

NYSDA Annual House of Delegates Meeting Concluding QCDS's Dr. Chad Gehani's Term

Dr. Burton Wasserman Receiving Highest State Honors

The New York State Dental Association will have its annual House of Delegates meeting at the Roosevelt Hotel located at Madison Avenue and East 45th



Dr. Chad Gehani

Street in New York City beginning Thursday June 7 and concluding Saturday June 9. During the meeting, Dr. Chad Gehani of QCDS will conclude his term as NYSDA president and be succeeded by Dr. P. Deborah Weisfuse from the New York County Dental Society, who begins her term as president at the conclusion of the meeting through the next House of Delegates meeting, scheduled for 2013. In accordance with NYSDA by-laws mandating the NYSDA presidency rotate among the 13 component societies, QCDS will not have its next president for another 13 years, so the conclusion of this House will close an historic milestone for QCDS. Dr. Gehani thanks all for their support throughout his presidency and remains available as a valuable resource to his successor. QCDS welcomes his return on a "full-time" basis after a successful term with NYSDA.

The opening session of the House begins at noon on June 7 and all members are welcome to attend any meeting of the House. The elected delegates will be considering various resolutions establishing NYSDA policies and attending to business matters. During the House meeting on June 8, Dr. Burton Wasserman will receive NYSDA's highest honor, the Jarvie-Burkhart Award, which recognizes

outstanding services rendered to mankind through dentistry in his contributions to education, literature and research. Dr. Wasserman becomes the first QCDS recipient of both the QCDS Emil Lentchner Distinguished Service Award as well as NYSDA's Jarvie-Burkhart.

QCDS and the New York State Association of Endodontists are sponsoring a welcome reception in honor of Dr. Gehani on the evening of June 7. On the following day, the New York State Dental Foundation hosts its annual Awards Luncheon, with the Excellence in Academics Award being presented to Dr. Charles N. Bertolami, a renowned leader in dental research, education and clinical communities. Dr. Bertolami, dean of NYU College of Dentistry, formerly

served as dean of the University of California San Francisco School of Dentistry.

The President's Dinner Dance on Friday provides an opportunity to join friends and colleagues honoring the Association's president, Dr. Chad Gehani and his wife Dr. Rekha Gehani, as well as the officers of NYSDA. The gala event is being held at the landmark Roosevelt Hotel beginning with cocktails and hors d'oeuvres from 7-8 P.M., with dinner and dancing to follow. It is safe to say that all QCDS members congratulate Dr. Gehani on a job well done and are proud to claim him as a member.

Reservations for these events can be made by contacting Beth Wanek at NYSDA, at 800-255-2100 or by e-mailing

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QCDS Welcomes NYSDA President Elect Dr. Weisfuse to Membership Meeting

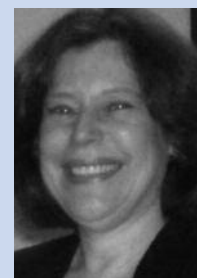
More than 50 members attended the March QCDS General Membership meeting, enjoyed a buffet dinner, educational presentations and an address by NYSDA President Elect Dr. P. Deborah Weisfuse. She will succeed the current NYSDA President, Dr. Chad Gehani at the conclusion of the House of Delegates meeting being held at the Roosevelt Hotel, New York City, in June.

Dr. Weisfuse spoke of her goals for her presidency and discussed issues of concern to the profession. As is the custom with all incoming presidents, she will be making additional visits to all other NYSDA components before assuming the presidency. Dr. Weisfuse hails from the New York County Dental

Society and has the distinction of being the first female NYSDA president.

The evening continued with a financial presentation by Ben Bush exploring retirement planning. A presentation by Dr. Amos Yahev, sponsored by MIS Implant Technologies, addressed the topic of bone augmentation challenges using biphasic calcium sulfate, was well received by the attendees.

QCDS thanks the sponsors of the evening, including Colgate, Astoria Federal and the Forest Hills Financial Group.



Dr. P. Deborah Weisfuse

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February, 2012

Dear Colleague:

The dental profession had a major scare this year when Governor Cuomo's Medicaid Redesign Team recommended that dental hygienists should be allowed to work independently of the supervision of a dentist. As you know, throughout the country battles are raging over expanded scope issues, including the possible creation of "midlevel providers," the professional equivalent of nurse practitioners in medicine. Fortunately, NYSDA was able to convince the Governor not to include any scope expansion for dental hygienists in his budget proposal and to ignore the recommendations of the MRT Committee. But the issue is still on the table and we must remain vigilant because this matter is not going away and it is but one of many legislative and regulatory battles we face.

Fortunately for you, EDPAC isn't going away either. We are getting stronger and we are getting more aggressive in our defense of the traditional practice of dentistry. We will not let our guard down and we promise to serve you faithfully in Albany where the practice of dentistry is defined and controlled. However, our efforts rely upon your support, for without you contributing to EDPAC, our profession would simply be a paper tiger and vulnerable to assaults from every political direction. You have generously contributed to EDPAC as part of your 2012 dues, and for that, we thank you.

However, we are asking you to do more, to take that extra step to ensure the viability of our profession in the years to come. Please take this opportunity to join the Capitol Club, the elite group of dentists in this state who contribute an additional \$100, or secure a place on EDPAC's Honor Roll by contributing \$200. Please consider making this extra sacrifice for the cause. Your money will be used wisely in defense of your profession, and your generosity will ultimately be rewarded with the peace of mind you will have knowing that you did your duty to yourself, to your colleagues and to your patients.

Thank you very much for your support.

Sincerely,

Bijan Anvar, DDS, District Chair
Queens County Dental Society

Joseph R. Caruso, DDS
EDPAC Vice Chair

Chad P. Gehani, DDS
NYSDA President

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Deadlines for manuscripts is six weeks prior to the date of publication. For example, the deadline for March/April issue is January 10th. All Submissions must be typed as a word document and emailed to QCDSBulletin@gmail.com.

For more information about advertising, contact the Business Manager at 86-90 188th Street Jamaica NY 11423 or call (718) 454-8344. Inclusion of an advertisement does not imply endorsement of any firm, goods, or services unless such endorsement is specifically stated.

Subscription is included in the annual membership dues of the Queens County Dental Society. The Subscription rate for non-members is \$30 per year, or \$5 per issue.

The QCDS Board of Trustees meets on the third Tuesday of each month (Except July and August) at QCDS Headquarters. For information about the Society, Call QCDS at (718) 454-8344.



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Queens County Dental Society

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From the President

beatrizvallejo@hotmail.com



Your Participation

By Beatriz Vallejo, D.D.S.

As dues have increased over the last few years, some of you have had questions relating to the benefits of membership in our dental society. If only those who question would come down and observe the quality of activity that occurs here in Queens County, you would have a positive appreciation of and for our organization and what you get for your dues.

Our Board of Trustees meets monthly, usually on the third Tuesday of each month and it is during this time that the chairperson of each standing committee reports on the activities which have occurred during the month. The range of involvement by your trustees is one to be commended. The time, knowledge and concern displayed have long gone unappreciated by the members.

Our General Membership meets on the second Tuesday of the month. The QCDS Bulletin is published every two months. As you read this edition of the Bulletin, I ask you to think of all the effort that went into its publication, starting with the authors who spend untold hours putting this all to-

gether. Look though these pages and you'll find the programs and services offered to our members.

There are many other active committees, such as Peer Reviews, Education, Ethics, Membership, Hospital Dental Services, Chemical Dependency, Public Relations, Legislation, Insurance, Dental Trade and Labor Relations, Young Dentists, District Claims, Resident Program and the Greater Long Island Dental Meeting.

As president and a long-time member of the QCDS, I have a deep feeling of gratitude to all who participate and for how much they give of themselves.

I hope I have peaked your interest as it relates to our dental society. In reality, we not only want your approval, but we need your knowledge and help. Many of you who are reading this have expertise in an area which would benefit all of us, so please come on down and share it with the rest of your colleagues. We will all benefit for all of your participation and together we will continue to strive to make this the best society possible.

IN MEMORIAM: Dr. Abraham Brown

By William Bayer

I had the privilege of meeting and interviewing Dr. Abraham Brown for the November 2010 issue of the Bulletin as he celebrated his 100th birthday. At that time, he was believed to be the oldest living QCDS member, having joined the ADA in 1941. He had just completed his 70th year of ADA membership and recounted many stories to me regarding his long dental career, ranging from his \$100 yearly dental tuition he paid as an "out of

stater" when he attended the University of Tennessee dental school to his use of the "foot pedal power drill," the precursor to the electric powered drill. He took great pride in being listed on the engraved Founders Plaque at QCDS headquarters and in seeing how QCDS evolved over the years. His niece called me to let me know he passed away on March 4, after having celebrated his 101st birthday.

We extend our condolences to his family.



From The Executive Director

execdirqcds@aol.com

Nominating Committee to Meet

By William Bayer



Queens County Dental Society | 86-90 188 Street | Jamaica, NY 11423

The Nominating Committee is responsible for presenting nominations for elective offices and representatives of QCDS, as required by the Bylaws. Any member interested in being considered for an elective position should submit a letter of interest and CV to the executive director prior to May 31 for consideration by the committee. If you are interested, feel free to submit your name as a nominee. QCDS values the diversity of the Board of Trustees and welcomes nominations from those willing to volunteer their time for the benefit of the profession.

The following information summarizes the process:

QCDS Nominating Committee Composition:

- The last two immediate past presidents;
- Two members elected by the Board of Trustees at its April 17th meeting;
- Three members elected by the membership at the May 1st membership meeting;
- Three alternates elected by the membership at the May 1st membership meeting;

The President acts as chairman without the right to vote. The Nominating Committee will report its selections at the October 2 membership meeting. Additional nominees will be added for any elective position by the receipt of a petition signed by 20 members and received by the executive director within 10 days of the report of the Nominating Committee, which will be given at the October 2 membership meeting. No additional nominations, including nominations from the floor, will be accepted. Voting for all elective offices is scheduled for the November 6th membership meeting.

ICDE

The Nominating Committee, comprised of five ICDE members appointed by the Board of Directors, will meet and submit their report for all elective offices to the membership at the October 2nd membership meeting, with voting at the November 6 meeting.

William Bayer
Executive Director

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Planning Your IRA Using Social Philosophy

By Harris Markhoff and Michael Markhoff

We have been encountering estate planning situations where a dental practice owner has more than sufficient net worth to adequately support a surviving spouse and also has children who are self supporting. That dental practice owner should consider allocating a portion of his or her IRA to either grandchildren or a charitable foundation.

IRA For Grandchildren

The use of an IRA to benefit grandchildren is an interesting technique.

There is some concern among grandparents that grandchildren in today's economic and social environment will not have the same educational and vocational options and opportunities as were available to their grandparents and parents.

There is no question that competition to get into college is more intense. There is frequently no assurance or even an interest on the part of grandchildren to become professionals, corporate executives or entrepreneurs. The grandchildren may choose career paths with meaningful social purposes, but without significant financial rewards.

Grandparents may want to consider leaving a portion of an IRA to a grandchild to supplement the grandchild's income.

If, as a hypothetical, a \$500,000 portion of an IRA is left to a 10 year old grandchild (or to a trust on behalf of the grandchild), and if that IRA can earn 5 percent during the grandchild's lifetime, that \$500,000 IRA will disburse \$5,100,000 to the grandchild during the grandchild's life expectancy (ages 10 to 82).

IRA Payable to Charity

If the dental practice owner has significant charitable interests, it makes sense to have a portion of the IRA payable to a family foundation. The family foundation can receive the IRA and pay no income tax because it qualifies as a charity and char-

ities do not pay income tax on receipt of an IRA distribution.

The family foundation is required by law to disburse 5 percent of its net worth annually to public charities.

A number of dental practice owners have adult children who live in different parts of the country. One anxiety which some parents have is that the children will lose touch with each other after both parents are deceased. The private foundation offers a unique opportunity to perpetuate the family's charitable interests and to require children to communicate at least on an annual basis as to how to disburse the funds from the private foundation.

The use of an IRA for charities and grandchildren is a technique that parents and grandchildren should consider in addition to the traditional techniques which we use in estate planning, such as Irrevocable Life Insurance Trusts, Credit Shelter Trusts, QTIPs, QPRTs, Sales to Defective Grantor Trusts, GRATs and all the other techniques that form part of the estate planning basket of tools.

Harris Markhoff, Esq., and Michael Markhoff, Esq., are partners in the White Plains, New York law firm of Danziger & Markhoff LLP. This firm is a business and tax-oriented law firm that has been representing dental practice owners in the New York metropolitan area for over 50 years.

Harris Markhoff and Michael Markhoff may be reached at 914-948-1556 or at hmarkhoff@dmlawyers.com and mmarkhoff@dmlawyers.com, respectively.



Harris Markhoff



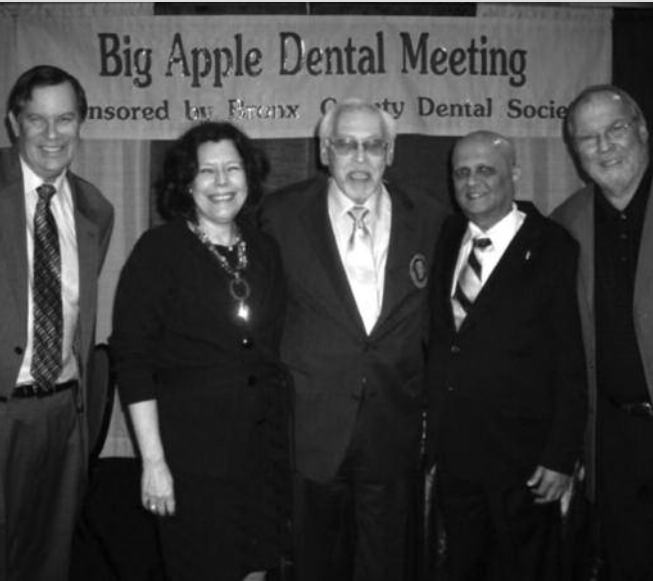
Michael Markhoff

Meeting at the Big Apple

Bronx County Dental Society Executive Director Dr. Robert Yeshion, was once again the perfect host as he welcomed NYSDA President, Dr. Chad Gehani and QCDS Executive Director William Bayer to the annual Big Apple meeting on March 28, held at the Sheraton Hotel in Mahwah, New Jersey.

The event provided an excellent opportunity to meet and greet many of the exhibitors who are also supporters of QCDS, as well as to meet potential new sponsors who expressed interest in supporting QCDS programs. Dr. Yeshion, sporting a dapper new goatee-look, and a staff of volunteers including his wife, kept things running smoothly despite the activity going on around the exhibit hall. The group was joined at lunch by Dr. P. Deborah Weisfuse, the NYSDA President-Elect, who assumes the presidency in June. The meeting provided an opportunity to exchange ideas on a number of issues.

QCDS congratulates the program co-chairs, Drs. Stephen Lowy and Leslie Zucker, on another successful meeting.



Left to right: Drs. Edward Feinberg, Deborah Weisfuse, Robert Yeshion, Chad Gehani and QCDS Executive Director William Bayer gathered at the Big Apple Dental meeting.

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Dr. Braun has been in full-time private practice specializing in Prosthodontics in Saginaw, MI for over 25 years. Dr. Braun has been featured in "Dentistry Today" as a Top Clinician in dental continuing education. He has established working relations with a number of prominent dental manufacturers focusing on implementation of new products. Seminar topics reflect and emphasize practical clinical treatment planning and have been offered at all major national dental meetings and at a wide array of university, state and district venues. In addition, he has published a number of articles on esthetic restorative dentistry in a variety of major journals.



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Be Ready to Handle An Office Emergency

By Erik Zalewski

Are you prepared for an emergency? As healthcare practitioners, you rely on your professional judgment to provide your patients with the best dental care possible. Many years of study, training and internship go into making what most people see as a traumatizing ordeal, routine for you. But how much of your training was in responding to common emergencies that will occur in your office? If the teeth are the window to our health, isn't our health also reflected in our teeth? People who seek your services because they are not the model of good oral health may also not be the model of good medical health. How many of your patients are sick with serious diseases?

I recently visited a dental client for a CPR/AED training session. She had just taken over the practice and asked me to review the emergency equipment that was in the office. Although she meant well, she was totally unprepared. Every drug in the kit was totally expired—some by a few years, her AED was obsolete, and her oxygen tank was potentially dangerous. The dentist she bought the practice from left her with no useable emergency equipment and a wide-open window to litigation, should an emergency have occurred. Fortunately, this story ends well, but the consequences could have been catastrophic.

Preparing for an emergency can be done with a three-pronged attack: prevention, equipment, and training. We should also take a moment to remind ourselves that the most common emergencies in a dentist office include syncope, allergic reactions (possibly anaphylactoid in nature), chest pain, bronchospasm and hypoglycemia.

The best emergency to have is the one that you prevented. It is important to take the time to review the medical history and medications of your patients before they sit in your chair. Medications often clue us into the medical conditions people forgot to tell you about or really don't know they have. This information might tell you what to expect when they "open wide" for you as much as what medical emergencies you might have to be prepared to deal with. Asking follow-up questions to medical conditions might be beneficial, as well. Getting a feel for just how well the insulin-diabetic has control over his or her own blood sugar or what allergies a patient, about to receive a lidocaine injection, has will help you prevent potential problems while preparing for the worst case scenario. Don't be afraid to think ahead and ask yourself, "What kind of medical emergency can I expect to see with this patient? What will I do when that happens?"

With respect to medications, it is important to remember that literally hundreds of new drugs come onto the market every year. It is nearly impossible to know what every medication is used for, what class of medications they belong to and which ones are now approved for use outside of their original intent. To help me in a pinch, I like to use the ePocrates app for my smartphone. I give you permission to cheat a little bit, too!

When emergencies do arise, there are three pieces of equipment that you want at the patient's side: oxygen, an emergency drug kit and an AED. I encourage you not to just take matters into your own hands. Certainly, call 911 and let the paramedics and medical doctors do their jobs. Of course, you probably do not have an ambulance crew at the ready in your waiting room, so there will be some things that you have to do until help arrives. Your equipment can help you provide emergency interventions and supportive care while you wait.

Oxygen can prove to be a wonder drug and should be used for patients in respiratory distress, in cases of anaphylactoid allergic reactions, for people experiencing chest pain, victims of cardiac arrest, and during the most common emergency: syncope. There are no contraindications for the short-term use of oxygen, and you can never over-do it. To deliver the oxygen to patients, every office should be stocked with a nonrebreather mask and a nasal cannula (some patients feel claustrophobic with a mask on their face) for adults. Have the same on-hand in pediatric sizes, if you see children at your practice. Set your regulator to flow at 15 liters per minute (LPM) for a nonrebreather mask and 4-6 LPM for a nasal cannula. Also, think about the portability of your oxygen tank. If a patient needs oxygen in your waiting room, how will you get it there?

Your drug kit should be stocked with medications to help care for the most common emergencies. In addition to oxygen, the ADA suggests six: Aspirin, Nitroglycerine, Albuterol, Diphenhydramine, Epinephrine, and sugar. Dentists who perform conscious sedation will want to add antidotes to opiates (naloxone) and benzodiazepines (flumazenil). It is most important that the dental practitioner is familiar with the medications in his or her kit, when to administer them, what route (sublingually, subcutaneously, inter-muscularly or intravenously), and what reactions or side-effects to expect. Before I give any patient a drug, I like to remember that they have four "rights": Is the "right" patient getting the "right" drug, at the "right" dosage, by the "right" route?

It is also important that you make sure each drug is up to date and in good condition. While others might suggest assigning a staff member to this task once per month, I suggest that you do this yourself. You will be the most familiar with the medications in the kit and their administration. My suggestion is not to trust anyone else but yourself to perform these checks, as you are ultimately responsible for all medical care given in your office. To help you, many companies will provide an automatic refill program.

Most victims of sudden cardiac arrest go into ventricular fibrillation or ventricular tachycardia. Both of these dysrhythmias may be corrected by quick defibrillation. For this reason, the New York State Dental Society pushed for it to be law that every dental office have an AED. Keeping your AED centrally

—Continues on page 19

“
The best
emergency to have
is the one that
you prevented.”

TAX TIPS FOR DENTISTS

Some dentists have not changed the F.I.C.A. tax withholding on their employees for 2011. The employee portion dropped to 4.2% from 6.2%. The medicare rate remains at 1.45% for both the employer and employee. The employer share of the F.I.C.A. remains at 6.2%. The combined rate is now 13.3% rather than 15.3%.

Stuart A. Sinclair CPA

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President's Dinner Dance

Honoring

President Chad P. Gehani and his wife, Dr. Rekha C. Gehani



& the Officers of the Association for 2011-2012

Friday, June 8, 2012

Cocktails & Hors d'Oeuvres 7:00 – 8:00 p.m.

Dinner 8:00 p.m.

The Roosevelt Hotel

Grand Ballroom

Madison Avenue at East 45th Street

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President's 2011-2012 Dinner Dance

Friday, June 8, 2012

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Please respond before May 15, 2012.

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Some Frequently Asked Questions About Transitioning Yourself Out of a Dental Practice

By *Risë and Martin Mattler*
Countrywide Practice Brokerage

Over the course of the year, we talk with lots of dentists interested in transitioning out of a practice in the near future. Lots of good questions are asked in these conversations, and some may be ones that you've been thinking about.

Here are the top questions we're getting these days...and our answers.

Q: I'm thinking of selling my practice in three to five years. What options do I have for transitioning my practice and what should I be doing now to prepare?

A: The most obvious answer is to continue working the same hours you are now for the next three to five years. Within nine months of being ready to retire, you should have your practice appraised and start looking for the right candidate to take over.

While this is the ideal approach, the reality is that many older dentists choose to slow down their pace and chair-side hours, and this can spur a decline in practice income. If you're in your 60s, you're likely to have fewer new patients entering the practice, as they may prefer to go to a younger dentist who isn't near retirement.

One viable option is to bring in an associate and structure a buy-in/buy-out. In this scenario, the senior dentist sells half the practice today, with the other half purchased three to five years in the future. The owner typically continues to practice either as a partner or an employee with a work contract. Obviously,

this works best when there is sufficient production (\$700K+ gross) to book the younger dentist fully, with work still left to be done by the senior dentist.

If you're currently working part time and earning \$300K gross or less, you can consider merging your practice with a nearby dentist's facility. This allows you to take the equity out of your practice and potentially continue to work a few days a week.

In terms of preparing for an eventual sale, you should recognize that practice value is reflective of your practice income for the current and previous two years.

Maintaining your current office hours will help to keep practice income steady until you are ready to sell it.

Meeting with your financial advisor is also a key-planning step. You should have a clear idea of when you wish to stop practicing and then discuss with your advisor the monies you will need to either reduce your work hours or retire altogether.

Q: Can't I just continue working part-time and make the same or more income than I would from selling my practice?

A: The short answer is yes. But when dentists ask us this question, we pose another: what is your time worth?

A good rule of thumb is to assume that you will need to work at least two to three years to make the after-tax income you would receive from the sale of your practice. And that's assuming no health issues arise that could reduce your income.

—Continued on page 15

At this later stage of your career, you'll likely need to spend three to four days a week in the office, to produce what you used to do in 1.5 to 2.5 days when you were younger. If you're currently working part-time, your patient base has probably decreased, and that often means participating in a modest paying PPOs to attract more patients. These plans typically pay 40 percent of normal office fees. Plus, you need to watch that your fixed overhead expenses aren't eating too far into your profits.

If you still wish to work part-time after considering these factors, you could merge or sell your practice and then ask to work part-time for the dentist who's taken over your practice.

Q: Should I upgrade my office in preparation for selling it in a few years?

A: We don't recommend making any substantial improvements or buying new equipment or fixtures strictly for the purpose of increasing practice value. That's because these assets are likely to be highly depreciated by the purchasing dentist.

Maintaining your physical plant and equipment in good working order is generally sufficient. But if the office appears tired and worn, you may want to make some minor cosmetic improvements, like painting, reupholstering waiting room chairs, and installing new rugs in public areas.

Q: My son (or daughter) is joining the practice as an associate. What transition advice can you give?

A: A few years ago, a client called us with this situation. His son had been working for six years as an associate in his \$800K grossing practice in a small town. The senior dentist asked us to appraise the practice for his son's buy-in.

During the appraisal process, we learned that there was no non-compete agreement and that the son was producing 60 percent of the practice's income. The father considered the practice a significant part of his retirement monies, and there were also three other children to consider, who were not involved with the practice.

Our key concern was that the son could leave, open a

practice nearby and end up keeping a significant number of patients and resulting income. While this was not explicitly stated, we learned that it was an option the son had considered.

We advised the father to take 10 percent off the practice value (to account for the son's efforts towards building the practice) before selling it to his son. Since no buy-in arrangements had been formalized previously, both parties agreed that this price was fair and would also preserve family harmony.

The point is that dentists who work with family members (father, brother, mother, etc.) are reluctant to formalize the working arrangement and buy-in/buy-out terms for fear of alienating their family member. Yet complications can arise when the junior dentist wants to acquire equity in the practice. It is always best to formalize an arrangement at the outset and to do so as if you are strangers rather than relatives.

Martin and Risë Mattler are the principals of Countrywide Practice Brokerage, a Manhattan-based practice sales and appraisal firm endorsed by the Queens County Dental Society. They can be reached at 800-222-7848 or visit their website: www.ddsbrokers.com

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House of Delegates Meet

—Continued from page 1
her at bwanek@nysdental.org.

After the House concludes its business on Saturday, NYSDA has scheduled a continuing education program on Sunday, June 10 at NYU College of Dentistry, 423 East 23rd Street, New York, in the Saklad Auditorium. This full-day program offering seven Continuing Education credits begins with registration at 8 a.m. followed by a series of lectures beginning at 8:30 a.m. with Dr. Doron Kalman discussing “Advanced Bone Grafting and Implant Placement Techniques.” The program offers a mixture of clinical and legal presentations including Legal Issues in Dentistry moderated by Lance Plunkett, NYSDA general counsel and featuring George M. Ding, J.D., M.P.A. who is the director of prosecutions in the Office of Professional Discipline.

The legal presentations will continue with Andrew Feldman and Amy T. Kulb, who are both experienced attorneys with expertise in defending professionals in regulatory matters and professional discipline.

After a lunch break, the program will conclude with Dr. Frederick Kahn, a clinical professor in the Advanced Education Faculty, Department of Endodontics, NYU College of Dentistry, speaking on “Restoring Endodontically Treated Teeth Using New Innovative Technological Methods.”

Pre-Registration is requested and your place can be reserved by calling NYSDA or e-mailing ecoyle@nysdental.org. The fee for dentists is \$125 and auxiliary accompanied by a dentist is \$50.

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Mortgages and Pensions: Making Your Best Financial Choices for Your Future Security

By: Paul Palazzo, CFP®, COA,

Would you rather have a hot fudge sundae tonight or a mini-scoop of vanilla with each dinner this week? If you had a major project due at work, would you rather work all this weekend or stay an hour late every night for a month?

In each case, you would be deciding whether many small quantities add up to more than one large one, the difference being that in one case you would be giving (time) and in the other you would be getting (weight).

People commonly face the financial equivalent of such choices with their mortgages—whether to prepay—and with some types of pension plans, whether to take a lump sum or a stream of payments.

As with ice cream and overtime, there is no one right answer. Rather, it depends on which option works best in a given person’s overall picture. Going back to the food analogy, if you just finished a four-course meal and half an apple pie, the hot fudge sundae may not offer you much bang for the caloric buck.

Consider the mortgage issue. Like buying stocks or bonds, prepaying a mortgage is an investment, with the pretax return being equal to the mortgage rate. Interest saved is interest earned. Prepaying the mortgage gives you an annual pretax return of the rate of the mortgage for the length of its duration. Mortgage interest generally being tax-deductible, the after-tax interest rate (and rate of return) will usually be something less than the mortgage rate and will change if one’s tax bracket changes.

But how good is pretax return at the rate of your mortgage? With what should it be compared? In one sense, prepaying a mortgage is a risk-free investment, like a Treasury bond, because for every month in which you would have made a mortgage payment, the pretax return is the same annualized.

So the question is whether you are earning, or can earn, more than that on a risk-adjusted basis. If you’re planning to invest the money in stocks, for instance, we believe that you need to be able to anticipate a return of at least one point higher than the mortgage rate over the life of the mortgage to make up for the increased risk.

Prepaying a mortgage isn’t completely risk-free. As with longer-term bonds, it carries something called interest-rate risk. Suppose that in a few years interest rates have shot up. Had you not prepaid the mortgage, you could have taken advantage of these new opportunities. As it is, you’re stuck in the slow lane with your lower returns. (If, on the other hand, rates on new investments go down, you’re better off.)

Prepaying also costs you liquidity – unfettered access to the money. If you prepay a mortgage and then decide you would rather use the cash to pay your daughter’s medical school bills, you’re out of luck. Stocks and bonds are generally liquid investments. If there is any reasonable chance that you are going to need the money, we believe you are generally better off holding on to the mortgage.

Tax considerations matter as well. For someone in a high

tax bracket and living in New York City, a pretax return would likely produce a lower after-tax return. We believe that person would do better with an AAA-rated tax-free municipal bond.

People in or near retirement have something else to think about. If prepaying the mortgage results in depletion of taxable accounts, these people could be forced to take greater IRA withdrawals than would otherwise be required. It is generally advantageous to defer those withdrawals for as long as possible.

Dealing with the mortgage doesn’t have to be an all-or-nothing proposition. Some people may choose to make smaller prepayments, in a sense hedging their bets.

Financial decisions are personal, too. Some people sleep better at night knowing the house is paid for. Others simply hate debt. In eliminating the mortgage, these people buy a sense of security. For them, the freedom of liquidity and the opportunity perhaps to earn a higher return is a reasonable price to pay for such security.

The pension decision can be seen as the flip side of the mortgage decision, since it means choosing whether to receive money gradually or all at once. Taking the monthly payment guarantees a given return every month and removes the risk of losing principal, should the lump sum be taken and invested poorly. On the other hand, choosing the monthly payments leaves you at the mercy of inflation; regardless of how much prices rise, your payments remain the same.

One financial risk in retirement, ironically, is living too long. Assuming the monthly payments are taken for life and not for a specific number of years, people who live longest will collect the greatest benefits and help hedge that risk.

As with the mortgage decision, tax considerations come into play. In many cases a pension lump sum may be rolled into an IRA, allowing it to grow tax-deferred, possibly for many years. Monthly pension payments are currently taxable.

Financial decisions such as pensions and mortgages are generally best made not individually but as one investment in a portfolio of investments, and within the context of your overall goals and circumstances. The job of wealth management advisors is to help you tie it all together.

Altfest Personal Wealth Management(SM) is the nationally recognized, fee-only investment management and financial planning firm that is endorsed by NYSDA Support Services for NYSDA and the Queens County Dental Society. Altfest contributes articles to help members of the Queens County Dental Society plan and think intelligently about their finances. If you would like to reach Altfest, call Walter Primoff at 212-406-0850 or wprimoff@altfest.com.

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Handling Office Emergencies

—Continued from page 10

located in the office will ensure rapid deployment to patients in your exam rooms as well as the waiting area. Make sure your AED pads are always within their expiration and that the battery is still good. Check your AED unit at least once per month. If the company you bought the AED from has a maintenance / reminder program, let them help you decide when it is best to replace batteries and pads. Place a numbered plastic seal on the zippers of the bag so that you are sure who checked the AED last.

All the equipment and prevention in the world is meaningless without training. EpiPens don’t administer themselves, and patients in cardiac arrest need CPR until the AED arrives. Having an emergency in your office may be one of the scariest moments of your career. How you handle that moment will be determined by how much you have prepared. Everyone in the office should have CPR and AED training and dentists and nurses should have periodic refreshers on the emergency drugs and oxygen they may have to administer. Dentists and their staffs who perform conscious sedation should also be trained in Advanced Cardiac Life Support (ACLS). Hold frequent drills in your office so that everyone knows what their role will be during the emergency. Seek help from a rescue professional to help you think of different scenarios and how to handle them.

Dental offices are not immune to a variety of medical emergencies. It is imperative to take steps that may help prevent potential medical distresses, have equipment and medications ready to administer in case of extremis, and prepare yourself and your staff for the most common medical emergencies. Procedures should be in place to handle this crisis as well as you handle fillings.

Eric Zalewski, a BLS instructor, is with the firm Have Dummy, Will Travel, which provides CPR/AED training. He can be reached at 631-698-4039.

Dental Screening
Volunteers Needed
For QCDS School
Visits in May

QCDS, in partnership with Colgate will be conducting oral health screenings at two local schools in May. In order to examine the students, it is essential to secure volunteer dentists who can donate some time, up to 2-3 hours at the school site.

On May 9th, QCDS will be at P.S. 209, located at 16-10 Utopia Parkway in Whitestone.

On May 30th, QCDS will be at P.S. 29, located at 125-10 23rd Avenue

Both screening programs begin at 9 a.m. and continue until all participating students are screened (usually no later than 1 p.m.)

These programs provide an excellent way to give back to the community, as well as to obtain favorable publicity for QCDS. QCDS has screened thousands of students over the years and looks forward to offering this service going forward, but your help is needed.

If you can donate some time, please respond by phone or e-mail to QCDS Executive Director William Bayer, noting which event(s) as well the times you can be available. Feel free to contact Mr. Bayer directly with any questions by calling 718-454-8344.

QCDS Salutes Its Newest Life Members

QCDS recognizes its members who are achieving Life Member status in 2012, after attaining the age of 65 by December 31 of the previous year and completing 30 consecutive or 40 non-consecutive years of membership. QCDS is grateful for their many years of continued participation in organized dentistry and wishes them many more years of dedicated service to their patients. A well-deserved congratulation to the following members:

Alan Block
Frank DiBlasi
Jay Duke
Rudolph Iorio
Kaushik Khakhar

Jeffrey Kochman
Arthur Kubikian
Naushir Lalani
David Levenson
Sam Malkin

Barrow Marks
Robert Quinton
Mark Weller
Joel Wolf

Implant Techniques/
Legal Issues in Dentistry

SPONSORED BY NEW YORK STATE DENTAL ASSOCIATION
Sunday, June 10, 2012 (7 CE Credits) • Registration 8:00 a.m.

8:30 a.m. – 9:00 a.m.
Advanced Bone Grafting And Implant Placement Techniques

The field of implant dentistry continues to evolve, providing advanced technology and more predictable forms of therapy with an increased focus on aesthetic success. Innovative techniques now allow for improved aesthetic outcomes and greater patient comfort. Dr. Kalman will be discussing the latest techniques in bone grafting and implant technology.

Objective: At the completion of this brief presentation clinicians will understand how to optimize hard tissue architecture for predictable surgical implant placement and restoration, and the utilization of Cone Beam CT scanning.

Speaker: Doron Kalman, DDS is a Diplomate of the American Board of Oral and Maxillofacial surgery and a fellow in the American Association of Oral and Maxillofacial Surgeons as well as an adjunct professor at Long Island Jewish hospital. Dr. Kalman currently serves as president-elect of Queens County Dental Society and is in private practice in Elmhurst, Queens.

9:00 a.m. – 1:00 p.m.
Legal Issues In Dentistry
Moderated by Lance Plunkett, Nysda General Counsel:
“Professional Discipline in the Profession of Dentistry: A 2012 Update.”
Presentation will include an overview of the disciplinary process in New York State as well as review of the most common types of misconduct violations, and a review of the New York State Education Law and related rules and statutes.

Location: NYU College of Dentistry, Saklad Auditorium, 345 East 24th Street, Rm. 14, New York.

Objective: Attendees will gain an improved knowledge of the laws governing the profession and will be better equipped to conduct their practices in conformance to the law.

Speaker: George M. Ding, J.D., M.P.A., an attorney, is the director of the Prosecutions Division in the Office of Professional Discipline in the New York State Education Department.

“Legal Update for Dentists on Professional Discipline and Audits.” This presentation includes an overview of current professional discipline, regulatory, law enforcement, and audit issues in dentistry. It will acquaint dentists with the impact that certain actions can have on their professional practice and privileges.

Objective: Attendees will learn strategies for responding to investigations by OPD and other governmental agencies and audits.

Speaker: Andrew Feldman, Esq. is admitted to practice in both State and Federal Court, and handles matters for clients throughout New York State. He has distinguished himself by counseling and defending professionals in all fields, particularly in the areas of health care and professional liability. He is experienced in matters involving products liability, environmental law, toxic tort law, labor law, personal injury, insurance coverage and health law. Amy T. Kulb, Esq. began her career as a prosecuting attorney with the Office of Professional Discipline. From 1986 to the present, Ms. Kulb has been in private practice with the firm Jacobson,

Goldberg & Kulb, LLP. She is Risk Management and Ethics and Jurisprudence instructor for the New York State Dental Association and lectures on a regular basis to medical, dental, pharmacy and professional groups on professional discipline and related topics.

1 p.m. – 1:30 p.m.
Lunch Break (A boxed lunch will be provided.)

1:30 p.m. – 4:00 p.m.
Restoring Endodontically Treated Teeth Using New Innovative, Technological Methods.

A post and core are most often used to restore an endodontically treated tooth where a large amount of coronal tooth structure has been lost. Posts neither reinforce nor strengthen teeth that have had endodontic therapy but are needed to retain an artificial crown. Post cementation and core buildup techniques will be shown. All material presented will be founded upon evidence based published information.

Objective: This presentation will give the restorative dentist a guide to the selection and insertion of a post system using new, innovative fiber post systems whose selection is based upon canal and root morphology.

Speaker: Frederick Kahn, D.D.S, F.A.C.D. is a clinical professor in the Advanced Education Faculty, Department of Endodontics, New York University College of Dentistry. Dr. Kahn has lectured nationally and internationally. He has been a researcher and author of many published papers in national and international journals, such as the “JADA, Journal of Endodontics and International Journal of Endodontics,” to name a few.

REGISTRATION FORM

Implant Techniques/Legal Issues in Dentistry (7 CE Credits) • June 10, 2012

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Concerns or complaints about the CE provider may be directed to NYSDA or to ADA CERP at www.ada.org/cerp

ADA CERP Continuing Education Recognition Program

CE Courses May - June

Pre-registration is required for all continuing education courses, except General Membership Meetings

Tuesday, May 1 6:15 p.m.

General Membership Meeting 2 C.E. Credits

7:00 P.M.: "NYC Office of Radiological Health and Article 175"

Instructor: Martin Schnee

8:00 P.M.: Achieving the Winning Smile with Cosmetic Periodontal Surgery"

Instructor: Dr. David L. Hoexter, D.M.D.

This presentation will demonstrate how to achieve that "winning smile" using the following techniques made simplified and practical: growing enamel; recessed root coverage made predictable; crown lengthening; ridge augmentation; gingival grafts: (a) lateral, (b) free autogenous, (c) sub epithelial, (d) combinations; manipulating gingival color, form, shape and symmetry; GTR – utilizing resorbable membranes; bone grafts; bone graft substitute materials; implants and perio-implant prosthetics.

Friday, May 4 9:00 a.m.

Componeer: A milestone in veneer technology 3 C.E. Credits

Topic: "Componeer: A Milestone in Veneer Technology"

"Restorative Dentistry Utilizing a New Direct Composite Veneer System." Lecture is intended for dentists interested in a one visit, direct placement system featuring Componeer prefabricated veneers that can open your practice to new patients.

Instructor: Dr. James Braun

Tuition: ADA member: \$35 Non-ADA member: \$60

Friday, June 1 9:00 a.m.

Infection Control 4 C.E. Credits

In the past this course has had an overwhelming positive response from those clinicians and their staffs who earnestly want to stay informed of the latest infection control recommendations and does so through the eyes and thoughts of a speaker/clinician who well understands the nature and demand of everyday dental practice. There's more...bring your entire staff and satisfy OSHA's annual staff training requirements. Course qualifies for relicensure.

Instructor: Safety Compliance Services

Tuition: ADA member/staff: \$85/\$70. Non-ADA member: \$260

Tuesday, June 5 6:15 p.m.

General Membership Meeting 2 C.E. Credits

7:00 P.M.: "Designing an Investment Portfolio"

Instructor: Abdus Sikder, CLU, ChFC, MBA

8:00 P.M.: Advances in digital dentistry

Instructor: Dr. John Compton

Digital dentistry is changing the way general dentists, surgeons and laboratory technicians interact with one another and plan treatment. Incorporation of CAD/ CAM technology for restorative solutions can help deliver natural,

esthetic results for patients. Connectivity between current CAD/CAM scanners and intra-oral scanners allow the restorative doctor to take a digital impression, make any occlusal modifications chair-side, and send the file to the laboratory to design the restoration. This program will review recent advances in digital technology, the increasing importance of the partnership between the dentist and the lab, the differences between various materials used for copings and abutments, surgical planning software for implant placement and restoration, and the many benefits available to the treatment team when using digital dentistry solutions.

Friday, June 15 9:00 a.m.

CPR - Certification 4 C.E. Credits

Topic: "Basic Cardiac Life Support"

Certification will cover 1 and 2 rescuer CPR, Heimlich Maneuver, child CPR and AED. The ability to recognize the signals of a heart attack and provide stabilization of the victim at the scene of a cardiac arrest is a priceless commodity. Life over death may some day become a reality to someone you know or care for. Be prepared to help save a life.

Registration at 8:30 a.m. Class begins promptly at 9:00 a.m.

Instructor: Eric Zalewski, BLS Instructor

Tuition: ADA member/staff: \$105 Non-ADA member: \$260

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Study Clubs May - June

Dr. Fialkoff Study Club

CONTACT DR. FIALKOFF (718) 229-3838

May 9 7:00 -10:00 p.m.

Topic: "Porcelain Veneers—Secrets and Avoiding Potential Pitfalls"

Speaker: Dr. Neil Berman

Location: Laterna Restaurant, 47-10 Bell Blvd., Bayside

June 6 7:00 -10:00 p.m.

Topic: "Solving and Treating the Difficult, Insane Litigious Dental Patient"

Speaker: Dr. Ed Portnoy

Location: Laterna Restaurant, 47-10 Bell Blvd., Bayside

June 8 8:00 a.m. -12:30 p.m.

Topic: "Implant Components and Their Clinical Use"

Speaker: Dr. Neil Berman

Location: Laterna Restaurant, 47-10 Bell Blvd., Bayside

1:00 p.m. -5:00 p.m.

Topic: Hands-on with cone beam radiography machine and actual patient impression with implant components

Speaker: Dr. Bernard Fialkoff, D.D.S.
Dr. Edward Portnoy, D.M.D.

Location: 56-03 214th Street, Bayside

July 8 8:00 a.m. -12:30 p.m.

Topic: "Hands-on Delivering and Finishing an Implant Case On a Patient"

1:00 p.m. -5:00 p.m.

Topic: "How to Overcome the I can't Afford It Mentality" Course questions and answers.

Speakers: Dr. Bernard Fialkoff, D.D.S.
Dr. Edward Portnoy, D.M.D.

Location: 56-03 214th Street, Bayside

Kalman Oral Surgery and Implant Study Club

CONTACT DORIS REYHAN (718) 897-6400

May 9 6:30-9:00 p.m.

Topic: "Advanced Bone Grafting and Implant Placement Techniques"

Speaker: Dr. Doron Kalman

Location: 60-70 Woodhaven Blvd., Unit C-2
Rego Park

New York Hospital Queens Study Club

CONTACT PAMELA WILLIAMS (718) 670-1419

Location: Lang Auditorium
56-45 Main Street, Flushing

June 8 7:15-9:15 p.m.

Topic: "Prescription Drug Abuse; How Practitioners Can Help"

Speakers: Dr. Eric Fader, Michel Y. Dubois, M.D.,
Dr. Louis Cuoco, Harris Stratyner, Ph.D.

NYC Interdisciplinary Study Club

CONTACT CARLY (917) 675-0109

May 9 6:30-9:00 p.m.

Topic: "Comprehensive Cosmetic in Dentistry"

Speaker: Dr. Shapiro

Location: Dopo Teatro
West 44th Street
New York

Glen Head Study Club

CONTACT DR. LEWIS (718) 326-1212

May 2 7:30-10:30 p.m.

Topic: "Endodontic Failures and Why"

Speaker: Dr. Evan Chugerman

Location: Il Bacco Restaurant
253-24 Northern Blvd., Little Neck

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MLMIC Updates Its Insurance Policy Forms

By Danielle Zimbardi, Vice President, Dental Underwriting

Medical Liability Mutual Insurance Company (MLMIC) has received approval of its updated dentist policy forms from the New York State Insurance Department. The updated policy forms were implemented March 1, 2012, upon policy renewal and for all new business.

The development of new policy forms permitted MLMIC to bring the NYSDA-MLMIC Program in line with changes in the insurance industry, as well as state laws and regulations as they relate to the dental practice environment. Every change was reviewed and approved by the dentists on the NYSDA-MLMIC Underwriting/Claims Committee.

It is standard practice for insurance companies to periodically update and revise policy forms. When such changes occur, state insurance regulation requires that policyholders be notified.

In accordance with state regulation, MLMIC commenced the notification process in December 2011 in a mailing to policyholders with March 2012 policy renewal dates. The notification process will continue through the cycle of policy renewals.

The mailing is a "Notice of Conditional Renewal." New York State regulations require that it be sent in advance of a policyholder's renewal date.

Primarily, the new policy forms involve changes in format. That is, while the policy will read and look different, much of

the core coverage remains the same. Many of the changes represent enhancements in coverage and clarifications, as well as some restrictions in coverage. Dentists and oral surgeons will now receive the same policy form.

In addition to receiving approval for the new policy forms, MLMIC received approval to increase its new doctor discounts (60 percent of first year claims made rate or occurrence rate; 40 percent of second year claims made rate; 25 percent of third year claims made rate), as well as a broadening in eligibility hours per week for the part-time discount (50 percent discount available to dentists who limit their practice of dentistry to 20 hours a week or less). Again, these changes became effective March 1, 2012 and, thereafter, upon renewal and for new business.

MLMIC is confident that these changes will provide an improved professional liability coverage product for our dentists.

Should you have questions, please contact us at 1-800-683-7769.

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