Several years ago, I started to think of how I could make a difference in many people’s lives as a dentist. What could I do that could positively affect more people’s lives than I could being a chairside solo practicing dentist? I considered the possibilities and decided to try making oral products that would increase a patient’s overall health. What type of products could I create to bridge the oral systemic connection?

I established criteria in creating new products. My first criterion was to fit into digital technologies being used in dentistry. A second criterion was to have a large to huge market for my new products. The older patient population is exploding in the United States, Europe and Asia, so that is the population that I focused on for my new products.

A third criterion was that my products would have the “wow” factor so that when dentists saw them they would say, “Wow! That is great! I want to buy it.” A fourth criterion was to make products that solve problems with existing products or make it easier to do our work. Lastly, a fifth criterion was that the new product was inexpensive to produce. Companies want products that are inexpensive to produce and that fit into their existing manufacturing production.

There is commercial computer-aided design (CAD) software specifically for making products. After creating your product with this software, the next step is to go to a 3-D printer with your prototype, i.e., your new invention, in hand. The further you go in development of your product the better it is to show it to a company. The best way to get a company interested is if you have sales and cannot meet orders. A company may find you and offer to buy your product and business. The more you can prove that your new product is marketable, the more likely a company will be interested.

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Product Design and Development for New Products in Dentistry

Upcoming Events

**FRIDAY MAY 1**
Staten Island Hilton Garden Inn, 9 A.M. - 4 P.M.
Continuing Education Course #2015-14
"Esthetics and Laser Dentistry"
Kenneth S. Magid, D.D.S.

**MONDAY MAY 4**
SDDS Headquarters, 7 P.M.
SDDS Board of Trustees Meeting

**FRIDAY MAY 8**
Fort Hamilton Community Club, 9 A.M. - 12 P.M.
Continuing Education Course #2015-15
"A Review of Head and Neck Anatomy with Dental Considerations"
Beeren Gajjar, D.D.S.

**THURSDAY MAY 14**
Fort Hamilton Community Club, 7 P.M. - 9 P.M.
Continuing Education Course #2015-36
"Oral Mucosal Lesions: The Essentials"
Robert B. Rowe, D.D.S.

**FRIDAY MAY 15**
SDDS Headquarters, 9:30 A.M. - 3:30 P.M.
Continuing Education Course #2015-37
"CPR and Medical Emergencies in the Dental Office"
Michael Kaliroff

**TUESDAY MAY 19**
Bocelli’s Restaurant, 6 P.M.
RCDS Membership Meeting
"Invisalign for the General Practitioner"
Michael J. Donato, D.M.D.

**MONDAY JUNE 1**
SDDS Headquarters, 7 P.M.
SDDS Board of Trustees Meeting

Continued on Page 4
Dentistry on the High Seas:

International missions have always interested me. A few years ago I had the opportunity to serve aboard the Africa Mercy, a hospital set up on a ship which sails along the coast of West Africa, and I haven’t looked back since.

The Africa Mercy, which is operated by global charity Mercy Ships, offers a unique opportunity to provide medical, surgical and dental care to the forgotten poor of Africa. The ship docks for about ten months every year in a West African country, thereby furnishing its services to the local people. Some of the countries the Africa Mercy has served are Guinea, Sierra Leone, Togo, Congo, Ghana and Madagascar. The various health care services available on the ship include oral and maxillofacial surgery, ophthalmology, plastic surgery, orthopedics and general dentistry. The Africa Mercy crew also does other community-based projects for the general development of the third world.

Everyone who joins the Africa Mercy crew is a volunteer. All the doctors, nurses, engineers, technicians, chefs, purser and other crew members pay for their travel to and from the ship as well as for their stay on board. It is amazing how so many people come from different parts of the world with the common goal of treating and serving the poor, making the mission of the Mercy Ships such a success.

Screening camps are set up long before the ship arrives in the targeted countries to announce the ship’s arrival and screen patients in preparation for surgery. Unfortunately, not every patient who presents to the ship can be treated. Patients with malignancies and inoperable tumors often have to be turned away or referred to local hospitals because of the ship crew’s inability to provide patients with postoperative radiation and chemotherapy.

The hospital on Africa Mercy and its four operating rooms are run in accordance with U.S. and international regulations. The various health care services available on the ship include oral and maxillofacial surgery, ophthalmology, plastic surgery, orthopedics and general dentistry. The Africa Mercy crew also does other community-based projects for the general development of the third world.

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The hospital on Africa Mercy and its four operating rooms are run in accordance with U.S. and international regulations.
international standards. There are some doctors, nurses and other crew members who, like me, are full-time volunteers who volunteer every year. All surgeons, nurses and anesthesiologists practice to the standard of care and are successful back in their respective countries. The equipment and materials used on the ship are often donated or purchased with funds raised.

Many West Africans are commonly burdened by illiteracy, superstition and poverty, which makes dealing with physical disease in this part of the world so much harder than in more developed nations. Every disease or tumor is considered a curse and for a lot of people the only medical care to which they have access is provided by local witch doctors. Needless to say, the treatment provided by such practitioners is barbaric and unsanitary, resulting in severe complications and, in several instances, even deaths. The local hospitals tend to lack competent expertise and/or infrastructure to provide adequate care.

My trip this year was to Tamatave, Madagascar. Although a very long journey from the United State, Madagascar is easily one of the most beautiful and exotic places I have visited. I spent a month there and worked with other oral and maxillofacial surgeons in treating facial tumors, cleft lips and cleft palates. It is very rewarding to interact, work with and learn from people across this earth both personally and professionally.

Along with all the work my trip was also a lot of fun. I have made friends with people from all over the world. I also took a few side trips to local resorts. Madagascar is home to several unique exotic plants and animals and yet there are no large predators on the island. It is famous for its lemurs and its beaches are pristine. I have never seen stars that shone so brightly I mistook them for airplanes! I had heard that the clear Indian Ocean, which caresses the Tamatave coast, is infested with sharks but they seemed shy when I visited. The smaller and more colorful fish seemed to rule the reefs. The gentle ocean, warm sunshine, fresh coconuts, exotic wildlife and welcoming smiles makes Madagascar a dreamer’s paradise.
Product Design and Development for New Products in Dentistry

Continued from Page 1

the more valuable it is to a company. You do not have to know how to use the software as you can find someone in an engineering college or post-graduate engineering program who can do it for you for a fair fee instead of going to a mechanical engineer, which would be expensive.

If you have an interest in product development, my advice is to keep it simple and inexpensive to produce. Make it fit into a company that makes similar products so that it is easy for them to use their existing manufacturing processing. Do not invent a new product division; instead make an add-on to an existing hot product that is selling well.

Once you come up with a new product and have your 3-D printed prototype, you must protect your idea! Do not publish or show your product without obtaining some basic protection beforehand. If I work with anyone in design or manufacturing, I have him or her sign a work for hire form, which means that they cannot say they are a co-inventor of my product. If I show a product to people other than close friends, I have them all sign a non-disclosure form, which means that they cannot use my idea.

The next step is to come up with a benefit statement explaining why your great new product is so wonderful so you can grab the attention of a company. An example is “Final Impressions, Records and Anterior Teeth Placement in One Visit.” Next, make a one-page sell sheet outlining the key benefits of your product to further pique the interest of companies in possession of your benefit statement. The goal is to get companies interested and get a non-disclosure form signed for your protection prior to showing your product. Many companies do not like to sign a non-disclosure form. This is problematic as if you have patent pending status there is no guarantee you will receive a patent on your new product.

You will also need to do some cold calling to find the right person in a company to whom you should submit your idea. Review a company’s website prior to contacting them. Some companies have submission sites where you go through a web portal to submit your idea.

Dental conventions are a good place to meet companies. Find the head of marketing and ask if the company accepts new product submissions. Some companies only want new products that are made in-house, i.e., only if they come up with the idea. However, many companies today have an open innovation policy and actually welcome new product submissions.

By now you are probably wondering how to make money with your new product. Licensing, which is my preferred method, is a good option to consider because the company handles all the manufacturing, marketing, distribution and sales of your product. In addition, you do not have to leave your day job. You are lending your invention to a company for a percentage of sales.

Although licensing is my preferred method for earning income with my new products, another individual may want to start a company. It depends on how strong you think your product is and how much money and time you want to invest. I strongly urge you to keep your expenses low and keep your day job. You can do this as a hobby and see if you get companies interested prior to investing more capital.

You will also need to develop a presentation so that if you are fortunate to find an interested company you can show them your new product. Again, getting a college student or freelance to help you in making a PowerPoint presentation is invaluable. Showing a company a product prototype is good but even better is showing videos of the prototype in action, for example, in videos of you using the prototype while working on patients.

In my presentations, I do market research based on the company’s needs. I investigate the targeted company. What are they looking for and what is their direction? Many times, it will be on their website but if it isn’t, do a simple internet search for the CEO of the company. You will likely find videos of them being interviewed or giving speeches in which they articulate the direction and needs of their company. I include the market, demographics, competition, benefits, videos on patients and even the marketing for my new product in my PowerPoint presentation. I go in prepared and passionate about my product.

Learn what is important to the companies you are targeting. Some dental companies are moving in a digital direction, others want to integrate dentistry with physicians. You may find that your new product does not fit into a company’s strategy or work for them at that point in time. If a company denies you, ask them what they did not like about your product. It could be something simple or it could be that it is not in their production cycle or that they are not set up to manufacture such a product. Often, the company will tell you what they are looking for and what they are working on in general terms so make certain you ask.

I am not a lawyer and nothing in this article should be considered legal advice, however, getting a patent pending status does alert companies that you have filed with the United States Patent Office. For some products you may want a utility patent, which is good for dental devices. However, it can be expensive. For other products a provisional patent, which lasts one year, may be sufficient as it gives you patent pending status and is considerably less expensive. However, you must change it to a non-provisional utility patent within a year. If a company has an interest, the company may pay for the legal fees.

Dentists are creative and learning to draw and sketch is a great way to start the conception of new products. Taking art classes inspires creativity and you may start artistic rendition of a new product. There is a free CAD program called SketchUp that you can download. They have many free tutorials. A professional version is $500 but just use the free version to get started.

Making new products is a passion of mine and the reason I get up early in the morning. I have made many mistakes and have had to be self-educated in an industry in which I could not find any other dentists who make dental products. My products are presently being evaluated by multiple companies in the dental industry. It looks promising, but I do not know how it will end up. I have taken the process much farther than most who submit to companies. I hope that I can write a follow-up article on my progress and hopeful success.

by ARNOLD I. LIEBMAN, D.D.S.
Assistant Clinical Professor, NYU College of Dentistry

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EDITORIAL

Dentists and the Bright Side

Just the other day I was listening to the radio when a catchy tune caught my ear. The music was nice but there was something wrong with the words. Could I have heard “I was scared of dentists and the dark?” Yes, that is what I heard coming from a song called “Riptide” by Australian singer-songwriter Vance Joy. My first reaction was “Cool, they mentioned dentists!” However, that quickly turned to thoughts of “That’s not good for dental health.”

Switching stations, I started listening to “Secrets,” a pretty fun song by singer-songwriter Mary Lambert in which she divulges her myriad insecurities, one of which – as it turns out – was “I’m scared of the dark and the dentist.” Oh no, not again! Why match dentists with the dark? Images of dentists as bogeymen—imaginary beings used to frighten children—came unbidden to mind. What a shame.

Digging into my childhood memories I can clearly remember that I liked my dentist, but I was definitely afraid of having my teeth filled and dreaded finding out I had a cavity. My mother would tell me how she never liked getting injections because her mouth would be numb for hours and it was better just to bear the pain and be over with it. Other people of my generation have relayed to me that their parents gave them similar reasons for why they shouldn’t have the “shot.” It is still hard for me to think back to the pain I experienced just to avoid a few hours of numbness. Recently, a molar of mine cracked and I had to have a crown. I didn’t think twice about asking for a healthy amount of lidocaine (not Novocain, for non-dentists reading this and listening to other songs like one called “Give me Novacaine” (sic) by punk rock band Green Day, which references a local anesthetic drug that hasn’t been used by dentists for decades).

There are a number of reasons people do not visit the dentist such as money and time, but let’s look at the fear factor. I asked the GPR residents of a local hospital for what they thought were the top reasons why their patients feared going to the dentist. I also asked them to make another list of why their patients should not be afraid of the dentist.

The newly graduated dentists had very comparable answers for why their patients feared the dentist. The top five reasons were: (1) pain; (2) bad past experiences; (3) needles; (4) price of treatment, and (5) the “bad news” that comes with discovered dental problems. Other reasons given were the sound of the drill and other instruments, movies and other media portraying the dentist as scary, negative stories about dentists heard from friends and family, patients’ embarrassment about the condition of their mouths, not feeling in control while being treated, disease transmission, white coat syndrome…

The reasons the GPR residents gave for why patients should NOT be afraid of the dentist were very dissimilar. Their top answers were: (1) dentists have great methods of sedation and anesthesia; (2) dentists help repair and maintain patients’ teeth and increase their quality of life; (3) new advanced techniques and instruments; (4) dentists are nice people/dentists aren’t monsters/they mean well/dentists respect your feelings, and (5) dentists have alternate cost effective procedures.

Is fear preventing people’s access to care? Can all the reasons why potential patients avoid the dentist be solved by adding more dentists? What can we as dentists do to solve these very complex issues? Let us stop and think about how we can persuade patients that their fears can be overcome and that we, their dentists, have the means to help them. Why should people NOT fear going to the dentist? I’ll leave a blank space at the end of the article. Please share your answers with me via e-mail at eperiodr@aol.com.

In the meantime, while we are working on educating the population on the benefits of visiting a dentist and informing them that today there is very little to fear, I think I will shoot off an email to Taylor Swift asking her to write a song about dentists with a bright side in a positive light. Just think of all the people who would be inspired for a healthy life!

by STUART L. SEGELNICK, D.D.S., M.S.
Editor, SDDS Bulletin

Volunteers Needed for Community Health Event

The Oral Health Committee is seeking volunteers to participate in the 12th annual Children’s Sports & Fitness Expo taking place on Saturday, June 27, 2015 from 10 a.m. to 4 p.m. at Boys and Girls High School located at 1700 Fulton Street in Brooklyn, NY.

The event is sponsored by Body Sculpt, a not-for-profit health and fitness organization, whose mission is to combat the obesity problem by providing families with the tools to live a healthy lifestyle through education and the promotion of a culture of physical fitness, health and proper nutrition.

Volunteers are needed to provide dental screenings for children, oral health education and distribute educational literature and other giveaways at the event. Interested volunteers should contact Second District at (718) 522-3939 or send an email to vmolina@sddsny.org.

In Memoriam

Dr. Stanley R. Benson
MARCH 6, 2015

Dr. Stavros Bentevis
JUNE 23, 2013

Dr. Irwin J. Giber
MARCH 25, 2015
Dentistry on the High Seas: Sailing on Board the Africa Mercy

Continued from page 3

I took a lot for granted before. My education, background, family, country and every blessing from above seemed like the norm. Every time I go back to Africa though, I realize how very fortunate I am to live in a free country, to be educated, to have a home and family who cares and to make the choices I can every day.

The work accomplished, treatment rendered and people cared for on Africa Mercy is second to none. My friends, relatives and colleagues say, “You change so many lives and it’s so noble what you do!” Even though I am trained to resect tumors and fix smiles and probably do change some lives for the better, it is hard for me to express how much these people change my life. I come back with overwhelming joy and a renewed spirit for which I am very thankful. The ability to execute a skill with precision, invest our time in the lives of others and treat our patients with dignity and compassion elevates our day-to-day jobs into magnificent careers. I wish you all magnificent careers!

by CHANDINI HUDSON, D.D.S.
Oral and Maxillofacial Surgeon,
Brookdale University Hospital and Medical Center, Brooklyn, NY

For more information on the Mercy Ships: visit www.mercyships.org or contact Dr. Chandini Hudson at chudson6@gmail.com with any questions.

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1:00 p.m. Shotgun Start
6:00 p.m. Reception, Dinner & Awards

For more information, please contact Dr. Vincent Frazzetto at (718) 494-1300 or download the event flyer/sign-up form at www.sddsny.org.

New Members

DR. PAUL BAKER
Oral Surgery
New York University, 1989
805 Union St
Brooklyn, NY 11215

DR. SYLVA PILTCH
General Practice
New York University, 1999

Reinstatements

DR. IGOR DEKHKANOV
General Practice
New York University, 2012
391 Manhattan Ave
Brooklyn, NY 11211

DR. GERMAN GELB
General Practice
New York University, 1993
3073 Brighton 13th St
Brooklyn, NY 11235

DR. PETER GERSHENSON
General Practice
New York University, 1983
3070 Avenue W
Brooklyn, NY 11229

DR. VERA HEIFETZ-KHRAKOVSKY
General Practice
New York University, 2000
2791 W 5th St
Brooklyn, NY 11224

DR. AVNER RUBINSTEIN
General Practice
University of Pennsylvania, 1998
32 Court St Ste 1401
Brooklyn, NY 11201

Transfers

DR. LOUIS FRANZETTI
Periodontics
Georgetown University, 1987
1 Hanson Pl Ste 701
Brooklyn, NY 11243
*Transferred from New York County Dental Society

DR. GERSHON PINCUS
General Practice
New York University, 1978
1360 Ocean Pkwy
Brooklyn, NY 11230
*Transferred from New York County Dental Society

New Members

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WRITER NEEDED—Second District Dental Society is seeking a component reporter to write brief articles about noteworthy Second District and Richmond County Dental Society events for publication in the New York State Dental Journal, which is printed six times a year. Applicants must have excellent writing and editing skills, a strong command of English and be actively involved in Second District Dental Society activities. Interested persons should forward their résumé and a short writing sample to info@sddsny.org.

EDUCATION—Learning Orthodontics is available for general dentists and pedodontists, locally in Brooklyn. For more information about Clinical Orthodontic Course, please contact Dr. Kale at (917) 881-3048 or email at drkale@clinicalorthodontic.com. Dr. Kale has been teaching this course since 1996 and can provide you with references if necessary.

EDUCATION—Brooklyn Implant Study Group offers low cost continuing education to dentists in Brooklyn. We meet 6 times a year, Wednesday evening at 6:45 p.m. over dinner. For more information contact Cinthia at (718) 439-8121 or email brooklyndds@yahoo.com.

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CONTINUING EDUCATION COURSE #2015-14
Hilton Garden Inn, Staten Island, NY
Friday, May 1, 2015  •  9 A.M. - 4 P.M.  •  MCEU - 6 HOURS

Esthetics and Laser Dentistry
Featured Clinician: KENNETH S. MAGID, D.D.S.
Associate Professor, New York University College of Dentistry

Although most dentists are comfortable with veneer preparations and other “tooth centric” cosmetic procedures often the structures surrounding the teeth are not incorporated into the cosmetic changes due to unfamiliarity with the procedures or difficulty in accomplishing them. The incorporation of lasers into dental practice changes all of that. In this course we will focus on the use of lasers of different wavelengths for modification of soft and hard tissues. We will include groundbreaking understanding of the diode laser and its use. We will cover when to use tissue modification for esthetics and when not to. In order to incorporate lasers of varying wavelengths into private practice we will cover laser physics and safety and the use of various wavelengths in all facets of dental practice. We will include an evaluation of which lasers suit each practice, the financial considerations in purchasing a laser and how to incorporate the laser for maximum benefit.

Upon successful completion of this course the attendee will learn a new way of looking at cosmetic cases and the interaction of teeth and surrounding structures, and have an understanding of the use of lasers and other modalities in modifying the soft tissue and bone surrounding the teeth for cosmetic purposes. Participants will also learn:

• An understanding of the role of lasers in dental practice including cosmetics, operative dentistry, pediatrics, periodontics and endodontics
• Knowledge of the hard and soft tissue clinical applications for dental lasers and the techniques specific to accomplishing them
• A groundbreaking understanding of the diode laser and its use and operation
• Familiarity with laser physics sufficient to properly use hard and soft tissue dental lasers
• Understanding laser setup and safety
• Understanding laser-tissue interaction
• How to choose which laser wavelengths suit their practices and the financial considerations in purchasing a laser
• The techniques for incorporating a laser into a private practice and using it for practice growth and marketing

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CONTINUING EDUCATION COURSE #2015-15
Fort Hamilton Community Club, Brooklyn, NY
Friday, May 8, 2015  •  9 A.M. - 12 P.M.  •  MCEU - 3 HOURS

A Review of Head and Neck Anatomy with Dental Considerations
Featured Clinician: BEEREN GAJJAR, D.D.S.
Clinical Faculty, Department of Dentistry, Mount Sinai Hospital

We all remember the agonizing pain of sitting through anatomy lectures in dental school trying to memorize all that information only to pass an exam. How much of that knowledge did we retain? It is important for dentists and their dental teams to have useful knowledge of head and neck anatomy. This knowledge is important for identifying abnormalities, improving the diagnosis process, formulating the proper treatment for the patient and communicating with other healthcare professionals. It is also helpful in ergonomics for the dental team and may help prevent some disabilities as a result of our profession. Upon successful completion of this course attendees will learn the following:

• An in-depth knowledge of head and neck anatomy
• Common anatomical variations
• How to implement this knowledge when diagnosing and treating patients
• How knowledge of anatomy may help with ergonomics and prevent disabilities

CONTINUING EDUCATION COURSE #2015-36
Fort Hamilton Community Club, Brooklyn, NY
Thursday, May 14, 2015  •  7 P.M. - 9 P.M.  •  MCEU - 2 HOURS

Oral Mucosal Lesions: The Essentials
Featured Clinician: ROBERT B. BOWE, D.D.S.
Director, Oral Pathology, Lutheran Medical Center

Most physicians do a lousy job of looking in the mouth, much less recognizing what they see. Thus, like it or not, it falls on us, as dental practitioners, to recognize and manage oral mucosal diseases. This brief review will re-familiarize you with some of the most commonly encountered lesions and introduce you to more unusual ones whose identification can make a big difference to your patients’ well-being.

Upon successful completion of this course attendees will be able to recognize the most common and important lesions and diseases affecting the oral mucosa.
This course provides dentists and their staff members with the knowledge and skills needed to properly respond to cardiopulmonary and other medical emergencies which can occur in dental offices. The specific advantages and disadvantages of performing CPR within the dental operatory will be discussed. This program utilizes hands-on practice sessions for all participants. Topics to be covered will include heart attacks and strokes (signs and symptoms), sudden cardiac arrest/defibrillation, airway obstruction (choking), respiratory emergencies, anaphylactic reactions, emergency drug kits, and more.

Upon successful completion of this course, participants will gain the knowledge and hands-on experience needed to administer CPR safely and effectively. Participants will receive a two-year certification card from the American Heart Association as well as continuing education credits. Completion of this course will also satisfy the New York State Education Department’s requirement for licensed dentists.

This program will include a discussion of the following:

- The differential diagnosis of a patient presenting in pain; where to begin
- Case management; emergency; vital vs. non-vital cases; prosthetically indicated endodontics
- Endodontic anatomical considerations
- Anesthesia, pain control and pain management; the hot tooth
- Emergency treatment including inter-appointment flare-ups
- Cleaning, shaping and obturation techniques; rotary systems, hand files and reamers
- Restorative considerations of endodontically treated teeth
- Retreatment vs. implant
- The use of intra-canal irrigants and medicaments
- Appropriate antibiotic regimens
- Iatrogenic complications and how to address them; MTA and biodentine
- Single appointment endodontics...when?

The program will also incorporate the new concepts of the smear layer; revascularization and stem cell research in endodontic therapy. Clinical application of all presented topics is the goal of this course. Questions and interaction with participants will be encouraged. Upon successful completion of this course, participants will have the ability to incorporate a broad spectrum of endodontic considerations into practical clinical application.

Are you planning to attend a course at the Fort Hamilton Community Club?

The Fort Hamilton Community Club is located on a military base. BASE SPEED LIMIT IS 15 MPH; failure to observe the speed limit is a traffic violation and may result in the imposition of fines, tickets or other penalties. You may be randomly stopped by the Military Police on duty upon entering the base or while on the grounds. Please have your photo I.D./driver’s license, current registration and insurance card available for inspection.
<table>
<thead>
<tr>
<th>#2015-14</th>
<th>&quot;Esthetics and Laser Dentistry&quot;</th>
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<td>Kenneth S. Magid, D.D.S.</td>
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<td>Friday, May 1, 2015</td>
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<tr>
<td>Staten Island Hilton Garden Inn</td>
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<td>MCEU - 6 hours</td>
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<th>&quot;A Review of Head and Neck Anatomy with Dental Considerations&quot;</th>
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<td>Friday, May 8, 2015</td>
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<td>Fort Hamilton Community Club</td>
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<td>Laurie R. Fleisher, D.M.D.</td>
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<td>Friday, June 12, 2015</td>
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<td>Fort Hamilton Community Club</td>
<td>9 A.M. - 4 P.M.</td>
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<td>Leslie Seldin, D.D.S.</td>
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<td>Friday, June 19, 2015</td>
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<td>Arthur D. Goren, D.M.D.</td>
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<td>Bharat Joshi, B.D.S., Pros.</td>
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<td>Friday, September 25, 2015</td>
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<tr>
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<td>MCEU - 3 hours</td>
<td>Breakfast included</td>
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To register for any of these courses, call Second District Dental Society at (718) 522-3939 or e-mail info@sddsny.org. A full listing of the SDDS 2015 CE schedule can be viewed on our website at www.sddsny.org.
**POSITIONS WANTED**

**GENERAL DENTIST**—Compassionate, competent and motivated general dentist seeks part time or full time associateship in private or group practice. Please call (714) 345-4253.

**ORTHODONTIST**—Experienced orthodontist available one day per week (Tuesdays). Phone (917) 647-3802.

**PERIODONTIST**—36 years experience in high-volume insurance and union-orient ed NYC offices seeks PT associateship with general practice in Manhattan or Brooklyn. Excellent references. Very productive. Call (212) 679-2472.

**POSITIONS AVAILABLE**

**DENTIST (BROOKLYN)**—Seeking personable P/T GP dentist associate with 2 years+ experience for a growing practice in Brooklyn with potential for a buy-in. We have a friendly staff and are looking for a team player with exceptional communication skills; must be proficient in molar endo, routine extractions & Invisalign. Please email: NYDDS@optimum.net.

**ASSISTANT DIRECTOR PEDIATRIC RESIDENCY PROGRAM**—Responsibilities include providing clinical supervision, lectures and administrative duties. Salaried part-time with benefits package. Must be Board-certified or Board-eligible. For additional details contact: Dr. David J. Miller, Chairman, Department of Dental Medicine, Interfaith Medical Center, Brooklyn, NY 11216, dmiller@interfaithmedical.org, (718) 613-7385.

**GENERAL DENTIST**—Modern fee-for-service dental office is looking for GP dentist to work part time in our family practice located in Brooklyn, NY 11229. Must be competent and ambitious person. Bilingual. Applicants should submit their resumes to lumanoff@gmail.com or fax it to (718) 832-9809.

**GENERAL DENTIST**—Looking for a general dentist part time in a busy Brooklyn dental practice. Wednesdays 9-6 and Saturdays 9-2. Dr. must have at least 5 years experience, also be friendly and competent. Please submit email to eec927@aol.com.

**PEDIATRIC DENTIST**—Board-certified or Board-eligible Pediatric Dentist needed as Attending for pediatric dental residents. 1 day/week at our Brooklyn hospital. Includes OR privileges. Contact for additional details: ghenson@interfaithmedical.org or (718) 613-7383.

**GENERAL DENTIST**—Pleasant, busy, Boro Park Brooklyn office needs a GP for Fridays 9-2. Exp. preferred, Yiddish speaking helpful, good with molar RCTs, crowns and children. Reply to DDS7725@gmail.com.

**GENERAL DENTIST**—General Dentist preferred for Brooklyn, NY practice. Must be competent and motivated self-starter. Must be able to diagnose, provide Tx plan and treat most problems in a general dental practice. Part time, work any day Mon-Sat. Russian/English bilingual. NY State lic.#, Medicaid, DentaQuest provider# required. Great opportunity, incentive program and potential for buy-out. Submit resume to dianex@aol.com or fax to (718) 891-8949.

**DENTIST**—Brooklyn Heights, NY. PT position available for general dentist with great people skills, excellent clinical skills, and exceptional diagnostic and treatment planning abilities. Please email resume to drb@bellafioredds.com or fax to (718) 875-2630.


**GENERAL DENTIST FULL/PART-TIME**—In Brooklyn dental office. Experience is necessary. Spanish speaking a must. Send resume to docpetang@aol.com Tele.# (718) 492-8856.

**PEODODONTIST AND ORAL SURGEON**—A part-time position is available for a pedodontist and Oral surgeon at a busy dental office located in Brooklyn NY 11209. The applicant must have at least 1-2 years experience and candidate should also be licensed in NY state. Applicants should submit their resumes to tibadental@yahoo.com or please call: (718) 491-6585 or fax it to: (718) 491-6586.

**GENERAL DENTIST**—Looking for a part-time General Dentist to work in a busy dental office located in Brooklyn NY 11209. We are looking for someone with at least two years experience, with NY state License and who has exceptional clinical skills and loves what they do. The General Dentist must be capable of diagnosing a patient, providing a treatment plan, and treating dental conditions. Applicants should submit their resumes to tibadental@yahoo.com or please call: (718) 491-6585 or fax it to: (718) 491-6586.

**ENDODONTIST**—General Practice on Staten Island, West Brighton area, looking to obtain an endodontist to work within the practice. Please contact (718) 442-8440, email: nd5457@yahoo.com.

**ENDODONTIST**—Busy cosmetic dental office in Brooklyn. Digital x-ray machine. Friendly and experienced staff. Send resume by fax: (718) 376-7652 or by email: taladentala@gmail.com.
DENTAL MALPRACTICE INSURANCE UPDATE

Topic: Fee Disputes

Even minor fee disputes can cause major headaches. As observed by the New York State Department of Education, Office of Professional Discipline (“OPD”), fee disputes have a tendency to escalate into professional discipline complaints. Although OPD does not mediate pure fee disputes, practitioners should be aware that once a complaint is filed, OPD can decide to review the dental chart and applicable billing records to determine if ANY professional misconduct has occurred. If so, OPD can pursue charges such as poor record keeping, abandonment, negligence, or, by way of further example, fraudulent billing. Disagreement over money owed also frequently inspires patients to file court actions alleging fraudulent overcharging, unnecessary treatment and malpractice. The internet is also a growing forum through which patients voice complaints.

To help prevent fee disputes, care should be taken to provide patients with clear payment expectations. A written payment policy should be given to all patients outlining payment responsibility, whether the patient or dental office is expected to file insurance reimbursement claims, and the time frame within which the patient is expected to pay uncovered expenses, including co-payments.

Before initiating services that are not covered by insurance (or only partially covered by insurance) it is also important to discuss payment responsibility and identify the specific services to be provided and the corresponding amount of anticipated out of pocket expenses, as well as the timetable of any necessary installment payments.

As a cautionary note, the New York State Attorney General’s office has investigated and settled claims regarding the use of third party healthcare credit cards, finding that, in some instances, dental patients were misled about the terms of the credit cards and were pushed by their dental practitioner into using high cost credit. Civil suits have also been filed. Nevertheless, if you choose to allow use of a health credit card, make sure to document the patient’s understanding of and consent to the terms of the credit card, including all associated interest charges and potential late fee and retroactive penalties.

Practice Points

Focus: In light of the risks and inconvenience associated with fee disputes, it is important to minimize the potential for a patient to misunderstand their financial obligations.

✔ Provide patients with a WRITTEN PAYMENT POLICY that clearly sets forth patient payment responsibilities and office expectations.

✔ Develop an INDIVIDUALIZED PAYMENT PLAN before initiating treatment involving expenses that are not covered by insurance.

✔ DOCUMENT DISCUSSION OF FEE ARRANGEMENTS, and retain signed copies of your office payment policy and all agreed to payment plans in each patient chart.

✔ THINK TWICE ABOUT FACILITATING THIRD PARTY HEALTH CREDIT CARDS. But if you do allow their use, make sure to document the patient’s understanding and voluntary consent to all interest terms and possible penalties.

✔ DO NOT ABANDON A PATIENT by withholding necessary emergency treatment because fees are in arrears.

See Why So Many Dentists Have Made The Switch
PHYSICIANS’ RECIPROCAL INSURERS 1800 Northern Boulevard Roslyn, NY 11576
Contact our specialists at 1-888-526-4006  Visit www.PRI.com
MINUTES OF THE MARCH 2, 2015
BOARD OF TRUSTEES MEETING

President, Dr. Philip Buccigrossi, called the meeting to order at 7:05 PM.

PRESENT: Drs. Buccigrossi, Mindlin, Ariola, Rosenwein, Buchalter, Albicocco, Segelnick, Bina, Demas, Flagiello, Halkias, Lieb, McIntyre, Oshrain, Pasquale, Pavlakos, Reyes, Sconzo and Turchak

EXCUSED: Drs. Costagliola, Bongiorno, Hassan, Khanaan, and Meiselman

GUESTS: Drs. Wesely, Sherman, Lerner, Quartey, June Lei (Lutheran resident).

MOTION PASSED: To approve the minutes of the January 5, 2015 Board of Trustees meeting.

DECEASED MEMBERS:
Dr. John Saladino – UMDNJ, 1956
Dr. William Stutzel – Temple University, 1960
Dr. Sidney Kupfer – New York University, 1947
Dr. Arthur Puglisi – Georgetown University, 1965

NEW MEMBERS:
Dr. Merav Kroll
Dr. Victor Cheung (NYU, 2014)
Dr. Krys Khaytsin (NYU, 2003)
Dr. Walter Chen (Columbia University, 1990)
Dr. Sammy Ghanoum (Boston University, 1997)
Dr. Mani Alikhani (NYU, 1999)
Dr. Rami Mizrahi (NYU, 1996)
Dr. Oksana Tsish – SUNY Stonybrook, 2005
Dr. Eugene Khaytsin (NYU, 2003)
Dr. Sari Rosenwein
Dr. Reneida Reyes thanked Dr. Gabriel Ariola for his dialogue with NYSDA on “e-Prescribe.”
Dr. Reneida Reyes thanked Dr. Gabriel Ariola for his dialogue with NYSDA on “e-Prescribe.”
Dr. Mindlin attended the Richmond County Installation Dinner and expressed how wonderful it was and encouraged other Board Members to attend in the future.

PROPOSALS AND ELECTION OF NEW MEMBERS:

NEW MEMBERS:
Dr. Merav Kroll (NYU, 1993); Dr. Mani Alikhani (NYU, 1999); Dr. Walter Chen (Columbia University, 2005); Dr. Rami Mizrahi (NYU, 1996); Dr. Amanda Ouzer (Temple University, 2013); Dr. Mauro Perdomo (Tufts University, 2012); Dr. Oksana Tsish – SUNY Stonybrook, 2005

TRANSFERS:
Dr. Mitchell Yeh – Boston University, 2005 (NJDA)

RESIDENTS:
Interfaith Medical Center
Dr. Jim-Hwei Bair (Tufts University, 2013)
Dr. Victor Cheung (NYU, 2014); Dr. Kys- tle Dean-Duru (Virginia Commonwealth University, 2013); Dr. Alexandra Lee (Temple University, 2014); Dr. Shuang Liu (McGill University, 2012); Dr. Tanya Modica (Temple University, 2014); Dr. Yusuf Umar (University of North Carolina, 2014)
Dr. Esther Yun (Tufts University, 2014)

MOTION PASSED: To elect the proposed members to active membership

ANNOUNCEMENTS:
See “Calendar”

CORRESPONDENCE:
None

REPORT OF OFFICERS AND STAFF:
President—Dr. Philip Buccigrossi:
- Dr. Buccigrossi attended the Installation of Officers at Nassau County, Queens County, and the 100th Anniversary of Richmond County where Dr. Edward Jas- trenski was installed as President. He ex- pressed that it was a fabulous event.
- Dr. Firestone of Suffolk County orga- nized a dinner meeting with the Downstate Presidents on Thursday March 5th, to dis- cuss future initiatives. Representation from SDDS, QGCS, BCS and NYCCS will be in attendance.
- A donation was made to Hospice Care in memory of Past President Dr. Arthur Puglisi.

SDDS sent a letter of support to NYS- DA on behalf of Dr. Steven Gounardes for his candidacy for NYSDA Speaker of the House.

- Appointed ad-hoc committee on vacan- cy for NYSDA HOD; Drs. Scono (Chair), Ariola and Bina.

President Elect—Dr. Mitchell Mindlin:
- Dr. Mindlin attended the Richmond County Installation Dinner and expressed how wonderful it was and encouraged oth- er Board Members to attend in the future.

Vice President—Dr. Gabriel Ariola:
- Dr. Ariola reiterated how great the Richmond County Installation Event was.

Secretary—Dr. Sari Rosenwein:
- Dr. Rosenwein attended the Richmond County Installation Dinner and expressed that it was great.

Will be attending the Peer Review and Quality Assurance Council Meeting in Albany on April 10th and will bring back information from that meeting.

Treasurer—Dr. Alyson Buchalter:
- Reported on financial accounts and SDDS investments.

Librarian Curator—Dr. Paul Albicocco:
- Announced that he will review old SDDS bulletins, documents and books in an effort to reorganize the library.

Executive Director—Mr. Bernard Hackett:
- Due to health issues with our clinician, the Gruber Lecture on Friday March 13th will be a postponed until later in the year. The efforts for immediate replacement until now have not been successful.
- SDDS will explore new CE venue lo- cations due to new security policies that have recently been instituted at Fort Ham- ilton. We were advised the Fort will now require a course attendee list 2 weeks prior to the event. Walk-ons will no longer be allowed to enter the base. Dr. Craig Ratner reminded the Board of the parking difficult- ties that took place during the e-Prescribe course in January. The Fort was not helpful to members and suggests we find a new CE venue for the future.
- We must wait to see if the Governor will sign the e-prescribe extension bill. Dr. Feldman will keep Mr. Hackett informed.
- All NYSDA delegates and alternates were asked to begin the registration process. Additionally, they are being asked to report mode of transportation so economical co- ordination of transport from the airport to the HOD venue may be arranged.
- Thanked the board for approving ad- ditional subsidy for the additional day stay for the delegates.
- He mentioned that nominations will be taken for Nominating Committee positions at our Thursday evening Scientific Meeting.
- He reminded the board of the schedul- ing difficulties of the younger delegates due to family obligations which take priority. This has created difficulty in the pool of candidates to fill positions at the last min- ute. The nominating committee should consider this when considering candidates the positions.
- Dr. Feldman has issued a memo informing all ADA delegates and alternates of the upcoming meeting being held in Wash- ington D.C. from November 5th through November 10th. All delegates/ alternates are requested to continually check their email for important news and scheduling information from Chicago for this upcoming event.
- Thanked Dr. Scono, NYSDA Trustee, for his dialogue with NYSDA Board of Trustees concerning critical issues about e-Prescribe and Medicare opt-in/opt out.

- Phone directories for the Board have been updated.

COMMITTEE REPORTS

GNYDM—Dr. Lerner (see new business):
Dr. Lerner informed the Board of preliminary discussions with the ADA to hold a joint program on the new dentist Ad-hoc Committee on GNYDM Part- nership—Dr. Lieb (previously distrib- uted): Next step in the process will be to meet with the Exec. Committee of the

NYCDS to finalize terms.

Finance and Budget—Dr. McIntyre:
- Reviewed the year-end financial state- ments for 2014.

UNFINISHED BUSINESS

Ad-hoc committee on NYSDA Council vacancy—Dr. Sari Rosenwein:
- Dr. Alvin Fried has been elected to the position of Representative to the NYSDA Council on Dental Health Planning and Hospital Dentistry.

NEW BUSINESS

MOTION PASSED: (Dr. Lerner / GNYDM) That the SDDS ask the Chair of their New Dentists Committee and two of its members to serve on a GNYDM Focus Group, whose purpose is to discuss and formulate marketing strategy that would attract younger dentists to the GNYDM.

MOTION DEFEATED: (Lerner / GNYDM) That the SDDS donate 25K to the GNYDEF for the creation of 5 dental student scholarship of 5K each that will be presented to the recipients at the GNYDM.

MOTION PASSED: (Buccigrossi) That the SDDS Board of Trustees approve the Policy on Conflict of Interest, the Conflict of Interest Statement, the Whistleblower Policy and Harassment Policy as previously distributed by email.

GOOD & WELFARE:
Dr. Stuart Segelnick congratulated Dr. Craig Ratner for the article he wrote for NYSDA on “e-Prescribe.”

Dr. Reneida Reyes thanked Dr. Gabriel Ariola, the Hospital Residents and all other SDDS Members for volunteering their time to “GRAS”. We were invited to another event in the spring.

Dr. Philip Buccigrossi invites all to see his son perform as the “Lion” in the produc- tion of “The Wizard of OZ” in Snug Harbor in Staten Island April 16th-19th. Those who are interested in attending should speak with Dr. Buccigrossi about ticket purchases.

Mr. Hackett thanks Drs. Gounardes and Medrano for including Dr. Tricia Quartey to the ADA Leadership Conference as the “New Dentist Representative”.

Dr. Buccigrossi presented Dr. Paul Wesely with a “Certificate of Recognition” for his service as a SDDS Board Member from 1982-2014.

ADJOURNMENT:
Meeting adjourned 8:25PM.
JACOBSON GOLDBERG & KULB, LLP
Attorneys and Counselors at Law

585 Stewart Avenue
Garden City, New York 11530
(516) 222-2330

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BUSINESS AGREEMENTS
MEDICAID
STATE & FEDERAL CRIMINAL PROCEEDINGS
ESTATE AND REAL ESTATE MATTERS

PARTNERSHIP, EMPLOYMENT, INDEPENDENT CONTRACTOR AGREEMENTS

Daniel M. Goldberg    Amy T. Kulb    Jeffrey A. Granat