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Show Your Appreciation- Nominate Someone

By Dr. Julia Mikell, SCDA President



After last year, anyone who is still working in the dental field deserves an award for valor. It took courage and determination to face the barrage of challenges that just kept coming at us all year long. Not only were we, and all of our coworkers, facing the risks of this new airborne pathogen, but we also had to face the challenges of supply shortages, new protocols, education of new protocols, and, all along the way, keep up the morale. Dentistry has never been a "safe" or risk-free career choice, but last year put many of our team members to the test. Do you know someone who went above and beyond to help you and your office succeed against these adversities?

Although the SCDA doesn't have bravery awards, it does have a long list of annual awards which give us the opportunity to acknowledge outstanding people in our offices and our dental communities. Would you please take a few minutes to consider nominating a dental hero from your "world." Most of the awards are for SCDA members - current or past. One award is specifically for dental team members, and one, the Special Recognition Award, is open to a dentist or non-dentist.

These awards are not COVID specific, but I think this past year created more than the usual number of opportunities for us to recognize outstanding performances. Did a team member help with new guidelines and education? Was someone innovative and problem solving under difficult circumstances? Was a consistent positive attitude and morale boosting their contribution? Did a colleague become a lifeline for you and others? Is there a colleague who was a whiz at figuring out the EIDL and PPP loan options? Or someone who found leads on the PPE supply chain for your office? Did someone cover your emergencies because you were at high risk for COVID-19?

Do you know someone you want to say thank you to? The deadline is **July 16th**. You must submit the nomination form along with a letter of recommendation and the nominee's CV.

Please [click here](#) to view the Nomination Form. [Click here](#) to see who the past recipients of the awards have been.

Whether your nominee wins an award and gets statewide recognition from your association, or just knows that you cared enough and took the time to nominate them, the recognition of their effort will be significant to them.

Best regards,

Julia Mikell

Remembering Those Who have Passed

Dr. Michael Strong was a resident of Columbia, SC and passed away April 12, 2021. He was an SCDA member for 38 years and also a member of the Central District.

SCDA Annual Session

By Dr. Anna Fuller, SCDA Commercial Chair

"It's been a rough year..." How many times have we said that? More than we can count. Now more than ever we need each other – our colleagues, our friends. At the Annual convention, we have the time to not only learn together, but to come together and regroup. We can share the war stories of COVID-19 – how we found PPE, how we managed staff shortages, how we decided to reopen, and what exactly all of those acronyms mean – PPP, ERTC, EIDL?

Burnout is very real and many of us have felt it this year like never before. Our convention gives us the opportunity to come together and regroup. This is a time to share the highs and the lows with people that understand what we went through – our colleagues, our friends. We can learn together, both in class and through our special events.

We will have the President's Reception – Elegance on the Ashley at the stunning Segra Room Friday evening, sponsored by Henry Schein Dental. This is an event that is not to be missed with incredible hors d'oeuvres and open bar. Don't forget that sunset photo over the Ashley River! This event is sure to be a highlight of your time in Charleston.

Additionally, all four districts will hold their district meetings during the convention. What a great time to catch up with local buddies. These meetings allow us to manage the business of our districts while also cementing those crucial relationships that kept so many of us grounded during the pandemic.

With more special events in the works to keep an eye out for, I'll lastly mention, we have yoga Friday morning, generously sponsored by BlueCross BlueShield of SC. This morning will be a time to recharge both mind and body. The class is appropriate for all experience levels so come as you are. We understand now more than ever the need for self-care. This time will allow you to regroup and restore before a day of learning and networking with colleagues and friends.

Take the time to come to Charleston and enjoy yourself for a few days. Earn your CE. Make those dinner reservations. See your old friends. It's been a long year. You deserve this break.

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Executive Director's Notes

By Phil Latham, SCDA Executive Director

The Department of Health and Human Services (SCDHHS) sent out a Medicaid Bulletin on Thursday, June 3, 2021 addressing two items. In case you did not receive the updated information, SCDA is providing below for your benefit.

Increase to Annual Maximum for Adult Dental Preventative Benefit

Effective for dates of service on and after July 1, 2021, SCDHHS is increasing the adult dental preventive benefit annual maximum to \$1,000 per state fiscal year. Dental services that are subject to the annual maximum limitation include preventive, restorative and dental extractions.

Current Dental Terminology (CDT) Code Usage for Healthy Connections Dental Providers

Effective for dates of service on and after July 1, 2021, SCDHHS is transitioning from Current Procedural Technology (CPT) codes to CDT procedure codes for dental services. As a result of this transition, all dental providers, including oral surgeons, must use CDT procedure codes for reporting services rendered to Healthy Connections Medicaid members. All dental services must be filed on an American Dental Association (ADA) claim form and all dental claims must be filed to DentaQuest, the SCDHHS dental administrative services organization. Dental providers must continue to follow the policies and procedures as defined in the Dental Services Provider Manual.

The transition from CPT procedure codes to CDT procedure codes resulted in several necessary policy updates, which are also effective July 1, 2021. These changes include updates to the benefit limitations and criteria for diagnostic and oral surgery procedure categories and the description of services for the emergency and exceptional medical conditions. The benefit limitations for diagnostic services supersedes those issued for COVID-19 temporary dental policies. These policy updates are detailed in Appendix B of the Dental Services Provider Manual. The Change Control Record identifies all policy revisions effective July 1, 2021.

Updated policy language will be available in the [Dental Services Provider Manual](#) by July 1, 2021. For questions regarding these changes, please contact the DentaQuest Provider Call Center at (888) 307-6553.



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Legal Case: How Ignoring a Patient’s Medical History can Lead to a Malpractice Lawsuit: Antibiotic Prophylaxis for Dental Prophylaxis

By MedPro Group, an SCDA Endorsed Company

BACKGROUND FACTS: A 67-year-old woman presented to a new general dentist, Dr. A, for a check-up and a cleaning, having recently retired to the community where the dentist practiced. She was presented with traditional “welcome” documents, which she completed. Among the papers was a medical history form with yes or no checkboxes for several conditions. She checked yes for Type II diabetes, and next to heart disease, she checked yes and wrote in “IE”.

After she was seated in the dental chair, a dental hygienist introduced herself, silently reviewed the completed paperwork, took a full series of radiographs, did periodontal probing, and performed supra- and sub-gingival prophylaxis using a Cavitron and hand scalers. Then, Dr. A joined them in the treatment room, engaged in small talk, and did a tooth-by-tooth caries check, finding nothing warranting treatment. Dr. A explained to his new patient that because of her gingival inflammation and propensity to develop calculus she should be placed on a 3-month recall regimen, to which the patient agreed.

Four or five days later, the patient began to feel ill, exhibiting fever, chills and fatigue. She presented to a free-standing medical clinic, where a physician reviewed her medical history and her recent activities. She discussed her diabetes and her history of IE, infective endocarditis, many years ago, as well as her recent dental appointment. When she responded to the doctor’s question as to whether she had been given antibiotics in association with the dental treatment, she said that she had not; she was referred to the local hospital to be seen by a cardiologist.

After a work-up, it was determined that she had endocarditis, so she was admitted to the hospital for intravenous antibiotics; blood cultures confirmed the bacterial source to be an organism often found in the mouth. She remained in the hospital until her symptoms resolved nearly a week later and several echocardiograms were determined to be within normal limits. As she would need to continue IV antibiotics for a month or more, a PICC line (peripherally inserted central catheter) was placed so she could receive them at home. She continued to do well, with the PICC line removed after six weeks. While she steadily improved, she experienced shortness of breath on a regular basis with even minimal exercise, which became her baseline going forward, although she functioned well in day-to-day activities.

LEGAL STATUS: The patient retained an attorney to pursue an action against Dr. A and his dental hygienist. The attorney obtained the dental records and immediately noticed that the patient had disclosed her history of infective endocarditis (“IE”), but it was not recognized and not acted upon as part of treatment.

The dentist notified his malpractice insurance carrier upon receiving a request for records, which initiated pre- suit discussions between the carrier and the attorney, reaching a settlement agreement. Because the patient did reasonably well and did not require surgical intervention, the settlement value was not much greater than what the defense litigation costs and expenses were anticipated to be if the situation moved into the courts. Additionally, confidentiality and protection from social media postings could be included in the agreement, whereas that would not be so if the case ended up with a trial verdict against the dentist and/or hygienist.

TAKEAWAYS: The prescribing of antibiotic prophylaxis to prevent infective endocarditis is a topic that is not often discussed. Infective endocarditis, also called bacterial endocarditis, is an infection caused by bacteria that enter the bloodstream and settle in the heart lining, a heart valve or a blood vessel. It can be caused by any number of sources, among them certain invasive dental procedures including subgingival scaling, although routine home oral hygiene can also be the cause in susceptible patients.

For more than a half-century, the American Heart Association (AHA) has been issuing guidelines on the use of prophylactic antibiotics in association with invasive dental procedures. Over the years, the guidelines have changed often and significantly, with regard to which underlying medical conditions warrant such prophylaxis, the antibiotics recommended, the regimen for prescribing the antibiotics, i.e. pre-treatment, pre- and post- treatment, the number of doses, dose strength, etc. and approaches to handling situations when susceptible patients are already on a course of antibiotics prior to the invasive dental treatment. It is not the purpose here to dictate the judgment of a dentist in a given situation,

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but, as a practice risk management consideration, a current knowledge of these factors is valuable, and consultation with a patient's cardiologist or internist is an advisable action.

The scenario here of a dental hygienist being the first practitioner to become involved is not uncommon. All practitioners involved in patient care should regularly, before treatment starts, review patients' medical histories, verbally clarify and discuss with patients their positive responses and assure that there are no other conditions which were not reported, confirm the meaning of abbreviations which may be used by patients (even if the practitioner might find it embarrassing to ask), and be willing to research the significance of existing medical conditions and/or ask the assistance of others with greater knowledge on the subject. Here, for whatever reasons, the hygienist proceeded with care without investigating the patient's reported history, and the dentist followed suit.

In a number of jurisdictions, and under certain circumstances, both a dentist and the hygienist working with that dentist can be held liable for the negligence of the hygienist ("vicarious liability"). It is an important task for a dentist to periodically assure that their malpractice policy will provide coverage to the dentist for the negligence of hygienists, assistants and other office staff members, even if those people have their own policies.

A pre-suit settlement was the best outcome for this case. Here, the defense would likely have included the causation issue, meaning that the IE could have arisen from the patient's home care, or lack, rather than from the dental procedures. But the liability concerns were significant, and a jury would have been presented an argument by the plaintiff that her oral hygiene was a constant for years, and it would have to have been mere coincidence for IE to have developed just days after her dental treatment. This settlement, like all others, involved input from experts and the insured dentist, working in conjunction with the carrier and attorneys.

Finally, regarding a related matter, it is an ongoing question in the dental community whether an antibiotic prophylaxis regimen exists for orthopedic patients who have had joint replacements or other implanted devices. While this article does not speak to what may or may not be appropriate in specific circumstances, the AHA recommendations are cardiac- and cardiovascular-related only. Whether an orthopedic surgeon may suggest antibiotic prophylaxis in association with invasive dental procedures, and what such a regimen may look like, is likely specific to the situation and best determined in consultation with the orthopedist or other applicable practitioner.

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DentaQuest's Provider Web Portal, govservices.dentaquest.com, is a one-stop shop for verifying member eligibility, claim submission and status check, reviewing policy guides, accessing EOBs and more.

We are pleased to offer a series of educational webinars on the second Wednesday of every month from noon to 1 p.m. EST.

For more information on the SC Healthy Connections Medicaid Dental Program or provider trainings, you may contact your DentaQuest Provider Engagement team at CarolinaProviders@dentaquest.com



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Key Points:

- Dentistry is largely exempt from the ETS; however, dental practices must continue to follow some key provisions.
- Pre-appointment screenings are still necessary.
- Everyone (patients, non-employees on site, and staff) must be screened prior to entry and those with suspected or confirmed COVID-19 are not permitted to enter.
- Dental practices must have a written COVID-19 plan.
- A state OSHA or other local regulatory body may enact a more stringent standard, including one that does cover dental offices.

Overview of Provisions

On June 10, 2021, the Occupational Safety and Health Administration (OSHA) issued an emergency temporary standard (ETS) for COVID-19 in healthcare settings. For the full document, please see [OSHA ETS Regulatory Text \(29 CFR 1910, Subpart U\)](#).

(Note: Italicized language below comes from the text of the standard. Any bold font included in text of the standard is added by the ADA for emphasis.)

Application

This ETS does not apply to most dental offices by virtue of exemption (iii) below.

- *This section does not apply to the following:*
 - (i) *the provision of first aid by an employee who is not a licensed healthcare provider;*
 - (ii) *the dispensing of prescriptions by pharmacists in retail settings;*
 - (iii) non-hospital ambulatory care settings where all non-employees are screened prior to entry and people with suspected or confirmed COVID-19 are not permitted to enter those settings;**
 - (iv) *well-defined hospital ambulatory care settings where all employees are fully vaccinated and all non-employees are screened prior to entry and people with suspected or confirmed COVID-19 are not permitted to enter those settings*
 - (v) *home healthcare settings where all employees are fully vaccinated and all non-employees are screened prior to entry and people with suspected or confirmed COVID-19 are not present;*
 - (vi) *healthcare support services not performed in a healthcare setting (e.g., off-site laundry, off-site medical billing); or*
 - (vii) *telehealth services performed outside of a setting where direct patient care occurs.*
- Note that to fall under exemption (iii), dentists **need to continue pre-appointment screenings** of patients.
 - This is done in order to attempt to screen out patients with suspected or confirmed COVID-19, reappointing them if possible or referring them as necessary.
 - A sample patient screening form is available in the ADA's [Return to Work Interim Guidance Toolkit](#).

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- Dentists should also continue to screen staff and other non-patients entering the practice so suspected or known COVID-19 positive people are not entering the facility.
 - *Screening may be conducted by asking employees to self-monitor before reporting to work or may be conducted in-person by the employer.*
 - The ADA's [Return to Work Interim Guidance Toolkit](#) contains a sample COVID-19 Daily Screening Log for recording staff screenings.
- Dental offices that may fall under this standard would likely be a hospital-based practice (such as an oral surgery or emergency care practice) or any office who chooses to provide care for COVID-19 patients when necessary. While the information below provides a synopsis of the major points required for covered entities, dentists are encouraged to view [OSHA ETS Regulatory Text \(29 CFR 1910, Subpart U\)](#) for a complete version of the standard.

A state OSHA or other local regulatory body may enact a more stringent standard, including one that does cover dental offices.

- *Nothing in this section is intended to limit state or local government mandates or guidance (e.g., executive order, health department order) that go beyond the requirements of and are not inconsistent with this section.*
- [State and local dental societies](#) are excellent resources for what may be happening in your jurisdiction.

Dental offices should have a COVID-19 plan in place.

- Why?
 - If you are covered under this standard, it is mandated in the ETS that the employer must develop and implement a COVID-19 plan that includes *"a workplace-specific hazard assessment to identify potential workplace hazards related to COVID-19."*
 - Even if a dental office is not covered under the ETS, [OSHA's Recommended Practices for Safety and Health Programs](#) indicates employers should have a plan with a hazard assessment put in place to mitigate risk to employees. An OSHA inspection for any reason will likely begin with a request for your office's plan.
- What should a workplace COVID-19 plan contain?
 - *Must conduct a workplace-specific hazard assessment to identify potential workplace hazards related to COVID-19.*
 - ADA Resources
 - [ADA COVID-19 Hazard Assessment](#)
 - [ADA COVID-19 Hazard Assessment Checklist](#)
 - *Have a written COVID-19 plan if more than 10 employees.*
 - *Designate workplace safety coordinator(s), knowledgeable in infection control principles and practices, with authority to implement, monitor, and ensure compliance with the plan.*
 - *Seek the input and involvement of non-managerial employees and their representatives, if any, in the hazard assessment and the development and implementation of the COVID-19 plan.*
 - *Monitor each workplace to ensure the ongoing effectiveness of the COVID-19 plan and update it as needed.*
 - *Include policies and procedures to minimize the risk of transmission of COVID-19 to employees.*
 - The ADA's [Return to Work Interim Guidance Toolkit](#) has a number of procedures listed to assist in minimizing the risk of transmission.



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- Keep in mind this is a living document and as things change in one's locale with respect to changes in disease rates, emerging variants of COVID-19, or vaccination rate changes, one may want to amend their hazard assessment.
- For more information, see [OSHA's Recommended Practices for Safety and Health Programs](#).

Under the COVID-19 ETS, the following points may apply to covered dental offices (not an exclusive list):

- **Personal protective equipment (PPE)**
 - Provide and ensure employees use respirators and other PPE for exposure to people with **suspected or confirmed COVID-19 and for aerosol-generating procedures (AGP) on a person with suspected or confirmed COVID-19;**
 - AGP definition includes dental procedures involving: ultrasonic scalers; high-speed dental handpieces; air/water syringes; air polishing; and air abrasion.
 - Note that respirators/N95s not mentioned as required when treating patients who are not suspected or confirmed COVID-19+.
 - Again, would stress the use an office hazard assessment in order to understand level of risk.
 - Provide respirators and other PPE in accordance with Standard and Transmission-based Precautions; and
 - Allow voluntary use of respirators instead of facemasks (under the mini respiratory protection program at 1910.504).
- **Training**
 - The employer must ensure that each employee receives training, in a language and at a literacy level the employee understands, and so that the employee comprehends at least the following:
 - How the disease is spread
 - What are the office policies on patient encounters, cleaning routines, etc.
 - What and when the "proper" PPE is to be worn
 - Employer-employee policies on all aspects, including (but not limited to) the use of common areas such as the employee break room.
- **Ventilation**
 - Ensure that **employer-owned or controlled HVAC system(s)** are used in accordance with manufacturer's instructions and the design specifications of the system(s);
 - Air filters are rated Minimum Efficiency Reporting Value (MERV) 13 or higher if the system allows it.

This information is intended to help dental practices assess and mitigate (but not eliminate) the risk of coronavirus transmission during the current pandemic. Dental practices should not presume that following the recommendations will insulate them from liability. Dentists should also be aware of any relevant laws, regulations, or rules adopted in their states.

Disclaimer. These materials are intended to provide helpful information to dentists and dental team members. They are in no way substitute for actual professional advice based upon your unique facts and circumstances. **This content is not intended or offered, nor should it be taken, as legal or other professional advice.** You should always consult with your own professional advisors (e.g. attorney, accountant, insurance carrier). To the extent ADA has included links to any third party web site(s), ADA intends no endorsement of their content and implies no affiliation with the organizations that provide their content. Further, ADA makes no representations or warranties about the information provided on those sites.



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Board of Dentistry: Continuing Education Update

South Carolina State Board of Dentistry

Continuing Education

At its April 12, 2021 meeting, the South Carolina Board of Dentistry approved waiving the 50% online continuing education restriction for the current CE cycle. This means that for the upcoming renewal, **100% of continuing education may be obtained online during the time period of January 1, 2021, to December 31, 2022.** Following renewal, the 50% online CE allowance will go back into effect. For additional CE information, please visit the Board website at <https://www.llr.sc.gov/bod/ce.aspx>.

All licensees are provided a free CE Broker Basic Account and may activate the account by clicking: CE Broker Account Activation. Licensees are responsible for ensuring their courses are reported accurately.

Licensees and other members of the public needing assistance are encouraged to visit the Board website at www.llr.sc.gov or contact the Board office at 803-896-4599 or at contact.dentistry@llr.sc.gov. The Board will continue to monitor the public health emergency and will communicate updates via email and the website.



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Visit the Member Savings page at scda.org for further information and free cost comparisons.

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Classified Ads

Dental Related Services

Palmetto Dental Personnel Inc. is owned and operated by a dental professional with 30 yrs experience and has exclusively provided professional staff for Columbia and the surrounding areas. PDP has dental hygienists, assistants & front office personnel available for temporary and permanent positions. Contact Gail Brannen 800-438-7470, fax 866-234-8085, gbrannen@palmettodentalpersonnel.com or www.palmettodentalpersonnel.com.

Intraoral X-Ray Sensor Repair/Sales- We repair broken sensors. Save thousands in replacement costs. Specializing in Kodak/Carestream, major brands. We buy/sell sensors. American SensorTech 919-229-0483 or www.repairsensor.com.

Looking for the right practice? Join an established practice or buy 100% and make it your very own. Here's some of what you can find with ADA Practice Transitions: AdaPracticeTransitions.com/practice-profiles.

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Since 1975, **Dental Power has been placing dentists seeking work!** We have clients in SC with fill-in/locum tenens needs, short-term assignments (mobile dentistry and school based programs), long-term contract work and associate position openings. View specific opportunities at www.DentalPower.com or 800-710-9720.

Positions Available - Dentists

Volunteer-Helping Hands Dental Clinic (Georgetown). Th 5 pm. 843-527-3424 or acct.hhands@gmail.com.

Downtown Columbia SC practice looking for a full time associate. Base salary plus commission. Signing bonus plus attractive benefits package. Will consider a partnership with the right candidate. Send resume to james@garnersferrydentistry.com

St George/Santee/Holly Hill, SC- Looking for dentist to expand our staff at growing dental group. 4-5 days per week in St. George/Santee. Prefer to live within 25 miles of practice. 8 dental hygienists/19 op practice. Contact 843-560-2226 or drgarris@bellsouth.net

D4C Dental Brands is currently hiring a **Pediatric Dentist** for positions in SC. We are dental specialists owned practices looking for support for one of our locations in Charleston. Our offices are child friendly, fun and committed to quality dental care. We offer benefits and competitive compensation. Visit us online d4cdentalbrands.com.

General dentist needed for well-established practice with a new state of the art facility in the Fort Mill area. Please send resumes to jasonprescottdmd@gmail.com.

Busy group practice in **Fort Mill, SC** is seeking a part time orthodontist to join our expanding team. Our orthodontic department is fully established with a large referral base. We have wonderful staff, excellent compensation and earnings potential. For more information or consideration please submit CV to beth@friendlydentalgroup.com.

An excellent opportunity for a Dental Associate to join a thriving & prosperous pediatric dental practice in Charlotte, NC area. **15 dental chairs, 6 private** rooms, 3 bay areas. Guaranteed starting salary \$250,000 per year with medical benefits, vacation, malpractice insurance, continuing education and holiday.pedodds@pedodoctor.com.

Rapidly growing company focused on **telehealth emergency dental services**. We provide visual examinations using videoconference technology and then prescribe medications as appropriate for the patient. Join us in expanding access to care for millions while working where and when you want to. Minimum 2 years of post-training, clinical experience and Medicaid credentialing required. <https://bit.ly/PanelistRecruitment>

Come join our private, high-tech practice in **Fort Mill** that utilizes CEREC, Itero, CBCT, 3D Printing technology. Newer office averaging 200 new patients per month at 70/30 FFS/PPO. Mentorship available. Truly unique position! Good vibes only! matthew@mundodentistry.com.

Beaufort Family Dentistry is looking for a **Pediatric Dentist** to complete our team. We are a busy practice that's growing and expanding. The office is fully chartless and digital. Competitive pay, great benefit package, 401K, Disability. All current PPE recommendations followed. Our patients and staff are our top priority. sdurante@vsmmgt.com.

Beaufort Family Dentistry is looking for an **Oral Surgeon** for expanding practice for Beaufort and Summerville office. This is a rapidly expanding practice. The office is fully chartless and digital office that puts patients and staff as priority. Competitive pay, benefit package, 401K, Disability. All current PPE recommendations followed. sdurante@vsmmgt.com

Dental Docs of Spartanburg is seeking a **General Dentist** for expanding office. We offer premium dental services for children and adolescents. This is a state of the art office. We offer Competitive comp, full benefit package, 401K, Disability. All current PPE recommendations followed. Our patients and staff are come first! sdurante@vsmmgt.com

Union Dental is seeking a General Dentist for expanding office. We offer a complete range of general and cosmetic dentistry services. This is a state of the art office. We offer Competitive comp, full benefit package, 401K, Disability. All current PPE recommendations followed. Our patients and staff are come first! sdurante@vsmmgt.com

Dental Docs of Spartanburg is seeking a **Pediatric Dentist** for expanding office. We offer premium dental services for children and adolescents. This is a state of the art office. We offer Competitive comp, full benefit package, 401K, Disability. All current PPE recommendations followed. Our patients and staff are come first! sdurante@vsmmgt.com

Full/Part Time Associate- **Seeking GP** for multiple location dental office. Looking for motivated hands on individual. Buy in opportunities available. Daily rate converting to % commission whichever greater. High tech office. Cone beam, scanners, elec handpieces, new facilities. Travis@acuitydental.com.

Established and fast-growing private pediatric practice seeking a 2 days/week **pediatric dentist**. Looking for a skilled, motivated, personable and caring dentist. Our associate package offers competitive compensation with the possibility of a full-time or a long term position. Please email admin@lakewyliepediatricdentistry.com.

Dentist in Myrtle Beach- Looking for an associate to take over the full schedule of a doctor that is moving out of the area. Highly productive, restorative, general practice. Established for 20+ years and growing. Molar endodontic and implant experience preferred. Very lucrative opportunity for the proper individual. Possible buy-in/buy-out. Contact chadrlamar@yahoo.com or 561-305-4180.

Looking for a **general dentist** as an associate whom may be interested in potentially purchasing a successful and profitable established practice. Proven track record and great growth potential with dedicated and experienced staff. Please contact aikendental@aol.com or call 803-648-8319.

Our private practice in **Columbia, SC** is looking for a full-time associate. We specialize in periodontics, dental implants, and laser periodontal therapy. Our 5,557 square foot office is digital, including a CBCT machine with seven operatories that expand to nine. Busy office and opportunity to transition into a future partnership. brittany@sandhillsporio.com.

We are seeking a dentist for our established and fast-growing practice in **Charleston**. We have a high-tech practice with a CBCT, digital x-ray, intraoral scanner, 3D printer, laser and digital camera. The ideal candidate should possess excellent interpersonal verbal and written communication, positive and outgoing personality and excellent patient care skills. game@stonodentalcare.com.

Crowns Now Dentistry is in search of a general dentist to take over the full schedule of a doctor that is moving out of state. **Crowns Now Irmo** is a busy 2 dentist practice that has a CBCT, 3 Shape Trios digital scanning, guided surgery etc. jerri.harman@crownsnow.com.

Seeking an Associate Dentist for our established and fast-growing practice in **downtown Columbia**. We provide comprehensive care to all ages. The ideal candidate is motivated to grow in the field, open to learning & utilizing the newest technology and has superb chairside manners. The position starts at 3 days with intent to grow to 4. antley@carolinadentistrysc.com.

Dentist needed in **Surfside Beach, SC**. Looking for a full time dentist to join our state of the art fast growing practice. Specializing in general, restorative & cosmetic dentistry. Endodontics & implant experience a plus. Competitive salary & benefits + 401K. karlastrickland@sccoast.net.

CDCSC is looking for a full time, part time, or **contract dentist** who is comfortable with extractions. Our office is an approved loan repayment site and will offer a \$20,000.00 sign on bonus. We are a short distance from Florence, SC. Competitive salary and benefits. All current PPE recommendations followed. destinydcnc@gmail.com.

Looking for a **dentist to join our 20+ years** established and fast-growing private practice. Specializing in general, restorative and cosmetic dentistry. Molar endodontic and implant experience a plus. We are a 100 % fee for service practice. Send resumes/CV to Kristen@DrRearden.com.

Apex Dental (**Rock Hill or Clover SC**) is seeking a General Dentist for expanding office. Opportunity to perform endo, restorative, implants. Supporting team, great compensation, fixed +bonus towards equity ownership, help for dental credentials, malpractice, CE. Fully digitalized, modern facility, CBCT, scanner, laser and new technology. Health care reimbursement apex_dental@outlook.com.

Cayce- Seeking a General Dentist Part time. Flexible hours, competitive pay and high volume practice. tdbrittneye@gmail.com

Positions Available- Staff

Well established practice with a new facility in the SC side of the greater Charlotte area looking for an **insurance and billing coordinator/office manager**. Experience with dental insurance a must. Competitive pay with a full benefits package. Please send resumes to scresumes123@gmail.com.

Dental **hygienist and assistant** openings! Multiple full time, part time and PRN positions open at Premise Health in Greenville, SC. Marybeth.johnson@premisehealth.com or call/text 256-694-1705 for more information.

Help wanted: **Dental Hygienist** Looking for a passionate Registered Hygienist Tuesday-Thursday 2-3 days a week may turn into fulltime Dentrix software, Dexis call ask for Ashley 864-233-4166.

Greenwood- Full time, part time Registered Dental Hygienist needed. Ability to communicate periodontal and oral health, as well as treatment needs. Email resumes to gracestreetdental@gmail.com.

Full time hygienist needed in **Aiken SC**. Working 4 days a week. Offer competitive pay and benefits. Email resumes to northaikendental@att.net.

Dental Hygienist needed full time in **Irmo/Ballentine**. Hours 8-5 Monday through Thursday. 401K profit sharing program. Contact Mary 803-749-6072 or acm5765@aol.com.

We are looking for an experienced and professional **full time RDH** to join our team. Candidates must have great work ethic, excellent skills and good chairside manner. We offer competitive pay and benefits. Hours are Monday 8-3 and Tuesday-Thursday 8-5. Email resumes to reception@lowcountrysmiles.com.

Experienced **Hygienist** needed full time for well established practice. Benefits include sick days, vacation, holidays, retirement plan and bonuses. Email resumes to reception@lowcountrysmiles.com.

Practices/Office Space Available

Satellite dental office: 52 foot trailer. One operatory fully equipped white coastal chair. One operatory plumbed and ready. Lab, reception, business office, 1 full bathroom and HVAC included. Ready to move to your location. \$25,000 OBO call 803-617-8701.

General practice for sale in **Pee Dee Region**. Attractive, renovated facility, 3,500 sf with 8 ops (3 used for hygiene). Excellent streetside visibility. Steady new patient flow even with limited marketing. 2019 income projected to be \$1M+. Contact transitions@mcgillhillgroup.com.

Greenwood dental office for sale or lease. The free standing building has 6 to 8 operatories with a city owned children's park beside it. 864-229-6719.

70 miles inland of **Coastal SC**: Recently renovated, 3 operatory practice located 70 miles from Charleston. Standalone professional building with high visibility. Practice produced \$670,000 in 2019, and there is unlimited potential for growth! Courtney 843-324-0703, courtney.robinson@henryschein.com. #SC1533

Well-established general dental practice for sale in **Newberry, SC**. loyal and consistent patient base. 5 ops in 2,177 sq. ft. of space. 2020 collections were approx. \$600,000 with the selling doctor seeing patients 4 days per week. Matt.kosciewicz@mcgillhillgroup.com.

\$1M+ Metro Columbia: Collections of \$1.3M+ on 8 doctor and 8 hygiene days with 3,000+ active FFS/PPO patients. Beautiful office building with 8 ops, 1 is unequipped, additional office space upstairs and state of the art equipment, Cerec and Cone Beam. The building is offered for purchase or lease. SC-6625 Contact: AFTCO 800.232.3826.

Near Charlotte: GP with excellent cash flow from \$700K in collections. The modern, stand-alone office has 5 ops with room to expand. This practice operates on 4 doctor and 8 hygiene days; allowing for new patients monthly. The real estate is available to purchase or lease. SC- 6610 Contact: AFTCO 800.232.3826

New **Charleston opportunity:** Well-established GP open 4 days/wk and collecting \$400K/yr. The 1,500 sq. ft. office has 3 ops and uses Easy Dental. Owner refers out all specialty procedures. With a patient base of over 1300, there is plenty of room for growth. SC-6755 Contact: AFTCO 800.232.3826.

For Sale

For Sale: Dental equipment chairs, units, lights, cabinetry, x-ray, vacuum, compressor, sterilizers and handpieces. Any and all things dental call 843-697-7567.

For Sale: **I-CAT- 2008 Gendex GX-CB500**. This unit is in good working condition and was recently pulled from service and professionally de-installed. \$35,000 contact charles@mstxs.com or 843-697-7567.

Brand new, never been used, **Astra Tech Implant System**. Includes hand piece, inventory of implants, everything needed to start implants in your practice. Priced new at \$18,000 will consider \$10,000 obo. hmfingar@gmail.com or 843-816-6668.

Three **Dental EZ chairs**, recently recovered (like new) sale cheap or donate to good cause. Barely used compressor (2018)- Air Stair AS22 (size for 3 operatories). ADEC Dental units and Pelton & Crane lights. Call 864-871-0041.



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