

### Inside this issue:

HR Hot Topics	3
The P Files	3
Master Calendar	3
The Year GKAS Got Its Mojo Back	5
President's Message	8
Membership Minute	10
We Are In The Money	10
The 16th District Trustee Report	12
Executive Director's Notes	14
Trust is the Foundation for Accepting Care	14
SCDA Member Benefits Group	15
Beauty and Brokenness	16
Piedmont Latest	18
Update on Recent Leadership Program	20
DAD	20
Classifieds	21

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### What To Expect At The 2012 SCDA Annual Session

By Heather Barker

By now you have received your registration materials for the SCDA annual convention this spring and hopefully are making your plans to attend. As you look through the mailing brochure or the website, you will see many aspects of the meeting are similar to previous years. We are back at Kingston Plantation (May 3-6) for a long weekend with plenty of opportunities for continuing education and social activities. However, there also many new features throughout this meeting.

For those of you traveling with your families, be sure to check out all the children's activities offered by the hotel. A link is provided on our website that will allow all the scheduled events to be viewed. Please note, you must register through the hotel for your child to participate and some events require a small fee.

Thursday afternoon (4:30-6:00 pm), we will have our Welcome Reception with the exhibitors. Be sure to stop in to browse at all the vendors featured at this meeting, as well as join in fellowship with all members of the dental community. Unlike previous years, the convention committee has chosen to leave Thursday evening as an open night. Please take this opportunity to spend quality time with your family, staff, and/or classmates from dental school in a small setting rather than with a large group.

Friday is host to a variety of new events on the agenda. We'll start with a 5K Run/Walk. This special sporting event starts at 7:00 am (check-in will begin at 6:30 am). Participants will enjoy a walk or run on the beach in front of Kingston Plantation. The event is fun for all ages, so sign up your entire family and/or office staff! Refreshments, t-shirts, and prizes are included in the registration fee (\$15 per person and all proceeds will be donated to the DAD Project). Another activity on Day Two will be the golf tournament. Though not a new item to the schedule, it is on a different day. This year's event will be at The Dunes Club and begins at 1:00 pm. All attendees are invited to the Exhibit Hall for an Ice Cream Break from 2:30-3:30 pm. Our final event for the day is the Palmetto Pavilion Tailgate Party (6:00-10:00 pm). There will be dinner, an awards ceremony to recognize our athletes from earlier in the day, and live music provided by the band Back9.



Back 9

Another change you will see on the schedule this year is that Saturday will be a full day of continuing education. Many of you responded to the strategic planning surveys that your work schedule restricted attendance at our annual session during the week and there were not enough quality courses on Saturday. Attendees can choose between five different speakers on Saturday morning. These include: Dr. Doyle Williams and Ms. Rebekah Steen (Update on the SC Healthy Connections Medicaid Dental Program and the Importance of Prenatal Care in Birth Outcomes), Dr. Charlie Hook (Infectious Control and the OSHA Update for the Dental Office), Dr. Paul Eleazer (Microbe Wars: Who is Winning the Battle and Who Will Win the War), Dr. Wally Renee (Hands-On E4D CAD/CAM Seminar), and Dr. Rob Ritter (Clinical Success from A-Z, Adhesives to Zirconium). Dr. Ritter will also speak on Saturday afternoon. Later in the day (4:30-7:30 pm), please join us for what will be our premier social event. We will celebrate the 137th running of the Kentucky Derby with our own red carpet-style Derby party. We will gather at Thoroughbreds Chophouse and Seafood Grill for what is often heralded as the greatest two minutes in sports. Televisions will provide both pre-race and race coverage from Churchill Downs. Awards will be given for several categories, including Best Dressed (Male and Female) and Best Hat (Overall and Most Creative).

Last but certainly not least, please join SCDA Member and Past President, Dr. Larry Ferguson from 8:30-9:00 am on Sunday morning when SCDA members and guests will gather for a short devotional service. Join in this special event as a conclusion to the annual session and before you travel home.

Our committee has worked hard to put together a very strong program with a wide array of continuing education topics and social activities. We look forward to seeing you in Myrtle Beach and please visit our [website](http://www.scda.org) often to see further descriptions and the latest updates.



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## Are You Retiring? Please Notify the SCDA

Call the SCDA office and ask for a retired affidavit so that you can continue to receive all the member benefits you've come to enjoy and expect, but at a quarter of the cost! You can also request a free copy of "Closing a Dental Practice" or click here to go to the SCDA's website to download a copy. Contact Christy Meador at 800-327-2598 or by emailing her at [meadorc@scda.org](mailto:meadorc@scda.org).

## 1 out of every 10 dentists will suffer from alcohol or drug abuse at some time in their lives.

If you or someone you know needs help, contact the SCDA's Dental Assistance and Advocacy Committee: 800.327.2598

## HR Hot Topics!

By Kris Cato

The SCDA is now providing a column in each bulletin from the HR Business and Consulting division of Rogers Townsend & Thomas, which will be devoted to offering constructive ideas regarding your business's human resources issues.

This column will offer information on HR updates and ideas to assist you in handling your human resources matters effectively and efficiently.

In this column we will cover topics pertinent to your business such as rules on payment of wages, overtime, personnel files, employee leaves, dealing with employee complaints, substance abuse and others relevant to operating your business efficiently.

We welcome any questions you may have and, if appropriate, we will publish your question and answer in the next edition of HR Hot Topics. Please send your HR questions or comments to [kris.cato@rtt-law.com](mailto:kris.cato@rtt-law.com).



## The PFiles...

By Kris Cato

### What Should Be Included in an Employee's Personnel File?

Your Practice's personnel files should be able to track everything concerning the employment of an employee, chronologically, from hire up until present day, or termination.

In general, it should include:

- The employee's application and/or resume
- Offer letter, if applicable
- Written notification of the employee's rate of pay, hours of work, identification of the work week and when and how the individual will be paid
- Signed acknowledgement of receipt of handbook
- Orientation checklist
- Status change forms showing hire, changes in job title, rate of pay, and termination
- Performance reviews (if applicable)
- Documentation of disciplinary action and counseling
- Signed anti-harassment/discrimination policy
- Other signed policies as appropriate
- I-9 form
- W-4 form

The purpose of the personnel file is to:

1. Maintain records as required by federal and state laws; and
2. Maintain an accurate and official record of what took place during the employment of any given employee, so that if requested by any federal or state agency, or subpoenaed in a lawsuit, an employer can credibly document that person's employment history.

Medical Information should NOT Be Maintained in the Personnel File But Should Be Maintained Separately.

## Master Calendar

March 2	Coastal District Meeting	Trident Technical College	8 AM
March 2	Central District Meeting	Columbia Conference Center	8 AM
March 2	Pee Dee District Meeting	Florence Country Club	8 AM
March 16	Piedmont District Meeting	Poinsett Club	8 AM
March 23	Rural Incentive Meeting	SCDA Office	9 AM
March 23	SCDA Dental Care Foundation Scholarship Interviews	SCDA Office	12 PM



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## 2012, THE YEAR THAT GKAS GOT ITS MOJO BACK!

By Dr. Phil Smith



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The SCDA and hundreds of volunteers have completed another successful year for our annual "Give Kids A Smile" project. As many of you are aware, the GKAS team has hosted this worthy event for nine years! So on behalf of the children of South Carolina we thank all of you who shared your time and skills to participate in the 2012 GKAS clinics.

We had over 40 sites and offices participate this year. The move from central clinics to include private offices has allowed the outreach to patients to expand. Most of the Technical Colleges offered a broad menu of services including screenings, prophyls, radiographs and sealants. The many private offices involved this year were able to provide restorative treatment that in some cases spanned multi-day visits. Many sites continued total care through the end of March. Calculations for the project are still coming in and donated services are being organized.

There has been an effort to restructure the "Give Kids A Smile" program in South Carolina. As the volunteer base moves away from the central location model, enrollment of private office sites becomes more essential. Granted, the focus base of patients is different from an adult clinic, but the attraction of a major weekend activity has great appeal. There is an energy that accompanies DAD day that still can occur in GKAS days, but the smaller entry into private office may be less appealing to dentists. Thankfully, many offices did step forward and see children.

In reflection, the success of the GKAS project hinges upon the early outreach enrollment for facilities to assist in the program. Initial screening and cleanings will help the SCDA to identify and place patients into offices for care. Dental offices that accept kids are not obliged to keep them in their practice. However, dental homes are appreciated as the ideal form of care.

This year the SCDA established patient connection opportunities through the dental association's web-site and with the help of a private organization, the Benefit Bank. The Benefit Bank is a service that assists eligible citizens to receive Medicaid coverage. With their help, a toll free number was launched to invite families with eligible uninsured children to be directed to GKAS sites. Utilization was lower than hoped due to limited public service announcements for the service. Hopefully, it can be better utilized in 2012.

"Give Kids A Smile" is always looking to improve our effort. New venues will be explored, and different protocols of care will allow for more children to be seen. In the end, our success depends on support from the dental community.

### Thank You Letters From Kids Seen on GKAS Day

February 1, 2011

Dear Dr. Denissenko,

Thank you for helping me to get fewer cavities by sealing my teeth. Yay! Please tell the lady I said thank you for cleaning my teeth, too. I hope I will see you again.

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# President's Message

## 7 Minute Icing and Other Lessons

My Mama always made holidays special, not just the usual Christmas and Easter, but most of the ones on the Hallmark personal calendar. (An excellent marketing strategy by the way, bringing you into a store at least monthly.) I have a special memory from childhood of sitting around an oak kitchen table at about the age of 3-4ish with my little brother attempting to ice a valentine's heart cake with that fluffy pink 7 minute icing. We had, as you would expect, covered everything with that stuff but amazingly actually managed to get some of it on the cake in question. My father had fled the action until his ultimate return with camera in hand memorializing the moment. The picture in my mind always makes me smile.



Dr. Betsy Jabbour

The Sunday before Valentine's Day I tried to create a similar memory for my 4 year old son. To simplify things I chose to do a brownie heart cake from a mix- save time and guarantee good taste, ice it with the traditional pink 7 minute icing. I did check the usual websites for a recipe and the reviews, verified I had all needed items and ingredients and we were ready to roll!

We finished the cake before I had a convention committee meeting. Once home from the meeting I began the icing. There was a lot of stirring involved over the stove. I didn't remember that part. So much that my husband was trading stirring duty with me to rest our arms. 7 minutes doesn't sound like long on paper... It looked good, I thought, but it wasn't thick enough to spread. The recipe notes did say to let it cool, so it cooled through dinner, then in the fridge for 3 hours. When I tried to ice the cake it ran all over the same 75 year old oak table... So much for a

### Valentine's Hallmark memory!

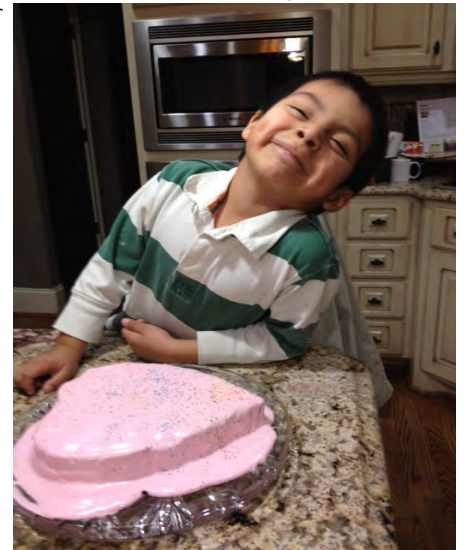
Later that evening I called my mother to tell her we had made a heart cake with the pink fluffy 7 minute icing trying to repeat the memory. The first thing she said was, "You mean the Impossible 7 Minute Icing? I never could get that stuff to work right!" I guess some things do "run" in families.

7 Minute Icing may not be a lesson learned but my parents did teach me many wonderful life lessons that also became memories from my childhood. One of those was volunteering to help others. In my hometown we had floods about every spring. As my father was a grade school principal and his school was a designated evacuation point we would pack up, even though our house was well above the flood plain, and drive to his school as the evacuation orders hit the radio waves. We spent the days making meals and providing shelter for those who had fled the rising waters.

I learned my way around a school cafeteria kitchen at an early age (including where the big cans of chocolate pudding were kept) and to be thankful for the dry warm bed that would be there when we returned home. In most everything my parents did they taught us. We went with them almost everywhere they went. Our birthday parties were sometimes held at their schools even when we were not yet in school. I think those parties were as much for the children in the special ed classes or another class as they were for us. We all had a great time. They taught us to help others with whatever talents we had, even if it was just a birthday cake or cupcake. Now you know my talent is definitely NOT 7 minute icing...

This month you will read about volunteer stories and of opportunities to volunteer through dentistry in the pages of the bulletin. Evaluating volunteer opportunities is equally important. Our DAD project has provided millions of dollars in care to the citizens of our state. It has also given me something else, a great opportunity to meet and talk with dentists from all over South Carolina and other states, too. It's just plain fun to do what you enjoy with others who also enjoy it!

I hope that you not only choose to volunteer this year in any and all capacities you are able, but you also teach along the way. Do I sound like Dr. Rocky? Yeah, I guess, but he is right, much like my parents, when it comes to our charge as doctors. Volunteering is something we all do but it is also something to teach. Something to teach to those around us, our children, and to each other. And if anyone can teach me to make 7 minute icing I'm listening!



"This month you will read about volunteer stories and opportunities to volunteer through dentistry in the pages of the bulletin. Evaluating volunteer opportunities is equally important..."





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## Membership Minute

By Christy J. Meador



**Deadlines:** Membership lapses on March 15, 2012, if you have insurance with the SCDA or ADA (Great West), it will stop. You will also lose your years of service with the ADA. Don't let this happen to you. If you have not received your dues statement, please email [meadorc@scda.org](mailto:meadorc@scda.org). Membership dues were printed on blue paper, easier to spot, and were mailed back in October.

**Late Fees:** Under the SCDA Bylaws, a late fee only applies to the SCDA portion of the tripartite bill and is in the amount of \$100.00 of the original dues amount when dues are received after the 15<sup>th</sup> of February. A past due notice was mailed out to those who paid their dues after the February 15<sup>th</sup> deadline. If payment was mailed in after the deadline without the late fee included, you will receive a notice to pay the \$100 fee. This must be paid to remain a member of the tripartite membership.

**ADA Cards:** Due to some unforeseen events at the ADA, our cards have been on a delay. We will get the cards mailed out as soon as possible. If you have any changes such as: mailing address or district changes, please contact me at the SCDA office 800-327-2598 or by emailing [meadorc@scda.org](mailto:meadorc@scda.org). Cards were printed in the fall by the ADA, so address; district changes might have been done after they were printed.

## We Are In The Money!!

By Dr. Thomas Edmonds, President Elect of the SCDA

Well, just a little, but I digress. Allow me to share with you just one of the many issues your ADA is addressing on your behalf. What if I told you that by the year 2030, only HALF the dentists in this country will belong to the ADA? With our current market share being 70% nationally, you might ask how could this change so drastically? The ADA Council on Membership has data to support trends that show changing practice patterns (ex: corporate dental practices), changing profile of dentists (ex: increase in female dentists), and the changing economics of dentistry (decreased income for many dental practices). I'm not picking on female practitioners or any dentist in a corporate practice or any dentist whose income is decreasing, but these groups are significantly trending more toward non membership. These are just some of the national trends that point to a decrease in membership over the next 18 years, UNLESS something is done about it. I must say that these trends don't quite reflect our South Carolina membership number of 80% market share, but just like the recent recession took a little longer to hit our state, things could be tougher here for our dentists. Our hard work in South Carolina to recruit and retain members in all categories has paid off thus far, and we intend to increase our efforts in the future.

So.....oh, yeah, back to the money. The 2011 ADA House approved \$500,000 to fund a Membership for Growth Program, in which each state could apply for a grant. Thanks to Christy Meador and Phil Latham at the SCDA, your association applied and received \$3,000 for 2012 and we intend to spend it all! How? The plan is

to survey 286 dentists in South Carolina who are not part of our tripartite association (local district, SCDA, ADA). It will be conducted by Dr. Robert Oldendick, a University of South Carolina researcher who analyzed our recent member survey, and hopefully will be sent out in March.

I know you're thinking....what good will that do? Well, we understand that nationally the two major reasons for non-renewal of membership are cost of dues and not seeing the value in being a member. But we want to be specific as to why SC dentists don't belong, both those who have never been members, and those who have at one time in the past. I find that many dentists have little or no understanding of the SCDA and ADA, and what is done on behalf of members. So, once we better understand the reasoning for non-membership, we can fine tune our focus on plans to change this disturbing trend.

Suffice it to say, as an officer of our SCDA, I am AMAZED at the scope of things we are actively involved in, and truly believe that I am getting a huge bang for my bucks. Rest assured, the SCDA and ADA have this issue in the middle of their radar, and plan to continue being proactive in the future. In the meantime, you can be help. How? Look around and see if your local colleagues or dental school classmates are members. They should be listed in our SCDA directory, and if not, give them a call or take them to lunch and find out what keeps them away. Then let us know what they say! Remember, if you aren't part of the solution, you are part of the precipitate (you chemistry majors can explain that to your colleagues!)





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**We look forward to seeing you in April!**

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The American Academy of Oral Medicine designates this activity for 28 continuing education credits.

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## The 16th District Trustee Report

By Dr. Chuck Norman

At the recent ADA annual session, the House of Delegates approved a comprehensive governance study of our Association and it's tripartite, as requested by the Board of Trustees. In advance of the findings that will be presented to the 2012 House of Delegates for consideration, I want to you to know the scope of the study and the possible ramifications for you as members, as well as, the effect it could have on your State and Component organizations.

First, let me provide a little background. As required by the bylaws, a reapportionment of the House of Delegates is scheduled to occur at regular intervals to more accurately reflect the current dentist distribution around the country. That reapportionment was to occur at the close of the 2011 House. However, when the board calculated the new district allocations based on the required formula, there were obvious inequities that needed to be addressed. As a result, the Board offered a plan for 2011 that was fair and suggested a governance study that would address several questions. The House agreed that there should be a governance study and the reapportionment of the House was postponed until after the findings of the study are presented to the House. Some of the questions that must be considered are:

- First, for an organization our size, how much should the overall cost of governance represent as a percentage of the total budget? (Currently we spend more on governance than we budget for whole divisions).
- Second, what is the appropriate size of the House of Delegates to ensure adequate volunteer input into the policies and direction of our organization, and at the same time provide for a fair apportionment of delegates?
- Third, is our current structure of Councils and Commissions the best way to do the work of the association, and if so, are they the right size and composed correctly?
- Fourth, based on the size of our membership, do we have the right number of districts to ensure proper representation, or should we have less or more?
- Fifth, are there clear bylaws responsibilities for the House of Delegates, the Board of Trustees, Councils, and staff?
- Sixth, does the current size of the Board of Trustees allow for effective management of the association?
- Seventh, should we consider eliminating our current Council structure and conduct most of the work of the association through workgroups and special committees with finite timeframes?
- Eight, is the tripartite the most effective structure to deliver membership services, conduct membership recruitment and retention, provide communication from bottom to top and top to bottom, and provide for leadership training?

Your representatives to next year's House of Delegates will have a thorough report to digest and they will be asked to make tough decisions regarding the future of our organization. There will certainly be advantages and disadvantages for each of the recommendations presented, but I can already predict that there will be some basic values that need to be weighed very carefully. Notably, do we aspire to be a staff driven or volunteer driven association, what structure provides the best leadership training for our members, what can we afford, how do we provide for diversity of membership and thought, how can we achieve the ability to be nimble and respond quickly to the changing environment, and how do we ensure that our volunteers have the proper skill sets to be effective leaders.

Since most state associations are organized on the same model as the parent, ADA, then any changes that are recommended by the House will certainly have a dramatic effect on the states. On the positive side, we may be able to operate more efficiently and at a lower cost, but on the negative side, the positives could come at the expense of volunteer input, fair representation, and a connection to the ADA that encourages membership.

It is always possible that we could maintain the status quo and not make any alterations to our current governance, or we may see an entirely new model of organization and responsibility for the ADA. This time next year, we will know for sure.

On a different note, I welcome suggestions for topics that I could address in my future columns. Please send any requests to your editor.

### Send us your story ideas!

Do you have an idea for a story? We'd love to hear it. We're always looking for topics of interest to our members. If you have a suggestion, email Maie Brunson at [brunsonm@scda.org](mailto:brunsonm@scda.org) or call 800-327-2598.



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# Executive Director's Notes



Mr. Phil Latham

## SCDA Office Changes:

If you haven't been by the office recently, there are some changes that have occurred. Our Communications Manager, Jennifer Haworth, is no longer with us and has been replaced with Ms. Maie Brunson. Maie started with the Association just over a year ago and her youth and enthusiasm have been a huge plus for the Association. Maie approached me when the position came open and has accepted the challenge without reservation. She has already recommended several things that will help improve the bulletin communication to our membership. Please join me in congratulating Maie in her new role. I am in the process of hiring a new individual to take Maie's old job and hope to have someone very soon.

Regarding another note of change, Christy and Mark approached me about switching offices a few weeks ago and so the staff has been busy making that switch so next time you drop by Christy will be in one of the front offices and Mark will be in the back corner.

Lastly, materials are out regarding the upcoming SCDA Convention. Please register now and plan to participate. Also, don't forget to volunteer for DAD which will be coming up in August.

"Materials are out regarding the upcoming SCDA Convention. Please register now and plan to participate..."

## Trust is the Foundation for Accepting Care

By Mark T. Murphy, DDS

The way patients approach dentistry is very emotional. They want to feel they are cared for, as a person and a patient. As medical professionals, our approach to dentistry tends to be more clinical and scientific. Sometimes we are more focused on how many microns that marginal adaptation is going to be instead of how comfortable our patients are. While delivering excellent clinical dentistry is critical, emotionally connecting with the patient and building trust is as important because trust is the foundation the patient uses to determine whether or not they are going to accept the care we recommend.

People tend to ask people they trust for advice. As dental health care professionals, isn't that how we want our patients to see us, as trusted advisors? Ideally, after we have completed the clinical examination and reviewed with the patient their oral health status, we want patients to ask "What should I do?" Unfortunately what often happens is that we dentists focus on the procedural aspects of the examination, gather data, and then we come back and **tell** the patient what they should do. Some patients may just go along with the recommendation and accept care. But others will not. Why? Because you did not include them in the diagnostic process and you did not earn their trust. That's why it is important to bring patients along on the journey, to get them involved and interested in the diagnosis. One of the most effective ways to build trust is to visually show patients what's going on in their mouth and then relate it back to them emotionally. For example, use visual aids like intra-oral cameras and show patients the cracked tooth while you ask them how they would **feel** if they lost that tooth. People trust what they **see** and **feel** more than what they hear. So if you show more than tell, you'll begin to build a transition from clinician to trusted advisor.

If recommended treatment is covered by insurance, patients are immediately more willing to accept it. Unfortunately, most patients have been conditioned to believe that the only treatment that is truly necessary is the small portion covered by insurance. Subsequently, when patients require more comprehensive care that is not covered by insurance, like periodontal therapy or an occlusal, or do not have insurance benefits, they are more likely to hesitate.

When patients are engaged in every step of the experience, they feel they are being helped. This makes the financial conversation easier because all that's left is helping the patient choose the payment option that best fits their financial situation. As you did during the clinical examination, involve and engage the patient in the discussion. The best way to do this is to present the patient with all their payment choices, including an option such as CareCredit. Again, using visual aids like a written financial policy or CareCredit's online payment calculator that shows patients their estimated monthly payments can be very effective. When you present all payment options, it shows the patient you have solutions available and are committed to helping them achieve their oral health goals. Then simply ask the question, "Mrs. Jones, which of these payment solutions do you **feel** would be best for you?"

Creating a place where patients feel cared for is just as important as delivering excellent clinical care. It not only builds trust, but establishes the foundation for a strong, long-term relationship. In the most successful practices these two experiences usually go hand-in-hand.



## SCDA Member Benefits Group

By Mark Brown

### How to Make the Financial Conversation Easier

Accepting the CareCredit healthcare credit card as a payment option, along with other payment choices, can make the financial conversation easier. Instead of being limited to cash or the available credit on their consumer credit cards, patients can relax knowing they can:

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- Patient Payment Options Form that details all payment options making it easier for patients to choose the one best for their lifestyle and budget

Call 800-859-9975 or [click here](#) to schedule your free custom Practice Performance Review with your Practice Development Team to compare your practice's performance with other practices in your community. Want to learn more about accepting CareCredit at your practice? CareCredit is exclusively endorsed by the SCDA, so taking the next step is easy. As a member you can join CareCredit as they celebrate their 25<sup>th</sup> Anniversary of serving the dental community and get started for only \$25. Simply call 866-246-9227 or [click here](#).

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## Beauty and Brokenness

By Dr. Jill Colson

It was 9 o'clock on Monday morning--our first day in India. I found myself awake after only 3 hours of "light" sleep over the past 48. After our brief conversation that morning, it sounded like my husband had even less. Our travel plans were altered a bit on the first leg of our trip when the landing gear on our plane would not retract. So after being rerouted and rescheduled, we finally caught up with the rest of our group who had arrived in India the previous day.

The people of this village had been expecting us for quite a while so there was no time to feel sorry for ourselves. The combination of excitement, curiosity, and a large dose of caffeine kept us going and ready to work. We walked into the clinic waiting room to see several hundred faces staring back at us. It was easy to read their expressions of fear, hope, and pain--all covered up in a blanket of gratefulness. We assembled our instruments and began to triage. So this is how it began...

As with many dentists here in South Carolina, dentistry runs deeply in my family. My dad, my brother, my uncle (by marriage) and his dad were all dentists. So what do I do? I become a dentist and if that's not good enough--I marry one too! Back in the early 1980's, my aunt and uncle established a relationship through their church with a Christian mission in Puttur, India. Since that time, my uncle and several members of his church have travelled to Puttur every other year to support their brothers and sisters in Christ and to render medical and dental care. Through this relationship, my aunt and uncle helped build a medical clinic and a boys and girls orphanage. Every time they visited India, a piece of their hearts were left behind. My uncle passed away in 2007.

Last year, my dad asked my husband, Chad, and I if we were interested in going on the India trip in January 2012. We pondered and prayed, then ultimately concluded that yes, we were meant to be a part of the team. It was compelling for us to continue where my uncle had left off. So from that moment, my dad, Chad, and I forged ahead gathering dental supplies and instruments. The planning process was intense: from getting our vaccines to applying for our visas--and most importantly, how were we going to get coffee?!? In case you are wondering, Starbucks Via saved the day. We didn't really know what to expect so we planned for the worst and hoped for the best. I have to admit, about 2 weeks before our departure, I found myself saying, "What have I gotten myself into?!?"

I continued to pose that question many times while in India. But overall, it was an amazing experience. Our instruments and supplies arrived safely and we treated over 220 patients uneventfully. I enjoyed the fellowship and camaraderie with my dad and my husband. I was humbled to tears as I witnessed how each day is a struggle for the people of this village. I was relieved when we were able to successfully treat a very sick, young woman with a severe abscess. I laughed when we questioned the loud noise of an animal trapped in the ceiling above our beds. Was it a rat? Ah-(long pause) no, no, it's not a rat. Is it a squirrel? Sure! Sure, it's a squirrel. Now that's convincing...



*In the field with my translator treating patients. My Dad, Dr. Jay Wonder is on the right*



*With my husband, Dr. Chad Colson, in the waiting room of the clinic*

So why did I go to India? To continue a legacy. To offer my skills to people who don't have a choice in dental care. To be totally out of my comfort zone. To really depend on God and not just pay Him lip-service. To appreciate what I have. To recognize that even the poorest people in the US would be well-off in India. To understand that you can be rich and not have much money. To know that I can treat but God heals.

The brokenness of this small village will remain after we are gone. The reality is that the standard of living has little hope of improving. The brokenness of my heart will remain as well. I saw past that and appreciated the beauty of India and her people. The beauty of a simple life and a pure faith.

*I can't resist a gratuitous plug for the SCDA's Dental Access Days in Columbia, SC on August 16-18th. Volunteer online at [SCDA.org](http://SCDA.org) and be a part of this incredible event. I hope to see you there!*



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## **Piedmont District Latest**

By Dr. Matthew Kormylo

There is little doubt the current recession has taken its toll on South Carolina dental practices. The Piedmont District's board of SCDA thought it might be interesting to share the opinions of a respected dental consultant regarding trends taking place in the neighboring state of Georgia. Marketing and business strategies are diverse among our members but the observations and opinions expressed by Carol Paige are insightful across the board. Ms. Paige is a consultant for whom I have a great deal of respect and who understands the clinical side of dental practice as well as still believing that integrity and ethics are the foundation of a healthy practice. We hope you will find her words encouraging during these challenging times.

Best Regards,  
Matthew Kormylo DMD  
2012 President PDDS

## **Practice Report and Forecast**

By Carol Paige, PRN Consulting, President; Shaul Beckman Paige, Partner

Would it surprise you to read that "a Practice Consultant forecasts a bright and prosperous future for Dentists?" Indeed. However, the rules and style of the game to gain professional satisfaction are starkly different than 30 years ago.

In today's market, success as a private practice dentist is maintained by thoughtful design, not economic momentum and yesterday's business model. If you poll a senior dental school class, the graduating goals of the students radically differ than those of yester year. Women dentists commonly express concerns about balancing career and family life during their reproductive and family-raising years. Many married students graduate with children and upwards of \$200,000 debt. Spouses assert higher expectations that the Dentist-spouse spend time with family outside of office hours. These aspects frequently catapult a young dentist to hire on with a PPO driven dental corporation where, after they gain speed, they generate their six figure commission in relatively little time.

Ten years ago, with careful selection of the right town, office space and kick-off staff members, a dentist could assume the debt load to furnish an office, hang their shingle and launch efforts to grow a fee-for-service patient base. This opportunity is rarely available in today's market place and those venturing into solo practice are quick to procure PPO contracts and set a practice model geared for volume management. The experienced veteran private practice dentist with a mature fee for service practice possesses a financial asset more valuable than any other time in history.

In contrast to prior decades, maintaining a fee for service practice now requires conscious business acumen. Your most costly staff member is anyone under performing in their assigned role. Implementing clinical software to retire the use of paper charts saves 15 hours a week of paid unproductive time. Maintaining sufficient fee-for-service referrals requires each team member to give habitual priority to encourage their preferred patients to refer. Internet optimization and community involvement are as necessary for business fitness as exercise routine is needed for physical fitness. Healthy collection practices and limited in-office payment plan options for long-term patients and Care Credit (or, similar lender) terms for newer patients cultivates a healthy cash flow.

The field of dentistry now offers a greater range of choices for dentists: Public Health, Education, Military Service, Corporate Dentistry, Nursing Home care, PPO high volume, Group Practice Partnerships, Boutique Private Practice. So, what about the future of the traditional solo Doc? Not all of today's students are destined or designed for traditional solo private practice. But, the currently practicing Dentist that couples clinical excellence with contemporary practice management measures will continue to be compensated and enjoy rewarding professional relationships while their efforts bolster an appreciating asset – their practice.

## **A Special Congratulations!**

Wells Fargo unveiled the winners of the 2011 Dental Office Design Competition October 12th during the ADA Annual Session. One of our own South Carolina practices were one of the winners! Congratulations to Pelham Links Family and Cosmetic Dentistry in Simpsonville, SC.

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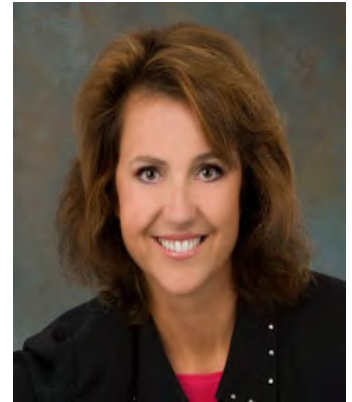
## An Update on Our Recent 2012 Leadership Program

By Mark Brown

2012 marked the second year the SCDA has held a leadership program with this year's event being held on January 20<sup>th</sup>. The SCDA established this program last year as a tool to help member dentists learn more about their association and some of the challenges we face.

This year's leadership program was hosted by Ms. Mary Byers, CAE, who is co-author of *Race for Relevance: Five Radical Changes for Associations*. This book has taken the association world by storm over the course of the past year. She has been consulting numerous associations nationwide since 1998. She discussed the six main pressures associations are being faced with in today's world and the five "radical" changes she and her co-author proposed in the book. Ms. Byers also spoke on the art of questioning and how asking the right questions in the correct manner can help you to achieve many of your goals.

We had 29 attendees, including 4 dental students, who we were pleased joined us. Those in attendance were Drs. Murtuza Ansari, Heather Barker, George Bumgardner, Jack Davis, David Dedmon, Paul Downing, Craig Draffin, Thomas Edmonds, Elizabeth Galloway-Dextraze, Pete Hoffmann, Gabriel Ingraham III, Betsy Jabbour, Kevin James, Carson Kight, Mark Lawhon, Mike McGinnis, Jim Mercer, David Moss, Rocky Napier, Dan Pennella, Gloria Pipkin, Jack Sanders, Ed Wise and Buddy Witherspoon. Ms. Lori Paschall with the SC Dental Assistants Association was also in attendance as well as the 4 above mentioned dental students: Kristin Amram, Jami Cokley, Paul Lambert and Samir Patel.



Mary Byers, CAE

Here's what some of **your colleagues** had to say about this year's event...

*"How **exciting** to be present among a group being groomed to lead our organization into the future. This program truly steered us towards thinking **"outside the box"** when brainstorming our association's future goals. I found the techniques for communication very useful in both my personal relationships as well as professional! Many thanks to the SCDA for the opportunity to participate in such a valuable training program."*

**Carson Kight, DMD**

*"I would like to sincerely thank the SCDA for their leadership training forum they recently provided at the "Ed Venture" facility. I found the information provided by the nationally recognized speaker, Mary Byers, CAE to be **one of the best sources of leadership information I have ever come across**. It was totally professional, fun, energetic and really addressed the core of need our volunteer associations face and deal with on a daily basis."*

**Paul Downing, DMD, FAGD**

*"I **certainly learned information that will help me as I explore residency opportunities in pediatric dentistry during my day at the conference. I plan to share this information and my experience with my classmates and encourage them to attend future events."***

**Paul Lambert III, 3rd Year Dental Student**

Hopefully you can make time to attend next year's program and provide us with your feedback. We will attempt to hold it again towards the latter part of January of 2013, so be sure to go ahead and make a note in your calendars.

## 2012 Dental Access Days



As you know this year's DAD project is going to be held at the South Carolina State Fairgrounds on August 16-18, 2012. Please consider donating your time and talents to help ensure a bright future for good oral health in South Carolina. If you are interested in volunteering for this great project click [here!](#)



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Register today for the **66th Annual Meeting of The American Academy of Oral Medicine**. Full registrants can earn up to 28 CE credits. The "Controversies in Oral Medicine" program will be held April 18-21, 2012, at the Francis Marion Hotel in Charleston, SC. For more information or to register, visit <http://www.aaom.com/events/american-academy-of-oral-medicine-66th-annual-meeting/>, call the office at 425-778-6162 or email Jane Kantor at [jkantor@aaom.com](mailto:jkantor@aaom.com). Look forward to seeing you in Charleston in April!

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**Approximately 1600 SF Dental Office** with 4 operatories, Pan room, lab, consult room, staff lounge, reception and business office. Option to leave cabinetry, digital x-ray heads, some chairs with patient

monitors, dental units, compressor, Star Vacuum System and additional items. Lease rate is negotiable. Available April/May 2012. Greenville SC. Contact Janice Holliday at 864-233-8639 or [janiceholliday@aol.com](mailto:janiceholliday@aol.com).

Greater Greenville General dentistry practice for sale with emphasis on removable prosthetics. Seller sees approximately 30 new patients per month and annual collections are \$330K. There are 3 equipped operatories and 1 more plumbed. Practice 3 years old with lots of room to grow. Seller is relocating. For more information call 678-482-7305, email [info@southeasttransitions.com](mailto:info@southeasttransitions.com) or visit [www.southeasttransitions.com](http://www.southeasttransitions.com).

**Florence** Great all FFS practice for sale! There are 3 operatories-free standing building. The practice collects over \$500,000 annually and only open 3.5 days per week. Doctor is referring out all endo, pedo, and perio, in addition to most oral surgery! Experienced staff will stay on. Selling doctor is retiring. For more information call 678-482-7305, email [info@southeasttransitions.com](mailto:info@southeasttransitions.com) or [www.southeasttransitions.com](http://www.southeasttransitions.com).

### **Equipment For Sale**

**The Opus Duo EC dental laser** incorporates an Erbium laser for hard tissue procedures, such as decay removal (without local anesthesia) and crown lengthening, as well as a CO2 laser ideal for soft tissue procedures. 60% off original price, \$20,000.00. Contact Dr. Gene Grace's office at 843-524-6410 or email [drgrace@islc.net](mailto:drgrace@islc.net).

**Dental Equipment and Services** Are you looking for Dental Equipment to upgrade your practice? Chairs, lights, cabinetry, x-rays, vacuum, compressors, and sterilizers. Thinking about adding that extra exam room? Building your dream office? We can help. For more information give us a call or email us at [info@ideasdental.com](mailto:info@ideasdental.com). 843-697-7567.

- Classified advertising is \$35 on a per issue basis. There is no charge for Help Wanted/Job Wanted (Job Bank) ads for members. The public can place ads for \$35 on a per issue basis. Ads are posted to the SCDA website during the month(s) of publication at no additional charge. Please use **no more** than 50 words.
- All ad copies and cancellations must be received no later than the 20th of the month prior to publication, which will occur on the first of the month, with remittances accompanying the ads.
- Job Bank ads can be kept confidential if so desired. If you are interested in receiving information from or submitting information to the Job Bank, please call the SCDA office.
- If you have registered with us previously and have found work or filled your position, please let us know so that we can take your name out of our files.
- Contact: SCDA Bulletin, ATTN: Maie Brunson, 120 Stonemark Lane, Columbia, SC 29210; call 800-327-2598; fax 803-750-1644; email [brunsonm@scda.org](mailto:brunsonm@scda.org).

## **Other News**

To keep up with other goings on within the dental profession, just follow the links below:

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[Medicaid Bulletins](#)

[SC Board of Dentistry Newsletters](#)