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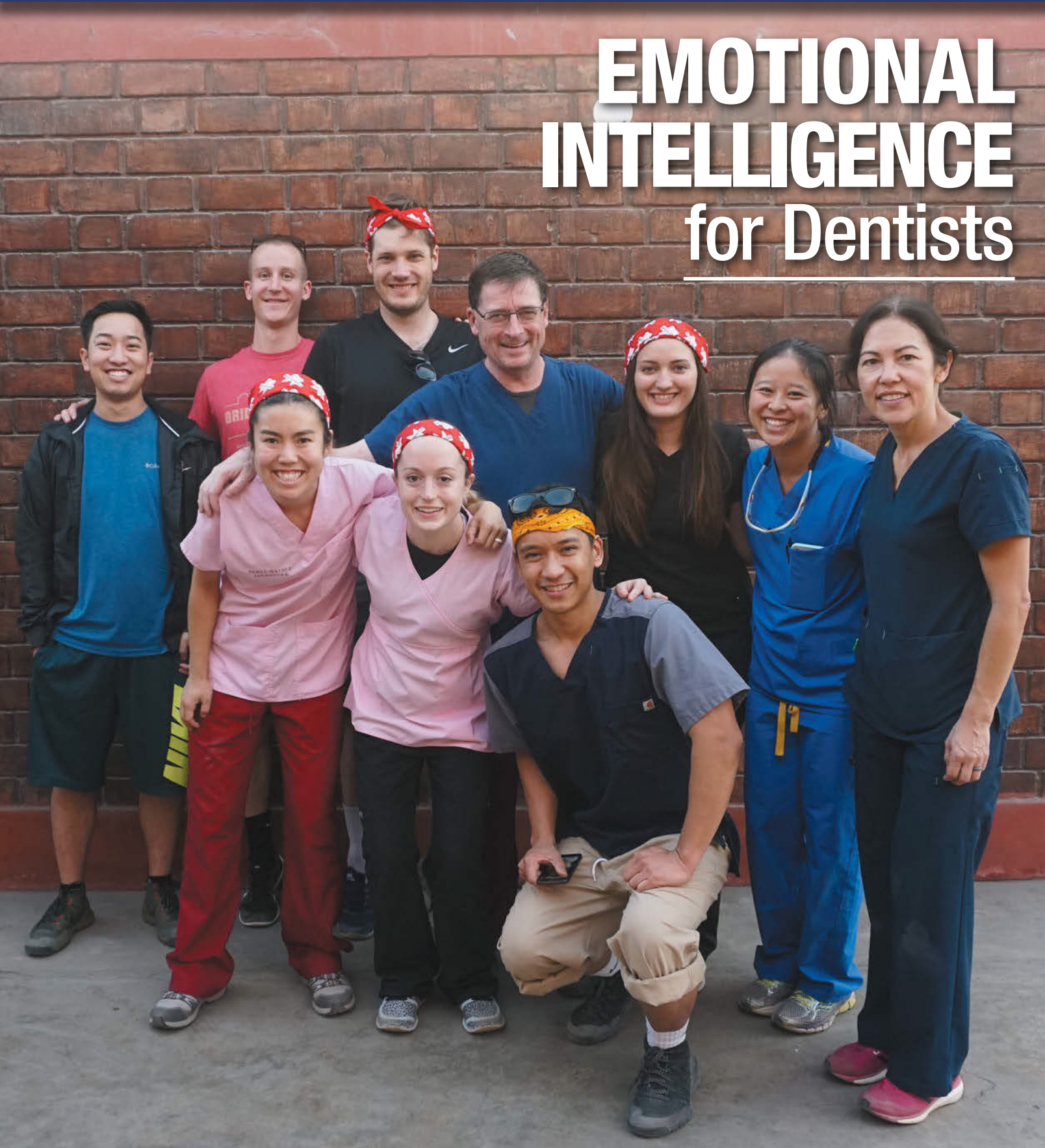
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Nicaragua

By Frances Sunseri, DMD

THIS FEBRUARY, DR. KIM WRIGHT, DR. MARTHA GARDNER and I (Frances Sunseri) visited Clinica Apoyo in the Comarcas de la Laguna de Apoyo, Nicaragua. Clinica Apoyo touches the lives of about 500 residents per month through direct health services, subsidized pharmacy and health education programs. This is a very poor community; some of the residents do not have running water in their homes.

The dental clinic is a small room in the medical clinic. We used a portable ADEC unit that Dr. Wright brought down herself. The clinic was built four years ago with the help of Brian and Nancy Davis from Portland, former Peace Corps volunteers and expats living there. They have trained local women volunteers to be health promoters to teach nutrition and health care to the patients. They are training a local woman, Yadira, to assist the

dentists and clean teeth. There is a local dentist who comes twice a month to treat this community of 3000 people. Nancy's goal is to have volunteer dentists donate four or five days every other month.

We saw around 45 patients in four days. They ranged in age from 5 to 75. We performed scaling and polishing, placed restorations and silver diamine fluoride, and extracted about 12 teeth. Even though circumstances were not ideal (we had no radiographs, the chairs were not ergonomically friendly, there is no air conditioning, dust was flying through the open windows, we assisted each other [poor Kim had me for an assistant!]) I left there feeling proud of the work and help that we gave these people. They were very cooperative and appreciative of all we did for them. Many of them looked at me with blank faces as I tried my remedial Spanish, but luckily Nancy

provided us with a great 15-year-old interpreter who also fetched supplies for Kim and I. Many of the supplies were donated by our friends at home; we brought down two large suitcases full of supplies and another dental chair with us.

Many of you may remember Dr. Martha Gardner, former anatomy professor at OHSU SOD. She helped make posters about dental health for the schools, and helped Nancy with other educational and prevention projects. There are many community projects in the Comarcas de la Laguna de Apoyo in need of volunteers. Casa De La Mujer, a Nicaraguan NGO, is building a child enrichment/community center across the road from the clinic. The center will include a day care, library, internet café and meeting spaces for the community. They are looking for ideas to make the community center self-sustaining. Volunteering is its own reward. If you would like to volunteer or donate, here is the website:

<http://www.comarcasapoyo.org/comarcas-de-la-laguna-english>.

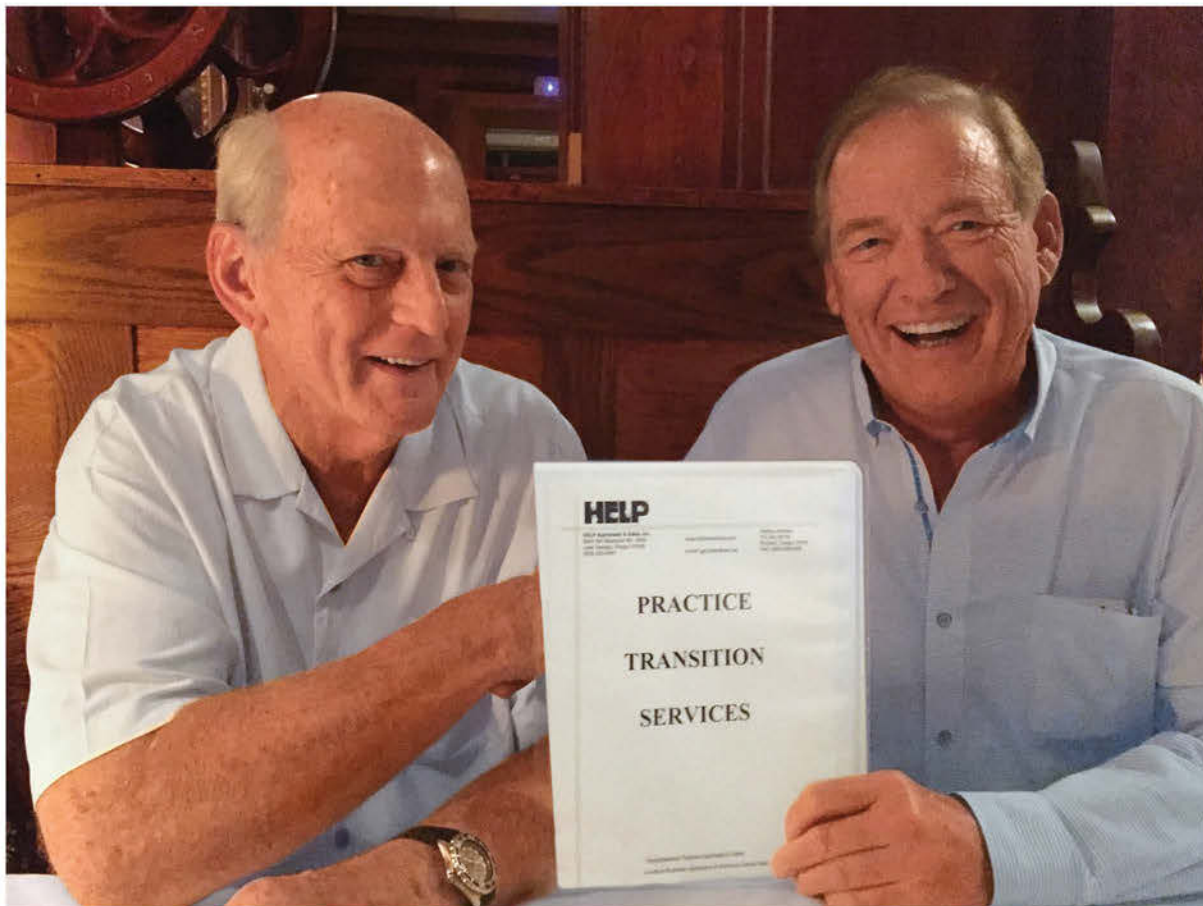
The work was tiring, but we made some time for some rest and relaxation at the beach. Nicaragua is a beautiful country with welcoming people. I will surely return. ☺



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Board Meeting Highlights

Friday January 12, 2018

- Dr. Rick Asai, Dr. Bill Ten Pas, Dr. Phillip Marucha, Dr. Hai Pham, Dr. Tony Ramos and Dr. Weston Heringer were appointed to the Dental Foundation of Oregon Board.
- Dr. Ericka Smith was appointed to the Annual Meeting Council.
- The Board approved the 2018 legislative strategy and agenda. 🗣️

Welcome *New ODA Members!*



Join us in welcoming new members on Welcome Wednesday, the first Wednesday of each month on Facebook.

Curtis Hebdon, DDS
Southern Willamette Dental Society

Tin Le, DMD
Multnomah Dental Society

Navid Newport, DDS
Yamhill County Dental Society

Breanna Velander, DDS
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² 30% off price comparison based on price listed for the Solmetex[®] Hg5[®] amalgam recycling cartridges in the August 2017 Henry Schein Dental catalog.

Events & Education Component CE Calendar



Calendar provided by Mehdi Salari, DMD

Date	Host Dental Society/ Organization	Course title	Speaker	Hours CE	Location	More Information
03/3/18	OHSU	Pharmacology	Dr. Mark Donaldson	7	Portland (OHSU School of Dentistry)	www.ohsu.edu/cde or call 503-494-8857
03/13/18	Marion & Polk	Getting to & Through Your Retirement	Larry Hanslits, CFP	1.5	Salem (West Salem Roth's)	Contact Sabrina – mpdentaltce@qwestoffice.net
03/13/18	Washington	You, The Law and the Board	Grant Stockton, JD	1.5	Aloha (The Reserve Golf Course)	Contact Dr. Dierickx – contact@wacountydental.org
03/16/18	Southern Oregon	Early Detection of Oral Cancer	Dr. Cindy Klienegger	2	Medford (TBD)	Contact Tonya – sodentalsociety@gmail.com
03/17/18	OHSU	Medical Emergencies - 2018 Update	Steven Beadnell, DMD	4	Portland (OHSU School of Dentistry)	www.ohsu.edu/cde or call 503-494-8857
03/17/18	OHSU	Risk Management	Chris Verbiest	3	Portland (OHSU School of Dentistry)	www.ohsu.edu/cde or call 503-494-8857
03/20/18	Clackamas	Oral Surgery	Brett Sullivan, DMD, MD	2	Oregon City (Providence Willamette Falls Comm. Center)	executivedirector@clackamasdental.com
03/20/18	Lane County	Spend Your Marketing Dollars Wisely	Liz Cawood	2	Eugene (Center for Meeting & Learning Lane Comm. College)	www.lanedentalsociety.org/events-sponsors/event-registration
04/24/18	Clackamas	Tooth Wear: Diagnosis & Treatment	Dr. Silvia Amaya Pajares	2	Oregon City (Providence Willamette Falls Comm. Center)	executivedirector@clackamasdental.com
05/8/18	Marion & Polk	TADs & Mini Implants	David Swiderski, DDS, MD	1.5	Salem (West Salem Roth's)	Contact Sabrina – mpdentaltce@qwestoffice.net
05/8/18	Washington	Prevention and Management of Nerve Injuries	Daniel Petrisor, DMD, MD	1.5	Aloha (The Reserve Golf Course)	Contact Dr. Dierickx – contact@wacountydental.org
05/10/18	Southern Oregon	Are you Prepared for Retirement?	Shannon York (Edward Jones)	1	Medford (Los Arcos)	Contact Tonya – sodentalsociety@gmail.com
05/21/18	Multnomah	Annual Awards Dinner/Table Clinics	Multiple	2	Multnomah Athletic Club	multdental@aol.com or lora@multnomahdental.org
05/22/18	Clackamas	Pedo/Ortho Panel	TBD	2	Oregon City (Providence Willamette Falls Comm. Center)	executivedirector@clackamasdental.com
10/19/18	Southern Willamette	Risk Management	Chris Verbiest	3	TBD	Contact Brian @ swdsoregon@gmail.com
11/15/18	Multnomah	OSHA Update	TBD	2	Milwaukee (Moda Plaza)	multdental@aol.com or lora@multnomahdental.org
12/11/18	Marion & Polk	Risk Management	Chris Verbiest	3	West Salem (Roth's)	Contact Sabrina H. – mpdentaltce@qwestoffice.net

Find this calendar online at www.oregondental.org. Click “Meetings & Events” > “Calendar of Events”.

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For more information, or to email your photo to us, contact ODA Membership Manager Kristen Andrews at 503-218-2010 x110 or kandrews@oregondental.org.



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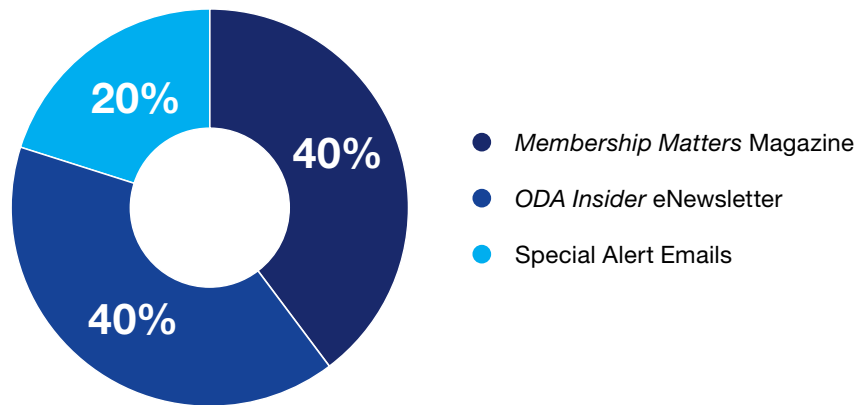
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Membership Poll Results!

IN AN EFFORT TO LEARN MORE ABOUT our members, we've started to include a poll question in each issue of the *ODA Insider* e-newsletter. Below are December's results. Please keep an eye out for future questions, and be sure to participate!

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Taking Inventory to Safeguard Your Practice

By DBIC Risk Management Staff

TAKE A QUICK MOMENT TO

REFLECT ON your practice. Imagine the space—the reception area, operatory and back office. Now, consider all of the many moving parts that come together to make your practice function—computer systems, phone systems, delivery systems, digital imagery, autoclaves and the list goes on and on. Lastly, name each piece of equipment you own, including the model number, serial number, purchase date and estimated value.

Not so easy, is it?

Relying on memory alone to recount your business assets is an exercise in futility. While most dentists have a general idea of what they own and how much it's worth, not all have a thorough, detailed inventory of their office contents. Unfortunately, failing to document all items of value can lead to a shortage of insurance coverage should a loss occur.

Dentists Benefits Insurance Company, DBIC, reports many cases in which dentists have failed to conduct accurate inventories of their office contents, and subsequently did not purchase enough coverage. In one case, a dentist purchased only \$580,000 in coverage for a practice with 12 operatories, which had a replacement value of at least \$1.2 million—not including the value of the reception area, break room or sterilization room.

Waiting until after a loss occurs to conduct an inventory can slow down the claims process, and dentists risk inaccurate reimbursements

should items be overlooked and unaccounted for. Policyholders are encouraged to conduct thorough inventories preemptively to avoid additional and unnecessary stress that comes following a loss. Being proactive, rather than reactive, means a smoother claims process and a reimbursement that is more in line with the true value of the loss.

While a manual, pen-and-paper method can suffice, taking inventory of your property has never been easier with the introduction of apps and software designed especially for this purpose. Tools marketed for conducting home inventories can also work well for documenting business personal property. Many are free or low cost, and they walk users through the process step-by-step, storing the information securely online. Following are two of the most popular, though it should be noted that none are endorsed by DBIC.

Encircle, with a photo-based interface, allows users to take a visual inventory of their belongings. Items are organized by room, and prepopulated checklists prompt users to enter detailed information on each item. Encircle also allows for multiple users, with entries synced seamlessly. Data can be exported to PDF or Excel. Available for iPhone, iPad and Android.

Sortly allows users to take photos and videos of each item, along with documentation such as serial numbers, values and links to product manuals. These entries can then be organized into individual folders and subfolders. The app features automatic backups and allows users to sync devices through a secure cloud. Available for iPhone and iPad.

If you are a DBIC policyholder, refer to your declaration page to determine how much coverage your policy offers. Policyholders can make adjustments by contacting DBIC. To request a policy review, email DBIC at dbicquestions@dentistsbenefits.com. If you are not a DBIC policyholder, please contact your insurance carrier.

Ensure your practice—and everything in it—is taken into account. Failing to document all contents can mean major headaches should a loss occur. Taking complete and regular inventories of your office contents allows you to purchase the coverage that's right for you and ease the process of filing a claim. 📷

DBIC's Risk Management line at 800.452.0504 is staffed with trained specialists who can answer questions related to your dental practice.

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Fee for Service Dental Procedure Rate Increase

ON JANUARY 12, 2018, THE OREGON HEALTH AUTHORITY (OHA) announced that it will update the FFS payment rates for certain dental procedures.

Specifically, the agency will:

- Apply a 10 percent rate increase to specific diagnostic and preventive codes, and
- Apply a 30 percent rate increase to specific oral surgery codes.

The rate increase will apply to care and services provided on or after February 1, 2018. For additional information, contact OHA: dmap.providerservices@state.or.us or call 800-336-6016.

Diagnostic and preventive codes CDT code	2017 rate	New rate
D0120	23.66	26.03
D0140	31.54	34.69
D0145	23.66	26.03
D0150	36.81	40.49
D0160	63.25	69.58
D0170	24.61	27.07
D0180	36.81	40.49
D0191	11.83	13.01
D0210	30.55	33.61
D0220	9.44	10.38
D0230	5.45	6.00
D0240	4.36	4.80
D0250	18.55	20.41
D0270	5.45	6.00
D0272	10.92	12.01
D0273	12.00	13.20
D0274	13.09	14.40
D0277	22.68	24.95
D0330	22.92	25.21
D1110	37.17	40.89
D1120	28.59	31.45
D1206	12.97	14.27
D1208	12.97	14.27
D1320	10.18	11.20
D1351	19.31	21.24
D1354	12.97	14.27
D1510	76.38	84.02
D1515	98.21	108.03
D1520	74.20	81.62
D1525	88.39	97.23
D1550	27.27	30.00
D1555	23.55	25.91
D1575	76.38	84.02

Oral surgery codes CDT code	2017 rate	New rate
D7111	30.56	39.73
D7140	76.60	99.58
D7210	87.31	113.50
D7220	94.43	122.76
D7230	128.00	166.40
D7240	157.38	204.59
D7250	117.51	152.76
D7260	98.21	127.67
D7270	65.46	85.10
D7286	49.11	63.84
D7320	38.19	49.65
D7321	45.35	58.96
D7450	168.84	219.49
D7471	38.19	49.65
D7510	68.20	88.66
D7520	41.48	53.92
D7530	87.31	113.50
D7670	338.09	439.52
D7910	63.56	82.63
D7911	95.34	123.94
D7912	137.72	179.04
D7960	62.19	80.85
D7970	65.46	85.10

Source: Oregon Health Authority



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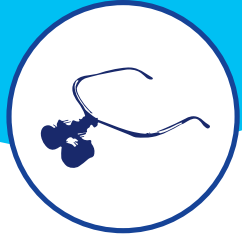
THE DENTISTS OF OREGON POLITICAL ACTION COMMITTEE (DOPAC) is a non-partisan organization that offers campaign assistance to candidates who understand the important issues facing dentistry. They work closely with the ODA Board of Trustees to build relationships and promote dentistry's causes among Oregon's political leaders. The committee includes representatives from ODA components across the state.

Current Roster:

- Tom Pollard, DMD, Chair: Representing Multnomah Dental Society
- Dennis Clark, DMD: Representing Washington County Dental Society
- Patrick Hagerty, DMD: Representing Southern Willamette Dental Society
- Paul Hansen, DMD: Representing Clackamas County Dental Society
- Scott Hansen, DMD: ODA Secretary Treasurer
- Weston Heringer, Jr, DMD: Representing Marion and Polk Dental Society, Yamhill County Dental Society, Clatsop County Dental Society
- Lonn Robertson, DMD: Representing Lane County Dental Society, Umpqua Dental Society
- Jeff Timm, DMD: Representing Eastern Oregon Dental Society, Central Oregon Dental Society, Mid-Columbia Dental Society
- Theresa Tucker, DDS: Representing Klamath County Dental Society, Rogue Valley Dental Society, Southern Oregon Dental Society, Southwestern Oregon Dental Society



THROUGH THE LOUPES



Scott Hansen, DMD

I was excited to learn that as secretary-treasurer of ODA, I was automatically on DOPAC. I love staying current on political issues, especially as they relate to our profession. It is also nice to sit on a committee that has to listen to my opinion, even if they think I am nuts. The work DOPAC does is important, not only to the dentists in Oregon, but also to the patients we serve. Since all ODA dentists contribute to the DOPAC fund, we work hard to see that those funds are spent wisely. It is a big responsibility that we take seriously and hope to always represent our member dentists, and their patients, as they deserve.



Jeff Timm, DMD

I was initially asked to be on the DOPAC committee by Weston Heringer, Jr. After serving with the Central Oregon Dental Society, it was an opportunity to serve at the state level. I have learned so much about the legislative process and how important it is for the profession to have a strong voice in Salem. I am very proud of our work as a committee and thankful for the help and guidance we receive from the ODA and our lobbyist, George Okulitch.



Tom Pollard, DMD, Chair

I joined DOPAC because I was asked by Multnomah Dental Society. I had worked with the ODA's Government Affairs Council for many years and have developed interest in the process. I appreciate the opportunity to be involved, and I enjoy the people I work with and learning how our elections are influenced by peoples' involvement and donations.



Weston Heringer, Jr., DMD

I joined DOPAC because dentists as health care providers and small business people need to be at the table when legislators are making rules and acting on public policies that affect our patients and profession. We are the experts on oral health, and we need to be present and heard.

DOPAC tries to engage members from across the state, and participates in events for Oregon leaders from both political parties. If you are interested in attending a future event on behalf of DOPAC and the ODA, please reach out to Cassie Leone at cleone@oregondental.org. 📍

The Importance of Emotional Intelligence in Dentistry



By David Black, DDS

“Empathy is the ability to put ourselves in someone else’s shoes. This is an outward focus, a focus on the other person. It is a much deeper emotion than sympathy because you have to have more knowledge about how another person is feeling and the circumstances that got them there.”

SOME OF THE RECURRING THEMES

YOU HEAR in conversations with dentists are declining production, poor patient compliance and an unmotivated team. Although these are three separate issues with seemingly different reasons to be happening, the cause of all of them can be traced back to how we deal with our relationships with our patients and our team.

For many years, I have been a student of leadership and how it will affect our business success. Some of my more recent study has been around emotional intelligence (EQ), specifically the works of Daniel Goleman and his seminal work, *Emotional Intelligence*, written in the early 1980s. This has been followed by many other works by many authors. Since many of us are students of practice management and have read all the classic books about management and leadership and the importance of leadership to our success, you don’t need a list of all the books you should read to become a better dental businessman.

What I am going to discuss today is how EQ is important in our work with our team and patients, and more specifically, how EMPATHY, as a part of EQ, is one of the key elements in our growth as leaders in our practice.

The four foundational skills you need to increase your EQ are:

1. Self-awareness
2. Self-regulation
3. Empathy—knowing others
4. Social skills—managing relationships

In recent literature, a fifth skill has been added:

5. Commitment

The most basic skill starts with becoming aware of your own emotions—the full range of emotions you have, and how they affect your behavior. Along with that awareness,

you have to learn what is acceptable behavior and what is not. You also have to decide how to regulate your behavior when put under stress. This is a simple mandate, but not an easy one. It takes time, practice and something new to a lot of us who are performance-driven or have perfectionistic tendencies. This takes time: sitting, reading, reflecting to become more self-aware. This cannot happen with the everyday “noise” we have around us during a normal day at the dental office. Only after you know your own range of emotions can you use this skill to improve the relationships you have with others.

The third skill set, empathy, or knowing others, depends on your being able to understand yourself first and knowing how you react to certain situations or persons BEFORE you can apply this skill to others.

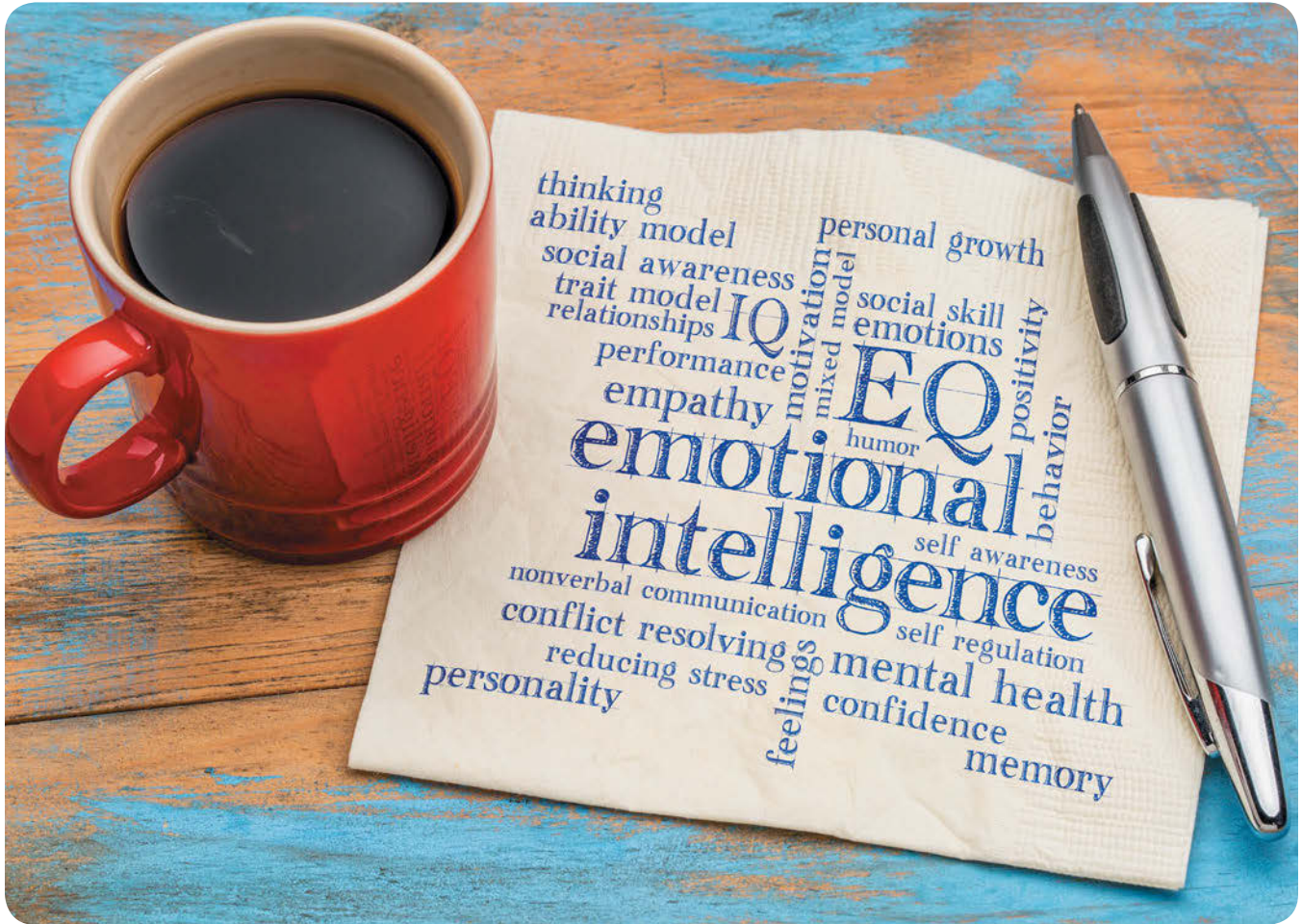
Some people confuse empathy with sympathy. That is because we most often are focused on ourselves and how we feel. Sympathy is us feeling sorry for someone else. Note the concentration is on US. That is not necessarily helpful when helping others.

Empathy is the ability to put ourselves in someone else’s shoes. This is an outward focus, a focus on the other person. It is a much deeper emotion than sympathy because you have to have more knowledge about how another person is feeling and the circumstances that got them there.

I have two examples of how that is helpful to a dentist becoming more empathetic and more effective in dealing with others.

First is with your dental team. You can give practical and emotional support to your team in three areas.

1. Visibility—Do they feel they are invisible, that no one knows them or what they do? People react positively when you show an interest in their life and situation. Do



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you know about their personal lives? You need to understand that each employee wants to be understood. It often has to be one-on-one and takes time. Often I would use lunches to discuss how they are doing, and to let them know I know they are there and important.

2. Relevance—Do they feel they matter or their job matters to anyone? One of the things I did was to thank my chairside assistant and administrative staff almost every day for making my day better. I also had a team huddle each day to discuss what we were doing that day and encouraging each of them.
3. Measurement—How can team members know if they are doing well in your eyes if you have not given them a measurable goal against which they can measure their work? Most salespersons know if they have hit their daily goal. In dentistry, the measurement might be a little harder

to define, but an example I can use is how I challenged my hygienists each morning. I asked them to look at their charts and identify one person each who had unfinished/unscheduled work to be done. Their charge was to enlist at least one patient each with one procedure that we could start on my schedule when they checked out that day. There was no punishment, but we did set that as an expectation and a goal each day that would be reviewed and tracked.

These three areas of support and review give you a window into the team’s world, and positive feedback to them DAILY, so that you will learn empathy for them. They will understand that you know they are there, they have an important job on the team, they are relevant to you and to the work of the team, and proper guidance so that they know if they are being successful in your eyes.

The second example is with your patients. Many of us are children of the Pankey Institute or The Spear Institute. I came out of that experience a much more skilled clinician, but not necessarily a better, more empathetic listener. For me, because of the great skill and confidence these clinicians had, it seemed like they would tell someone what they need, and they would just do it. Maybe part of that was the patients they treated were unusual in the fact that when they got to these doctors, they KNEW they had big problems and KNEW they wanted to do involved treatment when they walked in the room.

That did not happen with any regularity in my office. I offered the best I knew how to do, but it often ended with a “not now” or, “I will have to think about it”. It often took years to complete the full treatment I suggested.

I have discovered three tools I didn't have on my tool belt for many

years. The first was listening skills, the second was interpreting what I heard and the third was crafting a value statement.

There are so many things in patients' lives that affect whether they will accept treatment. If we listen well, they will tell us these things. The first is awareness. Some people come into our offices having no or little knowledge of what is going on in their mouth. If they have no pain or a low dental IQ, they may be shocked by what you tell them. At this point, you have the opportunity to use empathy. Put yourself in their shoes. The questions they often ask themselves are: can I afford this, is it going to hurt, what in my life do I need to defer to do this, my daughter is getting married next month, I have college tuition to pay next week. These people are sorting all the events in their life to see if dentistry fits in right now.

The second consideration is readiness. Some people just don't

want to do the work. Dentistry is not a high priority for the same reasons I gave under awareness. There is other stuff in their life they want and need to do that is higher on their “to do” list than dentistry. You have to listen to what they are saying and ask the right questions to get to the bottom of this. It is okay if people refuse treatment. It is not an indictment of your skill or ethics if they do not feel fine dentistry is important. If you offer the best you can do, give them alternative treatment choices, and give them financial choices, you should feel fine about what they decide. You have to hear what they are saying and let them make the important choices in their own life. If you are being empathetic to their needs, by putting yourself in their shoes, you can realize they are responsible for their own choices and you can accept whatever their choice is. For many of us, that is the hardest point—to accept what they decide.

2018 OREGON DENTAL CONFERENCE HIGHLIGHT

NEW! HANDS-ON CADAVER LAB



Homayon Asadi, DDS

Dr. Asadi is the interim co-chair of the preventive and restorative dentistry department, and an associate professor and a course director of anatomy and histology for the department of biomedical sciences at University of the Pacific, Arthur A. Dugoni School of Dentistry.

He has been actively involved in academics for over 25 years, both lecturing and dissection on many subjects. Dr. Asadi lectures frequently, is a member of several honor societies including OKU and American as well as International College of Dentists. He has been recognized and honored for distinguished merit in teaching and he also maintains a private practice in cities of San Jose and Hollister, California.



David Hatcher, DDS, MSc, MRCD(C)

Dr. Hatcher received his DDS degree from the University of Washington and was granted a specialty degree in oral and maxillofacial radiology and an MSc from the University of Toronto.

Presently Dr. Hatcher is in private practice in Sacramento, California, and has faculty appointments as clinical professor at UCLA, UCSF, UCD, Roseman University, and the University of Pacific, Arthur A. Dugoni School of Dentistry.

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David Hatcher, DDS, MSc, MRCD(C)

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Note, there is an additional fee of \$625 for this workshop. Course will be presented off-site at the Legacy Institute for Surgical Education & Innovation at 1225 NE 2nd Ave in Portland.

None of this will work if you haven't listened well enough to figure out how to create value for these patients, for this situation, at this time in their life. This again starts with putting yourself in their shoes, determining what is important to them, and discussing the value of the services you are going to suggest. If you haven't created value that will overcome their lack of awareness and readiness, you will not be treating them at this time.

These cases are the exception. I think you will find if you listen to your patients and engage in a conversation about what they want, build a case for the value you can create by giving them great treatment, and work with their awareness and readiness, they will be happy to let you give them the treatment they need. The key is to listen and then put yourself in their shoes, and then work with them to craft the appropriate treatment for them at this time and place in their life.

I have enjoyed learning about emotional intelligence and understand we have to be more than highly skilled clinicians; we also need these communication skills to be successful in dentistry. It really doesn't matter if you have the best hands in the land if you can't use your ears to understand what your patients want. ●

Drawing from 40+ years of clinical experience practicing in a small suburban blue-collar town—as well as Pankey-Dawson clinical training, Dr. David Black helps dentists and their teams increase profitability, patient standard of care and peace of mind through attention to key systems. Dr. Black's retirement planning course provides attendees with detailed steps to assess their level of readiness and what they need to do to accumulate enough to retire at their desired standard of living, no matter the stage of their career.



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Dentists Take Bite Out of Opioid Epidemic

OPIOID CRISIS

Pain pill prescriptions plunge 50 percent in two years at Multnomah County dental clinics.

By Zane Sparling

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ON OPIOIDS, THE NEWS CAN SEEM ALL bad.

But quietly, and without spending a dime, Multnomah County has slashed in half the number of pain pills prescribed at dental health clinics serving 25,000 low-income patients a year.

Official records shared with *The Outlook* show the number of prescriptions for opioids and high-strength sedatives plunged 46 percent in two years across the county dental system.

One prescriber, whose name was not included for privacy reasons, went from writing 176 high-risk prescriptions in 2014 to just five in 2016.

The change—largely unheralded outside government board rooms—will undoubtedly help protect community members from

an addictive epidemic that kills 142 Americans every day.

“I’ve never worked in a place where people care more about patients’ welfare,” says Dr. Len Barozzini, who spearheaded the policy shift. “We, as a nation, have a long way to go.”

Barozzini has served as county dental director for almost four years, overseeing about 40 dentists and 130 total employees located in six health centers, five sited east of the Willamette River.

The largest clinic, with 13 chairs, is located at the East County Health Center on Eighth Street in Gresham. Another bustling clinic off 182nd Avenue aids Rockwood residents.

The county dental system’s overall decline in Schedule II drugs, which Ohare classified as having a “high potential for abuse” by the



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federal government, was from 2,727 scripts in 2014 to just 1,473 scripts in 2016.

Now, opioid prescriptions can no longer include a refill at the first consultation. Patients can return for another visit if they think they need more medication.

Providers are also required to ask the patient questions about their addiction history, and document the conversation in the person's file.

"The dentists did all the work. I may have been the mouthpiece, but I got complete buy in," emphasizes Barozzini, an L.A. expat with a glinting smile. "The high prescribers I've had talks with—they're not high prescribers anymore."

Unlike 31 other states, physicians in Oregon don't legally have to check the secure database that records all prescriptions given to each person. But Barozzini expects county dentists to log-in to the system, called the Oregon Prescription Drug Monitoring Program.

That cuts down significantly on what's called "doctor shopping," Barozzini says.

"The patients who come in (wanting too many opioids), I don't think they're trying to screw the dental program. I think they have an addiction," he adds.

Opioids can cause serious health problems, and don't relieve chronic pain very effectively when used for long periods, according to a patient handout distributed by the Multnomah County Health Department. They're not much use for what's known as acute pain either.

Acute pain is a sharp hurt with a specific cause, like a rotten tooth that needs extraction. Patients want it remedied—and in a hurry, which is understandable—even though the pain may only last for a few days or weeks.

Chronic pain is different. It lasts for months, and may not have an easily identifiable solution.

Dentists, Barozzini notes, are almost always treating acute pain. And there's

no evidence from clinical studies suggesting opioids are more effective at combating acute aches than regular over-the-counter painkillers.

"Opioids actually don't work as well as ibuprofen or acetaminophen in conjunction with an antibiotic," he explains. "(But) patients don't think they've gotten legitimate treatment unless they walk out of the doctor's office with something strong."

An easy workaround is to prescribe pills with 600 or 800 milligrams of ibuprofen in each capsule, which requires a prescription. But really, it's no different than popping four OTC pills that have 200 milligrams each.

Roughly 10 percent of Multnomah County residents use the public system of primary care, dental and pharmacy centers—though if your income is above the federal poverty line, you may have never stepped foot inside one.

About 85 percent of patients have Medicaid, and the others are

"Quietly, and without spending a dime, Multnomah County has slashed in half the number of pain pills prescribed at dental health clinics serving 25,000 low-income patients a year."



uninsured. The legislation known as ObamaCare greatly expanded the rolls of citizens who have access to government-subsidized insurance plans like CareOregon or Delta Dental.

County dental clinics are "soup to nuts" joints, Barozzini describes, equally adept at fillings, root canals, sealants and fluoride varnishes for kids, plus the regular deep cleanings performed by dental hygienists.

"To serve the underserved, or those not served at all," Barozzini says. "That's our mission." ●

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Service to Veterans

By Barry Finnemore

JACOB FOUTZ, DMD, AND ADAM FOX, DMD, were at a professional conference last September when they heard a presentation about “Freedom Day USA,” a national day during which businesses honor service members, military veterans and their immediate families with free services.

The presentation, by a West Virginia dentist who had launched the event several years ago through his multiple practices, included a moving video featuring the song “I’m Already There” and showing service people reuniting with their loved ones.

For Drs. Foutz and Fox, their charge was clear.

“Jake and I both looked at each other and said, ‘We gotta do this,’” recalled Dr. Fox.

The following month, the two Medford dentists and their staffs dedicated Oct. 12 to military members, veterans and their families, providing pro bono dental care. Services ranged from exams and extractions to fillings, oral cancer screenings and cleanings. They were the first dentists—indeed, the first businesses—to participate in the event in Oregon, Dr. Fox noted.

“We were all pumped up at the office to do this—our assistants, hygienists and front office,” he said. “We were all excited to be doing something good for people who’ve done so much for us.”



Dr. Fox's office



Dr. Foutz and Dr. Fox

Noted Dr. Foutz: “I have a lot of respect for people who serve our country. They give up a lot of things, and this was a small but meaningful way to show them how much we appreciate the sacrifices they make to serve and protect our country and freedoms.”

Not two weeks prior to Freedom Day USA, Dr. Foutz had completed the purchase of his practice. He admitted to some nervousness about participating in the event given his office had just opened its doors, but he knew it simply was the right thing to do.

“At the end of the day, I decided that was the type of practice I wanted; I have a skill set I can provide, and I can improve people’s quality of life. Sometimes the monetary part has to take a back seat to what is right, and this is what I felt was right.”

Dr. Fox, who bought his practice in July 2016, said serving veterans, active-duty service people and military families is close to his heart. His dad served in the Marine

Corps, and he grew up on military bases throughout the country.

Giving back, he said, “is probably the best thing about being a dentist—being in a position where I can help somebody. Because for the last 20 years, I was in a position where people were helping me.”

Dr. Fox estimated that his office provided about \$8,500 in services, mostly to veterans who don’t qualify for VA benefits. The majority of the people who visited his office were from the Vietnam and Korea eras.

He only wished that he and his staff could have served more people that day, but he recalled the “starfish story,” in which a man walking on a beach after a storm questions a youngster he sees throwing back into the sea one of thousands of starfish that had washed up, asking whether the boy’s efforts will make much difference. The boy bends down, picks up another starfish, throws it into the ocean, turns and says with a smile, “It made a difference to that one!”



Dr. Foutz and his staff



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Dr. Fox and his staff

"The feedback we got was really fun," Dr. Fox said. "No one likes going to the dentist, but when you're doing it for free, people are happy to see you, and in some cases we were taking care of problems that had plagued them for years."

Dr. Foutz estimated his practice served some 20 patients during Freedom Day USA, the office's four chairs filled throughout. "We kept going until we ran out of teeth to fix."

At day's end—a longer day than usual for Dr. Foutz and his staff—"we were really tired, but it was very worthwhile. We sat down, took a breath and felt really good about ourselves. It was nice to help people. People thanked us coming in and going out."

Both providers, who were classmates at the Oregon Health & Science University School of Dentistry (they graduated in 2015), said participation in Freedom Day USA was seamless.

They both did a bit of awareness raising before the big day, issuing a press release to local media that included their office contact information and criteria for free care. They also distributed flyers to military recruitment offices and homeless shelters.

Dr. Fox and his staff decorated their office with banners, American flags and red, white and blue balloons. He said knowing he and Dr. Foutz were joining businesses nationwide in honoring veterans at the same time was "exciting," and he hopes more dentists in Oregon take part.

"It was incredibly easy," he said. "There was minimal upfront effort but a great payoff. We were just doing what we do every day, we were just doing it for veterans and their family members and doing it for free."

Both dentists said there is no question their offices will participate in Freedom Day USA in the future.

Said Dr. Foutz: "It was a nice way to set the precedent for...the kind of environment I want my practice to have and the role we want to play in the community." ●

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THE DENTAL FOUNDATION OF OREGON

Health Beyond Communities

By Traci Saito, DMD

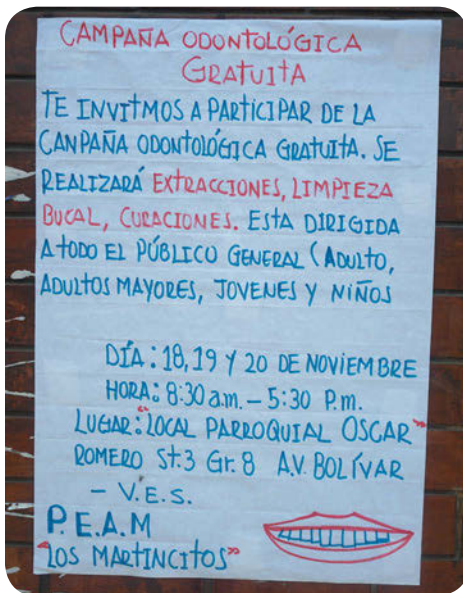
THROUGH MY DENTAL MISSIONS, COMMUNITY HEALTH ROTATIONS and recent experience working in public health, I have developed a passion for community dentistry and advocacy for increased access to care. When I attended Santa Clara University for my undergraduate studies, I built houses in Tijuana, Mexico. I never realized how much of an impact a gift of service could have on the underserved population several hundred miles away. My

passion for humanitarianism and helping others has allowed me to grow personally and professionally, opening doors to once-in-a-life time experiences in foreign countries.

As a second-year dental student at the OHSU School of Dentistry, I sought a unique and special opportunity to travel to the Philippines and used my newly acquired dental skills to help those in need. Like my previous mission trips, it was more rewarding than

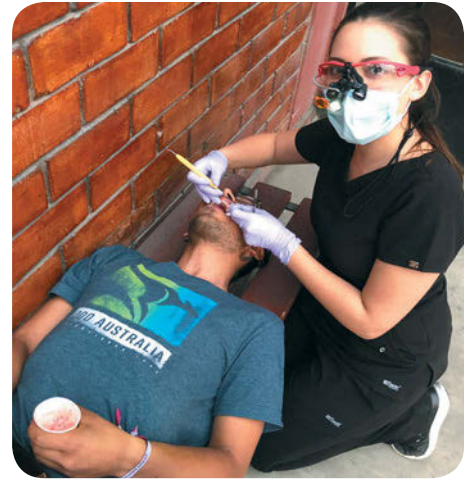
I could have ever imagined. We extracted teeth from patients as they sat in plastic lawn chairs, spitting in a cardboard box filled with dirt. Seeing the smiling and appreciative patients' faces evoked an unforgettable feeling. Those experiences have affirmed that dentistry is a unique profession that offers a great gift of service, despite language or cultural differences.

Being able to help the underserved with my dental skills was extremely



rewarding, and it fostered my ambition to start my own dental humanitarian trip. After returning from the Philippines, I realized that several colleagues, faculty, and I shared the same passion to help others through our acquired dental skills to improve their oral health. Together with a classmate, Michelle Nguyen, we decided to start our own dental humanitarian trip for OHSU students to the Dominican Republic and Haiti. The invaluable experience of recruiting colleagues, preparing the logistics, and building trust with the community in the Dominican Republic and Haiti has contributed to my core values and beliefs toward helping others. Not only did I gain leadership and communication skills, but I also learned how to teach my younger colleagues and build patient rapport.

I was so humbled and proud to have provided an opportunity and inspiration from my colleagues, and to make an impact in our patients' lives. Inspired to expand the program, in 2017, during my orthodontic residency at the Arizona School of Dentistry and Oral Health, I founded Health Beyond Communities, Inc., a non-profit dental humanitarian organization providing global humanitarian efforts and education to help communities become self-sufficient in meeting the health needs of their community. In collaboration with the OHSU School of Dentistry and University of the Pacific Hygiene, we completed our first inaugural trip with seven students and two faculty to Villa El Salvador, Peru. We treated more than 300 patients providing cleanings, sealants, operatives and extractions. ●





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DENTAL CLASSIFIEDS

EQUIPMENT: SALE/SERVICE

DENTAL OFFICE RECRUITMENT What makes this multi-specialty group practice unique, and better, is a commitment to proactively facilitating the best possible health outcomes. We currently have openings in Oregon and Washington for General Dentists, Endodontists, Oral Surgeons, Pediatric Dentists, and Locum Tenens Dentists. As a member of the Willamette Dental Group team, we offer a competitive salary commensurate with experience. We are a performance based culture and offer a generous and comprehensive benefit package. Among the many amenities we offer are competitive guaranteed compensation, benefits, paid vacation, malpractice insurance, in-house CEs, and an in-house loan forgiveness program. With more than 400,000 patients throughout our 50+ practice locations in Oregon, Washington, and Idaho, and a built-in specialty referral network to more than 30 specialists, Willamette Dental Group has been a leader in preventive and proactive dental care since 1970.

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PRACTICES FOR SALE

Endo Practice For Sale in Southern Oregon. Annual collections of \$600,000 on 100 days of work. Incredible potential for growth. Doctor will introduce you to all referrals. Asking \$300,000. Email Megan@omni-pg.com. (OD105)

General Practice For Sale in Lake Oswego. Annual revenue over \$980,000. Fee for service practice. 3 operatories and room for one more. Digital X-rays and Intra Oral Scanner. Great assumable lease in place. Highly desirable location with great visibility. Contact Megan - megan@omni-pg.com. (OD106)

General Practice For Sale in Southern Willamette Valley. Annual collections of \$846,000. Digital X-rays. Well-established practice that has been in the same location for 20 years. An up-to-date stand-alone single story building that is easily accessed with plenty of off-street parking. Contact Megan - megan@omni-pg.com. (OD107)

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