Save the Date!

151st TDA Annual Session - Friday, May 4 - Sunday, May 6, 2018
Franklin Marriott Cool Springs, Franklin, Tennessee

The 151st TDA Annual Session, to be held May 4-6, 2018, at the Franklin Marriott Cool Springs in Franklin, Tennessee offers a great lineup of continuing education courses for you and every member of your dental team.

To date, the line-up of speakers and their course titles include:

- Dr. Doug Lambert: Simple Solutions to Esthetic Excellence – The Direct Composite Experience and S.M.A.R.T. Dentistry for Your Practice
- Dr. Donald Tyndall: Digital Radiography and Digital CAD/CAM Radiography
- Dr. George Bruder: Current Scientific Evidence in Endodontic Therapy
- Dr. Laurie Trost: Become a WOW Dental Assistant: Smart, Prepared and Efficient and Streamlining Posterior Composite Placement for the Busy Practice
- Heidi Arndt: Grand Slam Hygiene Exam and Dental Hygienists: Partners in Success

continued on page 2

New TDA Health Plan Available

It is becoming more apparent that the Affordable Care Act (ACA) is going to be here to stay, at least for the foreseeable future. This has left many with fewer choices of carriers, fewer plans, smaller networks and higher costs. About a year ago, The Tennessee Dental Association, together with The TDA Insurance Agency, began working on a healthcare solution to provide TDA members with high quality health benefits for themselves, their spouses and their staff at affordable rates.

What is the TDA Health Plan?

The TD Consortium Benefits Trust (TDC Benefit Plan) was formed. The trust then applied for and received a certificate of authority from the State of Tennessee to operate as a qualified multiple employer welfare arrangement (MEWA) in the state of Tennessee. This Certificate of Authority allows the TDC Benefit Plan to offer health plans to the TDA members. The Trust is a private, self-funded health benefit plan providing health benefits exclusively to members, their families and employees.

How does the TDC Benefit Plan Work?

The TDC Benefit Plan is an employer plan, which means offices that enroll in the plan will be required to offer the plan to all full-time employees. Full-time employees is defined by the ACA as those employees working a minimum of 25-30 hours per week. Your office can set the minimum eligibility requirement between 25-30 hours.

Does the employer have to pay any of the costs for the employees?

No. Employer contributions are not required. However, if an employer chooses to make a contribution toward the cost of the plan, it must be done on a non-discriminatory basis.

Are there participation requirements for the employer group?

Yes. The employer does have to meet minimal participation requirements. Employees are allowed to decline the coverage by completing a waiver form. Employees declining the coverage because they...
Save the Date...
continued from page 1

Theresa Groody: Perfecting the Provisional Crown Process: Differentiating Materials & Methods and ABC of Restorative Procedures

Rene Graham: From Risk to Results: Periodontal Instrumentation for the Advanced Practitioner and Managing Dental Hypersensitivity: A Continuous Care Strategy

Amy Kirsch: Improving Teamwork and Six Strategies of Successful Dental Practices

Debra Isman: Reactivating and Retaining Patients Through Your Recall System and Way to Say and How to Say It

The TDA is proud to announce one of the country’s funniest and clean stand-up comedians Mr. Henry Cho, from Knoxville, Tennessee who will provide the entertainment during the President’s Party on Saturday, May 5th. Come prepared to laugh!

Sleeping rooms at the Franklin Marriott Cool Springs are reasonable at $179 per night. This rate includes free parking and a free continental breakfast which will includes several hot items. To make your hotel reservations, please call 800-228-9290 and state you are with the TDA.

We hope you mark May 4-6, 2018 on your calendar and make plans to join us in Franklin!

The 2018 Preregistration Brochure will be mailed soon!

Huge Win for Fluoridation in Jonesborough!

The TDA successfully worked alongside the Department of Health, East Tennessee State University (ETSU) faculty, Tennessee Dental Hygienists Association (TDHA) and others. Kudos to TDA member Dr. Allen Burleson with the help of Florida dentist Dr. Johnny Johnson among many others who led the charge in successfully maintaining fluoridation in the town of Jonesborough.

In a stunning turn of events due to the efforts of many, Jonesborough voted 4-0 to retain community water fluoridation (CWF) after voting it out 3-1 just several weeks ago. True teamwork!

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ACE Reports Can Be Printed From the TDA’s Website

ACE reports can be printed directly from the TDA’s website - at any time. Go to tndentalassociation.com.

When credit for courses attended does not appear on a report, it is the responsibility of the individual CE participant to resubmit a “Certificate of Attendance/Completion.”

Request for CE credit should be accompanied by a “Certificate of Attendance/Completion” and may either be faxed to 615-628-0214; scanned and then emailed to tda@tenndental.org or mailed to TDA, 660 Bakers Bridge Ave., Suite 300, Franklin, TN 37067. Please wait 4-6 weeks for additions and/or corrections to be recorded and posted to the website.

Credit for study clubs can only be submitted by the continuing education representative of that group. Individual requests for study club credit will be not be granted.

Call the TDA Before You Move

Did you know that a move to another city or state could affect your membership? Please contact our membership director, Jonzie Holloway at the TDA Executive office before you move so she can review and update your membership records. Nashville area (615) 628-0208 or email jjh@tenndental.org

Important: Even if you update your information online via the ADA’s website, you will still need to contact the TDA.
Dr. Richard Dycus, President of the TDA, recently met with US Congressman Diane Black who is the US House Budget Chairperson. Representative Black has announced that she will be running for Governor of Tennessee.

Change in Your Membership Category?

Your 2018 Membership Dues Statement will be printed in late November 2017. In order for you to receive an accurate statement, please contact the TDA Executive Office if:

- You plan to retire on or before March 31, 2018 – Please request an Affidavit for Retired Membership; or if
- You qualify for reduced dues because of disability or financial hardship – Please request a Waiver of Dues form.

The procedure for processing each type of application takes a minimum of two months to complete, so please contact our membership director Jonsie Holloway at the TDA Executive Office (615) 628-0208 immediately if you require one of these forms.

“I only have one regret about selling my practice. I should have called Dr. Earl Douglas sooner.”

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Earl Douglas, DDS, MBA, BVSc
Hales from Cumberland, MD
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earl@adssouth.com

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James J. Heward, CMD
Former President of Howard Dental Group
Laurel, MD
(910) 523-1430
jim@adssouth.com

ALABAMA, MISSISSIPPI, SOUTH CAROLINA, VIRGINIA
Rebecca Kyatt
(205) 233-8094
rebecca@adssouth.com

OFFICE MANAGER
Virginia Douglas
(770) 564-1982
vjdouglas@adssouth.com
have other coverage available to them will not count toward the participation requirement.

For example: An employer has 5 full-time employees (as defined by the employer). Two of those employees waive the coverage because they have other coverage. One declines the coverage because they do not want to pay and one person wants to participate.

<table>
<thead>
<tr>
<th>Eligible Employees</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid Waivers</td>
<td>2</td>
</tr>
<tr>
<td>Eligibles</td>
<td>3</td>
</tr>
<tr>
<td>Participants</td>
<td>1</td>
</tr>
</tbody>
</table>

Eligibles: 3
33% participation

The TDC Benefit Plan has set the required participation level at greater than 25%. In the example above the employer meets the 25% requirement.

Why should I offer an employer plan?

Employer plans have always been considered a recruitment and retention tool to hire and retain good employees.

In addition, in an employer plan, the employee premiums can be paid through payroll deduction. The payroll deduction payments can be made with pre-tax dollars. By paying with pre-tax dollars, the employee does not pay federal or social security taxes on the cost of their insurance. This is not only beneficial to the employees, but the employer will also save the social security matching, as well.

What Plans are offered by The TDA Plan?

THE TDC Benefit Plan offers 6 different plans with deductibles ranging from $500 to $5,000, including two plans that qualify for Health Savings Accounts. The Comparison of plans can be found at tdainsurance.com. The employer can choose to offer multiple plans, within certain limits. This will enable each participant to select a plan that meets their needs and budget.

Is there a network of hospitals and doctors?

Yes. TDC Benefit Plan has partnered with Allied Benefits as the Third Party Administrator. Allied will be responsible for paying claims, billing the employer groups and has provided access to an extensive network of providers and hospitals. The MultiPlan network is part of the PHCS national network. To search for hospitals and providers in your area visit http://www.multiplan.com/search/search-2.cfm?originator=84451

Are there prescription drug benefits?

Yes. The prescription drug coverage is included in the plan, with several plans offering co-pays on prescription drugs as low as $15.

How can I enroll?

The web-site, tdainsurance.com, has all of the forms available to get started. The first step is to complete a census. The census will give the information necessary to obtain a preliminary quote on the cost of the various plans. The information needed is name, birthdate, gender and home zip code of each employee along with the Tier for which they’re applying. Tiers are defined as follows; EE – Employee Only; EC – Employee + Child(ren); ES – Employee + Spouse; or FAM – Full Family (Employee, Spouse + Child(ren).

From that information, we can prepare and send to you a preliminary quote, showing the cost for each plan.

Each employee will then need to complete a Personal Health Questionnaire (PHQ) or a Waiver Form, if electing not to participate. Upon receipt of the PHQ from each participating employee, final rates will be determined.

At that point, it is just a matter of selecting the plan or plans and enrolling. A TDA Insurance representative will be available to assist you through each step.

How do I get additional information?

The tdainsurance.com web-site has all of the information above. You can also contact the TDA Insurance Agency at 800-347-1109 or email us at tda@assoc-admin.com

There is no assurance that the applicant will meet eligibility requirements or that the quoted rates will be less than the current coverage they possess.
Keep it Real: How to Avoid HIPAA Marketing Scams

By Olivia Wann, JD - Modern Practice Solutions (endorsed by the TDA)

Has your dental office received a phone call stating the following: “My name is XX. I’m calling your office today to conduct your mandatory HIPAA Security Risk Assessment that’s required by the Department of Health and Human Services…”

Our office has received numerous phone calls from dental practices throughout Tennessee indicating that they have received this same call from a professional, government-sounding person. The caller implies that he/she is a HIPAA auditor although they do not refer to themselves as a federal agency.

Some of the front desk personnel have given information to the caller believing it was the government and that they were required to comply.

First of all, we must be aware that a Risk Assessment is required under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Security Rule. The Risk Assessment helps covered entities such as a dental practice identify the threats and vulnerabilities to the electronic protected health information (ePHI). The Risk Assessment determines compliance with the physical, technical, and administrative safeguards.

These telephone calls are not from the government, but instead a deceptive marketing technique to sell a HIPAA Security Risk Assessment service. Although the practice would be purchasing a Risk Assessment, the manner in which the service is sold is quite misleading. The dental practice team member is led to believe that they are communicating with the government.

If you receive correspondence or notification from the Department from Human Services, typically the first communication is by hard copy letter received through the mail and clearly identified on a government letterhead. Thereafter, communications usually take place via email or through the agency’s portal.

With this in mind, do not give out your compliance information over the telephone. Your team members should be trained to route compliance calls such as this to your compliance officer, the office manager, or the dentist(s) who own the practice.

For more information, contact Olivia Wann, Modern Practice Solutions (endorsed by the TDA) at olivia@oliviawann.com or 931-232-7738.

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My Journey
By Dr. George A. Adams, Sr

Benefits of Membership in Organized Dentistry

Recently, one of my personal physicians and confidant, said that I had a story to tell that could possibly help other people. The purpose of this article is to tell the story of my accident, the care I received, and to thank everyone for their support through this difficult journey. So, here it goes.

On July 17, 2007, while on vacation in Hawaii, I was run over by a car and seriously injured. We were in Maui staying at Kapalua and I was then flown to Honolulu where I was admitted to Queens Hospital, a level one Trauma Center, for stabilization and exploratory surgery. My wife was told that I was in critical condition with extensive internal injuries and had less than five percent chance to survive. Ten days later, I was discharged for transportation to Vanderbilt Trauma Center for further care. AirMed, based in Birmingham, Alabama, came over and flew me to Nashville. I arrived in eight hours and change. My son-in-law, Allen Cox, who is a pilot for Jet Blue, told me later that medical jets get air route priorities over other aircraft. I do not remember the flight as I was heavily sedated.

Once I arrived at Vanderbilt, the doctors were given the task of assessing the extent of my injuries, how to treat them, and developing a rehabilitation plan. They discovered that I had a severely fractured pelvis and other internal injuries. My pelvic surgeon said that it was the worst fracture he had seen in years and would consult with his colleagues throughout the country on how to best repair it. Days went by and finally he announced that he had developed a treatment plan. My first major surgery took twelve hours but he came to my room that night to inform us that it was not successful, after reviewing radiographs and scans, and I would require another surgery. The next day, I had another surgery that again lasted twelve hours. This time he was happy. I required approximately twenty other surgeries before I was discharged after three months of treatment.

Rehabilitation came next. I was fortunate to have a physical therapist, Colonel John Purdy, who was a Vietnam veteran who had also suffered major injuries when his helicopter pilot had him jump out from a height that he underestimated. He could relate to my injury. I told him to push me as hard as possible as I had a daughter who was getting married in April and I was determined to walk her down the aisle. He put me through the paces as I had to learn to walk all over again. I went from a wheelchair to a walker and finally a cane. The wedding day came and I did walk her down the aisle and did the customary first dance at the reception. I am now able to walk without a cane and can play golf.

Many people called to check on my status so my son and daughter set up a Caring Bridge web site to keep everyone up to date. I was later told that many of my friends and colleagues from around the world kept in touch. This was amazing. Many people came to see me while I was in the hospital. I remember Dave and Pat Horvat coming by one day even though they had a son who was also in the hospital with a serious illness. I also remember my good friend and fellow Pediatric Dentist, Charlie Burdeshaw, who happens to be an Episcopal Deacon, come to visit and pray with me. Many more of you came to visit and I thank you. This was a difficult time for me as I did not know what the future held for me or if I would make it. Many dentists came to my office to volunteer their time and help my son run a very busy pediatric dental practice. I want to thank all of you and if I leave out anyone, please forgive me, as I was not there. I want to especially thank Drs. Harold Fredericks, Joel Gluck, Robert Sims, John Stritikus, Justin Robbins, and Mike Tabor as the staff said they were always there. One funny story I heard was another good friend and faithful volunteer, Doug Nally, was working on a thirteen-year-old girl while my son was working on a four-year-old. Well it seems that the four-year-old had the best behavior and Doug wanted to swap patients. George responded with a laugh and told him he better stick with the older child. Finally, I want to thank Drs. Joseph Faiz, Jack Mallette and Steve Holmes who came into the practice to fill in for me until I could return. These three men did an outstanding job with the care and treatment of my patients. I owe all of them an eternal pledge of gratitude. The practice actually did very well that year I was out. Guess I was not so vital.

What this traumatic event taught me is that life can throw you a curve ball at any time and that you have friends and colleagues who care about you and have your back. It also showed me the importance of membership in organized dentistry and how fellow dentists are there in your time of need. I thank all of you from the bottom of my heart for your support and prayers through this difficult time in my life. I could have not made it without you.

I am now retired from clinical dentistry but remain active by attending local and state meetings, teaching at the Interfaith Dental Clinic and Volunteer State Community College, and serving the Board of Dentistry as a consultant and member of the sedation committee. I could not have written this narrative until now, but time heals many physical and mental injuries. If I can ever be of help to any of you in a time of need, please feel free to contact me at drgeorgeadamssr@yahoo.com. I will be there for you.
OSHA & HIPAA COMPLIANCE

Learn what’s new. OSHA fines increased 78%. Infection control breaches have been widely publicized in the media. Are you in compliance and promoting safety for your patients and staff members?

HIPAA continues to challenge practices. You can go online and read about breaches of unsecured PHI affecting 500 or more individuals as required by section 13402(a)(4) of the HITECH Act which includes the names of private providers.

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Hello new dentists! The TDA office has been working hard over the summer to release our new website, and it’s finally here! The website is www.tndentalassociation.com. It has all kinds of information about continuing education, loan refinancing, and new members benefits and resources. Be sure to check it out if you haven’t already!

One of the newest member benefits is the TDA’s group health plan. It was uniquely created for TDA members and will become available effective October 1st, 2017. There are six different medical plans available to meet your specific needs. If you are new to a practice or starting a practice, this could be a great asset for you and your office. Visit tdainsurance.com for more information on the group health plan and other insurances offered by the TDA Insurance Agency.

Lastly, don’t miss out on the New Dentist Conference at the ADA Annual Session on October 19th-21st. It’s in Atlanta this year, making travel very convenient. There’s an excellent group of speakers planned specifically for new dentists, not to mention all of the quality CE offered by the ADA. There will also be a week of fun events including a block party, receptions, a huge exhibit hall, and the opening session with our very own Tennessee Vol Peyton Manning! This is a meeting you won’t want to miss!

Respectfully yours,
Beth Randall
Chair of the New Dentist Committee
TDA Endorsed Member Services
The TDA endorses the following services available to you as a member. Please contact any of the endorsed companies to obtain TDA member rates.

AHI Travel: Guided tours across the globe. 844-205-1171 or http://ada.ahitravel.com

AWA: Collection Service: www.awacoll.com 1-866-260-3631 or email clientservices@awacoll.com

Baker, Donelson, Bearman, Caldwell & Berkowitz, PC: Contact Mr. Ed Young, Labor Relations Attorney - 901-577-2341

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Elavon: Credit Card Processing - 800-226-9332 ext 8942 or donna.taylor@elavon.com

eScapes Dental TV: Private television channel provides therapeutic relaxation television programming designed to relax patients and viewers. 734-682-3409 or www.escapesdentaltv.com/tnt

InTouch Practice Communications: Message on Hold. 1-877-493-9003 or www.InTouchDental.com

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Solmetex: Amalgam Separator Equipment - 1-800-216-5505 or www.solmetex.com

SurePayroll: Payroll Solution - 1-866-535-3592 or www.surepayroll.com/ada

TDA Glove Program: Examination gloves and other disposable dental products - 877-484-6149 or www.tdagloves.com

TDA Insurance Agency, Inc.: Personal & Business Insurance Programs - 1-800-347-1109 or www.TDAinsurance.com

UPS: Shipping. 1-800-MEMBERS (800-636-2377) or visit www.savewithups.com/ada

Whirlpool: Appliances for home or office - ADA Group Code: ADA5A2775 - call 1-866-808-9274 or visit www.whirlpoolinsidepass.com

ADA Launches National Digital Advertising Campaign
Campaign Seeks to Help Prospective Patients Find ADA Member Dentists

The ADA recently launched a new national digital advertising campaign to encourage adults to visit a dentist. The campaign is set to reach 19.6 million prospective patients and connect them with ADA member dentists.

The campaign launch is the first phase of a planned $18 million, three-year initiative.

The online ads are a mix of search advertising, sponsored Facebook posts and animated display advertising. Those who click on the ads will be sent to the ADA’s Find-a-Dentist online search tool.

The campaign uses the tagline “your teeth are amazing” to help reinforce the importance of taking care your teeth. “Your teeth can bite with 200 pounds of force,” one ad says. “But they can’t stop cavities on their own. Your teeth are amazing. Your ADA dentist can keep them that way.”

“ADA dentists make a substantial impact on the health and well-being of their communities,” said Dr. Joseph P. Crowley, ADA president-elect. “Our research indicated that many people understand the importance of regular dental visits, but their busy lives get in the way of scheduling an appointment. This campaign reminds them that seeing a dentist is an important part of taking care of their teeth.”

The online search tool allows prospective patients to easily find an ADA member based on distance and office hours, and it allows patients to contact the practice via email or phone to make appointments.

The ADA House of Delegates approved the initiative at its 2016 annual meeting, which is based on research insights from the ADA Health Policy Institute and a comprehensive study to identify prospective patients most likely to seek oral health care.
Over the warm and humid weekend of August 11th and 12th, 2017, on the nature filled, beautiful grounds of R T Lodge in Maryville, Tennessee, over 75 dental professionals and their spouses attended the annual retreat of the TDA’s Dental Professional Wellness Committee.

The retreat has been renamed the Annual Dr. Mac TDA Wellness Retreat in honor of Dr. Wayne McElhinney. Dr. McElhinney retired, after over 10 years of service, as the Director of the Committee June 30 of this year. Dr. Sain, the new director, presented Dr. McElhinney a plaque honoring Dr. David Sain for his service to the Committee.

There were over five gifted and knowledgeable speakers. For example, the first speaker was Dr. Brett Kessler, a general dentist in Colorado. Dr. Kessler served as the president of the Colorado Dental Association and is chair of the Dental Well Being Committee. In his presentation, he shared very personal and touching stories detailing his battle with chemical dependency, acknowledging the people and methods of treatment that helped him, and the challenges he encountered along his path to sobriety. He stressed the importance of balancing work, leisure, and family activities as a key to a healthy lifestyle. His knowledge and understanding of the disease of addiction was educational as well as motivational.

Ms. Jennifer Putnam, Assistant General Counsel with the Office of General Counsel for the Tennessee Department of Health, conducted an enlightening discussion addressing her role in representing the Tennessee Department of Health as the Tennessee Board of Dentistry’s attorney. She detailed her responsibilities to insure the safety of patients in the State of Tennessee. Ms. Putnam also explained her role in the process of working with the Wellness Committee while they advocate for the dental professionals. She stated our Wellness Committee’s input was essential for her to perform her duties. The Wellness Committee is very appreciative of Ms. Putnam’s knowledge, expertise, and willingness to work with our committee in all aspects of cases that come before the Board.

Other presentations were made by Dr. David Sain, Dr. Wayne McElhinney, and Dr. Brian Fingerson. The entire weekend was considered as a great success.

Interested in a NEW Health Plan Solution for TDA Members?

Spiraling healthcare costs represent an enormous challenge to the profitability of dentists and their employees. Employers and staff are facing increasing costs and less flexible plans with higher and higher deductibles. The new TDA Health Plan is your solution to receive high quality health benefits for yourself and your staff at affordable rates.

To learn more and to receive a quote, contact us! We are licensed insurance agents, and will work to make sure you get the best plan available. You can be assured that we have your best interest at heart.
Can You Pass These 10 Safety Challenges?

By Olivia Wann, JD - Modern Practice Solutions (endorsed by the TDA)

In my role as a consultant, I have the opportunity to audit dental practices and provide recommendations for job safety and compliance with the Occupational Safety and Health Administration (OSHA) and the Centers for Disease Control and Prevention (CDC). We see common challenges being faced in today’s practice, whether it’s general or specialty. Based on the information compiled from our firm’s site audits last year, we prepared the top 10 safety and infection prevention challenges. You may find it helpful to compare how well your office is overcoming these difficulties and set new goals for 2017.

#1. Work Exposure Control Plan
According to the Bloodborne Pathogens Standard 1910.1030(c) (1) (iv) (A), the Work Exposure Control Plan shall be reviewed and updated annually. During site visits, we note that either the Work Exposure Control is outdated, incomplete, or missing entirely. Merely purchasing an OSHA compliance manual does not suffice for customizing the Work Exposure Control Plan to reflect the needs of your practice.

#2. Infection Prevention Plan
When we audit a practice’s documentation, we rarely find written infection prevention policies and procedures. According to the CDC’s Summary of Infection Prevention Practices in Dental Settings, offices must “develop and maintain written infection prevention policies and procedures to be reassessed at least annually and assign at least one trained individual the responsibility of coordinating the program.” Unfortunately, some practices opine that if the area we are assessing is a “guideline” or a “recommendation” and not a state or federal requirement, the topic’s importance is discredited. However, if the state dental board adopts the CDC recommendations, it becomes regulatory in that state. We emphasize to the dental groups we see common challenges being faced in today’s practice, whether it’s general or specialty. Based on the information compiled from our firm’s site audits last year, we prepared the top 10 safety and infection prevention challenges. You may find it helpful to compare how well your office is overcoming these difficulties and set new goals for 2017.

#3. Medical Device Evaluations
The Bloodborne Pathogens Standard indicates that we must document annual consideration and implementation of safer medical devices. In doing so, we allow the clinical personnel to provide input. Our experience in auditing dental practices is that such documentation is never in place unless the practice has worked with a consultant. On the other hand, we note that safer devices may very well be in use. The practice simply must get into the routine of documenting such evaluations and the devices selected.

#4. Personal Protective Equipment (PPE)
We have not been in a dental office that did not provide PPE. However, we often note that clinical team members do not wear utility gloves to handle loose contaminated instruments.

According to the Organization for Safety and Asepsis Prevention, utility gloves are put on before removing instruments from the treatment room. After removing the instruments, wash the gloves and proceed to clean and disinfect with the gloves on. After completion, wash the hands and don exam gloves. In the average setting, we see assistants and hygienists wearing exam gloves during operatory and instrument processing. We also note that sterile surgical gloves are not used for surgical procedures, which are defined by the CDC to include biopsy, periodontal surgery, apical surgery, implant surgery, and surgical extractions. Masks are also a common infraction. Masks are single use and are changed between patients. We often find masks worn for an entire morning, stored in pockets, on counter tops or worn under the chin.

#5. Transport Containers
The use of transport containers is rarely noted during a site visit. According to the CDC, loose contaminated instruments must be transported in a covered container.

We observe greater efficiency and safety among practices using an instrument management system. All instruments necessary for each type of procedure are held securely in each cassette. This minimizes how often team members handle the loose, contaminated instruments as a work practice control. The cassette lid is closed and locked, keeping the instruments secure in place for transportation. In the sterilization area, the cassette and instruments are then cleaned, dried, wrapped/pouched, sterilized, and stored.

#6. Sterilization Monitoring
Most dental team members are aware that the sterilizers must be monitored weekly with a biological monitor. However, we often see interruptions in the monitoring logs. We suggest maintaining a quality control system to allow either the practice owner(s) or clinical management personnel to easily review task logs.

We also suggest utilizing class 5 integrators at least daily to assess all parameters for sterilization. Rather than risk failure and having to notify patients of their potential risk of infection, tighten the quality control system internally and detect system failure before someone’s safety is compromised.

#7. Instrument Storage
Our follow-up reports often contain information regarding compromised instrument packs. Damp or torn packaging and packs with instruments poking through are not considered sterile. Never use compromised packs for patient care. Packs should remain...
wrapped until point of use. To prevent damp packaging, the instruments/cassettes must be completely dry prior to placing into a pouch or wrapping. Additionally, the sterilizer should never be open prior to the drying cycle being complete.

#8. Hazard Communication Plan

OSHA requires a written plan. We find that a practice may have a plan from years ago but never updated the program to include appropriate training, labels, signage, Safety Data Sheets, a list of chemicals in use known as a Chemical Inventory, and the most recent updates.

OSHA’s adoption of the Globally Harmonized System of Classification and Labeling System known as GHS requires dental practices to update this area of compliance. Replace outdated 12-section Material Data Sheets with the new 16-section format Safety Data Sheet (SDS). GHS standardized signal words, pictograms, and hazard statements.

Label any secondary containers with the appropriate warning listed on the SDS. Examples include high-level disinfectant bins, surface disinfectant bottles, alcohol containers, tray cleaner containers, etc.

#9. Waste Disposal

Create a medical waste program and properly segregate biohazardous waste in the appropriately labeled containers. We cannot overlook the other types of waste generated such as hazardous and pharmaceutical waste.

According to the Environmental Protection Agency, waste generators must ensure that hazardous waste is appropriately identified and handled safely for the protection of humans and the environment.

Pharmaceutical waste and hazardous chemicals must be disposed of properly and in accordance with federal, state, and local regulations. Consult the SDS for disposal instructions and partner with a vendor that can help you manage and dispose of waste properly. Discarding expired medications, anesthetic carpules, and toxic chemicals inappropriately has been observed in numerous dental office settings.

#10. Dental Unit Water Quality

Unless properly treated, poor water line quality can compromise the health of both the patient and the dental worker.

All dental units must meet the safe drinking water standard (ie, less than 500 CFU/mL of heterotrophic water bacteria). Simply installing a water bottle system is not sufficient in itself. The waterlines must be both cleaned and maintained. If you are using a waterline product, consult the manufacturer’s instructions for maintenance, cleaning, and monitoring procedures. We often find that the water has never been tested and once performed, the results maybe alarming.

Conclusion

Compare how your office measures up to these areas of compliance. We encourage you to download the CDC’s Infection Prevention Checklist athttps://www.cdc.gov/oralhealth/infectioncontrol/pdf/safe-care-checklist.pdf. Taking the time to compare your practice’s compliance with the guidelines promotes safety for your patients and your entire dental team.

Disclosure

The author received an honorarium from Hu-Friedy for writing this article.

Suggested Reading


About the Author

Olivia Wann, RDA, JD, is a consultant and founding member of Modern Practice Solutions (www.dentalcompliancetn.com) (Endorsed by the TDA) in Dover, Tennessee.

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INTRODUCTION

Working in the dental profession can be emotionally stressful, physically demanding, and mentally exhausting. As dental professionals, we are only human, but many times feel the pressure to perform with superhuman perfection and at an unrealistic pace. Recognizing this potential problem, the Tennessee Dental Association (TDA) established the Wellness Committee in 1981. Since that time, it has discretely assisted hundreds of our dentists, hygienists, and assistants practicing in the state of Tennessee when they might succumb to difficulties that are capable of affecting their performance.

For example, we have assisted in situations where age-related decline in performance is cause for the staff and/or family to be concerned. This decline in performance may be physical, emotional, and/or mental. Sometimes our loved ones spot this decline in performance before we do. It is sad to see a dental professional who has dedicated their life to his or her profession and patients decline to the point that they need to be encouraged to retire, seek medical help, or other opportunities. Even worse is if the Tennessee Board of Dentistry needed to take action. Dealing with these difficult situations is what we do.

There are many chronic diseases that can cause a decline in performance long before age is an issue. Diabetics need to be aware of their disease’s effect on their eyes and peripheral neurological function. Hypertension, which may lead to strokes, might affect performance. Arthritis, back and neck dysfunction, and pain can hinder the ability to function optimally. It is not uncommon for our colleagues to become dependent on opioids while attempting to manage pain that might be secondary to practicing our dental profession. It would be sad to see the Tennessee Board of Dentistry take punitive action against a colleague who is struggling with a chronic disease that might affect his or her professional performance. Again, dealing with these challenging circumstances before dental professionals and patients suffer, is what we do.

By far, the most common condition we assist with is what is now termed substance use disorder (SUD). The Centers for Disease Control (CDC) has called the opioid dependency in our country an “epidemic.”1 Drug overdoses accounted for 52,404 deaths in the United States in 2015 and approximately 63% involved an opioid.2 Of

1 Drug overdoses accounted for 52,404 deaths in the United States in 2015 and approximately 63% involved an opioid.2

Your Tennessee Dental Association’s Wellness Committee—How It Works

Your Wellness Committee was recognized as the best in the nation by the American Association of Dental Boards. Far from sitting on our laurels, we have been updating, innovating, and reaching for new heights in serving the members of the Tennessee Dental Association and all the participants that provide dental services to the patients of Tennessee. That brings us to our recently rewritten mission. It has been suggested if one’s mission is too long to fit on a tee shirt, it is not useful for those who are trying to live it. Being too long also means it is probably meaningless to those who read it. After much thought, rewriting and eliminating words, our committee decided on: Restoring lives to a life worth living, saving careers, and thereby serving the dental patients of Tennessee.
the overdose deaths, approximately half involved an opioid obtained from a prescription. Each year in the United States it is estimated that prescription opioid overdose, abuse, and dependence cost approximately $79 billion. These facts should call our attention for the necessity of prudent prescription writing.

This epidemic affects the public at large but also takes a toll on our colleagues, patients and families as well. This is even more reason to understand this disease and how our Committee can benefit you.

Substance use disorder is classified as a chronic disease much like diabetes, hypertension, obesity, and rheumatoid arthritis. Studies have shown that at least 10% of the general population will have a SUD at some point in their life. Many assume it is higher among health care professionals due to a plethora of reasons such as easy access to prescription medication and the stress associated with our profession. Much like other chronic diseases, studies have led experts to report that at least 40% (and some report as high as 60%) of SUD is due to genetic factors.

By definition, chronic diseases are multifactorial in nature, leading to multifactorial control of the disease. There is no “one size fits all” cure nor is there one treatment to cure a chronic disease. Therefore, most chronic diseases tend to be hard to manage. Some authors report only 30% of the population that have a chronic disease have it maintained well at any one time. Long-term follow-up and support are key to keeping any chronic condition at bay.

Having been recognized as the top Wellness Committee in the United States did not happen by accident. It is the long-term follow up and support that has afforded us an approximately 90% success rate. Like most successful endeavors, a well thought out system or approach that is developed, instituted, and followed are the keys to success. This approach has been proven to “restore lives, save careers, and thereby serve dental patients of Tennessee.”

THE SYSTEM (FIGURE 1)

Identification

Normally, the first step in assisting a colleague is having the individual identified as having some difficulty that may be interfering with their professional performance. These leads can come from many different sources including patients, staff members, colleagues, friends, and family members. Also a colleague may self-report, asking for help, direction, and support. You as a member have an important role to play in the identification process. This is an ethical obligation which we all share. The ADA states, “All dentists have an ethical obligation to urge chemically impaired colleagues to seek treatment. Dentists with first-hand knowledge that a colleague is practicing dentistry while impaired have an ethical responsibility to report such evidence to the professional assistance committee of a dental association.” To know and do nothing could cost a colleague, patient, or family member their life.

You can feel absolutely safe when reporting information to us. Your identity will not be shared with anyone, without your permission. This information is absolutely confidential and it cannot even be subpoenaed. While your name will never be revealed, if our recommendations are not followed and we think patients are in danger, we are ethically required to inform the Tennessee Board of Dentistry of our concerns involving the practitioner in question. We will not report who informed us; we only report the dental professional that seems to have a problem along with our concerns.

Each lead has to be evaluated. Some leads are really domestic disputes, and some may be disgruntled employees or disgruntled employers, and some might even be a jealous colleague. All of these situations and factors have to be taken into consideration, research has to be done, and a decision has to be made whether an intervention is indicated.

Intervention

A professional intervention is not like an intervention that you may have seen on television or YouTube. A professional intervention is simply colleagues sharing their concern with another colleague. The goal of an intervention is for the person in question to obtain an evaluation. We are not physicians and we do not diagnose or treat SUD. There are trained addiction medical professionals that are approved by the Board of Dentistry that can and will give a medical diagnosis and treatment plan, if it is indicated.

Treatment

Treatment for SUD can be delivered in many forms, such as: residential, outpatient, intensive outpatient, medicines, psychological, psychiatric or a combination of any of the above. Historically, high-risk professionals, such as physicians, dentists, and airline pilots, have received long-term residential treatment for three months or more. Often hygienists and dental assistants may receive shorter, less intense treatment but follow up and accountability normally remain the same.

Remember, SUD is a chronic condition. It cannot be treated like an acute illness that is cured. When formal treatment is completed the patient is normally released with a recommended plan to follow to continue his recovery in a healthy way. These recommendations are critical for long-term success and this is where your Wellness Committee lends its support, guidance, and experience.

After Treatment Contract

The post-treatment recommendation of the treatment center and recommendations which we have found helpful are gathered in the form of a contract. This contract is between the treated individual and the Wellness Committee. It basically states if the individual will follow the guidelines laid out by the treatment facility and our Committee, the individual will receive our advocacy whenever and wherever needed.

This advocacy is sometimes needed with the Tennessee Board of Dentistry, with insurance companies, employers, and occasionally, with other forms of local, state, and federal law enforcement. Our advocacy comes in the form of stating the individual has a disease, it has been successfully treated, and the disease is under control. Further, our advocacy informs the concerned institution that the individual is fit and able to practice dentistry in a safe and competent manner. Historically, because of the reputation of the Wellness Committee, our advocacy carries substantial weight with institutions that might be concerned. This is becoming more and more...
WELLNESS CLIENT FLOW

Identification ➔ Intervention ➔ Evaluation ➔ Treatment ➔ After Tx Contract ➔ ON CONTRACT

Phase I ➔ Phase II ➔ Phase III ➔ Phase IV

No Tx Needed ➔ Report to Board

Relapse ➔ Release

ON CONTRACT

TDA NEWS  September 2017
important as nicotine, alcohol, and drug screening become a part of hiring practices and other employment decisions as well as the ability to become medically insured.

On Contract
Most contracts cover a five-year period following successful treatment. While there are a number of phases involved, accountability and documentation are the hallmark of this period of recovery. As a Committee, we want to be able to substantiate sobriety and recovery so our advocacy can be trusted.

Most contacts include requirements such as: random drug test, daily or weekly support meetings (like Alcoholics Anonymous), weekly professional support meetings, annual retreats, and professional counseling. A primary care physician is required, which the Committee can communicate with, so any physical complication can be treated successfully and/or monitored. Many of the requirements tend to grow less frequent over the five-year period. Most of the above requirements can be met near the individuals home and around the work schedule.

The goal of the contract period is not only for documentation so advocacy can be supplied, it is really designed so that the individual learns what is necessary to keep this chronic, deadly disease in remission.

Conclusion
If we can help keep this chronic, deadly disease in remission then we have fulfilled our mission to restore a life worth living, save a career and thereby serve the dental patients of Tennessee.

References:
1. Increases in Drug and Opioid-Involved Overdose Deaths—United States, 2010–2015 Weekly / December 30, 2016 / 65(50-51);1445–1452. https://www.cdc.gov/mmwr/volumes/65/wr/mm655051e1.htm

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Nancy J. Williams, R.D.H., Ed.D., Member, Tennessee Dental Association Wellness Committee
Dale Kennedy, D.D.S. Chairman, Tennessee Dental Association Wellness Committee

Call today, don’t wait—the Wellness Committee can be reached by calling: 615-628-3200
All calls are confidential and can be made by an individual in need of assistance or by a friend, family or staff member.
This project is funded under an agreement with the State of Tennessee.

Wellness Committee
(serving the entire dental profession)
We care about you as a person—an individual responsible for taking care of others. Your family, staff and patients all rely on you. If you are not at your best—physically and mentally—it’s hard to handle the stress of it all.
Our Committee is made up of concerned, caring, passionate dentists, dental hygienists and dental assistants operating under State of Tennessee law. Many members on this Committee have suffered themselves.
The Wellness program is here to help find the right professionals to deal with addiction or physiological disorders. The purpose of this program is to afford the professional every opportunity to be rehabilitated and return to a productive life and practice.

Alcoholism • Chemical Dependency • Stress Anxiety • Depression

“I need help…”
TDA Foundation
Contribution Form

With your support, the Tennessee Dental Association Foundation can flourish and grow. Please indicate the amount of your tax-deductible gift below. Donors will be recognized in an upcoming issue of the TDA News. Donors in the “Other” Category will only be listed in the newsletter if requested.

Suggested Levels of Giving:

*LG Noel Fellowship........ $5,000 and above
Diamond Level..................$1,000-$4,900
Gold Level........................$500-$999
Silver Level.......................$200-$499
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I would like to help the TDAF grow by giving $________ today.

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2016-2017 Contributors to the Tennessee Dental Association Foundation

Through the generosity of the individuals and organizations below, a total of $33,900.00 has been raised for the Foundation during its fund drive. Through the TDAF/Noel Fund for Student Research, the TDAF continues to be a supporter of dental student research. With your support, the TDAF can grow for the future of dentistry!

July 1, 2016 – June 30, 2017

Members of the LG Noel Fellowship whose cumulative contributions since December 1994 have totaled $5,000 and above (or have pledged to this level)

- Dr. Ernest J. DeWald
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Exam for 2017 Chemical Dependency CE Article

This article is available to dentists, dental hygienists and dental assistants licensed or registered in Tennessee. With a passing grade, individuals will earn one (1) hour of chemical dependency continuing education credit.

The Wellness Committee will cover the requirements regarding prescription writing next year in the September 2018 TDA News.

This exam is now available online. Visit tndentalassociation.com

1. The Tennessee Dental Association’s Wellness Committee was recognized as one of the _______ Wellness Committees in the nation:
   a. worse
   b. average
   c. typical
   d. best

2. Working in the dental profession can be:
   a. emotionally stressful
   b. physically demanding
   c. mentally exhausting
   d. all of the above

3. By far, the most common condition the Tennessee Dental Association’s Wellness Committee assists in is what is now termed:
   a. substance use disorder (SUD)
   b. age-related decline
   c. diabetic coma
   d. Alzheimer’s

4. Each year in the United States it is estimated that prescription opioid overdose, abuse, and dependence cost approximately ___dollars.
   a. 10 million
   b. 20 million
   c. 79 billion
   d. 10 billion

5. Long-term follow up and support plays an important role in Tennessee Dental Association’s Wellness Committees approximately ___% success rate.
   a. 50
   b. 25
   c. 75
   d. 90

6. According to the ADA, dentists with first-hand knowledge that a colleague is practicing dentistry when impaired have an ethical responsibility to report such evidence to:
   a. Tennessee Board of Dentistry
   b. The professional assistance committee of a dental society
   c. DEA
   d. Local law enforcement

7. You can report a colleague to the Tennessee Dental Association’s Wellness Committee for suspected impairment and be assured of total confidentiality. Your name will never be disclosed without your permission.
   a. true
   b. false

8. The goal of an intervention is for the person in question to obtain ________.
   a. an evaluation
   b. full treatment
   c. a physical
   d. an appointment with a psychologist

9. Historically, high-risk professionals, such as physicians, dentists, and airline pilots, have received long-term residential treatment for _________ months or more.
   a. one
   b. three
   c. nine
   d. twelve

10. Most of the Tennessee Dental Association’s Wellness Committee’s aftercare contacts include requirements like:
    a. random drug test
    b. daily or weekly support meetings (like Alcoholics Anonymous)
    c. weekly professional support meetings
    d. annual retreats
    e. all of the above
TDA Glove Program Offers New Product Categories and Smaller Quantities

TDA members can save even more money on a wide variety of dental supplies offered by the TDA Glove & Supplies program, administered by Association Gloves & Supplies. Nineteen new product lines are now available. These new products are available by the bag, box or carton, rather than by the case. Additional products are being added to categories already offered. Below is a list of the new items added.

New products:
- Mimic alginate
- Mimic Bite Registration, fast, regular and super-fast set
- Mimic VPS impression material, heavy, light and medium body in regular and fast set options
- Mimic Temporary Crown & Bridge material in 3 shades
- Essentials bite registration trays
- Essentials disposable impression trays
- Essentials microbrush applicators
- Essentials prebent needle tips
- Essentials surgical tips
- Essential syringe sleeve
- Evolve stainless steel pediatric crowns
- Joy Etch Syringes and refills
- Joy Desensitizer
- Joyfil Nano-hybrid composite in compules, syringes and flowable refills
- Kangaroo sterilization pouches
- Pristine UltraSonic Cleaning Tablets
- Visionary film barrier envelopes; extended tab envelopes
- Visionary imaging film
- Visionary phosphor imaging plates

These product items are being added to existing product categories:
- Essentials plastic cups
- Essentials air/water syringe, sani-tip style
- Essentials metal core air/water syringe tips
- Essentials plastic core air/water syringe tips-rainbow colors
- Essentials metal air/water syringe tips (autoclavable)
- Dream prophy paste in various flavors and grits
- Dream prophy angles, soft or firm

Some EcoBee bite registration trays and plastic disposable products are still offered by the case, for those seeking value on high-quantity purchases. To place orders, call 877-484-6149. To view the complete product catalog, visit www.tdagloves.com

“Our practice spent $12,821 with one dental supplier in a year’s time on gloves and disposable purchases. Included in that is $540 of shipping and handling charges. We switched to Association Gloves and Supplies in June 2016. In one year, we spent $9,155, a savings of $3,666 in just one year – and got free shipping! Wow, that’s something to get excited about!”


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2017 Tenn-D-Pac / Capital Club Fund Drive

The TDA’s political action committee, Tenn-D-Pac, is hard at work to protect the profession of dentistry! The TDA has been working on the matters that can affect you, such as: hygiene issues, EFDA shortages, repeal of the Professional Privilege Tax, CAQH filing, and much more.

A contribution form for the 2017 Tenn-D-Pac/Capital Club solicitation was mailed in August. Please consider making a contribution by September 30th to enable us to be optimally effective with our legislators prior to the upcoming legislative session. Contributions with dues payments were significantly less than in previous years, so we need your support to build the PAC’s “war chest.” We anticipate some grueling and arduous opposition on some of the issues that can affect your practice. Therefore, it is of vital importance to contribute now!

The legislative arena is where the direction of our professional lives has been and will continue to be determined. With the future of the dental profession being revisited and shaped by legislators instead of dentists, our contributions to Tenn-D-Pac are more important than ever. Close personal relationships with our legislators are central to the cause, and Tenn-D-Pac financial support of candidates who share our ideals helps sustain these relationships. The future of the dental profession depends on our commitment. We must all act now to have a voice. Your support is needed so that we can look out for you! Please mail your check or credit card information today to: Tenn-D-Pac, 660 Bakers Bridge Ave Suite 300, Franklin, TN 37067.

In Memoriam...

Dr. Earl Jack Wohrman, Sr.
Memphis, TN, Age 90
A retired life member of the Association
died on June 11, 2017.

Dr. John Dale Alden, Jr.
Columbia, TN, Age 78
A retired life member of the Association
died on June 29, 2017.

Dr. Joseph Woodrow Forbes, Jr. (“Woody”)
Jackson, TN, Age 78
A retired life member of the Association
died on August 3, 2017.

Dr. Lee Roy Dyer
Sevierville, TN, Age 79
A retired life member of the Association
died on August 6, 2017.
ARE PAYMENTS TO THE TENNESSEE DENTAL ASSOCIATION DEDUCTIBLE?

Questions frequently arise concerning the deductibility of payments to (1) the Tennessee Dental Association, (2) the Tennessee Dental Association Foundation and (3) the Tennessee Dental Association Political Action Committee. The Internal Revenue Service recognizes each of these organizations in a different way, due to their respective tax-exempt status.

(1) Tennessee Dental Association

The Tennessee Dental Association is recognized as a IRC Sec. 501(c)(6) organization. Payments to the Tennessee Dental Association for dues are deductible as ordinary and necessary business expenses on your business tax return.

(2) Tennessee Dental Association (TDA) Foundation

The TDA Foundation is recognized as a IRC Sec. 501(c)(3) organization. Payments to the TDA Foundation are deductible as charitable contributions on your individual tax return as a flow through deduction from your business tax return. The deduction flows from your business tax return to your individual tax return via Schedule K-1. If you practice as a sole proprietor, contributions to the TDA Foundation are reported directly on your individual return.

(3) Tennessee Dental Association (TDA) Political Action Committee

The TDA Political Action Committee is recognized as a IRC Sec. 527 organization. Payments to the TDA Political Action Committee are not tax deductible on your business or individual tax return.

Lobbying Expenditures

Any lobbying efforts by the Tennessee Dental Association are identified on your dues notice as a percentage of dues. The identified lobbying portion, usually identified as a percentage of dues paid and sometimes as a dollar amount, are not deductible.

CONCLUSION

Because of similarities in the name of different organizations, taxpayers often find themselves deducting the wrong amounts on their tax returns. If you or your tax preparer have any questions, please call Bellenfant Certified Public Accountants and Advisors at 615-370-8700.

Bob Bellenfant, CPA has practiced public accounting in the State of Tennessee for 40 years. John Bellenfant, CPA joined the family firm of Bellenfant, PLLC last year after working for Ernst & Young, LLP in Nashville. Together, Bob and John have served the dental industry for over 40 years.

<table>
<thead>
<tr>
<th>Organization</th>
<th>Deductibility</th>
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<tbody>
<tr>
<td>(1) Tennessee Dental Association</td>
<td>Deductible on your business tax return.</td>
</tr>
<tr>
<td>(2) Tennessee Dental Association (TDA) Foundation</td>
<td>Deductible on your individual tax return.</td>
</tr>
<tr>
<td>(3) Tennessee Dental Association (TDA) Political Action Committee</td>
<td>Not deductible on your business or individual tax return.</td>
</tr>
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</table>
The Value of Membership

Share Your Story About What the TDA Has Done for You!

One of the main reasons for continuing membership in any organization revolves around the benefit(s) you receive that impact you and/or your business in a positive way.

What do you view as the most valuable benefit(s) of your membership in the TDA? Has the TDA assisted you in reporting continuing education credits when you were audited by the Board of Dentistry? Has the TDA gone the extra step in helping you with your membership status? Has the TDA addressed issues on your behalf when dealing with endorsed services? Has a TDA e-mail notification saved you from missing an important state or federal deadline?

The TDA is here for you, and the staff wants to continue to provide you with valuable services! Share your comments with the TDA for inclusion in an upcoming issue of the TDA News by sending your comments via e-mail to jjh@tenndental.org.

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**Western Middle TN—Wonderful opportunity. 6 ops with tons of technology in a leased space. Revenues over $850,000 with capacity to grow. Seller will transition or walk away. Great opportunity for an ambitious dentist. Contact Henry Schein Professional Practice Transitions Consultant Dr. Suzie Stolarz, 615-418-3113, Suzie.Stolarz@henryschein.com. #TN135**

**Btwn Nashville and Knoxville, TN—Wonderful practice purchase opportunity. Seller wants to stay for 5 years. Free standing building for lease or purchase - visible corner in a quaint downtown. Fee-for-service practice, strong revenues and untapped potential. Ideal for an absentee owner. Contact Henry Schein Professional Practice Transitions Consultant Dr. Suzie Stolarz, 615-418-3113, Suzie.Stolarz@henryschein.com. **#TN132**

**West Tennessee—Beautiful! In a free-standing building also available for sale. 8 ops w/state-of-the-art equipment located on busy main hwy. Seller will stay for transition or walk. For more information contact Henry Schein Professional Practice Transitions Consultant Dr. Suzie Stolarz, 615-418-3113, Suzie.Stolarz@henryschein.com. **#TN134**

**Near Nashville, TN—6 ops General Practice in a stand-alone building on a busy highway within an hour of downtown. Terrific opportunity for growth. Ideal for a new grad or satellite office. For details contact Henry Schein Professional Practice Transitions Consultant Dr. Suzie Stolarz, 615-418-3113, Suzie.Stolarz@henryschein.com. **#TN136**

**Greater Knoxville—Dental practice for sale in pocket community. 5 operators - expandable. Rev $500,000. R/E for sale. Doctor wants to work for new owner several years. Ideal absentee owner opportunity. For more information, contact Henry Schein Professional Practice Transitions Consultant Dr. Suzie Stolarz, 615-418-3113, Suzie.Stolarz@henryschein.com. **#TN133**

**A busy multi-specialty practice is currently seeking Full and Part-time Oral Surgeons, Endodontists, Pediatric Dentists, Orthodontists and Dental/ Medical Anesthesiologists for KY: Lexington, Louisville, Elizabethtown; GA: Dalton; SC: Columbia, Greenvile, Charleston; MS: Biloxi, Hattiesburg, Tupelo; IN: Indianapolis, Terre Haute, Lafayette, Evansville, Elkhart, Gary, Fort Wayne. We offer competitive pay, flexible scheduling, sign-on bonuses, relocation assistance, 401k, paid time off as well as medical, dental, vision, life and malpractice insurance. Contact us today! Emily Platto (770) 508-6810, eplatto@benevis.com.**

**Memphis Area Career Opportunity—Advanced and cosmetic general dentistry practice located in Collierville, TN seeking a full-time associate who has interest in ownership. Fully staffed practice with 7 operators seeing patients 4 days per week. Fee for service and PPO practice. Full benefits and 401(k) available. Rare opportunity to step in and take over an established practice with a loyal patient base. Contact Zac Rhinesmith at zrhinesmith@benevis.com or 770-710-3042.**

**Practice for sale – Clinton, TN. 3 equipped ops. Room for more. Elevator. 1800 sq ft bldg. Commercial zoned. Turnkey. Reduced $249,000. Call 865-368-2375**

**Space available West Knoxville, just off Pellissippi Pkwy. Great visibility. Former pedo practice 2000 sq ft. 865 368 2375.**

**Well-established East TN Practice looking for an energetic Associate to join our team! This is a great opportunity for someone who wants to provide all aspects of dentistry to a great patient base! Our office is fully digital with computers and televisions in every treatment room. We are mostly fee for service and increasing in new patients monthly. Please email drschreuner16@gmail.com with resume.**

**Practice for Sale, Southeast Missouri: 58-year-old general practice with 4 ops. Strong patient base 2,280 sq ft. completely remodeled with all new equipment in 2012 including digital x-ray and intraoral cameras. Contact David at 573-379-0093 or david3650@sbcglobal.net.**

**Great opportunity in Southeast Missouri. General practice for sale: 8 ops, 3,050 sq. ft, established for 38 years and thriving. All new equipment and design in 2012. Digital x-ray and intraoral cameras. Deluxe amenities. Contact David at 573-379-0093 or david3650@sbcglobal.net.**

**Dentists needed in Georgia! Help A Child Smile is a mobile dental program that provides oral health care to children across the state. We are seeking part-time and full-time dentists to join our team. We offer a competitive salary including a GUARANTEED DAILY BASE PAY. We have a large established patient base and experienced staff to get the job done. Absolutely NO OVERHEAD! Georgia Dental license required. Contact Sebrona Rhodes today at srhodes@hcsqa.com , 770-760-7900 ext 42194, or 470-925-8438.**

**Dental practice and bldg. for sale Somerville, TN. Three Ops., lab, Pan. Xray, N2O plumbed. $299,000. 901-465-9259.**

**Wanted: Looking for the “right” Pediatric Dentist to join our fun, growing practice group in the Nashville TN area. Call 615-689-2372 or email momentoftooth@gmail.com for details!!**

**Turn-Key Dental Office For Sale—Germantown, TN CRYE-LEIKE COMMERCIAL is pleased to present a Class A dental office opportunity in the heart of Germantown’s professional office district. Upscale interior finishes with high ceilings, granite surfaces and wide crown molding. The operatory features 7 large windows strategically positioned to view an immaculately landscaped, park-like setting outside. The space features a physician’s office, private restroom, lab consultation office, manager’s office, reception area, x-ray and open operatory area. The neighborhood boasts a wide range of shopping amenities such as Target, Fresh Market and Sprouts to name a few. Eric Fuhrman eric.fuhrman@crye-leike.com (901) 758-5760**

**Seeking TENNCARE PROVIDER: Established TennCare and PPO patient base! American Family Dentistry (AFD) treats each patient and employee like family – because we believe they are. Our multispecialty group practice has been serving generations of patients since 1985. Today, we are proud to have 70 locations across the Memphis TN, Knoxville TN, and Northwest Mississippi communities. This position qualifies**

**Classified Advertising (Ad Prepayment Required)**

Classified ads: The first 100 characters (i.e., letters, spaces, punctuation) are free* for TDA dentist members and $30.00 for nonmembers. Each character, in excess of 100, is an additional 30 cents per character (this applies to members and nonmembers).

Mail checks, made payable to the TDA, along with your typed or clearly printed classified ad, by the 1st of the month prior to the month of publication to: TDA Newsletter, 660 Bakers Bridge Avenue, Suite 300, Franklin, TN 37067.

TDA reserves the right to reject any advertising. Call Wanda Rosa at 615/628-0208 or outside Nashville at 1-800-824-9722 or email sam@tenndental.org if you have any questions.

* Free to TDA members: one ad per year — three (3) month maximum — after third month the $30.00 minimum and additional character charge will apply.
for Education Loan Assistance Program in addition to a competitive salary and excellent benefit package including 401K with employer match, health, life, & professional liability insurances and a professional work environment. If you are interested in practicing at one of our exceptional locations please email your CV to Kate Anderson at kateanderson@amdpi.com or call 781-213-3312.

**General Dentists for established group!** American Family Dentistry (AFD) treats each patient and employee like family – because we believe they are. Our multispecialty group practice has been serving generations of patients since 1985. Today, we are proud to have 15 locations across the Memphis TN, Knoxville TN, and Northwest Mississippi communities. American Family Dentistry is looking for team oriented, enthusiastic Dentists in Southaven, MS, Memphis, TN and Nashville, TN. We offer our Dentists a competitive salary and excellent benefit package including 401K with employer match, health, life, & professional liability insurances and a professional work environment. If you are interested in practicing at one of our exceptional locations please email your CV to Kate Anderson at kateanderson@amdpi.com or call 781-213-3312.

Do you know of any talented dentists who would be a great fit for the Kool Smiles team? Kool Smiles has extended their internal employee referral program to all members of the dental community!

**Why not allow your contacts to earn you extra $$$$!** Here are some quick details about the referral program:

- Earn **$5000** for a FT doctor referral
- Earn **$2500** for a PT doctor referral
- Bonus will be paid out after successful completion of 90 days of employment

We are currently seeking *General Dentists, Area Dental Directors, Oral Surgeons, Dental Anesthesiologists, Endodontists, Pediatric Dentists and Orthodontists* for various offices. Please take a moment to go through your contacts and send me their information today at rneal@benevis.com or 404.844.9816! You can also submit referrals through our website at: [http://www.koolsmilesjobs.com/referral](http://www.koolsmilesjobs.com/referral)

**TN 1250**: Davidson Cnty. 4 Ops. Avg coll $369,699. Dr. Fred Bacon, NPT, 901 584 0132 x220, f.bacon@NPTdental.com or www.NPTdental.com.

**TN 1188**: Gibson Cnty. 3 Ops. Avg coll $340,000. Dr. Fred Bacon, NPT, 901 584 0132 x220, f.bacon@NPTdental.com or www.NPTdental.com.

**TN 1373**: Shelby Cnty. 4 Ops. Avg coll $380,678. Dr. Fred Bacon, NPT, 901 584 0132 x220, f.bacon@NPTdental.com or www.NPTdental.com.

**TN 1188**: Gibson Cnty. 5 Ops. Avg coll $478,883. Dr. Fred Bacon, NPT, 901 584 0132 x220, f.bacon@NPTdental.com or www.NPTdental.com.

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