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This issue edited by Dr. Joseph Tomlinson

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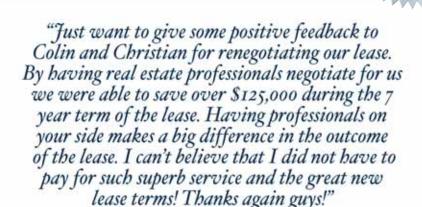
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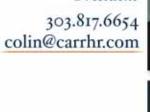
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Spring 2011



About Our Cover:

Another satisfied patient from Give Kids a Smile Day. Thank you to all the dental professionals who volunteered for this year's event on Feb. 4, 2011.

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Ethical Dilemma

By Quinn Dufurrena, D.D.S., J.D., CDA Executive Director



Dr. Quinn Dufurrena

common phone call I receive is about x-rays. Patients want to know, "does my dentist really need x-rays?"

We have all had it happen. Mrs. Smith

refuses to have "x-rays" taken. While we may have let it slide before, we now realize that it has been several years since the last radiograph. Our stomach knots up as we realize we are walking a fine line between possible negligence and the patient's right to choose his/her own treatment. Usually a little one-on-one discussion will uncover our patient's fear about x-rays, which more often than not solves the dilemma. Not Mrs. Smith. We have gone over the risks and benefits of radiographs before with the resultant, "I don't want x-rays."

As we know, without complete radiographs our ability as healthcare professionals is compromised. Without the information provided by radiographs, we are unable to provide a comprehensive and accurate treatment plan. So what do we do?

The crux of the tension lies in the dentist's professional responsibility to provide dentistry within the standard of care. Meanwhile, the patient is exercising their autonomy with regard to their protected right to control their own bodies. It is well-settled law that a competent adult has a legal right to refuse medical treatment.¹

It would make our dental decision about radiographs easy if it were set in stone that patients shall have complete full-mouth radiographs every five years and bite wing x-rays every six months. A patient's refusal to have these radiographs would automatically prevent any patient from receiving any type of dental service.

There are no such engravings. Dentistry is not a black and white science. The gray area makes up what is called professional judgment. To assist in this area, the American Dental Association (ADA) set guidelines for radiographic exposure. These guidelines help only as an adjunct to the dentist's professional judgment. The dentist must weigh the benefits of taking dental radiographs against the risk of exposing a patient to the inherent radiation - the effects of which accumulate from multiple sources over time. By the very nature of this guideline, it indicates that certain radiographs are not mandatory on all patients all the time. Radiographs should be taken only when there is an "expectation" by the dentist that the "diagnostic yield will affect patient care."2 This allows and demands that the dentist use his or her professional discretion to determine if there are reasonable articulate indications for xrays. These are guidelines only and serve as a resource for the practitioner. They are not intended to be the standard of care.3

So, in the case of Mrs. Smith, we look at the guidelines, and weigh those guidelines against such factors as previous periodontal disease, medical history considerations, nutritional changes indicating an increase in caries susceptibility, and all the other elements needed to form that elusive gray area of professional judgment.

Okay, so we have used the guidelines to determine what type of x-rays and how often to take them. Now we feel more comfortable with our professional judgment in how often Mrs. Smith should

have the radiographs taken. That confidence can also translate to how we will handle Mrs. Smith's refusal to have those necessary x-rays.

Now we need to deal with the concept of informed consent. Actually a more appropriate term, in this instance, would be informed refusal. This concept states that in order to make an intelligent decision, a patient must be told of the possible consequences in refusing the requested treatment.4 A case analogous to Mrs. Smith was decided in a medical malpractice case where the woman was advised to have a Pap smear test. She refused the test and later died from cervical cancer. The court held the opinion that informed refusal is like informed consent. Even though a patient refuses to follow the recommendation of the treating doctor, they must be advised of the consequences of that refusal.5 Consequently, after a full disclosure with Mrs. Smith, we are left with three treatment and documentation options. We won't even consider the failure to document. The risks are too high.

- 1. Treat her but document in her chart that she again refused x-rays.
- 2. Treat her but only after having her sign a release form indicating that she has been informed of the risks and benefits of radiographs, and the possible sequelae in failing to consent to the taking of those radiographs.
- Refuse to treat Mrs. Smith unless she consents to the radiographs deemed necessary.

How much risk are you willing to take? An important factor to consider, in a dental malpractice suit, is that a document that leaves little to interpretation or ambiguity has more credibility. As such, a



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jury may view, as more credible, a written release signed by the patient. Signed consent forms are used routinely for more invasive procedures like oral surgery and endodontics. Perhaps there would be less liability and more cooperation from patients if they were forced to take the time to read a written consent form. As with any legal document, a patient is more likely to think twice about their refusal before applying their signature.

So we have had Mrs. Smith sign our "radiographic refusal consent form" and everyone is happy. But what happens down the road when Mrs. Smith's teeth become loose due to the undiagnosed periodontal disease? Now you are sitting on the stand being judged by 12 of your peers, none of whom are dentists and none of whom have read about proper informed consent and documentation.

How do you respond when the plaintiff's attorney points out that you are the professional, not Mrs. Smith? It was your job to use your professional judgment and now Mrs. Smith is losing her teeth.

At this point, if you look back, you may have chosen the third option and refused to treat Mrs. Smith. Winning or losing a negligence case may not be the issue. With proper informed refusal, the professional may have protected themselves from successful litigation. Maybe a more important issue is that you did not want to end up in that situation in the first place. So consider again.

If, after a careful discussion of the risks and benefits, the patient still refuses to the appropriate radiographs and you don't feel comfortable with that decision, perhaps you are falling below your own standard of care or professional philosophy in the treatment of your patients.

By using the ADA guide and your professional judgment, you can arrive at a reasonable articulate criterion in determining the appropriate radiographs for our patients. Once you are comfortably within that "standard of care gray area" you may feel more comfortable and more assertive in how you deal with Mrs. Smith and her refusal.

Maybe that knot in your stomach will go away. ■

^{1.} Island Jewish Med. Center v. Malcolm, 147 Misc. 2d 724, 728-729, 557 N.Y.S. 2d 239, 243 (N.Y. 1990).

^{2.} American Dental Association, *The selection of patients for dental radiographic examinations,* (revised 2004).

^{4.} Burton R. Pollack, Law and Risk Management in Dental Practice, 115 (Quintessence 2002).

^{5.} Truman v. Thomas, 27 Cal. 3d 285, 287 (Cal. 1980).

CDA Endorsed Companies: Discounts on Services and Lowering CDA Dues

By Brandon Owen, D.D.S., M.S., CDA Editor



Dr. Brandon Owen is an Orthodontist in Fort Collins, Colo.

have a clouded understanding of what it means to be a CDA endorsed company. Of those who are aware, few realize how much benefit these companies provide. As a relatively new dentist, I

have so many decisions to make on a daily basis that often I choose to work with companies because of their marketing tactics rather than doing thorough

research on pricing or reputation. One of the many wonderful things about CDA endorsed companies is the fact that the CDA Enterprises Board (CDAE), the forprofit subsidiary of the CDA, does the research for me. Not only do they investigate the quality of the product or service provided by the company, but they also check to make sure they offer a discount on their fees to CDA members.

What I have come to learn in the past months is that almost one-third of CDA revenue comes from these endorsed companies. This means our membership dues are, in a sense, largely subsidized by our endorsed companies. Furthermore,

> the CDA regulates these endorsed companies; if there are complaints about the quality of the product or service, or about business practices of an endorsed company, the CDA immediately addresses these concerns with the company and appropriate action is taken. This assures a higher quality of service and care to CDA members because these businesses care about the relationship they have with the CDA and especially CDA members.

Companies vying for endorsed status begin by submitting a formal proposal to the CDAE Board. Upon hearing the proposal, the board does a meticulous review of the company, the product or service, and the potential for discount. If the company passes this evaluation process, the CDAE Board may approve the endorsement. From there, a contract is negotiated, reviewed by the CDA attorney, and then signed by the CDA executive director.

Another source of income to the CDA is the Medallion Plan advertisers who purchase an annual pre-paid advertising plan. Medallion Plan advertisers enter into an agreement with the CDA because they care about having a relationship with organized dentistry. While they join this plan to support the CDA and its members, they are not reviewed or monitored by the CDA. Some endorsed companies purchase Medallion Plan advertising, but not all Medallion Plan advertisers are endorsed companies.

Speaking of advertising, another service worthy of mentioning is classified advertising. Classifieds are posted online the first of every month and are a great way to list office space, practice opportunities, dental equipment, etc. The classified area is the most frequently visited page on the CDA Website. In quarterly journals, like this issue, you'll also find classified ads listed in the back section.

To learn more about endorsed companies, visit the CDA Website, cdaonline.org (click on "Endorsed Offers" at the top of the page). You can also see a listing of these companies on the inside front cover of this issue. If you have questions about these companies or advertising opportunities, please feel free to contact the CDA at 303-740-6900 or 800-343-3010.

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Taking Give Kids a Smile Day to the Next Level!

Dear Editor,

For the past three years, Dr. Karen Foster's Aurora practice, Saddle Rock Pediatric Dentistry, has opened its doors to deserving children to treat on Give Kids a Smile Day. This year (Feb. 4) was no exception. Providing cleanings, examinations, radiographs and fluoride treatments to 47 children in one day is a huge accomplishment - but we wanted to do more. What takes Saddle Rock Pediatric Dentistry's event to the next level is the team's tremendous effort in forward planning with the goal being for every child to have a fantastic experience.

Beginning Oct. 1 of the previous year, the practice contacts potential dental community partners to recruit volunteers and request supplies for the future GKAS event. Several dental staff members from nearby offices come to volunteer their services for the day. Specialty practices



Jason Whitlow (left) with Henry Schein and Brenda McNulty on GKAS day.

provide information and donations of free consultations. General Air donates a helium tank so all children leave with a balloon. Colgate provides free products. Nova Consulting, a local dental consulting group, added boxes and boxes of valuable products. Our Toy Tower vendor donated a coin for each child to spend that day.

Local restaurants donated food for our volunteers. Our Philips Sonicare representative donated three kids Sonicare brushes to use as prizes, drawn throughout the day. Our Henry Schein representative helped secure supplies and even came to volunteer.

After the event, we recognized every supporter of Give Kids a Smile with a certificate and photos of the day's activities. This lets them know their donation went to a good cause. Overall, the day was fabulous. Every child left that day with clean teeth, a bag full of goodies and no fear of a future visit. We look forward to National Children's Dental Health

month and Give Kids a Smile day in February 2012.

Brenda McNulty Business Manager Saddle Rock Pediatric Dentistry



Networking – Social Network Style

By Molly Pereira, CDA Associate Executive Director

Are you on Facebook? You should be - your patients and colleagues are.

Social media is everywhere now. From the time you wake up in the morning to the time you sit down for lunch, chances are you've encountered the Facebook icon or some reference to it a half dozen times – whether it's on TV as you get ready in the morning, on a billboard during your commute, on your favorite internet site for news, in your daily newspaper or an "app" on your personal cell phone.

This is the way people communicate and the way people stay connected no matter the distance apart or time away. Therefore, it's an incredibly effective way to communicate with your colleagues and patients – many who you may not see but twice a year.

Did you know that you can make a business page for your practice that's separate from your personal, individual account? If you already have a personal account, keep it private and for personal use only. However, don't miss the opportunity to have a Facebook account just for your business that is open to the public. It takes minutes to create and is a completely free marketing opportunity for your practice.

Why join Facebook?

- It's completely FREE.
- You would be surprised how many of your patients spend hours a week using it.
- It's a marketing tool like you've never used before.

Once you have a Facebook account, how should you use it?

- Be sure to post a comment at least once a week.
- Let your Facebook followers get to know you as a person (note: this doesn't mean sharing information that should be kept in your private life – remember you're still representing your business). Examples of good posts would be:

- "Took a break from the dental convention today to go on a bike ride along the Platte."
- "Volunteering at a homeless charity event this weekend – still seeking other volunteers if you're interested."
- "Congratulations to the Smith family for winning our patient appreciation basket this month!"
- "Meet our new hygienist at your next appointment..."
- Just remember that quality counts on Facebook, not necessarily quantity. More people will follow you and "like" your comments if they enjoy reading what you post.
- Give your business a personality by using Facebook as a marketing tool. Patients will relate to you more if you break down a few barriers and let them get to know you.

Join the CDA on Facebook!

Here's how:

- 1. Go to cdaonline.org/facebook
- 2. Click the "Like" button near the top of the page to receive our posts and updates
- 3. Add your own comments and posts to the CDA wall



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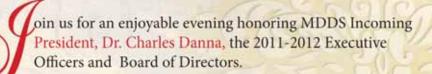
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Staying Compliant With Updated Radiation Rules

By G. Garo Chalian, D.D.S., M.S., J.D.; Brian Vamvakias, M.S.; and Jack McQuitty, J.D., L.L.M.

hat said, your first thought may be "Aaaaaaah, more rules!!!" No worries, you will see that compliance with the updated rules and regulations are not onerous.

Last July, that's right, 2010, Colorado Department of Public Health and Environment (CDPHE) *updated* the regulations associated with radiation sources and the facilities where they are utilized. This article gives guidance and history on rules regarding radiology and Colorado dental facilities. This article provides an informal working checklist to assist with compliance of those rules. The material presented is not intended, nor should it be interpreted, as legal advice.

Who regulates x-ray machine use in dental radiology facilities?

CDPHE is the sole agency in the state tasked to make rules on radiation sources, including those used in your dental office. The Colorado Rules and Regulations Pertaining to Radiation Control (6 CCR 1007-1) are the specific rules that regulate the use of radiation sources. You can find the entire set of rules on the CDPHE Website at http://www.cdphe.state.co.us/regulations/radiationcontrol/index.html. Although each facility is responsible for complying with all mandated rules and regulations, those that apply directly to dental facilities include:

Part 1 - Definitions Related to Radiation Rules in General, Including Those Involving X-ray Machines.

- Part 2 Rules for Registration of Radiation Producing Machines, Facilities and Services.
- Part 4 Standards for Protection Against Radiation (emphasis on Sections 4.6 and 4.18).
- Part 6 X-rays in the Healing Arts (Pay particular attention to Sections 6.3, 6.4 and 6.7).
- Part 10 Notices, Instructions and Reports to Workers: Inspections.
- Part 12 Fees for Radiation Control Services (emphasis on certification labels and inspections).

Part 13 - Penalties for Violations.

What rules changed in July 2010?

Notable changes in the July 2010 radiation rule revisions include:

- Radiation safety officer designation and facility registration updates
- Shielding design requirements for dental cone beam and cephalometric units
- Annual inspection requirements for dental cone beam and hand-held units
- Diagnostic image retention to match the period specified for patient record retention by the State Board of Dental Examiners (seven years)
- Formal quality assurance and radiation safety program requirements
- Equipment, inspection, personnel and patient safety requirements outlined for hand-held units

Additional details on these requirements are provided below.

Do I Need to Re-register my Facility? When Do I Need to Update My Registration? (Section 2.4.1)

Each dental facility using x-ray machines must be registered. Although registration of x-ray machine facilities has always been a requirement, some elements of the registration process have changed. The registration form, Form R-4 found on the CDPHE Website (www.cdphe.state.co.us/hm/forms/xray/r 4.pdf), has been modified based on updates to the regulations. This form is to be used to register new facilities and when facility information changes.

On Form R-4, the dental office must identify its legal owner and basic contact information for the dental office. In addition, each facility must identify a Radiation Safety Officer (RSO). The RSO has many responsibilities including acting as the contact person for CDPHE and the facility's inspector. The RSO may be a dentist, hygienist or any properly trained auxiliary. The RSO must be aware of the regulatory requirements for the dental office and oversee radiation safety. Specific RSO requirements are found in Part 2, Appendix 2A.

All dental offices are required to complete a new Form R-4 whenever there are changes to registration information, including address, practice ownership or equipment. It is important to note that Section 2.4.6.4 requires that this be completed within 30 days of these changes. Form R-4 must be signed and

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sent to CDPHE by the dental office. There is no fee associated with the registration. CDPHE will respond with a letter acknowledging the registration. Keep a copy of the response letter with your records.

What's an RSO's Responsibilities? The Radiation Safety Program Requirement (Section 4.5)

The RSO is responsible for implementing a Radiation Safety Program. The goal of the Radiation Safety Program is to minimize radiation exposure to patients and staff. This duty includes review of dosimetry reports, safety procedures, safety training, image quality assurance, operator qualifications and an annual review of the program structure to make sure the dental office is meeting all of the requirements mandated by CDPHE.

How Should Operators be Trained? (Section 2.6.1)

Dentists and hygienists who meet the licensure requirements mandated in the Colorado Dental Practice Act are considered adequately trained to operate most dental x-ray machines. Operator training for auxiliaries who are not otherwise licensed continues to be governed by the Colorado State Board of Dental Examiners' Rule X, which has not changed at this time. However, if your facility utilizes hand-held or cone-beam units, operators must now be trained in the specific radiation safety concerns for those instruments.

The RSO must maintain a list of each x-ray machine operator for each dental office. This list should be kept in a file with the other documents required by regulations. Annually, the RSO must verify that the qualifications of each operator have been maintained as part of the Radiation Safety Program. ALL training must be documented and kept on file.

What is Required for Hand-held Units? (Appendix 6E)

Prior to the regulation changes, use of a hand-held unit required a waiver from CDPHE because the rules did not allow an x-ray machine to be held during an exposure. Regulations were re-written to allow the use of a hand-held unit under certain conditions. Appendix 6E spells out the complete requirements for equipment, operators and patient safety when using a hand-held x-ray machine. Equipment requirements include discussion of shielding, stabilizing measures for the unit during exposure, and security considerations for when the device is not in use. Operators require specific training on the use of hand-held devices, must wear a lead vest with a thyroid collar and must use an extremity (ring) dosimetry badge. Patient safety considerations include discussion of bystander proximity and appropriate locations for use, which exclude hallways and waiting rooms.

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Is My Facility Exempt from Shielding Design Requirements? (Section 6.3.2)

A Shielding Design is a report completed by a Qualified Expert, a consultant approved by CDPHE to determine if additional material will be required in the walls to shield the public and staff from radiation exposure from the x-ray machine. This requirement does not pertain to all x-ray machines.

Cephalometric units and Dental Cone Beam CT units are the only dental-related machines that require a shielding design. For these units, prior to installation or whenever modifications are made to the x-ray room, the dental office must submit information to a Qualified Expert on the room construction material, room design, the x-ray machine, and how it is used (per Appendix 6A). The Qualified Expert will review and approve the design, or recommend modifications. The x-ray machine vendor or installer must then follow the approved design when delivering and configuring the machine. The Shielding Design is a permanent record and must be transferred to a new owner if the business is sold.

How Do I Meet the Quality Assurance Requirements? (Section 6.3.5)

Your dental office must have a quality assurance program. A radiographic image quality assurance program is designed to ensure consistent, diagnostic-quality images while keeping patient radiation doses at a minimum. A good quality assurance program will include quality control checks on the x-ray unit and the image processor system if film is used. To reduce patient exposure, use the fastest film consistent with the diagnostic objective of the examination (Section 6.3.3.9).

Keep the following requirements in mind when designing a quality assurance program:

For Dental Machines:

- a. Intraoral and panoramic units must be evaluated by a Qualified Inspector every three years or after service that affects their radiation output (replaced tube, transformer or other component).
- b. Hand-held units must be inspected annually.
- c. Dental cone beam units must be inspected annually by a Qualified Expert.

For Dental Image Processing:

If film is used:

a. Film must be processed according

- to the processor manufacturer's procedures and specifications.
- b. The dental office must record the processor temperature daily.
- c. The dental office must document that developing chemicals are changed out at least monthly.

If digital radiographs are used:

a. Digital image systems must follow the manufacturer's guidelines for quality assurance.

The dental office must review the quality assurance program annually. Document the review in your records.

How Long Do I Need to Keep Patient X-Rays on File? (Section 2.6.5)

Radiographs are considered part of the patient's medical record and should be kept for the period of time specified by the Colorado State Board of Dental Examiners, currently seven 7 years after the date of the last examination or, for minors, seven years after the patient reaches age 18 (see Board Rule XIX).

What existing rules should I be aware of?

There are several existing rules for dental offices that should not be overlooked, including:

- Inspection requirements
- Dosimetry monitoring requirements

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- · Considerations for digital radiography
- · Record keeping

Additional details on these requirements are provided below.

What Do I Need to Know About the Inspection Process? (Section 2.5)

As discussed above, most dental x-ray systems are required to be evaluated every three years by a Qualified Inspector. With this rules revision, cone beam and hand-held units must be inspected annually. Cone beam systems must also be inspected by a Qualified Expert. X-ray machines must be re-evaluated after service or repairs that affect radiation output, such as the replacement of a tube head. However, service or repairs that do not affect radiation output, such as replacing a collimator cone, would not require a re-inspection.

Qualified Inspectors (www.cdphe.state.co.us/hm/rad/xray/ qualifiedinspectors.pdf) and Qualified Experts (www.cdphe.state.co.us/ hm/rad/xray/qualifiedexperts.pdf) are private individuals registered and approved by CDPHE. A list of these consultants can be found on the CDPHE Website (www.cdphe.state.co.us/ hm/rad/xray/index.htm). Listed Qualified Inspectors have been approved by CDPHE for specific categories of machine types. Make sure the inspector you call is approved to inspect your unit. It is the dental office's responsibility to schedule a Qualified Inspector to evaluate their program before the machine certification has expired.

The Qualified Inspector will test machine performance as well as the dental office's compliance with applicable parts of the radiation regulations. Keep copies of the inspection forms – R 59-1 for machine evaluation or R 59-2 for facility violations – on file. A copy of the inspection form must be submitted to CDPHE to show that the inspection was completed and/or that corrective actions were taken to fix any violations. This is usually done by the Qualified Inspector at

the end of the inspection, but you should confirm that they will file the report.

A dental office cannot change Qualified Inspectors because the first one cited the office with violations. A dental office must complete each inspection with the Qualified Inspector who initiated the process. You have 30 days from the inspection date to correct any cited violations to avoid inspection by CDPHE at a fee of \$152 per hour and possible fines. It is important to note that when machine performance violations are noted, the machine must be removed from service until it is repaired. The dental office must use a registered service company to either repair the unit or verify that it is out of service and no longer able to generate x-rays. The service company must sign Section III on the R 59-1 form and provide the dental office with a service report.

Please keep in mind that your Qualified Inspector must do a complete inspection and must cite a dental office if violations are found. If they do not, they are in violation of the law and could face fines or lose their approval to do inspections. Very rarely will a citation result in anything more than having to do corrective action to fix the violation. CDPHE makes every attempt to work collaboratively with facilities to address problems, but will aggressively enforce regulations if the office chooses to ignore letters, phone calls or visits.

Do I Have to Provide Operators With Dosimetry Badges? (Section 4.18)

Each dental office must monitor the radiation exposure to their workers from use of x-ray machines. This is not a new requirement, but perhaps the most misunderstood area of the x-ray regulations. Dosimetry badges must be provided to each operator and dosimetry badge sharing among operators is not permitted. When monitoring, always keep a "control" badge stored in a non-radiation area and

RADIATION continued on page 16



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RADIATION continued from page 15

return it with workers' dosimetry badges to a vendor for processing.

There is a provision for dental offices to qualify for an exemption to the dosimetry monitoring requirement. A dosimetry waiver request may be submitted if the dental office can produce six months of recent dosimetry reports that show the operators are receiving less than 10% of the annual dose limit (nearly every dental office qualifies). If the waiver request is approved, the dental office will receive a notice from CDPHE and dosimetry monitoring can be discontinued. Keep a copy of this waiver letter with your records. Remember, cancelling your dosimetry monitoring service before receiving approval from CDPHE is a violation of the regulations and can result in fines.

I Just Installed a Digital Radiograph System Utilizing Less Radiation. Who Must be Shielded? (Section 6.3.3)

The rules on patient and staff shielding do not change for digital radiographs.

The dental office must protect both the patients and staff from the direct x-ray beam and scatter radiation.

The dental office must protect the patient's thyroid with at least 0.25 mm lead equivalent unless the shielding interferes with the image (see Section 6.3.3.6(2)). Protective aprons are also recommended for the patient's torso. All staff must wear at least 0.25 mm lead equivalent aprons when exposed to scatter radiation unless they are positioned more than two meters away from the patient.

What are the Record Keeping Requirements? (Section 6.3.4)

Dental offices must keep the following records:

- CDPHE facility registration confirmation
- Inspection results and corrective actions
- X-ray machine service and maintenance records identifying who performed such service
- · Operator training documentation

- Dosimetry data (unless a waiver has been received)
- Facility diagram and Shielding Design (when required);
- Quality assurance reports, such as records of processor temperatures and developing chemical changes
- Written procedures pertaining to radiation safety

G. Garo Chalian, D.D.S., M.S., J.D., Colorado licensed dentist/endodontist, member of the Colorado State Board of Dental Examiners, licensed attorney in the state of California.

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Jack H. McQuitty, J.D., L.L.M., Colorado licensed business attorney who assists clients in a diversity of tax and business matters related to entity structuring, mergers and acquisitions of privately owned companies, business continuity, incentive compensation, estate planning, and asset protection. Managing Partner of McQuitty & Keyser, LLC.

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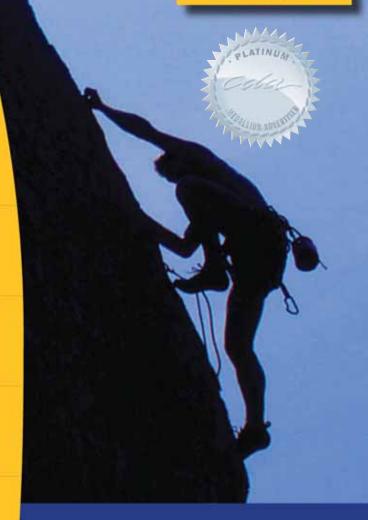
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Colorado Dental Offices Give Again



Jason Krause, Henry Schein Dental (left); Dr. Denise Kassebaum, dean, University of Colorado School of Dental Medicine; Rep. Rhonda Fields (HD-42); and Dr. Quinn Dufurrena, executive director, Colorado Dental Association at one of Colorado's GKAS locations on Feb. 4, 2011.

ongratulations to the hundreds of dental volunteers who took part in the ninth annual Give Kids a Smile Day (GKAS) on Feb. 4, 2011. GKAS is the first Friday of February each year in celebration of National Children's Dental Health Month. Dental practices across the nation participate by volunteering to provide donated treatment to underserved children or provide oral health education in a community setting.

As in years past, the scope of GKAS participation was vast. Several dental professionals volunteered at the University of Colorado School of Dental

Medicine. Some offices invited their colleagues to join them to be able to provide dental care to greater numbers of children. Others involved the entire dental team and created a day filled with donated treatment, door prizes, entertainment and nutritional counseling for families.

Dental professionals also visited schools to educate kids about good oral health, eating well and caring for teeth. These presentations involved puppet shows, arts and crafts, tooth fairy costumes and more.

GKAS helps children who would otherwise not receive dental attention but it also brings attention to the struggle that many families face for basic dental care. **Rep. Rhonda Fields** (HD-42) visited and toured the CU School of Dental

the state, including 9 News, *The Denver Post* and Fox 31 in Denver.

The CDA thanks Dental Lifeline Network for providing follow-up care for GKAS. Another big thank you goes to GKAS corporate sponsors: Henry Schein Dental, Colgate and DEXIS.

In 2011, 186 dentists and hundreds of dental hygienists, assistants, office staff and students participated in GKAS. Together they donated more than \$625,491 in dental treatment to over 1,624 children (an average of \$378 donated per child). In addition, 8,116 children received education at 63 locations from dental providers through GKAS this year.

Thank you to everyone who participated in the 2011 event. You truly made a difference in the lives you touched.



Thank You GKAS Volunteers!



CU dental student Mike Johnson (left), Dr. Eric Van Zytveld and their first little patient at the CU School of Dental Medicine for GKAS.

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A GKAS patient checking out her clean

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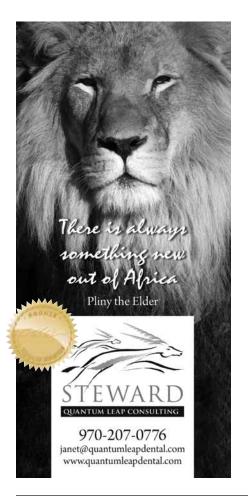
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Seven Ways to Motivate Your Team

By Janet Steward

e all know "a happy employee is a productive employee." This old adage has stood the test of time. Of course, your team should be well compensated; competitive wages provide the foundation for retaining first-rate staff members. An employee whose performance is not satisfactory does not belong in your practice. Let's say, for example, that you have four employees and one's performance is subpar. This means that 25% of your workforce is underperforming. I don't know of any business that can flourish with those odds. Your challenge as a business owner is to hire a good team, and to keep team members



"People often say that motivation doesn't last. Well, neither does bathing – that's why we recommend it daily." - Zig Ziglar

motivated and happy so that they are more productive and want to remain with the practice.

While Google-style benefits and perks such as free haircuts, on-site gyms, dry cleaning services, on-site medical staff, massages, and outstanding cafeterias are way beyond the means of most organizations, there is much that a dental practice can do to retain its employees without breaking the bank:

- Coffee, Tea and Refreshments —
 Supply your team with a high-quality
 coffee machine that has a variety of
 options, including tea for those who
 don't drink coffee. In addition,
 consider supplying a variety of
 healthy or semi-healthy snacks, such
 as energy bars, fruit, dried fruit, and
 nuts.
- Lunches Once a week or once a month, have lunch delivered to the office. Make sure the day is carefully scheduled so that everyone can participate. At lunch, avoid discussing the practice and patients for the most part and focus on getting to know one another better. This helps to create an environment of camaraderie and fosters a sense of team spirit.
- Family Fun Get-Togethers —
 Schedule an annual family fun day.
 Host it in a park or your own home.
 This is a great way for people to have a good time outside the work environment, and it can be a terrific employee motivator. Provide food and maybe some beer, and have fun games to play.

- Get to Know Your Team Take the time to let team members know you care about each of them as individuals. Ask about their weekend, their children, their dog or whatever is important to them. Also ask about their goals and ambitions. Make it a point to speak to all employees individually at least once a week to ask about their lives and how they're doing personally. If they know you genuinely care about them, they will care about you and your practice.
- Celebrate Achievements This is often forgotten or overlooked by practitioners. Celebrate the practice's achievements such as high newpatient referrals, patient retention, low accounts receivable, or high production or collections. Honor the individual achievements of team members; this might be as simple as acknowledging a compliment from a patient. One major motivator for your team is to ensure that each member feels rewarded, recognized and appreciated.
- The Basic Niceties A pleasant "good morning" or "have a good evening," or "please" and "thanks," goes a long way. Write a thank-you note or give a small gift of appreciation for a job well done. Treat team members fairly, and don't play favorites.
- Huddles and Staff Meetings —
 These essential team meetings allow you to reinforce your goals and establish a direction for your practice.
 They also afford the team an opportunity to discuss issues, make suggestions, and collectively determine solutions that everyone buys into. Make sure that these meetings



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provide a safe environment for voicing opinions and questions.

You don't have to implement all of these suggestions; just pick a few, but make sure you implement them with consistency. The key word here is "consistency." It is a real staff demotivator to provide a perk once or twice and then let it slide into oblivion. It is the same with your patients; if you're going to really wow them, whatever nice things you do for them must be done every single time without fail.

Motivating your employees starts with motivating yourself. When you, as the business owner, are a positive, enthusiastic, motivated leader, so too will your team be positive, enthusiastic, and motivated. It's the trickle-down effect, and it happens every time. Work on yourself first. Go beyond reading this article, and read books and articles on management and motivation. Some good reads are:

Zapp! The Lightning of Empowerment, by William Byham

Whale Done, by Ken Blanchard Leadership 101, by John Maxwell

Leadership and the One Minute Manager, by Ken Blanchard

The One Thing You Need to Know, by Marcus Buckingham

And, finally, here are a few quotations to keep in mind:

"Management is nothing more than motivating other people." - Lee Iacocca

"An employee's motivation is a direct result of the sum of interactions with his or her manager." - Anonymous

"Motivation is simple. You eliminate those who are not motivated." - Lou Holtz

Janet Steward is the owner of Steward Quantum Leap Consulting, www.quantumleapdental.com. You can reach her at 970-207-0776 or janet@quantumleapdental.com.



Remembering Dr. Dana J. Johnson 1933-2011

he Colorado dental community lost one of its great leaders on Feb. 18, 2011. Dr. Dana Johnson, a general practitioner in Boulder, Colo., was a CDA past president and CDA Board of Trustees member. Dr. Johnson was deeply passionate about organized dentistry, a devoted supporter of the CDA and a great ambassador for the dental profession. He was a proud CDA member for 43 years.

Dr. Johnson was born and raised in Nebraska. One of his first jobs was working on the railroad. In 1954, Dana joined the U.S. Air Force as a pilot. He was proud to serve and had stories of training in T-6 airplanes and being a crew member of a B-25.

After the Air Force, he moved to Boulder, Colo. to attend the University of Colorado, where he majored in applied science and earned four minors, one of which was debate. It was at this time he met his wife, Vicki, and they recently celebrated 50 years of marriage.

After graduating from CU, Dr. Johnson attended the Creighton University School of Dentistry in Nebraska where he earned his dental degree in 1967.

Dr. Johnson opened his dental practice in Boulder, Colo. shortly after graduating. In 1987 he served as president of the CDA. Continuing his devotion to organized dentistry, he was very involved as a CDA delegate, an active member of the CDA Finance Council and a member of several other committees. He was also a member



Dr. Dana Johnson

of the International College of Dentists.

Anyone involved with the CDA knew Dr. Johnson. He was enthusiastic, optimistic, gregarious and generous.

He was welcoming to all points of

view and courteous to everyone, making him an outstanding leader for the dental profession.

He is survived by his mother Ada, his wife Vicki, his children and grandchildren. A memorial service was held Feb. 26, 2011.





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Top Dental-Related Bills You Should Know About This Legislative Session

By Jennifer Goodrum, CDA Director of Governmental Relations

he 2011 state legislative session is well underway. The state legislature is in session from mid-January through mid-May each year. During this time, the CDA is at the Capitol daily advocating on your behalf.

The CDA is involved with a number of bills you should be aware of this year.

1. Non-Covered Services:

This bill would prevent dental insurers from setting fees for procedures they do not cover. The practice of dental plans dictating fees for services they do not cover has a number of adverse effects on both dentists and patients. To learn more and take action on this issue, visit *cdaonline.org/actnow*.

2.SB 192 Prescription Drug Monitoring Program:

This bill would extend Colorado's Prescription Drug Monitoring Program (PDMP), a database of controlled substance prescriptions issued to patients, through 2016. The PDMP Website helps empower Colorado's healthcare providers with the information they need to ensure appropriate prescribing. The bill is likely to require disclosure to patients about the collection of data on their prescription drug use.

3. HB 1128 Protect State Board Documents from Civil Discovery:

This bill would protect documents used in a dismissed disciplinary proceeding of a state regulatory board from discovery in a civil lawsuit.

4. HB 1148 Immunity in Sharing Healthcare Worker Employment Information:

This bill would provide legal immunity to present and former employers of healthcare workers who disclose information about drug diversion, drug/alcohol violations, patient abuse or crimes of violence to a prospective employer.

5. HB 1281 Loan Forgiveness:

This bill would expand access to faculty loan forgiveness and allow all healthcare professional faculty members to qualify for these loan forgiveness programs, including dental faculty. The bill also increases funding for the state's primary care loan forgiveness program. Dentists and dental hygienists are eligible for the primary care loan forgiveness program.

6.HB 1106 Actual Damages in Personal Injury Cases:

This bill would restrict plaintiffs from recovering more than actual damages

(the amount accepted in payment by the medical professional rather than the billed charges) in personal injury cases. It could help keep your malpractice premiums down.

7. Preventing the Elimination of the Dental Loan Repayment Program

Defunding the state's Dental Loan Repayment Program was recently proposed as an option to help balance the state's recession-plagued budget. Given the extensive debt load of new dental school graduates, the loan repayment program is critical in allowing providers the freedom to serve in rural and other underserved areas, and in providing access-to-care for many Coloradans. The CDA is collecting data to help defend the program.

Already, a couple of additional bills of concern have been defeated, including a bill that would have increased the administrative burden on dental practices by requiring all healthcare providers to wear identification badges that would list the type of professional license held and other provider information.

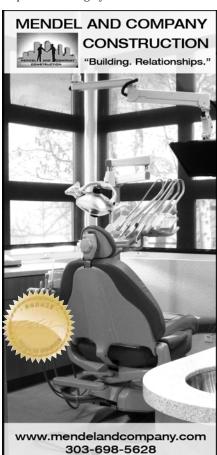
This year, the CDA is involved in almost 30 bills. View a synopsis of the bills directly applicable to dentistry at *cdaonline.org/billstatus*.

"Use" Tax – What You Should Know as a Dentist

here are many things to keep track of when you're a business owner. Among all your HR and accounting responsibilities are also your tax obligations.

What is "use" tax?

Use tax is similar to sales tax. Use tax must be paid when sales tax is not charged on a purchase, most likely made from an out-of-state company that does not have a physical presence in Colorado. These non-Colorado companies are not required to charge you sales tax on the



items you purchase because they are out of state. However, tax must still be paid on these items in the form of use tax. Use tax should be paid quarterly when you file your taxes. Use tax is the same rate as sales tax, which is 2.9% for the state portion (check with your local city/county government to find out what their use tax rates are). When you pay use tax on a purchase, you should remit it on form DR 0252, "Consumer Use Tax Return."

I'm a dentist, not a retailer, why does this affect me?

Dental offices purchase several items from suppliers who are out-of-state without a physical presence in Colorado. It is the dental practice's responsibility to keep records of these purchases and to pay the applicable taxes to appropriate entities. As an example, dental practices buy toothbrushes and paste for their patients from companies that do not have a physical presence in Colorado. The companies can sell brushes and paste kits to your practice tax free; however, you must then pay use tax upon receipt of the product. Failure to do this can result in penalties and interest, in addition to the tax owed.

But what if I'm selling the product purchased?

If you are purchasing a product to resell to your patients (i.e. electric toothbrush, whitening kit, etc.), you can purchase it tax-free as a resale item from your supplier. However, when you sell the product to your patient, you must charge and collect the applicable sales tax and remit it to the appropriate entities. In this scenario, you would not have to pay use

tax because sales tax is being collected by you and paid by the patient.

If you are a re-seller of *any* product, you must obtain a retail sales tax exemption certificate and license. These apply to any business that sells taxable products. Prescription drugs and "sales of drugs or materials when furnished by a doctor as part of professional services provided to a patient" are exempt from sales tax and do not alone require a sales tax license.

Other compliance requirements may apply to those who obtain a sales tax license, which include:

- Maintaining and renewing the license
- Keeping all records related to tax liability for at least 36 months
- Collecting sales tax on taxable items
- Filing sales tax returns and remitting sales tax collected
- Filing reports, regardless of whether retail sales are made for the reporting period
- Periodic audits by the state and/or local government

For additional information on this topic, you can attend a class offered monthly at various locations across Colorado. All classes are free of charge. A complete list of classes can be found at www.TaxSeminars.state.co.us. Several classes are also offered online. If you have general questions or you are having problems with your sales tax account, contact the Department of Revenue Tax Information Call Center at 303-238-7378.

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Journal of the Colorado Dental Association, Vol. 90, No. 2, Spring 2011 issue.

OPPORTUNITIES WANTED

Opportunity Wanted: Dentist with 16 yrs. experience seeking associateship or buy-in in city areas of Colorado. Cosmetic, endo, oral surgery experience. Can start within six weeks notice. 207-217-5457 or *rarbuckledds@gmail.com*.

Opportunity Wanted: Before beginning my residency in pediatric dentistry I worked for two years in a pediatric office under one of the former presidents of the AAPD. After completion of my program next year, I will be interested in relocating to Colorado/Denver area. If you are looking for an associate or staff member, please contact me at 806-683-3382 or nelsonbevilledds@gmail.com.

Opportunity Wanted: General dentist, Creighton Univ. grad (2010). Graduated with honors, nominated and elected to National Dental Honor Society. Completing AEGD program at Univ. of North Carolina in June with emphasis on implant prosth., fixed endo., perio., and Invisalign. Seeking associate with buy-in, practice purchase, or other interesting opportunity. Call 402-740-4880 or e-mail asv37357@dentistry.unc.edu.

Opportunity Wanted: General dentist, four years experience in office. Surgical extractions, molar endo, implant placement, C&B, CD, RPD. Looking for a part-time, one to two days per week (Mon. and Sat.), 12 to 15 hours per week. Ready to drive to rural area or from Fort Collins to Colorado Springs. Email colobugdds@gmail.com.

Opportunity Wanted: General dentist looking for an associateship Fridays and/or Mondays within 60-70 miles of Ft. Collins. Three years experience in solo family practice in Ft. Collins. Please email *noco2thfiller@yahoo.com* if interested.

Opportunity Wanted: Retired orthodontist in Denver metro area seeking part-time work; can also cover vacations and health issue situations. I can be reached at <code>darbthedog@aol.com</code>.

POSITIONS AVAILABLE

Associate: Well-established, newly remodeled Arvada dental office is looking for an associate dentist to work part-time. Please e-mail your resume to *abledentistry@gmail.com*.

Associate: Growing private general practice located in Castle Rock is looking for an associate dentist to work one day per week starting June 1, 2011. Workdays will be added as the practice continues to grow. This opportunity will lead to a two-to-three day per week position. We are looking for a self-confident doctor who would like to join a great team on a long-term basis. Position is ready to be filled with the right person! Please respond with your CV and letter of interest to: castlre-rockdentaljob@gmail.com. All inquiries are confidential.

Associate: Associate position available in a general practice treating children. State-of-theart facility including digital x-rays. Friendly staff. Starting at \$120,000/yr. with great benefits. Please e-mail resume to: ddsdental13@yahoo.com.

Associate: Fast growing private GP office near San Francisco, CA hiring full-time associate immediately. All the latest technologies (CEREC, Biolase, chartless). Unique pay structure, potential for unlimited income. Will help with relocation. Visit us at www.PerfectSmileDentalCare.com. E-mail resume to dentistwork@gmail.com.

Associate: Colorado Springs, Colo. Associate needed for busy, patient-oriented practice fourdays-a-week. We are a bread and butter practice with complete focus on patient care. All phases of dentistry, including implants and ortho. Extremely wonderful, caring staff entirely dedicated to patients. Candidate must have excellent people and technical skills. Wonderful opportunity with unlimited potential. Fax detailed letter to: 719-635-3574.

Associate Buy-In: Colorado Springs and Denver (Cherry Creek). Please e-mail your resume to *info@ctc-associates.com* or call Larry Chatterley or Susannah Hazelrigg at 303-795-8800.

Associates: Associate positions are available around the state with or without buy-in/buy-out. Please visit our Website, www.ctc-associates.com, to see the current associate opportunities. To apply, please e-mail your resume to info@ctc-associates.com and let us know which location you are applying for and when you are available to start.

Associate: Thornton, Colo. Full-time associate position leading to partnership opportunity. North Washington Dental Group is seeking dynamic, experienced dentist to join our busy four-doctor, fee-for-service practice. For more than 40 years, NWDG has provided high quality modern family dental care to Denver's metro north area. Call 303-452-2053 or fax resume to 303-280-9388.

Associate: Trinidad, Colo. Excellent opportunity with possible future buy-in or buy-out. Please submit resume to welchdental@hotmail.com.

Associate: Great opportunity! Dynamic general sedation dentist needed for a FT associateship





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position in the Ft. Collins area. Dentist must possess comprehensive treatment planning, molar endo., surgical extraction, and leadership capabilities. Potential buy-in for the right individual. Please send resume to *opn-wyd41@yahoo.com* or call 970-685-8299.

Part-time Dentist: Part-time general dentist needed in Boulder Colo. working in a clinic serving the uninsured. Contact 303-665-8228 or *dlewis@dentalaid.org*.

Pediatric Dentist: Pediatric dentist wanted for a not-for-profit clinic serving the underserved and uninsured in Boulder Colo. Contact 303-665-8228 or *dlewis@dentalaid.org*.

Dentist: Full-/part-time dental position at an award-winning private pediatric dental office. A caring person who has a commitment to excellence is needed. Please send CV to *childrensdentalposition@yahoo.com*, attn: Joel.

Dentist: Excellent opportunity for experienced dentist for metro Denver area! Family Dentistry and Orthodontics seeking highly motivated and personable general dentist to join our team in new state-of-the-art beautiful offices located in Denver metro area. We are a private practice servicing all phases of general dentistry and orthodontics. Looking for energetic dentist who has passion for quality and enjoys treating both children and adults. Successful private or group experience preferred. Flexible work schedule and excellent compensation. Future buy-in/partnership opportunities. Inquiries welcome, 303-882-7809. E-mail resume to kolim1004@gmail.com or fax to 303-930-8823.

Dentist: Durango, Colo. Enthusiastic dentist wanted for public health clinic in southwest Colorado. Primary clientele are children and young adults. Position is part-time and student loan repayment is possible. Contact Lynsey for more information, 970-385-4480.

Dentists: Seeking dentist(s) for Interfaith Mission Trip to Nicaragua, June 14-24, 2011. If improving the health of an impoverished population under primitive conditions is what you like/want to do, contact Cathy Goodman at cegood47@aol.com or 303-530-3838.

Dentist: Looking for interim dentist to cover maternity leave for busy dental practice in Stapleton. Must have at least a year's experience. Coverage needed between June and July 2011. Three hygienists and great, helpful staff. Wonderful patient base as well! Contact preetdds@yahoo.com.

Dentist: Southern Colo. Digital x-ray, paperless office looking for a dynamic dentist with two-to-three year's experience, surgical extraction proficiency required, implants a plus. Please fax resume to 866-224-5947 for more information.

Dentist: Mountain Dental is seeking candidates for Colorado Springs. Since 1968, our philosophy of supporting doctors and staff has led to unmatched consistency and paved the way for future growth. Our team is committed to supporting doctors focused on providing optimal patient care. We pride ourselves on providing doctors the ability to practice in a traditional non-HMO practice environment coupled with the flexibility and rewards that a group can offer. Throughout 2010, we will be

working on new opportunities in Colorado Springs. We'd enjoy the opportunity to learn about your practice philosophy along with your career goals and expectations. Please consult our Website at www.midwest-dental.com for more specific background on our support team. For a direct contact, call 715-926-5050 or e-mail development@midwest-dental.com.

Dentists: Denver, Colo. Perfect Teeth is seeking senior dentists in Colorado with a compensation range of \$90,000 to \$200,000+. Successful private or group experience required. Benefit package. Also seeking associate dentists (compensation range \$75,000 to \$95,000). Specialist opportunities also available for partand full-time ortho, endo, oral surgery, pedo and perio with exceptional compensation. Call Dr. Mark Birner at 303-691-0680, e-mail at mbirner@birnerdental.com or visit www.bdms-perfectteeth.com.

Dentists: Denver, Colo. Dental One is opening new offices in the upscale suburbs of Denver. Dental One is unique in that each of our 12 offices in the Denver area has an individual name such as Rock Canyon Dental Care or Heather Park Dental Care in Aurora. All of our offices have top of the line equipment, digital x-rays and intra-oral cameras. We are 100% fee-for-service but take most PPO plans. PPO patients make up 70% of our patient bases. We offer competitive salaries, a complete benefits package and equity buy-in opportunities. To

CLASSIFIEDS continued on page 30

CLASSIFIEDS continued from page 29

learn more about working for Dental One, please call Andy Davis at 602-391-4095.

Dentists: Care for Kids, a pediatric focused practice, is opening new practices in the San Antonio and Houston, TX areas. We are looking for energetic full-time general dentists and pediatric dentists to join our team. We offer a comprehensive compensation and benefits package including medical, life, long- and short-term disability insurance, flexible spending and 401(k) with employer contribution. New graduates and dentists with experience are welcome. Be a part of our outstanding team, providing care for Texas kids. Please contact Anna Robinson at 913-322-1447, e-mail arobinson@amdpi.com or fax to 913-322-1459.

Part-Time Oral Surgeon: Part-time oral surgeon needed to cover four affiliated Bright Now! Dental Offices. Requires experience. Doctor will cover Ft. Collins, Westminster, Longmont and Aurora affiliated dental offices. Schedule will be two-to-three days a week to start, with the possibility of adding additional days. These offices have a fantastic potential to do a substantial amount of production with a large patient base. Help us with our mission to promote Smiles for Everyone. Please visit our Website at www.smilebrands.com/careers or email your resume to sherrie.dean@brightnow.com. A comprehensive benefits package is offered to full-time employees, which includes: medical, vision, life insurance, 401(k), malpractice insurance and in-house CE opportunities. Equal Opportunity Employer.

Dentist: Senior general dentist needed fulltime for this busy Castle Rock Bright Now! Dental office. Requires two years experience, must be comfortable with molar endo treatment and oral surgery. The office is open Monday thru Friday and some Saturdays. This office has fantastic potential to do a substantial amount of production with a large patient base. Help us with our mission to promote "Smiles for Everyone." Please visit our Website at www.smilebrands.com/careers or e-mail your resume to sherrie.dean@brightnow.com. A comprehensive benefits package is offered to full-time employees, which includes: medical, vision, life insurance, 401(k), malpractice insurance and in-house CE opportunities. Equal Opportunity Employer.

Hygienist: Full-time registered dental hygienist needed for new community health center in Rifle. Expanding services to include full dental practice. Require CO license, minimum three-year experience, BLS cert. Bilingual Spanish a must. Comparable salary and very generous benefit package offered. See www.mountainfamily.org. Contact gmillard@mountainfamily.org. EOE.

Hygienist: Our well-established dental practice is looking to hire a full-time(four days a week) dental hygienist. Must have liability insurance, Colorado licensure and local anesthesia certification: nitrous oxide certification is a bonus. We work an alternating four-day-a-week schedule, which means a four-day weekend every other week. We are a digital practice just transitioning to being a paperless office, so Dentrix and digital x-ray experience is preferred. Competitive pay and benefits. We are within minutes of ski resorts, many lakes and Rocky Mountain National Park. This is an amazing place to live and work. Please e-mail resume or any questions to granbydental@gmail.com.

Hygienist: We are an established general dental practice in Denver looking for an experienced hygienist. Must be able to administer local anesthetic and provide scaling and root planing as well as other duties assigned by the practice doctor. Position is part-time and is on a set schedule, but applicant must be willing to work additional days as needed. Please send cover letter, resume and references to <code>bmydds@gmail.com</code>.

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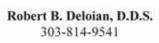
Practice: Colorado Springs, Colo. Established, busy fee-for-service group, one-third partnership. Great staff, location and lifestyle. Easy transition and immediate income. Some owner financing with serious inquiries. grntjcg@aol.com.

Practice: SW Colorado mtn. town. Part-time practice with three ops. Very loyal and appreciative patients. Contact: *swcodentist@vahoo.com*.

Transition Services: If you would like more information on how to sell your practice or bring in an associate, please contact Larry Chatterley or Susannah Hazelrigg with CTC Associates at 303-795-8800 or visit our Website for practice transition information and current practice opportunities, *www.ctc-associates.com*.

Practices: Practice listings along the Front Range in Denver, Lakewood, Lafayette, Parker, Littleton, Highlands Ranch, Centennial, Fort Collins and Colorado Springs. Additional opportunities in the southern, eastern, and southwestern parts of Colorado, as well as in surrounding states. For more information on current practice opportunities, including an overview of each practice, please visit www.ctc-





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Pediatric Practice: Cherry Creek, Colo. Three ops, grossing \$239,000 in 2010. For more information on current practice listings, please visit *www.ctc-associates.com* or call Larry Chatterley or Susannah Hazelrigg at 303-795-8800

Orthodontic Practice: Boulder County, five ops, grossing about \$400,000. For more information on current practice listings, please visit *www.ctc-associates.com* or call Larry Chatterley or Susannah Hazelrigg at 303-795-8800.

Buyer Representation: If you would like more information on buying a practice or associating before a buy-in or buy-out, please call CTC Associates at 303-795-8800 or email <code>info@ctc-associates.com</code>.

Start-up/Practice Management: If you would like more information on doing a scratch start-up or assistance with managing your practice, please call Marie Chatterley at 720-219-4766 or e-mail *marie@ctc-associates.com*.

Practice: Monument, Colo. Start-up fresh! 450 patients! Two and a half days per week and ready to expand! 20-30 NP per month. Excellent marketing, perfect location, amazing facility, five treatment ops., all digital with pano! You capture the competition from day one! Perfect for satellite for relocation in the future. Susan Spear, MPB, Inc., 303-973-2147, e-mail susan@practicebrokers.com.

Practice: Fort Collins, Colo. Collecting \$580,000! Established fee-for-service practice.

Loyal patient base, good location, large facility with lots of extras! Great team! This won't last long! Susan Spear, MPB, Inc., 303-973-2147, e-mail susan@practicebrokers.com.

Pediatric Practice: Eureka, Calif. Did you just finish your residency? Great opportunity for pediatric dentist looking for a quality lifestyle, exceptional income and benefits working in a new, modern pediatric dental office. Revenues of \$1.5M with low overhead. Owner retiring and motivated. Check it out! Susan Spear, MPB, Inc., PC, Inc. of California, 303-973-2147, e-mail susan@practiceconcepts.com.

Practice: Cheyenne, Wyo. Great Opportunity with low investment! Country living with all the benefits of the big city! Own both the practice and office suite in downtown Cheyenne. Good payer mix, hygienist and staff to stay on with the transition. Owner is retiring and motivated. Susan Spear, MPB, Inc., 303-973-2147, e-mail susan@practicebrokers.com.

Practice: Cheyenne, Wyo. Collecting \$490,000! This well-established general dental practice supports the city patient base! Need dentist to open up the NP flow! Owner is retiring and motivated. If you are looking for a small town with the benefits of a big city, Cheyenne is amazing! Susan Spear, MPB, Inc., 303-973-2147, e-mail susan@practicebrokers.com.

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Practice: Aspen, Colo. dental practice. Do you dream of being in the mountains? Excellent four op. office in Aspen. Newly renovated. Great opportunity. Contact AspenDentist@gmail.com.

Practice: Keystone, Colo. At base of mountain. Two ops. collecting \$250,000. Ideal for semi-retired or part-time. Call Jerry Weston, Professional Marketing and Appraisal, 800-632-7155, www.dentaltrans.com.

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Practice: Arvada, Colo. Five ops. in great family area. Collecting \$500,000. Call Jerry Weston, Professional Marketing and Appraisal, 800-632-7155, www.dentaltrans.com.

Practice: Highlands Ranch, Colo. Six ops. in newly remodeled office, collecting \$1.2M. Excellent opportunity. Call Jerry Weston, Professional Marketing and Appraisal, 800-632-7155, www.dentaltrans.com.

Practice: Northglenn, Colo. 12 ops. collecting \$1.8M. Busy, busy office. Call Jerry Weston, Professional Marketing and Appraisal, 800-632-7155, www.dentaltrans.com.

Practice: Montrose, Colo. Five op. practice near hospital. Collecting \$250,000 with 1,800 active patients. Doctor retiring. Call Jerry Weston, Professional Marketing and Appraisal, 303-526-0448. www.dentaltrans.com.

Practices: Professional Marketing and Appraisal, specializing in Colorado practice sales and transitions. Over 20 years of personal attention to the dental profession. Call for current listings. Jerry Weston, Professional Marketing and Appraisal, 800-632-7155, www.dentaltrans.com.

Practice: Greeley, Colo. Exceptional opportunity for a general dentist seeking a quality, fee-for-service practice to purchase after a successful initial employment phase. This premier established practice has a fine reputation in providing comprehensive dentistry to the Greeley community. This practice has a dynamic, experienced team and a strong emphasis on CE and professional growth. Please send your CV in confidence to: The Sletten Group, Inc., 303-699-0990, fax 303-699-4863 or *carrie@lifetransitions.com*.

Practice: Endodontic practice, Central Colorado Springs. Option to purchase building and practice. Good starter practice or satellite. Call Robert B. Deloian, D.D.S., Professional Transition Strategies, 303-814-9541.

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Practices: Central mountains, Colo., grossing close to \$1M/year, four ops. Asking \$845,000. Denver metro area, consistent gross of \$1.2M, est. 25 years, five ops. Asking \$818,000. 100% financing available. Contact ddsseller@gmail.com.

Practice: Excellent opportunity to join or purchase a general practice in northeastern South Dakota. Great hunting and fishing area, excellent school system, small town atmosphere with a large drawing area. General practice performing nearly all aspects of dentistry. Six ops with expansion space. \$1.2M gross. Confidential. E-mail *dentalopportunity@iw.net*.

Practice: San Luis Valley, six ops., annual gross \$773,000, large patient base, loyal staff, good hygiene department, great growth potential. Dave Goldsmith, AFTCO Transition Analysts, 303-304-9067, dgoldsmith@aftco.net.

Practice: Colorado Springs, Colo. High profile, upscale general and prosthetic practice in a desirable location; modern building; new equipment. Well-run with better than average patient flow; aggressive market strategies. Seller to stay, cutting back to one- or two-days a week. Buyer will have immediate 50% shareholder ownership; determined future date of 100% ownership in three years or less. Dave Goldsmith, AFTCO Transition Analysts, 303-304-9067, dgoldsmith@aftco.net.

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Practice: Lafayette, Colo. Premier, fee-forservice general dental practice seeks dentist interested in exceptional purchase opportunity. Owner will assist with quality introduction period to ensure smooth transition. Wonderful patients and growth opportunity with an exceptional dental team. Please reply in confidence with your objectives and Curriculum Vitae to: The Sletten Group, Inc., 303-699-0990, fax 303-699-4863, e-mail *carrie@lifetransitions.com*.

SPACE AVAILABLE

Space Sharing: Pearl Street Dental can space share this lovely facility with the right dental team. Please see our Website at www.pearlstreetdental.com to discover what is available. Ideally, three dental suites are available approximately 20 hours per week. This facility is perfect for someone starting out and wanting to learn how to use surgical microscopes, dental lasers and the newest version of CEREC. Please call Jenny at 303-443-3771 to set up a viewing appointment and meeting.

Space Sharing/Practice Opportunity: Broomfield, Colo. Excellent opportunity for part-time moms! Owner seeking potential future buyer! Be in position to take over current practice base when the time is right! Initially share space two-to-three days per week, relocate or build dream practice! High end facility, four ops., pano, computerized, digital radiography, more! Rent includes lots of extras! Susan, 303-973-2147 or susan@sastransitions.com.

Space Sharing: Space sharing opportunity in newer high tech office near Quincy and Parker overlooking CC Reservoir. Open to arrangements with specialist or GP. Digital x-rays. Five ops. Phone 303-693-7330.

Space Sharing: Denver, Colo. Share expenses – why pay for everything yourself? Seeking

general dentist/specialist wanting to share practice costs without the burden of going solo on expenses. Office totally re-equipped three years ago. Four operatories, each with computer, intra-oral camera, DVD, CD, satellite radio and TV. Digital x-ray, Pan-X, Caesy, Luma bleaching, portable Diagnodent, Harvey, Statim, & Hydrim washer. Software schedules, bills, processes insurance for multiple providers. Private office, consult room, and reception room with large flat screen educational program. Contact Dr. Pavlik, 719-592-0878 or pip@trackerenterprises.com.

Space Sharing: Space share in GP office in Aurora. Six treatment rooms, fully-equipped with latest ergonomic concept, administration support, fully digital office, pleasant professional location. Call 303-369-1069.

Office Space: Dental space available for lease in beautiful growing downtown Windsor, Colo. Approximately 1,800 sq. ft. This space has been a dental office for over 30 years and a great location for a general dentist or a specialty office. Four operatories plumbed and ready to go this summer. Contact Roger Boltz, D.D.S., 970-223-8847, 970-690-8089, or captrboltz@aol.com.

Office Space: Loveland, Colo. Hwy 287 and 29th Street, two suites. #2992, dental surgeon office, 2,221 sq. ft., four operatories, \$4,425/month. #2988, open floor plan, 2,250 sq. ft. available now, \$3,915/month. Call Joe Palieri, 970-215-4713, *ipalieri@comcast.net*.

Office Space: Denver Tech Center/Lone Tree/Highlands Ranch area. Modern dental building in a new business park near Park Meadows Mall. A great location for any specialist or general dentist. Approx. 2,400 sq. ft. Cabinetry, plumbing and electrical in place with central vacuum and air compressor. Contact Ken Andow at 303-908-4442 or kandow@comcast.net.

Office Space: Build/Relocate/Remodel: Foothills Commercial Builders has specialized in building dental offices for more than 20 years in Colorado. Bring us onboard early to help you minimize construction costs by choosing a space that best meets your needs. We promise to go the extra mile to provide you with the highest quality craftsmanship at an exceptional value. See some of our work at www.foothillsbuilders.com or call us at 303-755-5711 x300

Office Space: First floor office with five operatory suites located in central Greeley. All plumbing, nitrous lines, computer lines and cabinetry are in place, along with sterilization room and lab space. Call 970-356-5151.

Office Space: Centennial, Colo. Ortho/pedo space for lease. 1,800 sq. ft. plumbed for five open-bay ops. Located across from Newton Middle School on the busy corner of Arapahoe and Colorado. Approx. one mile from new Streets of Southglenn development. General dentist located in the same building. 303-221-3044 or irene@ButtermanDental.com.

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For Sale: 2004 ASI Ergo 4 Dual Cart, model #2202E. Asking \$4,000. Pick-up only, located in Edwards, Colo.. Please call Shaya, 970-569-3074

For Sale: 2006 ASI Ergo Elite Drawer/Door system, model #2133E/R. Asking \$3,000. Pick-up only, Edwards, Colo.. Please call Shaya, 970-569-3074.

For Sale: Compressor, duel head 2 hp, quiet and smooth running, 110/220v. Rebuilt, then stored for a satellite that never materialized. \$1,300 OBO. 970-988-2755, cotoothdoc@aol.com.

For Sale: Two antique dental cabinets and a lab workbench – '20s vintage. Refinished oak with all crystal knobs and glass – excellent condition! 1. 32Wx14Dx62H; 2. 37Wx13Dx54H;

\$1,700 each. WB 37Wx16Dx43H, bench 38H; \$700. 970-988-2755 or cotoothdoc@aol.com.

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Service: Concerned Colorado Dentists (CCD) is a subcommittee of the Colorado Dental Association. We are in existence to help colleagues, staff and/or families who think they may have a problem with substance abuse. If you think you or someone you know may have a problem, please call Dr. Michael Ford at 303-810-4475 (day or night). All inquiries are kept confidential.

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