live?

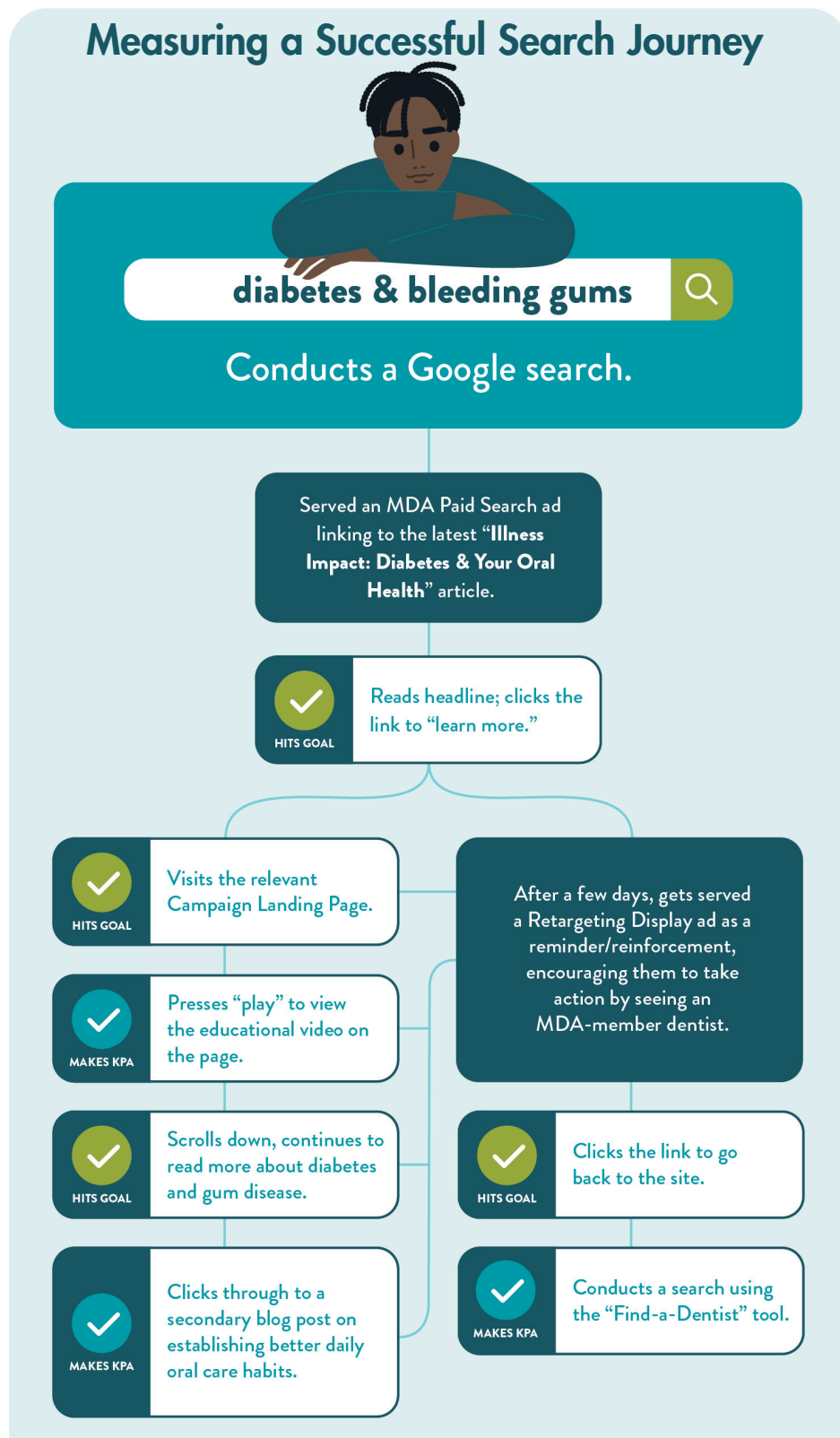
From the "D" to the U.P., the Public Education Campaign engages with

those who need it most across all areas of the state. That includes people who are at risk of being in poor oral health, parents and caretakers responsible for the well-being of others, and those who may need an encouraging boost to get them to take charge of their oral health. To reach this audience where they live online, we use behavioral data to form four primary Personas or target groups.

The personas shown on the infographic on the opposite page are shown here only to help inform advertising placement. We understand that no one can or should be reduced to one demographic or group. We all live on a continuum, both in real life and online. Often, the overlap, the places where Personas intersect, reveals the best opportunities for reaching people. For example, imagine a millennial family influencer employed in blue-collar labor who conducts a search-based query for “diabetes and bleeding gums.” In this case, they may benefit most from receiving the Public Education Campaign’s easy-to-digest, actionable, and informative article. They get the expert answers they’re looking for, plus actionable information to help them take the necessary next steps for their oral health.

Why rely only on digital advertising?

Flexibility and access to real-time performance metrics make digital campaigns far more cost-effective than traditional advertising, such as billboards, print ads, network TV commercials, etc. Since digital campaign assets aren’t locked into placement contracts or set air times, we can adjust where the ads run and who sees them in real time. Monitoring campaign performance in real time allows us to pivot, when necessary, to ensure proper ad placement and targeting to maximize every ad dollar we invest. Metrics from past campaigns, *(Continued on Page 38)*



Successful searches — When a Michigander searches “diabetes & bleeding gums,” we want them to get credible information from the MDA, not a less-reliable source. Follow along with this common search journey to see the Public Education Campaign at work and take a peek at how the MDA measures engagement along the way. How do we know this is a real journey? Through tracking strategically placed markers that measure the Key Performance Actions our audience makes and track the goals they hit as they engage with the campaign.

Key Advertising Terms

Display Ad

Online advertising served on websites and in apps.

Landing Page

The website where ads send users when they “click-through.”

Omnichannel

Placing ads across multiple channels and avenues to create a cohesive brand experience.

OTT (Over-the-Top) Video

Video ads that appear on streaming services and are informed by online behavior and geographical location.

Online Video

On desktop or mobile, a video ad served right before, during, or after the featured video the viewer intends to watch.

Retargeting

Digital follow-up ads that serve someone who has already engaged with the brand (typically visited a website) to further that engagement.

Paid Search

Ads on Google or Bing that appear in response to an internet search query.

Search Query

Or “query,” the question or phrase someone types into a search engine like Google or Bing.

Social

Or “social media,” platforms including Facebook, Instagram, Twitter, etc.; in advertising indicates paid ads with targeting and tracking metrics.

Public Education Campaign (Continued from Page 37)

especially those with serial components, inform placement for future campaigns. This makes for smoother launches and a more significant impact right from the start.

Why doesn't the MDA run TV commercials any more?

With so many streaming resources available today, our audience self-schedules when they watch their favorite TV shows. This change in viewing behavior means we no longer have to limit our campaign reach by running Public Education Campaign commercials on traditional TV, where they only air during a set time. Instead, we can reach more of our audience by running ads where they'll

see them — on their schedule — through digital platforms like Hulu, YouTube, and Connected TV.

Why haven't I seen these video ads?

Unless you've visited smilemichigan.com recently, you, a highly educated dental professional, aren't likely to see ads for the campaign. (However, when you visit the site, you establish an interest in the MDA, making you more likely to receive follow-up retargeting ads.)

Suppose you haven't interacted with the site recently. In that case, you aren't likely to be served a video ad for the MDA Public Education Campaign online (through Connected TV, YouTube, Hulu, or Social Media). That's actually a good thing. It shows we're using our budget wisely and not spending on targeting the wrong audience — people who already put their oral health first.



Advanced targeting — “Cheat Day,” the first installment of “Teeth Have Feelings Too,” uses advanced targeting methods. This video is a play on a splurge phenomenon common in fitness buffs who follow a strict diet but give themselves a day once in a while to eat anything and everything they want. While anyone can find the video funny and quickly realize that pummeling teeth with junk food doesn't make for a happy mouth, it hits the hardest and funniest among those who know just how far a cheat day can go. To reach that subsection within the MDA's blue-collar and millennial targets, social media online targeting is broken down even further to direct messaging at health-conscious gym-goers.

How is the campaign funded?

The Public Education Campaign is funded by a special assessment of \$295 for 2022. Retired life members, retired members, full-time faculty members, first-year new graduate members, and federal dentist members do not pay the assessment.

Who oversees the campaign?

The Public Education Campaign is overseen by the MDA Committee on Public Relations, staffed by the MDA's Rich Evans, director of marketing and communications. Dr. Sheridan Kelley, of Jackson District, chairs the committee, with Dr. Karla Callender-Giuliano, of Thumb District, serving as vice-chair. Other committee members include Dr. Lisa Christy (Lakeland Valley District), Dr. Katherine Solomich (Oakland County District), Dr. Laris Stumpas (Oakland County District), Dr. Ubonwan Saeung (Central District), Dr. Sam Blanchard (Detroit District), and Dr. Dan Edwards (Washtenaw District). Student members include Soumya Abraham (U-M) and Janith Jayatilake (Detroit Mercy).

So what's running in 2022?

Campaign efforts in 2020-21 rose to meet the public's need for reliable critical emergency, dental safety, and access-to-care messaging. Now that we face brighter days ahead, the campaign may again return to encouraging Michiganders of all ages and wellness levels to prioritize their oral health and regularly visit an MDA-member dentist. This year, the campaign meets these objectives through two very different and highly targeted side-by-side serialized campaigns. Each adopts a unique tone and approach to help people think about their oral health from a different angle and as a key component of their overall health. Both share accessible and actionable information while presenting MDA-member dentists as we know them to be — caring and compassionate partners in health.

“Teeth Have Feelings Too” campaign. The interactive, social media-friendly “Teeth Have Feelings Too” campaign embraces the colorful and light-hearted side of educational messaging. This series of animated video vignettes and accompanying assets uses humor (rooted in empathy) to reach our target audiences: millennials, family influencers, and blue-collar workers. Each memorable piece presents relatable daily phenomena, like “Cheat Day” and “Doomscrolling,” from the tooth's point of view. Every comic take makes a case for seeking dental care while encouraging our audience to look at how their habits impact their oral health from a new perspective -- their mouth's.

“Illness Impact” campaign. The second campaign emerged from the need to serve our search-based

audience with expert answers to their chronic illness and oral health questions. Starting with “Illness Impact: Diabetes and Your Oral Health,” the campaign presents an in-depth review of a different chronic illness and its associated dental co-morbidities each quarter. The conditions selected — diabetes, asthma, cancer, and arthritis — were chosen based on a comprehensive internet search data review. Each dynamic campaign centers on a thorough, yet easy-to-comprehend medically reviewed WebMD-style article. Paid search, social media ads, video, display, and other assets share excerpts and take-aways from the article in short, digestible formats. Beyond serving our search-based audience, these assets act as general awareness messaging as they reach those with

(Continued on Page 40)

Measuring Campaign Performance

Public Campaign	Total for 2021	Total for Q1 2022 (January 1 - March 31)
Ad Impressions	28,684,141	2,808,357
Video Views	4,582,461	486,639
Hours of Video Consumed	40,000	4,140
Visits to SmileMichigan.com (pageviews)	446,946	117,929
FAD Queries	112,068	27,492

The total campaign budget for 2021 was \$748,199.77, 89% of which went directly toward media placement (advertising). The budget for 2022 is \$1,002,479, 85% of which will go directly toward media placement.



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Public Education Campaign (Continued from Page 39)

chronic illnesses and their caregivers.

What's in development?

More sub-campaign assets are always in the works! The MDA's team and creative partners at JXM are developing new public-facing content featuring MDA-member dentists. Stay on the lookout for campaign announcements later this year and early next year, as we can't wait to share some of the MDA-member interview footage captured at Annual Session with you and the people of Michigan.

Where can I see the campaign elements?

We encourage you to experience

the campaign as the public does, by visiting the MDA's interactive landing pages on SmileMichigan.com. For "Teeth Have Feelings Too," visit smilemichigan.com/Feelings. For "Illness Impact," visit smilemichigan.com/Diabetes and smilemichigan.com/Asthma.

Are there more campaign resources for MDA-member dentists?

Yes! As a further resource to members, materials from former Public Education Campaigns have been adapted into MDA Digital Support Kits for sharing on your professional Social Media pages. You can find them under "Practice Resources — MDA DigitalSupportKits" at michigandental.org. Start sharing them today! ●

About the Authors

Jim Pond and **Matt Maguy** are co-founders of JXM, formerly James and Matthew, the MDA's advertising agency of record since 2016. As creative and advertising partners, the JXM team works closely with Rich Evans, MDA director of marketing and communication, and the MDA marketing staff to oversee the production and management of each campaign.



Pond



Maguy

We are Proud to Showcase for this Year's Fall Seminar,
Founder and CEO of Digital Smile Design:

Dr. Christian Coachman

Presenting

The Gateway to a New Comprehensive, Digital & Esthetic Dentistry

Tuesday, October 25, 2022

9 a.m. – 4:30 p.m.

Burton Manor • 27777 Schoolcraft Road • Livonia, MI 48150

Join us as we welcome Dr. Christian Coachman from Digital Smile Design (DSD). He is a renowned speaker in the international dental lecturing circuit and has published internationally in esthetic and digital dentistry, oral rehabilitation, innovation, trends communication, and marketing strategies.

In this seminar, Dr. Coachman will share new possibilities, strategies, and pathways to create a more meaningful dental experience for you and your patients. Learning from successful dentists worldwide, Dr. Christian Coachman used his findings to design an impactful one-day dental education course. When you join this seminar, you will learn to:

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Achieve your vision for your career or practice • Become the best version of yourself*

Don't miss out!

Registration will open in late summer. Visit our website at www.drnemeth.com for updates on details and registration.

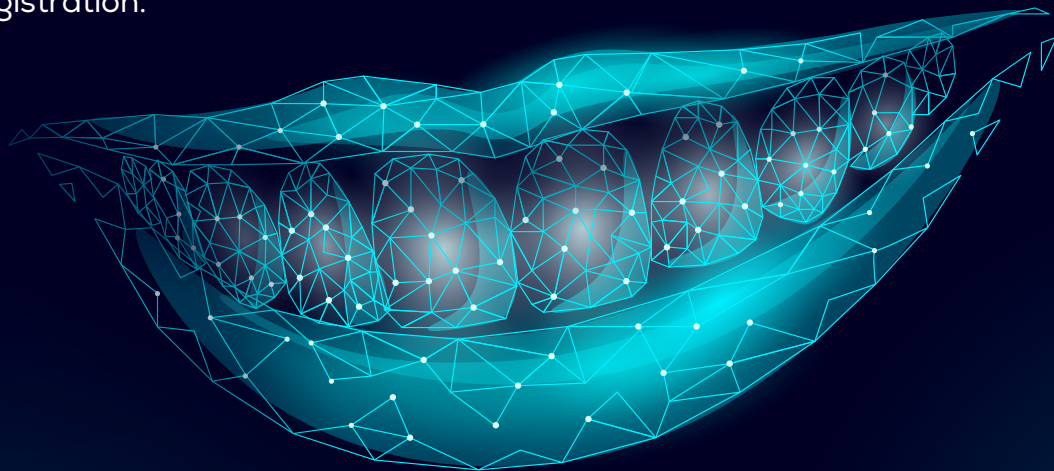
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Yes, the MDA Stands for Something



Editor's Note: The following are remarks given by outgoing MDA President Dr. Michael Maihofer at the April 28, 2022, session of the MDA House of Delegates.

I've had the opportunity to travel around the state this year and make presentations at a variety of component meetings. At the conclusion of one of those presentations, a young member, seated at the back raised his hand and said: "I'm in a social media group with a lot of dentists. We do a lot of tweeting back and forth. And I want you to know, Dr. Maihofer, that we've come to the conclusion that the MDA is no longer relevant. Because the MDA doesn't really stand for anything!"

My first thought was *Wow! You've got to be kidding. I've just spent the last 25 minutes telling you what we've accomplished and what we're working on this year and what we're currently doing for not only our association, but for our entire profession here in Michigan.*

But I get it. After all, I've been a dental editor for many years and I realize that no matter how well we craft the message, or no matter how many ways we disseminate the message, sometimes some members just don't get it!

So, I'd like to take a few minutes this morning to tell you why I believe this association — our Michigan Dental Association — the one that established the state of Michigan's Dental Practice Act, that same Michigan Dental Association that founded the University of Michigan School of Dentistry, that same association that lobbied success-

Outgoing president — Dr. Mike Maihofer, of Roseville, is a former MDA editor, trustee, and now immediate past president. His carefully crafted remarks were well-received by House members.

fully for continuing education as a requirement for licensure, that same MDA that was the major advocate for public water fluoridation in our state, still remains relevant today.

So, just four points:

1. The MDA is committed to the ethical practice of dentistry and holds its members to high ethical standards. Remember that in signing your application for membership you agreed to abide by our *Code of Ethics*. No other dental organization, not the AGD, not the ACD, nor the ICD, no other dental organization does this. And no other organization has any type of legitimate peer review process in place to enforce that ethical commitment. And I can tell you from my many years of experience with Peer Review, that it does work, and it does make a difference. I think — and I hope — that all of you still think that's Relevant. And I think that stands for something!

2. The MDA is committed to the idea that dental professionals must remain continuous students — that our profession is continuously evolving and that our members must keep pace with that evolution. That's why we lobbied years ago that continuing education be mandatory for relicensure. And that's why our association offers a huge variety of continuing education options, many times with an eye to assisting our members meet the state's CE requirements. To that end, this year we offered numerous state-required courses in CPR, ethics, pain management, and implicit bias in multiple locations throughout the state. As well as numerous courses on clinical dentistry, and practice management, all at reasonable prices, in order to help all members succeed. I think that's relevant and supports what we stand for!

3. The MDA is committed to being the voice of our profession in Michigan. We accomplish this through our legislative and regulatory advocacy. Our MDA governmental staff as well as our lobbyists meet one-on-one with Michigan's legislators on a weekly basis. Legislators acknowledge and recognize our representatives as speaking on behalf of our profession — not just MDA members — but on behalf of the profession. This year the MDA organized component legislative get-togethers with local dentists meeting local legislators throughout the state in order to gain support for our upcoming legislative initiatives. Like, for example, the legislation we're ready to introduce on creating transparency in dental network leasing. Or we could talk about the lobbying we've been engaged in with the Michigan Department of Public Health on increasing funding for general anesthesia and better access to ambulatory surgical centers for special needs dental patients. Or we could talk about how we've been at the table offering our input as the state puts the regulatory framework together for teledentistry, so that it favors the conventional dentist-patient relationship that the MDA believes in and has always advocated for.



House speaker — Dr. Todd Christy, of Berrien Springs, presided over the House of Delegates for the fifth time. He announced at the close of the House that next year would be his last as speaker.

Speaking of that — preserving the dentist-patient relationship and advocating for the dentist-patient relationship — remember how we rejected and vigorously opposed dental therapy. Some might say, “So big deal, we lost, and that legislation passed.” But did we really lose? I mean, we refused to back down, refused to cave in even when it was a done deal, even when we knew that they had the votes to pass that legislation. I remember that we were asked if we might want to soften the blow, and work in helping to help formulate the enabling legislation. Instead, our MDA said “Hell no.” Because we don't believe in two tiers of care — one provided by dental professionals for part of our population and another provided by low-level providers, with minimal education, for another part of the population. How ethical would that be? I don't know about you, but I think that's relevant, and I'd say that stands for something!

Or maybe you might remember how we advocated to have the state tax on the sale of dental prosthetics repealed. Or perhaps you might remember how we went to bat for those Michigan dentists who practice one of the five newly recognized ADA dental specialties but weren't

(Continued on Page 44)

legally recognized in our state, and how we successfully brought forth legislation so they could now be legally licensed. I don't know about you, but I think all that stuff might be relevant!

4. Finally, our MDA is committed to remaining relevant to the changing needs of its professional members. We know dentistry, how it's delivered, and even how the professionals who practice it are going through a transformation. We know that many of today's practitioners don't look or act like the practitioners of my day, and their needs are different. That's why the MDA has listened and responded with many new member benefits. Like developing an MDA smartphone app so we can communicate all our messaging through your phone. It's why we push out our communications through email and a variety of social media. It's why we moved our Public Education Program from television and radio to digital and social media to meet today's family decision-makers where they spend their most time.

*If you really care
about your profession
and where it's headed,
try getting up and
working to add your
ideas, suggestions,
criticisms, and your
voice to ours to help
create a better
profession.*

Or why you receive the MDA *Journal* each month packed full of relevant information to run your practice, in both your mailbox and online.

But it's also why we re-evaluated our MDA Strategic Plan to address the diversity we see in not only the population we serve, but in our profession who serves them. We explored and implemented a policy on Diversity, Equity, and Inclusion. Not because it was a trendy or politically

correct thing to do, but because it was necessary now — a means of facing the reality of our ever-changing and diverse dental workforce. Not because we wanted to marginalize or exclude any member segment, but rather because we wanted to become more inclusive and welcoming of all members, no matter what their race, gender, ethnicity, physical status, or dental practice model. Because we believe the time has come for our entire profession, including our membership, as well as our leadership, to reflect the diversity of Michigan's population. It echoes our belief that our MDA can no longer credibly claim to represent Michigan's dental profession if its membership doesn't truly reflect that profession.

I think that's really relevant! I think that stands for something!

So, what I might say to that young dentist now, that I diplomatically didn't say then, is simply this: "It's easy to sit around and tweet all day long about what you don't like about organized dentistry and the MDA, but if you really care about your profession and where it's headed, try getting up and working to add your ideas, suggestions, criticisms, and your voice to ours to help create a better profession."

My parting message to you today is this: Our MDA, your MDA, doesn't belong to the officers or the Board or the staff up in Okemos. It belongs to all of us. All of us working together can accomplish so much more than any of us working alone. So, please share your concerns. We are listening, but more importantly we want and need your participation to help make a better MDA and a better profession for all of us.

Now, before I leave this podium today, there are many people that I need to thank. As I stated last year, if we are to accomplish anything, we've got to do it together.

First off, I want to thank my predecessor, Dr. Steve Meraw, for lightening



Delegates — A close-up of several delegates at the House, which is comprised of 102 delegates and alternates, including student members, from all areas of the state. A recap of House actions appears on Page 8 of this issue.

the way and helping me find the path forward. Steve had a tough go last year with everything being virtual, but still led with dignity and honor. I also want to thank our president-elect, Dr. Vince Benivegna, for all he's done, and continues to do, for our profession. I have a ton of confidence in Vince, and I look forward to his leadership.

I want to thank our Board of Trustees. I believe we did some good things this year to promote a very engaged and cohesive Board. Just being back in person, with all of us sitting around the Board table, certainly helped. And I think they'll all agree that we engaged in some pertinent discussion and accomplished a good deal.

For example, we took a long overdue look at our policy on clinical dental licensure examinations, and after several comprehensive discussions with all professional stakeholders, adopted not only a policy in support of the elimination of the single encounter, live patient, procedure-based clinical dental licensure examination format, but also further policy supporting the elimination of all procedure-based clinical licensure exams. Now some may say that that sounds pretty "radical." And yes, it is, but it's relevant to today's licensure environment and reflects the lack of an evidence base for the current testing, as well as the ethical and moral questions associated with it. I'd say that stands for something!

Additionally, our Board, in concert with our delegation to the ADA House, brought forth resolutions favoring the voice of our profession's new dentists, as well as the creation of a searchable digital archive for component and state dental publications so that these historical records of our profession will never be lost. As a past dental editor, I find that relevant and significant.

I additionally want to thank each and every member volunteer who served on an MDA committee, task force, the MDA Foundation, or our for-



ADA president — Dr. Melanie Mayberry (right), a member of the MDA Board of Trustees, greeted ADA President Dr. Cesar Sabates, who spoke before the House at Thursday's session. Sabates told of his personal journey as the child of Cuban immigrants who came to America with little more than the clothes on their backs.

profit subsidiary, as well as every member serving in some leadership capacity in their respective component.

I especially want to thank the Macomb Dental Society for all their encouragement and support over the past 43 years. I need to publicly acknowledge and thank the late Drs. Chuck Defever and Dave Borlas, two men who were an incredible inspiration to me and many others. I would never have been standing here today without them.

Next, I also want to thank the MDA staff. They've been fantastic. And I know this sounds like something you have to say. But it really is true, and we're blessed at the MDA with an incredible staff.

Sometimes I do this exercise where I try to stand outside myself and attempt to see myself as others would — how I speak, how I act, through other's eyes. It's not easy, and what I see is sometimes frightening. But when I am successful, I always ask

myself, why would anyone ever put up with or even tolerate me? I'm not sure I could even put up with myself. But there is someone who has, for the past 39 years, been putting up with my ups and downs and listening and sharing in my hopes and dreams. And she's sitting in the back, and I hope my wife, Denise, will stand so that I can thank her publicly for all her love and support. Thank you, Denise.

Finally, I want to thank you, the House of Delegates, for making the sacrifice — taking time away from your family and your practice this weekend to help shape the direction of our profession. It's only through the work of committed volunteers, like yourselves, that we can move our profession forward.

And again, I want to thank all of you for granting me the honor and privilege to serve as your president this past year. I've enjoyed every single minute of it. It's certainly been one of the highlights of my life!

Thank you very much. ●

Michigan Dentistry: Coming Together at Annual Session

More than 2,500 dental professionals came together — in person! — April 27-30 for the MDA's 2022 Annual Session in Novi. It was the first in-person meeting since 2019, and the chance to meet and interact in person was warmly received by pandemic-weary MDA members and their staffs.

Attendance was actually better than expected, led by the more than 550 who attended Dr. Frank Spear's all-day lecture on Friday. The Exhibit Hall was busy with more than 140 exhibitors, and everybody raved about the venue — a newly constructed section of the Suburban Collection Showplace. Easy parking, multiple food options, and free coffee at the MDA Welcome Center made for happy attendees.

As always, the MDA House of Delegates met on Thursday and Saturday, conducting MDA governance and electing new leaders (for more, see "News You Need" in this issue).

Another highlight was the MDA Foundation Sparkling Smiles Celebration, a yearly gathering highlighting Foundation activities and grantees. This year's celebration raised more than \$60,000 to help provide dental scholarships and improve access to care. And, the yearly MDA Dental PAC Competition raised \$26,945 to help fund MDA advocacy activities.

On these pages are some of the highlights of this year's MDA Annual Session.

(Photos by David Trumpie and Gary Shrewbury)



Come Together — MDA Annual Session Chair Dr. Neeta Chesla, MDA President Dr. Mike Maihofer (center) and CE Committee Chair Dr. Kevin Sloan helped oversee a memorable 2022 MDA Annual Session.

CE Courses

High quality, affordable CE courses are the number-one reason people come to Annual Session, and this year's slate of courses and speakers more than met expectations.

There were courses for dentists, a hands-on course, courses for hygienists, assistants, and office staff, and courses for the whole dental team. Of special note were courses designed to fulfill the MDA's Certified Dental Business Professional certification program for office managers and staff. Plus, special course tracks for new dentists and for leadership development also drew well.

The highlight was Dr. Frank Spear's presentation, "Interdisciplinary Treatment Planning in Patients with Complex Dental Problems Involving Esthetics and Function," on Friday. Other well-attended courses included financial planning sessions with Ted Schumann II; the Annual Session Keynote Address by Sarita Maybin; Dr. Marie Fluent's "Infection Control in Dentistry" course; and many other courses, featuring such speakers as Dr. Kumar Subramanian, Dr. Tom Lambert, Dr. Ankur Gupta, Dr. Ronni Brown, Dan Schulte, and many others. A pre-session course on Wednesday, "Brushing Up on Your Memory," was led by Paul Mellor in a repeat visit to the MDA Annual Session. All in all, it was a solid CE lineup!

Table Clinics took a break this year due to social distancing concerns — but they'll be back in 2023.



Exhibits and Much More

This year's MDA Annual Session Exhibit Hall returned to its traditional format, with wide aisles and plenty of room to meet with vendors and interact with other Annual Session attendees. As always, admittance to the Exhibit Hall was free for MDA members and their staffs. It was the place for one-on-one, person-to-person interaction — and of course it was great to see exhibits up-close and in person.

This year's reimagined and expanded Member Center, located right outside of the Exhibit Hall, featured complimentary coffee every day — a welcome “freebie” for MDA guests. Attendees could rest their feet, relax, meet informally with colleagues and MDA staff, and pick up literature from the MDA to take home and read later.

Despite the cyber-hack of the ADA/MDA member database — now thankfully resolved — registration went smoothly, both for those who preregistered and for walk-ins who registered on-site. In fact, the entire meeting seemed to flow effortlessly, thanks to great work by the MDA committees on Annual Session, Continuing Education, and the MDA CE staff.



Social Events



On Friday evening the MDA honored three — count ‘em — three MDA presidents — Dr. Margaret Gingrich (2019-20), Dr. Steve Meraw (2020-21) and Dr. Mike Maihofer (2021-22) for the first in-person President’s Event since 2019. Gingrich wasn’t able to attend — she was busy delivering twins back in her hometown of Big Rapids — but a large cardboard cutout of her greeted guests as they entered the room. New MDA President Dr. Vince Benivegna emceed the evening, which also featured a trivia contest.

A new dentist reception, a free reception in the Exhibit Hall, and other events added to the Annual Session camaraderie.

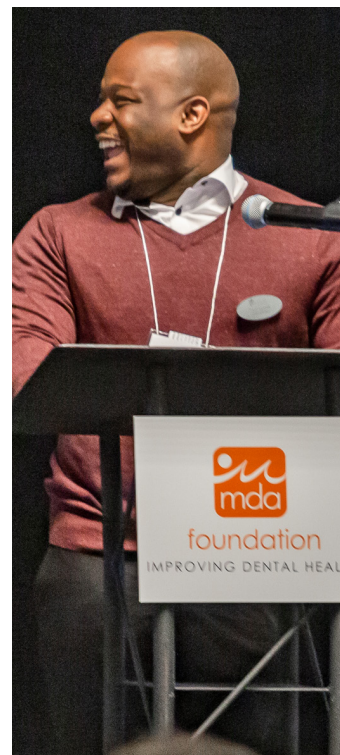


MDA Foundation Sparkling Smiles Celebration

The Michigan Dental Association Foundation held its yearly Sparkling Smiles Celebration on Wednesday, April 27. More than 170 attended the cocktail reception and sit-down dinner, hosted by MDA Foundation Vice President Dr. Beth Rosenberg. Guests had the chance to meet the past year's Foundation grant-winners, and also heard inspiring stories by Foundation volunteers. Best of all, the evening raised an impressive \$67,000!

The MDA Foundation continues to grow rapidly in its mission of improving dental health in Michigan by providing dental education scholarships, and access-to-care grants. Learn more at foundation.michigandental.org.

(Photos: Josh Ames.)





Special Thanks to Our Sparkling Smiles Impact Donors

We extend our gratitude to individuals and organizations who donated \$500 or more:

Dr. M. Antonia Ausum
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Drs. Michele Tulak-Gorecki and Chris Gorecki
Dr. Charles Zammit

Correction of Anterior Open Bite Caused by Super-Eruption of Third Molars after Night Guard Use — A Case Report

By Daniel K. Han, DDS, MD; Do Yoon Kim, DDS, MD;
Matthew J. Stephens, DDS, MD; and Benn L. Lieberman, DMD

This report highlights the case of a patient who presented to the oral and maxillofacial surgery (OMFS) clinic with an anterior open bite caused by the premature contact of his third molars after wearing an over-the-counter (OTC) night guard for 12 months. The purpose of this report is to present a clear example of a potential adverse effect of the inappropriate use of an occlusal appliance and to review a simple approach to managing anterior open bite in clinical scenarios in which the culprit is over-erupted third molars.

Night guards are commonly used occlusal devices that are often considered a safe, non-invasive treatment for sleep bruxism and temporomandibular disorder (TMD).¹ Despite widespread adoption by dental professionals, there is a lack of evidence for the efficacy of these devices in treating these conditions.¹ While many patients and professionals elect to employ night guards to improve symptoms, users are often cautioned about the possibility of occlusal alterations when the devices are used for prolonged periods.

Malocclusion due to occlusal splint therapy is well-documented in the literature.²⁻⁸ In particular, anterior open bite seems to be the most common variety of occlusal de-

range ment cited in the literature.^{2-5,7,8} These occlusal changes occur as a function of intrusive and eruptive forces imposed upon the dentition by night guards and other occlusal devices over time.⁵ Dahl and Krogstad noted that in a population of 20 patients wearing partial-coverage splints for pathological attrition, occlusal changes amounted to an average of 1.47 mm of eruption of uncovered posterior teeth and intrusion of 1.05 mm in anterior teeth covered by the device.⁵ Although the literature notes that these changes are most likely to occur in patients using partial-coverage splints, there are documented cases of anterior open bite forming after the use of ill-fitting or inadequately adjusted full-coverage devices.^{2-5,7,8}

Treatment for anterior open bite due to skeletal changes varies by case but often involves orthodontic treatment with and without extractions and, in some cases, the use of orthognathic surgery.⁹ When it comes to changes in occlusion due to the premature contact of posterior teeth, posterior bite blocks and corrective splints have been used to intrude teeth and achieve even contacts.^{4,9} In situations where over-eruption of third molars has resulted in anterior open bite, therapeutic extraction of these teeth has proven effective in establishing a more stable occlusion, albeit with the aid of supplementary orthodontic treatment.²

Similar to previous case descriptions, the patient in this case acquired an anterior open bite after using an OTC night guard for 12 months. Notably, by extracting the patient's third molars bilaterally, we were able to effectively restore a stable occlusion without the need for additional orthodontic or surgical treatment.

Case report

A 26-year-old male who had no significant past medical history presented to our OMFS clinic with the chief complaint of "my front teeth are not touching." The patient had been consistently wearing a commercially available OTC night guard for approximately 12 months to treat his bruxism and had developed an anterior open bite. The patient was initially evaluated by his general

(Continued on Page 54)

Abstract

Night guards are used to treat bruxism and temporomandibular disorder (TMD). However, the use of night guards is not without complications. Occlusal changes caused by improper use of these splints have been documented in the literature. This is especially likely when the splint covers only part of the arch, leading to over-eruption of the posterior dentition. This report examines the case of a 26-year-old male patient who developed an anterior open bite after using an over-the-counter (OTC) night guard. This is an unusual case, in which an anterior open bite caused by over-eruption of the third molars was corrected by surgical extraction.

Figures 1-6



Figure 1 — Anterior open bite.



Figure 2 — Premature contact on right 3rd molars, with anterior open bite.



Figure 3 — Premature contact on left 3rd molars, with anterior open bite



Figure 4 — Maxillary occlusal view.



Figure 5 — Mandibular occlusal view.



Figure 6 — Maxillary occlusal view with night guard covering only up to 2nd molars.

Figures 7-12



Figure 7 — Center view with night guard.



Figure 8 — Right side view with night guard covering up to 2nd molars.



Figure 9 — Left side view with night guard covering up to 2nd molars.



Figure 10 — Panoramic X-ray; pre-op.



Figure 11 — Immediate post-op: correction of anterior open bite.



Figure 12 — One-week post-op: occlusion with good intercuspation of all dentition

At the one-week follow-up appointment, the patient appeared to be recovering and in stable condition, with mild residual postoperative swelling. His open bite was confirmed to have been completely corrected, resulting in good intercuspation of the maxillary and mandibular dentition.

dentist, who referred him to our OMFS department for evaluation and treatment of his acquired anterior open bite. His dental history included routine checkups and cleanings without any restorative dental work or orthodontic treatment.

On examination, his face was symmetric, and there was no pain or tenderness in either temporomandibular joint. Mandibular movements were within normal limits, and the maximum incisal opening (MIO) was approximately 44 mms. A dental examination showed complete, natural dentition, with good oral hygiene and no other significant oral pathology. However, the patient had an anterior open bite of approximately 4 mm (Figure 1, see Page 53), with only premature contacts on his third molars (Figures 2, 3, see Page 53). These premature contacts seemed to be due to over-eruption of the third molars, as the night guard covered only up to the second molars (Figures 6, 8, 9, see Figure 6 on Page 53). A panoramic X-ray showed no other gross bony or dental pathology (Figure 10).

Our diagnosis was an anterior open bite caused by clockwise rotation of the mandible secondary to premature contacts of over-erupted third molars. We recommended treating the anterior open bite by surgically removing the over-erupted third molars. The patient agreed to the treatment proposed and scheduled the surgical removal of all four third molars under IV conscious sedation. This surgical removal of all four wisdom teeth led to immediate correction of the anterior open bite and restoration of the patient's occlusion (Figure 11). At the one-week follow-up appointment, the patient appeared to be recov-

ering and in stable condition, with mild residual post-operative swelling. His open bite was confirmed to have been completely corrected, resulting in good intercuspation of the maxillary and mandibular dentition.

Discussion

This case supports previously reported findings concerning the potential for an anterior open bite to form with night guard use.^{2-5,7,8} In particular, the case provides additional evidence that OTC devices may pose enhanced risks when not used under the supervision of a dental professional.^{3,8} The use of OTC devices in patients is problematic, as they are often ill-fitting, lack proper instructions for use, and are not reported to the treating dentists.⁸ In the instance of the patient presented in this case, the splint failed to cover the third molars, leading to over-eruption and posterior interfer-

(Continued on Page 56)

Figures 13-14



Figure 13 — One-week post-op: right lateral view.



Figure 14 — One-week post-op: left lateral view.

ence, which, in turn, resulted in an anterior open bite.

Our findings also support those of previous studies that have suggested that occlusal changes leading to anterior open bite can happen in as little as 12 months (Dahl and Krogstad reported such changes occurring in as little as six months).⁵ Although previous evidence suggests that iatrogenic anterior open bite can occur at any age, this phenomenon seems to be particularly common in younger patients.⁵ This case supports the idea that younger patients may require stricter monitoring for occlusal changes due to eruption of new teeth.³

Although the outcomes of anterior open bite have been well-documented in the literature to date, to our knowledge, this is the first case in which stable occlusion was re-established using extractions alone. Magdaleno and colleagues reported treating a 19-year-old who had posterior interference on the third molars after night guard use by therapeutically extracting the offending teeth.² However, they also noted that extracting the patient's third molars did not adequately stabilize the occlusion and that the patient required additional orthodontic treatment to recreate even occlusal contacts.²

Admittedly, the findings of this case report are limited by a lack of prior dental records for the patient discussed. Without radiographic documentation or pretreatment casts of the patient's occlusion prior to his use of the OTC night guard, we are unable to fully assess the extent of occlusal changes that occurred in the patient. This is a common problem with OTC night guards and is a point against their unsupervised use.⁸ Similarly, the lack of prior records regarding the patient's bite prevents us from knowing whether or not we have fully treated his occlusal changes, as slight alterations may have occurred.

Conclusions

From this case experience, we are able to make the following recommendations regarding the management of anterior open bite after night guard use. Because the clinical

efficacy of using occlusal splints to treat sleep bruxism and TMD is increasingly coming into question, it is clear from cases such as this one that caution must be exercised by patients and practitioners electing treatment with night guards. In particular, young patients experiencing eruption of new teeth may require closer monitoring. OTC night guards may be poorly fitting and require the same follow-up as professionally delivered devices.

The shrewd provider may find it practical to screen for the use of such devices in his or her patient population. In fact, it may be prudent to discontinue the over-the-counter availability of these devices and, instead, limit their use to a prescription basis, contingent upon a comprehensive dental evaluation. It may be advisable, although not indicated in all cases, to extract teeth to stabilize the occlusion in patients in whom over-eruption has occurred in a few posterior teeth. ●

Reprinted, with permission, from the New York State Dental Journal, June-July 2021 issue.

Queries about this article can be addressed to Dr. Lieberman at Benn.Lieberman@nychhc.org.

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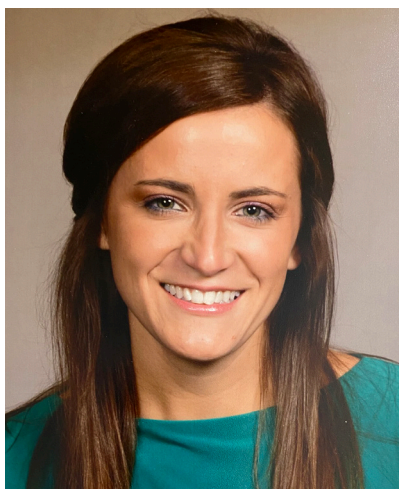
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A Special Message

to Dentists and Dental Team Members



The Michigan Dental Association is proud to present this year's continuing education catalog, listing all MDA continuing education courses for the coming year. You can easily plan your MDA CE courses months in advance using the complete course listings found inside. This booklet also contains important information about mandatory continuing education requirements and relicensure.

Why should the Michigan Dental Association be your first choice for continuing education? MDA courses provide added value such as:

- continental breakfasts, lunch, and refreshments;
- handout materials;
- approved provider status through ADA CERP (the Michigan Board of Dentistry recognizes ADA CERP credits for license renewal);
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- automatic tracking of your MDA CE credits for future reference;
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- MDA staff and dentist volunteers on-site to answer questions and provide additional information.

Whether you're a member dentist or a member of the dental team, the MDA is your resource for continuing dental education courses and information. Please email or call us at any time with questions about courses, CE requirements, Michigan Board of Dentistry rules, or related information. Email Andrea Sundermann at asunder@michigandental.org or call 517-346-9403.

Anna Pogoncheff, DDS
Chair, MDA Committee on Continuing Education

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Don't forget the MDA's
Annual Session in
Grand Rapids
May 3-6, 2023
DeVos Place, Grand Rapids

For Your Information

Free CE Record-Keeping Folders
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2022 LEADERSHIP FORUM FREE REGISTRATION!

Whether you're a current volunteer leader, would like to get more involved in organized dentistry, or just want to build your personal leadership skills, this forum's for you! Join us for this **FREE** event courtesy of the Michigan Dental Association. You'll be inspired by insightful sessions and expert speakers, including Dr. Chelsea Fosse, senior health policy analyst of the ADA Health Policy Institute. The Leadership Forum includes a customizable education schedule allowing you to choose the courses that you're personally interested in attending while earning continuing education credits. Receive an up-to-the-minute update on legislative issues affecting dentistry and weigh in on key issues in the profession and in organized dentistry. Plus, you'll have an opportunity to participate in a Hot Topic discussion about organized dentistry. All for \$0, but participation is limited, so register today!

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The Leadership Forum offers 5.25 hours of CE credit. The Michigan Dental Association is an ADA CERP provider and is also recognized by the AGD for FAGD/MAGD credit (provider number 219252).

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HOTEL

The Crowne Plaza Hotel is conveniently located at 925 S. Croyts Road in Lansing, with plenty of free parking, comfortable and updated sleeping rooms with guest amenities, a fitness center, and in-hotel dining. See the website for directions.

Hotel reservations: **\$149 per night** – group rate good through Sept. 8, 2022, but rooms are limited, so reserve early! Register online at www.michigandental.org/Leadership-Forum or call 877-322-5544, group code: **MDL**

2022 LEADERSHIP FORUM AGENDA • Friday, Sept. 30, 2022

8:15 - 8:45 a.m.

Breakfast

8:45 - 9:00 a.m.

Opening Remarks – Dr. Vincent Benivegna, MDA President

9:00 - 9:15 a.m.

Legislative Update – Bill Sullivan, JD, MDA Vice President, Advocacy and Professional Affairs / Neema Katibai, JD, Manager, Government and Insurance Affairs

9:15 - 10:15 a.m.

Morning Keynote - *The Outlook for Dentistry* – Dr. Chelsea Fosse

10:15 - 10:30 a.m.

Networking Break

10:30 - 11:30 a.m.

Workshops – Choose One

Understanding Leadership #1:

What Makes a Strong Positive Culture (and How to Get There!)

Phil Zeller

Leadership Skills #1:

Time Management for Busy People

Randy Dean

Component Engagement #1:

Building a Leadership Pipeline Panel

Moderator: Dr. Todd Christy

11:45 a.m. - 12:15 p.m.

Lunch

12:30 - 1:30 p.m.

Panel Discussion – *Understanding Inclusion* – Moderator: Dr. Joanne Dawley

1:45 - 2:45 p.m.

Workshops – Choose One

Understanding Leadership #2:

Start With Why – How Shared Values Facilitate Success

Dr. Debra Peters

Leadership Skills #2:

Assess Your Emotional Intelligence

Phil Zeller

Component Engagement #2:

Membership Outreach at the Local Level

Autumn Wolfer

3:00 - 4:00 p.m.

Hot Topics – *Bring your ideas to share!* – Moderator: Karen Burgess

4:00 - 4:15 p.m.

Closing Remarks – Dr. Vincent Benivegna



Summer Scientific Session Treetops Resort, Gaylord Michigan's outstanding summer CE event!

The Summer Scientific Session moves to Treetops Resort, with two days of courses and a golf outing, to be held on Friday, July 22, 2022.

Located just minutes from I-75, Treetops Resort is easy to get to, but hard to leave. Breathtaking views, on-site dining, a full-service spa, meeting spaces, and five award-winning golf courses provide the perfect balance of work and play.



NEW! Friday Golf Outing

When: Friday, July 22, 2022

Where: Masterpiece Course at Treetops Resort

Offering two golfing options:

- Pay to golf, \$700/team* or \$175/person
- The MDA can assign you to a team, playing with one of our sponsors, and golf for **free**.

Time: 9-10 a.m. Registration and continental breakfast

10 a.m. Shotgun start

Lunch at the turn

3:30 p.m. Reception and winner announcements

*If picking your own team, designate players on registration form.

Friday – Sunday, July 22-24, 2022

Friday Golf Outing: (See box, bottom left)

Saturday-only fees: \$85 per person; \$135 nonmember dentists.

Sunday-only fees: \$85 per person; \$135 nonmember dentists.

Both days: \$150 per person; \$250 nonmember dentists.

Fee covers sessions only.

Six continuing education credits available

Cancellation refund policy: A 72-hour notice of cancellation is required for all CE programs. Refunds will be granted upon written request, less a \$25 administration fee. An email is an acceptable notification.

Housing: The MDA has reserved a block of guest rooms at Treetops Resort. The rate is \$119 per night for an Inn Deluxe room or \$159 per night for a Lodge Queen Deluxe room. Rooms are subject to a resort fee of \$15 per room per night plus any applicable taxes. Special rates only applicable to those registered for the Scientific Session.

Reservations: Call Treetops Resort at 855-261-8764 and ask for the MDA Seminar Rate. Reservations must be made by June 6, 2022, to obtain the MDA rate.

Treetops Resort cancellation policy: A refundable deposit will be granted if room is canceled within seven days of the meeting.

Meeting Location Address

Treetops Resort
3962 Wilkinson Rd.
Gaylord, MI 49735
989-732-6711

Register online at michigandental.org/CE-Courses, or call 517-346-9408.

From Friend to Foe: How Oral Dysbiosis Creates Systemic Disease and What You Can do to Save Lives



Mark Cannon, DDS, MS
Saturday, July 23, 2022
8-11 a.m. (breakfast included)
Registration opens at 7:30 a.m.
Three CE credits • AGD Code: 730

Simply put, oral disease is due to oral dysbiosis, and patients with a healthy oral microbiome (eubiosis) do not present with significant dental caries or periodontal disease. Dietary influences, especially the standard American diet, along with other environmental factors, may strongly affect the oral microbiome, leading not only to oral dysbiosis but also to very serious systemic illness.

This seminar summarizes the evolution of dietary influence, microbiome shifts, pathobiont development, and the resulting serious systemic consequences. In addition, effective and easily implemented prebiotic and probiotic interventions will be discussed, and methodology explained.

Learning objectives:

- Learn how diet influences microbiome development.
- Understand the evolution of the microbiome/host (holobiont).
- Learn the evolution of pathogens and pathobionts.
- Discover prevention protocols to restore eubiosis.

About the Speaker

Dr. Mark L. Cannon is a professor of otolaryngology, Division of Dentistry, at Northwestern University, Feinberg School of Medicine, an attending physician at Ann and Robert Lurie Children's Hospital, and a member of the International Association of Pediatric Dentistry. In addition to being the founder of Associated Dental Specialists of Long Grove, he is the research coordinator of the pediatric dental residency program at Ann and Robert Lurie Children's Hospital, Chicago, Illinois. He has 40 years of experience in pediatric dentistry and has presented lectures both nationally and internationally.

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Odontogenic Sinusitis: Did You Know . . . ?



John Craig, MD
Sunday, July 24, 2022
7:30-10:30 a.m. (breakfast included)
Registration opens at 7 a.m.
Three CE credits • AGD Code: 730

Odontogenic sinusitis (ODS) is distinct from rhinosinusitis, and is more common than historically thought, representing about 50% of all unilateral sinusitis. Unfortunately, the subject of ODS has appeared in only about 1% of rhinosinusitis publications over the last 20 years. Additionally, diagnosis and treatment of ODS have not been formally discussed in even the most recent national and international sinusitis guidelines or position statements.

This lecture will present an evidence-based approach to diagnosing and managing ODS. Additionally, important case scenarios will be reviewed to highlight some of the nuances encountered when managing these patients. Lastly, it will be fun!

Learning objectives:

- Learn about the prevalence and pathophysiology of odontogenic sinusitis.
- Hear how to suspect and confirm odontogenic sinusitis.
- Discover optimal management strategies for odontogenic sinusitis.
- Understand the importance of multidisciplinary collaboration between otolaryngologists and dental providers for diagnosis and treatment of odontogenic sinusitis.

About the Speaker

John R. Craig, MD, joined Henry Ford Medical Group as the division chief of rhinology in the Department of Otolaryngology, and is a co-director of the Skull Base, Pituitary and Endoscopy Center in conjunction with the Department of Neurosurgery. In addition to his surgical practice, Dr. Craig conducts clinical and translational research relating to complex sinus and skull base disease and surgery. He has presented his research at national conferences, and has published a number of articles in different peer-reviewed journals. His research interests have included improving topical medication delivery to the sinuses, developing new surgical maneuvers in both sinus and nasal surgery, cadaveric anatomy studies, and other topics in rhinology.

Financial support provided by MDA Insurance, MDA Services, and Crest+Oral B Professional Oral Health



Winter Scientific Session Crystal Mountain Resort, Thompsonville One of our most popular CE events!

Combine outdoor fun with CE credits at the MDA Winter Scientific Session, to be held Jan. 6-8, 2023, at Crystal Mountain. Come join us, and be sure to bring the family! Meet your colleagues for a few hours of study each day, and then hit the slopes! Choose from a variety of ski packages and accommodations. No wonder the MDA Winter Scientific Session is such a favorite every year.



To register for rooms visit crystallmountain.com/grouplodging or call 855-520-2974. The Group Code is 46D229. Additional lodging options not listed below are available. Demand for larger accommodations is high. Call early for reservations.

Hotel Room (Colony/Hamlet)	Single/Double	\$226
Inn Suites	Single/Double	\$280
Two Bedroom Condo	Single/Quad	\$458

Rates are for room only, per room, per day and are subject to a 6% state tax, 9% service fee and 2% local assessment. Special room rates are only applicable for those who register for the MDA Scientific Session. A deposit equal to the first night's lodging is required. Full refund will be granted if you cancel more than 14 days prior to arrival date. No refund less than 14 days prior. Children 17 and under stay free when sharing accommodations with guardians.

Reservations must be made by Dec. 6, 2022, to receive the MDA rate. Attendees must stay Friday and Saturday nights.

Friday, Saturday, and Sunday, Jan. 6-8, 2023

Fee: \$339 dentists; \$195 staff/life member retired dentists; \$439 nonmember dentists.

Fees cover sessions only.

Individual sessions: \$153 dentists; \$98 auxiliaries/life retired dentists; \$253 nonmember dentists.

Nine continuing education credits available

**Register online at
michigandental.org/CE-Courses,
or call 517-346-9408.**

Questions? Call the MDA Continuing Education Department at 517-346-9408, or email Jody Marquardt at jmarquardt@michigandental.org.

Crystal Mountain will provide all registered lodging guests affiliated with the MDA Winter Scientific Session complimentary skiing on Friday, Jan. 6, 2023, from 9 a.m. 'til 9 p.m.

Discounted lift tickets may be available by advance purchase. Visit crystallmountain.com for more pricing information.

Cancellation refund policy: A 72-hour notice of cancellation is required for all CE programs. Refunds will be granted upon written request, less a \$25 administration fee. An email is an acceptable notification.

Meeting Location Address

Crystal Mountain Resort
12500 Crystal Mountain Drive
Thompsonville, MI 49683
855-520-2974

Get READY for Change



April Callis-Birchmeier, PMP, CCMP, CSP
Friday, Jan. 6, 2023

7 – 10 p.m. (snacks provided)

Three CE credits • AGD Code: 550

Our organizations are inundated with change. New technologies, operational challenges, and adjusted expectations are creating rapid, compounding change. Identify

strategies and techniques to recognize and overcome resistance, uncertainty, and apprehension. Use the READY framework to design an action plan to adapt to change and encourage organizational adoption of change.

Learning objectives:

- Develop a robust support plan to assist with sustainable change adoption.
- Recognize and reduce resistance by revisiting the “why” of the change and building habits to promote resilience.
- Create an action plan to address imminent, ongoing, and disruptive change.

Protecting Your Positive Practice

April Callis-Birchmeier, PMP, CCMP, CSP

Saturday, Jan. 7, 2023

8 – 11 a.m. (breakfast provided)

Three CE credits • AGD Code: 550

Building a positive dental practice is a great source of pride for many offices and creates loyal, happy staff and clients. Many teams, however, are now struggling to sustain a positive outlook. This session will help you sustain your team by breaking the Seven Habits of Negativity and supporting a positive workplace — helping you discover strategies to reduce negative contagion, stop gossip, and refresh your mindset to reap the many benefits of a positive and engaged team.

Learning objectives:

- Discover actionable strategies to break negative habits.
- Learn to eliminate negative contagion to improve workplace culture.
- Develop a seven-step approach to share a positive vision and increase job satisfaction.

About the Speaker

April Callis-Birchmeier is an internationally known organizational change management expert and has implemented change for government, higher education, and health care clients, and leads Springboard Consulting.

Clinical Decision-Making in the Periodontally Compromised Patient: Current Periodontal and Prosthodontic Perspectives



Kyle Hogg, DDS, and Leyvee Cabanilla Jacobs, DDM, DDS, MSD

Sunday, Jan. 8, 2023

7:30-10:30 a.m. (breakfast provided)

Three CE credits • AGD Code: 490

One of the most common dilemmas that dentists and patients alike face in clinical practice is whether to treat, maintain, or extract a tooth. Although implants are highly predictable and have become an integral part of oral rehabilitation, they are not immune to complications. In many instances, management requires elaborate treatment planning with potential pre-implant surgical treatments. On the other hand, tooth retention can

potentially involve complex interdisciplinary treatment.

The aim of this lecture is to present an algorithm that will address clinical deductive reasoning, based on the scientific literature.

Learning objectives:

- Recognize the most significant prosthodontic and periodontal factors that can influence the decision to save or extract a tooth.
- Identify potential complications associated with implant therapy that needs to be taken into consideration when deciding whether to save or replace a tooth with an implant.

About the Speaker

Dr. Kyle Hogg graduated from the University of Michigan School of Dentistry in 2004 and went on to further his studies at the University of Florida College of Dentistry in an AEGD program focused on the surgical placement of implants and prosthodontics.

Dr. Leyvee Lynn Cabanilla Jacobs is a Diplomate of the American Board of Periodontology. She is an adjunct associate professor at the University of Detroit Mercy School of Dentistry, and has lectured extensively at the national and international level and has several publications and abstracts in the field of periodontics and implant dentistry.

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The Michigan Dental Association is an ADA CERP recognized provider.

Financial support provided by MDA Insurance, MDA Services, and Crest+Oral B Professional Oral Health

Spring Scientific Session Great Wolf Lodge, Traverse City Michigan's outstanding spring CE event!

Welcome to Great Wolf Lodge, a first-class, full-service destination resort designed to capture the atmosphere and adventure of the north woods. At Great Wolf Lodge you can take an adventure trip into the north woods at a gigantic indoor resort. It's great for the whole family! While you're there, be sure to test your bravery at Bear Track Landing, with eight water slides and five pools. As one of the world's largest indoor water parks, Great Wolf Lodge provides water-based entertainment throughout the year, even during winter!



Friday, Saturday, and Sunday, March 10-12, 2023
Fee: \$245 dentists; \$163 staff/life retired member dentists; \$345 nonmember dentists.

Fees cover sessions only.

Individual Sessions: \$100 dentists; \$80 auxiliaries/life retired member dentists; \$150 nonmember dentists.

Nine continuing education credits available.

**Register online at
michigandental.org/CE-Courses,
or call 517-346-9408.**

Questions? Call the MDA Continuing Education Department at 517-346-9408, or email Jody Marquardt at jmarquardt@michigandental.org.

Accommodations information

Room Types	Rate	Water Park Passes
Family Suite	\$189	Four Water Park passes
Wolf Den/Kid Kamp	\$209	Four Water Park passes
Kid Cabin	\$239	Four Water Park passes
Majestic Bear Suites	\$289	Six Water Park passes

Rooms are subject to a resort fee of \$9.99 per room per night and an additional person charge of \$50 per person per night for additional people beyond the base occupancy. Room rates are only applicable for those registered for the MDA Scientific Session.

For hotel reservations call 866-962-9653 by Feb. 10, 2023. Use reservation Code 2303MDA. A deposit equal to the first night's lodging is required with each reservation.

Great Wolf Lodge cancellation policy: Each individual has 72 hours prior to arrival date to cancel the individual room with a \$40 cancellation fee per room. Reservations must be made by Feb. 10, 2023, to receive the MDA rate.

MDA CE course cancellation refund policy: A 72-hour notice of cancellation is required for all CE programs. Refunds will be granted upon written request, less a \$25 administration fee. An email is an acceptable notification..

Meeting Location Address

Great Wolf Lodge
3575 N. U.S. Highway 31 S.
Traverse City, MI 49684
231-941-3600

Dentistry Uncorked



Ryan Vet, MBA

Friday, March 10, 2023

7 – 10 p.m. (snacks provided)

Three CE credits • AGD Code: 550

Learn the ins and outs of case acceptance strategies, patient messaging, and customer experience in the dental practice. Ryan Vet, a trained sommelier and dental practice management expert, will conduct a wine tasting with attendees and use the world of wine to frame this unforgettable continuing education course.

Learning objectives:

- Learn how to better-message treatment plans to patients to increase necessary case acceptance.
- Practice feeling comfortable with patient messaging in difficult or uncomfortable circumstances.
- Learn what tools to equip yourself with to provide extraordinary patient care through high levels of service.

Cracking the Millennial Code and Let's Get Ethical

Ryan Vet, MBA

Saturday, March 11, 2023

8 – 11 a.m. (breakfast provided)

Three CE credits • AGD Code: 550

The first two hours in this conversation will explore the truths and lies about millennials and how you can set your dental practice up for ultimate success — despite the mysteries surrounding millennials.

In the last hour, explore how to reach the best solution, even when different opinions are involved.

Learning objectives:

- Learn how to message to the millennial generation to increase case acceptance and promote overall oral health.
- Gain practical insights into creating a practice that successfully connects with millennials in promoting ideal oral hygiene.
- Uncover how to navigate differences in ethical opinions.

About the Speaker

Ryan Vet, MBA, is an entrepreneur, speaker, and author. After more than a decade and a half in fast-paced start-ups, he has turned his attention to speaking and helping audiences create experiences worth sharing in their businesses.

This course counts toward the MDA Dental Business Professional (CDBP) certification. Earn three credits in the customer service/communication category

Every Choice Matters: Strategies and Insights into Ergonomic Product Selection



Cindy Purdy, RDH, BSDH

Sunday, March 12, 2023

7:30 – 10:30 a.m. (breakfast provided)

Three CE credits • AGD Code: 770

Thankfully, the profession of dentistry is back on balance — but to what avail? Have your daily aches and pains been sidelined by the importance of PPE and infection control? Is your end-of-day lack of vitality and spirit draining your passion for the career that you once loved?

By facing the ergonomic realities of the practice of dentistry, this course will present solid ergonomic principles and science-based ergonomic evidence that will guide attendees to create strategies and product selections to reduce workplace challenges, enhance wellness, and extend career longevity.

Learning objectives:

- Recognize the risks for work-related injuries that impact the dental profession.
- Gain insight into science-based solutions through ergonomic product selections.
- Summarize how healthy choices support a sustainable clinical career and healthier personal lifestyle.

About the Speaker

With a keen mind and sharp sense of humor, Cindy provides consulting, strategic planning, and training for dental industry manufacturers regarding ergonomics. Because of their continued commitment to the development of ergonomic products that are beneficial to dental practitioners, she is proud to be a key opinion leader for multiple other industry manufacturers.

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Financial support provided by MDA Insurance, MDA Services, and Crest+Oral B Professional Oral Health



Problem Solving Essentials in Endodontics



Bernice Ko, DDS

Friday, Aug. 19, 2022 — MDA Headquarters, Okemos

9 a.m. – 4 p.m. Registration opens at 8:30 a.m. (continental breakfast and lunch provided)

Fee: \$275 member dentists; \$143 staff and life retired member dentists; \$375 nonmember dentists

Six CE credits (hands-on) • AGD Code: 070

Do you want to provide excellent endodontic care for your patients? This one-day hands-on course is designed for general dentists to gain expertise and confidence with completing the highest quality endodontics on both vital and necrotic teeth. Participants will learn advanced NiTi rotary reciprocation instrumentation using Adaptive Motion Technology, predictable irrigation protocols using Apical Negative Pressure, and warm vertical obturation using the Continuous Wave technique. Other topics will include diagnosis, negotiation of calcified canals, creation of a glide path, determination of working length, and location of the MB2. An exciting multi-media program, the course highlights solutions and suggestions on how to treat both straightforward and complex endodontic cases. This hands-on workshop utilizes 3D-printed teeth and is designed to enhance your practical skills.

Learning objectives:

- Assess the protocol for single-visit treatment of both vital and necrotic teeth.
- Differentiate removal of the smear layer and biofilm using the latest irrigation protocols.
- Demonstrate obturation of the root canal system in 3D to capture the natural anatomy with the Continuous Wave of Condensation.

Financial support provided by MDA Insurance, MDA Services, Crest+Oral B Professional Oral Health, and Kerr Dental

Questions? Call 517-346-9408, or email jmarquardt@michigandental.org.

Register online at michigandental.org/CE-Courses or call 517-346-9408.

Meeting Location Address

MDA Headquarters/Accommodations

3657 Okemos Road
Okemos, MI 48864

Courtyard by Marriott

3545 Meridian Crossing drive
Okemos, MI 48864
517-347-9940

About the Speaker

Dr. Bernice Ko received her DDS degree and postgraduate training in hospital dentistry and endodontics at UCLA. She is a Diplomate of the American Board of Endodontics and is a clinical educator with the Section of Endodontics, Special Patient Care and Advanced Education in General Dentistry at UCLA.



CERTIFIED DENTAL BUSINESS PROFESSIONAL (CDBP)

Is your office team performing as well as it should? Could your office staff use more training to improve business operations, communicate with patients, and help your practice grow?

The MDA **Certified Dental Business Professional** program is an exciting new service to help your practice succeed. It's available exclusively through the MDA.

Dental office business staff can earn the new CDBP credential by taking just 30 credits of MDA continuing education courses. Pay-as-you-go classes are value-priced and available at Annual Session, MDA CE seminar series, and online.

The MDA – as always, your first choice for quality continuing education!

ENROLLMENT IS FREE
SO GET STARTED TODAY!
michigandental.org/CDBP



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YOUR CONNECTION TO ORAL HEALTH®



Needles, Lungs, and Tongues® and Patients, Pills, and Pathologies™



Amber Riley, MS, RDH, FAAFS, FIACME

Friday, Sept. 9, 2022 — Northern Michigan University, Marquette

9 a.m. – 4 p.m. Registration opens at 8:30 a.m. (breakfast and lunch provided)

Fee: \$175 member dentists; \$143 staff and life retired dentists; \$275 nonmember dentists

Six CE credits • AGD Code: 340

The morning program will review many of the most important points of use that we must understand today in order to mitigate acute risks when treating patients using legal and illicit psychoactive substances, and what long term risks will become inherent in patients that continue to use them.

The afternoon program will focus on medically compromised patients with age-related diseases such as cancers, or lifestyle-associated factors such as obesity, drug use and abuse, as well as the myriad of common and often underestimated, abnormal physical conditions that we cross paths with on a day-to-day basis. These demand a sharpened focus during treatment-planning, delivery of care, and periodontal maintenance in general dentistry.

Learning objectives:

- Participants will receive a concise review of the most ubiquitous drug substances, their basic chemistry, and physiological effects.
- Recommendations for caution when managing dental procedures on patients using these substances.
- Neurologic, behavioral, and psychiatric disorders, including drug and alcohol abuse, will be examined.

This program counts towards Michigan's pain management requirement

Financial support provided by MDA Insurance, MDA Services, and Crest+Oral B Professional Oral Health

Questions? Call 517-346-9408, or email jmarquardt@michigandental.org.

Register online at michigandental.org/CE-Courses or call 517-346-9408.

Meeting Location

Northern Michigan University

1401 Presque Isle Ave.

Marquette, MI 49855

(Don H. Bottom University Center)

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The Michigan Dental Association is an ADA CER-P recognized provider.

About the Speaker

Amber Riley is a graduate of Sinclair College in Dayton, Ohio. She completed her baccalaureate with Wright State University and a master's degree at Boston University. She is a subject matter consultant to more than 20 dental boards, and she is a forensic dental consultant for the San Diego County Office of the Medical Examiner. She has been published in peer-reviewed, scientific and clinical literature.

Infection Control, Jurisprudence, and Implicit Bias – Oh My! Get the New Licensing Requirements Completed in One Day



Marie Fluent, DDS, Daniel Schulte, JD, and Marita R. Inglehart, DDS

Friday, Sept. 9, 2022 – Weber's Inn, Ann Arbor

9 a.m. – 4 p.m. Registration opens at 8:30 a.m. (breakfast and lunch provided)

Fee: \$275 member dentists; \$143 staff and life retired dentists; \$375 nonmember dentists

FREE for Washtenaw and Livingston District Dental Society member dentists

Five and one-half CE Credits • AGD Codes: 148/550/770



9 – 10:30 a.m.: Dr. Marie Fluent will address the topic of infection control in dentistry.

Learning objectives:

- Describe pertinent CDC Guidance documents to ensure safe dental care.
- Discuss the importance of handpiece sterilization after use.
- Understand PPE requirements for safe clinical care and for other tasks within the dental setting.

11 a.m. – Noon: Dan Schulte will speak on dental ethics, jurisprudence, and delegation of duties.

Learning objectives:

- Identify what procedures are legal to delegate to dental assistants and hygienists.
- Understand what level of supervision is required when a procedure is delegated.
- Recognize the difference between the legal and ethical requirements applicable to delegation and supervision.



1-4 p.m. Dr. Marita Inglehart will speak on implicit bias.

Learning objectives:

- Understand the historical basis and present consequences of implicit biases based on an individual's characteristics.
- Discuss current research on implicit bias in the access to and delivery of health care services.
- How to better-serve a diverse population, as well as diversity and inclusion initiatives and cultural sensitivity.

Financial support provided by MDA Insurance, MDA Services, and Crest+Oral B Professional Oral Health

Questions? Call 517-346-9408, or email jmarquardt@michigandental.org.

Register online at michigandental.org/CE-Courses or call 517-346-9408.

Meeting Location/Accommodations

Weber's Inn

3050 Jackson Road
Ann Arbor, MI 48103
734-769-2500

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The Michigan Dental Association is an ADA CERP recognized provider.

About the Speakers

Dr. Marie Fluent is a graduate of the University of Michigan School of Dentistry and her expertise is in infection control.

Dan Schulte, JD, is a partner at the Kerr-Russell law firm.

Dr. Marita Inglehart is a professor of dentistry in the Department of Periodontics and Oral Medicine at the University of Michigan.



Professional Protector Plan® Control, Protocol, and Risk Management Seminar



Lynda Farnen, JD, and Robert M. Peskin, DDS

Friday, Sept. 23, 2022 — Grand Traverse Resort and Spa, Acme, Michigan

8 a.m. – 12:30 p.m. Registration opens at 7:30 a.m. (breakfast provided)

Fee: \$90 per person

Four-and-one-half CE credits available • AGD Code: 550



The Professional Protector Plan® (PPP) Control, Protocol and Risk Management Seminar will provide the latest claim information statistics to help mitigate risk and real life experiences of your colleagues who have encountered risk exposures. This course is designed and appropriate for all general dentists, specialists, and office staff members. Important fundamentals of risk management will be addressed.

Learning objectives:

- Implementing office protocols so the entire team utilizes the same risk and safety policies.
- Providing clinical treatment that meets or exceeds the accepted standard of care in your locality.
- Understanding the basic principles of acceptable chart and record documentation and the responsibilities of protecting patient health information.
- Discover effective patient management strategies regarding non-clinical issues and adverse events.
- Learn the fundamentals of legal concepts, including general informed consent, vicarious liability, and negligence.

This course counts toward the MDA Dental Business Professional (CDBP) certification (four credits in the risk management category). For more information on the MDA's Certified Dental Business Professional program, go to michigandental.org/CDBP.

For additional information on the MDA-endorsed Professional Protector Plan® program, contact MDA Insurance at 800-860-2272.

PPP-insured dentists will receive a 10% discount on their professional liability premium for three years by attending this seminar.

Financial support provided by MDA Insurance and the Professional Protector Plan.

Questions? Call 517-346-9408, or email jmarquardt@michigandental.org.

Register online at michigandental.org/CE-Courses or call 517-346-9408.

Meeting Location/Accommodations

Grand Traverse Resort and Spa Hotel

100 Grand Traverse Village Blvd.
Acme, MI 49610
231-534-6000

ADA CERP® | Continuing Education
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The Michigan Dental Association is an ADA CERP recognized provider.

About the Speakers

Lynda Farnen is a senior partner at Merry, Farnen & Ryan, PC, and is a regularly featured speaker on risk management for the Professional Protector Plan and the Michigan Dental Association.

Dr. Robert Peskin presents on risk management for the New York State Dental Association-endorsed Risk Management® program.

Introduction to Treating Sleep Apnea in Your Practice; From Getting Started to Medical Billing



Mark Murphy, DDS, ABDSDM, FAGD

Friday, Oct. 7, 2022 — MDA Headquarters, Okemos

9 a.m. – 4 p.m. Registration opens at 8:30 a.m. (breakfast and lunch provided)

\$275 member dentists; \$143 staff and life retired dentists; \$375 nonmember dentists

Six CE credits available • AGD Codes: 730/550

This course will allow the general practitioner to survey the current landscape of medical and dental treatments for sleep apnea and decide how and if they want to expand into this life-saving arena. The overview will cover marketing, physician communication, basic treatment philosophies, appliance choices, medical billing, and the financial and emotional impact on your practice and team. Sleep medicine has progressed in both the diagnosis and treatment protocol and outcome predictability. We will have a limited hands-on/demonstration aspect in the afternoon to evaluate and compare different devices, sleep tests, impression, and bite registration techniques. This course is an overview to help you determine if you want to treat these patients and not a substitute for full training in sleep dentistry.

Learning objectives:

- Obtain a general understanding of sleep-related conditions and the role of the dental team.
- Develop a matrix for screening, testing, and treating your current patients.
- Obtain an overview of the medical billing process and the financial and emotional impact on your practice.

Financial Support Provided by MDA Insurance, MDA Services, and Crest+Oral B Professional Oral Health

ADA CER-P® | Continuing Education
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The Michigan Dental Association is an ADA CER-P recognized provider.

Questions? Call 517-346-9408, or email jmarquardt@michigandental.org.

Register online at michigandental.org/CE-Courses or call 517-346-9408.

Meeting Location Address

MDA Headquarters/Accommodations

3657 Okemos Road
Okemos, MI 48864

Courtyard by Marriott

3545 Meridian Crossing Dr.
Okemos, MI 48864
517-347-9940

About the Speaker

Dr. Murphy practices dental sleep medicine part time in Rochester, Michigan, and is the lead faculty for clinical education at ProSomnus Sleep Technologies. He chairs the dental sleep medicine program at the University of Detroit Mercy School of Dentistry and is a regular presenter on sleep and TMD at the Pankey Institute. He lectures internationally on leadership, practice management, communication, case acceptance, planning, occlusion, sleep and TMD.



Implicit Bias, Jurisprudence, and Infection Control — Oh My! Get the New Licensing Requirements Completed in One Day



Deirdre Young, DDS, and Nan Dreves, RDH, MBA

Friday, Oct. 21, 2022 — Northern Michigan University, Marquette

9 a.m. – 4 p.m. Registration opens at 8:30 a.m. (breakfast and lunch provided)

Fee: \$175 member dentists; \$143 staff and life retired dentists; \$275 nonmember dentists

Five and one-half CE credits available • AGD Codes: 148/550/770

9 a.m. – Noon: Dr. Deirdre Young will address the topic of Implicit Bias.

Learning objectives:

- Learn the historical basis and present consequences of implicit biases based on an individual's characteristics.
- Discuss current research on implicit bias in the access to and delivery of health care services.
- Learn to better-serve a diverse population, as well as diversity and inclusion initiatives and cultural sensitivity.

1:30-4 p.m.: Nan Dreves, RDH, MBA, will speak on Infection Control in Dentistry and Ethics and Jurisprudence in Dentistry.

Learning objectives:

- Describe pertinent CDC Guidance documents to ensure safe dental care.
- Understand the importance of handpiece sterilization after use.
- Review PPE requirements for safe clinical care and for other tasks within the dental setting.
- Obtain a general understanding of dental ethics and jurisprudence.
- Recognize the difference between the legal and ethical requirements applicable to delegation and supervision.

Financial support provided by MDA Insurance, MDA Services, and Crest+Oral B Professional Oral Health

Questions? Call 517-346-9408, or email jmarquardt@michigandental.org.

Register online at michigandental.org/CE-Courses or call 517-346-9408.

Meeting Location

Northern Michigan University

1401 Presque Isle Ave.
Marquette, MI 49855
(Don H. Bottom University Center)

ADA CERP® | Continuing Education
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The Michigan Dental Association is an ADA CERP recognized provider.

About the Speakers

Dr. Deirdre Young is the assistant dean for institutional equity and inclusion for the College of Creative Studies, Detroit. She previously served as director of the office of multicultural affairs at Detroit Mercy Dental.

Nan Dreves is an enthusiastic and comprehensive speaker/consultant specializing in dental occupational health, compliance, safety, and practice management topics.

CAD-CAM Posterior Restorations



Kate Schacherl, DDS

Friday, Nov. 11 2022 — MDA Headquarters, Okemos

9 a.m. – 4 p.m. Registration opens at 8:30 a.m. (breakfast and lunch provided)

\$275 member dentists; \$143 staff and life retired dentists; \$375 nonmember dentists

Six CE credits available • AGD Code: 490

Get ready for a fun day of CEREC CAD/CAM dentistry! This course is for the newer CEREC user or someone who wants a refresher on the latest tips and tricks with posterior restorations. Advice will be provided on best practices for Zirconia, eMax and Celtra Duo, and Tessera restorations.

Learning objectives:

- Discover best practices and crown preparation techniques for Zirconia, eMax, Celtra Duo.
- Learn scanning tips/tricks, designing restorations, in-office milling and firing, adhesive bonding techniques, and cementation.

Financial support provided by MDA Insurance, MDA Services, Crest+Oral B Professional Oral Health, and Kerr Dental

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The Michigan Dental Association is an ADA CER-P recognized provider.

Questions? Call 517-346-9408, or email jmarquardt@michigandental.org.

Register online at michigandental.org/CE-Courses or call 517-346-9408.

Meeting Location Address

MDA Headquarters/Accommodations

3657 Okemos Road
Okemos, MI 48864

Courtyard by Marriott

3545 Meridian Crossing drive
Okemos, MI 48864
517-347-9940

About the Speaker

Dr. Kate Schacherl graduated from Marquette University School of Dentistry in 2008 with a Doctor of Dental Surgery Degree. She received her CEREC® training at the Scottsdale (AZ) Center for Dentistry, and her training in dental implants with Dr. Arun K. Garg, in Chicago and the Dominican Republic. She is certified in the Chao Pinhole Surgical Technique®, the minimally invasive scalpel and suture-free procedure for treating gum recession, and has lectured on this topic to doctors around the globe.



Local Patient Search and How Google Impacts You and The Importance of Phone Call Tracking



Sean White

Friday, Dec. 9, 2022 — MDA Headquarters, Okemos

9 a.m. – 4 p.m. Registration opens at 8:30 a.m. (breakfast and lunch provided)

Fee: \$275 member dentists; \$143 staff and life retired dentists; \$375 nonmember dentists

Six CE credits available • AGD Code: 550

The morning course will cover how search engine optimization (SEO), your GBP (Google Business Profile), and online reviews impact your local search ranking. You will understand how to claim, optimize, and use your GBP and other Google tools to help you stand out and show up when a patient is looking for a general dentist, orthodontist, endodontist, periodontist, dental implants, or other important keywords “near me.”

Learning objectives:

- Understand what Google does during the patient search process.
- Learn what your practice Google Business Profile is, and how to claim, optimize, and use it to attract patients, increase phone calls and requests for directions, request reviews, and more.

The afternoon course will cover how using call tracking numbers and listening to your recorded calls helps you expertly train your front desk staff to convert every new patient who calls. You'll examine the call tracking cycle — track call, record call, listen to call, train staff, learn/teach/modify — and how your practice can effectively implement this cycle to increase new patient appointments. .

Learning objectives:

- Understand the significance of call tracking, why your practice needs it, and how it helps you attract, acquire, and retain the patients you want.
- Comprehend more-advanced benefits of call tracking implementation.

This course counts towards the MDA Dental Business Professional (CDBP) certification (three credits in the marketing category and three credits in the customer service/communications category).

Financial support provided by MDA Insurance, MDA Services, Crest+Oral B Professional Oral Health, and Whiteboard Marketing

ADA CERP® | Continuing Education
Recognition Program

The Michigan Dental Association is an ADA CERP recognized provider.

Questions? Call 517-346-9408, or email jmarquardt@michigandental.org.

Register online at michigandental.org/CE-Courses or call 517-346-9408.

Meeting Location Address

MDA Headquarters/Accommodations

3657 Okemos Road
Okemos, MI 48864

Courtyard by Marriott

3545 Meridian Crossing drive
Okemos, MI 48864
517-347-9940

About the Speaker

Sean White is the president and CEO of Whiteboard Marketing. Founded in 2005, Whiteboard Marketing has evolved into a full-service marketing agency that specializes in dental practice partnerships. His experience is broad-based and includes all aspects of client service. Whiteboard Marketing works with dentists nationally to develop and implement digital and traditional marketing strategies to attract, acquire and retain patients.

Making The Team: Hiring, Culture, Professionalism, Productivity



Laura Nelson, BS, MS, FAADOM

Friday, Feb. 3, 2023 — Novi, Michigan

9 a.m. – 4 p.m. Registration opens at 8:30 a.m. (breakfast and lunch provided)

\$275 member dentists; \$143 staff and life retired dentists; \$375 nonmember dentists

Six CE credits available (hands-on) • AGD Code: 550

To take your practice to the next level, well-defined systems and proper training must be in place. When team members understand the “why” behind “what” they are asked to do, the practice runs more efficiently and smoothly. In this course, you will learn the communication skills and procedures that create the ultimate customer service experience for your patients. You also, learn how to handle common scheduling issues — reduce cancellations/no-shows, set production goals, maximize treatment coverage, and increase case acceptance. You’ll experience a happier, higher producing team that will improve and master the essential systems to make the practice rock!

Learning objectives:

- Define your why and remember your purpose.
- Explain the business cycle and the importance of customer service in the dental office.
- Discuss the key to case acceptance by breaking down and analyzing the buying cycle.
- Distinguish the difference between being proactive and reactive to practice issues.

Financial Support Provided by MDA Insurance, MDA Services, and Crest+Oral B Professional Oral Health

ADA CERP® | Continuing Education
Recognition Program

The Michigan Dental Association is an ADA CERP recognized provider.

Questions? Call 517-346-9408, or email jmarquardt@michigandental.org.

Register online at michigandental.org/CE-Courses or call 517-346-9408.

Meeting Location Address

Embassy Suites by Hilton Detroit Livonia Novi

19525 Victor Parkway
Livonia, MI 48152
734-462-6000

About the Speaker

Laura Nelson, BS, MS, FAADOM, is an award-winning international speaker and the founder of Front Office Rocks, a virtual training platform for dental teams that is the leader in dental front office solutions and training. An accomplished recruiting and management coach and renowned keynote speaker, Nelson is the best-selling author of Step Away from the Drill and Hiring Without Hesitation: A How-To for Small Business Success.



Health Care in the Pandemic's Wake

Presented by MDA Insurance

Class dates, times, and locations listed below

Fee: FREE

Three CE credits



insurance

MDAPROGRAMS.COM

With the Affordable Care Act celebrating its 12th anniversary this year, the MDA Insurance health insurance seminars will focus on how the COVID-19 pandemic is affecting the delivery of health care, how it impacts mandated benefits, and is driving costs higher.

We'll also look at what may happen to provisions of the ACA when and if the administration declares an end to the state of emergency caused by COVID-19. Health Care in the Pandemic's Wake will discuss some changes, such as transparency in health care costs, prescription drug cost drivers, and legislation that may evolve as the year progresses. All seminars begin at 9 a.m. unless otherwise indicated.

Receive three CE credits for attending this free seminar! This seminar is appropriate for doctors as well as the entire dental team, whether you're in the MDA Health Plan, in an individual or small group plan, or are contemplating the right choice for you. Issues pertaining to Medicare will not be discussed during the presentation. For Medicare seminars, see mdaprograms.com.

Locations/Dates:

- **Thursday, Sept. 8 – Marquette** – 6 – 9 p.m. Eastern time
Northern Michigan University, 1401 Presque Isle Ave., Marquette, MI 49855
- **Friday, Oct. 7 – Traverse City** – 9 a.m. – noon
Hotel Indigo Traverse City, 263 W Grandview Pkwy., Traverse City, MI 49684
- **Friday, Oct. 21 – Grand Rapids** – 9 a.m. – noon
Holiday Inn Grand Rapids Downtown, 310 Pearl Street NW, Grand Rapids, MI 49504
- **Friday, Oct. 28 – Okemos** – 9 a.m. – noon
MDA Headquarters, 3657 Okemos Road, Okemos, MI 48864
- **Friday, Nov. 11 – Dearborn** – 9 a.m. – noon
The Henry, Fairlane Plaza, 300 Town Center Dr., Dearborn, MI 48126

Register online at michigandental.org/CE-Courses or call 517-346-9408.

Meeting Location Address

Individual meeting addresses listed above.
Continental breakfast provided at morning classes.

For class questions contact Tina Voss at 517-346-9479, or tvoss@mdaifg.com.

For registration questions call 517-346-9408, or email jmarquardt@michigandental.org.

ADA CERP® | Continuing Education
Recognition Program

The Michigan Dental Association is an ADA CERP recognized provider.

CE REQUIREMENTS FOR LICENSE RENEWAL OF DENTISTS, HYGIENISTS, AND REGISTERED DENTAL ASSISTANTS

60 hours of CE for dentists and 36 hours for RDHs and RDAs is required for each three-year licensure period. All CE courses must be approved by the ADA, AGD, an accredited dental school, or the Michigan Board of Dentistry.

Of those hours:

- Up to 10 hours may be earned by reading articles, magazines, etc., relating to dentistry.
- A minimum of 20 hours for dentists and 12 hours for RDHs/RDAs must be done in a classroom setting or a real time live webinar (recorded webinars do not count as classroom credits).
- A minimum of 20 hours for dentists and 12 hours for RDHs/RDAs must be directly related to clinical issues such as delivery of care, dental materials and pharmacology. Specialists must earn this clinical credit in their specialty field.
- Up to 30 hours for dentists and 18 hours for RDHs/RDAs of CE may be done online and through recorded webinars.
- 3 hours for dentists and 2 hours for RDHs/RDAs must be in pain management.
- A one-time, one-hour course in human trafficking recognition is required. This course can be taken in-person or on-demand.
- **FOR DENTISTS ONLY:** A one-time training in opioid awareness is required to renew Michigan's controlled substance license.

- **NEW:** One hour in dental ethics and jurisprudence is required for all licensed dental professionals, with inclusion of delegation of duties to allied dental personnel. In-person or on-demand continuing education will count toward this requirement.
- **NEW:** One hour in infection control is required for all licensed dental professionals, which must include sterilization of handpieces, PPE, and CDC infection control guidelines. In-person or on-demand continuing education will count toward this requirement.

In addition to the required CE credits:

- All licensed dental professionals must carry a current basic or advanced cardiac life support CPR card from an agency or organization that grants certification pursuant to standards equivalent to those of the American Heart Association. No CE credit is given for CPR courses; therefore does not count toward the 60/36 hours required.
- **NEW:** Three hours of implicit bias training for all licensed health care professionals is required in the form of in-person or live webinars.

For more information on CE requirements for dentists and dental team members, and MDA courses that meet these requirements, including Annual Session courses, visit michigandental.org/CE-courses.



About Michigan's Mandatory Continuing Education Requirements

Every three years, all Michigan dentists must renew their licenses and certify compliance with state continuing education (CE) rules by submitting their application for license renewal. Renewals occur on a rotating basis, so that one-third of the licensed dental population renews each year. License renewal is only available online at www.michigan.gov/lara.

Dental licenses renew every three years. For the preceding three-year period, dentists must maintain records of CE activities and current CPR certification according to the rules of mandatory continuing education (MCE).

It is your responsibility to keep evidence of your CE activities for four years following license renewal in the event you are audited by the Michigan Board of Dentistry. Remember, it is your responsibility to retain all CE records. These records should be given as much care as Internal Revenue Service data.

Evidence of course attendance and completion may take the form of vouchers, certificates, or letters from approved sponsors; receipts for payment are not acceptable. Copies of published materials or documentation of dental-related activities should be as complete as possible to protect against potential audit challenges.

The following are some frequently asked questions and their answers.

How many CE credits are required by Michigan's MCE rules?

See previous page for breakdown.

What does "acceptable" mean?

Courses related to the profession of dentistry are acceptable, whether they are of a clinical or practice management nature, if the course provider is approved by the Michigan Board of Dentistry.

The American Dental Association and the Academy of General Dentistry operate programs that officially recognize providers of CE courses. These programs authorize CE providers to award credits that are accepted by the state of Michigan for license renewal purposes. Additionally, the Michigan Board of Dentistry has its own system for recognizing course providers.

If a course provider has obtained any of these approvals, chances are it will say so in the promotional materials for the courses. Absence of this statement may signal that the course may not qualify for the type of CE credits needed for state relicensure. Check with the provider before taking the course. This is important, because if your course provider is not approved, the CE credit will not count. The MDA is a recognized provider through the ADA Continuing Education Recognized Provider (CERP) program.

To repeat, always verify MCE course status with the provider before taking the course.

What about documentation?

Sponsors of CE programs are required to provide participants with documentation of course participation upon completion of the program. Unfortunately, some course providers are simply not aware of this requirement. You should insist on receiving proof of course completion before leaving the program site. This is the official evidence needed for course verification.

Each individual, licensed dental professional is charged by law to maintain his or her own record of continuing dental education activities. A handy record-keeping folder that makes tracking of CE credits easy and simple is available to all MDA member dentists and their staffs. Call the MDA CE department at 517-346-9408, for your free copy, or order it online at the MDA Web Store, located at store.michigandental.org.

Is CE credit the same as a CE hour?

Yes, as far as continuing dental education courses are concerned. In the matter of courses offered by accredited schools of dentistry, dental hygiene or dental assisting, 10 hours of CE credits are given for each quarter credit and 15 hours are given for each semester credit.

How many credits may be obtained through home study and internet courses?

Home study courses qualify for the personal reading/viewing/listening category (a maximum of 10 credits). However, if the home study course is presented online and given by an approved provider it also qualifies for the online

CE activities category, which allows a maximum of 30 credits for dentists, or 18 credits for RDHs or RDAs. Home study or online courses cannot be counted towards the regular CE credits required through being “in attendance” at approved programs.

Is CPR required by the MCE rules?

Yes. At the time of license renewal dentists must possess current certification in cardiac life support training for the health care provider or health professional. “Certification” refers to the trainer providing a course that results in certification that meets the standards set forth by the American Heart Association. Registered Dental Hygienists and Registered Dental Assistants also need a current CPR certification. Online CPR courses are only acceptable if the hands-on portion is also completed.

Must I submit my course vouchers and certificates with my license renewal?

No. By submitting your license renewal application, you automatically attest to having complied with the MCE requirements. Records must be maintained for four years from the date of application.

Typically, 5-10% of each year’s license renewals will be audited. At that time, records of MCE activities must be presented to demonstrate rules compliance.

What do I do if I’m audited?

Photocopy the documents you have in your personal CE files that detail the various courses and programs you’ve attended during the past three years leading up to your recent license renewal. Send them promptly to the address required.

Be thorough. If you earned more than the required 60 credits, send copies of all you have earned.

Can the MDA track my CE courses for me?

The ADA now has a CE tracking system that will automatically record anything you’ve taken through the ADA or the MDA. This system also allows you to upload or scan CE information from other organizations so you can have a complete record of all the CE you’ve taken in one place. To access your record and start adding to it visit <https://ebusiness.ada.org/myada/myada.aspx> and login using your nine digit ADA number and password. If you do not remember your password, you can follow the steps on the screen to reset it. Your history can be downloaded into a PDF document for printing. Contact Jody Marquardt at jmarquardt@michigandental.org or 517-346-9408 for more information.

What are the consequences of failure to meet the MCE requirements?

Failure to comply with Michigan’s mandatory continuing education rules may result in varying penalties. The first is a minimum \$1,000 fine. Additional penalties range from probation (generally for a period of one year, to secure the credits that were not earned), to loss of license for six months or more, depending on the severity of the situation.

Circumstances have prevented me from completing the MCE requirements. What should I do?

Special consideration may be granted in the form of a waiver by the Michigan Board of Dentistry in selected instances of disability, active military service, prolonged periods out of the country, etc. You may request and fill out a waiver application from the Michigan Board of Dentistry at the time of license renewal, if necessary. Waivers in advance of license renewal are not granted.

For other questions, please contact the MDA office.

The Michigan Dental Association is an ADA CERP recognized provider.

- ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual course or instructors, nor does it imply acceptance of credit hours by boards of dentistry.
- The Michigan Dental Association is a nationally approved continuing education provider in the ADA Continuing Education Recognition Program (ADA CERP).
- AGD Accepted Program Provider #219252
- Please note that the Michigan Board of Dentistry does recognize ADA CERP for continuing education credits toward license renewal.
- There are no conflicts of interest to disclose for any speaker in this catalog.

ADA CERP® | Continuing Education Recognition Program



Live Webinars and On-Demand Courses

Upcoming Live Webinars and On-Demand Courses that meet licensing requirements

June 1, 2022 (live webinar) Implicit Bias Training Part I: 7-8:30 p.m., \$50 per person.

June 8, 2022 (live webinar) Implicit Bias Training Part II: 7-8:30 p.m., \$50 per person.

June 14, 2022 (live webinar) Risk Management for Front Office Team Members – Part I: 11:30 a.m. - 1:30 p.m., \$50 per person

June 15, 2022 (live webinar) Risk Management for Front Office Team Members – Part II: 11:30 a.m. - 1:30 p.m., \$50 per person

Sept. 22, 2022 (live webinar) Is Going Non-Par the Right Move for You? 1 – 2 p.m. FREE.

Oct. 26, 2022 (live webinar) Implicit Bias Training Part I: 7-8:30 p.m., \$50 per person.

Nov. 2, 2022 (live webinar) Implicit Bias Training Part II: 7-8:30 p.m., \$50 per person.

Pre-recorded webinars available on the MDA website that count toward new CE requirements:

Dental Jurisprudence and Ethics, with Dan Schulte, JD
\$35/member dentists and staff; \$65/nonmember dentists

Infection Control in Dentistry, with Marie Fluent, DDS
\$50/member dentists and staff; \$75/nonmember dentists

The MDA website also features on-demand courses that count toward pain management and meet the opioid requirement for dentist pharmacy license renewal. For more information visit the CE section of the MDA website at michigandental.org/CE-Courses.

Questions? Call 517-346-9408, or email jmarquardt@michigandental.org.

Register online at michigandental.org/CE-Courses or call 517-346-9408.



The Michigan Dental Association is an ADA CER-P recognized provider.

- ADA CER-P is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CER-P does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry.
- Please note that the Michigan Board of Dentistry does recognize ADA CER-P for continuing education credits toward license renewal

The MDA is an AGD Accepted Program Provider for FAGD/MAGD credit (provider number 219252)

2022-23 CE COURSE REGISTRATION FORM



Name: _____ ADA Number: _____

Email address: _____ Primary phone: _____

Street address: _____ ☐ Office ☐ Home (Check one)

City: _____ State: _____ ZIP: _____

☐ Member ☐ Retired Life Member ☐ Nonmember ☐ Hygienist ☐ Assistant ☐ Business/Front Desk Staff ☐ Office Manager

Check Box to Register for Course(s)

July 2022

- ☐ **Saturday – Sunday, July 23-24, 2022** – Full Summer Scientific Session
- ☐ **Friday Golf Outing, July 22, 2022**
- ☐ MDA assigns me to a team that will include one of our sponsors (free golf)
- ☐ Pick my own four-person team – \$700 for the team or \$175 per person (list individual names)
- _____
- _____
- _____
- ☐ **Saturday, July 23, 2022** – From Friend to Foe
- ☐ **Sunday, July 24, 2022** – Odontogenic Sinusitis

August 2022

- ☐ **Friday, Aug. 19, 2022** – Problem Solving Essentials in Endodontics

September 2022

- ☐ **Friday – Sept. 9, 2022** – Needles, Lungs, and Tongues
- ☐ **Friday – Sept. 9, 2022** – Implicit Bias/Jurisprudence/Infection Control
- ☐ **Friday – Sept. 23, 2022** – Risk Management
- ☐ **Friday, Sept. 30, 2022** – MDA Leadership Forum
- 10:30 a.m. Morning breakout (choose one)**
- ☐ **Understanding Leadership 1** – Strong Culture – Phil Zeller
- ☐ **Leadership Skills 1** – Time Management – Randy Dean
- ☐ **Component Engagement 1** – Building a Leadership Pipeline Panel
- 1:45 p.m. Afternoon breakout (choose one)**
- ☐ **Leadership Knowledge 2** – Start With Why – Dr. Debra Peters
- ☐ **Leadership Skills 2** – Emotional Intelligence – Phil Zeller
- ☐ **Component Engagement 2** – Membership Outreach – Autumn Wolfer

October 2022

- ☐ **Friday – Oct. 7, 2022** – Introduction to Treating Sleep Apnea in Your Practice
- ☐ **Friday – Oct. 21, 2022** – Implicit Bias/Jurisprudence/Infection Control

November 2022

- ☐ **Friday – Nov. 11, 2022** – CAD-CAM Posterior Restorations

December 2022

- ☐ **Friday – Dec. 9, 2022** – Local Patient Search Google Impacts

January 2023

- ☐ **Friday – Sunday, Jan. 6-8, 2023** – Full Winter Scientific Session
- ☐ **Friday, Jan. 6** – Get READY for Change
- ☐ **Saturday, Jan. 7** – Protecting Your Positive Practice
- ☐ **Sunday, Jan. 8** – Clinical Decision-Making in the Periodontically Compromised Patient

February 2023

- ☐ **Friday – Feb. 3, 2023** – Making the Team

March 2023

- ☐ **Friday – Sunday, March 10-12, 2023** – Full Spring Scientific Session
- ☐ **Friday, March 10** – Dentistry Uncorked
- ☐ **Saturday, March 11** – Cracking the Millennial Code/Let's Get Ethical
- ☐ **Sunday, March 12** – Every Choice Matters: Strategies and Insights into Ergonomic Product Selection

2022 Health Care Updates – Free

- ☐ **Thursday, Sept. 8, 2022** – Northern Michigan University, Marquette
- ☐ **Friday, Oct. 7, 2022** – Hotel Indigo, Traverse City
- ☐ **Friday, Oct. 21, 2022** – Holiday Inn Downtown, Grand Rapids
- ☐ **Friday, Oct. 28, 2022** – MDA Headquarters, Okemos
- ☐ **Friday, Nov. 11, 2019** – The Henry, Dearborn

Register online at michigandental.org/CE-Courses, fax to 517-372-6704, or mail completed form to:

Michigan Dental Association, 3657 Okemos Rd., Ste. 200, Okemos, MI 48864-3927.

For additional details and pricing information please visit michigandental.org/CE-Courses, or call Jody Marquardt at 517-346-9408.

Check Payment Method:

- ☐ Check or money order enclosed ☐ Charge to my ☐ MasterCard ☐ VISA ☐ AMEX ☐ Discover

Card Number: _____ Exp. date: _____ Billing ZIP Code: _____

Name on card (please print): _____

Total Due: _____

Place Your Classified Ad at michigandental.org

Place your classified ads, renewals, and changes on the MDA website using our secure server. We regret that we are unable to take verbal classified ads or renewals. Please visit www.michigandental.org to place your ad. For questions regarding ad placement or renewal contact jhammond@michigandental.org.

CLASSIFIED ADS appear in each issue of the *MDA Journal*. They are placed online approximately two weeks prior to print publication. There is a \$25 charge for placement on the MDA website prior to normal print or web publication. Place your ad at www.michigandental.org.

ADVERTISEMENTS for dental treatment services must follow the *ADA/MDA Code of Ethics* guidelines for advertising. Publication of classified ads does not constitute endorsement of products, practices, or services by the MDA. For more information, contact the managing editor at dfoe@michigandental.org.

RATES: MDA members: \$65 first 30 words; 60 cents each additional word; Nonmembers: \$75 first 30 words; 75 cents each additional word. All prices are per ad, per month.

DEADLINES: First of the month preceding publication (e.g., Jan. 1 for Feb. issue).

FOR RENT/LEASE

Four ops, 1,600 sq. ft. dental office in a professional medical building in the heart of Canton, Mich. Two hygiene ops and two restorative ops in good working condition. Could be a great startup or satellite location. Contact samerdds@gmail.com or 248-761-5821.

Lease/space sharing! Golden opportunity for dental graduate, general dentist, or specialist to start a practice or expand an existing dental practice. Large, modern facility positioned on a main road with easy access to and from I-696 freeway located in Warren, Mich. Excellent terms. Please call 248-224-5821.

FOR SALE

HuFriedy Air Flow One air polisher — with stand, handpiece, and all accessories. Used four times. Retail for \$11,600, asking \$9,200. Call 248-613-0703.

Collection of new condition clinical dental texts for sale, many still wrapped. \$2,650 takes lot. *Mucogingival Esthetic Surgery* (2 vol.); *Practical Manual of Periodontal and Peri-Implant Surgery*; *3D Imaging and Dentistry*; *Oral and Maxillofacial Pathology, 4th Ed.*; *Computer Guided Applications for Dental Implants, Bone Grafting, and Reconstructive Surgery*; *Sleep Apnea and Snoring Surgical and Non-Surgical Therapy*; *Plastic-Esthetic Periodontal and Implant Surgery — A Microsurgical Approach*; *Oral Implantology Review—A Study Guide*; *Craniofacial Pain—A Handbook for Assessment*, (Continued on Page 86)

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Upcoming Classified Deadlines

August 2022 July 1
September 2022 August 1
October 2022 September 1



MDA Job Board
Jobs.michigandental.org

The *best* place to find the best!

Find a job, post a job:

- Associates
- Dental hygienists
- Dental assistants
- Office staff

- ✓ The complete online resource for MDA members and their staffs
- ✓ Fully interactive — easy to use
- ✓ Always **FREE** to search for jobs or search applicant profiles
- ✓ The *best* way to post a job or find a position!



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Diagnosis, and Management; Oral Surgery for the General Dentist — A Step-By-Step Practical Approach(Lexi-Comp); and nine additional texts. Buyer to pick-up in Novi by mutual arrangement. Text cell 248-231-5969.

For sale — 2009 Sirona digital Pan — \$7,000 or best offer. In excellent condition, still using it. Selling to make room for a 3D Pan. Only the serious text your name, cell number, best offer, and best days and times to see it, to 248-752-1776. This will get you through the supply chain wait list or if you're not digital, don't miss this opportunity.

PRACTICE FOR SALE

Oakland County — General practice for sale — Oakland County gem! \$640K in revenue with \$240K earnings after debt. Specialty work

referred. Digital and Pan. RE available with tenant income. For more information, please contact Sara Marterella, sara.marterella@henryschein.com, 734-765-0770. #MI3107.

Sunny side of Michigan — Motivated seller, open to negotiation. Four-day-per-week practice with an average gross of \$555K in a beautiful stand-alone brick building. Four ops, digital X-ray, refers out most specialty work. Contact DBS Dental Sales Sarah Pajot at 989-450-0287 or Rob Ballard, DDS, at 810-252-2570. Reference: PPB21RS311.

Washtenaw County — Pending sale! Contact DBS Dental Sales Sarah Pajot at 989-450-0287 or Rob Ballard, DDS, at 810-252-2570. Reference: PPB21RS317.

Southeast Michigan — Pending sale!

Contact DBS Dental Sales Sarah Pajot at 989-450-0287 or Rob Ballard, DDS, at 810-252-2570. Reference: PPB21RS315.

Southeast Michigan — Downriver — Average gross \$390K. Stand-alone building with five ops and Easy Dental software. Contact DBS Dental Sales Sarah Pajot at 989-450-0287 or Rob Ballard, DDS, at 810-252-2570. Reference: PPB21RS318.

Southeast Michigan — Grossing approximately \$1M on a limited schedule. This dental practice has two locations with digital X-ray, and both buildings are for sale. Contact DBS Dental Sales Sarah Pajot at 989-450-0287 or Rob Ballard, DDS, at 810-252-2570. Reference: PPB21RS316.

Bay, Midland, Saginaw area — Pending sale! Contact DBS Dental Sales Sarah Pajot at 989-450-0287 or Rob Ballard, DDS, at 810-252-2570. Reference: PPB21RS320.

Charlevoix area — Professional building in a beautiful prime location in northwest Michigan. Average gross \$800K, non-par, four ops, digital X-ray, and charting, with Dentrux software, open four days per week. Contact DBS Dental Sales Sarah Pajot at 989-450-0287, or Rob Ballard, DDS, at 810-252-2570. Reference: PPB22RS327.

Northern Thumb area — Average gross \$435K on four days per week. Six ops, in a beautiful brick professional building. Contact DBS Dental Sales Sarah Pajot at 989-450-0287 or Rob Ballard, DDS, at 810-252-2570. Reference: PPB21RS324.

General practice for sale in Kentwood, Mich. — \$499K — Five ops with room for one more. Busy, downtown

Publication of classified ads does not constitute endorsement of products, practices, or services by the MDA.

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bankofamerica.com/practicesolutions

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BANK OF AMERICA



The MDA's **Committed Colleague** Recognition Program recognizes outstanding volunteer leaders in Michigan dentistry. Any member can nominate a volunteer for going "above and beyond" — it's a great way to honor those unsung heroes who do so much for dentistry.

To learn more, visit:

michigandental.org/committed-colleague



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location. Spacious and organized practice. Collecting more than \$600K. For more information, please contact patrick.m.roberson@gmail.com or by phone at 919-559-6916.

Earn \$500K pre-tax take-home income, after debt service, working three and one half days per week once you buy this U.P. practice located on the shores of Lake Michigan. Consistently produces \$1.2M yearly. Contact Mark Breit, 906-250-9666; mbreit@paragon.us.com.

Wine country (LDGT1) — Established practice in Grand Traverse County. Four ops with extensive facility/equipment upgrades. Solid hygiene department. Contact Phil, Peak Practice Transitions, 248-477-5777.

Practice located in northwestern area of Oakland County, Mich. — General practice, revenues around \$1M. Stand-

Think MDA First!

Have a question? Need help?
Think MDA first — email
membership@michigandental.org.

alone building with five rooms and one room for expansion. Digital X-rays, intraoral cameras, digital scanner. Real estate available. For details, email nextchapterdentaltransitions@gmail.com.

\$1.1M with no Medicaid (NNTF2) — Large Upper Peninsula general dental practice with great net!. Seven ops, digital X-ray, and E4D unit. Most specialty work referred out. Contact Phil Stark at Peak Practice Transitions 888-477-5777.

Modernized practice (SRH2) — \$700K-plus average, 39% net, and

growth trends. Primarily traditional insurance. Contemporary facility and equipment, five ops, and a stable staff. Contact Steven Schrems at Peak, 248-477-5777.

Oakland County (SLOS4) — Part-time, patient-focused practice. Two ops with pan, room to expand. Air filtration upgrades. Ideal for satellite location. Contact Steve Schrems, Peak Practice Transitions, 888-477-7325.

Family practice — Three ops southeast Grand Rapids, grossed \$1.2M in 2021 on four days per week. Call 616-308-4915. Please, brokers do not call looking for a listing. Call only if you are a client. Thank you.

Southeast Michigan — Established, well-managed general family practice with \$600K in revenue earning more
(Continued on Page 88)



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Choices you make now could affect all their tomorrows.

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Call 800-860-2272 for a quote or visit mdaprograms.com.



than \$200K after debt payment. Digital X-rays. RE is available for purchase with practice. For more information, please contact sara.marterella@henryschein.com, 734-765-0770. #MI2944.

Vacationland District — Well-established, five-operator practice grossing \$800K-plus, specialties referred out. Digital X-rays and camera. RE available. For details contact HS PPT consultant Denise Bouwhuis, 734-765-7080, denise.bouwhuis@henryschein.com. #MI173.

Southwest Michigan — Check this out! Excellent opportunity to own a long-standing and highly successful four-operator practice with revenues well over \$1M and earnings more than \$500K. Productive hygiene department and well-trained clinical team with many services referred out. Real estate also available. To discuss this opportunity, please contact Denise Bouwhuis, 734-765-7080, denise.bouwhuis@henryschein.com. #MI179.

Northern Michigan — Long-standing stable practice available in a beautiful, centrally located northern city. Digital X-rays, pan, and intra-oral camera are utilized in this four-operator practice with four days of hygiene. Real estate is also available for purchase. To discuss this opportunity, please contact Denise Bouwhuis, 734-765-7080, denise.bouwhuis@henryschein.com. #MI2682.

North Wayne County, Mich. — Location! Great community general

family practice! Revenues of more than \$1M with earnings after debt at \$350K! Strong hygiene program with a loyal team. Room for additional growth with some specialty referred. Six ops. Digital. RE available. To discuss this opportunity, please contact Sara Marterella, 734-765-0770, sara.marterella@henryschein.com. #MI3065.

Pediatric practice in desirable location — Pediatric practice with 12 ops in desirable location one hour northeast of metro Detroit. Gross \$1M-plus. Digital using Dentrrix. Strong hygiene program. Real estate available. Contact Sara Marterella, 734-765-0770, sara.marterella@henryschein.com. #MI148.

East Lansing — State-of-the-art in prime location! Eight ops with 50-plus new patients per month. CBCT and Cerec. Low overhead. Favorable lease terms. For more information, please contact Sara Marterella, 734-765-0770, sara.marterella@henryschein.com. #MI2869.

Lansing, Mich. — General practice with four ops. Well-maintained, high visibility location with room to grow. Digital X-rays. RE available. To discuss this opportunity, please contact Sara Marterella, 734-765-0770, sara.marterella@henryschein.com. #MI2766.

Genesee County, Michigan — Fantastic \$1M practice with 55% overhead! Strong hygiene program and loyal team! Beautiful stand-alone building; eight treatment rooms; digital and pan. RE available. To discuss this opportunity, please contact Sara Marterella, 734-765-0770, sara.marterella@henryschein.com. #MI2767.

Metro Detroit oral surgery practice — Highly profitable with excellent reputation in suburbs of metro Detroit. Revenue of more than \$1.1M

with above-industry-average cash flow. Beautiful facility, strong referral base, and loyal team. For more information, please contact Sara Marterella, sara.marterella@henryschein.com, 734-765-0770. #MI2985.

Northeast Michigan — Long-standing, successful four-op practice referring out most specialty procedures. Updated with digital X-rays, pan, scanner, and chartless records. Well-maintained. Real estate also available. To discuss this opportunity, please contact Denise Bouwhuis, denise.bouwhuis@henryschein.com, 734-765-7080. #MI2768.

Grand Rapids, Mich. — Unique opportunity to own a Grand Rapids practice with a loyal team! Great cash flow with \$1M in revenue and 50% overhead on four days per week. Most specialties referred. Real estate available. To discuss this opportunity, please contact Denise Bouwhuis, denise.bouwhuis@henryschein.com, 734-765-7080. #MI3027.

Oakland County, Mich. — General practice with revenues around \$500K. Great location with four ops and room to expand as practice grows. Real estate available. To discuss this opportunity, please contact Sara Marterella, 734-765-0770, sara.marterella@henryschein.com. #MI2756.

Saginaw Township — Well-established general practice — Fee-for-service, \$725K revenues with 39% net on three-and-one-half-days! Experienced staff, loyal patients, chartless, and digital X-ray/pan. Complete “top to bottom” office renovation with five ops, a must see! Would be a good first-time buyer or second-location practice. Associate and/or mentoring available. Motivated seller. Send inquiries to sde4291@gmail.com.

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Beautiful practice for sale — in northwest Michigan near Traverse City. Building is a store front on a lovely main street setting, so foot and vehicle traffic is abundant. This office is approximately 1,000 sq. ft., and has three operatories, all with fairly new cabinetry and equipment. This practice has gold mine potential, and is being sold by the current dentist. For information, please contact 231-499-7086.

Lansing area — Solid practice with more than 1,630 active patients, steadily increasing collections with collections of more than \$905K, available building with 4,000 sq. ft. of office space and seven operatories. Contact David J. Dobbins, DDS, 313-550-6509, ddobbins@paragon.us.com.

West Michigan lakeshore practice for sale — Less than an hour from Grand Rapids. Longstanding stable practice, Excellent staff. Digital office with computers in every op, CT scanner, and intraoral cameras. Collecting \$1.2M annually on three-and-one-half-days per week. Mix of PPO and fee-for-service. Refers out ortho, most implants, third molars, molar endo, and some pedo. Contact wmppractice4sale@gmail.com for more info.

Macomb County — Small part-time office available with real estate. Collecting \$250K per with more than 50% of collections coming from hygiene. With a little attention for treatment planning, this office should be collecting more than \$500K per year. For more information please contact Patrick Houlihan, DDS, of The Houlihan Group at phoulihan11@msn.com or 734-634-4459.

Northeastern Michigan resort town — Beautiful, established general practice located on Lake Huron shore with a river in the backyard. Five ops with room for a sixth. Digital radiography. All updated computers, Eaglesoft, in all ops, strong hygiene program; \$1.1M

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production, practice continues to grow with more than 4,000 patients. Enough room for two doctors. Some specialties referred out. Building for sale also; 2,300 sq. ft. with finished second level. Good public and parochial schools, hospital, biking, hunting, fishing, boating, relaxing lifestyle. Call 989-362-7133.

Dental practice for sale in downtown Coloma, Mich. — Coloma is in beautiful southwest Michigan; a charming town full of friendly people. This fee-for-service solo practice has been successfully operating for 22 years and is a modern facility with four operatories. Dentrux software, the office is fully digital, no paper charts. Purchased a new panoramic X-ray unit last year. Intra-oral cameras used routinely. An in-office membership program is in place. Practice overhead consistently runs at a profitable 55%-60%. Contact Annette Wheeler at 616-295-5518 or annettewheeler1221@gmail.com for more information!

Southwest Michigan — Long-standing stable general practice with a beautiful view. Four-ops, well-maintained and recently updated, left- and right-handed compatible equipment in all four ops. Growth opportunity, most specialty procedures referred out. Four days of hygiene, loyal staff, and high number of patients. Real estate is also available. Financials available upon request. To discuss this unique opportunity, please contact mike.oursler13@gmail.com.

(Continued on Page 90)



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Highly profitable general practice — Kalamazoo — Established five-op general practice collecting \$1M-plus with 50% OH. Centrally located in Kalamazoo. Low overhead. Building available. Contact Veritas Transition

Upcoming Classified Deadlines

August 2022	July 1
September 2022	August 1
October 2022	September 1
November 2022	October 1
December 2022	November 1
January 2023	December 1
February 2023	January 1
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Make the MDA your first choice for continuing dental education! Get all the details at michigandental.org/CE-courses or see the MDA Continuing Education Catalog in this issue.

The MDA is an ADA CERP Recognized Provider. ADA CERP is a service of the ADA to assist dental professionals in identifying quality providers of continuing dental education. The Michigan Board of Dentistry recognizes ADA CERP for CE credits toward dental license renewal.

Friday – Sunday, July 22-24: Summer Scientific Session. How Oral Dysbiosis Creates Systemic Disease and What You Can do to Save Lives with Mark Cannon, DDS, MS; and Odontogenic Sinusitis: Did You Know . . . with John Craig, MD. Where: Treetops Resort, Gaylord. Six CE credits.

Friday, Aug. 19: Problem-Solving Essentials in Endodontics. Speaker: Bernice Ko, DDS. Where: MDA Headquarters, Okemos. Six CE credits.

Friday, Sept. 9: Needles, Lungs, and Tongues, and Pa-

tients, Pills, and Pathologies. Speaker: Amber Riley, MS, RDH, FAAFS, FIACME. Where: Northern Michigan University, Marquette. Six CE credits.

Friday, Sept. 9: Implicit Bias, Jurisprudence, and Infection Control — Oh My! Get the New Licensing Requirements Completed in One Day. Speakers: Marie Fluent, DDS; Daniel Schulte, JD; and Marita R. Inglehart, Dr. phil. habil. Where: Weber's Inn, Ann Arbor. Five and one-half CE credits.

Friday, Sept. 23: Professional Protector Plan® Control, Protocol, and Risk Management Seminar. Speakers: Lynda Farnen, JD; and Robert M. Peskin, DDS. Where: Grand Traverse Resort and Spa, Acme. Four-and-one-half CE credits.

Friday, Sept. 30: 2022 Leadership Forum. Speakers: Vincent Benivegna, DDS; Bill Sullivan, JD; Neema Katibai, JD; Chelsea Fosse, DDS; Phil Zeller; Randy Dean; Todd Christy, DDS; Joanne Dawley, DDS; Debra Peters, DDS; Autumn Wolfer; and Karen Burgess, MBA, CAE. Where: Crowne Plaza, Lansing. Five and one-quarter CE credits.

Friday, Oct. 7: Introduction to Treating Sleep Apnea in

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Your Practice: From Getting Started to Medical Billing. Speaker: Mark Murphy, DDS, ABDSDM, FAGD. Where: MDA Headquarters, Okemos. Six CE credits.

Friday, Oct. 21: Implicit Bias, Jurisprudence, and Infection Control — Oh My! Get the New Licensing Requirements Completed in One Day. Speakers: Deirdre Young, DDS, and Nan Dreves, RDH, MBA. Where: Northern Michigan University, Marquette. Five and one-half CE credits.

Friday, Nov. 11: CAD-CAM Posterior Restorations. Speaker: Kate Schacherl, DDS. Where: MDA Headquarters, Okemos. Six CE credits.

Friday, Dec. 9: Local Patient Search and How Google Impacts You and The Importance of Phone Call Tracking. Speaker: Sean White. Where: MDA Headquarters, Okemos. Six CE credits.

Friday – Sunday, Jan. 6-8, 2023: Winter Scientific Session. Get Ready for Change and Protecting Your Positive Practice, with April Callis-Birchmeier, PMP, CCMP, CSP; and Clinical Decision-Making in the Periodontally Compromised Patient: Current Periodontal and Prosthodontic Perspectives, with Kyle Hogg, DDS, and Leyvee Caba-

nilla-Jacobs, DDM, DDS, MSD. Where: Crystal Mountain Resort, Thompsonville. Nine CE credits.

Friday, Feb. 3, 2023: Making the Team: Hiring, Culture, Professionalism, Productivity. Speaker: Laura Nelson, MS, FAADOM. Where: Embassy Suites by Hilton Detroit-Livonia- Novi, Novi. Six CE credits.

Friday – Sunday, March 10-12, 2023: Spring Scientific Session. Dentistry Uncorked and Racking the Millennial Code and Let's Get Ethical, with Ryan Vet, MBA; and Every Choice Matters: Strategies and Insights into Ergonomic Product Selection, with Cindy Purdy, RDH, BSDH. Where: Great Wolf Lodge, Traverse City. Nine CE credits.

DETROIT MERCY DENTAL

These partial listings of live courses are provided by the University of Detroit Mercy Institute for Advanced Continuing Education. Contact Detroit Mercy Dental at 313-494-6626 or online at dental.udmercy.edu/ce for a complete list of courses and additional information.

Tuesday, June 14: Live Webinar — Diagnostic Tests in
(Continued on Page 94)

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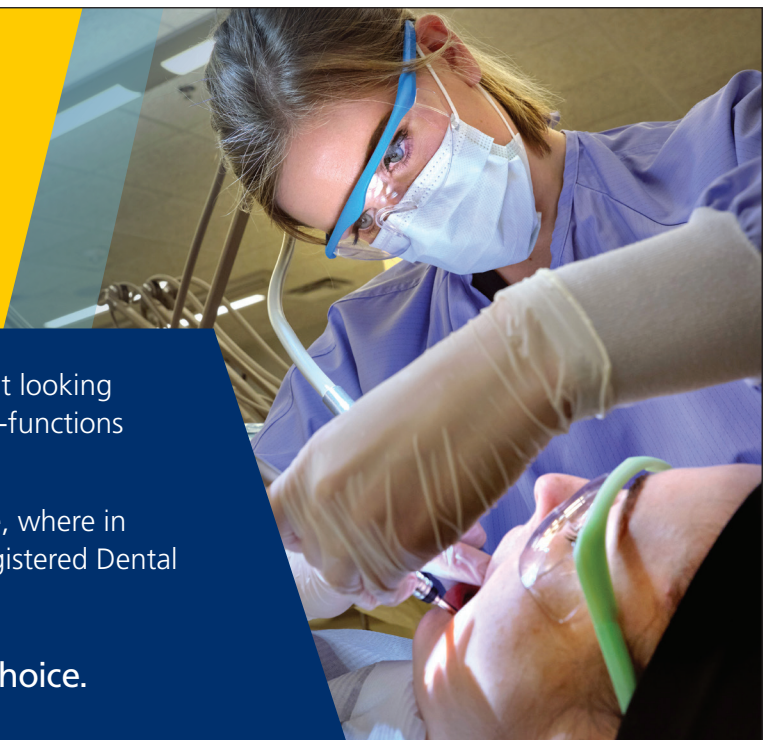
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Periodontics: Concepts and Applications. Speaker: Eraldo Batista Jr., DDS, MSc, DSc. Where: Online course.

Wednesday, June 15: Live Webinar — Sinusitis or Something Else? Multidisciplinary Approach to Diagnosing and Managing Odontogenic Sinusitis. Speakers: John Crain, MD, and Susan Paurazas, DDS, MHSA, MS. Where: Online course. Three CE credits.

Thursday, June 23: Live Webinar — Pain Management: Analgesics, Opioids, Adjuvants, and Beyond. Speaker: Sanjay Chand, MD. Where: Online course. Three CE credits.

Thursday, June 23: Live Webinar — Surgical Microscope Enhancing Periodontal and Implant Treatment Outcomes. Speaker: Usun-Liang Chan, DDS, MS. Where: Online course. One CE credit.



Chan

Friday, July 15: A Hands-On Review of Local Anesthesia Techniques. Speakers: Ana Janic, DDS, MS; M. Lynne Morgan, RDH, MS, MA; and Carl Stone, DDS, MA, MBA, MA. Where: School of Dentistry. Five CE credits.

Wednesday, July 20: Live Webinar — Dental Ethics, Jurisprudence and Delegation in Michigan. Speaker: Pamela Zarkowski, JD, MPH. Where: Online course. Two CE credits.



Zarkowski

Friday, July 22: Live Webinar — Innovations in Soft Tissue Grafting to Maximize Dental Implant Esthetics. Speaker: Bassam M. Kinaia, DDS, MS. Where: Online course. Four CE credits.

Thursday, Aug. 11: Live Webinar — Immunosuppressants and Chemotherapy: Overview, Implications, and Oral Health Management. Speaker: Aman Gupta, MD. Where: Online course. Three CE credits.

Journal CE Listings Policy

The *Journal* lists continuing education courses by accredited Michigan dental schools and dental societies in Michigan in this section at no charge. To place a listing, see the online CE Course Submission Form at michigandental.org/CE-Courses.

Friday, Sept. 16: Live Webinar — Peri-Implant Diseases: Diagnosis, Treatment Solutions, Complication Management, and Maintenance. Speaker: Bassam M. Kinaia, DDS, MS. Where: Online course. Three CE credits.

Wednesday, Sept. 21: Live Webinar — QPR: Protocol for Inspiring Hope to Individuals Experiencing Suicidal Crises. Speakers: Bailey Andersen, LMSW, and Juliette C. Daniels, EdD, MA. Where: Online course. Two CE credits.

Thursday, Sept. 22: Live Webinar — Infection Prevention and Control in Dentistry. Speaker: Sanjay Chand, MD. Where: Online course. Three CE credits.

Wednesday, Sept. 28: Live Webinar — ABCs of CBCT in Endodontics. Speakers: Susan Paurazas, DDS, MHSA, MS, and Tenzin Dadul, MDS, BDS, MS. Where: Online course. Three CE credits.

Thursday, Oct. 6: Live Webinar — Pain Management: Analgesics, Opioids, Adjuvants, and Beyond. Speaker: Sanjay Chand, MD. Where: Online course. Three CE credits.

Thursday, Oct. 20: Live Webinar — Implicit Bias: What It Means and How It Impacts My Patients. Speakers: Bailey Andersen, LMSW, and Juliette C. Daniels, EdD, MA. Where: Online course. Three CE credits.

UNIVERSITY OF MICHIGAN

These partial listings of live courses are provided by the University of Michigan School of Dentistry. Please contact the school at 734-763-5070 or online at <https://dent.umich.edu/education/continuing-dental-education> for complete list of courses and additional information.

Friday – Sunday, June 24-26: Bench Test Preparatory Course in Restorative Dentistry for International Dentists. Speaker: Qiming Jin, DDS, MS, PhD. Where: School of Dentistry. Twenty-four CE credits.

Tuesday – Saturday, July 25-30: Advanced Periodontal Surgery: A Practical Training Course. Speaker: Hom-Lay Wang, DDS, MSD, PhD. Where: School of Dentistry. Twenty-nine CE credits.



Wang

Friday, Aug. 19: Dental Hygiene Centennial: Hot Topics in Dental Hygiene. Speakers: Todd Ester, DDS, MA; Margherita Fontana, DDS, PhD; Marita Inglehart, Dipl. Psych., Dr. phil., Dr. phil. Habil; Elizabeth Pitts, RDH, MS; and Denise Williams, PhD, MS, SPHR, SHRM-SP. Where: School of Dentistry. Six CE credits. ●

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A 'Silent Bell' for Dr. John VanderKolk



Following a two-year delay due to the pandemic, West Michigan District Dental Society members gathered on April 21 to present their highest honor, the Distinguished

Service Award, to John K. VanderKolk, DDS. He's shown here with WMDDS President Dr. Sarah Masterton.

This recognition is also known as the "Silent Bell" award, because it honors colleagues who have contributed significantly to the community and our profession without noise or desire to draw attention. Local leaders of the American College of Dentists and the WMDDS created the award to thank these individuals and build awareness of their contributions as role models of service for colleagues. John is the 48th recipient of this award.

John began practice following graduation from the University of Michigan School of dentistry in 1985. He joined his private practice with the large group practice, Partners in Dental Care, in 1994. During this time, he

served in volunteer leadership positions as president of the WMDDS and several MDA and community committees, including as chair of the MDA Annual Session.

John and his wife Rosa subsequently desired to bring their faith into a greater call for service. He left private practice, initially planning to move to North Africa to live and work. That door closed, but another one opened when he was asked by Health Intervention Services to start a dental program dedicated to providing care for people who were falling through gaps in our social safety net.

He further blended his professional skills with his desire to share his faith by conducting dental mission trips to war-torn countries in the Middle East, where he established a curriculum to train local providers to address these dental needs.

John rejoined the group Partners in Dental Care in 2016. The VanderKolks continue to participate in community and international-based outreach ●

— Chris Smiley, DDS

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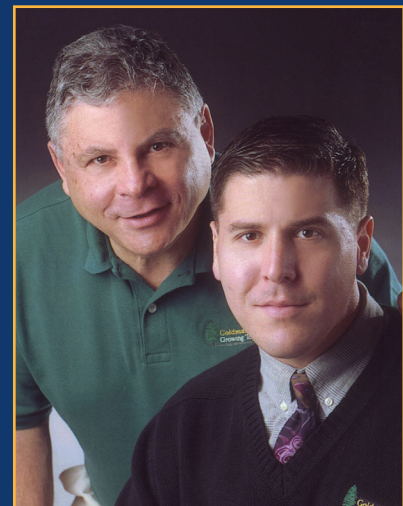
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