

Summer 2014
Volume XXII Issue 3

SGVDS Explorer

The Official Publication of the San Gabriel Valley Dental Society



The Decay of Dentist's Credibility and Reputation
Training and Travel Pay

UPCOMING SGVDS EVENTS!

General Meetings

September 16, 2014

'Peer Review: A Member Benefit'

Presented by:
Henrik Hansen, DDS, CDA Council
on Peer Review Chair
4:30-8:45PM, 3 CEU
Almanson Court, Alhambra

October 21, 2014

'A New Approach to Bulk Fill Composite Restorations'

Presented by:
David Hornbrook, DDS, FAACD
4:30-8:45PM, 3 CEU
Almanson Court, Alhambra

November 18, 2014

'How to do Endo: Knowing the Three Essential Skills'

Presented by:
John West, DDS, MSD
4:30-8:45PM, 3 CEU
Almanson Court, Alhambra

CPR Renewal Courses

Wednesday, September 3, 2014

Wed., October 1, 2014

Wed., November 5, 2014

5:30-8:30, 4 CEU

Society Office

CDA CARES

VOLUNTEERS NEEDED!



Save The Date

Pomona November 21-22, 2014

This is a great opportunity to provide dental health care services to those with limited or no access to care. Bring your staff and sign up to volunteer alongside your colleagues.

We need community volunteers to assist with various duties (service club members, church members, family, friends, and co-workers)

Registration is open at

www.cdafoundation.org/cdacares

Save the Date

New Dentist Committee Presents

'HR Issues'

Thursday, October 16, 2014

6:00 pm Almanson Court



CDA Presents: September 4-6, 2014 • San Francisco, CA

CONTENTS

Upcoming Events	2
President's Message	4
SGVDS 2014 Officers & Directors	4
Message from the Executive Director and Editor	5
Spotlight on Member in Figi	6
CDA Cares	7
Training and Travel	11
Give Kids A Smile 2014	
SGVDS New Member Social	12
Peer Review Dinner Meeting	13
Meet & Greet '38 Degree's	14
Record Retention – Don't Toss That File Quite Yet	16
New Members	19
What dentists need to know about ERGONOMICS	21
Dentists who recruit a new CDA member, can get \$200	22
Calendar	BC



SGVDS Explorer

The Official Publication of the San Gabriel Valley Dental Society

MISSION STATEMENT

The San Gabriel Valley Dental Society is dedicated to the promotion and support of our member dentists in their pursuit of providing excellent dental care to the public.

Editor: Sunjay Lad, DDS

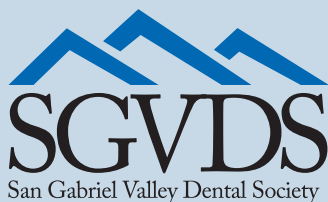
Managing Editor: Lee Adishian, RDH
Executive Director

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PRESIDENT'S MESSAGE



DONNA KLAUSER, DDS, DABP

SGVDS wishes everyone a wonderful summer and we're revving up for a great fall with interesting Continuation Education, raffle prizes, and Meet and Greets!

CDA's Legislative updates are as follows:

CDA's sponsored bill, AB 1962 (Skinner-Medical Loss Ratio for Dental Plans) was passed in the Senate Health Committee with 7-1 vote with minor technical amendments.

CDA will continue to follow AB 1962 and update us on implementation dates.

Dental Board of California has sponsored SB 1416 (Block-Licensure Fee Increase). The DBC has sponsored this bill to close a deficit even with the recent increase to \$450 which will take into effect July 1, 2014. The DBC is seeking to increase the dental licensure fees to \$525 effective January 1, 2015. The DBC has not recommended an increase in fees since 1998. The DBC acknowledges that the DBC needs to be adequately funded to ensure proper oversight and patient safety, and the bill passed on an 8-1 vote. CDA has not taken a position on SB 1416 and CDA will continue to advocate that any fee increase beyond the immediate need must be based on a sound and thorough analysis of the board's expenses and structure.

California's Legislature approved the 2014-15 state budget recently. The budget does forgive the retroactive "clawback" application of last year's 10-percent cut from dental services. The Legislature has recommended the evaluation of the Denti-Cal program and CDA will be an active participant in that process.

MICRA Update: MICRA (Medical Injury Compensation Reform Act), which is designed

to raise the cap from \$250,000 to \$1.1 million, will be a ballot measure in the November elections. CDA and its coalition partners (physicians, hospitals, community clinics, business groups, the California Teachers Association, civil liberties groups, labor groups and local governments) are aggressively working to ensure that the public knows that this measure is to benefit trial lawyers from frivolous lawsuits. CDA cites a study from a former legislative analyst that MICRA cap increase could increase health care costs across all sectors by \$9.9 billion per year- or roughly \$ 1000 for an average family of four.

CDA and its coalition partners are committed to a statewide campaign, Stop Higher Health Care Costs, which will educate voters on why it is important to defeat MICRA in the November elections.

CDA Cares Pomona: Dentists and dental professionals are needed for the CDA Cares Pomona dental clinic on November 21-22 at the Pomona Fairgrounds in Pomona. This is a great opportunity to provide dental health care services to those with limited or no access to care. Our own Scott Adishian, DDS, is chairing the event for CDA and he's asked us all to either volunteer or donate to this great cause.

Please register at <http://www.cdafoundation.org/cda-cares/pomona>.

See you in the Fall!

Donna Klauser, DDS, DABP, President

CDA President-Elect visits SGVDS Board of Directors

President, Dr. Donna Klauser and CDA President-Elect, Dr. Walt Weber



SGVDS 2014 Officers and Directors

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2014 STANDING COMMITTEE CHAIRS

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MEMBERSHIP
MUTUAL OFFICE
PEER REVIEW
WEBSITE/MEDIA RELATIONS
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Amy Tran, DDS
Robert Shimasaki, DDS

AD HOC COMMITTEES - CHAIRS

ASSETS MANAGEMENT
(PRESIDENT, P. PRES, PRES-ELECT & TREASURER)

CDA Delegates- New Terms (3-year term)

Craig Cheung, DDS
Patricia Donnelly, DDS
Scott Adishian, DDS

Continuing Terms

Donna Arase, DDS
Paula Elmi, DMD
Donna Klauser, DDS, DABP
R. Jerry Smith
Amy Tran, DDS

Alternate Delegates

Emad Ammar, DDS
Tony Crivello, DMD, MS, FRCD
Andy Kau, DDS
Irvin Kaw, DMD
John Khalaf, DDS
Sunjay Lad, DDS
Arminda Robles, DDS
Ashish Vashi, DDS

Message from the Executive Director



Lee Adishian

Summertime



Summertime, summertime, sum sum summertime... although that oldie but goodie song from the 'Jamies' is a little bit before 'my time', it does remind me that summer is officially here! The lyrics say, 'no time to work, just time to play! How I wish that were true, however I do hope your summer affords you a break in your routine and time away from the demands of your practice.

Summer at SGVDS tends to slow down a bit in terms of prepping for programs and Board and committee meetings, which then allows Martha and I time to turn our attention to other details of ensuring that the Society office is running smoothly. Many of you have returned your survey, and I appreciate your timely response. We do want to hear from you, please take a few moments to give us your feedback. You also received a form to express interest in serving on the SGVDS Board in

the mail. Let us know your intention to serve, we welcome and need capable leaders to ensure that SGVDS remains strong.

Our Program Committee is putting the finishing touches on the 2015 speaker lineup. It remains true that one of the biggest benefits SGVDS offers is a vibrant continuing education program. Program Season Passes will be available in the fall, and offer our members a nice price break.

You may have heard murmurings about a new website on the horizon. We are in the final stages of working out the kinks before our big debut! We anticipate an early fall launch, and will keep you updated as to when we go 'live'.

As always, we are here to assist you in any way we can at the Society office.

Enjoy these summer months!

Recharge this Summer!

Message from the Editor



Sunjay Lad, DDS

With summer in full swing, I hope you have all been enjoying the warm weather and time with family & friends. For some of us, the summer is the busiest time for our practices. With kids out from school and many of our patients taking time off from work, some of us may have our busiest months in the middle of the year. And for some of us, summer is a time to give ourselves a break from CE courses and our typical monthly obligations, and spend some time away from our practices doing the other things we enjoy outside of dentistry.

Whether your summer is one that will be busy at our practice, outside your practice, or both, I hope this summer will give you the time to focus on those things that are important to you. The second half of the year will be a busy one for SGVDS. As highlighted in our last issue, CDA Cares will be held in Pomona from November 21-22. Many of our members have already made the commitment to serving

our community at the exciting and rewarding opportunity, and I hope that many more of you will also join in this unique opportunity to "give back." Our new SGVDS website will also launch this Fall. Our website committee has been hard at work, developing a new start-of-the-art website that will allow our members better access to activities and opportunities provided by SGVDS, and will also make it easier for new patients to find SGVDS member dentists.

So enjoy the summer and recharge for the second half of the year!

Spotlight on Member

Volunteer Dentistry in Fiji

Gregory J. Moegling, D.D.S.



Gregory J. Moegling, D.D.S.

Twenty years ago, I traveled with a group of friends to surf a challenging reef break off the Island of Tavarua in Fiji. I must admit, the island villagers left a far greater impression on me than my surfing left on them. To a one, they were quick with a smile, warm and welcoming to family, community, and strangers. So when a friend called to tell me there was a volunteer dentistry group traveling to Fiji and might I be interested, the answer was an immediate Yes!

This group formed The Fiji Dental and Medical Foundation (FDMF) to serve the people of the Mamanuca Island Chain, a volcanic archipelago off the west coast of Nadi that consists of twenty islands, a handful of which are populated with approximately 1500 villagers, many of which survive by servicing the tourist trade. However, few general tourism dollars find their way to back to these villagers or to health services. The mission of FDMF is to promote dental and medical health in this area through prevention, education and restoration, and to serve as a model for small scale volunteer dentistry.

The inaugural clinic took place in February 2013. An oral surgeon, three general dentists, three hygienists and a handful of support staff traveled with borrowed dental equipment and suitcases full of supplies to the Island of Malolo. We zip tied together a few cinder blocks to secure half a dozen beach chairs and taught our local volunteers the fine art of sterilization. We set to work assessing needs, performing extractions to deal with

pain and infection, and giving the villagers their first exposure to proper oral hygiene. In four days, we treated 400 patients and were amply rewarded with grateful smiles and a memorable and tasty feast prepared by the women of the village.

This groundwork, along with, more planning, and three MDs who joined our group enabled us to expand our services during the second clinic, in February 2014. The medical team screened for hypertension, diabetes and general health assessments, while the dental team added fluoride treatments on school-aged children, simple restorations, and even some flippers to restore the "Fijian Smiles." On this trip, we treated 600 villagers from the surrounding islands.

FDMF now has 501c3 status, which allowed us to raise enough funds to purchase our own dental units. However, FDMF volunteers will continue to pay their own way as well as hustle needed supplies. With a little more help, we hope to become self-sustaining and continue the good work for many years into the future. If you would like to hear more about the Fiji Dental and Medical Foundation contact me at gmoegling@me.com or visit fijidentalmedical.com (there is a great video of our clinic on the donation page).

Take my advice: volunteer. No one will mistake you for Mother Teresa, but the smile on the faces of those you help is exceeded only by your own, and that's a good feeling.





Since 2012, CDA Cares no cost dental clinics have provided \$7.5 million in care to Californians who are greatly in need. See how you can get involved at cdfoundation.org/cdacares.

Coming to the
Pomona Fairplex
Nov 21-22, 2014



cdfoundation.org/cdacares



TAX CORNER

Using IRAs as Part of Estate Planning

Many people focus on building their Individual Retirement Account (IRA) balance but not many have taken steps to prepare for the estate planning process such as IRA withdrawal at the lowest tax bracket, naming grandchildren as beneficiaries or disclaiming an IRA inheritance or bequests to your favorite charity.

Passing IRA to Children and Grandchildren

Naming children and grandchildren as primary beneficiaries guarantee that the IRA will pass to future generations. IRA beneficiaries must have a minimum annual distribution after they inherit the account. The withdrawal can be lower and income-tax deferred growth as it is based over their own expected life spans.

Disclaiming IRA Inheritance

IRAs are generally left to the intended beneficiaries unless there are benefits to leave them to the trust.

Under IRS Section 2518, a primary beneficiary has a right to disclaim a portion or an entire IRA inheritance. The IRA will then pass gift tax-free to the contingent beneficiary (ies). The disclaimer must be made nine (9) months of the date of death.

Reasons for disclaiming the IRA inheritance:

IRA is left to a surviving spouse who does not need it.

The primary beneficiary wants a tax-free gift to the contingent beneficiary.

A parent receives a large bequest from a relative and wants the assets to be transferred to the next beneficiary in line.

Bequests to Your Favorite Charity

Depending on the size of your estate (for year 2014 the estate tax exemption is \$5,340,000), sometimes, it makes sense to bequest portion of your IRA to your favorite charity.

Upon death, assets such as IRA (not for Roth IRA or other distribution attributable to contributions of after-tax dollar made by the decedent) will be taxed as ordinary income when beneficiaries receive distribution from income in respect of a decedent (IRD). However, should the beneficiary is a tax-exempt entity (e.g. your favorite non-profit university, the American Diabetes Association,...), the funds transfer will be tax free. Also, distribution of IRD to charity will be considered as charitable contributions for estate tax purposes.

Cuong Le, EA, CPA, CGMA is a practitioner located in Santa Monica providing tax, financial advisory and financial due diligence to healthcare professionals (especially dentists), a selected number of nonprofit organizations and the entertainment community.

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2020 Pico Blvd., Suite C
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REQUIRED POSTING

REQUIRED NEW POSTINGS

As of July 1, 2014

Effective July 1, 2014, post the \$9.00-per-hour California minimum wage requirement. You may download the posting at: <http://www.dir.ca.gov/iwc/MW-2014.pdf>.

Effective July 1, 2014, employers are required to provide new Workers' Compensation pre-designation forms to all new hires. You can download this at: https://www.dir.ca.gov/dwc/DWCPropRegs/predesignation_Regulations/Predesignation_regulations.htm.

Effective July 1, 2014, paid family leave to care for a seriously ill "family member" now includes a grandparent, grandchild, sibling or parent-in-law. Employers are required to provide this pamphlet to new hires and when employees take a leave of absence for a covered reason. Once available, you can download the Family Leave Pamphlet at: http://www.edd.ca.gov/Disability/PFL_Forms_and_Publications.htm.

The Decay of Dentists' Credibility and Reputation

By Marc B. Cooper, DDS, MSD

How one sees the world determines how one acts in the world. The market now sees dentists and dentistry differently than they did in the past; therefore, the market is thinking and acting differently toward dentists and their dentistry. The previous perception of unquestionable credibility and incontestable reputation is now suffering. The once honorable brand that dentists had in place for so many years is eroding. Why?

What are They
Saying
About
You?

There are a couple obvious factors which are contributing to this decline of dentists' credibility and reputation. Certainly insurance companies are major contributors. Insurance companies hold themselves as the interface between the patient and the dentist, their mission being to protect the patient against duplicitous or fraudulent behavior. Patients have been enculturated into having dental insurance. So inherently, insurance (companies) puts the dentist under suspicion. "If insurance doesn't pay for it, the dentist is trying to rip me off."

Another factor certainly is the Internet which provides disintermediation and transparency. Patients can easily find out about the dentist, their office and any procedure that has been proposed. Patients now are much smarter at evaluating their dental needs. Wikipedia, Websites, Yelp, Google, Facebook, Angie's List, are but a few of the platforms, and their reviews influence prospective patients in their decision making. Reputation and credibility can be impacted with only a few bad reviews.

But there is another factor, more insidious and more damaging to dentists and their credibility and reputation. Commoditization. Dentists fighting for market share have commoditized dentistry. Dentists are now competing on price. Dentists post fees for exams, X-rays, implants and crowns in newspaper ads, on the Internet, and in mailers, hoping price will generate new patients in their practice. Once you market your work based on price, you convert dentistry from a service to a commodity.

A commodity is a thing, an object. Washer, dryer, car, shower curtain, kitchen sink, crown, implant. It really doesn't matter, it's a thing. As with any commodity, dentists now have rendered dentistry as widely available by any dentist and interchangeable with any other dentist. I can buy the same washer/dryer at Sears, Best Buy, Lowes or Home Depot. I can get the same crown at Dr. Mark's or Dr. Judy's.

Price is a major factor in determining any commodity purchase. An LG 46 inch flat screen TV is the same wherever I buy it, so decisions are based on price. Furthermore, quality is assumed equal in a commodity. In a commodity context, an LG flat screen has the same quality wherever you buy it. Doesn't it follow that a crown has the same quality no matter who delivers it?

The relationship people have with a commodity provider is very different than what they have with a service provider. When people buy on price, they automatically become a consumer and the mind-set of a consumer is very different than that of a patient.

Usually, the relationship with a commodity provider is distrust or cautiousness. So rather than a 'patient' showing up in the office, a consumer walks in and along with a consumer mind-set.

Lastly, the equity markets are noticing that dentistry has become commoditized and capitalists are beginning to see dentistry as a 'retail' industry. Retail businesses are scalable and duplicable and this is a major contributor in driving the consolidation of dental practices and generating the growth large managed group practices.

Conclusion:

Dental insurance is here to stay and increasing its market share. The Internet is not going away and its power is continuing to expand. And with managed group practices making up almost 20% of the delivery system, many competing on price, it will be impossible for dentists to reconstitute their reputation and credibility as it was before. The growing view of dentists based on price and dentistry as a commodity has directly and powerfully impacted their reputation and credibility.

There are solutions to this dilemma, but they can't be provided by solo private practice. One has to consider building the Mayo Clinic, Cleveland Clinic or MD Anderson of dentistry that promotes the highest standards of care with measured and reportable results. But this solution is the topic for another article.

Dr. Marc Cooper
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Training and Travel Pay



We receive lots of questions on the HR Hotline about training and travel pay. Here is a Q&A summary of the most commonly asked questions!

Training Time

Q - A dental hygienist must take continuing education courses to keep her certification.

Must the employer be required to pay for the cost of the course and/or pay the employee for the time they spend in the class?

A - **No. As long as the course is required to maintain their certification, this is non compensable time.**

Q - A dentist takes his entire office to a dental convention in Las Vegas. Costs involved include: travel expenses, hotel expenses, meal expenses, and the employees' time. For which expenses is the dentist required to compensate his staff?

A - **If the trip is completely voluntary the dentist is not required to pay for any of the time. If the trip is mandatory, the dentist needs to pay for all expenses the employee incurs (flight, hotel, registration, etc.).**

The dentist does not need to pay for expenses that the employee normally incurs if they did not go on the trip. For example, meals do not have to be paid because an employee would normally be responsible for their own meals. But, if you require your employees to attend an after training dinner or team meeting, the dentist does need to pay for the event and the employee must be paid for the hours they are required to be at the dinner or meeting.

Q - A dentist requires his/her staff to take a CE course – does he/she have to pay for this course and for the employees time spent in the course and the time it takes to get to the course?

A - **Yes**

Q - Can a different rate of pay be given for training time vs. regular office/work time?

A - **Yes, as long as it complies with CA Labor Laws; it must be at least minimum wage (or more), is established in advance and documented.**

Keep in mind that attendance at employee meetings, employer-sponsored training programs, lectures, work courses, or meetings is not voluntary if it is required by the employer or if the employee is led to believe that their non-attendance would adversely affect their current working conditions or continued employment.

Travel Time

Q - I have two dental offices on opposite sides of town. I have a few employees who travel between the two offices, how do I pay them for their travel time from their home or from one office to another?

A - **Time spent in home-to-work travel is not considered hours worked and does not have to be paid, even if the travel occurs in an employer provided vehicle. With the exception of travel from home to work and back, most travel time is considered work time. If you are sending an employee to work in another office that is farther than their normal commute or you ask them to travel between offices during the day, this time must be paid.**

For example, when an employee is required to report to a work site other than the regular site, and goes directly to that site without first going to the regular site, the employer must pay the employee travel time for any time in excess of the employee's normal commute time to and from the regular site.

Q - Wait, are you telling me that if I send an employee to a training in Las Vegas, I have to pay for the time it takes them to go to the airport, fly to Vegas and get to the hotel?

A - **Yes**



However, just like training time, because traveling does not require the employee to employ his/her skills, pay for travel time may be at a rate of pay less than the employee's normal rate of pay – it must be at least minimum wage (or more), must be established in advance and must be documented. Training and travel time is counted as work time, and thus overtime may be due.

If training/travel time and work time exceeds eight hours in a workday, the employee must receive training/travel pay at one and one-half times the weighted average of the regular pay rate and the training/travel time rate combined.

Making sense of it all

We know how confusing all of these laws can be, and that is where we come in. We are CEA, the California Employers Association and we power the SGVDS HR Hotline. CEA is a not-for-profit human resource employers association that serves over 9,000 businesses throughout California. CEA is committed to providing you with the support you need to be a better employer. Questions on this article or any HR issues? Call the SGVDS HR Hotline at 800-399-5331 and we will help you get in compliance.

Give Kids A Smile 2014

Our members volunteer their time and talent to perform oral health screenings to the many children across San Gabriel Valley. We wish to thank our Zone Directors for coordinating this service! In 2014, our volunteers screened over 6000 children.



(L-Rt) Drs: President, Donna Klauser, Community Health Chair Donna Arase, Zone Director 5 Mindy Robles, Zone Director 3 Ted Tanabe and Zone Director 4 Craig Cheung (Missing Zone Director 1 Tony Crivello and Zone Director 2 Amy Tran)

SGVDS New Member Social

We welcomed new members at the Society office for a social on May 28th!



Back row (L to Rt)
Drs: Fernando Verdugo, Jerry Smith, Sunjay Lad, Daniel Margolis, Eric Bui, James Malouf, Monica Munoz and President Donna Klauser
Front row (L to Rt)
Drs: Ashish Vashi, John Yu and Saeed Mokhayeri

PEER REVIEW DINNER MEETING

Behind the scenes are numerous volunteers who serve on the SGVDS Peer Review Committee. When a problem or misunderstanding cannot be resolved between a dentist and a patient, our volunteers follow specific procedures to conduct peer reviews of disputes to help all parties involved reach a fair agreement. Thank you to all the devoted committee members who serve SGVDS!



Under caption

(L-Rt) Back row Drs: Richard Phillips, Sumalee Sangsurasek, Serena Hsu, Matt Neshad, Sony Thomas, Gregory Moegling, Ray Loomis Middle row Drs: Andrew Wong, Regina Wong, Kathleen Moldenhauer, Kent Wilson, Jeffrey McDermaid, Lance Windsor, Chairman Enrique Garcia Front row Drs: Missagh Pezeshkian and George Chakmakjian

*'Peer Review:
A Member Benefit*

**Tuesday, September 16th
4:30 - 8:45**

Alhambra Court, Alhambra

*Thank you to all the
Peer Review Committee Members
for their service to SGVDS!*

Drs: James Angelos, Saeda Basta, George Chakmakjian, Milton Chan, Mary Chien, Guadalupe Corder, Enrique Garcia (Chair), Serena Hsu, Sanford King, Hanfu Lee, Ray Loomis, Jeffrey Mc Dermoid, Gregory Moegling, Kathleen Moldenhauer, Lynn Mutch, Medhat Nashed, Missagh Pezeshkian, Richard Phillips, Younes Safa, Sumalee Sangsurasak, Tina Siu, Sony Thomas, Karla Thompson, Kent Wilson, Trevar Windsor, Andrew Wong, Regina Wong

Meet & Greet

'38 Degree's

June 25, 2014



'Meet & Greet'
Paco's Arcadia
September 10th
7:00 pm

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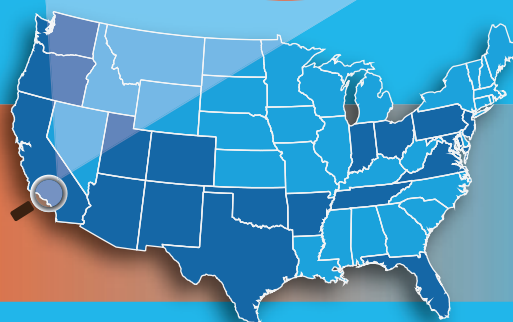
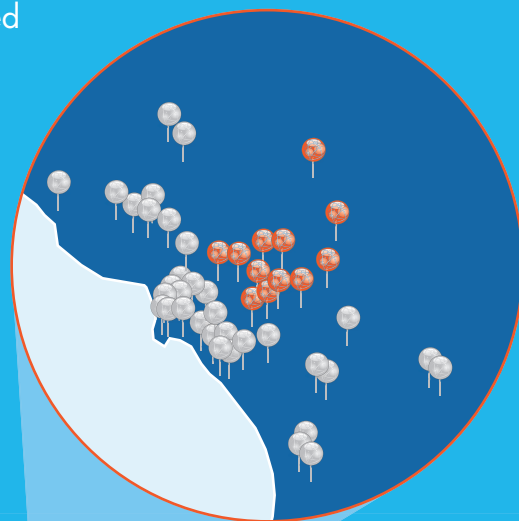
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“Record Retention – Don’t Toss That File Quite Yet”

How long do you really need to keep employee’s personnel files after they leave your practice? Six months? One Year? Or do you throw it in the recycling bin the minute they walk out your door? The answer might surprise you....You want to keep terminated employee files for at least four years, at the minimum. What? The employee doesn’t work there anymore, they are good and gone but I still have to hold on to their file? Yes, you do.

There are several different laws, agencies and government entities that determine how long certain documents must be kept after an employee terminates. For example, the FLSA states you should keep wage information for two years, but the Division of Labor Standards (California’s Labor Commissioner) requires those records be kept for at least three years. What about I9’s? An I9 verifies an individual’s right to work in the US. Surely you don’t need to keep those once they are no longer working for you. You bet you do. I9’s must be retained for three years from hire date or one year after termination, whichever is later.

Four years is usually enough time to retain employment records unless there are

any legal proceedings going on that are attached to that particular employee. If there are, ensure that you hold on to that individual’s personnel file until the case is resolved. Benefit records and OSHA recordkeeping require even longer retention periods.

Once you have retained the records for the correct amount of time, how do you dispose of them? Employers must take reasonable measures to keep confidential information out of the hands of those who are not authorized to see or use it.

FACTA (Fair and Accurate Credit Transaction Act) addresses the destruction of consumer information obtained about current employees, former employees, job applicants, customers and vendors through credit checks, background checks, or other business investigations, but only if the information is in the form of a consumer report or is derived from a consumer report. All information covered by the regulation must be disposed of in a way that reduces the chance it will be stolen by an identity thief.

“Reasonable measures” will differ depending on a company’s size, capabilities, and

the amount of sensitive personal information it generates or obtains. However, even the smallest company should review the way it disposes of such items as reports of background checks for rejected job applicants or credit reports for potential customers. At the very least, businesses should consider shredding such information before throwing it away, particularly if the garbage sits in an accessible area (such as a common trash room) for a period of time before being taken away. It also is important to audit disposal practices to make sure that nothing is overlooked. This includes reviewing not only procedures for destroying paper records, but also the way electronic information is disposed of, either by erasing or otherwise destroying computer disks or actually erasing information from computer hard drives or storage files when it is no longer needed.

If you have questions about record retention or would like to receive a copy of CEA’s Record Retention cheat sheet, you can email us at ceainfo@employers.org or call the SGVDS HR Hotline at 800-399-5331.

Prop 46 MICRA Initiative



The ballot measure that would raise the cap on the Medical Injury Compensation Reform Act (MICRA) has been assigned a number, Proposition 46, for the upcoming November election. CDA and a coalition of health care organizations are working to defeat Prop 46 because it would have devastating effects on California’s health care system, increasing state and local government health care costs by hundreds of millions of dollars annually. Prop 46 raises the cap on MICRA’s noneconomic damages from \$250,000 to \$1.1 million, which would result in an increase in meritless lawsuits filed by attorneys.

The campaign fighting Prop 46 has a website to request campaign materials for distribution in offices or among colleagues. Visit "<http://www.no46.com/>" No on 46 to sign up to receive posters, brochures or buttons that will be mailed to you.

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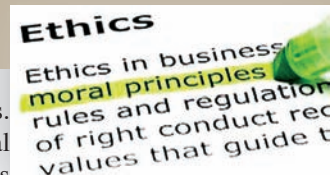
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To refer or not to refer, that is the question

By Ronald V. Surdi, DDS
Member, CDA Judicial Council

In our profession as dentists, we often make difficult decisions regarding the treatment of our patients. One of those decisions is when to refer a patient to a specialist or another provider due to our own clinical limitations. There are many parameters that come into play when making this decision. Situations are as varied as the people we serve. The bottom line is that there are some ethical principles that need to be considered.



Section 9 of the CDA Code of Ethics states, "Whenever the delivery of care to a patient requires diagnostic and therapeutic modalities that are beyond a dentist's scope of services, the dentist has the obligation to inform the patient of all available treatment options and refer the patient to a provider who is qualified to provide consultation or necessary care." Wow, that is a mouthful to digest. The ethical principles of nonmaleficence (do no harm) and beneficence (action that is done for the benefit of others) are part of the decision making process. Yet, competence (the ability to diagnose and treat a patient's needs) and veracity (honesty in dealing with patients and oneself) are equally important.

The Judicial Council recommends that you make a decision with sincerity to all of the ethical principles mentioned above. For instance, a general dentist in the middle of a metropolitan area like Los Angeles may be expected to perform the procedure at the same level and expertise as a specialist, since specialists are readily available in his or her area. However, a general dentist from a rural section of our state might not have those same expectations and must weigh the benefits of referring to a specialist several hours away versus providing more expeditious treatment with less clinical expertise than a specialist. Often this dilemma can be handled by asking the patient what they prefer, as the patient has the right for self-determination. In the end, the treatment of the patient needs to benefit that patient in that particular situation.

Additional resources about consultation and referral of treatment are available at cda.org by clicking the Practice Support tab. For further guidance, consult with a member of your local ethics committee.

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Millie Chung, D.M.D.

GP- Boston U 2008
Interviewing

Erika Gomez, D.D.S.

GP- UCLA March 2014
Interviewing

Ruben Santana, D.M.D.

GP- LLU 2002; UOP 1984
2707 E. Valley Blvd., Ste. 212
West Covina 91792
(626) 964-2700

TRANSFERRED MEMBERS

Gina Assaf, D.D.S.

GP- USC 2011
Transfer from LADS
610 E. Route 66, Glendora
91740
(626) 335-7727

Angela Fang, D.D.S.

GP- UCLA 2011
Transfer from HDDS
10 E. Huntington Dr., Ste. D;
Arcadia 91006
(626) 821-0169

Suanhow Foo, D.D.S.

Endodontist – USC 2010;
Columbia U 2001

Transfer from LADS
3065 S. Hacienda Blvd.
Hacienda Heights 91745
(626) 986-4810

Gary Luu, D.D.S.

GP- USC 2013
Transfer from LADS
1101 E. Garvey Ave., Ste. 106;
Monterey Park 91755
(626) 288-8940

Saeed Mokhayeri, D.D.S.

GP- Indiana U 2010
Transfer from TCDS
420 S. Glendora Ave.,
West Covina 91790
(626) 919-2084

Thai Nguyen, D.D.S.

GP- USC 2003
Transfer from HDS
1845 Hamner Ave., Ste. D
Hacienda Heights, CA 91745
(951) 734-7500

Sue Jean Park, D.D.S.

Anesthesiologist – LLU 2011;
2009
Transfer from TCDS
530 S. Lake Ave., Ste. 534
Pasadena 91101
(562) 201-2221

Peter Pham, D.D.S.

GP- NYU 2011
Transfer from HDS
1215 W West Covina Pkwy
West Covina 91790
(626) 962-8911

Julie Whang, D.D.S.

Orthodontist – UCLA 2010; USC 2003
Transfer from LADS
301 W. Huntington Dr., Ste. 517
Arcadia 91007
(626) 445-3550

NEWLY RETIRED MEMBERS

Paul Senise, DDS

410 S. Glendora Ave., # 200
Glendora, CA 91741

DIRECTORY UPDATES ADDRESS CHANGES

Jui Pan, D.D.S.

227 W. Badillo Street, Ste. 1.; Covina;
(626) 858-6988

Michael Thai, D.D.S.

301 W. Huntington Dr., Ste. 517.;
Arcadia; (626) 445-3550

CDA launches New Member Database Time to Reset Your Password

We are pleased to announce that effective today, CDA has successfully deployed Aptify, the new association management system. This has been a major undertaking for CDA but one that significantly enhances our infrastructure so that we may better serve our members. As you may be aware, as part of deployment, website functionality was temporarily interrupted. It has now been restored. All members are required to create a new cda.org user account, but thankfully, the process is virtually painless. Simply go to <http://cda.org/password> and complete a few fields. Even if you have an existing account, a new one must be created.

CLASSIFIED ADS

Dental Specialist Wanted- A fully equipped 3 chairs, each with x-ray machine office plus one room plumbed, to buy or to rent in a dental building with three established GP offices. Great location on Las Tunas Drive in San Gabriel and a perfect opportunity to start a new specialty practice with turn key operation, Call (626) 319-5713 or email at 3joys888@gmail.com.

Looking for Supplies- for a mission trip to El Salvador, Please call Dr. Singh at (626) 442-6115

Renting/Selling? Do you have operatory space to rent in your office, looking to retire or would like to sell your practice, we would be happy to post that in our quarterly publication.

Need CPR? CPR is taught at the Society office on the first Wednesday of the months (Jan-June & Sept-Nov) at 5:30 PM. This is a re-certification class only. Cost is \$45 members/\$65 non-members. A current textbook is mandatory, and may be purchased for \$12 at the time of the class.

Change of address and/or email? Keep your office and email address with the Society office up to date. This will ensure that you receive our communication in a timely manner.



CONTACTS AT YOUR FINGERTIPS

American Dental Association

(800) 621-8099 (Members only)

(312) 440-2500; www.ada.org

California Dental Association

(800) 736-8702 (Operator)

(800) 736-7071 (Voicemail)

www.cdacompass.com

(866) 232-6362 (Practice Support Center)

www.cda.org

CDA Peer Review Dept. (Complaints)

(800) 232-7645

Cal/OSHA Consultation

(800) 963-9424

San Fernando Valley Office

(818) 901-5754

California Poison Control System

The Poison Action Line

(800) 876-4766; www.calpoison.org

CEA Hotline – California Employer Assoc.

Mari Bradford: (800) 399-5331

Consumer Hotlines:

Dept. of Insurance (800)-927-4357;

Insurance Commissioner: (616)-445-5544

(DEA)U.S. Drug Enforcement Administration

Los Angeles Office

(213) 621-6700

www.dea.gov

Dental Board of California

Lic Renewals: ext 2304

Complaints (877) 729-7789; www.dbc.ca.gov/

FNP (Fictitious Name Permits): David x2332

Dept of Public Health

Radiologic Health Section

(916) 322-2073 (Equipment Registration)

EPA – Environmental Protection Agency

(800) 618-8942

NPI-National Provider Identifier

1-(800)-465-3203; www.nnppes.cms.hhs.gov

INSURANCE

(TDIC) (The) Dentists Insurance Company

www.thedentists.com

Sales Reps for SGVDS:

Commercial: (Prof. Liability):

Samson Landeros: (800)-733-0633 ext. 5994

Personal Life & Health Ins:

Jonathan Ingalls (800)733-0633 ext. 5966

CPR: Recertification/4 CE's via SGVDS

Firstlink CPR Suzanne Dean: (714) 357-0428

CPR: 1st time (8 hr) class: (888) 244-9921-Ultimate CPR

X-ray certification + coronal polishing and RDA prep courses: Hacienda/La Puente: (626) 934-2890

ERGONOMICS



Quite frequently employers are reluctant to have ergonomic evaluations done on their employees workstations because they are afraid of the endemic that will follow; every employee will want their workstation evaluated! The employer is afraid of the cost associated with ergonomical evaluations because there are work chairs on the market that cost thousands of dollars (and employees will inevitably want the most expensive one). However, many times the solution is just a matter of adjusting the existing equipment to the body of the worker sitting at the workstation.

What is ergonomics all about? Ergonomics is ensuring that your employees work areas are set up so that they are comfortable, are able to be productive and efficient and it can help promote job satisfaction. Most importantly, proper ergonomics will help reduce the risk of repetitive motion injuries (RMIs), stress and fatigue.

The prevention of repetitive motion injuries in the workplace is regulated in California by Cal/OSHA in Title 8, Code of California Regulations, § 5110. This regulation outlines the employer's responsibility to develop and implement an injury and illness prevention program designed to minimize RMIs. The key elements of the program should include:

- Worksite evaluations for exposures which have caused Repetitive Motion Injuries (RMI)
- Methods to control exposures which have caused RMIs and the
- Training of employees.

Here are a couple of quick tips to check to see if your office is following good ergonomic practices:

- Are feet securely placed on the floor or foot rest to improve sitting stability?
- Is the keyboard placed at seated elbow height to encourage keying with straight wrists and relaxed shoulders?
- Is the top of the monitor placed at or slightly below seated eye level to improve head and neck posture? Is the
- seat back positioned to provide lower back support?
- Are elbows to the side of the torso to reduce reach and stress on the upper back and shoulders?
- Are your wrists supported by a wrist rest to reduce pressure and improve wrist posture?
- Is the copy holder close to the monitor to improve neck posture and reduce eye fatigue?

Ready to go out and buy all new chairs and equipment for your office? Not so fast.....Keep in mind that purchasing new chairs, keyboard trays, monitor risers or other equipment without adjusting the new furniture to the worker's body can be costly because it is counterproductive.

Instead of being fearful of conducting an ergonomics evaluation, here is some good news about what really happens once you evaluate your workforce: Many times the solution is very inexpensive, it may just be a matter of adjusting existing equipment! So don't be afraid, take a stroll around the office and see what little changes you can make that can will a big difference to your employee's ergonomic comfort and office productivity!



Dentists who recruit a new CDA member, can get \$200

Dentists who refer a new member to CDA now can receive a \$100 check from CDA and a \$100 American Express gift card from the ADA.

The \$200 total reward is part of the Member Get a Member campaign, which provides incentives for every CDA dentist who refers a new member to the tripartite membership (for a total of \$1,000 maximum per referring member).

The combined campaign lasts through Sept. 30, after which time members will still receive \$100 from CDA.

A growing ADA and CDA means greater recognition for the dental profession, more resources and support for members and a stronger voice in the policy arena in Washington D.C. and Sacramento. The incentive program is a result of CDA leadership reaching out to members for input on the program.

To receive credit for a referral, an applicant must add the name of the member who referred them to membership on a CDA membership application. The referring member may also enter the name of the dentist they referred on the recruiter's form at ada.org/MGAM. Once the referred member pays their dues, the referral incentives are mailed to the referring dentist.

There are many advantages to being a part of organized dentistry, but here are a few key benefits:

- Legislative advocacy;
- CDA Presents continuing education – free admission for the San Francisco and Anaheim meetings;
- TDIC insurance – member-only access and risk management hotline;
- Practice support services – cda.org/compass; and
- CDA publications.

Here are some tips on recruiting a new member:

Seek any colleague who is not currently a tripartite member.

Share the benefits and services of the ADA, CDA and local dental societies.

Ask a colleague to include your name on the membership application or, better yet, give them an application with your name on it. Applications are available online at cda.org/mgm.

To find out if a dentist is a current tripartite member, visit cda.org under "Find a CDA Dentist." In addition, updated nonmember lists are available through local component offices.

For more information on Member Get a Member, visit cda.org/mgm.

Bring in a new member, get \$200.



Refer a new member to CDA and receive double the reward, a \$100 check from CDA and a \$100 American Express gift card from the ADA for every referral. Simply share with your peers why you love being part of the 25,000 dentists who are working to make the profession stronger.

For details visit cda.org/mgm

Dr. Rockwell referred a new CDA member.

ADA campaign ends September 30. The total awards possible per calendar year are: \$500 from CDA, and \$500 in gift cards from the ADA. Members may decline the gift card and the ADA will contribute \$100 to the ADA Foundation.

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SGVDS 2014 CALENDAR

JULY 2014

Thurs.-Sat., 17-19 **ADA New Dentist Conference**
Kansas City, MO

AUGUST 2014 NO C.E. PROGRAM THIS MONTH

SEPTEMBER 2014

Mon., 1 Labor Day Holiday
SGVDS office closed

Wed., 3 CPR Certification, SGVDS office
5:30-9:30 p.m.

Thurs.-Sat., 4-6 **CDA Presents: The Art and Science of Dentistry**
All day
San Francisco, CA

Wed., 10 **'Meet & Greet'**
Paco's Arcadia
7:00 p.m.
Arcadia

Tues., 16 **"Peer Review: Member Benefit"**
4:30-8:45 p.m.
Henrik Hansen, CDA PR
Chair Council
Almanson Court, Alhambra
GKAS Presentations

OCTOBER 2014

Wed., 1 CPR Certification, SGVDS office
5:30-9:30 p.m.

Thurs.-Sun., 9-12 **ADA Annual Sessions**
San Antonio, Texas

Thurs., 16 **New Dentist Committee Presents 'HR Issues'**
Mari Bradford, CEA
6:00 p.m.
Almanson Court, Alhambra

Tues., 21 **New Approach to Bulk Fill Posterior Composite Restorations**
4:30-8:45 p.m.
David Hornbrook, DDS, FAACD
Almanson Court, Alhambra



CDA Cares Pomona

How Can You Help? WE NEED YOU!

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at the Pomona Fairplex