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# QCDS Marking Women's History Month, Holding First Women's Dentists Conference

#### By Marc Katz

"Female dentists see dentistry and their patients differently," according to Queens County Dental Society President Dr. Hanette Gomez, "and patients see female dentists differently."

The topic will be explored in-depth on March 24 when QCDS holds its first program geared specifically to the challenges women face in the dental field. "March is women's history month and women's international month," said former

QCDS President Dr. Prabha Krish-

nan, "so it is only fitting that we ex-

plore the challenges of women in

6 p.m. at QCDS headquarters and is

presented at no charge to women

dentists practicing in Queens, will in-

clude a "meet and greet" period with

light refreshments, a CE course fea-

turing Jackson Heights orthodontist

Dr. Rekha Gehani speaking about

"Clinical Orthodontics and How to

The program, which begins at

dentistry during March."



Dr. Prabha Krishnan Conference Co-Chair

Stay Away from the Office of Professional Discipline," and a light dinner and discussion.

"We can all share our experiences as women in dentistry," Dr. Gomez said. "We can discuss how family, children and our practice have an affect on our lives. By discussing our first-hand knowledge, we can help each other succeed. By working together, we can achieve a lot," she said.

A committee of QCDS women leaders is planning the event, including Drs. Rekha Gehani, Hanette Gomez and Arelys Santana. The committee is chaired by Drs. Charlene Berkman and Prabha Krishnan. They formed their committee after discussing the idea with QCDS Executive Director Dr. Chad Gehani, a former president of QCDS as well as the ADA.

In 2009, while Dr. Krishnan served as QCDS president, a well-attended women's dental conference was conducted, but was open to both male and female dentists practicing in Queens. "We are holding this program specifically for the women dentists of Queens," Dr. Krishnan said.

Women have long been involved in leadership positions within QCDS. In 1994 Dr. Lois Weiss was elected the organization's first woman president. She was followed by Dr. Karen Lewkowitz in 1995, Dr. Berkman in 1999, Risa Samuels in 2002, Dr. Krishnan in 2009, Mercedez Mota-Martinez in 2011, Beatriz Vallejo in 2012, Arelis Santana in 2021, and the current QCDS president, Dr. Gomez. In 1998, QCDS member Dr. Rekha Gehani became the first female QCDS member to be selected to the New York State Board of Dentistry. She became the first woman chair of the Board in 2008.

All have come a long way since the efforts of what is be-



lieved to be the first woman to practice dentistry in the United States, Dr. Emeline Roberts Jones. According to an article titled "Women in Dentistry," authored by Elizabeth Neber King, a graduate of the Washington University in St. Louis School of Dentistry who made a study of the subject, Dr. Jones was married to a dentist, became her husband's assistant in 1855, and after his death in 1864 developed her own practice in New Haven, Connecticut. In 1893,

Dr. Charlene Berkman Conference Co-Chair

she was appointed a member of the Women's Advisory Council of the World's Columbian Dental Congress and in 1912 she

was awarded an honorary membership in the Connecticut Dental Society.

Lucy B. Hobbs Taylor, another dental pioneer, holds the distinction of being the first woman to graduate from a dental college. The community of Ellenberg, New York, was shocked in 1859 when she expressed a desire to study dentistry. She practiced in Iowa and, in 1861, became a member of the Iowa State Dental Society. She was later admitted as a student at the Ohio Dental College and in 1866 was granted a dental degree.



can Association of Women Dentists as reported in the publication Dental Economics. "As the owner of one's practice, a woman can set the rules to meet her needs," it said. The report went on to state: "...women are less likely to be

in solo practices and more likely to be employees or independent contractors. Fifty-three percent of female dentists are solo practitioners compared to 75 percent of male dentists, and 29 percent of women are employees or independent contrac-*—Continued on page 11* 





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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) 454-1020. 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) 454-1020.



Publication Member of the American Association of Dental Editors

#### **Queens County Dental Society**

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### From the President

hanettegomezdds@gmail.com

### **Attracting Culturally Diverse Membership**

By Dr. Hanette Gomez

is not just increasing the membership of the Society, but to bring more ethnically and culturally diverse dentists into our organization.

I feel we are as an organization are not making use of all of the resources available to us. Being one of the most diverse counties in New York State, it is larger percentage of ethnic, gender and culturally diverse dentists as members of QCDS. We need to find the way to create a new strategy to attract additional dentists-and have them realize the need to join us.

I decided to act on this issue by planning a variety of social activities at our headquarters featuring participation by different ethnic groups, enabling them to share their knowledge and create new friendships that could turn

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As Queens County Dental Society president, my main goal into a new tidal wave of membership for our organization.

We are planning a get-together social event with

...my main goal is not just increasing unacceptable that we do not have a the membership of the Society, but to bring more ethnically and culturally diverse dentists into our organization.

women dentists from Queens later this month. They have been invited to our headquarters for an educational and fun night, and to get to know more about our organization. Out of all the licensed dentists in Queens, there is a large percentage of women dentists and most of them are not members of QCDS. That provides a large market share for our growth and, frankly, they should be a prime membership target for QCDS. New, young dentists joining our Society will bring fresh blood, open minds and more personalities that could embrace the organization and its leadership, and take QCDS to a higher level.

I want to encourage our members to reach out

to this new generation of young women dentists to help them get involved with organized dentistry. They should be directed and guided as to different aspects of the profession and should receive continuing education, updates and support from their peers.

In this time of uncertainty, our Society needs to work more closely with the next generation of dentists to help them become involved with organized dentistry. One way to do this is by becoming a mentor. We need to create a mentorship program in our Society. But, without membership supportwithout your support-it will not be possible. A mentorship program will help guide new dentists through their career puzzles and show them the important responsibility of serving their community. They will be able to learn what path to follow to eventually have their own practice and a promise of a future in the profession. If we are able to count on our members to develop this program and became mentors to a new generation of dentists, that will fulfill one of our Society's missions.

I am asking our membership to get more involve and help us turn the Queens County Dental Society around by sharing your ideas and offering your help. Please contact me personally or Executive Director Dr. Chad Gehani to discuss this vital issue further. We look forward to hearing from you.

> Contacting QCDS? Please Note new our new QCDS office numbers

Phone: 718-454-1020 Fax: 718-454-1061

# Nominating Committee Now Being Formed, Seeking Recommendations for New Officers

By Dr. Jayesh Trivedi, QCDS Secretary

At the May 2022 general membership meeting, nominations and election of three members and alternates of the Nominating Committee will be made. The members of the Nominating Committee will be:

• The last two immediate past presidents

• Two members to be elected by the Board of Trustees at its April 2022 meeting

• Three members to be elected by the membership at the May 2022 membership meeting

• Three alternates to be elected by the membership at the May 2022 membership meeting

• The president acts as chairman without the right to vote.

Elections to office, Nominee for New York State Dental Association Board of Trustee member, including QCDS members of the Board of Trustees are scheduled for the November 9, 2022 membership meeting. The Nominating Committee will report its recommendations at the October 4, 2022 membership meeting.

Additional nominees will be added for any elective position upon 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.

The Nominating Committee will meet this June. The date of this meeting will be determined by the QCDS president.

This may happen via Zoom or be postponed to July or August.

Any member may request his or her candidacy. Such request should be sent to the Nominating Committee, Queens County Dental Society, 86-90 188 Street, Jamaica, NY 11423 or emailed to QueensCountyDentalSociety1@gmail.com. Include a letter of intent with the position indicating the position of interest and a current CV. This request must be received before June 1.

### **New Member Special**

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### 'Lifting' Needed for Organized Dentistry

By Paul R. Leary, D.M.D., Second District ADA Trustee

I would like to begin by saying "Thank You!" During the holiday season it is important to take the time to slow the pace down to consider the path we are following. That path starts with family—and there is no better place to start who give us the very best reasons to pursue a meaningful and successful career.

learyp@ada.org

ADA Trustee Report

And then there is your staff, assisting you in the delivery of the care we are all so proud of.

And, thank you to our local society and its amazing and dedicated staff, and every volunteer who chooses to support our profession beyond the call of running a practice. They work every day avoiding the hurdles between us and all the forces knocking at our doors while we concentrate on what we do: delivering care.

We are working together to watch the many issues that confront us and doing our very best to support the mission of guarding the gates to advance the practice of dentistry, in all its forms, and deliver the best level of care to patients who trust us to deliver exactly that.

You may ask, "How could I contribute to supporting my profession?" It begins with spending the time to read what is happening around you right now. Every effort, even the smallest, adds to the gains we all feel. Welcome a new dentist in your area to a meeting or something as simple as saying hello to a new face has the effect of warmth. There are so many issues that every practicing dentist faces every day, most appreciated by those who spend time in the same foxhole. The practice of dentistry is not easy. In a spirit of wellness and community, the net that supports us is only as strong as each thread that holds us together. Your membership in this profession is as critical. You may feel overwhelmed by the concept of adding another responsibility to the long list you currently have. I assure you, without exception, those who extend themselves are paid back in many ways that money could never buy. You are part of this great circle, look at the dedicated members who seem to be so happy to be in each other's company. The common denominator in all of this is that we are all dentists. This is recognized within this state even in licensure. New York State licenses dentists, without separation into specialty. Those are defined more broadly within our governance structures, yet this state feels the practice of dentistry combines all. I only bring attention to this because united we remain a very strong group. We are delivering the very best oral healthcare to those who trust us to deliver just that. Our profession is defined specifically not joined."

by a code of ethics and practicing by that code establishes the foundation of what we aspire to do in the delivery of the very best care we can manage.

Nationally, your ADA has been actively keeping our resources spread over many issues. Third party payers, contracts and all things related to reimbursement is listed by many in our membership as one of the most significant issues affecting our doctor-patient relationship and what in-

> fluences payers have on the setting of claims for delivering that care. Two councils at the ADA, the Council on Dental Practice and the Council on Dental Benefit Programs, concentrate specifically on the many issues facing us as dentists. They are consistent in their advocating for the best policies to keep our members in front of these issues to the best of their ability. We must be diligent in our actions not to violate FTC regulations in recommendations about leverage working with providers.

> > Advocacy in legislation remains a fantastic member benefit. With all the difficulties experienced during this pandemic, the success of our arms in Chicago and Washington helped us realize gains what

would never have been possible by any small group or individual when working out the rules and regulations following the signing of legislation. The best example of this was working out the language around PPP loans that originally were signed for an eight-week provision. We were still closed eight-weeks after the initial closure, so we could not have justified using any of these disbursements for payroll. Artful negotiation and advocacy landed provisions in the regulations that extended this period to 26-weeks or the end of the year 2020. This simple adjustment provided great relief to all members who will probably pay two to three lifetimes of dues simply for this single adjustment made to existing legislation. I could go on all day describing other gains, but please understand the ability of those great professionals who support us every day to provide us with a benefit that far outweighs the cost of membership every day.

I will close by wishing you all the best the new year has to offer, for your families and everyone you hold dearest. I look with great hope to the world that waits for us in the coming months and years. If you do even the smallest of lifting in support of our profession, it will help make this profession the envy of all. People will then stop asking, "Why do I join?" and replace that with "How could I have not joined."

Advocacy in legislation remains a fantastic member benefit.

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he IRS shut down their electronic filing for personal income tax returns and corporate income tax returns on November 20, 2021. It will not open again until about February 1, 2022. This means if you are filing a personal return or corporate return in the interim, you must file on paper and mail the returns in.

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If you have not yet renewed your membership, please do so as soon as possible.

You will no longer be receiving communications from the ADA, NYSDA, or QCDS unless you renew for 2021.

Please don't let your membership lapse!

Call the QCDS Executive Director at 718-454-1020 if you are experiencing temporary financial difficulties to explore possible options.



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# **ADA's President is Optimistic Going Forward** For the Dental Profession, Despite the Pandemic

#### By Dr. Cesar R. Sabates

President, American Dental Association

Dentistry began the new year with what felt like a familiar experience. At its height, the Omicron variant of COVID-19 saw a national surge of more than 800,000 cases a day. Although cases have since declined rapidly to 80-percent below January's peak, case rates are still well above 100,000 a day in the United States.

As dental professionals, we recognize the difficulties posed by the dramatic increase of cases in our communities. In addition to the health and wellbeing of our patients and team members, we also have concerns about what this may mean for dentistry's pandemic recovery.



Although our recovery has been relatively steady,

a January 2022 report

from the the ADA Health Policy Institute (HPI) finds that dentists whose schedules were not fully booked cited patient cancellations and not enough patients making appointments. Dentists are also facing staffing difficulties, which are

ADA President Dr. Cesar R. Sabates

connected, in part, to pandemic-related concerns among allied dental professionals.

While the overall profession has successfully traversed pandemic-era practice, some practices have had a harder time bouncing back. However, nearly two years into the pandemic, we are in a stronger place than we were at its onset.

In addition to the proven protections of vaccines and other public health measures, dentists have also played a key role in advancing public health in this critical time. Our enhanced infection control protocols and the implementation of the ADA's practice guidance have mitigated risk for patients and dental teams. We have proven an ability to safely provide our communities with essential health care.

I thank you for your commitment and continued vigilance. And as you work hard to advance public health, the ADA has your back on the issues affecting you and your practice right now. ADA.org offers tools for dental team recruitment, guidance for navigating the current phase of the pandemic, as well as mental health resources.

The pressures of living and working through a pandemic can take a toll. But no member of our dental family is ever alone. The ADA is here for you today and always, and we will continue to be a resource and network of support. That's the beauty of the dental family that is the ADA.

Do you know what else makes the ADA so special? The dedication of members like you. As dentists, we all stand on

common ground and are connected by shared purpose. The passion we have for our patients, the drive to make a difference, the values that order our steps every day, the vision to make our world a healthier place, and the opportu-

nity to give back-to stand on the shoulders of

present and a brighter future.

those who came before us and build a strong

Each of us has the power to make a

difference for someone else. One lis-

tening ear, one kind word, one

thoughtful moment at a time. This is

how we serve. This is how we lead.

dental community is strengthened

The work you do matters. Our

This is how we build community.

... as you work hard to advance public health, the ADA has your back on the issues affecting you and your practice right now.



by your unique contributions, and each of you plays an important role in driving our profession forward in Queens County and beyond. Know that you can count on the ADA throughout

your career.

I am optimistic about dentistry's future. We have continually proven our resilience during trying times, and the ADA family will continue our journey the best way we know how-together.



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# New York Has New Safety Regulations on Use Of X-Ray Equipment and Dental Office Training

#### By Martin Schnee

The New York City Office of Radiological Health has revised their Article 175 of the Health Code and have added a few new policies that affect dentists. Everyone had received a letter before the COVID-19 pandemic indicating that there are new regulations and that the City will be enforcing them. This does not mean that a new inspection is needed; the same five-year inspection cycle is in effect. The City has resumed sending out the Commissioner's order notifying of the five-year due date. Do not rely on this, as there have been errors in their mailings. Keep track of your own due dates.

Every dental office must have a current permit, a copy of the last CRESO report, a copy of the New Article 175, and proof of training of staff, appropriate office policies and regulatory requirements for personnel taking x-rays (hygienists and dental assistants). To get a copy of Article 175, simply go to Google and enter "Article 175 NYC Health Code." It typically will be the first choice that pops up. The entire text is about 119 pages, but it is not necessary to print it. Just download it and save it to your desktop. The main section pertaining to dental regulations is 175.49. There are three main changes that you should be aware of.

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585 Stewart Avenue Garden City, New York 11530 (516) 222-2330 www.jgklaw.com EMAIL: info@jngllp.com The first affects all dentists with a requirement to train all new and old staff annually about how to take x-rays and the proper use of the dental equipment. This will have to be documented. Big Apple Radiation has a two to three-hour Power-Point class available for a fee. It presents a basic understanding of x-rays and radiation safety in very simple terms, and explains the protocol and regulatory requirements. It can be given live or on Zoom and can possibly qualify to receive continuing education credits at the same time, if your organization has that authority. A signed certificate is issued for each person attending the class. The dentist will still be responsible to set up training and choose the office protocols and the regulations that pertain to the x-ray practice.

The second new requirement affects hand-held units and requires that anyone using such a unit must wear a protective apron. The third requirement is for CBCT and has reduced the frequency of quarterly tests to semi-annual tests. The annual calibration for CBCT is still required. There are other regulations that affect dentists besides section 175.49 and continue throughout Article 175.

The Office of Radiological Health has developed a Disposition Form for canceling a permit and removing or replacing an x-ray unit. It must be sent to them within 14 days of such action.

Remember, everything you do for a car you must also do for your permit, including two-year permit renewal, five-year inspection cycle and cancellation of permit when you retire or sell a practice. If you get rid of an x-ray unit, make sure you get a receipt. X-ray tubes may not be discarded as normal garbage. Permits are not transferable to new owners or for a change of name or address. Make sure you have a copy of your last inspection report on hand, since City inspectors can pay a visit unannounced.

*Further information and guidance on x-rays in a dental office is available by contacting author Martin Schnee, of Big Apple Radiation Safety, Inc., at 718 373-6348 or 718 986-4996.* 



INSTRUCTIONS: Print or type all information. Please sig	n (required) and return the completed form.	
1. Facility Registration Number		
2. Facility Information		
Facility Name		
Premise Address:		
3. Number and Type of Units		
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B. Radiographic Fixed/Mobile	K. Non-Medical Electron Microscope	
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G. Mammography	P. Non-Medical XRF	
H. Stereotactic Breast Biopsy	Q. Other	
I. Medical Accelerator/OBI		
. Current Status of Equipment:		
A. Are you closing your registration?	YES NO	
B. Has equipmentbeen sold?	YES NO	
If yes, date of sale: / /	1	
Month Day	Year	
C. Has equipment been disassembled or scrappe		
If yes, give date: / / Month Day	/ Year	
D. Is equipment currently in use?		
	/	
Month Day	Year	
New location of equipment (if applicable)		
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### Marking History: QCDS First Women's Dentists Conference

-Continued from front page

tors compared to eight percent of men. While this discrepancy is in part a function of age differences, women tend to move more slowly into solo practice arrangements than men.

"Women are somewhat more likely than men to work parttime: 28 percent vs. 15 percent, and are less likely to work over-



Lucy B. Hobbs Taylor First Dental College Graduate

time: 16 percent vs. 30 percent. A recent study indicated that marital status does not appear to have an impact on work hours among female dentists. However, having children reduces women's work hours by nearly one workday per week, on average.

"Gender differences in income are frequent topics of discussion. According to a 1995 ADA survey, nearly two-thirds of female dentists believe that they earn less than their male counterparts..."

Dr. Krishnan said: "We are presenting this program specifically for the women dentists of Queens. All should attend if your practice is in the borough. Even if you are not a member of QCDS, all women dentists will find the program very beneficial."

Reflecting a similar theme, QCDS President Gomez said she would like to see more women become involved in organized dentistry—and in the Queens County Dental Society in particular. "There is certainly more room for additional women to become involved."

She invited women dentists to contact her personally at QCDS by calling 718-454-1020.

### **CE COURSES**

Pre-registration is required for all CE Courses except General Membership Meetings. Call 718-454-8344 to register.

#### Sunday, March 30

9:00 a.m. - 1:00 p.m.

#### CPR - Certification Topic: Basic Cardiac Life Support

4 C.E. Credits

Basic Cardiac Life Support Certification will cover one and two 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. Be prepared to help save a life.

#### Instructor:

Tuition: ADA member/staff: \$130 Non-ADA member: \$260

Pre-registration is required. Call 718-454-1020 to register. Class begins promptly at 9:00 a.m. at QCDS headquarters, 85-90 188 Street, Jamaica. A \$15 late fee will be added to all who pay and/or register on the day of the event. A full refund is available until the day before the lecture.

# Thursday, April 76:00 p.m. - 10:00 p.m.CPR - Certification4 C.E. CreditsTopic: Basic Cardiac Life Support

Topic: Basic Cardiac Life Support Basic Cardiac Life Support Certification will cover one and two res-

cuer 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. Be prepared to help save a life.

Instructor: BLS Instructor

Tuition: ADA member/staff: \$130 Non-ADA member: \$260

Pre-registration is required. Call 718-454-8344 to register. Class begins promptly at 6:00 a.m. A \$15 late fee will be assigned to those who pay and/or register on the day of the event. A light dinner is included.



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### **OSTEOGEN** BIOACTIVE RESORBABLE CALCIUM APATITE CRYSTAL CLUSTERS

### NON-CERAMIC &

**RESORBABLE BONE GRAFT** 

OsteoGen® is a bioactive, non-ceramic & resorbable calcium phosphate crystal that is physicochemically and crystalographically similar to human cancellous mineral Ca<sub>8</sub>[PO<sub>4</sub>]<sub>3</sub>OH.<sup>1.6</sup> The process of growing a crystal yields a unique Ca:P ratio that is NOT a ß-TCP and NOT a dense ceramic HA, nor is it a biphasic mixture of the two.

BIOACTIVITY e crystal clusters control migration

**OVER 35 YEARS OF** 

The OsteoGen® bioactive crystal clusters control migration of connective tissue and form a strong bond with newly growing bone as the graft resorbs. The result is predictable bone formation for general grafting & use with implants.<sup>1-6</sup>

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#### RADIOLUCENT TO RADIOPAQUE

The x-ray reveals when sufficient bone has formed and the site is ready for implant placement. OsteoGen® non-ceramic crystals are radiolucent on the day of placement & radiopaque in ~4-6 months following resorption and host bone formation.<sup>14</sup>

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#### HYDROPHILIC CRYSTAL CLUSTER STRUCTURE

The crystallographic structure and geometry of a bone graft matters. OsteoGen® non-ceramic crystal clusters intertwine to form a hydrophilic 3D matrix leading to the immediate absorption of blood flow. This is critical for the initiation of bone formation, early angiogenesis and bone bridging even across 8.0mm critical size defects.<sup>3-6</sup>

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1. Ganz (2002) 2. Artzi (2003) 3. Valen (2002) 4. Spivak (1990) 5. Ricci (1992) 6. Jensen (1998) Radiographs courtesy of German Murias DDS, ABOI/ID