

May 2023

Journal of the Georgia Dental Association

GDA 2022 YEAR IN REVIEW page 23

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• **HEAD PAIN** Forehead • Temples Migraine-type • Sinus-type



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UPCOMINGEVENTS

Visit gadental.org/events for the full GDA calendar.

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GEORGIA DENTAL ASSOCIATION

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2023 GDA BOT and HOD Meeting Dates

BOT Meetings

- July 12, 2023 Omni, Orlando
- September 15, 2023 GDA Office, Marietta
- December 9, 2023
 Location TBD

HOD Meetings

- July 13, 2023 Omni, Orlando
- December 9, 2023
 Location TBD

We are pleased to announce



Dr. Park Skelton has acquired the practice of Dr. Brian Schwenk Peachtree Corners, Georgia

Dr. Uyen Nguyen has acquired the practice of Dr. Mark Prestwich Marietta, Georgia (Pictured left.)

Dr. Tova Asher has joined the practice of Dr. Melvin Washington Tucker, Georgia

Practices for Sale

Buckhead: Collecting \$450K. FFS/PPO patients. Refers out many procedures.

East Cobb: Grossing \$650K. Digital, paperless. PPO/FFS. Low overhead.

South of Atlanta: 100% FFS. Real estate for sale. Grossing \$320K. Strong hygiene program.

West of Atlanta: 4 ops. 2000 sq/ft. Grossing \$800K. All FFS. RE for sale.

Atlanta: Free standing building. 6 ops. Grossing \$700K. Some Medicaid. Digital x-ray and digital PAN.

NE GA Pedo: 2 doc practice, large facility, recently built out. Grossing \$900K. Seller will stay on and work.

NE of Atlanta Endo: All FFS. Long time staff. Grossing \$300K. Seller retiring.

West of Atlanta: Grossing \$750K. PPO/FFS. 4 ops. RE for sale.

GA Coast: 5 ops. Grossing \$1M. Digital x-ray & PAN. Close to SSI & Jacksonville.

NE GA Pedo: Collecting \$375K. All FFS. Real estate for sale or lease. Seller will help with transition.

S. GA: 6 ops, room to expand. Mainly FFS. \$600K in revenue. Very profitable

DeKalb Co Perio: 5 treatment rooms. Grossing \$830K. FFS/PPO. Great area.

Baldwin Co: Grossing \$250K. 6 ops. RE for sale. Refers many procedures out. No marketing.

N. Atlanta: Prostho. Collecting over \$2M. 6 ops. Recently rennovated. Seller will stay on as needed.

Marietta Pedo: 4 open bay chairs, 2 private ops. Room to add more. Part-time practice.

Paulding Co: Collecting \$1.3M+. 5 ops with room to expand. PPO/FF. Digital & paperless. Busy shopping center.

N. Atlanta Pedo: Highly desirable location near elementary school. Recently rennovated. \$450K revenue.

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GEORGIA'S DELEGATION TO THE ADA, CONTRIBUTING TO THE FUTURE OF DENTISTRY



DR. PETER SHATZ Guest Editor

Members of the Georgia Dental Association (GDA) are also members of the American Dental Association (ADA). Just like our GDA, the management of the ADA consists of an Executive Branch, a Board of Trustees and a House of Delegates (HOD). In Georgia, the HOD is broken up into districts representing certain geographic areas of our state. The same holds true for the ADA's HOD, which is comprised of 17 districts. Georgia, Alabama and Mississippi make up the 5th District.

At the national level, the Board of Trustees is composed of 17 trustees with one Trustee elected from each District to serve a four-year term. The Trusteeship in the 5th District rotates evenly between our three states, and currently, Georgia's own Dr. Marshall Mann is the 5th District Trustee.



ADA Councils and Commissions

The GDA represents about 3,600 dentists, and the ADA represents approximately 160,000 dentists. As you can imagine, the workload is exponentially greater. To manage this effectively, there are 17 councils and commissions. Membership in these groups is either representative (one member from each trustee district) or skills-based (members are appointed with certain skill sets rather than geographic representation). Typically, delegation members sit on these councils and commissions, but being a delegate is not a prerequisite. The councils and commissions are listed below.

- Advocacy for Access and Prevention
- Council on Communications
- Council on Continuing Education Provider Recognition
- Commission for Dental Accreditation
- Commission Dental Benefit Programs

- Council on Dental Education and Licensure
- Council on Dental Practice
- Council on Ethics, Bylaws and Judicial Affairs
- Council on Government Affairs
- Council on Members Insurance and Retirement Programs
- Council on Membership
- Council on National Dental Examinations
- Joint Commission on New Dentist Committee
- Recognition of Dental Specialties and Certifying Boards
- National Commission on Scientific Affairs
- Council on Annual Meetings
- Advisory Committee on American Dental Political Action Committee

ADA's Strategic Forecasting Committee

Lateral to this structure is the ADA's Strategic Forecasting Committee (SFC). This group came into existence at the end of the ADA HOD in November 2022. The goal of the SFC is to make the ADA more agile in its decision-making. The Committee is able to identify issues and execute on solutions during the year even when the ADA HOD is not in session. The SFC is also a conduit for ADA members, and others, to express concerns or to bring ideas to ADA Leadership. Our SFC is in its infancy and time will tell its effectiveness. It is our understanding that no other membership associations are employing the SFC structure within their governance. It has its origins from the for-profit corporation side where employee teams are part of the structure as opposed to volunteers.

Georgia Delegation to the ADA

Many of our members may be curious about Georgia's Delegation, including why it exists and its relation to the American Dental Association.

The Georgia Delegation is made up of 22 GDA member-dentists and one alternate who serve as delegates to the ADA HOD.

The delegation's most important role is to vote on resolutions and the ADA budget. This establishes tempo, process, and capacity for all things ADA. The budget is set by the ADA, but it is affected by the work of the HOD. That's where you come in. Councils, commissions and individuals present resolutions to the HOD. Each resolution has a financial impact that affects the budget, which affects membership dues costs. For instance, this past year funding for an ADA library was approved by the HOD and increased the ADA dues. Other resolutions may not be financial, but rather affect the profession. Establishing new dental specialties or

Trustee Districts

The ADA is made up of 547 local and 53 state dental societies. These societies are grouped into 17 trustee districts. Connect with your state and local society at **ADA.org/societies**.



changing dental licensure requirements are on the table yearly.

Your job as a delegate is to read, debate, lobby and vote upon these resolutions. Some years the workload is great, others less so. For some resolutions you may be passionate about the outcome, others, not so much. Delegates tighten their relationships with other Georgia dentists, create new friendships and alliances with dentists from our 5th District, and indeed garner national connections. Sometimes we succeed in lobbying our positions, other times we do not. Your job as a delegate is to also actively voice thoughts. It's your innovative ideas that ultimately help our profession.

Becoming a Georgia Delegate

Any GDA member can join the Delegation. Each district has a certain

number of members it can appoint to the Delegation, but it is not by any stretch an exclusive club and we encourage new faces to look into membership. There are even at-large, state level, Delegation positions. Your GDA district appoints members to the Delegation. All you need to do is ask and express interest.

Members considering becoming a delegate should note that the Georgia Delegation will require a decent time commitment. Additionally, travel, although covered by the GDA, is expected. The Delegation caucuses in late August/ early September, typically on a Friday and Saturday and again in October for about FIVE DAYS! If you're at a stage in your life where business travel would be difficult, then you may want to consider waiting to join when the timing is better. Additionally, you can expect numerous evening Zoom calls throughout the year.

While it is true that the level of commitment to the Georgia Delegation to the ADA is beyond what happens at the state level, the experience is wellworth the time commitment! Delegates engage with delegates from all over the country and establish networks to effectively carry out the implementation of ideas and the election of future leaders. In the end, our delegates take great pride in having direct access to the governance of the ADA, managing of our profession, and ultimately impacting the oral health of Americans.

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SEEN&HEARD

Members making news and news for GDA members.

W E L C O M E

Welcome New Members!

The following members joined GDA

TaRhonda Ingram

Central District Dental Society

Sharon Jordan Central District Dental Society Ronnie Dyer Eastern District Dental Society

Allise Calloway Northern District Dental Society **Sun Choy** Northern District Dental Society

Hasim Momin Northern District Dental Society Luke Wu Northern District Dental Society

Leigh Griffeth Northwestern District Dental Society

BOT Retreat at Callaway Gardens

The annual Board of Trustees retreat was held at Callaway Gardens March 11–12. Two days of business meetings and round table talks took place to discuss the future of the GDA and how best to serve our members. Trustees attended a workshop on Strategic Forecasting given by the ADA Chief of Governance & Strategy Management, Elizabeth Shapiro, DDS, JD CAE.









SEEN&HEARD

GDA Kicks Off Oral Cancer Awareness Month

On April 7, GDA President, Dr. Chris Adkins, discussed the importance of regular dental exams and oral cancer screenings on WXIA-TV, directing viewers to HealthyMouthHealthyMe.org to find a dentist. In addition, oral cancer screenings took place at the Savannah Ghost Pirates minor league hockey game on April 2.

Over the next two months, oral cancer awareness spots licensed from the New York State Dental Association are running on TV and radio stations across Georgia. The spots are supported by two 10-second video ads running on Facebook, along with Google Ads to connect people searching for information on oral cancer and a dentist. The ads generate traffic to a landing page with signs and symptoms of oral cancer, risk factors and a "Find a Dentist" search button.



GDA dentists provided oral cancer education and screenings at minor league hockey game



GDA President Dr. Chris Adkins discusses oral cancer on WXIA-TV Atlanta



Dental College students and faculty join GDA and Career Summit speakers at Augusta GreenJackets game









SEEN&HEARD



GDA Member's Family Mission Trip Sparks Son's Passion for Dentistry

In the summer of 2018, Dr. Chris Rautenstrauch and his family embarked on a volunteer dental project in a small village within the Mayan highlands of Guatemala. They had seen a listing online for the mission, led by a Colorado based non-profit called Global Dental Relief (GDR). They were intrigued by the opportunity to combine travel with service, and volunteer in a setting where everyone in the family would have an essential role. The itinerary laid out for them would include a weekend of sightseeing in historic Antigua, followed by a journey to San Martin Jilotepeque, a village located two hours from the capital city, to work in the dental clinic.

The family met up with a larger group of dentists, hygienists, assistants, and general volunteers, as well as two experienced GDR trip leaders who were also there on a volunteer basis. The team enjoyed a relaxing weekend together before getting to work in San Martin, where they spent five days working in a makeshift seven-chair clinic set up in a municipality building.

Their patient population consisted of children with no means or access to dentistry, who needed critical and immediate attention to their oral health.

Care consisted of primarily restorative work, with a large emphasis on oral

health education and prevention. At three

separate points during a child's visit they are taught proper brushing techniques, how cavities are formed, and which foods promote positive oral health. Each child was sent home with a brighter smile, and a toothbrush of their own-a first for many of them. The group's teamwork collectively provided complete





dental care to 790 children, an estimated value of \$202,060.00 (U.S. equivalent).

In San Martin, the group stayed at a basic yet comfortable guesthouse and enjoyed authentic food shopped fresh daily from the market, and prepared with care by a local restaurant owner with whom GDR partners. Free time was spent on morning walks around town, browsing the street markets, and interacting with locals. There is no tourism industry in San Martin, however the locals are kind and welcoming—and grateful for a muchneeded service with a large community impact.

Chris is a practicing dentist at Dentistry of Olde Towne in Woodstock, Georgia. His wife, Tabitha, is an Occupational Therapist, and filled roles available for general volunteers such as teaching oral health instruction, keeping patient records, applying fluoride varnish and sterilizing instruments. Their son, Will, was considering dentistry as a career path. Ultimately, the family's trip to Guatemala with GDR was what cemented Will's interest in the dental profession. "I enjoyed bonding with the older students on the trip who were further along in their journey to becoming a dentist," says Will. "We shared our passion for dentistry, and I was able to get a lot of advice from them that has helped me greatly."

Fast forward to today; Will is graduating from Auburn University and has been accepted into The Dental College of Georgia. Will values his experience in Guatemala, working with different dentists and hygienists to see different approaches to treatment.

The Rautenstrauch family looks forward to their next GDR adventure, and plan to attend the Ladakh, India clinic, as well as GDR's Nepal clinic in Kathmandu. If you're considering a dental volunteer mission, Chris's advice is as follows: "Do it! Your cup will overflow!"

For more information on volunteer opportunities, visit Global Dental Relief's website at: www.globaldentalrelief.org, email at: volunteer@globaldentalrelief.org.





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CBCT Scans Contain Findings Well Beyond Dentistry

Background facts

A 61-year-old male patient, F, presented to a periodontist, Dr. P, on referral from his general dentist, for evaluation and potential placement of bilateral mandibular implants. The patient reported a benign medical history, but confided that he had not had a medical exam or laboratory studies in years; Dr. P encouraged her patient to have a medical exam as soon as possible, and F assured her that he would. After performing a clinical oral examination, which revealed that the patient was missing all lower molars, Dr. P had a panoramic radiograph taken. Review of the film demonstrated approximately 10-12 mm of mandibular bone superior to the inferior alveolar canals bilaterally, but Dr. P palpated a significant lingual concavity on the left side, so she thought that a CBCT would provide the best assessment of whether implant placement would be a viable treatment, and, if so, what types and sizes of implants could be employed. Because Dr. P did not have a CBCT machine in her office, and she did not feel comfortable interpreting those studies, she referred F to a radiology facility which had an oral and maxillofacial radiologist, Dr. R, on staff.

F made an appointment at the facility after Dr. P advised him that she had discussed the case with Dr. R. Dr. R was asked to evaluate for available mandibular bone so as to be able to place endosseous implants in the posterior regions, preferably two fixtures on each side. Dr. R read the study and advised Dr. P, in a written report, that there was adequate bone to place a 12 mm implant at the site where tooth #19 had previously been, and 10 mm fixtures at the sites where teeth #18, 30, and 31 had been, all of standard (3.5–4.2 mm) diameter. The written report was messengered to Dr. P with the films, but Dr. P reviewed only the report and not the films. Four implants were uneventfully placed, they integrated with bone, and all were restored without complication approximately nine months after the CBCT was completed.

About six weeks after that, F saw an internist, Dr. I, for a physical exam. F's prostate felt rather hard to palpation, and his PSA was 8.9 ng/ml. Dr. I referred F to a urologist, who had F undergo a work-up, which revealed Stage IV adenocarcinoma with metastases to the left sphenoid bone. F casually mentioned to the urologist that he had a CBCT in preparation for dental implants, and nobody had said anything about any abnormalities in any bones of the head; F obtained those films and provided them to a radiologist recommended by the urologist, who concluded that there had been a suspicious lesion in the left sphenoid which extended into the sphenoid sinus, clearly visible on the CBCT. F opted against the multiple approach cancer therapies once he was told that his chances of survival were poor, given the tumor's staging, and he passed away in under two years.

Legal action

In his last months, F heard opinions from a number of people close to him that, if the CBCT had been properly read, the metastatic lesion would have been detected nearly a year before it was, which would have allowed him to be successfully treated. He spoke with an attorney, but did not have the willingness to get involved with litigation in his weakened state. However, his family members, as his estate, chose to sue for the pain he suffered before dying and for his premature death.

A lawsuit was begun, naming Dr. P and Dr. R as defendants, asserting dental malpractice against both of them for failing to adequately review and identify the metastatic sphenoid lesion, thereby causing F to be deprived of an opportunity to be successfully treated. Both dentists were provided with legal representation by their malpractice carrier, although separate attorneys were assigned because of the potential that the legal interests of the defendants might not be fully aligned.

Discovery and case resolution

During her deposition, Dr. P took the position that she was not skilled in interpreting CBCT studies, which was the exact reason that she did not maintain her own machine and review studies on her own; instead, as she did here, she always referred patients in need of pre-implant CBCTs to oral and maxillofacial radiologists, who were specifically trained for that purpose. She did not blame Dr. R, but simply persisted that she knew she was not capable of interpreting these studies. Dr. R acknowledged at his deposition that there was, in fact, a radiographically visible lesion encompassing the sphenoid bone and adjacent sinus, but, at the time of initially reading the CBCT, he was focused solely on the issues surrounding implant placement, so he failed to see the mass which was some distance away from the area of his concentration. Realizing that Dr. R had essentially testified to his own negligence, his attorneys worked to disprove the causation prong of the estate's claim, namely that a diagnosis a year earlier than it came would have given F a fair chance at survival.

To that end, Dr. R's counsel retained an oncology expert, Dr. E, who was of the opinion that it was "unlikely" that an earlier diagnosis in this case would have made any difference in the potential for F to have survived, based upon the existence of a metastasis, the usual characteristics of malignancies of this type, and the specific histological features of the primary tumor. However, Dr. E advised the attorneys for Dr. R that other experts might legitimately disagree with him on this issue, as there are speculative and subjective aspects at play.

At trial, before Dr. E testified, Dr. R heard the testimony of the plaintiff's expert on the issue of causation—that there would have been a real chance for curative treatment, or at least treatment which would have meaningfully extended F's life, if the lesion had been timely detected on the CBCT—and found it to be compelling and believable, raising a concern that the jury could find against him for more than his policy limits. With his authority, his attorneys negotiated a settlement with the plaintiff's attorney. Upon reaching that agreement, the case against Dr. P was discontinued, with the plaintiff's attorney privately acknowledging that it would have been difficult to prove a case against her, given her referral to a specialist regarding an issue about which she openly recognized her own lack of expertise.

Takeaways

One of the overriding concepts addressed by this case study is that the teeth, jaws, and oral cavity as a whole lie close to "non-dental" areas of the body, so conditions related to those other areas may affect that which dentists do. And physiologic or anatomic problems in even distant locations may also have an impact upon areas treated by dentists. So, dentists best serve their patients by maintaining a sense of awareness of the construct that, colloquially speaking, "the teeth are connected to the body," and *vice versa*, and with that comes a patient responsibility that extends beyond the teeth, jaws, and oral tissues.

In this case, Dr. P recognized where she had expertise and where she did not, and based upon the latter, made an appropriate referral to a specialist whose proficiencies would be able to fill in the open gap. As we see it, that was the prudent course of action for her to have taken, and that bore out positively for her in this litigation. But that should not be presumed to mean that every referral will eliminate liability in every situation, because all circumstances are fact-based and individual. What was avoided in this case was jousting—or the "throwing under the bus"—against Dr. R by Dr. P. Unfortunately, one dentist blaming another and voicing that to patients, is far from uncommon and it is a frequent act that leads patients to engage in litigation when results are not what were expected. Here, Dr. P was able to protect her own position without criticizing the actions of Dr. R; doing so meant taking ownership of her own limitations, and that level of professionalism was apparently not lost on the plaintiff's attorney.

While Dr. P did not know, and could not have known, at the time that pushing her patient to obtain a medical exam would lead to her later being implicated in a malpractice suit, it was, nevertheless, exactly what was in the patient's best interests. Had she not done so, F's disease would likely not have been discovered until he became quite ill, so proof of the causation prong would have been far more difficult for the plaintiff's attorney and expert to achieve, and would likely have stood as a bar to the case having been brought in the first place. But again, Dr. P upheld her ethical obligations, and that is always the proper approach, regardless of the outcome.

Dental and medical specialists exist to maximize the quality of patient care. General practitioners are not expected to be experts in every area of their profession, and even specialists, who may well have high levels of expertise in their limited fields, are not authorities on everything. So, appropriate referrals are always prudent and are hopefully appreciated by patients. Acknowledging limitations in knowledge or ability is not something to be ashamed of, but instead something to be embraced; doing so supports ethical principles which guide the practice of dentistry, benefits patient care, and lessens the likelihood of becoming a defendant in a dental malpractice lawsuit.

Finally, as we have noted in earlier case studies, a plaintiff must prove, through expert testimony, that not only was the defendant dentist negligent, but that such negligence directly caused the injuries complained of. Without expert proof of all of those elements, to the satisfaction of a judge and a jury, the defendant dentist will prevail. So, while Dr. R admitted to his own negligence, that alone was not determinative of the outcome: a causal connection between that negligence and the claimed injuries was required as well.

This document should not be construed as medical or legal advice. Because the facts applicable to your situation may vary, or the laws applicable in your jurisdiction may differ, please contact your attorney or other professional advisors if you have any questions related to your legal or medical obligations or rights, state or federal laws, contract interpretation, or other legal questions.

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Mental Health Awareness Month— Great Time for Dentists to Prioritize Self-Care

Since May is mental health awareness month, it is a great time to reflect on how you are managing the pressures of being a dentist or working in the dental profession. The most successful leaders and dentists take time for self-care while balancing stress. I've noticed in my years of coaching leaders that their key to success is more about attitude than time.

Your ability to change your mindset and attitude has a lot to do with self-

care. I believe whether you're up or down in life or rich or poor, you can change your situation for the better. Just remember that you can't change much if you're depleted of energy, self-worth, or rest. Feeling unhealthy, unhappy, or lacking mental focus won't help either. It's crucial to constantly work on yourself—by doing so, you'll be able to bring your best self forward to effectively help and serve others.



Executives and leaders that prioritize self-care are happier, more productive, and more engaged. One CEO said it best in a Harvard Business Review article:

"Self-care is no longer a luxury; it's part of the job."

Why do some dentists ignore self-care?

If self-care is so important, then why do some dentists turn a blind eye? Below are a few reasons:

- 1. They think it's a luxury.
- 2. They think it's a sign of weakness.
- 3. Dentistry is demanding mentally and physically daily, and many dentists don't have the time for it.

Carving time out of a busy schedule can be a challenge, but too many leaders are stressed and burnt out. When this happens there's a release of the stress hormone that puts your body into fight or flight mode. Our emotional part of our brain, called the amygdala, kicks in and diverts the oxygen and blood flow away from our thinking brain called the prefrontal cortex (which is responsible for logic, reasoning, problem solving and willpower).

It might be a little uncomfortable in the beginning to take time out of your day to practice self-care, but I promise you it'll be worth it.

Watch Bobi Seredich speak on why it's important for high-performing leaders to prioritize self-care



How to practice self-care

If you want to be innovative and creative, and solve challenges that are causing you to feel pressure, you need to take breaks and manage your energy and stress. It's important to disengage in order to re-engage more effectively. Even short breaks improve your level of productivity and focus.

According to an article on leadership best practices, it stated:

"Specifically, a healthy diet has been linked to better moods, higher energy levels, and lower levels of depression. Aerobic exercise increases blood flow, boosting both learning and memory. Getting good sleep has been linked to increased focus, improved cognitive function (including creativity and innovation), greater capacity for learning, and improved empathy."

Adam Grant researched the topic of self-care in his book, Give & Take, and he shares how selflessness at work leads to exhaustion—and ends up hurting the very people you want to help. There's a time when giving and generosity can go bad. Grant talks about teachers as a great example. Most teachers are givers as Grant stated in an Inc. magazine article:

"We love teachers who are selfless, but [the research shows that] the most selfless teachers ended up being the least engaged in the classroom—and their students did the worst on standardized achievement tests."

The selfless teachers put everything into teaching and didn't allow extra time for themselves or their family. There were other teachers that were givers, but took time for their family and themselves— They didn't give all of their time to students. Grant shared, "They felt less altruistic, but they actually helped more. Their giving was energizing instead of exhausting."

The "less altruistic" teachers decided to do things differently and did the following:

- Focused on the team
- Took time to sleep, eat well, and exercise
- Worked on their strengths and delegated responsibilities that were not their area of expertise
- Hired great team players

Here are some quick self-care tips and tricks:

Revamp your workspace

Check out popular Marie Kondo videos on how to simplify your setup.

Clean out your mind

The things from your past that are holding you back may originate from your family and your judgment around others. Let go or find a way to confront it, learn from it, and then let it go. Learn from your past mistakes, while remembering that you don't have to keep reliving them. If you're looking for a great read around this topic, check out The Work by Byron Katie.

• Take time for just you

Having space from your partner, family, and work is re-energizing. Work on your strengths and focus on what brings you joy.

Prioritize wellness

Remember to rest, exercise, and have a healthy diet.

• Hire a coach or trainer to support your overall health and wellness.

The Millennial Dentist believes in investing in yourself and hiring someone to help you reach your health and fitness goals. We offer several coaching and leadership programs on emotional intelligence and managing stress better. We are offering a 15% discount for all Georgia Dental Association Members (see details at the end of this article).

How do you do things that are good for you when you don't feel like it?

- Set a schedule
- Be flexible with your time
- Make time for short meditations or workouts
- Go for a walk
- Take time for appreciation as a bare minimum

When a dentist or leader practices self-care and values it, his or her team will follow creating a more engaged culture. Join me in prioritizing better self-care. Have fun with it and enjoy what you're doing in life. I just redid my office space and removed a lot of clutter in my life, and it feels fantastic. I've started Pilates and yoga again and committed to walking my dogs and meditating more. Now, when I start my workday, I feel more productive and focused.

Bobi Seredich is the Founder of the Southwest Institute for Emotional Intelligence in Phoenix, Arizona. She can be reached at bobi@swiei.com.

Here is a link to our Emotional Intelligence Online Leadership Programs. At check out please add 150ff in the Coupon Code area.



PRACTICE SOLUTIONS

Dental practice financing.

Our practice specialists can help you achieve your goals.

We'll work with you to determine the financing solutions that best fit your plans and help guide you through the process.

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- Commercial real estate³: Buy, refinance¹ or relocate, with loans up to \$5 million.
- Equipment financing: Choose from a variety of options and flexible terms tailored to meet your needs.

To learn more, call 800.428.2847 to talk to a practice specialist, or visit bankofamerica.com/practicesolutions.

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As a dentist, you face unique challenges every day. That's why at MedPro Group, we created an industry-leading malpractice policy that keeps you safe. Here's what else you can expect with MedPro on your side.

Get unmatched coverage.

You'll get great coverage at a great price. We also offer policy options that others don't including Occurrence and a pure consent clause, which gives you more control during a claim.

Practice more safely.

With 24/7 access to our free risk resources and on-staff experts, you and your practice will be better prepared for every day challenges. We don't just defend claims, we help you avoid them.

Your good name is protected.

The average dentist is sued at least once in their career, which is why we're in your corner when it matters most. We lead the industry with a 95% dental trial win rate (plus 8 out of 10 claims close without payment).

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medprodental.com/GDA

All data is derived from MedPro Group records and calculations; claims data range is 2012-2021 unless otherwise indicated. MedPro Group is the marketing name used to refer to the insurance operations of The Medical Protective Company, Princeton Insurance Company, PULCO, Inc. and MedPro RRG Risk Retention Group. All insurance products are administered by MedPro Group and underwritten by these and other Berkshine Hathaway affiliates, including National Fire & Marine Insurance Company, Product availability is based upon business and/or regulatory approval and may differ among companies. © 2023 MedPro Group L.All Rights Reserved. Dental-2021.8021.80

2022 Year in Review GDA United & Strong!



Dear Members of the GDA,

I am pleased to present our report for the year 2022. It has been an exceptional year, and I am proud to share the significant achievements that we have accomplished together.

Our association's success would not have been possible without the support and dedication of our members. We have seen a remarkable increase in new members, and our association continues to grow stronger.

United, we have accomplished so much. We have organized successful events, hosted informative CE and webinars, launched successful PR campaigns, and provided valuable member benefits through our subsidiaries and endorsed partners. Our committees have worked tirelessly to provide the best experience for our members and ensure that our strategic plan goals are being met.

One of our significant achievements was our successful lobbying efforts. We advocated for our profession and worked with policymakers to achieve favorable outcomes for our members. We also hosted a successful annual convention, which brought together members from around the state to share their experiences and learn from each other.

We made significant strides in providing professional development opportunities for our members. We offered courses and training programs to help Georgia dentists stay up-to-date with the latest industry trends and best practices. At the same time, public relations efforts continue to raise awareness through media and community outreach.

None of these accomplishments would have been possible without the hard work and dedication of our board, the HOD, and our members. I want to thank each of you for your contributions to our association's success. Together we are GDA united and strong!

Thank you for your ongoing support, and please feel free to reach out to us with any feedback or suggestions you may have.

Frank J. Capaldo GDA Executive Director



FRANK J. CAPALDO GDA Executive Director

"Our association's success would not have been possible without the support and dedication of our members."



Five-Year Strategic Plan (2021–2025)

Derived from the mission and vision statements, GDA's strategic plan identifies strategic priorities which direct the focus of the work of the association for the next five years. Under each objective are also key strategies for moving our priorities forward. These areas will turn GDA's mission and vision into specific measurable targets that are important to the current and future health of the association. GDA achieved or exceeded the goals and objectives in its 2016–2020 five-year strategic plan. Below is the current five-year plan, which continues and builds on our success of the past.



MEMBERSHIP

- Work to increase member engagement and participation
- Increase total GDA members by 2% by 2025
- Keep annual "non-renews" to under 200 members



GOVERNMENT RELATIONS/ POLITICAL ACTION (PAC)

- Develop and implement annual legislative strategy and agenda
- Develop annual plan for strategic campaign involvement
- Continue utilizing contact dentists for immediate grassroots response at district level
- Develop and maintain relationships with other health industry coalitions on shared issues
- Expand/improve PAC fundraising (events and funding level)



HEALTH POLICY

- Be the premier, leading resource for data, information, and expertise on oral health for the state of Georgia
- Develop and implement GDA Action for Oral Health objectives and strategies (see plan at gadental.org/ dentalhealth)
- Ensure inclusion of oral health in statewide public/ community health planning and provision initiatives
- Monitor changes to Medicaid policy manuals and billing and communicate to members
- Keep GDA leadership and membership informed on health policyrelated activities



PR/MARKETING/ COMMUNICATIONS

- Utilize multiple communications channels to reach GDA members, keeping them up-todate on GDA initiatives and working to increase member engagement and participation
- Continue to be the PR/ media relations arm for the GDA and oral health community in Georgia
- Develop new ways to demonstrate the value of GDA membership
- Increase product/service usage and penetration by communicating the unique value of GDA products and services to our membership through existing and emerging marketing technologies

Mission Statement GDA's mission is to help GDA member dentists succeed.

Vision Statement Our vision is for Georgia to become a state with optimal oral health.



EDUCATION & TRAINING

- Continue to expand GDA's educational offerings for members and their staff utilizing the Education and Training Advisory Council to determine new focus areas for 2021–2025
- Continue to identify and implement new education and training opportunities for the dental team/ office staff
- Continue to improve and grow convention CE at the GDA Convention & Expo utilizing the Education and Training Advisory Council for planning
- Develop technology-based delivery systems for CE



GOVERNANCE

- The Board of Trustees will continue to review and refine the GDA governance structure making changes that improve the performance of the organization and ensure sustainability for the future
- Continue to recruit new GDA leaders to ensure sustainability of the leadership pipeline for the future—goal is to increase the number of individuals participating in GDA leadership by 10% by 2025
- Continue to ensure programs, services, staff resources, committees, GDA Foundation, and GDA subsidiaries are aligned with the strategic plan
- Continue seeking to increase knowledge of members' wants, needs, and issues
- Work with districts to implement resources GDA has developed to support district leadership and succession planning
- Work with districts to assess and recommend changes to their organizational documents ensuring alignment with GDA's revised governance structure
- Continue to offer leadership training programs to better equip GDA and district leader



MEMBER PRODUCTS & SERVICES

- Provide superior member value through high quality products and services that meet member needs and achieve a high level of member satisfaction
- Develop business relationships and partnerships to offer additional products and services to members that are competitively priced and also achieve a reasonable return for GDA
- Consider new business opportunities
- Continually assess and refine products and services, eliminating those with low impact



FINANCIAL MANAGEMENT/ ORGANIZATIONAL STABILITY

- Ensure the amount of dues as a percentage of total revenue will not exceed 30% by developing nondues revenue sources
- Set aside reserves not less than 50% of annual operating expenses
- Continue to establish internal reviews, security measures, and policies/ procedures
- Continue to implement annual incremental dues increases to ensure financial stability





The GDA Membership Committee held events around the state to engage existing members and recruit new ones. They included:

- → Two combo CE/social events in the summer of 2022
 - CE on Tap! was held in June at Tucker Brewery and featured CE about Legal Updates
 - Cooking with Canines was held in August at the Irwin Cooking School in Atlanta (for members and their dogs) with CE focusing on animal oral health
- → A new member networking reception was held at the 2022 annual convention in which new dentists, students, new members and first-time attendees were invited to attend.
- → During the GDA annual convention a "buddy" was provided from GDA leadership to all first-time attendees.
- → The GDA DEI Committee hosted a DEI Training in conjunction with the National Center for Civil and Human Rights in August. In addition, the GDA Annual Convention and Savannah Fall conference both included DEI courses.





Cooking with Canines

Tennis at 2022 GDA Convention

GDA wins three Membership Awards:

- → Greatest Net Gain of New Dentists
- → Greatest Net Gain in Membership
- → Converted Highest Number of Women Dentists to Membership

Created three new videos to engage members:

- → New Member Welcome video to send to all new members
- → Member Recruitment video about all the services and benefits of membership
- → Governance video to share more about the structure of the GDA and encourage participation in leadership









Government Relations





Dental Kit Day at the Capitol

Law Day at the Capitol

2022 Legislative Strategy Success

Secured another incremental dental Medicaid rate increase:

10% increase for codes D7210 and D7140

increase for codes D2160, D2330, D2331, D2332, D2335, D2393, D2394, D2931, D3220,

D7111, D2140, D2150, D2930, D0220, D0270,

D0272, and D0274

 Protected state funding for the Rural Dental Student Loan Repayment and GDA Donated Dental Services Programs.

- → Ensured that professional licensure by endorsement legislation for active-duty military and military spouses contained friendly amendments for the dental profession.
- → Successfully amended Board of Dentistry rule allowing Georgialicensed RDHs to administer local, injectable anesthesia.
- → Successfully stopped the passage of a Board of Dentistry rule that would require dentists to maintain all sterilization records for a period of three years.

200+ GDA Contact Dentists in 2022.

During the legislative session, contact dentists reached out to legislators and communicated important points about active bills in the House or Senate.

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GDA's Health Policy Department continued working on several initiatives, including:

- → Act as the trusted and premier source for data, information, and expertise on oral health for the state of Georgia, both for members and external stakeholders and partners.
- → Develop and implement GDA Action for Oral Health objectives and strategies. In 2022, updated the plan to focus on initiatives to remove barriers to care for rural and underserved populations, including the elderly, medically fragile, developmentally disabled, and veterans. (see plan at gadental.org/dental health).
- → Advocate for the inclusion of oral health in statewide public/ community health planning and provision initiatives.
- → Monitor Medicaid policy and billing manuals to communicate updates or changes to members.
- → Keep GDA leadership and membership informed on health policy related activities and other relevant changes.
- → Promote public-private partnerships to advance oral health equity among underserved populations.

Adjunct Professorship Program with DCG

Launched the GDA's adjunct professorship program in partnership with the Dental College of Georgia in July 2022. This program is a public-private-partnership between the GDA, DCG, and the Georgia Department of Public Health that connects 3rd and 4th year dental students to low-cost clinics in the Macon area to provide much needed dental care to underserved communities while helping students complete their clinical requirements. This partnership aims to help encourage students to practice in these communities post-graduation. The first clinic site was secured at Rehoboth Volunteer Dental Clinic.

Dental Licensure

Monitored the Dental Hygienist License Compact initiative and ensured GDA leadership were fully aware of the nuances of the proposed Model Language.

Healthy Mothers, Healthy Babies Partnership

Working alongside of HMHB, the GDA assisted in creating a provider toolkit to be posted in pediatric dental offices, offices of Medicaid providers, and others to educate pregnant women and providers about the necessity for oral health during pregnancy and beyond.

The Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD)

GDA worked with DBHDD and the NOW/COMP Medicaid Waiver Program to enhance Waiver Supplemental Services (WSS) and protect funding for this important program. WSS are commonly used to help waiver recipients and their families cover the costs of special needs dentistry.



Adjunct Professorship Program



Public Relations/Marketing/Communications

GDA continues to utilize multiple communications channels to reach members, keeping them up to date on GDA initiatives and working to increase member engagement and participation. 2022 was devoted to strengthening our digital presence with increased animations such as .gifs and video content to increase such engagement.

Action Magazine

ACTION

ACTION

Seven issues of *Action* were published in 2022. Five of seven editions highlighted an associate member dentist as the member feature. The first of a two-part salute to our veterans was published in October/November Special Edition and was sent out to all dentists in the state.

ΑΟΤΙΟÑ

Keeping Members Informed

GDA kept members informed through distribution of timely and relevant information. In 2022, GDA's email open rate significantly exceeded the national average, receiving a top-tier score.



Members received information on a variety of relevant topics.







GDA produced 11 GDA Minute podcast/video episodes in 2022. These were sent through email and social media (including Instagram reels).

Social Media

GDA worked to grow social media and website traffic in 2022 through engaging website content and social media posts. The result was a significant increase in reach and engagement.



Public Relations/Marketing/Communications



Public Relations

Tendering spring and fall campaign flights, "Show Your Smile" and "Power of Prevention," GDA's Healthy Mouth, Healthy Me! campaign continued to educate Georgians on the connection between dental health and overall health, promote the profession, and encourage Georgians to find a dentist and visit regularly.

- → \$528,479 in *donated* public service advertising
 - 1,459 TV spots
 - 3,896 radio spots
- → 595,458 digital ad impressions on Facebook, Instagram and Google
- \rightarrow 25,677 click throughs to campaign landing





GDA leaders enhanced their public speaking skills at the association's annual spokesperson training.

GDA proactively issued press releases and arranged interviews to promote dentistry in Georgia.



GDA 2022 president, Dr. Zach Powell, discusses GDA initiatives on Dental Business Radio.



GDA continues to enhance educational opportunities for members. Relevant and highquality programs help members and their practices in a variety of accessible formats from webinars and online learning to in-person CE opportunities. As a result, 2022 was the best non-renewal year yet by nearly every metric.



Wine CE in Talking Rock, GA



Dental Assistant Training

GDA continued to add to its dental assistant trainings—Expanded Duties and Coronal Polishing—by bringing the courses directly to large groups and dental assistant training courses. In 2022, 16 courses were held across the state, training 335 dental assistants.



2022 Webinars

In 2022 the GDA hosted 8 webinars—five free webinars with timely information exclusively for GDA members and three paid webinars to satisfy CE requirements, LEAP CE, OSHA Bloodborne Pathogen and Risk Management.

CE Courses

GDA continues to add new CE courses that expand our CE offerings while taking advantage of Georgia's diverse beauty. Below are first of their kind CE events that took place in 2022:

- → Practice Management Retreat—Sept. 9–10, Jekyll Island, GA
- → Wine CE—Sept. 30, Talking Rock, GA
- → Golf CE—Oct. 7, Evans, GA



GDA held its second annual Fall Conference at Savannah that included two days of CE and 80 registrants.



Find all upcoming CE at gadental.org/CE



Leadership Training



12 Leadership GDA participants in 2022 representing four districts. Participants are diverse in age, practice type and race.

- → District Leadership Conference in December educated incoming District Presidents/President-Elects on the innerworkings of the GDA and prepared them for their legal duties/responsibilities/roles.
- → Board of Trustees Orientation in December ensured that all members of the BOT are aware of their duties prior to serving on the BOT or starting a new year of their term as a GDA Trustee.

Task Forces Launched in 2022

- → Workforce Task Force
- → Third Party Payor Task Force
- → Remembrance and Caring Task Force
- → GDA Auxiliary Membership Task Force

Bylaws/Policy Manual Updates

- → Passed GDA Bylaws and GDA Policy Manual amendments giving District President-Elects voting rights on the BOT.
- → Updated GDA Policy Manual section pertaining to the charge of the Nominating Committee to better identify and recruit members to serve in GDA leadership positions.



Members of the HOD provide input during an interactive session

Creation of GDA Governance Video

A new governance video was created to be used in orientation of councils, committees, Board of Trustees, House of Delegates, District Leadership Conference and new member orientation.



Leadership Resources

- → Updated GDA Trustee Manual as a resource for Trustees providing legal responsibilities and duties as a Trustee.
- → Updated District Leadership manual providing district officers with a resource containing duties and responsibilities, as well as information on how to run district meetings.



Financial Sustainability

Since 2016, revenue has grown year over year. GDA has continued to diversify its income streams thereby reducing the reliability of dues to 27% from a high of 67% with a strategic plan goal of 30%.

GDA, GDIS and GDHC Reserves Continue to Grow



Integrity Dental Buyers Group

First-time Users

- → 2022: 21
- → 2021: 50

Total Active Users

- → 2022: 400
- → 2021: 551

Total Purchases

- → 2022: \$1,981,822
- → 2021: \$2,431,455

GDA 2022 Insurances Continue to Retain Insureds and Grow

- → Professional Liability Coverage: 1,433 policies in force, 9.56% new policies issued
- → Business Insurance Lines: Retention 101%, 7.17% total written premium growth
- → Health Insurance 2023 Renewal: 90.9% retention, 4.2% new participants
- → Personal Insurance Lines: 7.35% growth

Member Products and Services/ Financial Management/Organizational Stability





GDIS Grants to GDA



*Includes \$55K of rent savings from 2022. Placed in GDA Building UBS Reserve Account in March 2023.

2023 Budgeted GDA Grant: \$50,000

GDHC Grants/Scholarships to GDA

Total	\$295,000.00
CE Sponsorship:	\$65,000.00
Annual Meeting Sponsorship:	\$70,000.00
General Grant:	\$160,000.00

Note: Total \$295,000.00 placed in GDA UBS Building Reserve Account in August 2023

2022 GDA Endorsed Partners

- → Bento—provides in-office membership plans as an alternative to traditional dental benefits
- → Panacea Financial—provides student loan refinancing options for dentists and recent dental school graduates

GDA Foundation

foundation FOR ORAL HEALTH

The GDA Foundation continued to build a community presence through outreach events across the state. Support included charitable dental care and oral health education in the community.

Mouth Wise Curriculum

The GDA Foundation introduced lessons to help children learn how to take care of their teeth and practice healthy habits to prevent dental problems as they get older. Our new Mouth Wise program meets Georgia state standards and includes age-appropriate videos, lesson plans, worksheets and tests for grades K-2, 3-5 and 6-8.

Children's Dental Health Month

The GDA Foundation worked tirelessly to ensure that young smiles stay healthy and bright! The Foundation provided 5,000 smile kits for school and community visits. Recognizing the importance of oral health to overall health, Governor Brian Kemp proclaimed February Children's Dental Health Month in Georgia.

Smile

Give Kids a

The GDA Foundation hosted 15 GKAS events in February during Children's Dental Health Month, providing \$28,000 in donated dental care to over 630 children in Georgia in 2022.

The GDA Foundation for Oral Health is committed to serving children and adults from underserved and vulnerable communities through outreach programs that provide oral health education, prevention and donated dental care. Visit gadental. org/foundation to make a gift.

The GDA Foundation partnered with Special Olympics Georgia to offer dental services and education as part of the Special Olympics, Special Smiles program. More than 200 Special Olympics athletes received dental screenings and fluoride varnish at the winter, summer and fall state games thanks to GDA member dentists and volunteers.








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Direct Brand Savings Comparison

PRODUCT/DESCRIPTION	BRAND	GDA SAVINGS VS COMPETITOR	DIRECT BRAND	DIRECT BRAND VS BRAND NAME SAVINGS
CaviCide Liquid 1 Gallon Each	Kerr TotalCare	15%	OSHA Review	94%
S3 Earloop Face Masks Level 2	Cranberry	30%	iSmile	73%
2x2 4-Ply Non-Woven Gauze	Richmond	41%	iSmile	85%
Star 430 SW Replacement Turbine	StarDental	27%	True Spin	82%
Classic Elite Prophy Angles	Young Dental	13%	Prophy Magic	61%

*Direct from manufacturer brands shown represent the most similar products to the distributor brand name products. For the correct item name/description, please refer to the chart on **gdaplus.com/directbrands.**

COUNTDOWN TO CONVENTION Convention Highlights



KICK-OFF SPEAKER

John T. Edge is a writer, commentator, and, since its founding in 1999, director of the Southern Foodways Alliance, an institute of the Center for the Study of Southern Culture at the University of Mississippi. He has written several books on Southern food. He contributes to the Oxford American and the New York Times and has written for Garden & Gun and Afar. In 2017, he published The Potlikker Papers, a personal history of Southern food.

CONVENTION & EXPO2023

July 13–16, 2023 Omni Orlando Resort at ChampionsGate GDAconvention.com



DIVE-IN MOVIE

Dive-in to a familyfriendly movie experience! Popcorn and limited cabanas will be provided. Float the evening away in the wave pool while enjoying good old-fashioned entertainment on the big screen.

GDA FOUNDATION OBSTACLE COURSE

Get ready to show off your skills at the GDA Foundation Obstacle Course—the ultimate fundraiser event for the Georgia Dental Foundation that promises to be a blast for all! Starting at 6p.m. sharp on Friday, you'll embark on an exhilarating lap around the stunning property lake, with plenty of wildlife to admire as you walk, jog, or run. After that, get ready to putt like a pro on the Put-Put course and aim for a hole-in-one! And if that's not enough, brace yourself for a wild ride down the lazy river—grab a tube and float, swim, or splash your way through one lap of pure excitement. The fun doesn't end there—make your way to Trevi's Outdoor Terazza and indulge in a specialty cocktail while mingling with fellow and recently graduated dentists. With tickets priced at just \$25 for adults and \$15 for children, this is an event you won't want to miss!





We know how easy it is to delay your professional development amidst the busy demands of family, business, and personal life. To combat this, we've merged vacation and continuing education opportunities, giving you the chance to unwind and have fun with loved ones while advancing your career.

With 16 CE courses to choose from and up to 20 hours of CE available to be earned in three days, you'll be able to expand your knowledge and hone your skills like never before. With 2023 being a dental license renewal year, there's no better time to gain new insights and stay ahead of the curve.

SPEAKERS



Effective IT in the Dental Practice Bryan Currier – Advantage



How to Start Your First Practice

Technologies

Raymond Berk – VP, Bank of America Practice Solutions



A Practice Owners Guide to the Business Side of Dentistry

Casey Hiers – National Director of Sales, Four Quadrants



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Creating Successful Implant
Outcomes
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Dr. James Cassidy – Private Practitioner



Your Retirement Assets: Positioning for Volatile Markets

Harris Gignilliat – Senior VP Wealth Management, UBS - Wile Group



Trends in the Business of Dentistry

Ask the Experts Panel Discussion



Big Data Analytics in Dentistry

Dr. Kim Capehart – Department Chair, Dental College of Georgia Department of General Dentistry



What would you do? Ethical Dilemmas and Interactive Ethics Workshop Dr. Rhoda Sword – Professor, Dental College of Georgia Department of Restorative Sciences



The Internal & External Marketing Tools You Must Incorporate to Grow Your Practice in Economically Challenging Times Joshua Gindea – Exec. VP & Co-Founder, DoctorsInternet.com



Practical Tips and Tricks for Common Clinical Procedures – Part 1 & 2 Dr. Mario Romero – Director of Romero Dental Seminars



Managing the Anxious Patient

Dr. Rhoda Sword – Professor, Dental College of Georgia Department of Restorative Sciences



Opioids, Cybersecurity iCoreConnect





Today's Dental Transition Landscape Matt Poppert – Owner, DDSMatch



Legal Updates and Trends

Lauren Mansour, Esq. – Oberman Law Firm



Incorporating eMarketing into your Practice

Dr. Kim Capehart – Department Chair, Dental College of Georgia Department of General Dentistry



OSHA/Infection Control Karen Gregory – Consultant



Pharmacology Update and Opioid Review

Dr. Michael Pruett – Asst. Professor of Oral Rehabilitation & Dir. of the General Practice Residency Program, Dental College of Georgia at Augusta University





Peace of mind for your special day

Why do you need the Wedding Protector Plan? Consider what could go wrong:

policy, they could have been reimbursed for lost deposits.





Cindy had just purchased her dream wedding dress. But when she went to pick up her dress a week before the big day, she saw an out of business sign in the window of the dress shop. With the right wedding insurance policy, Cindy could have been reimbursed for the money she lost.

Becky and Aaron spent months planning their destination wedding to the Bahamas. But on their wedding day, a Category 4 hurricane made their reception site inaccessible. If the couple had the right wedding insurance



Kelly and Roberto enjoyed their beautiful wedding up until their photographer called to say their wedding photos were ruined during the development process. Having the right wedding insurance policy could have helped cover the cost of retaking the couple's wedding photos.

Wedding insurance helps make things right when something goes wrong.

You've always dreamed of the perfect wedding, but no matter how carefully you plan it, there are many things that can go wrong – things that are beyond your control.

What if your reception venue goes out of business a month before the wedding, and you lose your deposit and have to find another location? Or a hurricane causes your wedding to be postponed? What if your dress shop closes, leaving you without a gown?

A wedding is an investment, and as the average cost of weddings rises, now up to \$26,000,* wedding insurance is needed more than ever. After all, you wouldn't buy a new car that costs that much without insuring it against damage.

Your wedding insurance policy can cover a variety of situations, such as:

- No dress. You can get repair or replacement cost if the bride's wedding gown or groom's tuxedo is lost or damaged.
- Lost deposits. We can reimburse your deposit if a vendor goes out of business, declares bankruptcy before your wedding or simply fails to show up.
- Lost rings. You can receive repair or replacement cost if the bride or groom's wedding bands are lost or damaged.

- Severe weather. If severe weather (such as a hurricane) forces you to postpone your wedding, we can provide reimbursement for certain non-recoverable expenses
- Reimbursement is available if a necessary and unavoidable cancellation or postponement of the event occurs. Reimbursement is available for transportation, food, catering services, property and equipment rentals, hall and location rentals, and more
- Ruined photos. If your photographer's film is defective, or negatives are lost or damaged, we can help cover the cost of retaking new photos
- A call to duty. If the bride or groom is unexpectedly called up to active duty, or has her or his military service leave revoked, forcing you to postpone the event, we can provide reimbursement for non-recoverable expenses
- **Damaged gifts.** You can get repair or replacement cost if your wedding gifts are damaged

- **Sudden illness.** If the wedding needs to be postponed because sudden illness prevents the bride, groom or their parents from attending, you can receive reimbursement for certain non-recoverable expenses
- Venue requires insurance. As an additional option to your policy, you can add liability coverage to protect yourself in case a guest is injured or causes damage to property
- Liquor liability. As an individual liability option to your policy, you can add this coverage to protect yourself against liability arising from alcohol-related occurrences (subject to policy conditions and exclusions)
- Additional expense. If a vendor suddenly becomes unavailable for your event but you're able to find a last-minute replacement, we can reimburse you for the difference in cost, up to 25% of the original contract price



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GDAMEMBERPROFILE



Paulomi R. Shah, DDS, MSD





This column highlights GDA members talking about their path to dentistry and the value they find in GDA membership. This month we hear from Central District member, Dr. Paulomi R. Shah, an endodontist that practices in Griffin, GA.



What inspired you to become a dentist?

I had a wonderful experience with my childhood dentist. He was from Jamaica, originally, and his office had a tropical island theme that was vastly different from and unique to the small town in West Virginia where I grew up. He brought humor, diversity, and kindness to my introduction to oral healthcare, and I looked up to him. I was also very critical of people's teeth upon meeting them from a young age. My father quickly corrected me and told me I could only be constructive with my criticism if I was willing to bring the opportunity to better their situation. That was the beginning of my goal to become a dentist.

What did you want to be when you were growing up?

During college, I took various courses that were outside of my major, because I wanted to be sure to not second-guess my career path. It became a toss-up between accounting and dentistry. Ultimately, I decided that dentistry would give me the opportunity to do both without regret.

When and how did you become a GDA Member?

I joined the GDA in 2010 during the last year of my residency in Texas, before joining my husband in Georgia where he was already practicing. I wanted to meet my future colleagues, so I went to the first district meeting they had after I moved, even before I started practicing.

What is the single most important thing, in your opinion, the GDA does to help members?

The GDA offers many services that are valuable. However, as a specialist, I find great value in remaining connected to my colleagues in an often-isolating field, having access to CE opportunities, and receiving updates on current legislation. Additionally, it is reassuring knowing that the GDA is providing information about our field to the politicians who are writing the rules and voting on regulations that affect how we operate our practices.

What is your most memorable GDA experience?

My most memorable GDA experience was attending the GDA conference at the Ritz Carlton in Amelia Island and celebrating our profession with other colleagues and their families. It was a wonderful family vacation. At that convention, I was a new member to the House of Delegates. It was my first opportunity to hear from GDA leaders who work tirelessly to address the issues that impact dentistry in our state. I witnessed first-hand their dedication to maintaining the integrity of our profession and providing the best oral health care to all Georgians.

What advice would you give to an aspiring dental student?

Maintain good relationships with your classmates and professors, both during dental school and after you graduate; do not let competition get in the way of that. Let ergonomics be a focal point of your dental education. Ask the sales representatives of loupes and operator chairs to bring you different options to try in dental school based on your height once you start seeing patients. It can be a crippling career due to poor form that you won't feel until much later. Go to dental meetings to meet dentists in areas that you may want to practice. They may not be looking for associates or partners right now, but you are planting the seed



and they may be ready for you when you graduate. It's a good idea to have already established relationships with potential business partners, so they can prepare for bringing someone on or selling their practice. Visit their offices during breaks so you can see how they run their office, and whether you could see yourself in that environment. Research different types of practice models when you start your third year, so you don't feel rushed into a decision at graduation. Be openminded about location, and forwardthinking about how the stage of life you are in when you graduate may be very different from what your life will look like ten years later. It's a rewarding profession, but make sure you truly like it. Your career should never feel like "work" if it is the right one for you. If it's not interesting in dental school, it doesn't all of a sudden become interesting when you graduate.

What was your first job?

I was a server at a Shoney's Restaurant. They actually have a training video on how to do "The Shoney's Nod." You nod your head up and down while you ask the patron if they would like to add French fries to their order, to subliminally convince them that they want the add-on. You would be amazed at how often that worked! That was my first experience with psychology in the customer-service industry. Despite my greatest efforts to prove my parents wrong, I regret that I only maintained that position for about six weeks. It's a good thing I got into dental school.

What do you enjoy doing in your spare time?

We are outdoor and sports enthusiasts, so my husband and I spend most of our free time doing outdoor activities with my children. We love traveling to new places, visiting family and friends, trying new cuisines, and learning about other cultures. I'm currently attempting to learn how to play the guitar with my son and trying to stay in good enough shape to

keep up with my daughter on her shorter cross-country runs.

Without saying "I am a dentist," what would you say if someone asked what you do?

I'm a little bit diagnostician, a little bit psychologist, a little bit radiologist, a little bit mechanic, a little bit comedian (I crack really corny jokes), a little bit hypnotist (sometimes I bore my patients straight to sleep), and a little bit anesthesiologist. I relieve pain and suffering, transform tears into smiles, and attempt to change the reputation of the "dreaded root canal."

What is your all-time dream vacation?

Hike up a mountain with beautiful foliage and reach the peak just before sunrise, descend in time to have a gigantic breakfast, take a really long nap listening to waves rolling in and out, read a good book, and then put my feet in the sand while the sun sets and stay long enough for the moon to show its face. It doesn't matter where, but Kauai definitely made my dreams come true.

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