

Prabha Krishnan to be NYSDA Vice President *First QCDS Member to Hold Position in 13 Years*

Prabha Krishnan has been selected by the Queens County Dental Society Board of Trustees to be the incoming vice president of the New York State Dental Society, putting her on track to become the NYSDA president in 2024. If elected by the NYSDA House of Delegates next spring, she would become the first woman from QCDS to hold the position and the first member from Queens to hold the post since Chad Gehani, who was elected to the office 13-years ago.

Once elected as vice-president, nominees usually move on to become president-elect and then president of the organization. She was elected by the QCDS Board of Trustees recently, following presentations by each of the candidates for the position.

"I really enjoy what I do," Dr. Krishnan said. "I want to make a difference and I want to give back to my profession in appreciation for all that dentistry has done for me."

Dr. Krishnan served as the QCDS president in 2009 and has also been chair of its Council on Governmental Affairs and Council on Membership. She currently chairs the QCDS Council on Dental Benefits.

Following her term as QCDS president she went on to become a NYSDA delegate from 2010-2015, and again from 2020



Dr. Prabha Krishnan

to the present. She was the first woman NYSDA trustee from Queens, serving for four years. She has also served on the NYSDA House of Delegates Reference Committee.

There has been only one other woman president in NYSDA's history, Dr. Deborah Weisfuse, of the New York County Dental Society, covering Manhattan.

Dr. Krishnan has also been active with the American Dental Association. She was a delegate between 2010-2015, and an alternate delegate from 2008-2009 and 2016-2020. She has served on the ADA Council on Communications and the Diversity and Inclusion Committee of the ADA Board.

"I want to be a representative of all of our members," Dr. Krishnan said. "I want to be addressing their needs and concerns. That is my top priority."

She said taking this position is a three-year commitment, "but I am anxious to do it. I plan to travel throughout the state as president-elect, visiting components and hearing their concerns. I want to connect and engage with the future of our profession—early career dentists."

Dr. Krishnan has been in private practice in Forest Hills

—Continued on page 9

From the President

Working to Achieve Our Goals for the Year

By Dr. Arelys Santana



Positive Interaction between members of the Queens County Dental Society and other associations are vital to building a stronger association, part of our continuing efforts to make QCDS stronger.

I would like to thank the Queens County Dental Society membership once again for giving me the opportu-

nity to serve as your president for 2021. It provides me with an amazing opportunity to showcase the QCDS commitment to our membership.

I am very excited to continue working towards reaching our goals for this year. Only the first few months of the year have passed and half of our goals have already been accomplished. We have presented more than 40 continued education credits. Half of our headquarters building has been renovated, and we have reached out to many new members.

This is going to be an extravagant year, as we plan on offering more diverse CE programs than we have ever done before. I encourage our membership to register and take as many of these offerings as possible. These programs present you with a huge advantage, since most of them are free or heavily discounted.

Thank you all for the continued support. And, please don't forget that we will have an in-person World's Fair of Dentistry later in this year.

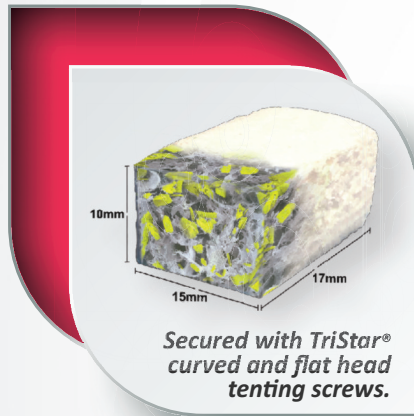
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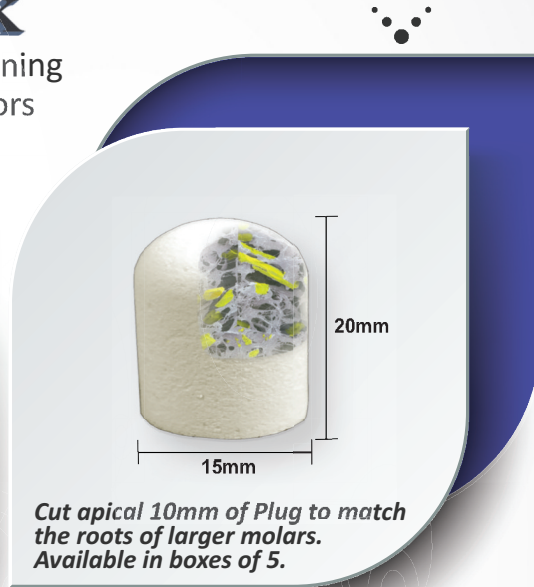
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The ADA and Its Response to the Pandemic

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

I welcome you with news from your American Dental Association. In the time of year we are all usually gathered for installations of officers across our 13 components, the release of the vaccines is front and center.

Upon reading this, you will have received the two-shot series by Pfizer or Moderna and we are well on the way to having most of our members covered. Not all states are as fortunate with the 1A classification as we are in New York, however all have had different experiences in delivering these according to standards delivered in each state. Let me remind you that by the first weekend of last February we had a majority of our profession vaccinated and that is a miracle, one we could only have prayed for as recently as October of the past year.

It is convenient to join the list of complainants about how this delivery system is flawed. I agree that there are many issues, but helping find the answers is what leaders do and the efforts of those who can help this delivery system are the people we are in contact with.

Your ADA is in the process of evaluating our national communications in regards to our pandemic response and I will share with you some information gathered by our Communications Council to look at some results:

Looking at areas of strength, we have great results. We must, however, look at areas that need improvement in order to continually refine our communication across all membership categories. Digging further into the data, it appears that seven out of ten of dental professionals carry these concerns about COVID-19:

The response to the pandemic crisis was dealt with by a complete realignment of priorities at all levels of the organization. The illustration shows the contact points utilized by members and the ADA Board, ADA Staff, and members. Business as usual was abandoned and all of this was accomplished when our staff in Chicago and all over the country moved overnight into a work-from-home environment. The flexibility and dedication of your staff from every component all the way to the executive director of the ADA, Dr. Kathy O'Loughlin, demonstrated why this organization is so highly respected by those we deal with every day. I cannot overestimate the dramatic efforts made on every member's behalf to get results throughout the pandemic. May I remind you that, in the area of pandemics, every one of us is a first-year student and to have these results is outstanding under any circumstance.

With greater communication between members and staff throughout this, we have realized that we have always pub-

lished a great deal of information but have learned that our members have very different preferences about how to receive this information. We also asked if future toolkits could be constructed for you to refer to what topics and resources you would consider prioritizing as the focus for your organization? The chart focuses on the answers to those questions and can help us focus our efforts to providing excellent information on those things we do well and leave the information on those things we do adequately for others to do.

There are so many programs our ADA attempts to address that it dilutes our resources to try to accomplish all of them. We have always been an "idea place" and the difficulty is that it can build loyalty to ideas that may be beyond our organizational abilities. Ideas may fail to pan out, yet are difficult to abandon. We are attempting to focus more narrowly on the area of things we do very well, and steer members to resources to help in all fields. This is a quantum shift in organizational direction and will take a great stride in understanding to see why this focus will benefit us.

A priority that continually appears in our top three when solicited from members is the world of dental benefits. Many consider our organization for the leverage it could weigh in this area of the benefits world, yet they are ill informed that there are many Federal Trade Commission and other regulations that prevent us from acting in ways that use that leverage for reimbursement, without violating existing laws that prevent such action. The repeal of McCarran/Ferguson this January is a major accomplishment. It adds to the amazing resume that our advocacy group, led by Mike Graham, the staff in Washington and Chicago, and our local advocacy groups have offered us. There has been much action in the arena of EIDL, PPP, HHS funds available and lobbying for easing the restrictions relating to when and where those funds can be used.

There remain a number of issues that currently run high on the wish list of members from all over the country. I ask that you refer to these and realize that advocacy and membership continue to be the driving force behind many of our efforts. The changing demographic representation throughout our profession is what we are growing into. Understanding the many ways that helps our profession is important.

There are two other programs I wish to make you aware of that are showing great promise as we move forward in 2021. ADAPT (ADA Practice Transitions) has now become available in all 50 states. This is a rapidly expanding program that is still

—Continued on page 10



...by the first weekend of last February we had a majority of our profession vaccinated and that is a miracle.



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The *Bulletin* is published six times a year, bimonthly. It is the official publication of the Queens County Dental Society. Neither the Society nor the *Bulletin* assumes responsibility for the points of view or opinions of its contributors.

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.

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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
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Understanding the Legal Issues Related to The Mandatory Vaccination of Employees

By Al Anthony Mercado, Esq.

COVID-19 vaccination represents an answer to some of the health issues of the pandemic, while simultaneously posing a legal quagmire for dental practices regarding employee vaccination. Given the complexity of the legal issues, it is recommended that before the implementation of any employee vaccination policy the reader consult with employment counsel as well as their human resources personnel regarding their specific situation.

Mandatory Vaccination

The question is whether in the absence of a government mandate for vaccination, could—and should—dental practices mandate a COVID-19 vaccination for employees? Unfortunately, the answer is not simple. In fact, there is no general “yes” or “no” answer, but rather a set of factors for a dental practice to consider on an individualized basis. Key Factors for Consideration are

- The need for a vaccinated workforce,
- Can a dental practice mandate vaccination of its employees?
- Compliance with employment laws

Assess the Need for a Vaccinated Workforce:

- Workforce size— are there 15 or more employees?
- Physical size of the office—is there room for social distancing in accordance with CDC and other recommendations? Are there physical barriers? Ventilation systems?
- Employees roles (which employees have contact with patients),
- Benefits of vaccination for the workforce, patients, third-party vendors,
- Potential liabilities for having an unvaccinated workforce.

Employers face potential liability under workers compensation law for creating or allowing conditions to exist for on-site COVID-19 exposure to employees. This would include employee to employee exposure. Employers also potentially face liability under negligence law for allegations of COVID-19 exposure to patients and third-party vendors. While causation could be a strong defense in such liability cases, it would not preclude the case from being brought in the first place. In this regard, the benefits of a vaccination policy for employees are clear.

Can Employers Legally Mandate Vaccinations?

As of this time, New York State and the federal government have not made vaccination of healthcare employees mandatory.

In March 2020, the Equal Employment Opportunity Commission updated its guidance, “Pandemic Preparedness in the Workplace and the Americans with Disabilities Act,” in response to the COVID-19 pandemic. The EEOC suggests that employers may require vaccination of employees as long as the employer considers the need for accommodations based upon an employee’s disability and sincere religious beliefs. More specifically, the EEOC has taken the

position that COVID-19 is a “direct threat” to health or safety in the workplace. In addition, the EEOC update in response to the COVID-19 pandemic states: “The EEOC is updating this 2009 publication to address its application to coronavirus disease 2019 (COVID-19). Employers and employees should follow guidance from the Centers for Disease Control and Prevention as well as state/local public health authorities on how best to slow the spread of this disease and protect workers, customers, clients, and the general public. The ADA and the Rehabilitation Act do not interfere with employers following advice from the CDC and other public health authorities on appropriate steps to take relating to the workplace.”

Compliance with the Americans with Disabilities Act

If the dental practice has 15 or more employees, any staff vaccination requirement would be subject to federal legal requirements to accommodate disabilities, including pregnancy-related disabling health conditions under the Americans with Disabilities Act, as well as genuinely held religious beliefs under Title VII of the Civil Rights Act of 1964 (Title VII).

In general, the ADA requires employers to provide a “reasonable accommodation” and non-discrimination based on disability. It also provides rules and limitations on employer medical examinations and inquiries related to an employee’s disability.

Regarding “reasonable accommodation” under the ADA, the dental practice should consider:

- Risk to substantial harm to the health and safety of others, including other staff members and patients,
- Whether the pre-vaccine measures such as masks, social distancing, shields, etc. are still effective,
- If the pre-vaccine measures are no longer effective, the dental practice should document how they are no longer effective and consider job-adjustment, reassignment or unpaid leave,
- The dental practice should document if an accommodation creates an “undue hardship” on the practice and describe the factors and analysis in detail.

If an individual with a disability poses a “direct threat” despite reasonable accommodation, he or she may not be protected by the nondiscrimination provisions of the ADA. The employer should conduct an individualized assessment of four factors in determining whether an unvaccinated employee poses a “direct threat” to the workforce and patients:

- The duration of the risk,
- The nature and severity of the potential harm,
- The likelihood that the potential harm will occur and,
- The imminence of the potential harm.

Assessments of whether an employee poses a “direct threat” in the workplace must be based on objective, information, “not on subjective perceptions...or irrational fears” about a specific disability or disabilities. A conclusion that there is a “direct threat” would include a determination that an unvaccinated

—Continued on page 6

Understanding the Legal Issues Related to the Mandatory Vaccination of Employees for the prevention of COVID-19

Continued from Page 5

employee will expose others to the virus at the worksite.

Sincerely held religious beliefs protected under Title VII of the Civil Rights Act of 1964 may entitle an employee to legally refuse mandatory vaccination. The failure to reasonably accommodate a qualified individual based upon disability or religious beliefs can give rise to a discrimination claim. *Edwards v. Elmhurst Hospital* is a cautionary tale for employers in mandating vaccinations of employees. In that case, a health care worker brought a discrimination action against his employer for discrimination under Title VII based upon his refusal to take the H1N1 flu vaccine as required by his employer on religious grounds. The employer took disciplinary action against the employee based upon the refusal. Ultimately the case was dismissed, but not before the court found that the employee had a bona fide religious belief.

Given the complex matrix of legal issues surrounding ADA and Title VII compliance, consultation with employment counsel must be done before implementing any vaccination policy with employees to avoid violating the ADA and Title VII.

Other legal considerations are

- New York State and local employment regulations,
- Whether the employees are “at-will” or are the employees covered by a collective bargaining agreement/contract,
- Whether the workforce includes independent contractor dentists?

- Paid time-off for vaccinations,
- Verification of vaccination, limited to employee’s name and whether the vaccination has been administered.

As an alternative to a mandatory vaccination policy, dental practices can consider a voluntary vaccination policy. It should be noted that a voluntary vaccination policy must still comply with the ADA and Title VII, and much of the same analysis would apply to the development and implementation of such a policy. Some suggestions for obtaining voluntary compliance include:

- Providing employees with information about the vaccines to assist the employees in making a decision,
- Providing employees with information about the benefits of a vaccinated workforce,
- Providing employees with the CDC recommendation regarding vaccination and encouraging them to follow the recommendations found at <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/faq.html>
- Providing employees with logistical information to assist them in getting vaccinated and
- Providing paid time-off for vaccination.

Developing an Employee Vaccination Policy

Whether mandatory or voluntary, it is important that em-

—Continued on page 8



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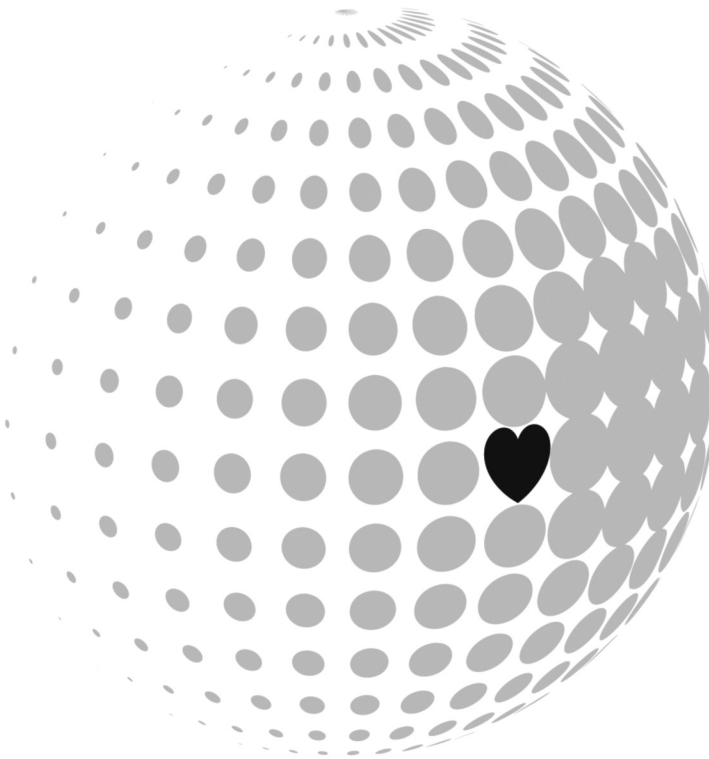
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Understanding the Legal Issues Related to Required Vaccination of Employees

Continued from Page 6

employers develop an employee vaccination policy now. Such a policy will provide employees with guidance on vaccination expectations in the work environment. The existence of such a policy also helps protect the dental practice against claims of failing to act to prevent COVID-19 exposure, whether workers compensation or negligence.

Development of such a policy begins with the assessment of need and includes a dialogue with employees about their position on the COVID-19 vaccination. As outlined above, employers must be careful not to ask disability-related questions of employees. Employees can be given educational information from CDC about the vaccine and assistance with the logistics of receiving the vaccination.

After careful consideration of the key factors and consultation with employment counsel, a dental practice will be able to decide whether a mandatory or voluntary vaccination policy is appropriate and develop an individualized policy to meet business needs.

Al Anthony Mercado, Esq., is the managing attorney for the downstate regions of Fager Amsler Keller & Schoppmann, LLP, and has been practicing in the field of healthcare law for almost 30 years.

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American Dental Hygienists Association and ADA issue COVID-19 Communication

By Dr. Krishnan

According to joint research between the ADA and the American Dental Hygienists' Association, 3.1 percent of dental hygienists in the U.S. have had COVID-19 as of October 2020.

- This is good news for both the dental team and for patients, showing that heightened infection control and increased attention to patient and team safety is working.

- Dental hygienists were assumed to be at high risk for contracting COVID-19 because of their proximity with patients and aerosol-generating procedures. And yet, the data shows a low infection rate relative to other health care professionals. The rate also aligns with the cumulative infection rate among dentists.

- This study is another proof point that dental care is safe for patients and dental professionals and supports the continued effectiveness of recommendations from the ADA, ADHA and CDC in helping to keep the dental team and their patients as safe as possible.

- The joint research also found the pandemic has led to an estimated eight percent reduction in dental hygienist employment as of October 2020, and most of this is voluntary.

Dr. Prabha Krishnan to be NYSDA Vice President

Continued from Page 1

since 1991. She is the Attending and Chief of Periodontics in the Department of Dentistry at Flushing Hospital Medical Center since 1995 and for five years had been an associate clinical professor in the Department of Periodontics at New York University College of Dentistry.

She is a Diplomate of the American Board of Periodontology and a fellow of the American College of Dentists, the International College of Dentists, and the Pierre Fauchard Academy. She is also an alumna of the ADA Institute for Diversity in Leadership.

Also active in the Indian Dental Association, Dr. Krishnan has been on its Board of Trustees for the past 11 years and has served as the organization's Membership Coordinator, Continuing Education Coordinator and on its Executive Committee.

She is currently a member of the Board of Directors of the Empire Dental Political Action Committee.

Dr. Krishnan earned her Doctor of Dental Surgery from the New York University College of Dentistry in 1991, followed by the NYU Post Graduate Program in Periodontics in 1993.

"QCDS is very close to my heart," Dr. Krishnan said. "I have been a member for more than 25-years and lived in Queens for more than 30-years. Now is the time for me to make a difference by giving back to organized dentistry."

Be sure to check the QCDS website for the latest Society events and news:
www.qcnds.org

TAX TIPS FOR DENTISTS

Congress recently passed "The Secure Act." This act raised the mandatory retirement distribution age from 70.5 to 72. It also removed the restrictions on traditional IRAs if you are still working past age 70.5. Now you can still do the traditional IRA beyond that age. There are new life expectancy charts for required minimum distributions. No RMD for 2020.

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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 718-454-8344 if you are experiencing temporary financial difficulties to explore possible options.



Queens County Dental Society
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Nominating Committee Looking for Candidates

By Dr. Arthur Feigenbaum

The Queens County Dental Society is accepting nominations for three members and alternates of the Nominating Committee.

The members of the Nominating Committee will consist of the last two immediate past presidents, two members elected by the Board of trustees at its April 20, 2021 meeting, three members elected by the membership at the May 4, 2021 membership meeting, and three alternates elected by the membership at the May 4, 2021 membership meeting.

The QCDS president acts as chair of the committee, without the right to vote. Elections to office, including members of the Board of Trustees are scheduled for the November 2, 2021 membership meeting. The Nominating Committee will report its recommendations at the October 5, 2021 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 ten days of the report of the Nominating Committee.

The Nominating Committee will meet in June. The date of this meeting will be determined by the QCDS president and may happen via Zoom or be postponed till July or August due to the COVID situation.

Any member may request to be a candidate. Requests should be sent to the Nominating Committee, Queens County Dental Society, 86-90 188 Street, Jamaica, NY 11423 or sent by email to Queenscountydentalsociety1@gmail.com. Include a letter of intent with position a current CV. This request should be received before June 20, 2021.

The ADA and Its Response to the Pandemic

Continued from Page 3

under a great deal of scrutiny by our Board of Trustees. In an effort to utilize one of our greatest strengths, which is the establishment of lifelong relationships in our profession, this is a program matching buyers with sellers and associates in practice transitions. It is not trying to own a market which is operated by many, but rather to gain a piece of this market for those interested in finding a better way to find appropriate answers to this transition period facing dentists at both ends of their careers. It is expanding rapidly, and through growth is getting very high marks from those involved in the process.

The ADA Annual meeting this October hopefully is promising to involve an entirely new approach to our annual meeting. With the publishing of the basis for this change, "Smilecon" is to be launched in Las Vegas.

I want to thank you all for assisting our organization through much of the trials and tribulations over the past 12 months and thank ADA Immediate Past President Dr. Chad Gehani and current New York President Dr. Craig Ratner, both of whom have manned the helm during this crazy year, and a special shout out to Mark Feldman and the entire NYSDA Staff.

Our difficulties in handling questions and trials during this year have been backed by a staff that stands second to none across this great country. Their combined dedication to our tasks—and doing so from a predominantly virtual world—displays characteristics that is the envy of many organizations

I look forward to visiting with you and will entertain questions for clarification either then or at my personal number or email.

Contacting QCDS?

Note the new QCDS headquarters phone numbers:

Phone: 718-454-1020

Fax: 718-454-1061

email:

QueensCountyDentalSociety1@gmail.com

website:

www.QCDS.org



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Communication Learnings from the COVID-19 crisis

The ADA's dedicated focus on production of COVID-19 related information and resources achieved an unprecedented **99% awareness among ADA members** and **93% awareness among nonmembers** of communications about this issue.*

*April 2020 member and nonmember surveys

Areas of strength

"VERY useful information. The ADA has been a great resource in these challenging times. Thank you."

80% of Members rated the **content** Excellent or Good*

"I had multiple staff members in a panic, asking what they needed to do. We used the Return to Work Toolkit while preparing our new protocols and to reassure our staff."

82% of Members relied on **ADA information** to aid in preparing themselves and their staff to return to practice*

*ADA member survey was fielded in April 2020

Areas for improvement

"I would have been more likely to renew if the ADA would have fought harder for dentists back in March/April."

51% of Members rated the **timing** Just Right*

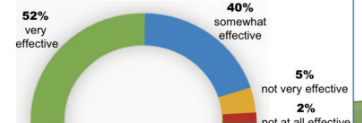
"They played it 'safe' and waited to see what everyone else was saying... even the hygiene association got time on the networks to get their message out."

50% of Nonmembers rated the **timing** Just Right*

*ADA member and nonmember surveys were fielded in April 2020

How effectively is the ADA supporting you on this topic?*

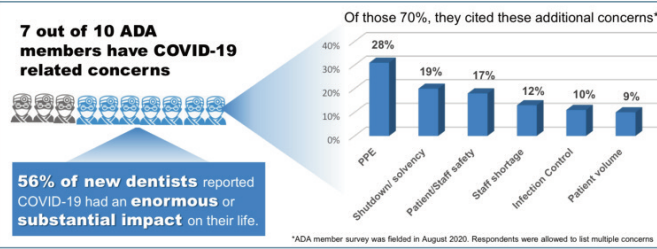
The ADA's COVID-19 practice support achieved the highest ratings of effectiveness among all issues surveyed this year, with **52% of members citing the support "very effective."**



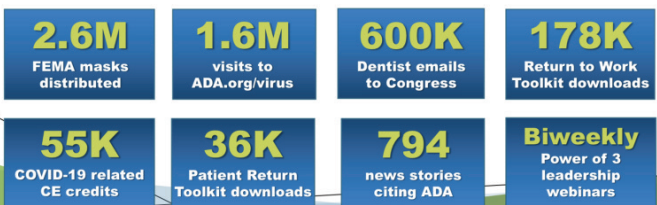
*ADA member survey was fielded in August 2020

What emerging issues are members concerned about?

COVID-19 related issues dominated member concerns for much of the year. Even in August, over 70% of members surveyed still cited COVID-19 related concerns when asked what emerging issues they're concerned about.



In response to the crisis, the ADA launched the COVID-19 Response Task Force and the Dental Business Recovery Task Force in Q1 under the oversight of the Board of Trustees. The vast majority of ADA staff and resources in Q2 and Q3 focused on delivering information and resources on COVID-19 to dentists, state societies, legislators, federal agencies, allied health organizations and the public. Highlights include:



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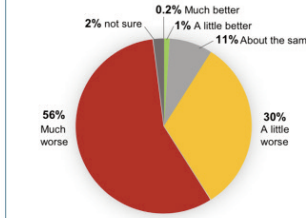
Beyond COVID-19...What's on the horizon?

DENTAL INSURANCE

Dentists have had longstanding frustration over dental insurance issues, which have intensified even more since the COVID-19 pandemic. There's widespread agreement among members (80%) that insurance should be fair to both patients and service providers, but the perception is that it falls far short. Their feelings are consistently strong that dental insurance has gotten worse for their practice and patients over the past few years.

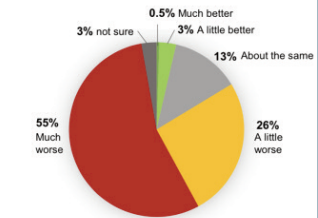
86% believe it's gotten worse for their practice

In your opinion, would you say dental insurance has gotten better or worse for **you/your practice** in the past few years?



81% believe it's gotten worse for their patients

In your opinion, would you say dental insurance has gotten better or worse for **your patients** in the past few years?



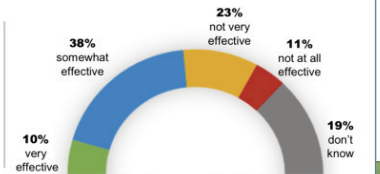
ADA members are looking for the ADA to support them on this issue:

95%

agree/strongly agree that the ADA needs to prioritize dental insurance reform.

*ADA member survey was fielded in September 2020

How effectively is the ADA supporting you on this topic?*



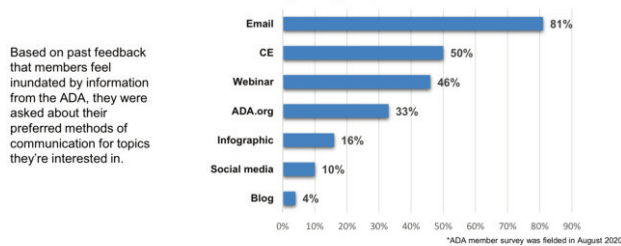
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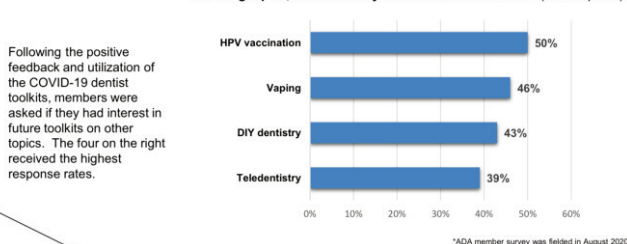
Dentists

How do members want to receive information on topics they're interested in?

How would you prefer to receive communications on topics you're interested in? (select up to 3)*



If patient communications toolkits were developed for members on the following topics, which would you be most interested in? (select up to 3)*



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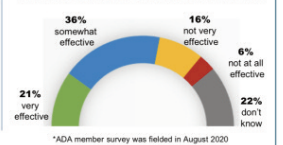
Importance to keep on the radar...

STUDENT DEBT

Financial concerns have increased during the pandemic, especially among younger dentists who disproportionately have higher student debt and have been slower to return to full-time practice. ADA survey results of dentists in their first 10 years of practice show:

- **67%** reported stress from financial matters relating to the pandemic
- **58%** reported interest in personal financial CE courses

How effectively is the ADA supporting you on this topic?*



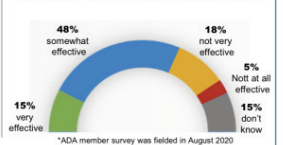
WELLNESS

Overall wellness concerns have also heightened during the pandemic, which are impacting younger dentists at a higher rate. HPI survey results of dentists under 35 show:

- **87%** reported experiencing **anxiety**
- **55%** reported minimal or moderate **depression**

Based on this feedback and the current level of effectiveness on the chart to the right, there is an opportunity to expand resources on this topic.

How effectively is the ADA supporting you on this topic?*



DIY/TELEDENTISTRY

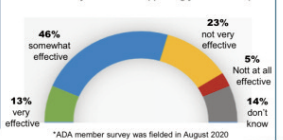
With do it yourself (DIY) dentistry on the rise, especially with the amplification of fads on social media, member feedback has included:

"The ADA could put facts out there showing the potential harm to patients."

In support of that:

- **43%** of dentists surveyed said they would be interested in a patient communications toolkit on DIY and teledentistry

How effectively is the ADA supporting you on this topic?*



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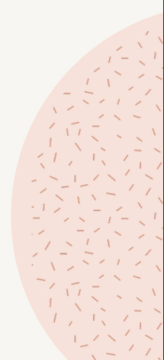
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