

Dentists' Quarterly

December 2023

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The 2024 Greater New York Dental Meeting, held at the Javits Center.



PRESIDENT'S MESSAGE

REFLECTIONS ON 2023

Mina C. Kim, DDS

Every time I try a new restaurant, I am reminded that there is no place like New York! In the dental world, NYC is one of the largest components of the American Dental Association, so we need to set great examples for our profession.

Along with our colleagues at the Second District Dental Society (Brooklyn and Staten Island), we host the Greater New York Dental Meeting (GNYDM). Next year, we will celebrate the theme of 100 years of greatness and gratitude led by our incoming chair, Dr. John Young. We have overcome many challenges in those 100 years, including COVID, yet we continue to flourish.

This year, the GNYDM had over 36,000 attendees, including 13,000 dentists from all around the world. Dignitaries including President Linda Edgar, President Elect Brett Kessler, our ADA Trustee Brendon Dowd, NYSDA President Elect Prabha Krishnan and NYSDA Executive Director Greg Hill all participated. My favorite part of this meeting is not only meeting new friends, but reconnecting with my long-time friends from Columbia. It's part of what makes this meeting so special.

I am also incredibly proud of our 2000+ talented and diverse dentist members who who are in private practice, large group practices, academia, community

(continued on page 3)

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Continuing 1011

Essential Information Technology for Dentists and Their Teams

Mitchell Rubinstein, DMD

Education Director



It has been a tough few months. The disastrous, multiple and ongoing cyberattacks against Henry Schein have led to a heightened awareness of the dental profession's increasing vulnerability to hackers, ransomware and data loss. Whether you're a solo practitioner, a large group practice or a billion-dollar corporation, we are more connected, and more exposed than ever before. Dentistry is no longer just the "tooth business," the "smile business," or the "health business." In 2024, dentistry is also the information business. Information is the lifeblood of our profession, and there is still much for us to learn

On Wednesday, February 28th, 2024, I would like to invite you all to join me for a new half day technology course here at NYCDS called "Hacking Dentistry: Essential HIPAA, Cybersecurity and Technology Tools for your Practice."

This course will help you better protect your patients and your practice (and yourself) from cyber-attacks, and it will give you critical knowledge needed to evaluate new I.T. options. You and your team will learn how to get the most out of your technology resources without wasting valuable time and money. In addition to 3 CE credits, this course also qualifies as your mandatory yearly HIPAA compliance update for you and your staff, so bring them along.

In caring for our patients, we collect, generate and communicate massive amounts of information, and managing it all is complicated. The technology is changing rapidly, as are the opportunities and threats that surround it. Protecting this information from being misused is essential if we are to maximize our clinical results, and organizing it effectively is essential for us to maximize our business outcomes. A fluency in Healthcare Information Technology is no longer an option. It is an integral part of our responsibility as clinicians.

Dentists have more technology options now than ever before, including some that were previously too expensive or too complex for a dentist in private practice to even consider. How can you tell what is worth spending your money on, and what is just an expensive waste of time?

This course evolved over several years from many of the interactions I've had with dentists across New York, in my role as chair of NYSDA's Information Technology Committee. As we have helped many of our colleagues cope with "information overload" and the cyber threats we all now face, we have seen many practices make some of the same missteps time and time again. I would like to help you prevent some of them. In this jam packed three hours I will break it all down for you, and give you a list of important questions for you to consider when evaluating your options. The course will also be priced at only \$99, because we want to make this critical information accessible to everyone, regardless of what stage you are at in your career. I hope to see you there!

The education of a doctor is never "finished." That's why we maintain a robust continuing education program. It has been my honor to lead this program for the past six years, and it is my great pleasure to welcome Dr. Irvind Khurana, who will take over in January '24 as our new education director and lead the program into the future. Whether you graduated three years ago or 30 years ago, the skills and knowledge required to practice dentistry are in a constant state of change. Under Dr. Khurana's guidance, the Henry Spenadel Continuing Education Program will be here to help you stay ahead of the game.

Thank you Dr. Rubinstein for your years of service as Continuing Education Director.

President's Message continued from page 1

health and more. This year we had increased member engagement, and I encourage even more of you to get involved next year.

Here are some recent highlights:

- Membership Meeting honoring Past President Lois Jackson and Dr. John Calamia
- NYU Mentorship Event with over 80 dentists and students, led by Dr. David Shipper
- Special Olympics Event with over 50 Special Smiles volunteers, led by Dr. Anna Viron and myself
- New Dentist Committee Real Estate Event with Daniel Lee of Compass, chaired by Dr. Greg Shank

In addition to celebrating our wins, please remember that the holidays can be a difficult for many, especially in recent times. Let us practice kindness and empathy and remember those who are less fortunate. Remember to check in with your friends, family and neighbors. I look forward to supporting our incoming president, Suchie Chawla, President-Elect Vera Tang, Vice President Andrew Deutch, Secretary Egidio Farone, and Treasurer Jaskaran Randhawa. I wish everyone a happy holiday season and will see everyone in 2024!



Special thanks to the more than 50 volunteers who came to Special Olympics Special Smiles on December 2nd to bring healthy smiles and dental education to the many athletes who participated in the Olympics. It was a remarkable year for Community Outreach Chair Anna Viron and President Mina Kim who led volunteers in an unprecedented three Special Olympics events in 2023, impacting so many lives for the better!



Give Kids (and Yourself) A Smile! 2/2/24 / 7:30 am - 12:30 pm

Help provide dental screenings and fluoride treatment to underserved children in East Harlem. We've had a great response from volunteers but we can use a few more dentists! Email singoglia@nycdentalsociety.org today if you can volunteer.

VOLUNTEER

HENRY SPENADEL CONTINUING EDUCATION PROGRAM

Upcoming Courses

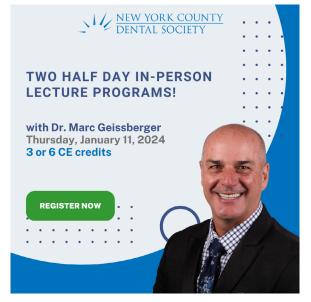
For more information and to register, please click the links below.

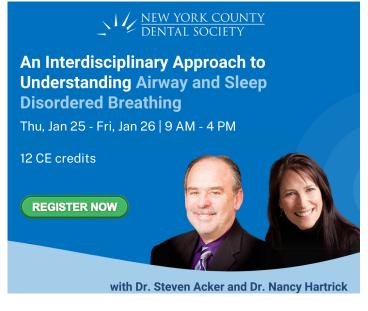
01/11 9:30 AM - 4:30 PM	Why are my teeth getting so short & Treatment Planning	Dr. Marc Geissberger
1/17 9:30 AM - 12:30 PM	Covid & Oral Care: Why It Matters	Dr. Amy Dukoff
01/17 6:00 PM - 7:00 PM	ACD Mentoring Lecture Program:	Dr. Stacey Spizuoco and
	How to Treat Rare Cases *	Dr. Mina Kim
01/17 7:00 PM - 8:00 PM	HR Management Documentation for Dental Practices*	Dennis Alessi and Brent Pohlman
01/24 6:30 PM - 9:30 PM	Mandatory Prescriber DEA Education Renewal for	Dr. Marc Gottlieb
	Licensed Dentists*	
01/25 9:00 AM - 4:00 PM	An Interdisciplinary Approach to Understanding Airway	Dr. Steven Acker and
01/26 9:00 AM - 4:00 PM	and Sleep Disordered Breathing (Two Days)	Dr. Nancy Hartrick
02/15 8:30 AM - 5:00 PM	12 Hour Sedation Certificate Renewal Day 1	Dr. Marc Gottlieb
02/16 9:00 AM - 1:30 PM	12 Hour Sedation Certificate Renewal Day 2	Dr. Marc Gottlieb
01/17 6:00 PM - 7:00 PM	ACD Mentoring Lecture Program:	Dr. David Shipper
	Mentorship Forum*	Dr. Guy Minoli
02/21 9:30 AM - 1:30 PM	Basic Life Support/CPR Certification Course	Marc Reilly, Rescue Resuscitation Inc.
02/28 9:00 AM - 12:30 PM	Hacking Dentistry: Essential HIPAA, Cybersecurity and	Dr. Mitchell Rubinstein
	Technology Tools for your Practice	
02/28 7:00 PM - 9:00 PM	OSHA-Mandated Update for Dentists and Staff;	Dr. Peter Mychajliw
	What You Need to Know to Comply with the Law*	
03/01 9:00 AM - 1:00 PM	If You Do Composites Correctly, You Can Do	Dr. Jeffrey Hoos
	Full-Mouth Reconstruction!	
03/06 9:00 AM - 1:00 PM	Infection Control for the Dental Practice	Dr. Peter Mychajliw
03/08 9:00 AM - 1:00 PM	Orofacial Myofunctional Therapy and Orthodontic	Dana Hockenbury and
	Intervention: A Hands-On Approach	Judith Dember-Paige
03/13 8:30 AM - 4:30 PM	Speed Learning: 6 Speakers, 6 Hours, 6 Credits	TBD
03/15 9:00 AM - 5:00 PM	Beginning With the End in Mind: Restoratively	Dr. Stephanie Tran
	Driven Endodontics from Access to Restoration	
03/22 9:30 AM - 3:30 PM	Occlusion Knowledge to Fuel Your Dental Practice	Dr. Jay Harris Levy

^{* =} virtual course

New courses are added regularly so be sure to visit www.nycdentalsociety.org for the latest course schedule.

Two Special Courses with Renowned Speakers





NYCDS HAPPENINGS

7th Annual NYCDS Charity Golf Outing

NYCDS held its 7th Annual Charity Golf Outing on Sept. 27th at the beautiful Metropolis Country Club in White Plains. The event was well-attended by more than 50 golfers and approximately 20 additional people attended the cocktail hour and dinner. The weather was ideal on the cool side – but the golf gods were with us as it rained on the days before the outing and then again after. The course is top-notch and the golf itself was great but, unfortunately, no one succeeded in the hole-in-one or putting contests. Special thanks go to all of our sponsors including Henry Schein Dental, Brasseler, Air Techniques, Craig Recruitment, Epstein Practice Brokerage, LLM Dental Associates, Bryant Park Dental Associates, Designs For Vision, PKF O'Connor Davies, The National Dental Law Group at Mandelbaum Barrett, and Cayster; with their support over \$10,000 was raised for our beneficiary, Special Olympics - New York. A splendid time was guaranteed for all – and that's exactly what everyone had! Many thanks to Golf Chair David Special Olympic athlete Steve Foley (center) on the links with (left Shipper for his dedication to this event.



to right) former President and Golf Chair David Shipper, former President James Jacobs, Board Member Robert Sorin, and Dr. Jason Alster.

New York County Dental Society/Second District Dental Society Fishing Trip

NYCDS Secretary Andrew Deutch, an avid fisherman, organized a party-boat fishing trip in Sheepshead Bay Brooklyn on October 2nd to bring members from both the New York County and Second District components together. It was the first event of its kind for both organizations but it won't be the last. According to Dr. Deutch "The fishing trip was a huge success! The weather and crowd were great. We had many members from both NYCDS and the SDDS participate. We are definitely going to look into doing this again!"



Just some of the 60 members and guests who participated in the first NYCDS/SDDS fishing outing on October 2.



NYCDS Treasurer Egidio Farone holding his catch of the day with Board Member Jaskaren Randhawa observing.



Golf Chair David Shipper with NYCDS President Mina Kim at the start of the 7th Annual Charity Golf Outing on September 27th. Golf Committee member Haemin Chin is at the check-in table in the background.

COMPASS COMPASS COMPASS

Board Members Michelle Lee (left) and JoAnna Pufnock, Danny Lee with Compass Real Estate, New Dentist Chair Greg Shank, and President Mina Kim.

New Dentist Real Estate Event Raises (& Answers) Questions

The New Dentist program on Buving Your First Home in NYC on December 5th provided attendees with insights into the unique aspects of buying real estate in the city. Realtors Danny Kim and Renee Lee with Compass Real Estate, and Senior Loan Officer David Ostrowsky with Cross County Countrywide Mortgage, hosted the event. The program walked members through the intricacies of the NYC real estate market and demystified the mortgage lending process. Each offered their perspective on the buying process and addressed the competing challenges many new dentists face in light of competing demands to pay off student debt and/or having a business mortgage. The discussion prompted numerous questions from attendees which benefitted everyone. Many thanks to President Mina Kim for her role in making this event a success!

NYCDS HAPPENINGS

New Dentists Learn to Address and Prevent Physical Stressors

Dentists are especially prone to musculoskeletal disorders that occur from long hours spent chairside, repetitive movements and grips, and prolonged static postures that stress certain muscles and soft tissues. With this in mind, the New Dentist Committee invited physical therapist, Dr. Melanie Rocchio, to help members learn how to alleviate some of the physical stresses and strains dentists face on a daily basis. The November 1st wellness program *Dental Ergonomics: Maximize Your Productiv*-

ity & Comfort was a special opportunity to hear from a physical therapist about the importance of addressing the physical aspects of dentistry that can significantly impact the ability to practice without pain now and for years to come.

Jessie Resig, a member of the New Dentist Committee, was instrumental in having Dr. Rocchio lecture at NYCDS. After the program, Dr. Reisig noted that "It is so important to address prevention and treatment of the musculoskeletal issues we (as dentists) are predisposed to from our work. Dr. Rocchio, enlightened us with information on anatomy, diagnosis, prevention, and treatment of these issues. It was awesome to have an interactive course including a simple stretching program to add to a daily routine for our own health, so we can continue to care for the health of our patients."

The committee is looking forward to its first program of 2024 on January 18, <u>Money Matters for New Dentists: Personal Finance and Accounting for Employees, Independent Contractors, and Owners.</u>



New Dentists demonstrating one of several stretches they learned at the November 1st wellness program on dental ergonomics.



The fall NYU Mixer was a great success, allowing students to connect with experienced members. Pictured are (left to right) students Danielle Mark and Sam Al Safaralani, Membership Chair and Past President David Shipper, Immediate Past President Ioanna Mentzelopoulou, Becca Gilbert, and Vice President/NYU Professor Vera Tang.

Second Fall NYU Mixer at NYCDS

On November 16th, NYCDS, in conjunction with the NYUCD Alumni Affairs, hosted a networking event for the dental students from NYUCD. Approximately sixty dental students and twenty member dentists spent almost three hours together discussing real world dentistry. The students picked the brains of the dentists regarding their experiences with residency, associateships, starting a practice, patient relations, and much more. Every dental specialty was represented and students from all four classes were in attendance. At the end of the evening, many prizes were raffled off to the students, including products from Brasseler, Voco, 3M, ACA Dental, and Ultradent, plus a gift certificate toward a pair of Surgitel loupes. The students garnered a wealth of information from the dentists, and the dentists found the experience to be very rewarding by paying it forward to the future generation of the dental profession. A similar event is being planned for the Columbia dental students in the near future. Many thanks to Membership Chair David Shipper for his role in organizing this event.

Resident Recruitment Outreach

Thanks to the support of an ADA ARC grant, NYCDS leadership made resident recruitment a priority, hosting several events this year. Former President and Membership Chair David Shipper, and current President Mina Kim met with Columbia University residents; former President Ioanna Mentzelopoulou and Vice President Vera Tang met with NYU residents; and Secretary Andrew Deutch connected with Weill Cornell Hospital residents. They collectively signed up over 60 residents as members of the ADA. Looks to us that their efforts are working!



New York-Presbyterian Hospital/Weill Cornell University Medical Center residents took time to hear first-hand about the importance of ADA involvement.

NOVEMBER GENERAL MEMBERSHIP MEETING

Dr. John Calamia Reflects on the Evolution of his Career/Veneers

technology."



(left to right) CE Director Mitchell Rubinstein, Board Member Robert Sorin, Immediate Past President Ioanna Mentzelopoulou, and Board Member Michelle Lee (represented by President Mina Kim) were recognized for their service to NYCDS.

NYU College of Dentistry students with President-Elect Suchie Chawla and NYSDA President-Elect Prabha Krishnan at the November meeting.

their spouses are all graduates of NYU Dentistry. Dr. Calamia is a full professor and director of aesthetic dentistry for the Department of Cariology and Comprehensive Care, New York University College of Dentistry. He has taught restorative dentistry and dental material science at NYU Dental Center for 43 years and is recognized both nationally and internationally

Two other members were recognized at the meeting. NYSDA Trustee and former NYCDS President Lois A. Jackson received the Mark Mintzer Award for Service in recognition of her deep commitment and exemplary service to the New York

as co-developer of the "etched porcelain laminate veneer

At the November 6th meeting, Dr. John R. Calamia received the Society's highest honor, the Henry Spenadel Award for significant contributions to the advancement of dentistry for his pioneering role in the advancement of porcelain bonded veneers as the gold standard for restorations. Affectionately called "the Godfather of Veneers," Dr. Calamia's lecture focused on "Etched Porcelain Restorations Aesthetics and Longevity!" which covered the history of the etched porcelain bonded restoration of teeth, showing cases that have easily survived more than 20 years of service, with many successful 40 years later.

One of Dr. Calamia's earliest patients, highlighted in his presentation, went to great lengths to attend the lecture to say a few words and show her appreciation to him. Dr. Calamia shared the cover of the *The New York Dental Journal* (a pre-cursor to *Dentists' Quarterly*) from 1983 which featured an article he wrote introducing etched bonded porcelain veneers as a new treatment modality, as well as an article on the Henry Spenadel Award recipient that year. In an interesting twist, 40 years later Dr. Calamia is the Henry Spenadel Award recipient delivering his lecture on the origins, advancements and paradigm shifts that have allowed porcelain bonded restorations to be the "goto" treatment for reconstruction of dentition.

Dr. Calamia generously shared copies of his helpful NYU Smile Evaluation Form which serves as an adjunct to providing a simple evaluation of patients' aesthetic needs, in a succinct manner, allowing rapid treatment planning and easy patient acceptance. He reflected on his personal journey to becoming a dentist first as a foreign-trained dentist in the Philippines and eventually as a graduate of NYU College of Dentistry and how it shaped his life. His late wife, two children, and





Henry Spenadel Award recipient Dr. John R. Calamia with his daughter, Dr. Christina Calamia-Levitsky, pause for a hug after his lecture.

NOVEMBER GENERAL MEMBERSHIP MEETING

County Dental Society, including serving as acting president of NYCDS during the challenging year of 2020 prior to assuming the role of president in 2021, her many contributions to the profession, and nurturing the next generation of dentists. Dr. Mitchell Rubinstein was recognized for his leadership as NYCDS Director of Continuing Education from 2018-2023. Prior to Dr. Calamia's lecture, NYSDA's President-Elect Prabha Krishnan addressed members and spoke about her goals for NYSDA and its members in the year ahead.

In other matters, the 2024 officers approved by members to serve with President Suchie Chawla are: President-Elect Vera W. L. Tang, Vice President Andrew S. Deutch, Secretary Egidio A. Farone, and Treasurer Jaskaren Randhawa. Gary Nord and Whitney Mostafiz-Levinson will join the Board of Directors,



(left to right) Former President Kenneth Cooperman, members Bianca Frederick and Mahua Bose, Immediate Past President Ioanna Mentzelopoulou, Incoming Board Member Gary Nord, and Treasurer Egidio Farone.



Board Member Guy Minoli (center), a past and current attending supervisor of the General Practice Dental Residency Program at New York-Presbyterian Hospital/Weill Cornell University Medical Center connecting with several of his residents.

and Marsha Rubin and Evan Schwartz will serve as alternate directors. By-law changes clarifying eligibility and length of service for committees was approved.

Much appreciation to MLMIC Insurance Co. and Univet for their sponsorship of this meeting.



Mark Mintzer Award recipeint Dr. Lois A. Jackson, surrounded by Awards Committee Chair Richard Rausch and President Mina Kim.

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Of Professional

Addressing Sleep-Related Breathing Disorders

Dentistry's role in a multidisciplinary treatment network

Steven R. Acker, DDS, MS | Nancy Hartrick, DDS





Kois Center experts, Dr. Steven Acker and Dr. Nancy Hartick, are presenting a special two-day seminar on An Interdisciplinary Approach to Understanding Airway and Sleep Disordered Breathing at NYCDS on January 25th and 26th (see page 4 for more information and to register.) In light of the upcoming seminar, we are sharing the article below written by Drs. Acker and Hartick, reprinted from Dentistry Today.

 $extbf{IVI}$ aintaining health and wellness is an $ext{ important goal for}$ many people. With an increased understanding of the relationship between oral and systemic health, it has become apparent that the dental profession plays a significant role in this area. A primary responsibility of dental practitioners is to educate patients about treatment in a manner that enables them to make the best choices to improve their quality of life. Relationships between oral and systemic health are multifactorial. Sleep-related breathing disorders (SRBDs) are conditions that are highly influenced by these relationships. SRBD is an inclusive term associated with snoring, breathing-related sleep disorders, upper airway resistance syndrome, and obstructive sleep apnea (OSA).2 Although all of these are linked to disruptions in normal breathing patterns, some may lead to chronic illness, and others may affect physical growth as well as cognitive and behavioral development.

Increased Focus on SRBDs

There has been much discussion in the public domain about OSA. During the past few years, it has been given more attention by the mainstream media following the loss of actress Carrie Fisher and former Associate Justice of the Supreme Court Antonin Scalia, whose deaths were both linked to complications related to OSA. The fatal rail accidents in the New York area that occurred on the Metro North in 2013 and in the Hoboken Terminal in 2016 also drew public attention. The engineers of the trains involved in both of these accidents suffered from OSA, and excessive daytime sleepiness is one of the common comorbid medical conditions associated with the diagnosis. Attention deficit hyperactivity disorder (ADHD), allergies, and crowded teeth are among the many modern-day afflictions interfering with the healthy development of children. When left untreated, SRBDs can be closely related to these conditions.3

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The Role of Dentistry

Dentists are in a unique position to help people of all ages who have been impacted by this far too common disorder, participating in both the identification and care of affected patients. In October 2017, the American Dental Association (ADA), published their proposed policy statement on the role of dentistry in the treatment of SRBDs.4 The statement established dentistry's critical position in this multidisciplinary field, including outlining the dentist's responsibilities regarding treatment and staying current with related continuing education. From proper clinical screening and the provision of age-appropriate questionnaires for risk assessment and treatment recommendations to the alleviation of symptoms and the management of care, dentists are a key part of the patient healthcare team. In younger, growing patients, dentists have even more opportunity to relieve and even reverse the damage from SRBDs by working with habit correction and aiding in the development of normal airways.

Airway Patency

SRBDs are related to the collapsibility of the upper airway, which can result in decreased air flow. Various intrinsic and extrinsic factors can affect the collapsibility of the airway, including muscle tone, reflex responses, tissue inflammation, and even sleep position. Mechanosensory receptors in the upper airway respond to changes in airway pressure, airflow, temperature, and upper airway muscle tone. When they sense a disruption in airflow or a reduction in breathing accompanied by a decrease in oxygen levels and an increase in carbon dioxide levels, they send a signal to the brain (ie, cerebellum), triggering the sympathetic nervous system to create a protective arousal that disturbs the normal cycles of sleep.⁵ This protective arousal returns the patient to normal breathing, but it is a compensatory measure, not the sign of a healthy airway.

When airway issues are chronic, the receptors in the cerebellum become exhausted over time, resulting in a reduced response or no response to the reduction in airflow—a situation with potentially dire consequences. When the sympathetic nervous system is triggered, the arousal is accompanied by an increase in cortisol levels via the hypothalamic-pituitaryadrenal axis. Cortisol release increases stress on the heart and other systems, which can also increase levels of inflammation in the body. Chronic heightened cortisol levels increase the risk of heart attack and stroke as well as a host of other comorbid conditions, including cardiac arrhythmias, hypertension, nocturnal bruxism, ADHD, anxiety and depression, and erectile dysfunction.

Screening and Data Collection

The airway health of patients needs to be maintained while they are both asleep and awake. To achieve this, diagnosis and treatment must be focused on structure (ie, the size of the airway) (Figure 1), function (ie, the stability of the airway) (Figure 2 and Figure 3), and behavior (ie, the mode of breathing). Identifying compromises and developing a mode of action requires a system for screening, data collection, risk assessment, and diagnosis. Screening can be accomplished through the use of pediatric and adult questionnaires in combination with specific clinical evaluations to help identify patients at risk who require further data collection.⁶

For patients identified as at-risk, data collection with more extensive clinical examination and measurements, including photography, videos, and objective tools, can be utilized. Devices such as cone-beam computed tomography (CBCT) scanners (Figure 4 and Figure 5) and high-resolution pulse oximeters (HRPO) are helpful data collection tools to aid in screening for patients with compromised airways. Once these patients have been identified, the dentist may refer them to a physician for an official diagnosis and, depending on their age and condition, further treatment. Dentists are in a position to take the lead in an active network of healthcare professionals to help treat and manage this large and growing public health concern. Dental health professionals are at the forefront because they are uniquely trained to assess the oral, perioral, and facial structures as well as to recognize and treat airway issues before the onset of OSA occurs.

Considerations for Treatment

Although a diagnosis of sleep apnea must be made by a physician, dentists and their teams can be trained to manage many of the related structural, functional, and behavioral issues. Following risk assessment and diagnosis, treatment options can be discussed and employed. Some may require the help and teamwork of other healthcare professionals, but others can be initiated within the dental office. Basically, the earlier the intervention, the higher the chances for successful resolution and the lower the chances for serious, life-altering compensations.

As specified in the proposed ADA policy statement, among older patients diagnosed with OSA, oral appliance therapy is appropriate treatment for mild and moderate cases as well as for severe cases when continuous positive airway pressure therapy is not well-tolerated by the patient.⁴ For younger patients with OSA, there are often more treatment options. Functional appliances can be used in combination with myofunctional therapy to guide the growth of the maxilla and mandible, creating healthy and properly functioning airways. Many of these therapies have the potential to prevent or even reverse some of the growth and developmental and/or behavioral and learning challenges that are more often seen among children today. There is considerable literature supporting the idea that many of the cases and symptoms of ADHD in children are associated with breathing and airway issues. Treatment to ensure the proper development and function of the airway can often eliminate the symptoms of ADHD.8 Children must be able to breathe nasally, seal their lips at rest, and maintain proper tongue position and function.

Nasal breathing stimulates the production of nitric oxide. This chemical is produced in the paranasal sinuses and only during nasal breathing. It is a stimulant to the parasympathetic nervous system, which is essential for proper function of both the cardiovascular and central nervous systems. In addition to being a potent vasodilator, it also has antimicrobial properties.

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Fig. 2

Fig. 1



Fig. 3



(1.) Size of oral cavity affected by craniofacial development, demonstrated by severe crowding of teeth. (2.) Anterior open bite and bilateral posterior crossbite resulting from soft-tissue dysfunction and improper tongue positioning. (3.) Dimpling in the center of the tongue indicating submucosal tongue-tie, which was the etiology of the conditions presented in Figure 2.

Constant mouth breathing causes inflammation to the tonsils, adenoids, and other oral tissues due to a lack of nasal filtration. The nose is the filter for the air during breathing because it helps eliminate the passage of viruses, bacteria, fungi, and environmental irritants into the airway.

From infancy, the proper rest position of the tongue is on the palate. This position leads to proper facial development. The tongue constantly applies light forces on the palate, allowing for the formation of a wide and properly contoured maxilla. The maxilla is the scaffold for the facial structures and affects the width of the nasal passages. Proper development of these structures is integral to airway formation. The mandible has a higher probability of developing normally if the maxillary anatomy develops normally. In clinical screening for airway and breathing disorders, the presence of a high palatal vault from tongue positioning is a red flag potentially indicating abnormal airway development. This can result when the tongue rests too low in the mouth, which may be due to a tongue-tie (ie, ankyloglossia) or compensation. Among children, additional red flags include open mouth posture, dry mouth, chapped lips, nasal congestion, and snoring. Early intervention is critical and may save a child from developing into an unhealthy adult with OSA and other potential comorbidities. Long before reaching the level of airway collapse associated with the development of OSA, a patient goes through a period in which the airway becomes too small, partially collapses, or has turbulent airflow, making breathing and the proper exchange of oxygen and carbon dioxide difficult.

Screening adults and children for airway and breathing disorders should be a primary focus of dental professionals as well as properly treating pediatric patients so they can experience normal breathing and airway development. Dentists have the responsibility to screen for airway and breathing disorders as well as to collect data, assess risk, refer for diagnosis, provide treatment, and develop a means to assess results. After treatment, subjective follow-up assessments (ie, how the patient feels) and objective measurements (eg, HRPO or sleep test) should be used to determine the efficacy of treatment.

A Multidisciplinary Network

Multidisciplinary care from a network of health professionals who possess a full understanding of airway development and breathing is necessary to help minimize the potential of diseases and conditions that can result from improper breathing. Approximately 158 million adults aged 25 years and older suffer from sleep apnea, and more than 10 million US men and women with the disorder currently go untreated.⁹

There are many health professionals who are qualified to form this network and help our community of patients with breathing and airway issues, including the following:

- Restorative dentists
- Pediatric dentists
- Orthodontists
- Oral Surgeons
- Ear, nose, and throat specialists
- Myofunctional therapists
- Respiratory physiologists
- Pediatricians
- Sleep physicians
- Primary care physicians
- Craniosacral therapists
- Chiropractors
- Lactation consultants
- Neurologists
- Pulmonologists
- Cardiologists

The goal of dental practices and this network at large is to establish an algorithm for the diagnosis, management, and desired resolution of breathing and airway issues for patients. This is a multidisciplinary approach that involves individualized care. In many cases, the restorative or pediatric dentist is in the unique position of being the first healthcare professional to see and evaluate patients for breathing and airway-related issues.

In 2019, the message for the dental profession is that the focus on airway and breathing disorders needs to go far beyond the treatment of OSA. This is a health concern with vast ramifications that are just now becoming well understood. Airway and breathing disorders are a life-changing issue for many patients, and the dental profession has the ability to intervene and improve the health and wellness of our communities and our country.

(4.) Axial view reconstruction of CBCT scan showing volume of the airway and related structures. (5.) Front view of CBCT scan showing other upper airway structures, including the nasal passages, sinuses, and the transverse widths of the maxilla and mandible.



Fig. 4

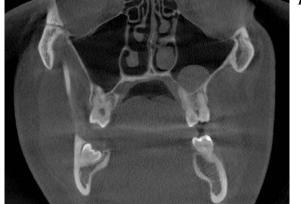


Fig. 5

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Presal Side

Disability Accessibility For Your Dental Website Is Crucial

Dental practices and their websites are not immune from the ADA's accessibility mandates

William Barrett, Esq.

CEO, Mandelbaum Barrett PC



Bill Barrett is the CEO of the full-service law firm Mandelbaum Barrett PC, co-chair of the firm's National Dental Law Group, and an unparalleled dental dealmaker who has successfully closed hundreds of transactions nationwide. With two best-selling books, "Pain Free Dental Deals" and "The DSO Decision: Winning Answer from Every Angle," Bill's expertise extends beyond the written word, as he is also a nationally recognized speaker for events and dental study clubs throughout the country. Mandelbaum Barrett PC is a Corporate Friend of NYCDS.

Consumers increasingly rely on websites as their primary means to access information, programs, and services from virtually every industry, including dental practices. An inviting and well-crafted website can enhance a dentist's new patient referrals. It typically provides the practice's contact information, professional backgrounds, a description of services offered, what insurance types are accepted, and patient testimonials. Dental practice websites also frequently include fillable forms and portals for scheduling appointments. Some dental practice websites also have explanatory videos about the practice's services.

But what happens when these features on a dental practice's website are inaccessible to prospective patients with visual, hearing, or other disabling impairments? Under such circumstances, the dentist likely will lose new patient opportunities. More importantly, it risks exposure to civil liability for disability discrimination under the Americans with Disabilities Act (ADA). This broad federal civil rights statute prohibits discrimination based on physical or mental impairments.

In recent years, thousands of lawsuits have been filed nation-wide against businesses by private plaintiffs alleging that they were unlawfully discriminated against under the ADA because the businesses' website features posed barriers to disabled individuals' equal access to services, programs, and other benefits offered on the businesses. Many of these lawsuits are filed by "testers," who regularly test the accessibility of the websites of private and non-profit companies and file suit even if they have no intention of utilizing the business' services. Usually, such suits arise in the context of websites that are incompatible with screen reader software or do not have video-closed captioning.

Similarly, the Department of Justice (DOJ), the lead federal agency that administers and enforces the ADA on behalf of the U.S. government, has entered into almost 200 settlements with government and private organizations alike that failed to include accessible information and communication technology (ICT) on their websites and mobile apps. For example, in 2021, the DOJ secured an agreement from Rite Aid Corporation to make its online COVID-19 vaccine registration portal accessible to individuals with disabilities.

Dental Practices and their Websites are Places of Public Accommodation Under the ADA

Dental practices and their websites are not immune from the ADA's accessibility mandates because they are places of "public accommodation" under Title III of the ADA. Public accommodations are private and nonprofit businesses that are either (1) open to the public or (2) offer goods and services to the public, regardless of whether they receive federal funds.

The DOJ has long taken the position that, even though the ADA does not explicitly mention the Internet or ICT, its accessibility requirements extend to the website content of public accommodation. Thus, dental practices and their websites must provide disabled persons full and equal enjoyment of their services, facilities, privileges, advantages, etc. To accomplish this mandate, practices must ensure that they provide (1) reasonable modifications of policies, practices, and procedures, (2) "effective communication," and (3) accessible facilities.

Although private plaintiffs cannot obtain monetary damages in website accessibility suits and are limited to prospective injunctive relief, defending such lawsuits is expensive. Notably, plaintiffs who prevail on their discrimination claims may also apply to the court for an award of their attorney's fees to be paid by the public accommodation, further adding to a dental practice's litigation costs.

Courts have struggled with determining what website features must be accessible under the ADA because the DOJ has not issued specific standards for public accommodations. Instead, the DOJ recommends that public accommodations refer to existing voluntary technical standards outlined in the Web Content Accessibility Guidelines (WCAG) created by the World Wide Web Consortium (W3C) and the Section 508 Standards. The federal government uses these standards to develop its websites.

An ADA-compliant website design should include, among other accessible features, text alternatives to describe the purpose of images, graphs, and illustrations, captions on videos, and incorporate compatible assistive technology such as screen reader software, refreshable Braille displays, and keyboard navigation.

A dental practice can proactively deter exposure to legal action by performing an accessibility audit on its website using manual testing and automated ADA compliance checker tools such as those listed on <u>W3C's website</u>. Compliance review should take place when new content is added. Website accessibility helps a dental practice reach the broadest possible patient base. It also ensures that the practice's patients can easily obtain the information they need from the practice, thereby strengthening long-term patient retention.

Meet Your Officers



Suchie Chawla, DDS, MD, president, is a board-certified Oral & Maxillofacial Surgeon practicing in Manhattan. Dr. Chawla received her Doctor of Dental Surgery degree from New York University College of Dentistry and her Doctor of Medicine degree from Mount Sinai School of Medicine. She completed her Oral & Maxillofacial

Surgery training and General Surgery internship at Mount Sinai Hospital Center in NYC. She has continued on as faculty at Mount Sinai as a clinical instructor for the OMS residency since 2007. In addition, she is a voluntary attending at New York Presbyterian/Cornell Medical Center. Dr. Chawla has taught dental ethics at both New York University College of Dentistry and Columbia University College of Dental Medicine. Dr. Chawla has been elected into the American College of Dentists, International College of Dentists, as well as the New York Academy of Dentistry, where she is on multiple committees, including program chair in 2020. She is a Diplomate of the American Board of Oral and Maxillofacial Surgeons, as well as a member of the American Association of Oral & Maxillofacial Surgeons and New York State Society of Oral & Maxillofacial Surgeons. Dr. Chawla previously served as treasurer, secretary, vice president, and presidentelect for NYCDS before assuming the role of president. Dr. Chawla was chair and Board liaison for the NYCDS Public and Professional Relations Committee from 2014-2017; she chaired the Mentorship Committee in 2015, was Bylaws Committee chair in 2022, and served on the Membership and Legislative Committees for several years. She served as treasurer of the Society's Political Action Committee 2016-2018 and was Finance Committee chair in 2020. Dr. Chawla has been actively involved with the Society's two charitable events since their beginnings. She served on the Steering Committee of Give Kids A Smile from 2014 through 2017, and served regularly as a site leader. She has been a part of the Charity Golf Outing since its start in 2015. She participated in the Washington Leadership Conference in 2017-2019. In addition, Dr. Chawla volunteers for surgical missions to thirdworld countries. Dr. Chawla has also been named a Castle Connolly Super Doctor by her peers annually since 2017.



Vera W. L. Tang, DDS, MS, presidentelect, is a clinical assistant professor, vice chair, and director of predoctoral periodontics in the Department of Periodontology and Implant Dentistry at New York University College of Dentistry, in addition to being in private practice as a periodontist in Manhattan. She has served as a faculty advisor to the American Student Dental Association, NYU Chapter since 2008. Dr. Tang received her dental degree from New York University College of Dentistry, a Masters and certificate in periodontics from the University of Florida College of Dentistry. She has received many awards for excellence in teaching and mentoring, as well as for her commitment to organized dentistry. Dr. Tang is a member of the American Academy of Periodontology (AAP), AAP board representative for the American Dental Political Action Committee (ADPAC), past president of the Northeastern Society of Periodontists, past president of the NYU College of Dentistry Alumni Association and a fellow of both the American College of Dentists and International College of Dentists. Dr. Tang joined the NYCDS Board of Directors in 2018. She became a member of the Bylaws Committee in 2018, serving as chair in 2023; she is an advisory member of the Finance Committee (chair in 2021) and a member of the Legislative Committee since 2017, and was a member of the CE Advisory Committee for several years. She has served as treasurer, secretary, and vice president of NYCDS. In addition, Dr. Tang was a member of the Nassau County Board Member (2008-2009) and served on NYSDA New Dentist Committee (2004-2008), Membership Committee (2009) and Dental Education and Licensure (2023).



Andrew S. Deutch, DDS, vice president, is a general dentist in practice in Manhattan since 2011. He graduated from SUNY at Buffalo School of Dental Medicine in 2010 with a minor in prosthodontics and periodontics, and received his B.S. at Union College. Dr. Deutch has been a

part-time clinical attending for the general dentistry residency program at New York Presbyterian Hospital-Weill Cornell Medical Center since 2013. He engaged in volunteer work while in dental school with Remote Area Medical and Dental in 2009, participated in Give Kids A Smile Day at Buffalo schools from 2007-2010, and was involved in dental outreach in the Buffalo School District from 2006-2010. Dr. Deutch continued his involvement with Give Kids A Smile through NYCDS as a frequent site leader for the event. In addition, Dr. Deutch served as co-chair/chair of the NYCDS Young Professionals Committee from 2012-2020. In 2021 he began to serve on the Society's Peer Review Committee and was elected as an alternate to the Society's Board of Directors, and went on to serve as treasurer and secretary. In 2023, he became a fellow of the American College of Dentists.



Egidio A. Farone, DMD, secretary, is a general dentist practicing in midtown Manhattan for over 30 years. Dr. Farone graduated from the University of Pennsylvania School of Dental Medicine in 1984. Since 2003, he has been a clinical assistant professor and an assistant attending dentist at New York Presbyterian Hospital Weill-

Cornell Medical Center. Dr. Farone has a long history of service with the Society's Peer Review and Quality Assurance Committee, serving as a member from 1997-2004 and then as chair of the committee from 2005-2014. He went on to serve as chair of NYSDA's Council on Peer Review and Quality Assurance from 2014-2016. Dr. Farone has served on both the Society's Finance Committee and the Bylaws Committee since 2019. Dr. Farone is an active member of several professional organizations, including the New York Academy of Dentistry, serving as president from 2014-2015. He will become chair of the New York Section of the American College of Dentists in 2024. Since 2018 he has served on the Dean's Council of his alma mater, the University of Pennsylvania. He serves on the Board of Trustees of the NYS Dental Foundation since 2022. Dr. Farone began his service on the NYCDS Board of Directors in 2019 and served as treasurer in 2023. He joined the Finance Committee in 2019 and became chair in 2023. Dr. Farone has received numerous awards, including the Jarvie-Burkhart Award from NYSDA for his World Trade Center efforts. In 2017, he was awarded the Mark Mintzer Award from NYCDS in recognition of his service to the profession.



Jaskaren Randhawa, DMD, MPH, treasurer, is a general dentist with a practice in Midtown Manhattan. Dr. Randhawa received her undergraduate degree from George Washington University School of Public Health and Services where she held many offices, including class president. She graduated from Tufts

University School of Dental Medicine where she was awarded the Presidential Award, Omicron Kappa Upsilon Research Award, and was a member of the Honos Civicus Society and Research Honors Society. She completed her general practice residency at Columbia Medical Center/New York Presbyterian Hospital and was awarded a U.S. Department of Health HRSA-sponsored fellowship to earn her Master's in Public Health at Columbia University. She is an active member of the American Dental Association, Academy of General Dentistry, American Academy of Cosmetic Dentistry, and the New York County Dental Society. Since 2016, she has served on the Give Kids A Smile Steering Committee and is chair of data collection and analysis for the event. Dr. Randhawa joined the New Dentist Committee in 2017 and was co-chair from 2019-2020, and chair from 2021-22. In 2022 she was an alternate to the NYCDS Board of Directors and in 2023 became a Board Member At-Large. Dr. Randhawa serves as a member of NYSDA's New Dentist Committee.



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Reeview

Peer Review: Member Benefit vs. Member Loss

James E. Jacobs, DMD

Chair, Peer Review and Quality Assurance Committee



As I've stated before, Peer Review is a member benefit that provides members with an avenue to resolve patient disputes without going to court, hiring an attorney or spending as much as 5 years of sleepless nights until a verdict is reached. It allows you to be judged truly by your peers and is not reported to the National Databank of Practitioners.

It is a confidential process that is an alternative to being reported to the Office of Professional Discipline (OPD) where financial penalties of up to \$10,000 per charge (and there can be multiple charges) can be imposed by the state and can potentially jeopardize your dental license.

We all know how to try to avoid Peer Review – with excellent documentation, good patient communication skills, high quality of work and a warm personality of the doctor and staff.

Sometimes we can try to do all of this and yet a patient who is upset, fearful, short on time, or under a lot of pressure may not have really listened to us about the treatment or limitations of care or the treatment fee agreement. This can happen to any dentist.

A member should understand that whether going into court with a jury or judge, or into Peer Review, that one can lose the case. Losing is part of the risk you take in many aspects of life. It is a fair system where one can be found right or wrong and win or lose despite your own truths.

I have noticed in my two years involved with NYCDS Peer Review that many dentists who lose are not only upset from a financial point of view, but from their pride and ego as well. This is totally understandable, but keep in mind that even a loss will keep you from being reported to OPD.

If you do not want to subject yourself to a potential Peer Review hearing, then talk with your patient and return some or all of the money and be done with it in the best way possible. (Note: you can return money during the mediation stage of Peer Review which provides legal protections.) Personally, when necessary, I have returned money because I do not want to have an angry patient and someone being a negative voice on social media or by word of mouth. "Bite the bullet" and refund the money and you will soon get the issue behind you. If you want to fight it because you feel you are right, have issues with refunding fees or are a "it's the principal that matters" person, that is fine but remember your truth and other people's truth are different and do not condemn the system.

My belief is that one of the secrets to life is to know yourself. When you truly know who you are, you make the best decisions going forward that are in harmony with who you are; if things do not go your way you still have your self-esteem, tried your best, and can live with the results. Understand who you are and choose the best path for yourself in dealing with a disgruntled patient.

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Ethicsner

The Importance of Complying with Medical Record Requests

Steven H. Cho, DDSEthics Committee Chair



We are reprinting this article I wrote in September of 2021 because NYCDS continues to receive frequent complaints from patients not receiving a copy of their dental records from their providers as required by NYS law.

The Ethics Committee recently received multiple complaints from patients stating that their dental

providers are not providing them with their medical records when requested. After following up with the providers, the following reasons for why records were withheld were found:
1) a patient did not pay for copies of the medical record, (it is costly to duplicate dental models); 2) one provider gave the original records to an attorney for a malpractice suit and the attorney's office could not re-locate them; and 3) another already gave copies, but the patient lost them, so the office didn't feel obligated to provide another copy.

New York State dentistry practice guidelines state, "Health professionals are required to maintain records for each patient that accurately reflects the evaluation and treatment of the patient according to section 29.2(a)(3) of the Rules of the Board of Regents. All patient records must be retained for at least six years, with the exception of records for minor patients, which must be maintained for at least six years and for one year after the minor patient reaches the age of 21. Under Section 18 of the Public Health Law, patients have the right of access to their records under most circumstances. If you deny access to records to a patient, you have an obligation to inform the patient of his/her right to appeal to the Office of Record Access of the Department of Health."

To avoid problems when patients request their records, all entries should contain accurate and complete information for all treatments and communications, including those done inperson and by telephone, letter, or electronic means.

Ultimately, patients have the right to know what is kept in their medical records. Since the dentist owns the physical medical record of his or her patients, it is therefore the property of the dentist. The information in the record, however, is the property of the patient. There is a distinction between the two. While patients do not have the right to possess the original record, they do have the right to see and to request and obtain a copy of it. Copies of records should be sent without being altered. If a correction needs to be made to the document, all errors should be rectified with a single-line strikeout and the date the correction was made. There should be no attempt to hide information. In fact, changing a patient's record with

the intent to deceive is highly unethical and unprofessional conduct.

Since patients have the right to their own medical information, dentists must release information to patients or to a third party at the request of their patient within a reasonable timeframe. The dentist is obligated to provide all records if requested, including radiographs and models. The state health department considers 10 to 14 days to be an appropriate amount of time for a practitioner to respond to such a request. In most cases, a reasonable fee may be charged for copying records. The law allows charging no more than 75 cents per page plus postage for paper copies of medical records. Dentists may also charge for actual reproduction costs, specifically for radiographs and models.

With regards to potential costs, it is vastly important to note that a patient cannot be denied access to records solely because he or she is unable to pay for copies of records, nor can records be withheld from patients due to the nonpayment of dental bills. If a provider refuses to release a patient's records until an outstanding invoice is paid, such action can have negative consequences for the provider.

The New York State Board for Dentistry has determined that refusal to provide a patient with medical records, despite outstanding bills, is grounds for disciplinary action by the Office of Professional Discipline. Note that there is no statute of limitation for charges of professional misconduct. Moreover, if a patient believes that you have violated his or her health information privacy right by not giving medical record access, the patient has the right to file a HIPAA Privacy Rule Complaint with the U.S. Department of Health and Human Services (HHS) Office for Civil Rights.

There are no apparent benefits that stem from denying patients access to their records or denying them copies. Complying with the proper way to handle medical records will keep you far from engaging too closely with our Ethics Committee and from run-ins with the Office of Professional Discipline. Staying up to date on the best and most ethical practices will help you succeed and even thrive as a healthcare provider. Your patients will thank you and you'll also thank yourself.

In summary, keep accurate records, comply with record requests, and release copies of the records rather than the originals. If there is ever a malpractice action or complaint against you, having well-kept records are crucial and can be your best defense.

New Members

Jeremy Budd, DMD

University of Pennsylvania 2022 General Practice

Transferred to NYCDS

Kimia Ahmadian, DMD

LECOM 2021 Pediatric Dentistry Transferred from Bronx County Dental Society

Megi Brahimaj, DDS

Stony Brook SUNY 2021 General Practice Transferred from Bronx County Dental Society

Tamar Brown, DMD

University of Pennsylvania 2021 General Practice Transferred from Second District Dental Society

Jason Cho, DDS

Stony Brook SUNY 2014 Oral and Maxillofacial Surgery Transferred from Northeast District Dental Association

Sarah Khan, DDS

Stony Brook SUNY 2016 Pediatric Dentistry Transferred from Southeastern District Dental Society

Chenhao Lu, DDS

Uni of Washington 2021 General Practice Transferred from Seattle-King County Dental Society

Lori Martinez-Rubio, DDS

UC San Francisco 2022 Periodontics Transferred from Tri-County Dental Society

Selin Soyupak, DMD

University of Pennsylvania 2020 Pediatric Dentistry Transferred from Third District Dental Society

Residents & Graduate Students

Thalita Coelho, DDS

Foreign 2020 General Practice

Ariana Etessami, DDS

University of Maryland School of Dentistry 2022 Prosthodontics

Yanil Garabito, DDS

Dominican Republic 2018 General Practice

Katelyn Germosen, DDS

Foreign 2008 General Practice

Marie Michelle Iman, DDS

Saint Joseph University 2022 General Practice

Ali Istarabadi, DDS

Foreign 2013 General Practice

Salaar Khan, DDS

Columbia University 2022 Orthodontics and Dentofacial Orthopedics

Ji Won Kim, DDS

NYU 2023

Orthodontics and Dentofacial Orthopedics

Yuanyuan Luo, DMD

Harvard University 2022 Pediatric Dentistry

Kaylie Magidson, DDS

University of Western Ontario 2022 Pediatric Dentistry

Valentina Malpica, DDS

University de Carabobo 2008 General Practice

William Margolin, DDS

NYU 2023

Prosthodontics

Lori Martinez-Rubio, DDS

UC San Francisco 2022 Periodontics

Fernanda Mendoza Cervantes, DDS

NYU 2023 Pediatric Dentistry

Noor Mukhtar, DDS University of Southern California 2023

Periodontics

Isra Munir, DMD

University of Pennsylvania 2022 General Practice

Kiran Nagdeo, DMD

University of Pennsylvania 2015 Orthodontics and Dentofacial Orthopedics

Francisco Ortega Hammond, DDS

Foreign 2017 General Practice

Rosmary Rodriguez, DDS

University del Zulia 2015 General Practice

Kylie Schlesinger, DMD

University of Pennsylvania 2022 Orthodontics and Dentofacial Orthopedics

Alexandra Stein, DMD

University of Pennsylvania 2022 Orthodontics and Dentofacial Orthopedics

Zafrin Tanni, DDS

University of Dhaka 2010 General Practice

Maria Tempone, DDS

University del Zulia 2005 General Practice

Jung Eun Yoon, DMD

Boston University 2022 Orthodontics and Dentofacial Orthopedics



Best Wishes for the New Year from your 2023 Board of Directors!

Front row (left to right): Vice President Vera W.L. Tang, Secretary Andrew S. Deutch, President Mina C. Kim, President-Elect Suchie Chawla, NYSDA Trustee Lois A. Jackson, Immediate Past President Ioanna G. Mentzelopoulou, Board Member Michelle Lee. Back row (left to right): Board Member Gabriela N. Lee, Education Director Mitchell Rubinstein, Board Member Robert M. Sorin, Board Alternate Marsha E. Rubin, Treasurer Egidio A. Farone, Board Members Gail E. Schupak, Jaskaren Randhawa and JoAnna Pufnock. (Not pictured: Board Members Ada S. Cooper and Margaret Romao, and Board Alternate Guy N. Minoli.