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Death of SCDA Past President Dr. George A Lippard, Jr.

By Dr. Gene Atkinson, SCDA Historian



Longtime South Carolina Dental Association leader, Dr. George Lippard, Jr., died on February 9, 2020 after a brief illness. He was the Secretary-Treasurer of the SCDA from 1965-1970 in the days when this was the workhorse position. He also led the SCDA as our president from 1972 to 1973. Below is his biography written by SCDA Historian Dr. Gene Atkinson in the recently published *150th Anniversary History of the South Carolina Dental Association*.

Dr. George Albert Lippard Jr. 1931-2020 SCDA President 1972-1973

Dr. George A. Lippard, Jr. has been a leader in dental circles throughout his outstanding career as a practicing dentist.

George Lippard, Jr. was born in Charlotte, North Carolina in 1931 to George A. Lippard, Sr. and Corrine Leonard Lippard. His family moved to Columbia, South Carolina in 1933, and he has remained there ever since except for educational purposes and his service in the United States Air Force.

Dr. Lippard graduated from University High School in Columbia in 1949, where he served as the student body president. His college career was at Davidson College where he graduated in 1953. This was followed by his dental education at the Baltimore College of Dental Surgery at the University of Maryland from 1953 to 1957. After graduation from dental school, George served as a dental officer in the United States Air Force Dental Corps from 1957 to 1959.

Dr. Lippard began his practice of general dentistry in Columbia in 1959 and ably served his profession until 2001. He was president of the Greater Columbia Dental Association in 1964-1965. From 1965 to 1970 Dr. Lippard was the Secretary-Treasurer of the entire South Carolina Dental Association, perhaps the most detailed of all the SCDA offices. In 1972-1973 he ascended to the office of president of the SCDA, guiding the efforts of all our members. Additionally Dr. Lippard served as the president of the Mid-Carolina Study Club from 1981 to 1982. He also served on the South Carolina DHEC Advisory Board. For his outstanding service to dentistry, Dr. Lippard was inducted as a Fellow in the International College of Dentists in 1985.

As president of the South Carolina Dental Association, Dr. Lippard made great strides in reorganizing the Peer Review system and producing a new written manual for its procedures and policies. He also oversaw the review and upgrading to the SCDA Code of Ethics. As ETV was coming into our lives then, he made great efforts to see that dental continuing education programs were produced and broadcast over their network, so that the dentists of South Carolina could continue to improve their skills. Additionally Dr. Lippard recommended that the new College of Dental Medicine at MUSC send a student representative to the SCDA House of Delegates as a non-voting member, to enhance their knowledge and participation in dental governance.

Civically Dr. George Lippard participated in many Columbia activities. He was a member of the Richland Sertoma Club, the Columbia Chamber of Commerce, and the Richland County Cancer Society where he served on their Board of Directors.

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Additionally Dr. Lippard was a past division chairman of the United Fund. Regarding his religious activities, Dr. Lippard was a dedicated member of St. Paul's Lutheran Church beginning in 1933 and continuing to the present. He served as a Sunday School teacher and was on the Church Council for four different three-year terms. Dr. Lippard was president of the Lutheran Church Men in 1963 and served as chairman of the Pastor Call Committee in 2005. Additionally he served as the Cub Scout leader for his church sponsored Cub Scout Pack.

Dr. Lippard's foremost hobby was golf. During his career he has made six hole-in-ones, and he has managed to shoot his age numerous times since age 73. Dr. Lippard has won both the Senior and Super Senior golf championships at the Forest Lake Club. At home his main hobby has been gardening, especially growing his prize roses for the last 40 plus years.

As a youth, George Lippard completed all of the rigorous requirements to become a member of the prestigious Eagle Scout ranks.

Dr. Lippard was married to the late Myra Cain Lippard. They had two sons: George A. Lippard, III and John Cain Lippard.

Dr. George Lippard is to be commended for such an outstanding career serving his patients, his profession, his community, and his church.

The SCDA has been closely monitoring the situation around COVID-19. For the most up-to-date information, please visit <https://www.scd.org/resources/coronavirus>

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16th District Trustee Report

By Dr. Kirk Norbo



We began our meeting with a joint session with our New Dentist Committee. The focus of the session was consideration of things we do which are of less value than other activities. We were all asked to identify the “stupidest” things we do. This phrase is said a bit tongue in cheek. While there may be some things we do which fall within it, our real focus needs to be on setting aside those things which are of the least value. We should use our strategic plan to identify what is essential and what is not. It is important for us all to remember that when we say Yes to one thing, we need to say No to something else.

Dr. Mattingly, the chair of the New Dentist Committee, and other committee members briefed us on some of the results of the “stupidest thing” survey of the NDC and the Board. ADA membership is strongly linked to geography. Does that reflect our current world of greater mobility? Does the ADA social media platforms engage and interest our new dentists? Or are new dentists migrating to other platforms? We discussed these and other ideas, first in small groups and then together.

What is most essential? Among ideas shared were advocacy, community, science, mobility, becoming digital, customizing the member experience, disrupting the insurance model, accessibility of information, telling our story, virtual mentoring, more “representativeness” of the House of Delegates and governance in general, portability, financial sustainability and return on investment. We identified advocacy, going digital and telling our story as priorities.

What is non-essential? What should we move away from? Ideas included: Barriers to membership and participation, printing JADA, our current CE delivery system, the annual meeting and our current governance structure, too many emails, too many in-person meetings, geographic barriers (e.g., which local meeting to attend), wastes of time and money, and divisions among dentists—the ADA needs to be for all dentists. From among these, we identified the following as priority items: barriers, the current annual meeting and too many in-person meetings.

It is not coincidental that we later heard an update on our digital transformation efforts. Our digital efforts need to address both the back office and the actual experience our members have. A digital member experience is a “must have,” especially for our younger members. Members want information from the ADA when and how they choose. Because we recognize the importance of digital transformation (this was reinforced in our joint session with the new dentists), we decided to accelerate our efforts in this area and to fund this essential work in 2020 through our reserves.

We recently learned of an upcoming executive order mandating that all government-funded research be published in open-access journals. This would have a profound impact on JADA, as well as many other journals. Many organizations, including the ADA, sent a letter to the White House asking that this order not be issued. As a result of these efforts, release of the order has, at least, even delayed. Our preference is for the current requirement of publication in open access journals twelve months after initial publication. This would protect subscription-based journals like JADA.

In addition to having a joint session with the New Dentist Committee, its chair joined in our meeting. The insights and participation of the NDC chair during our meeting is very much appreciated. Dr. Mattingly updated us on the work of her committee. Among the topics addressed by Dr. Mattingly was the committee’s deliberations regarding issues surrounding attracting and retaining dentists employed in DSO settings as ADA members. The resolution we passed, at the suggestion of the NDC, calls on the Council on Membership to work with the New Dentist Committee and other appropriate agencies to develop a strategy to increase engagement with these dentists. We look forward to hearing back from the council as it conducts its work.

A key responsibility of the Board is to monitor progress under our strategic plan. Of course, we have used, and will continue to use, the Quarterly Management Report to do so. At this meeting, we also examined an additional tool to help us meet our obligations. Going forward, we will regularly receive standard

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reports on each strategic plan goal. Those reports will discuss the strategies and tactics being pursued for each objective under the plan. The reports will also provide us with the most current results, as measured against the metrics contained in the plan itself.

Mr. Michael Graham provided us with our regular update on activities in Washington and the states. McCarron Ferguson repeal remains an area of significant work and we hope for action this spring. Twenty states have applied for FIIST money. While we are very early in the process, enthusiasm for this work is running high. Moreover, only seven states are dealing with therapist issues, a significantly smaller number than in the past. This will free up resources to help with this effort. Finally, work continues on Lobby Day and we all look forward to it.

Dr. Araujo provided us with an update on the Foundation and the ADA Science and Research Institute (ADASRI). The new Foundation board has met and we expect an additional report in April. Dr. Armstrong, chair of that board, expressed his optimism about the work of the Foundation going forward. ADASRI's board also met recently. Dr. Cohlma was elected as chair of the board. During a meeting in April, the ADASRI board will work on its own strategic plan, which will be aligned with the ADA's strategic plan. We all look forward to the work of both the Foundation and the ADASRI.

Marko Vujicic gave us a presentation on the state of the dental economy. The trends are similar for per capita spending and per capita spending is now at its highest ever. The sources of this funding are important to understand. The trends are driven almost entirely by private insurance and Medicaid programs. There has been an increase in privately insured adults in dental offices and this partly explains the trends we have seen. On the other hand, there continues to be a long-term, slow decline in self-paying adults. The numbers of self-paying children is very low.

Over the last ten years, the overall population in the U.S. has grown. Despite that, the number of self-paying patients has decreased. The uninsured, self-pay patient population is shrinking, declining by 17% the past decade while the overall patient base grew by 4%. There are, however, more senior patients in offices today than ten years ago, while the total number of patients has declined. Over that same time period, the share of dentists in solo practices has decreased 11%. On the other hand, 8.8% of dentists are affiliated with DSOs in 2017, up from 7.4% in 2015. While there does continue to be increased earnings associated with ownership, data demonstrates that the earnings gap between owner dentists and employed dentists is shrinking. The ownership premium has disappeared among other health care professionals.

Based on the best numbers available to us, approximately between 90 and 95% of dentists participate in one or more dental plan. Therefore, as reimbursements from third party carriers decline, the impact on dentist income is significant. The decline in reimbursements is estimated at 6% between 2013 and 2017. In recent years, dentist earning have been basically flat.

Looking forward, demographic shifts among the population and providers, intensified consumerism, and other economic forces are driving major changes in dentistry. Dr. Vujicic believes that we are in the midst of an irreversible transition in practice modality. We thank him and HPI for keeping us so well informed on these matters.

This concluded our business. I hope all is well with each of you and thanks for all you do for our profession.

History of the South Carolina Dental Association 150th Anniversary, 1869-2019

Dr. Gene Atkinson has announced the release of this 336-page book. He has spent eight years compiling this book including, 265 pictures of SCDA moments, and recounts the history with a special emphasis on the last 50 years.

The cost of this history book is \$25 each (Great gifts for friends and family) to maintain a copy please contact the SCDA office 803-750-2277 or scda@scda.org. First 100 year book also available for \$5.00.

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SCDA Member Spotlight

Featuring Dr. Brandon Cain, The Columbia Dental Health Clinic



1. How long have you been a dentist and member of SCDA?

Student member of SCDA in 2010, practicing member since 2014

2. What dental school did you attend?

Graduated MUSC in 2014 and the Prisma (Palmetto Health Richland) GPR in 2015.

3. Tell us about how you discovered your love of and interest in dentistry?

I fell in love with dentistry when I learned what dentistry actually was. I've only ever received cleanings so I thought dentists only entered the room after a hygiene appointment to tell me everything was fine, looked boring. After college a friend of mine's brother (Dr. Charlie Hazelrigg) invited me to come shadow him to see what the dental world was all about, I've been hooked ever since.

4. What are you doing in your practice that you think other members of SCDA should know about?

Until recently I practiced as an associate at a respected high-end FFS practice where I had use of the latest technology and advanced procedures at my disposal. As much as I appreciated my time there and that aspect of dentistry I could not ignore the growing need of the underserved. About 6 months ago as a side project I opened the Columbia Dental Health Clinic ([DentalHealth.Clinic](#)) which focuses on offering extractions services for the underserved. I have transitioned into my clinic full time and couldn't be happier. My team is here for anyone in need, we accept child and adult Medicaid for extractions but whether they can pay or not anyone needing treatment will receive it if they come through my door.

5. What advances in the field of dentistry are you most excited about?

Dentistry is evolving rapidly through technological and scientific advancements but one aspect of improvement I am most excited about is the growing number of clinical and non-clinical personnel that are dedicating their time to improve access to care. From opening their doors a half day a week to treat the underserved to organizing a nation wide advocacy group like the Oral Health Progress and Equity Network (OPEN). OPEN is an agent of change that is helping break barriers and open doors for those who do not have access to oral care.

6. What would you say to young dentists just starting out or students who might be considering dental school?

Dentistry can offer many things including financial wellbeing and social status but if those are your priorities then you will never truly receive or understand the level of personal and professional satisfaction being a dentist has to offer. Do what is right by your patients, everything else will fall in line.

7. What would you say to those who are considering joining SCDA?

Being a member of the ADA-Constituent (SCDA)-Component (local) Tripartite is a must. Being unified through these associations strengthens and elevates our profession in ways we could not achieve as individuals.

Thank you Dr. Cain for sharing with us! If you are interested in being featured in our next Member Spotlight, please email scda@scda.org or call 803-750-2277!



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How Not to Get Stuck in a Hospital Far From Home

By John Gobbels, COO Medjet, an SCDA Endorsed Company

As medical professionals, you know how important it is to be treated by physicians you trust in a facility you choose.

Yet many people, when faced with an accident or illness while traveling, find themselves stuck in a hospital far from home ~ at the mercy of health or travel insurance companies in determining the “acceptability” of a facility, and the “medical necessity” of a transfer home.

Not being able to get to a home hospital of choice for treatment can present a myriad of issues:

- **Care that is unacceptable to you**, and facilities that don't meet your standards;
- **Language barriers**, if your hospitalization occurs during foreign travel, making treatment decisions difficult;
- **Capping out on travel insurance medical benefits** if hospitalized abroad (even the high end coverages can disappear quickly), and dealing with out-of-pocket payments and claims with an unfamiliar insurer can pose a financial risk;
- **The cost of having family members fly to your side** to serve as your patient advocate and moral support (airfare, hotels, missed work) can also add to your financial headache;
- **A \$30,000 (domestic) to \$180,000 (international) medical transport**, to your facility of choice at home for treatment and recovery, which your health or insurance company won't cover, can also take a bite out of your savings.



This is where air medical transport memberships like Medjet come in.

If you travel frequently, alone for business or on vacations with your family, it is vital to understand the fine print of your health and travel insurance coverage when it comes to getting back home.

Travel Insurance in its basic form usually provides Trip Cancellation, Trip Interruption, Lost Luggage, local Hospital and Treatment Cost Reimbursement, and limited Medical Evacuation benefits to the nearest acceptable facility—and what is deemed “acceptable” is determined by the insurance company, not the patient. While medical evacuation is a lifesaving benefit, it will not get you all the way back home, to your hospital of choice and doctors you know. Some insurance products wait for you to recover, where you are, and will rebook you home on a commercial airline.

Credit Card Travel Benefits only (sometimes) cover injury or illnesses that actually happen while you are on the common carrier that you bought the ticket for. Far too many people mistakenly think they are covered for medical during their entire trip and are most definitely not, nor do they realize that the medical evacuation coverage is only to the “nearest acceptable” hospital.

Health Insurance, for domestic travel coverage outside of your local network, typically covers Emergency Services and Hospital and Treatment Costs, but it doesn't necessarily get you home.

People don't think too much about getting “stuck” in a hospital in another city, but it can cause some of the same financial and emotional stresses as getting stuck overseas. It can be especially hard for families with children in school, where a spouse may have to choose between being bedside or remaining at home with the kids.

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medical necessity. You get to make the decision as to where you want to receive the remainder of your care, not an insurance company. If you are transported, there are no claim forms or bills, no out-of-pocket expenses to seek reimbursements for, you pay only your initial membership fee and that's it.

Many, like Medjet, have memberships that add security and crisis response protection. Access to a 24/7 crisis response line for travel safety threats like violent crime, disappearance, natural disaster and terrorism, can provide extreme peace of mind, especially if you travel alone a lot, or are sending children overseas to study.

I know it sounds like a lot of (very boring) reading, but understanding what coverage you have is vital. Over 10 million travelers are hospitalized abroad each year, millions more domestically. If the worst does happen, you will want to make sure you have the best options available to get yourself, or a loved one, back home.

Medjet is the premier medical transport and travel security membership program for travelers, recommended by hundreds of top travel experts and publications. SCDA Members have access to discounted program rates by using the link www.medjetassist.com/SCDA or by calling their membership services team at 800.527.7478 (mention SCDA).

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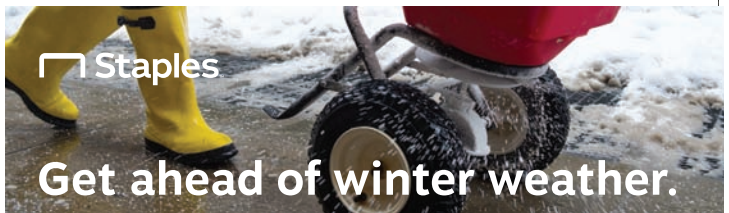
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Fully equipped mobile unit traveling to rural SC is looking for a dentist to help change lives, need your help. Contact thepalmettopalace@gmail.com.

Florence area group practice seeking Associate Dentist. \$200-300K possible for motivated, experienced candidate. FT or PT opportunity possible. New grads welcome to apply as well. Email resume to gwtidental@gmail.com or call 843-992-7348.

Are you a Dentist looking for a busy and established practice in **Rock Hill?** Look no further. Competitive compensation, benefits packages available, complete business and operational support, and Comprehensive treatment planning to majority PPO/fee-for-service patients. What more could you want? Email resume or referrals to mary.barfield@dentalonepartners.com or visit www.dentalonejobs.com today.

Dr. Alex Sharifian, owner dentist of Redstone Modern Dentistry in **Indian Land**, is seeking a growth-minded dentist to join his practice. He is prepared to invest significantly in someone who wants to own and grow a thriving, modern practice. Lucrative compensation & excellent benefits. voelkern@pacden.com.

Pediatric Dentist - Columbia, SC Newly built, and fast-growing private, non corporate office located in Forest Acres in Columbia. This office is looking for the perfect fit for a high-touch pediatric experience, centered on patient care. Competitive compensation package. Contact Michaelrdoover@hotmail.com

Coastal Kids in **Charleston** is looking for an Oral Surgeon to work in a state of the art sedation and surgery center. We offer 401k, medical, dental and vision benefits, great work life balance and above average compensation. Contact Dr. Isabel Driggers to learn more isabel@coastalkidsdental.com.

Associate Orthodontist needed 2-3 days per month in mainly FFS general dental office that has a large orthodontic patient base. Base pay plus bonus. This would be ideal for someone who recently opened a practice of their own and needs a few extra days per month until their practice picks up. Please email resume matthew@mundodontistry.com.

Sleep focused dentist- Columbia. New fast-growing dental sleep focused network seeks dentists who are experienced or who have a keen interest in dental sleep medicine looking to enter into a dedicated niche practice on a part time basis (1-2 days per week). Ideal opportunity to further develop clinical experience and expand income base. masoud@oventusmedical.com.

Associate Dentist needed in **Lexington SC.** Full time employment with option to buy into equity partnership in 1-2 years. Privately owned two doctor dental office established over 40 years ago. Contact 803-665-6453.

Busy family dental practice is currently looking for **PT, FT talented dentists** who are excited about giving back to their community. Student loan repayment, competitive compensation and health care available. Please contact Dr. Singleton at singletonnaida@yahoo.com

Columbia SC- General dentist needed immediately 1 to 3 days per week. Digital up to date office with experienced staff. cdcsmiles@live.com or 803-738-2424.

Associateship opportunity in **Fayetteville, NC**, with the potential for future purchase. Thriving 30 year, \$2.2M yearly production practice in a 10 operator, state of the art facility to include Cone Beam CT imaging and Planscan E4D system. Previous associate yearly income average of \$240,000. Incredible team and growing patient base. admin@catlettdentistry.com.

Pediatric Dentist needed in **Bluffton/ Hilton Head SC**. Excellent location in the low country only minutes from the beach and Hilton Head Island. We have a brand new building and state-of-the-art equipment with a wonderful team! Visit us at seakidssmile.com to learn more or email info@seakidssmile.com.

FT General Dentist associate position - **Summerville, SC**. Come treat steady flow of established and new patients. Experience with root canals, implants, Invisalign desired. Opportunity offers private practice environment, quality of life, clinical autonomy, and a good base salary compensation plus good % of collections. Send resume to smilebright19@yahoo.com

General Dentist needed around **Orangeburg, SC**. Full time or part time. We offer a \$650 guarantee or 35% of production whichever is greater. If you are interested, please email jobs29003@gmail.com for more information.

Non DSO family dental practice in **Greenville** area looking for a highly motivated Associate Dentist. Four day work week. Competitive pay, paid CE and medical insurance. Candidate must have great chairside manner and strong work ethic. Great highly, trained staff. Excellent management and marketing support. Practice.manager1693@gmail.com.

Needed: hard working, fun, energetic **General or Pediatric Dentist** to join our rapidly growing practice. PT or FT. Motivated to maximize competitive compensation. Our second expansion is in the works. Multiple opportunities for growth and development including possibility of equity. Please submit CV to tonia@childrensdentalgroupsc.com.

PT Oral Surgeon or Dentist comfrontable with extractions needed 1 day a week. If you are comfortable with molar endo it's a plus. Possibility for more days. Very competitive package please contact 803-997-0088 or drssdental@gmail.com

Opportunity to earn a guaranteed base salary and bonus potential. Average Compensation 162,000 to 312,000 , Loan Repayment, Sign on Bonus, Paid Time Off, Malpractice Insurance, Competitive Compensation, Profit Sharing, Future Partnership Opportunity H1b Visa and Green-card Sponsorship, CE in **Columbia**, ssteward06@gmail.com or 803-997-0088.

OP room available for use by pediatric dentist in modern rural practice with substantial need for children care. Contact Dr. Saenz at 803-259-3497 office or asaenzdmd@gmail.com.

Associate dentist needed for established practice in **Pawleys Island**. Experience with removable prosthodontics and digital dentistry preferred. Please email CV to nicksqueenb@aol.com

Positions Available- Staff

Columbia dentist looking for professional to fill FT **dental assisting position**. Candidate should possess: dental assisting experience with xray & nitrous certification, excellent communication skills, highly motivated team player. 803-750-5494 or email resume mysmiledoc@bellsouth.net.

Rock Hill- Dental Hygienist at Apex Dental works with the general dentist in direct patient care as an important part of the healthcare team promoting better oral health for patients. We provide excellent benefits to staff and care about staff's career path and mutual benefits. Apex_dental@outlook.com.

Irmo dental office needs a dynamic & efficient full time administrative assistant to complete our team. Duties: schedule maintenance, insurance benefits confirmation, collection & posting patient portion. Paid holidays, vacation, 401K & stipend for health insurance. Email sherryrauchdds@gmail.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.

Office for rent in **Surfside Beach**, for afternoons 2:00 or 3:00, Monday-Saturday. 5 operatories, reception, waiting room, lab, lounge, fully equiped. office@dunesdentalservices.com.

Pee Dee Region, SC- Well-established Orthodontic office located on prime real estate. Consistently producing \$830,000 per year, this spacious office has one private treatment room along with a large bay with 5 chairs. The real estate is valued at \$335,000. Contact Henry Schein Professional Practice Transition Sales Consultant Courtney Howell Robinson, 843-324-0703, courtney.robinson@henryschein.com. #SC117

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 McGill & Hill transitions@mcgillhillgroup.com.

Metro Columbia- Profitable practice located in a stand-alone building with great street visibility and ample parking. The office has 3 ops, with room for expansion and is completely digital. The practice is almost 100% FFS, generating \$635K on a 4-day work week. SC-6269 AFTCO 800.232.3826

\$1.2M Endo Practice: Up-to-date practice in a great coastal location, collecting \$1.2M per year with excellent cash flow. This turnkey office is fully computerized with integrated digital X-rays, a CBCT, and Endovision software. This practice is 100% FFS. SC-6259 Contact: AFTCO 800.232.3826

Associate with Buy-in Opportunity: **Lexington** practice collecting \$1.6M per year is looking for an associate interested in a future equal ownership buy-in opportunity. The office is fully digital with 8 ops. This well-established practice has a strong FFS patient base and an experienced staff. SC-6247 Contact: AFTCO 800.232.3826

Established and fully equipped dental practice for sale in **North Augusta, SC**. Four operatories, new PAN/CBCT, Tru Def scanner, digital x-rays, and all software installed and functioning. 1660 sq feet. On average grossing \$485,000/year for the last 3 years. Fully equipped and ready to function immediately. Financing available nasmilecareers@gmail.com.

Spartanburg- Dental office available 1463 E. Main St, previously occupied by a pedodontist. To inquire please call 864-583-4110.

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.

North Charleston, SC- Gorgeous 3 op, General practice just 1 mile off I-26. Seller would like to close by soon. For details contact Courtney Howell Robinson, 843-324-0703, courtney.robinson@henryschein.com. #SC1118

Columbia SC practice for sale. Well established dental practice with a loyal patient base. Gross receipts of \$711,000 in 2019. Located on the northeast side of Columbia with 4 trx rooms and digital technology. Mixture of FFS and PPO. Great practice! mary@jpatransitions.com.

Turn key Dental space for lease in **Seneca**. The space is 2,500 SF and includes 6 exam rooms, lab, x-ray room, break room, office, reception/file storage and waiting area. Contact Grayson Burgess, CCIM 864-770-3288 or grayson@tbccre.com.

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.

For sale: Dental equipment, chairs, lights, cabinetry, x-ray. Call 803-783-2686.

Light fantastics, syringe pedestals, moss cephalometric, x-ray, compressor, whip mix, cuspidor, boyd stool, antique cabinets, lab equipment, mobile x-ray shield. **Questions 803-781-3131.**

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