

MOUThPIECE

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- HR Steps to Follow During a Dental Practice Transition and Acquisition
- UCSF Community Clinic
- Debugging the Myths of Practice Transitions/
Selling Your Practice Part I
and much more...



San Mateo County
DENTAL SOCIETY

Member Events Calendar

See Education / Events > Calendar of Events at www.smcds.com for details and registration.

New / revised course info highlighted in **bold text**

M A Y						
DATE	DAY	TYPE	TOPIC	SPEAKER/CONTACT	LOCATION	TIME
2	Tu	SCCE	Bay Area Aesthetic Masters	Ken Hovden, DDS / baaestheticmasters.com	SMCDS	6:30-8:30 P
9	Tu	G	SMCDS Leadership Meeting	President: Pinal M. Viraparia, DDS	SMCDS	6:30-8 P
15	M	RCE	BLS CPR Renewal Course	Richard A. Fagin, DDS	SMCDS	6-7:30 P
18-20	Th-Sa	CE1/2	CDA Presents: Anaheim	Multiple	Convent Ctr	Multiple
23	Tu	RCE	BLS CPR Renewal Course	Stephen R. John, DDS	SMCDS	6-7:30 P
J U N E						
1	Th	SCCE	SMCDS Study Club Topic: <i>How Digital Workflow and Prosthetic Factors Help Maintain Crestal Bone Stability and Soft Tissue Stability</i> <i>Sponsored by Nobel Biocare</i>	Ramon Alsua	SMCDS	6:30-8:30 P
6	Tu	SCCE	Tentative SMCDS Executive Board Meeting	President: Pinal M. Viraparia, DDS	N/A, Virtual	6:30-8 P
8	F	HWS	Hands-On Workshop Topic: <i>Bulk Fills: Fact, Fiction or Both? Improve Your Workflow, Satisfaction and Profit</i> <i>Sponsored by Zest Dental Solutions & Ultradent</i>	Patrick L. Roetzer, DDS	Unident Burlingame	6:30-8 P
13	Tu	G	Bay Area Aesthetic Masters	Ken Hovden, DDS / baaestheticmasters.com	SMCDS	6:30-8:30 P
21	W	NDS	New Dentists Pop-Up Network & Mingle @ SM Bay Ctr <i>Event sponsored by New York Life</i>	Mike Aicardi 650.637.1121	San Mateo	7-9 P
24	Sa	FMB	Shredathon: Document Shredding, eWaste, & Lead Foil	Jim Aicardi 650.637.1121	TBA	9-12 P
27	Tu	RCE	BLS CPR Renewal Course	Stephen R. John, DDS	SMCDS	6-7:30 P
J U L Y						
7	F	RCE	8-Hour Infection Control for Unlicensed DAs	Leslie Canham, CDA, RDA	Dntl Office San Carlos	8-12 P
11	Tu	G	Tentative SMCDS Executive Board Meeting	President: Pinal M. Viraparia, DDS	N/A, Virtual	6:30-8 P

EVENT TYPE	
AR	Allied Dental Relations
CE1	Core CE
CE2	20% CE
CO	Community Outreach
FMB	Free Member Benefit
G	Governance

EVENT TYPE	
H	Holiday
HWS	Hands-On Workshop
L	Leadership
NDS	New Dentists Social
PG	Personal Growth
PM	Practice Management

EVENT TYPE	
PM1/4	Pract Mgmt 1=New Dent 4=Life Active
PS	Professional Success
PS1/4	Prof Success 1=New Dent 4=Life Active
RCE	Required CE
S	Social Event
SCCE	Study Club CE



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Treasurer, Secretary: Zachary E. Held, DDS

Immediate Past President: Purvi K. Zavery, DDS, MS

Executive Board Member: Sara A. Andrews, DDS, MS

Executive Director & Editor: Nakia Brandt

MOUTHPIECE

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All editorial contributions are subject to space and/or content editing at the Editor's discretion.

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President's Message

By Pinal Viraparia, DDS

Hello Spring! I hope everyone endured the unprecedented winter and rains without much damage and is ready to welcome some sunshine in the coming months. As much as we wanted to cozy up and not get out of our warm and cozy houses for the past few months, we have been busy with several initiatives at SMCDS. We have been working on improving member benefits, dental programs to address access to care in San Mateo County, student engagement, leadership recruitment, and GM meetings.

As mentioned in the last update, The Viva Online Learning platform- a valuable benefit for SMCDS members, is in the process of rolling out as I write this article. We would like to see how members respond to the platform and welcome feedback about their experience.

Secondly, Nakia has been continuing to work with Sequoia Healthcare District and Health Plan of San Mateo to create a dental program to assist the family resource center's patient waitlist. The pilot will begin with ten private dentists, and payments for services will be provided by Health Plan of San Mateo and Sequoia Healthcare District. They are still working on determining appropriate payment rates for private dentists. SMCDS will send out an announcement to recruit dentists once the program is ready to launch.

SMCDS is collaborating with six Bay Area dental societies on a UOP and UCSF student engagement plan. Plan is to engage them early and get them involved with organized dentistry. We will organize a lunch and learn event and provide bus rides for students to CDA Presents San Jose in September 2023. SMCDS is also recruiting leaders for next year and is encouraging members to think about who would make a good SMCDS leader and recruit them. Lastly, the GM Meeting Task Force has decided to continue hosting the GM meetings four times a year, as they still bring value to members.

The April 20 GM meeting will be hosted at Pinstripes. It's an engaging topic - CAMBRA for Geriatric population presented by Dr. Timothy Verceles. I hope to meet many of you there and test out our new trial venue this year. The September GM will be hosted jointly with Mid-peninsula Dental Society at the Hiller Aviation Museum. Finally a big step forward by CDA was to file a lawsuit against Delta dental in light of recent fee decrease for specialists and network participation updates.



CAMBRA, Caries management by risk assessment, for the Geriatric Population. How can you best help your patients keep their teeth for a lifetime!



By Tim Verceles DDS MAGD

When I graduated from the UCSF School of Dentistry in 1993, dental caries management was taught very differently than it is today. My cariology teacher was Dr. Ernest Newbrun and he was world famous for advocating for the use of fluorides to prevent caries. Today, thirty years later, dental caries has not been eradicated. Because dental caries is still prevalent, we as dental professionals have job security, yet we have a fantastic opportunity to help our patients keep their teeth decay free and functional for as long as they need them.

It is not enough to just tell our patients to brush and floss and avoid sugary drinks and foods. We need to be detectives and learn why this patient is getting cavities in the first place. If we can figure that out, we have a chance to get the patient's mouth healthy and decay free.

What we know today is that dental caries occurs due to many factors. There are no simple solutions to preventing dental caries. As oral physicians, we need to understand our role in preventing and treating dental caries as we care for the whole patient. We need to know the patient's systemic conditions, the medications they are taking, understand their diet and lifestyle choices, thoroughly examine and treatment plan their oral diseases and then come up with a recall maintenance plan that helps them keep totally well.

Dental caries occurs because our patients, may have a lack of saliva, make poor dietary choices, may have an imbalance in their biofilm (oral bacteria), suffer from a genetic disorder, and finally because they have an acidic oral pH. Patients may have one or all five of these conditions occurring concurrently.

The geriatric population is growing and more and more of them are retaining their teeth. Dental professionals need to learn how to safely treat this population and help them stay disease and symptom free. Diet counselling, nutrition advice, preventive dentistry and CAMBRA products are all important measures we can utilize to help our patients prevent dental caries and improve their systemic health as well.

Now more than ever we need to learn the best practices available to us as dental professionals to help our patients stay healthier so they can lead productive and enjoyable lives. This means that we need to not only learn the most current dental information well, but to stay abreast of the newest medical and nutrition information available. Topics on functional medicine and how to eat foods that are healing and better for our systemic health.

On, Thursday, April 20th at 6pm, I am excited to share my experiences with you and what we are teaching the dentists of the future at UOP, Arthur A Dugoni, School of Dentistry, about how to prevent dental caries from destroying our patient's dentitions. I will cover the changing demographics of our aging population, the pathogenesis of dental caries, and Caries Management by Risk Assessment protocols. I will also share some of my more recent cases and how I managed these complicated patients and share with you some practice management pearls.
Hope to see you on April 20th!



HR Steps to Follow During a Dental Practice Transition and Acquisition



Ali Oromchian, Esq.

Dental practice transitions can be complex and often require a significant amount of planning and preparation, regardless of whether you are changing ownership or acquiring a new practice. Ensuring that your human resources are managed effectively during this time is essential for a smooth and successful transition. Below, we will outline the key steps to follow when managing human resources during a dental practice transition. You should also understand how a law firm with attorneys who specialize in this area can provide assistance throughout this process.

Step 1: Assess Your Current Staffing Situation

The first step in managing human resources during a dental practice transition is to assess your current staffing situation. This involves reviewing the qualifications, experience, and performance of all employees, as well as understanding their roles and responsibilities within the practice. Some key factors to consider include:

- Employee performance
- Staffing levels
- Training and development needs
- Employee satisfaction and morale

By understanding the strengths and weaknesses of your existing team, you will be better positioned to make informed decisions about staffing during the transition period. You may need to hire more staff with specialized qualifications to help you provide the quality services your patients deserve.

Step 2: Develop a Transition Plan

Once you have a clear understanding of your current staffing situation, it's time to develop a comprehensive transition plan. This plan should outline the key objectives of the transition, the

roles and responsibilities of all staff members, and any changes to staffing levels or employee roles that may be required.

The transition plan should also include a timeline for implementing any necessary changes and a communication strategy to ensure that all staff members are kept informed and engaged throughout the process. It's crucial to involve your employees in the planning process, as this will help to foster a sense of ownership and commitment to the success of the transition. When you show you want feedback from your employees, they will be more likely to help you streamline the transition process.

Step 3: Implement Training and Development Programs

In order to ensure a smooth transition, it's essential to provide your employees with the necessary training and development opportunities to help them adapt to any new roles, responsibilities, or processes that may be introduced as a result of the transition.

This may involve offering in-house training sessions, enrolling staff members in external courses or workshops, or providing access to online learning resources. By investing in the professional development of your employees, you can help to maintain high levels of performance and job satisfaction during the transition period.

Step 4: Monitor and Evaluate Performance

During the dental practice transition, it's important to regularly monitor and evaluate the performance of your employees. This will enable you to identify any areas in which additional support, training, or resources may be required, while also highlighting the successes and achievements of your team.

Regular performance reviews can be an effective way of providing constructive feedback to employees and discussing any concerns or issues that may arise during the transition period. By maintaining open lines of communication and providing timely feedback, you can help to minimize any disruptions or challenges that may arise as a result of the transition.

Step 5: Address Employee Retention and Recruitment

Employee retention and recruitment can be particularly challenging during a dental practice transition. It's important to develop strategies to retain your existing employees while also attracting new talent to support the growth and success of the practice.

Some strategies for employee retention during a transition may include:

- Offering competitive compensation packages
- Providing opportunities for career advancement and professional development
- Fostering a positive work environment and culture

When recruiting new staff members, it's crucial to clearly communicate the objectives and goals of the dental practice transition. You should also go into detail about the potential benefits and opportunities that may be available to new employees.

Step 6: Maintain Compliance with Labor Laws and Regulations

During the dental practice transition, it's essential to maintain compliance with all applicable labor laws and regulations. This includes ensuring that your employment contracts, policies, and procedures are up to date and in line with current legislation.

To achieve this, you should regularly review and update your employment documentation and to seek legal advice when necessary. By maintaining compliance with labor laws and regulations, you can minimize the risk of legal disputes or penalties that could potentially derail the transition process.

Step 7: Foster a Positive Work Environment

A successful dental practice transition relies heavily on the morale and satisfaction of your employees. To ensure a smooth transition, it's critical to foster a positive work environment that supports employee well-being and encourages open communication.

Some strategies for creating a positive work environment during a dental practice transition include:

- Encouraging teamwork and collaboration
- Recognizing and rewarding employee achievements
- Providing regular feedback and support
- Addressing employee concerns or issues in a timely manner

By fostering a positive work environment, you can help to maintain high levels of employee satisfaction and engagement throughout the dental practice transition.

Step 8: Establish Clear Communication Channels

Clear and consistent communication is essential during a dental practice transition. Establishing open communication channels between all employees, management, and any external parties

involved in the transition can help to minimize confusion and ensure that everyone is on the same page.

Some effective communication strategies may include:

- Holding regular staff meetings to discuss progress and address any concerns
- Creating a centralized platform for sharing updates and important information
- Designating a point person to handle employee questions and provide guidance

By maintaining clear and open lines of communication, you can help to alleviate any anxieties and promote a smooth and successful transition.

Step 9: Manage Change Effectively

Change management is an important aspect of any dental practice transition. Effectively managing change involves preparing employees for any new processes, systems, or roles that may be introduced during the transition and providing the necessary support to help them adapt.

Some key components of effective change management include:

- Clearly communicating the reasons for the transition and the benefits it will bring
- Involving employees in the decision-making process
- Providing adequate resources and training to help employees adapt to new systems or procedures

By managing change effectively, you can minimize resistance and promote a more seamless transition.

Step 10: Develop Contingency Plans

Even with thorough planning and preparation, unexpected challenges can arise during a dental practice transition. Dental practice owners and managers should develop contingency plans to address potential issues that may emerge throughout the process.

Some common areas to consider when developing contingency plans include:

- Staffing shortages or unexpected employee departures
- Delays in implementing new systems or processes
- Legal or regulatory hurdles

By proactively addressing potential challenges and developing contingency plans, you can minimize disruptions and ensure a smoother transition.

Step 11: Evaluate the Success of the Transition

Once the dental practice transition is complete, it's essential to evaluate its overall success. This can help to identify any areas for improvement and inform future transitions or organizational changes.

Some key factors to consider when evaluating the success of a dental practice transition include:

- Employee satisfaction and engagement
- The effectiveness of communication and change management strategies
- Compliance with labor laws and regulations
- The overall impact on practice performance and patient satisfaction

By conducting a thorough evaluation of the transition, you can gain valuable insights you can apply in future practice transitions or other organizational changes.

By incorporating these additional steps into your dental practice transition plan, you can further ensure a successful and smooth process for your staff and your practice as a whole.

Contact Dental and Medical Counsel for Help During a Dental Practice Transition

Managing human resources during a dental practice transition can be challenging and complex. By following the steps outlined above, you can help to ensure that your employees are well-prepared and supported throughout the transition process.

However, navigating the legal and regulatory aspects of a dental practice transition can be daunting, and enlisting the help of experienced professionals, such as Dental and Medical Counsel, can provide invaluable guidance and support. With their expertise in dental practice transitions and a comprehensive understanding of labor laws and regulations, Dental and Medical Counsel can help to ensure that your transition is as smooth and successful as possible. [Contact DM Counsel](#) today to learn more about how a professional from our team can provide you with the support you need and deserve.



UCSF Community Clinic

By Cynthia Tong, DDS

We go into health because we care. We saw this with the COVID-19 situation, our colleagues across the different fields sacrificing, innovating, and donating to help in small ways, in monumental ways, within their cities or around the world.

As students, we knew the importance of helping our communities and we had many opportunities at UCSF. Starting as a first year dental student, I enjoyed participating with students of all the UCSF disciplines in off-campus health fairs. As an active member of the student government during my second year, we approved many student club sponsored neighborhood outreach programs. In my 3rd year, I was the first coordinator of the Community Clinic at the UCSF School of Dentistry, (called the Homeless Clinic in the initial years); I got to see how it all started and the people who were integral in making this a reality. The student officers of my 3rd year dental class officers saw a need that was not being addressed in our community, and we were confident that we could start and run a homeless dental clinic. Although it never occurred to me to stop asking, I was surprised by amount of “no’s” and “why do you want to reinvent the wheel?” I encountered in trying to start.

The clinic would not have happened without the support of the UCSF faculty, in particular Dr. William Bird, Dr. Phoenix Sinclair, Dr. John Ino and Dr. Rey Ortiz. My animated discussion with Dr. Bird, the Chair of the Department of Public Health at the time, resulted in the “yes” that finally allowed me move forward to ask for funding from the UCSF student government bodies. Dr. Bird did a lot of work behind the scenes to help us. All of a sudden, tongue depressors, flashlights, gloves and masks appeared in packed boxes for us to pick up from the dispensary for our screening days. The van from the homeless shelter magically appeared with our patients in front of our dental clinic a few days later for their treatment.

Started in 1993, our community clinic was opened once a month on Thursdays, after we screened for patients at the homeless shelter a few days prior. We grabbed quick bites to eat on the way to those screenings. I could always feel the crackle of renewed energy from my fellow classmates who were full of excitement despite having just completed a long day of clinic work as we packed the supplies (and ourselves) into our cars and drove through the mad evening rush hour traffic to the 5th Street homeless shelter. We were ready to find our eight

patients to treat and to offer dental advice to those we could not choose as our patients. Since the clinic was in its infancy, our patient selection was limited to those who can be restored in one visit; more involved treatments such as crowns, oral surgery or dentures were not permitted as we were treating a very fluid population. Dr. Bird allowed us to use the 3rd floor periodontal clinic and had someone help us with the dispensary where we got our instruments, restorative materials, and other necessities for our dentistry.

Dr. Phoenix Sinclair, Dr. John Ino and Dr. Ray Ortiz were my restorative clinical instructors. One of them always said yes to staying late for our Thursday Community Night Clinic, which ran from 6 p.m. to 9 p.m. These incredibly kind and generous individuals worked a full day on the clinic floor then volunteered late into the evening without an adequate dinner break. Between the three of them, they put in some long hours for us.

I was impressed with my 3rd year dental class, as we were never lacking in volunteers for both our screening and treatment days. On those Thursday nights, we were excited to meet the white van from the shelter and guide our eight patients up to the third floor. In the face of our pre-determined material and procedural limitations in a brand new program, I saw some wonderful, creative dentistry, including an amazing all-amalgam crown on an upper molar, which my classmate did without an assistant.

We get older, we see the world change yet stay the same. I saw how my UCSF classmates and professors demonstrated month after month what it means to give and serve to make a difference. I thank them for their generosity. I believe they helped change our world with their care.

I see this spirit continue with our dental associations at the local level, the state level and the national level. The generous support from our local dental societies and the CDA allow us to practice better. The volunteer opportunities they sponsor allow us to widen our reach to help others. Our profession has much to offer to the world and we will continue to evolve and do our part in trying to meet its needs.



Member Specialist Spotlight



Periodontists

SMCDS has **11** member periodontists spread throughout San Mateo County

Mat A. Barkhordar, DDS

562 Ralston Ave
Belmont, CA 94002-2832
(650) 654-1854

Mike Jee, DDS, MS

97 Arch St
Redwood City, CA 94062-1401
(650) 364-9004

Brenda C. Lamb Lewis, DDS, MSD

235 N San Mateo Dr Ste 100
San Mateo, CA 94401-2672
(650) 348-4030

Igor Roitman, DMD, MS

625 Menlo Ave Ste 1
Menlo Park, CA 94025-4743
(650) 327-0625

Joyce Y. Cheng, DDS, MS

625 Menlo Ave Ste 1
Menlo Park, CA 94025-4743
(650) 327-0625

Stephen R. John, DDS

228 De Anza Blvd
San Mateo, CA 94402-3913
(650) 571-1900

F. Ray Moncada, DDS

2400 Westborough Blvd Ste 204
South San Francisco, CA 94080-5413
(650) 588-0288

Mauricio Ronderos, DDS, MS

358 Marine Pkwy Ste 300
Redwood City, CA 94065
(650) 595-5083

Kevin U. Consani, DDS, MS

228 De Anza Blvd
San Mateo, CA 94402-3913
(650) 697-3450

Navid N. Knight, DDS

2400 Westborough Blvd Ste 105B
South San Francisco, CA 94080-5412
(650) 583-9300

Stephen W. Nelson, DDS

235 N San Mateo Dr Ste 200
San Mateo, CA 94401-2672
(650) 348-7464

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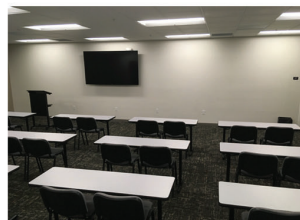
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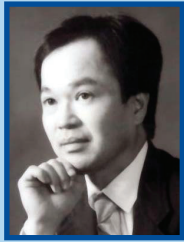
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Retirements



Hiroyuki Arima, DMD – San Mateo General Dentist and SMCDS member of 43 years has retired.



Stacey B. Bui, DDS – San Mateo General Dentist and SMCDS member of 13 years has retired.



New Member Celebration



Welcome!

Join us in celebrating **4** new members from January 2023 to April 2023, contributing to the voice that is SMCDS - **665** strong...

Yeonjae K. Braun, DDS
NYU - 2018 - GP



Nadia A. Brown, DDS
UCSF - 2023 - GP

Tal Rapoport, DMD
Intl. - 2006 - GP, Eastman - 2014 - Periodontics

Kelly Ren, DDS
UCSF - 2020 - GP





SMCDS Business Member Wall of Fame

C-Dental X-Ray Inc.
cdental.com
 Julia Peck
 Operations Manager
 650.207.0478
japeck@cdental.com

2015-2023

Yaeger Dental Supply
yaegerdental.com
 Tim Yaeger, Jr.
 President
 650.888.1402
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2015-2023






Dental & Medical Counsel, PC
dmcounsel.com
 Ali Oromchian, Esq.
 925.999.8200
ao@dmcounsel.com

2016-2023







Patterson Dental
pattersondental.com
 Jason Binsol
 619.399.6367
Jason.Binsol@pattersondental.com

2023

Nobel Biocare
nobelbiocare.com
 Matthew Ochs
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 650.418.4736
matthew.ochs@envistaco.com

2022-2023

BANK OF AMERICA
bankofamerica.com

2020-2023

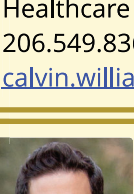

CJ Williams
 Vice President
 Healthcare Financing
 206.549.8369
calvin.williams@bofa.com

Forrest Wiederman
 Vice President
 Dental Financing
 925.278.3343
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Next Level Consultants
nxlevelconsultants.com
 Debra Llana
 925.457.5594
debra@nxlevelconsultants.com

2023

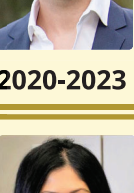

Roam Commercial Realty
roamcommercialrealty.com
 Foad Ahmadi
 650.483.0993
foad@roamcommercialrealty.com

2020-2023






Long Term Care Resources Pacific
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 Michael D. Wong, CLTC, DDS
 650.468.2555
mwong@lrcpacific.com

2021-2023



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 CEO
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christine@swissmonkey.io

2016-2017, 2021-2023

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 Madison Evers
 Compliance Advisor
 424.353.5303
madisone@pcihipaa.com

2021-2023

Rectangle Health
rectanglehealth.com
 Joel Shuster
 Partner Development Manager
 561.341.9690
jshuster@rectanglehealth.com

2020-2023

SMCDS Business Members acknowledged on this Wall of Fame contribute in meaningful ways* through out each year of their membership to our society's fiscal health, industry intelligence, and community presence.

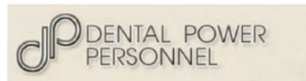
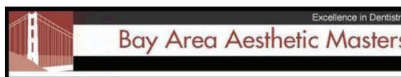
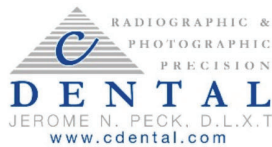
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Sedation and Anesthesia for the Dental Office
MICHAEL LAM, M.D.
Board Certified Physician Anesthesiologist





Debugging the Myths of Practice Transitions/Selling Your Practice Part I

By Michael Njo, DDS

The internet is a wonderful thing. However, everyone should not believe everything on the internet. Nor should you apply everything you read regarding dental practice sales or practice transitions. Practice sales, just like patient care is very personal and should be treated with a customized approach. As with most things, a thoughtful, discerning look at proceeding with something for the first time, something as important as selling/transitioning out of practice should be well thought out, well planned, and well executed!

After my injury, I had the honor to work for the Pride Institute in their transition's department led by Hy Smith, MBA. Hy is an icon at the Pride Institute as well as an expert in transitions. Hy is my mentor and my friend. Hy can be attributed to many various methods of transitions over his 40-year tenure. The days of only being able to do the straight sale: Thursday you sold the practice, Monday the new dentist starts, were over. Sometimes this can result in the dental team feeling shocked and hurt, patients surprised, and a possible exodus of patients. Hy's methodologies, of the "solo group practice", "buy in-buy out", "percentage staggered sale", etc. really allowed our legacies to continue intact and his strategies protected the proceeds of the sale from excessive taxation.

Just like with most things in life, you have several options. Generally, practice transitions are no different. Let's start off by defining what a practice transition is. A practice transition is a process in which you will exit from the practice, which sounds basic enough. However, the complexity of the process is where the art form is in an amazing transition. Many start out with the purchase price. How does one formulate the purchase price? Let's back up a bit. Let's start out with what do you want, how do you want to exit? Ideally you should start thinking about it the minute you purchased a practice or even before.

Myth - I can't think about that, it is so far away.

Myth - I have so much debt I need to pay off first. I also want to buy a home.

Most dentists think about this when they want to sell, unfortunately in most instances, they also have been wanting to sell for years but never committed to the process and they have now come to a point that it is now more of an urgency. They are conflicted at the proposition of

selling. Why, this is such a big part of one's life, sometimes your identity. The conflict of the joy of caring for patients and wanting to cut back, makes us pause and kick the can down the road.

Myth - You can't cut back; your practice will suffer.

Myth - Hiring an associate to then buy is a disaster.

Myth - By bringing on an associate, your team will then know you are thinking of retiring and leave.

Believe it or not, you can have your cake and eat it too! The cover of the CDA journal about a decade ago reported that at age 65 only 4% of dentists were able to retire in a financially desirable way. Why is that? We are an industry of one of the highest wage earners.

In this year's articles I will focus on Debugging the Myths of Practice Transitions. We will step by step identify and debug the following myths: Retire timeline myth, Valuation myth, and DSO myth.

So, let's start with when you want to exit dentistry, and how? One of the first questions is are you financially prepared to retire. Please consult a financial advisor to help you obtain that answer. Then from there we develop your timeline. I like to position my clients to be financially prepared to retire much earlier than they would like to stop practicing dentistry, ideally 10 years before. Retirement timeline -

Myth - 65 years old

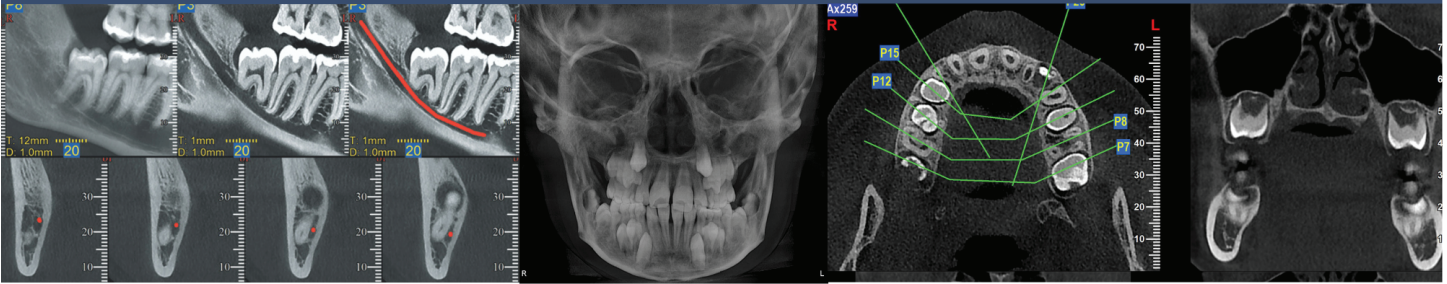
Myth - Until I cannot practice anymore.

Most of us truly enjoy dentistry and our patients. There are avenues you can still practice as long as you wish, enjoy your patients, impart your knowledge to the next generation, continue your legacy and be financially rewarded. Create a timeline that works for you, then dovetail those desires with your successor. When the next article is published the goal would be for you to have your timeline created so now you can begin the process of treatment planning your transition.

Please let me know if you need assistance with the above exercise. I would also be happy to schedule a call.

My institute will also be presenting a seminar at UOP on 7/21st - "Treatment Plan for Your Transition Into and Out of Practice". Please email me at dentalstrategies@gmail.com

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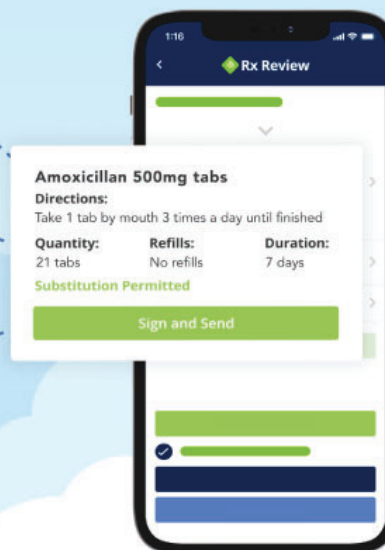
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Sa 4/29

Practice Management

Lead YOUR Dental Practice Despite Chronic Staff Changes

9-10:30am

LIVE Webinar

1.5 CE (20%)



Christine Sison

It's hard to run a business when your team keeps changing. What will the next workforce generation look like? How do you deal with THIS CURRENT workforce generation? This session will discuss how businesses are being impacted now and in the future and what you can do to keep your practice running as effectively and efficiently as possible. Discussion will include changes in the labor market, and do's and don'ts of using off-site team members or companies and emerging compensation models to consider outside of just increasing salary.

Learning Objectives

- Discover the new mindset to recruiting and staffing and practical steps to build a more resilient practice
- Learn ways to integrate new employment trends to better your work environment
- Examine the possibilities for off-site employees; delegation and /or contracting options for outsourcing
- How to get HR compliant in 2023

Th 6/8

Hands-On Workshop

Bulk Fills: Fact, Fiction or Both?

Improve Your Workflow, Satisfaction and Profit

6:30-8pm

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Materials &
Dinner
Included

2.5 CE (Core)



Patrick L. Roetzer, DDS

Workshop Highlights

- Want to learn why injecting composites beats cold or warm packing?
- Do I need a heater to inject composite?
- Can a flowable be a robust top coat that will withstand occlusal loads?
- Are the claims of unlimited depth of cure with dual cure bulk fill flowables valid?
- How can you avoid bubbles in injectables?
- If I can't "soft sculpt" these dual cures during the auto phase, how do I get anatomy in them?
- When is it best to light cure? What does light curing accomplish?
- Does composite function better under tension or compression?
- Do dual cured composite eliminate the pulpal floor pull away?
- Are there good unbiased citations to support the claims of dual cure flowable bulk fills?
- Can injectable bulk fills increase your production and profit?

Attendees will receive:

- 1 Syringe of Bulk EZ Plus by Zest Dental Solutions
- 1 Trifold Mold by Ultradent to test your light and composite as well as your techniques
- 1 Typodont tooth that you injection fill as a standard to take home and try your burs on - can this be your top layer?

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