



It's official! Your 2021 officers (top left to right, clockwise): President Lois A. Jackson, President-Elect Ioanna G. Mentzelopoulou, Vice President Mina C. Kim, Secretary Suchie Chawla, and Treasurer Vera W. L. Tang



### PRESIDENT'S MESSAGE

## Change Has Come to NYCDS

Lois A. Jackson, DDS

In a world that has been turned upside down, change is visible right here. For the first time in NYCDS history, the officers who were installed are all women, joined in gender but unique in diversity of background. So change has come to NYCDS.

From the time it was formed in the 1860's, NYCDS has been at the forefront of change. This is our legacy. In today's world, we constantly talk about change: social, economic, and political. The term has even changed. We now say pivot. It can also be a time of inspiration, a game changer, a transformation; that is where NYCDS is now.

The old rules do not apply. Last year, a new normal had to be established overnight. This was cataclysmic, as we know dentists are a deliberative group. Decisions are made after study and consultation but this moment called for immediate change and action. NYCDS responded with emails and webinars providing information to help with everything from COVID exposure and safety protocols to stress reduction. Members had their emails and phone calls answered. We tried to best serve our members and we got through it together.

Our situation now calls for a different course, a different direction, in order to

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# Continuing Education

## Getting Creative with Continuing Education

**Mitchell Rubinstein, DMD**

Education Director



One year into the COVID-19 pandemic, there are some hopeful signs of a light at the end of the tunnel. The data shows what many of us long suspected; visiting the dentist does not increase the risk of contracting COVID-19. The preventive policies and procedures most of us have been following have proven to be highly effective, and our patients have thankfully been returning to get the care they need. An excellent research paper by Drs. Stuart and Scott Froum in the current New York State Dental Association Journal delves into the subject in great detail, and I highly recommend it.

Here at New York County Dental Society, we cancelled all live CE courses early last year, as soon as the danger of the coronavirus became apparent. Although it was absolutely necessary to do, I spent a great deal of time thinking about the camaraderie of live CE, and the face time with my colleagues and teachers. Continuing education is not simply a transfer of information from teacher to student, it is one of the most important ways in which we interact with each other. Whenever I have taught live CE programs, I have always tried to learn as well as teach.

I have tried to stay in touch with the many clinicians who were scheduled to teach courses in our program this past year, and we have been working on our plans for re-scheduling them. We will resume live CE courses as soon as it is safe to do so and we will keep you fully updated with the details. Meanwhile, we will continue offering programs online and via Zoom until live CE becomes a reality again. I particularly look forward to resuming our Speed Learning programs, where we spend a full day exploring a variety of topics with current opinion leaders in our profession.

In the absence of live continuing education, we've all had to get creative in finding ways to stay connected to one another and expand our knowledge of our profession (not to mention getting our required CE credits). Online communities like Dentaltown, as well as dozens of dental-oriented Facebook groups and Instagram accounts have filled in many of the gaps, as we search for knowledge in connection to our profession. Unfortunately, quality on the internet can be quite unpredictable. Just because an Instagram page has pretty pictures, that doesn't necessarily mean it is providing accurate or relevant information. One Instagram account that does offer consistently great material is Dr. Nate Lawson at University of Alabama. I always learn something new there. On Facebook, my favorites would have to be Dental Clinical Pearls and the Dental Nachos, both of which offer us opportunities to share clinical cases, ask questions and get advice on all aspects of clinical practice. These groups are skillfully moderated, to eliminate the rancor and nastiness sometimes found in other Facebook groups. They emphasize professionalism and collegiality.

I would also like to offer special thanks to Dr. Paul Goodman of Dental Nachos for offering a very special CE opportunity to NYCDS members back in February. The Super Dentist Boost event (conducted via Zoom) offered up to 18 live (not self-study) credits spread over three full days of programming. The topics ranged from Restorative Dentistry to Implantology, Endodontics, Periodontics, Practice Management and everything in between. Members who took advantage of the offer had an opportunity to attend all the courses for just \$69. We received excellent feedback on this program. Dr. Goodman is presenting a webinar for New Dentists in April – see page 5 for more information.

As always, I will remind you that we are always working to expand our program with interesting and exciting new speakers.

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# The Greater New York Dental Meeting's Virtual Celebration Gives Back to the Dental Community

**Jayne McNiff Spicciate**  
Program Manager  
*Greater New York Dental Meeting*

The Greater New York Dental Meeting's (GNYDM) 2020 Virtual Celebration was a great success. With close to 140 educational programs and 300 exhibit booths, the 15,000 dentists and their teams closed out the year with free continuing education courses and numerous opportunities to see what the dental industry was introducing.

In their 96th year, the GNYDM had to change from a face-to-face event to a virtual meeting due to Covid-19 restrictions and safety issues. As the largest Dental Meeting in the United States, attracting over 55,000 attendees worldwide, the GNYDM decided this would be an opportunity to give back to the dental community by offering free continuing education for all attendees. Exhibitors were offered booth space at a minimal fee only to cover the expenses of the virtual platform.

The GNYDM has also been known for their unique Specialty Meetings drawing attention from local and international talent. The Specialty Meetings featured at the 2020 Virtual Celebration included the World Implant Expo, Global Orthodontic Conference, Pediatric Dentistry Summit, Sleep Apnea Symposium, 3D Printing & Digital Dentistry Conference, Public Health Conference, Oral Cancer Symposium, Special Care Dentistry, and Women Dentists Leadership Conference. Additional topics

presented were Endodontics, Practice Management, Infection Control, Hygiene, Restorative, Volunteerism, Medicaid, Covid-19 and PPE, Periodontics, as well as courses in Spanish and Portuguese.

The GNYDM's Free Virtual Education and Exhibit Floor remained open for attendees until February 25<sup>th</sup> and is extended to April 5<sup>th</sup>. Attendees are able to shop online and take education courses from the convenience of their own home or office. With dedicated floor hours, dentists and their teams could ask company representatives questions about products and materials and order new equipment for the office with ease.

The GNYDM is planning for an in-person meeting in November of 2021. Continue to visit [@GNYDM](#) on Facebook, and Instagram for updates and information. The GNYDM team hopes to see and greet you in-person in November. As co-sponsors of the meeting, NYCDS has much to gain when the GNYDM is a success. The revenue generated is vital to NYCDS and your attendance and participation in the meeting is essential!

## SAVE THE DATE FOR 2021

### Greater New York Dental Meeting

**Meeting Dates:** November 26<sup>th</sup> – December 1<sup>st</sup>

**Exhibit Dates:** November 28<sup>th</sup> – December 1<sup>st</sup>

**Contact:** [info@gnydm.com](mailto:info@gnydm.com)

[www.gnydm.com](http://www.gnydm.com)

[@GNYDM](#)

## Henry Spenadel Continuing Education Program

### Winter 2021 Continuing Education Program Calendar

#### MARCH 2021

W 3/17 6:00 PM-7:00 PM

[ACD Mentoring Lecture Program:  
Case Selection and Treatment Options to Increase  
the Predictability of Esthetic Success in Implant Dentistry](#)

Dr. Yakir Arteaga

#### APRIL 2021

W 4/14 7:00 PM-8:00 PM

[Professional Liability and Defensive Dentistry](#)

Led by MLMIC

W 4/21 6:00 PM-7:00 PM

[ACD Mentoring Lecture Program: What Would You Do?](#)

Dr. Guy Minoli

Th 4/29 6:30 PM-8:00 PM

[Orofacial Pain Lecture Series: Part 4](#)

Dr. Donald Tanenbaum

#### MAY 2021

W 5/19 6:00 PM-7:00 PM

[ACD Mentoring Lecture Program: Peer Review](#)

Dr. Egidio Farone

For more information go to [www.nycdentalsociety.org](http://www.nycdentalsociety.org), or call the education staff at 212-573-8500.



# President's Message

*(continued from page 1)*

continue to change. What is NYCDS doing to thrive in what has been called permanent whitewater? We will follow our values:

## Collaboration

We, the Executive Committee, are reaching out to the Board, our reinvigorated committees and our members, to provide content you tell us is wanted, as opposed to what we think is needed. Old practices and programs that are out-of-date and out-of-touch must be replaced with timely information and programs. We had started and will continue The Together Project to encourage members to contact us with their suggestions for programs and more. We recently hosted a webinar on how to speak to staff about vaccines and another is planned on stress reduction strategies for working parents -- not exactly standard content. We have created a NYCDS task force to address crucial issues facing the functioning of the society - financial and otherwise. We have initiated a capital campaign to provide needed operating funds.

## Advocacy

NYCDS has always responded to crises and emergencies as they occur that affected members. Rather than being reactive we are trying to be proactive: speaking to local elected officials and city government representatives to educate them as to our concerns and our contributions to the public good. We plan to create more volunteer opportunities for members to reinforce our commitment to the community.

## Mentoring

Prior to COVID, we have always had dentist-to-dentist mentoring programs. This year we have gone in other directions. We have partnered with The New York ACD Chapter which has had an ongoing mentoring program for residents arranged by Dr. Guy Minoli who also became an alternate member of our Board. In addition, we have created programs to engage Columbia and NYU students. Our latest program, planned for March, is a virtual shadowing event at a time that when this cannot be done in person.

## Partnerships

We have been working with multiple dental companies to provide quality content for our members to access. A recent series of lectures was arranged by Glidewell. Our "Lunchless and Learn" mid-day webinars replaced the traditional lunch and learns at our offices. BENCO has just agreed to sponsor a series of short programs. Bank of America has created a series to address financial issues. We have been working closely with the GNYDM to reimagine the meeting for the future. With the New York Academy of Pediatric Dentistry, we have created the first Pediatric Dentistry Study Club. Our first meeting was held in February with over 160 in attendance. In the midst of these challenges a line from an Elton John song "A Change is Gonna Do Me Good" keeps me hopeful and optimistic that NYCDS can lead us successfully through the new normal.

But in order to effect change you need teamwork. Teamwork has helped us go forward. So, I have to tell you about all the teams that have helped me with this ambitious agenda.

**The NYCDS Team** - The five of us make up the just installed Executive Committee. We jokingly call ourselves the Dr. Jackson 5. I could not imagine a group of more intelligent and committed women than those who were inducted today. They reject the status quo and help usher in change. They are my colleagues but they are also my friends. I have to thank Richard Lewenson, the 2020 Immediate Past President for his contributions during this difficult period. His good counsel and good humor were invaluable. We welcome Jim Jacobs who has agreed to serve in the past president position. Jim's thoughtful comments and considered opinions will certainly be important in our path forward. I have to thank David Shipper, our NYSDA Trustee, our voice in Albany, who brings us necessary information and takes our concerns where they will be heard.

Now I come to our Executive Director, Diane Laurenzo. Thrust into an unimaginable crisis requiring immediate action, Diane did all that was needed. Providing leadership with grace and good humor, she dealt with both membership and financial issues. She has helped us institute change and always answers my phone calls!

Next is the NYCDS staff, Susan Apsley and Susan Ingoglia, affectionately known as "the Susans," Alexandra Gonzalez and Judy Chei. Through the most difficult of times, they do their best to assist members and do the business of the society. We are so lucky to work together with this group.

**The GNYDM Team** – Executive Director Robert Edwab, General Chair James Doundoulakis, Incoming Chair Richard Oshrain, and Immediate Past General Chair Lauro Medrano-Saldaña, the Organizing Committee, Troubleshooters, Advisory Chairs, staff and everyone else who worked so hard to create the excellent virtual program in 2020 which benefited both NYCDS and Second District.

**The 505 Team** - My staff makes things easy and our practice better and better. No matter what we always say "it will be okay" and it usually is okay with their help. Each day brings new challenges and they rise to the occasion as a team. I am fortunate to work with Irina Ayzenberg, Martha Rosario, Shakila Dalezine, Terrance Mendonca, Yolanda Figueroa, Donna Ambrosecchio and Janett Quinteros. A word about my partner, Adam Silevitch. Adam and I are of different generations but are alike in our commitment to our patients and our practice.

**The Home Team** - My husband, Michael Gerstein, has seen me through the challenges of my entire career. Our journey together has always been interesting, never dull. We are opposites in many ways but come together on the things that are important. Thank you, Michael, for helping me get to this day. I wish everyone the best in 2021!

## Orofacial Pain Series Tackles Timely Patient Issues



Donald R. Tanenbaum  
DDS, MPH

With the pandemic continuing to impact our lives, disrupted sleep, postural strain, physical inactivity and emotional stress are themes heard more often in dental offices. Many patients arrive with broken restorations, fractured and sore teeth and muscles and TM joints that have been overworked. This is likely the result of almost one year of quarantine and major changes in our lifestyle and socialization. If anyone ever doubted the influence of stress on the emergence of TMJ symptoms, this year should settle the debate.

Beyond the tooth, muscle and joint problems, patients are also reporting facial and cranial headaches, burning mouth symptoms, ringing in their ears, and a variety of orofacial sensory disorders generating complaints of pain in the absence of physical or radiographic evidence of pathology. With these symptoms becoming more prevalent, there is no better time to learn more about the broad canvas of orofacial pain problems.

To this end, clinician Donald Tanenbaum, an ADA specialist in Orofacial Pain, created a series of lectures designed to provide an overview of orofacial pain problems. The goal is to raise the diagnostic skills of all interested practitioners, inclusive of new graduates who are just beginning to experience the challenges of diagnosing and treating patients in pain. Common problems are discussed, with emphasis being placed on the identification of the risk factors that drive orofacial pain and the strategies that have been shown to be consistently effective in solving or managing these problems. The four 90-minute presentations focus on the neurobiology of pain, the origins and features of somatic and neuropathic pain, jaw/neck muscle pain and dysfunction and TM joint pathology. **You can register for the final, stand-alone course below.**

**Thursday April 29, 2021**

6:30-8:00 pm / 1.5 CE credits

**Orofacial Pain Lecture Series: Part 4**

A- TM joint pain, dysfunction and treatment strategies

B- Muscle pain and treatment strategies

Register for this virtual meeting [HERE](#).

## New Dentist Programs

### Developing your Dentisting Core to Succeed in the Real World

with Dr. Paul Goodman

Communication is key. Paul “Dr. Nacho” Goodman will share practical guidance and systems you can use to optimize your exchanges with patients and your team...and even improve revenue.

Educational Objectives:

- Develop word systems to streamline patient communication.
- Review simple strategies to improve practice revenue...the power of video
- Learn 5 minute practice systems that eliminate confusion and enhance patient service

March 24, 2021

7:00 pm / Free

Via Zoom

[Register](#)

## Getting Started in Private Practice



**Dr. Eric Studley/  
Dr. Ivy Peltz**  
Founders of  
Doccupations.com



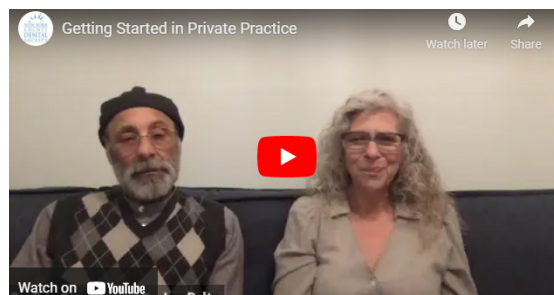
**Dr. Jaskaren Randhawa**  
Practice Owner  
NYCDS New Dentist Chair



**Robert Malandrucolo**  
Bank of America Practice Solutions

New dentists and residents had the opportunity on February 22 to learn about the various pathways to practice ownership and some of the essential steps to take along the way. The program offered lots of “food for thought” to help new dentists formulate questions and develop their own road map for practice ownership. All of the speakers emphasized the importance of building a dental team of lawyers, accountants, and others; creating a business plan; finding mentors; and connecting with organized dentistry as cornerstones to success.

Watch the video below to hear in more detail the advice that was shared during this informative program.

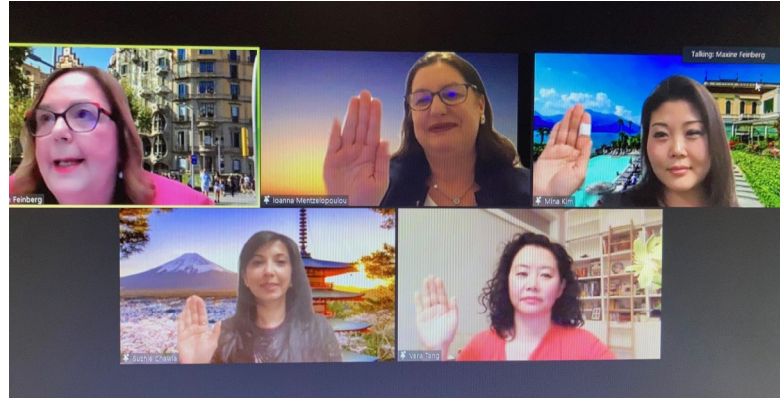




# 2021 Installation



Lois Jackson (left) being installed as NYCDS President by ADA Past President Maxine Feinberg.



Dr. Feinberg installing (top left to right, clockwise) President-Elect Ioanna Mentzelopoulou, Vice President Mina Kim, Secretary Suchie Chawla, and Treasurer Vera Tang.

## A Celebration of Change and Optimism

Momentous isn't a word we get to use often, but it is clear that the Installation of Officers which took place virtually on February 24 was a momentous occasion. A historic slate of five diverse women became officers -- a first throughout the ADA -- making headlines in the [ADA News](#). It is a visible reflection of the change that is occurring at NYCDS. Installing Officer, ADA Past President Maxine Feinberg, praised NYCDS and suggested it is a model for all of organized dentistry. The Society's newly installed officers are: President Lois A. Jackson, President-Elect Ioanna G. Mentzelopoulou, Vice President Mina C. Kim, Secretary Suchie Chawla, and Treasurer Vera W. L. Tang.

The festive and celebratory event started with a lively musical recording performed by Maitreya Padukone, past president, his son Neil Padukone, and their group Salsa Masala. Past President Ken Cooperman made the entire program go smoothly as Master of Ceremonies. To start the program, Dr. Gail Schupak provided a touching invocation that highlighted the strength and resilience of the dental community during a remarkable year. There was a brief tribute to Luis J. Fujimoto, who was installed as president in 2020 but passed away prematurely. 2018 President James E. Jacobs has graciously stepped in to serve on the Executive Committee.

Immediate Past Richard J. Lewenson was acknowledged for his years of service on the Society's Executive Committee and Maurice L. Edwards (NYCDS) and William W. Bongiorno, Jr. (2nd District Dental Society) were recognized for serving on the Greater New York Dental Meeting's Organizing Committee.

The program featured several noted speakers in addition to Dr. Feinberg: ADA President-Elect Cesar R. Sabates, ADA Second Vice President Maria Maranga, New

York State Dental Association President Craig Ratner, ADA District 2 Trustee Paul Leary and New York State Dental Association Executive Director Mark Feldman. It was wonderful to hear remarks from so many leaders of organized dentistry. You can listen to their remarks below.



Before being installed, each officer shared brief personal statements. Last year Dr. Jackson became acting president at an inauspicious time -- March 2020. Executive Director Diane Laurenzo noted that Dr. Jackson did an extraordinary job leading NYCDS through an unbelievably challenging year and praised her unwavering dedication, commitment, and resourcefulness. In her speech, Dr. Jackson shared the many changes and initiatives the Executive Committee and Board of Directors developed and planned to move NYCDS forward during the pandemic and beyond. Watch the swearing-in and Installation proceedings below.

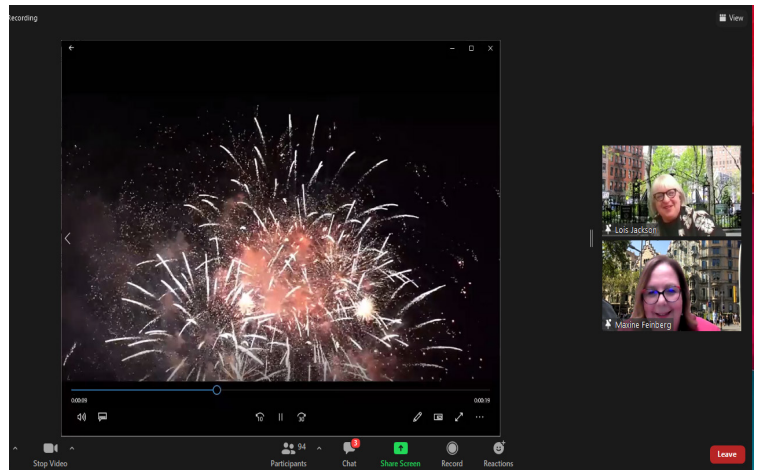
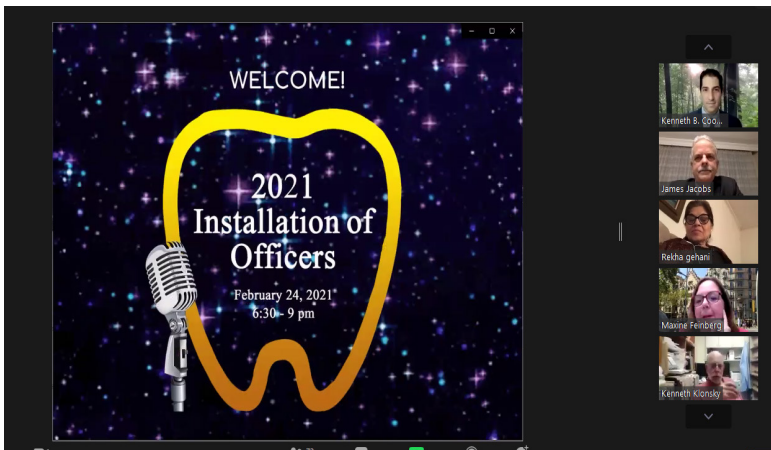


# 2021 Installation

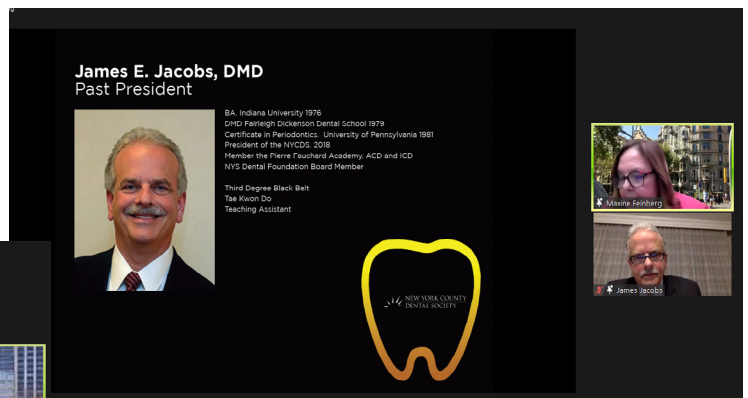
NYCDS would like to acknowledge several prominent individuals within organized dentistry that attended: NYSDA President-Elect Kevin Henner and Vice President James Galati, NYSDA Trustees Viran Jhaveri, Mitchell Mindlin, David Shipper and Jay Skolnick; 2nd District President Babak Bina, Past President Paul Albicocco, and Executive Director Bernie Hackett; Queens County President Arellys Santana and Executive Director and Past ADA President Chad Gehani and his wife Dr. Rekha Gehani; Nassau County President Howard Baylarian, Executive Director Eugene Porcelli, and Board Member Lynda Asadourian; Suffolk County President Patricia Hanlon; and in addition to the many committee members and troubleshooters from the Greater New York Dental Meeting, Chair-Elect Richard Oshrain, and Executive Director Robert Edwab.

After the proceedings there were virtual fireworks and attendees were entertained by a mixologist. NYCDS greatly appreciates the evening's sponsor MLMIC and all of its Corporate Friends: AmWins, Dentegra, Bank of America Practice Solutions, Mandelbaum Salzborg, MLMIC and Straumann.

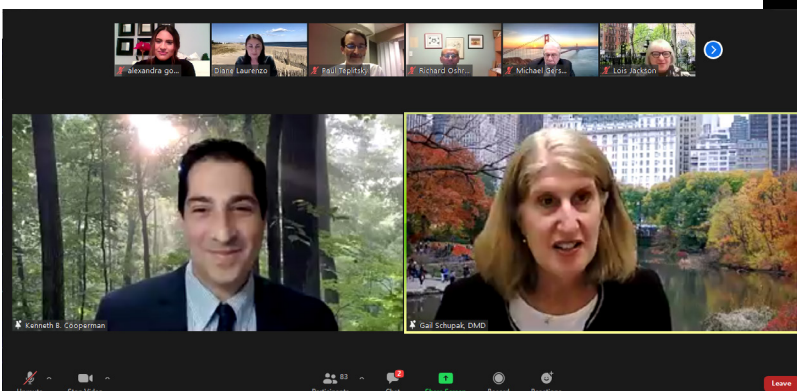
Kudus to the officers and all our special guests!



Festive fireworks to celebrate the special evening.



Past President James Jacobs will serve on the Executive Committee in 2021.



Past President Ken Cooperman was Master of Ceremonies for the evening and Dr. Gail Schupak provided a moving invocation.



# 2021 NYCDS Board of Directors & Trustee

## Officers



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Ioanna G.  
Mentzelopoulou, DDS  
*President-Elect*



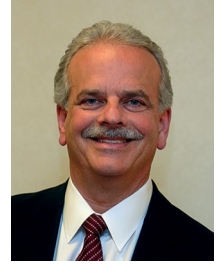
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Vera W.L. Tang, DDS  
*Treasurer*



James E. Jacobs  
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## Alternate Director



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David M. Shipper, DMD

## Advisory



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## GKAS NYC is Reimagined Due to the Pandemic!



ADA American Dental Association®

The thought of holding our annual Give Kids A Smile (GKAS) event during the pandemic was a daunting challenge at first. But the members of the GKAS NYC Steering Committee met over several months last year and rose to the challenge!

Due to COVID-19 and the fact that only 10-15% of children were attending NYC public schools in February, non-teachers were not allowed in school buildings. The committee had to reimagine Give Kids A Smile by creating an expanded virtual/remote program. The nine participating lower schools, and their counterpart middle and upper schools, were excited and appreciative of our efforts to ensure that underserved children in East Harlem continued to receive critical oral hygiene awareness education. In addition, many more children and parents can be reached virtually and it will have a greater impact on oral health awareness in that region of Manhattan.

The members of the Give Kids A Smile NYC Steering committee developed three unique, fun, exceptionally creative and educational videos on oral health tailored specifically for lower, middle, and upper school students. The narrated videos were prepared to be shared with the participating lower schools, and with the inclusion of middle and upper schools, the videos were available to be shared with 5,000+ students. The videos were part of the teaching curriculum throughout the month of February (Children's Dental Health Month). This is the first year we are reaching students in higher grade levels utilizing the convenience and benefits of the virtual approach!

For the first time a Superhero poster contest was created to further engage students. The winning design (selected after publication of this newsletter) will be incorporated into the Give Kids A Smile NYC volunteer tee-shirt logo for next year's event. Special thanks to Dentaquest for being our Logo Contest Sponsor! Because of their generous sponsorship, a grand prize will be award to the overall winner and three winners from each school will win honorable mention awards.

A live-stream Parent Workshop was planned (note the word planned!) to be held during a community town hall meeting in February. Holding the workshop during the town hall would allow this informative parent program to have a wider reach than in years past. A panel of GKAS Steering Committee dentists were prepared to use a thorough PowerPoint presentation to discuss good oral hygiene habits with parents and address

various aspects of oral health for children based on age. Everything was set – the committee members were moments away from making their presentation when – the meeting was “Zoom bombed” or in other words, hacked by outsiders. The committee hopes to make their presentation at a future meeting.

This year we were honored that GKAS NYC was been chosen by Henry Schein and the ADA GKAS Committee to share promotional information to inform the public about the ADA's GKAS initiative. Several principals and school administrators were interviewed by Henry Schein for this promotion. These interviews highlight the inclusion of schools with special needs students as a priority in our program.

None of this would be possible without the leadership of GKAS NYC General Chair Deborah Weisfuse and Steering Committee members: Drs. Raya Abu-Zahra, Hemali Ajmera, Megan Chin, Ken Cooperman, Nisha Garg, Lois Jackson, Anne Kossowan, Michelle Lee, Ioanna Mentzelopoulou, Whitney Mostafiz, Katherine Park, JoAnna Pufnock, Jaskaren Randhawa, Anya Viron and staff Alexandra Gonzalez and Susan Ingoglia.

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Dental Attorney

## Two Dentists Detail their Journey to get Vaccinated Against COVID-19



Whitney Mostafiz, DDS

We are grateful to have received our COVID-19 vaccinations; but the journey to receive them as private practitioners was a bit of a Wild West adventure. Adrenaline was at an all-time high leading up to both doses.



Michelle Lee, DDS

On December 31, 2020, we received an email from the New York State Dental Association informing us that openings to receive the first vaccine dose were available on the New York State Department of Health website. However, nothing showed up available except within a 50-mile radius search. The website was glitchy. There was so much buildup and then so much let down. Along with our colleagues, we refreshed the website by the hour and were fortunate enough to obtain a slot upstate.

The spots were filled up in minutes by 11:53 pm on New Year's Eve. We were ready to trek upstate to do what we had to for ourselves, our families, patients, and community.

Fast forward to the first week of January; the leaders of New York County Dental Society and several other local New York practitioners discovered that sites became available in New York City, walking distance from our offices. Unfortunately, these spots filled up in about an hour. We understood that the process could have been better streamlined but at the time, we were so grateful to receive our first dose. We got our doses at 125 Worth Street in downtown Manhattan and were in and out in 30 minutes. The process was easy and we both didn't feel the puncture at all. For the next 24 hours, our arms were sore and we were a little fatigued but it was nothing out of the ordinary.

We were informed that we'd get an email later about scheduling for our second dose. That expectation came with a journey of its own. For 2-3 weeks, we didn't hear any updates and rumors circulated about how the city had run out vaccinations. We were concerned that we wouldn't receive the second dose, which would render the entire process useless. Fortunately we and our colleagues were reassured after calling Allied Physicians. We received our second dose confirmation within a few days. The symptoms after the second dose were much more intense for both of us. We both felt the chills kick in at hour 12. We both had a headache, malaise, full body aches, and a large rash at the administration site. The symptoms diminished after 24-36 hours.

Despite being fully vaccinated, we both agree that there is a long way to go and we will need to do our part. Wearing masks and socially distancing work. We will not be changing our lifestyle

behaviors or clinical PPE practices one bit. The vaccine is not infallible as variant strains are emerging. As dentists, we have a lot of power in telling our patients and communities about our experiences to combat the anti-science movement so we can hopefully achieve herd immunity faster to live in a post-pandemic world again.

## Crucial Conversations: How to Motivate Your Staff to Get Vaccinated

In keeping with our commitment to address timely topics, a webinar on How to Motivate Your Staff to Get Vaccinated was held on January 21. The program tackled important points around COVID-19 vaccine safety and efficacy, dispelled common misconceptions about the vaccine, and offered practical guidance to help increase vaccination acceptance among dental team members.

NYCDS is pleased to have had two distinguished speakers with deep knowledge of public health and infectious diseases share their insights and guidance on this topic:

### Biana Roykh, DDS, MPH

Senior Associate Dean for Clinical Affairs  
Columbia University College of Dental Medicine  
and

### Magdalena Sobieszczyk, MD, MPH

Chief of Infectious Diseases  
Co-chair, COVID-19 Vaccine Committee  
Columbia University Irving Medical Center

This highly informative recording of the program is worth watching if you have dental personnel that are still reluctant to get the vaccine. You may even consider watching the program with your team.



# The COVID Era has Reinforced the Importance of Legislative Access

**Kenneth B. Cooperman, DMD**

Legislative Chair



As we all are well aware, 2020 was a year-full of unexpected challenges. 2021 has already also had its share of tumult and uncertainty. As dentists, New Yorkers, and NYCDS members, we have risen to meet these challenges head-on.

One of the most valuable assets of membership in the New York County Dental Society, the New York State Dental Association, and the American Dental Association is the strength of our united voice. The power of organized dentistry was effectively exercised in NYSDA's successful lobbying for the inclusion of dentists as essential workers, as defined by Governor Cuomo. We thereby headed off the prospect of another shutdown similar to the one endured during the spring of 2020. Another success has been the early access of dentists and dental workers to the COVID vaccines. This likely would not have been possible without the voice of NYSDA repeatedly and effectively fighting for New York State dentists--members and non-members alike.

On a local level, NYCDS has been reaching out to local legislators to create avenues of communication. We feel that it is important that when there is an issue affecting New York City dentists, we have the ear of New York City legislators who can best defend our interests. In that spirit, the Legislative Committee, in conjunction with the NYCDS Executive Committee and President Lois Jackson, has spearheaded a communication campaign. We have repeatedly reached out on a variety of platforms to our various local leaders, to open a dialogue between NYCDS and the individuals who help make decisions that affect our daily existence in NYC. Many of these leaders have responded favorably, and we have had a number of very positive interactions. The most visible of these has been the participation of Liz Krueger, New York State Senator, in our General Membership meeting in September of 2020. This has been followed by Zoom meetings involving spokespeople from the offices of Grace Meng (representing the 6th congressional district in the U.S. House of Representatives), Corey Johnson (Speaker, New York City Council and former Mayoral hopeful), Jo Anne Simon (member of the NYS Assembly) and Deborah Glick (member of the NYS Assembly and Chair of the Higher Education Committee, overseeing issues of scope of practice and licensure) and David Tepel, DMD, acting director of the Oral Health Program at the New York City Department of Health.

Governor Cuomo's office referred us to Dionne Richardson, the State Dental Director of the NYS Department of Health. However, it soon became clear that our colleagues at NYSDA have already

been in regular contact with her since the start of the pandemic. It is heartening to know that a lot is going on up at NYSDA behind the scenes!

We have several other Zoom meetings in the planning stages, involving other elected leaders in city and state government. It is our goal as a society to foster and maintain these relationships, which can hopefully continue to be mutually beneficial. It is also our hope that, as we move ever closer to moving beyond this socially distanced era, that some of these meetings will be in-person rather than virtual!

Weathering the COVID era has reinforced the importance of legislative access. The strength of our voice is directly related to our numbers; it is only through continued membership in the ADA tripartite that organized dentistry can continue to deliver! Donating to our dental political advocacy organizations at the local, state, and federal level (NYCDS PAC), (EDPAC), and (ADPAC) respectively, also helps greatly in amplifying our message.

Thank you to each and every member who is helping us defend the interests of dentists in NYC!

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## Understanding the Legal Issues Related to Mandatory Vaccination of Employees

Al Anthony Mercado, Esq

Fager, Amsler, Keller & Schoppmann, LLP

Counsel to MLMIC Insurance Company



Vaccination to COVID-19 represents an answer to some of the health issues of the pandemic while simultaneously posing a legal quagmire for dental practices regarding employee vaccination. This article will explore the legal issues surrounding employee vaccination. Given the complexity of the legal issues, it is

recommended that before the implementation of any employee vaccination policy that the reader consult with employment counsel as well as their human resources personnel regarding their specific situation.

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

### Key Factors for Consideration:

- The Need for a Vaccinated Workforce
- Can a Dental Practice Mandate Vaccination of its Employees?
- Compliance with Employment Laws

### Assess the Need for a Vaccinated Workforce:

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

Employers face potential liability under workers compensation law for creating or allowing conditions to exist for on-site COVID-19 exposure to employees. This would include employee to employee exposure. Employers also potentially face liability under negligence law for allegations of COVID-19 exposure to patients and third-party vendors. While causation could be a strong defense in such liability cases, it would not preclude

the case from being brought in the first place. In this regard the benefits of a vaccination policy for employees are clear.

**Can an Employer Legally Mandate Vaccinations for Employees?** As of this time New York State and the Federal Government have not made vaccination of healthcare employees mandatory.

In March 2020, the Equal Employment Opportunity Commission (EEOC)<sup>1</sup> updated its guidance, “*Pandemic Preparedness in the Workplace and the Americans with Disabilities Act*,” in response to the COVID-19 pandemic. Therein, the EEOC suggests that employers may require vaccination of employees so long as the employer considers the need for accommodations based upon an employee’s disability and sincere religious beliefs.

More specifically, the EEOC has taken the position that COVID-19 is a “direct threat” to health or safety in the workplace. In addition, The EEOC update in response to the COVID-19 pandemic states:

**“\*NOTE ABOUT 2020 UPDATES: The EEOC is updating this 2009 publication to address its application to coronavirus disease 2019 (COVID-19). Employers and employees should follow guidance from the Centers for Disease Control and Prevention (CDC) as well as state/local public health authorities on how best to slow the spread of this disease and protect workers, customers, clients, and the general public. The ADA and the Rehabilitation Act do not interfere with employers following advice from the CDC and other public health authorities on appropriate steps to take relating to the workplace.” (underlining added for emphasis):**

### Compliance with the Americans with Disabilities Act: Accommodating Disabilities and Sincere Religious Beliefs

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

**Americans with Disabilities Act (ADA):** In general, the ADA

# Of Professional Interest

requires employers to provide a “reasonable accommodation”<sup>4</sup> and non-discrimination based on disability. It also provides rules and limitations on employer medical examinations and inquiries related to an employee’s disability.

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

- Risk to substantial harm to the health and safety of others (including other staff members and patients);
- Whether the pre-vaccine measures such as masks, social distancing, shields, etc. are still effective;
- If the pre-vaccine measures are no longer effective, the dental practice should document how they are no longer effective and consider job-adjustment, reassignment, or unpaid leave;
- The dental practice should document if an accommodation creates an “**undue hardship**”<sup>4</sup> on the practice and describe the factors and analysis in detail<sup>5</sup>.

If an individual with a disability poses a “**direct threat**”<sup>6</sup> despite reasonable accommodation, he or she may not be protected by the nondiscrimination provisions of the ADA. The employer should conduct an individualized assessment of four (4) factors in determining whether an unvaccinated employee poses a “direct threat” to the workforce and patients.

1. The duration of the risk;
2. The nature and severity of the potential harm;
3. The likelihood that the potential harm will occur; and,
4. The imminence of the potential harm.

Assessments of whether an employee poses a “**direct threat**” in the workplace must be based on objective, factual information<sup>7</sup>, “*not on subjective perceptions . . . [or] irrational fears*”<sup>8</sup> about a specific disability or disabilities. A conclusion that there is a “**direct threat**” would include a determination that an unvaccinated employee will expose others to the virus at the worksite.

**Title VII of the Civil Rights Act of 1964:** Sincerely held religious beliefs<sup>9</sup> protected under Title VII of the Civil Rights Act of 1964 may entitle an employee to legally refuse mandatory vaccination.

The failure to reasonably accommodate a qualified individual based upon disability or religious beliefs can give rise to a discrimination claim. **Edwards v. Elmhurst Hospital**<sup>10</sup> is a cautionary tale for employers in mandating vaccinations of employees. In that case, a health care worker brought a discrimination action against his employer for discrimination under Title VII based upon his refusal to take the H1N1 Flu vaccine as required by his employer on religious grounds. The employer

took disciplinary action against the employee based upon the refusal. Ultimately the case was dismissed, but not before the court found that the employee had a bona fide religious belief.

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

### **Other Legal Considerations:**

- NYS and local employment regulations;
- Whether the employees are “at-will” or are the employees covered by a collective bargaining agreement/contract;
- Whether the workforce include independent contractor dentists?
- Paid time-off for vaccinations;
- Verification of vaccination: This should be limited to employee name and whether the vaccination has been administered.

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

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

### **Development of an Employee Vaccination Policy Now:**

Whether mandatory or voluntary, it is important that as an employer you develop an employee vaccination policy now. Such a policy will provide your employees with guidance on vaccination expectations in the work environment. The existence of such a policy also helps protect the dental practice against claims of failing to take action to prevent COVID-19 exposure (whether workers compensation or negligence).

*(continued on page 14)*

# Of Professional Interest

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

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

*Al Anthony Mercado, Esq. is the Managing Attorney for the Downstate Regions of Fager Amsler Keller & Schoppmann, LLP and has been practicing in the field of healthcare law for almost 30 years.*

The Law Firm of Fager Amsler Keller & Schoppmann, LLP ("FAKS") are counsel to MLMIC Insurance Company. FAKS attorneys perform thousands of hours of professional liability services per year and are uniquely qualified to assess medical-legal issues and provide counsel to minimize liability exposure.

1. The EEOC enforces workplace anti-discrimination laws, including the Americans with Disabilities Act (ADA) and the Rehabilitation Act (which include the requirement for reasonable accommodation and non-discrimination based on disability, and rules about employer medical examinations and inquiries), Title VII of the Civil Rights Act (which prohibits discrimination based on race, color, national origin, religion, and sex, including pregnancy).
2. The EEOC March 2020 update should be read by employers in conjunction with discussion with employment counsel before any vaccination policy is developed and put into action. <https://www.eeoc.gov/laws/guidance/pandemic-preparedness-workplace-and-americans-disabilities-act>
3. A "reasonable accommodation" is a change in the work environment that allows an individual with a disability to have an equal opportunity to apply for a job, perform a job's essential functions, or enjoy equal benefits and privileges of employment. 29 C.F.R. pt. 1630 app. § 1630.2(o)
4. An accommodation poses an "undue hardship" if it results in significant difficulty or expense for the employer, taking into account the nature and cost of the accommodation, the resources available to the employer, and the operation of the employer's business. 42 U.S.C. § 12111(10)
5. <https://www.eeoc.gov/laws/guidance/enforcement-guidance-reasonable-accommodation-and-undue-hardship-under-ada#undue>
6. A "direct threat" is "a significant risk of substantial harm to the health or safety of the individual or others that cannot be eliminated or reduced by reasonable accommodation." 29 C.F.R. § 1630.2(f)
7. Employers should rely on the latest CDC and state or local public health assessments.
8. 29 C.F.R. § 1630.2(f)
9. The requirement to accommodate does not require accommodation of personal beliefs that do not rise to the level of sincerely held religious beliefs (e.g., vaccine-aversion for other, non-medical personal reasons, personal doubt as to the existence or severity of COVID-19 infection, etc.).
10. 11 CV 4693 RRM LB, 2013 WL 839535, (E.D.N.Y. Feb. 15, 2013)



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## Ethics During the Pandemic

Steven H. Cho, DDS

Ethics Committee Chair



Imagine you are a 65-year-old dentist with Type I diabetes. You just received your second dose of the COVID-19 vaccine one week ago, but your assistant has not yet been vaccinated. Your long-term patient calls you one evening complaining of a severe toothache, which has gone unrelieved with pain medication and is now starting to develop mild submandibular swelling. Before the conversation ends, your patient tells you that he just tested positive for COVID-19 and has developed a 100-degree fever. He claims he is unable to tolerate the pain and wishes to see you as soon as possible.

This scenario surfaces a couple of questions:

**What is your ethical responsibility to self and others?**

**What is your priority on protecting both patients and your staff?**

The COVID-19 pandemic has affected us all, in different ways and to varying degrees. This infectious disease has proven to spread more rapidly than our healthcare resources can handle at times. The number of cases currently reported in the US is 28 million, but this number continues to rise.

The virus can be transmitted through coughing, sneezing, and direct contact-transmission. It was reported that dental professionals have the highest infection potential among all healthcare professionals due to the inevitable close contact with patients and direct exposure to their secretions, saliva, and aerosols. This makes dental offices a hotspot for viral transmission, putting dentists, staff members, and patients at high risk of SARS-CoV-2 infection.

**This brings us back to the initial questions: What are our responsibilities when it comes to treating patients with COVID-19? Do dentists have the right to refuse treatment to a COVID-19 positive patient or do we have a professional duty to provide treatment regardless?**

In these times, every patient has to be considered potentially contagious. As the pandemic remains a threat to the health of all individuals and communities, it is important to be cognizant of this fact. To maximize protection and to reduce the chance of transmission, all treatments should be performed following proper infection control measures. In my experience, PPE

has done an adequate job of preventing exposure and limiting spread. In addition to wearing PPE, it is essential to appropriately triage patients to ensure the utmost safety for all persons involved, including healthcare professionals and their staff.

Ideally, both patients and dental professionals should be tested for COVID-19 prior to dental treatment. Testing symptomatic individuals, in particular, is critical because early diagnosis and supportive treatment are in the best interest of healthcare providers and patients alike. Most of the spread is thought to result from actively symptomatic patients.

As implied earlier, the COVID-19 pandemic has raised difficult ethical and legal questions regarding access to dental care. Remembering the four principles of ethics (autonomy, beneficence, nonmaleficence, and justice) should guide dentists in making tough decisions when reflecting on moral issues that arise at work, especially during this pandemic.

The ADA Code of Ethics directs dentists to “have the benefit of the patient as their primary goal.” We have a duty to act in the best interest of our patients (beneficence) while respecting their dignity and personal choices (autonomy). Human dignity is one of the most vital values to preserve during this difficult and uncertain time. And in accordance with the principle of justice, dental treatments should be provided regardless of a patient’s age, sex, ethnicity, color, place of residence, and social or economic status.

Society has the right to uphold healthcare professionals to the highest of standards when it comes to providing support and care to fulfill a patients’ needs and to improve their quality of life. But as healthcare professionals, family members, spouses, and individuals ourselves, we also have a duty and the right to balance the commitment to our patients with the commitment to protecting the lives of our loved ones, dental team, and ourselves. To provide the best long-term support and treatment to others dental professionals must take care of their own safety, health, and wellbeing, although this may come into direct conflict with their moral duty to patient care.

It cannot be ignored, however, that dental professionals, like the rest of the population, also face the same threat of becoming infected, which may even prove fatal. If care is refused, widespread condemnation from the public and other health professionals may transpire. But according to the core bioethical principles, dental professionals have the right to judge whether to provide or refuse treatment to a COVID-19 patient based on

the distinct situation at hand as these far from normal times force professionals of all kinds to consider the consequences of their actions on themselves and others in their lives more acutely. It is thus ethically justified to choose to re-schedule or cancel elective procedures. We should, however, be available to manage any urgent/emergency needs.

There are several circumstances in which it is acceptable to withdraw or refuse care. One situation is if a dental professional is currently suffering from an infectious disease that could potentially be passed on to patients and colleagues. It is critical to avoid putting others at an increased risk. Furthermore, if a dentist has an underlying condition that weakens his or her immunity, this could preclude him or her from working with patients diagnosed with COVID-19. High risk conditions that may significantly jeopardize one's survival after contraction of the virus include diabetes, cardiac issues, pregnancy, and ages over 60. A lack of essential personal protective equipment in one's work environment also significantly puts professionals at risk.

As is the case for many difficult ethical questions, there is no single straightforward answer. Each case should be carefully assessed and considered on an individual basis. Are you the 65-year-old diabetic dentist from the opening scenario or are you someone else? As said by British writer Damian Barr, "while we're not in the same boat, we're all going through the same storm." It's a quote that should remind us that each dental office is unique in managing and navigating through this pandemic. We are all morally inclined and committed to providing the best support and care, but we do not all have the same backgrounds, stories, and health histories. While healthcare providers have a moral obligation to assist others and provide services during this pandemic, society should understand that those who defer their dental or medical responsibilities due to their own personal health risks or extenuating family circumstances at this time are still trying their best to care for a great number of people in and out of office.

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[NYSDA Code of Ethics](#)

[ADA Principles of Ethics and Code of Conduct](#)

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## CHEW ON THIS!



*Chew on This! is an occasional addition to Dentists' Quarterly written by an anonymous dentist and it is meant to be lighthearted. We hope you can have a laugh and relate at the same time.*

### Most Common Excuses for Missing or Arriving Late to an In-Office Interview

During these times, my colleagues and I are so grateful for our hard working staff. However, finding new or replacement staff has been very difficult. This is a compilation of explanations myself and colleagues have received from potential employees who show up late or no-show to their interviews.

1. I forgot
2. I did not have your number
3. I could not find your office (despite address and cross streets provided at time of phone interview)
4. Not answering or phone number is out of order
5. I lost my phone
6. I decided \$30/hr is my fair market value (despite zero experience in healthcare or dentistry)
7. I decided to take time to find myself and am no longer looking for work
8. I had to move suddenly to [insert city or country]
9. Neighbor/relative/barber was hit by a car
10. I was hit by a car

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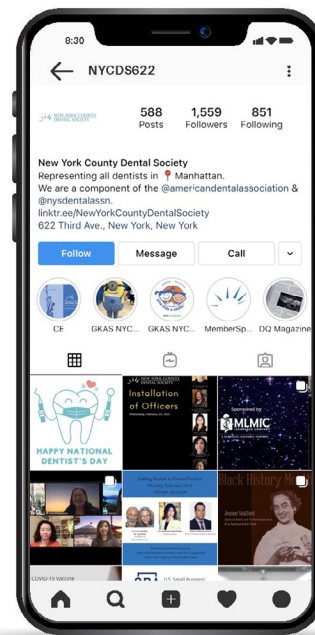
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