

Kami Dornfeld, DDS

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Newsletter Volume 13, Issue 3, Winter 2022

Greetings fellow NDDA members,

I hope you have been enjoying a nice fall season here in North Dakota. It's hard to believe summer has come and gone, and we are well into the school year already with winter knocking on our door! This time of year brings some of the most import aspects of the NDDA into play. Annual renewals!

Becoming more involved with organized dentistry has taught me the importance of membership. As a young dentist, I thought membership consisted of CE opportunities and being a part of an organization that was able to put a "seal of acceptance" on oral health products. Little did I know that my membership dollars went far beyond the CE opportunities.

Keeping membership numbers high and at a certain percent, the ADA, as well as the NDDA have a strong and respected voice with elected officials, regulatory agencies, and even the media at times. Without this unified voice, it will become difficult to make strides at improving aspects of our profession. Insurance reform being one of them.

Politics and insurance are only small pieces of the pie when it comes to membership. CE is another small piece of the pie. Have you ever spent time on the ADA website? There is a ton of information and resources within their website, and what will soon be the new ADA member app.

Have you ever wondered why you can buy a bur from any manufacturer and it fits in any of your hand-pieces even if they are different manufacturers? That is the standards committee within the ADA. They set standards that the supply, equipment, and oral hygiene companies must follow in order to distribute/sell their products.

As you can see, there are so many other things membership dollars do for our profession. The entire goal of organized dentistry is to help members succeed, we can do more together! Within ND, our endorsed partners alone are worth your membership dues. All our endorsed partners are included in this newsletter. Please check them out if you haven't already. I promise they can save you money!

One last plug, as the incoming chair of DWAC (Dental Health and Wellness Advisory Committee) for the American Dental Associations Council on Dental Practice, I wanted to share an update to resolution 95H- (Prioritizing the Mental Health of Dentists). This resolution came from the 2021 House of Delegates in Las Vegas at the ADA annual session. It is no secret dental careers can be stressful, as well as hard on our bodies. The last few years with stress from the COVID pandemic have made us even more aware of how serious mental health issues are within our profession. The ADA has compiled a comprehensive list of resources available to anyone who may need them. It can be found here (https://www.smilenorthdakota.org/member-center/health-and-wellness).

Take care and please reach out to myself or the central office with any questions. And please consider renewing your membership early as the renewals will be going out soon if not already!

Sincerely,

Kami Dornfeld, DDS

NDDA President Flect

- OUR VISION -

"We will be the voice that protects the interests of dentistry to uphold the highest standards of our profession."

NDDA MIDWINTER Meeting



Kelley Johnson

KELLEY JOHNSON is an accomplished dental educator whose work is focused on helping practices all over North America optimize their performance. She has extensive influence, and over 24 years of experience leading others thru change, operational transformation, and technology implementation. Aside from helping others achieve their level of excellence, Kelley is well known for her ability to connect and build lasting relationships. She is often heard saying "Being a part of this industry and not only watching practices become more profitable but seeing how others develop a true joy for their daily work is such a privilege". From the upper Midwest, Kelley is passionate about spending time with her friends and family or can be found "trying" to golf on occasion. Prior to becoming a manager of education and practice growth, Kelley was a Technology Advisor at Patterson Dental and served on several advisory councils/elite project groups. Taking the customer experience to the next level is the heartbeat of what you can expect when working with Kelley.

Thursday, January 19, 2023 - 6:30 p.m. - 9:30 p.m.

INFECTION CONTROL PLUS BLOODBORNE PATHOGENS

Sponsored by: Erickson Dental Technologies

OSHA requirements include an annual retraining session for all employees. This course will help fulfill these requirements & will update participants on the latest from OSHA, including the Globally Harmonized System (GHS) for Hazard Communication. The course also covers the Bloodborne Disease Pathogens Standard and the Centers for Disease Control & Prevention Infection Control Guidelines for Dentistry. Other topics include requirements in the areas of fire, noise, ventilation, egress, ionizing radiation and workplace violence.

REGISTER NOW!



JANUARY 19 - 20, 2023 BISMARCK, ND

The Mid-Winter Meeting is quickly approaching. REGISTRATION is available online. Join us in Bismarck at the Radisson Hotel. "Infection Control plus Bloodborne Pathogens" (3 CEs) by Kelley Johnson will be offered Thursday evening followed by Dr. Lundon Albrecht presenting "Innovative Ways to Upgrade Everyday Dentistry" (6 CEs) on Friday.

For more information, please visit the NDDA website at https://www.smilenorthdakota.org/meetings-events/mid-winter-meeting

NDDA MIDWINTER Meeting (continued)



Dr. Lundon R Albrecht

DR. LUNDON R. ALBRECHT attended The Ohio State University College of Dentistry. Dr. Albrecht has an innovative mind and is constantly seeking ways to improve dentistry for the patient and the dentist. He has lectured internationally to dentists regarding cosmetic and restorative dentistry. He received his Fellowship in implants from the International Dental Implant Association and is a member of the Ohio Dental Association, American Dental Association®, American Academy of Oral Medicine and the Northeastern Ohio Dental Society

Friday, January 20, 2023 - 8:00 a.m. - 4:30 p.m.

INNOVATIVE WAYS TO UPGRADE EVERYDAY DENTISTRY

Sponsored by: Coltene

As dental materials continue to evolve, so should our restorative techniques. From injection molding restorations to simplified bonding to tricky black triangles, learn innovative ways to upgrade everyday dentistry! Also learn how minimal invasive and biomimetic approaches can provide longer lasting restorations and how composite veneers can be done faster to increase patient comfort and reduce chair time without compromising performance.

SYNOPSIS:

- One quick treatment
- Reduced chair time
- Consistent and predictable results
- Greater profit
- Same-day results
- Happier patients due to a more premium experience

COURSE OUTLINE:

- Direct composite veneer applications
- Cosmetic mock-up and shade selection
- Temporaries during porcelain veneer creations
- All Class 3, 4 & 5 restorations
- Misaligned teeth not requiring orthodontics
- Peg laterals
- Composite crowns
- Abraided/Grinding teeth
- Discolored teeth

LEARNING OBJECTIVES:

- Innovative ways to upgrade everyday dentistry
- Injection Molding to combat microleakage and improve posterior restorations
- Simplify same-day cosmetic bonding



A new day ATTHE ADA



Scott L. Morvison, DDS, MS

Greetings to my North Dakota colleagues.

My American Dental Association (ADA) Trustee duties have kept me extremely busy and have taken me on significant travels since I was last in contact with all of you. I must first apologize for missing the North Dakota Dental Association's annual meeting in September which conflicted with the aforementioned travels.

One of my ADA Trustee liaison assignments is to serve as an ADA delegate to the Federal Dentaire Internationale World Dental Federation (FDI), an association that represents more than one million dentists and 200 dental association's worldwide. FDI is the global voice of the dental profession, working with its members to raise awareness about the importance of good oral health and the vital role oral health plays in securing overall health and well-being. FDI is dedicated to safeguarding the health of people worldwide through the improved prevention,

treatment, and control of oral diseases. The 2022 World Dental Congress was held in Geneva, Switzerland. One of the responsibilities of the ADA delegation is to review policy statements created by FDI committees that range from Sports Dentistry to unique diseases such as NOMA, a facially disfiguring disease of periodontal origin not seen in the United States since the 1920s but prevalent in sub-Saharan regions. These policies are reviewed and evaluated to ensure they are not in conflict with ADA policies and current evidence based science. It is important for the ADA to participate within FDI as FDI serves as an avenue to connect to the World Health Organization; the importance of which was seen with the most recent pandemic and the need for dentistry to be recognized as essential health care.

Much like the ADA House of Delegates, the FDI World Dental Congress deals with its own governance issues and election of officers, counselors and committee members; which correlate with ADA officers, trustees and council members.

One of the highlight social events associated with the FDI World Dental Congress was a reception hosted by the ADA for all of the international delegates. What a thrill it was to meet dentists from around the world; myself speaking with delegates from Australia, the Bahamas, the United Kingdom, Japan, Germany, France, Tanzania, and Zimbabwe. While operatory procedures and oral health care concerns in some countries closely mirror those in the United States; other countries are faced with more basic problems such as clean water and adequate food before they can get to the dental concerns of their patients. I am reminded how lucky we are, but also of the many things that we take for granted.

My next travel was to Houston, Texas to attend SmileCon 2022 and the ADA House of Delegates. Smile Con is the newly reformatted ADA Annual Meeting; not the same old dental meeting that many of us have attended in the past. While SmileCon still offers continuing education and a vendor exhibition hall, there are more opportunities to network with colleagues and team members on a variety of issues and interests including Financial Health, Wellness, Community Service, Health Equity and Diversity and Inclusion. SmileCon 2023 will be held October 5 through 7, 2023 in Orlando, Florida. Consider attending and bringing your family.

Two historic events took place during SmileCon 2022 and the 2022 ADA House of Delegate. The first event took place during SmileCon 2022, when the ADA launched the ADA member app, designed to provide smart phone access for all ADA services and benefits to member dentists. The app was developed with member input and will continue to improve with member use. This app can be customized to reflect the wants and needs of individual ADA member dentists. I encourage all of you to download the ADA member app and start customizing it to fit your needs.

A new day ATTHE ADA Continued

The second historic event was a change in ADA governance passed by the 2022 ADA House of Delegates. The ADA will now use Strategic Forecasting to map out its future with an ability to make timely changes through constant evaluation. Strategic Forecasting will be carried out by four action groups consisting of Dentist Customer, Tripartite Customer, Professional Customer and Enterprise, populated by ADA member dentists who will keep the organization current with fresh ideas. Those ideas will be referred to the Strategic Forecasting Committee for consideration and approval by the ADA Board of Trustees and the ADA House of Delegates. I have been selected as one of four ADA Trustees to serve on the Strategic Forecasting Committee. My ask to each of you is to let me know if you have a desire to serve on one of the four Strategic Planning action groups. I can tell you that such a commitment will not require extraordinary amounts of travel or time, as Microsoft 365 will be used to ensure that the flow of input and information is constant and up to date.

In closing, I want to wish each of you and your families a Happy Thanksgiving. We have much for which to be thankful, including a profession that allows us to help people improve their oral health and an organization that helps us to protect the practice of dentistry. And I am thankful that each of you supports dentistry and the ADA through your membership.

Respectfully submitted,

Scott L. Morrison, D.D.S., M.S.

District 10 Trustee American Dental Association



IMPORTANT HOLIDAY SHIPPING DATES

The holidays are here! Let UPS® help you prepare and manage your shipments so they arrive as expected. Here are a few tips to help you during this peak shipping season:

- Download or bookmark the 2022 Year-End Schedule from <u>ups.com/holidays</u>
- · Use the schedule to answer questions about holiday season shipping, services and recommended ship by dates.
- Sign up for a new account or <u>login</u> to your existing account to ensure you are taking advantage of your ADA UPS® Savings Program discounts.

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ADA DELEGATE Report

Dr. George R Shepley of Baltimore was installed as the 159th President of the ADA. Linda Edgar of Federal Way, Washington was elected President Elect and David Manzaneres of Albuquerque, NM was elected 2nd Vice President. Mark Donald was re-elected as Speaker of the House.

Dr. Shepley, in his address reminded us that our strategic plan did not expect or take into account a global pandemic but talked about how the ADA has responded. He plans to lead the ADA "daringly" toward success.

Dr. Ray Cohlmia, ADA Executive Director, prior to the HOD introduced the concept of the Strategic Forecasting Committee which was voted on and passed by resolutions 205 and 206. This established the development of the SFC which will evaluate our current business model and determine how to improve ADA processes on an ongoing basis to allow for quicker responses to the needs of our ever changing association. It will be primarily made up of ADA Delegates and will act on behalf of the HOD. The idea is that opposed to our current Strategic plan which is updated and approved every 5 years, the SFC will adjust the Strategic Plan on the fly allowing the HOD and staff to address needs as they arise and refocus when necessary. Another component of these two resolutions was turning the budget over to the Board of Trustees. Testimony was limited as the resolutions were well put together and both passed on consent.

Resolution 302 was passed which gives ADA lobbyists a framework to argue against misleading use of provider scorecards by third party payers. Much testimony was given & a modified reference committee version passed on consent.

As usual, there were many resolutions dealing with policy updates & reviews which passed mostly on the consent calendar.

The budget was approved and dues for 2023 will be \$600.

Our district was represented by Dr. Otto Dohm (delegate), Kami Dornfeld (alternate delegate) and Paul Tronsgard (delegate). I want to thank them and Will Sherwin our Executive Director for their many contributions to the success of our 10th District Caucus. As a point of personal privilege, this was my last session as a delegate and I want to thank the NDDA HOD for allowing me to serve on your behalf – it's been an honor and an experience I will always remember fondly.

Respectfully submitted,

Paul J. Tronsgard, DDS

Paul J. Tronsgard, DDS NDDA Delegate to the ADA

From Left to Right
Dr. Otto Dohm,
William Sherwin,
Dr. Paul Tronsgard,
Dr. Kami Dornfeld



PRESTIGIOUS LEADER Award



Dr. Brent Holman

Dr. Brent Holman Wins Prestigious Leader Award

Dr. Brent Holman was elected the International College of Dentists Outstanding Leader for 2022 by the Board of Regents on April 21st at the International College of Dentists USA Section Spring Meeting in Orlando, Florida. Dr Holman received this prestigious award at the Annual ICD/USA Section meeting and convocation in Houston, Texas in October 14, 2022. Dr.Holman is the only the 17th ICD Fellow to receive this award.

The USA Section of the International College of Dentists is part of the preeminent honor society for dentists in the world and the only one of its kind. The ICD was conceived in 1927 by Dr. Louis Ottofy and Dr. Tsurkiishi Okumura from Japan at the 7th Annual International Dental Conference in Philadelphia. The ICD has 10,000 members world wide in 122 countries There are 1.6 million dentists in the world and about 200,000 dentists in the US. There are about 6300 ICD fellows in the USA Section.

The International College of Dentists recognizes and promotes excellence in leadership with an emphasis on service, provides support to our Fellows and respect for our peers, addresses oral health needs and education throughout the world, and fosters an atmosphere of collaboration with those who share our core values: Integrity, Leadership and Service with is motto of "Serving Others"

The ICD/USA Section Outstanding Dental Leader Award is reserved for the EXCEPTIONAL leaders in dentistry. An exceptional leader is defined as one who, in the face of overwhelming and seemingly insurmountable difficulties, is able to craft exceptional and creative opportunities. Nominees for the Outstanding Dental Leader award should meet at least one of the first three criteria below: Dr. Holman meets all the criteria.

- 1. Epitomizes the highest ideals of professional ethics and conduct, with a commitment to the promotion of quality, accessible dentistry to the world's populace.
- 2. Continuously and selflessly dedicates herself/himself to providing aid to those unable to help themselves due to financial, physical, or mental capabilities.
- 3. Demonstrates extraordinary and meritorious leadership and dedication to the advancement of our profession, including but not limited to the active practice of dentistry, dental research, dental education, public health, dental administration, or organized dentistry.

Dentist Opportunity Available!



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Our philosophy at Kemmet Dental Design is to help our patients enjoy their smiles for a lifetime. Our proactive rather than reactive approach utilizes best practices in dentistry and medicine as well as utilizing modern technology to achieve the best outcomes for our patients. This approach gives our patients the full range of dentistry available from basic care to modern extensive surgical and restorative techniques.

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WELL-CHILD VISITS AND FLUORIDE VARNISH

Article submitted by: Bobbie Will - Policy & Partnership Manager - Community HealthCare Association of the Dakotas

Dental decay is the most common chronic disease in children affecting nearly a quarter of U.S. children ages 2-5 and more than half of the children ages 6 to 8 years. The U.S. Preventive Service Task Force (USPSTF) recommends that primary care clinicians apply fluoride varnish to the primary teeth of all infants and children starting at the age of primary tooth eruption. The USPSTF and American Academy of Pediatrics recommend fluoride varnish application to be considered every 3-6 months during well-child visits. Fluoride varnish is a protective coating painted on teeth to help prevent caries (cavities), requires no special equipment, and can be applied by a trained health care provider in less than two minutes.

Tooth decay is almost 100% preventable. Preventing painful tooth decay improves the quality of life and overall health of children who receive fluoride varnish treatments. The integration of oral health care into primary care has been promoted as a strategy to increase the delivery of preventive oral health services to young children.4 In 2019, 89% of children younger than 6 years had a preventive medical visit, and fewer than 8% of Medicaid-enrolled children received fluoride varnish in a medical setting. ^{3,4} In 2021, 7.6% of North Dakota Medicaid-enrolled children received fluoride varnish from a non-dental provider in a medical setting. In 2015, the Affordable Care Act required private insurance coverage and state Medicaid plans to cover fluoride varnish through age 5 and bill CPT 99188. Check with your insurer to verify fluoride varnish coverage.

In 2007, North Dakota passed legislation allowing health care providers (physicians, physicians's assistants, nurse practitioners, registered nurses, and licensed practical nurses) to assess oral health and apply fluoride varnish to help prevent tooth decay for children ages birth through 20 years. The North Dakota Board of Dental Examiners approved training to apply and bill for fluoride varnish in primary care settings in North Dakota. The Smiles for Life module 6 training is free and is accepted as a continuing education hour by most primary care professional boards.

Drs. Lunn and Nord at Spectra Health and other North Dakota physicians are focusing on preventing caries in children during well-child visits. Drs. Lunn and darNord say, "Many children do not have regular access to oral health care from a dentist but have access and regular care through medical clinics. Please consider implementing oral health education and fluoride varnish application during your oral health assessment during well-child visits. We are participants in the North Dakota Oral Health Coalition. One of our goals is to encourage and assist primary care providers in North Dakota to implement oral health assessment, application of fluoride varnish, and referral to a dentist in every clinic in the state." Please see the Oral Health Coalition website at ndohc.org for further information.

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DENTAL PROGRAMS DIRECTOR

Fulltime, 12-month Benefited Position

JOB DESCRIPTION: Dakota College at Bottineau (DCB) is seeking applicants for the Dental Programs Director position. The Dental Program Director is responsible for the administration, planning, implementation, evaluation and revision of policies and curriculum of the dental programs at the CTE in Minot and clinical affiliation sites. Some of these duties inherent to this position include, but are not limited to:

- 1. Facilitates learning, learner development and socialization in the classroom, laboratory, and clinical environments.
- 2. Assessment and evaluation of courses and programs.
- 3. Develops, implements, evaluates, & revises the program policies and curriculum using continuous quality improvement.
- 4. Assists in the promotions and marketing of dental programming.
- 5. Hires, trains, and supervises faculty and staff.
- 6. Coordinates academic advisement and guidance of allied dental program students.
- 7. Participates in the development, implementation, evaluation and update of admission, progression, retention, and graduation requirements.
- 8. Participates in, networks within, and supports activities of the allied dental programs, college, & community agencies.
- 9. Instruction of courses or labs, as needed.

POSITION LOCATION: DCB CTE Center, Minot, ND

REQUIRED QUALIFICATIONS:

- 1) Holds a master's degree or higher in the discipline or closely related field OR hold a master's degree with 18 graduate credits in the discipline or closely related field.
- 2) Minimum of three years of prior dental hygiene clinical practice experience.
- 3) Experience in teaching and knowledge of learning principles for adult education, including dental curriculum development, administration, and evaluation.
- 4) A current knowledge of dental assisting and dental hygiene practice at the certificate or associate degree level or as otherwise approved.
- 5) Maintains a current unencumbered North Dakota Registered Dental Hygienist (RDH) license.
- 6) Maintains a National Certified Dental Assistant (CDA) certificate.
- 7) Excellent oral, written, and interpersonal skills.

ADDITIONAL REQUIREMENTS: Successful applicant will be required to pass a criminal background check prior to employment.

SALARY: Commensurate with experience.

CLOSING DATE: Screening of applicants will begin October 17, 2022, and continue until a qualified candidate is hired.

DATE AVAILABLE: January 3, 2023

APPLICATION PROCEDURE: Submit a letter of application, a resume or curriculum vitae, college transcripts, and the names and telephone numbers of three professional references to Vonda Berg – <u>Vonda.berg@dakotacollege.edu.</u>

Dakota College at Bottineau is an Equal Opportunity Employer.

Veterans claiming preference must submit all proof of eligibility by the closing date. Proof of eligibility includes a DD-214 and, if claiming disabled status, a current letter of disability.



HEALTH ALERT NETWORK | HEALTH ADVISORY | Nov. 1, 2022

Nontuberculous *Mycobacteria* Infections – Dental Water Source

The North Dakota Department of Health and Human Services (HHS) is providing this information from the Centers for Disease Control and Prevention (CDC) to dental and medical providers in North Dakota for awareness.

HHS encourages dental providers to review protocols and procedures to maintain safe water supplies and reduce the risk for infections following dental procedures.

We are asking providers to report post-procedure invasive infections due to nontuberculous Mycobacteria.

Reports can be made by calling 1-800-472-2180 or 701-328-2378.

Questions regarding reporting or infection prevention policies & procedures can be directed to the HHS using the same phone numbers.

This is an official **CDC HEALTH ADVISORY**

Outbreaks of Nontuberculous Mycobacteria Infections Highlight Importance of Maintaining and Monitoring Dental Waterlines

Distributed via the CDC Health Alert Network October 31, 2022, 1:00 PM ET **CDCHAN-00478**

The Centers for Disease Control and Prevention (CDC) is issuing this Health Alert Network (HAN) Health Advisory to emphasize the importance of following existing recommendations for maintaining and monitoring dental waterlines. Multiple outbreaks of nontuberculous Mycobacteria (NTM) infections have occurred in children who received pulpotomies in pediatric dental clinics where the dental treatment water contained high levels of bacteria. CDC provides guidelines on infection control in dental settings which contain recommendations to treat dental unit waterlines and monitor water quality. Dental providers should be familiar with these recommendations on how to properly maintain and monitor their dental equipment to ensure that dental treatment water is safe for patient care.

Background

While rare, there have been multiple documented cases of disease transmission from dental unit waterlines (narrow-bore plastic tubing that carry water to the high-speed handpiece, air/water syringe, and ultrasonic scaler).¹⁻⁵ Dental units have unique characteristics that make them prone to biofilm formation.6 Biofilms occur in dental unit waterlines due to the long, small-diameter tubing and low flow rates used in dentistry and the frequent periods of stagnation. As a result, high numbers of common waterborne bacteria can be found in untreated dental unit water systems. Disease-causing microorganisms found in untreated dental unit water can include Legionella, Pseudomonas aeruginosa, and nontuberculous Mycobacteria (NTM).

Dental providers and patients could be placed at risk of adverse health effects if dental unit water is not appropriately treated. In March 2022. CDC was notified of a new cluster of suspected NTM infections in children following dental procedures at a pediatric dental clinic. Investigation into this cluster is currently ongoing, and preliminary site visit data report that dental unit waterline testing results showed microbial counts much higher than the level recommended by CDC.

In 2016, an outbreak occurred at a pediatric dental clinic in Orange County, California, with 71 patients identified as having odontogenic NTM infections following pulpotomy procedures. Municipal water stored in a pressurized bladder holding tank was used to fill the dental unit water bottles. The clinic was not using disinfectants on their dental unit waterlines or regularly monitoring water quality. All water samples tested from the dental units showed microbial counts higher than the level recommended by CDC and multiple species of NTM were identified in syringe water samples from five of the six treatment rooms. In 2015, 24 cases of odontogenic NTM infections were reported in children receiving pulpotomy treatment from a pediatric dental clinic in Georgia. Investigators from the Georgia Department of Public Health found that municipal water was used during dental procedures, the clinic was not using a disinfectant in their dental unit waterlines, and the clinic was not regularly monitoring the water quality as recommended by CDC. Microbial testing of the water samples taken from the dental units showed very high microbial counts of Mycobacterium abscessus. The M. abscessus isolates recovered from the water were found to be identical to eight isolates from tissue samples from seven of the patients, suggesting that water was the source of the infections.

The outbreaks in California and Georgia involved young children, with ages ranging from 4 to 8 years. Many of the children developed severe infections with clinical diagnoses such as cervical lymphadenitis and mandibular or maxillary osteomyelitis, and required

hospitalization, treatments such as intravenous antibiotics, and surgical procedures. Complications from their infections included permanent tooth loss, hearing loss, facial nerve palsy, and incision fibrosis. Because of the potential to form biofilm, CDC recommends that all dental unit waterlines be treated regularly with disinfectants to meet the Environmental Protection Agency (EPA) regulatory standards for drinking water (i.e., ≤500 colony forming units (CFU)/mL of heterotrophic water bacteria).⁷ There are many commercial products and devices available to disinfect and maintain dental unit waterlines. Dental unit water quality must also be monitored routinely as recommended by the equipment manufacturer to ensure that treatments are working effectively and that the water used in dental procedures meets safety standards.⁶ Dental providers should consult with the dental equipment manufacturer for appropriate methods and equipment to both maintain and monitor the quality of dental water. Oral surgical procedures involve the incision, excision, or reflection of tissue that exposes the normally sterile areas of the oral cavity. Examples include biopsy, periodontal surgery, apical surgery, implant surgery, and surgical extractions of teeth (e.g., removal of erupted or nonerupted tooth requiring elevation of mucoperiosteal flap, removal of bone or section of tooth, and suturing if needed). During oral surgical procedures, dental practitioners should use only sterile solutions as a coolant or irrigant using an appropriate delivery device, such as a sterile bulb syringe, sterile tubing that bypasses dental unit waterlines, or sterile single-use devices.

Recommendations for Dental Providers

- For all oral surgical procedures, use sterile saline or sterile water as a coolant or irrigant for surgical procedures. Appropriate delivery devices can include:
 - o bulb syringe,
 - o sterile, single-use disposable products, or
 - o sterile water delivery systems that bypass the dental unit by using sterile single-use disposable or sterilizable tubing.
- For all non-surgical dental procedures, use water that meets CDC recommendations (i.e., ≤500 CFU/mL of heterotrophic water bacteria).
 - o For all non-surgical pulpal therapy & endodontic procedures, consider following more conservative recommendations from the following organizations which recommend irrigation with a sterile and/or antimicrobial solution:
 - the American Academy of Pediatric Dentistry (AAPD), Pulp Therapy for Primary and Immature Permanent Teeth
 - the American Association of Endodontists, AAE Position Statement on Vital Pulp Therapy, and
 - the Organization for Safety, Asepsis & Prevention (OSAP), Dental Unit Water Quality White Paper & Recommendations
- Consult with the dental unit manufacturer for appropriate methods and equipment to maintain the quality of dental water. Many commercial devices and procedures are available and designed for this purpose. 6
- Follow recommendations for monitoring water quality provided by the manufacturer of the unit or waterline treatment product.6
- Discharge water and air for a minimum of 20–30 seconds after each patient from any device connected to the dental water system that enters the patient's mouth (e.g., handpieces, ultrasonic scalers, and air/water syringes).
- Review the US Food and Drug Administration's (FDA) website on Dental Unit Waterlines for recommendations for dental practitioners.

Recommendations for Dental Facilities

- Ensure that the dental facility has an infection prevention plan that includes policies and standard operating procedures dedicated to maintaining and monitoring water quality.8
- Provide staff training on how to properly maintain and monitor dental water quality. Training should be based on the manufacturer's instructions for use of the products and devices used in the dental facility, provided for all new hires, and provided when new equipment is purchased and then at least annually.8
 - o Contact the manufacturer of the treatment product or device if you have questions about the instructions for use.
- Document all maintenance records, monitoring results, and employee trainings. Accurate record keeping is an important component of a dental infection prevention program, ensures proper protocols have been met, and establishes accountability. Records should be maintained according to state and federal requirements.8
- Report infections suspected to be associated with receiving health care, including dental care, to the appropriate public health authorities. CDC provides contact information for State Healthcare Associated Infections (HAI) Prevention Programs.

Recommendations for Medical Providers

• Consider an odontogenic source for cervical lymphadenitis or lymphadenopathy, and assess a history of dental care and procedures in all children presenting with lymphadenitis.

Recommendations for Health Departments

- During a healthcare-associated outbreak investigation of NTM infections of the head and neck region, assess patients for a history of recent dental treatment.
- Collaborate with <u>State Oral Health Programs</u> on investigations of healthcare-associated infections resulting from dental treatment.

Recommendations for the Public

- Contact your dental provider if you or your child develop an infection following dental treatment. Signs and symptoms of a postoperative dental infection could include a localized oral abscess, fever, or pain and swelling in the mouth or neck.
- Talk to your dental provider about their infection prevention and control practices and the steps their staff take to ensure safe treatment for all patients.

For More Information

- Guidelines for Infection Control in Dental Healthcare Settings 2003
- Dental Unit Waterlines (FDA)
- Policy on Infection Control (American Academy of Pediatric Dentistry)
- Dental Unit Water Quality: Organization for Safety, Asepsis and Prevention White Paper and Recommendations- 2018 (OSAP)
- <u>Summary of Infection Prevention Practices in Dental Settings: Basic Expectations for Safe Care</u>
- State-based HAI Prevention Activities
- Dental Unit Waterlines, Frequently Asked Questions
- Foundations: Building the Safest Dental Visit

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The Centers for Disease Control and Prevention (CDC) protects people's health and safety by preventing and controlling diseases and injuries; enhances health decisions by providing credible information on critical health issues; and promotes healthy living through strong partnerships with local, national and international organizations.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

HAN Message Types

- Health Alert: Conveys the highest level of importance; warrants immediate action or attention.
- Health Advisory: Provides important information for a specific incident or situation; may not require immediate action.
- Health Update: Provides updated information regarding an incident or situation; unlikely to require immediate action.
- Info Service: Provides general information that is not necessarily considered to be of an emergent nature.

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This message was distributed to state and local health officers, state and local epidemiologists, state and local laboratory directors, public information officers, HAN coordinators, and clinician organizations.

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OUR FUTURE OF DENTISTRY In North Dakota

Submitted by: Krista Johnson, DMD

Dr. Krista Johnson is a local practice owner in North Dakota, with Aspen Dental locations in Bismarck, Grand Forks, and Fargo. Born and raised in North Dakota, Dr. Johnson graduated from the University of North Dakota and went on to earn her DMD at Midwestern University in Arizona. She returned to North Dakota to raise her family and open her dental practice to address the persistent need for care in communities across the state.

As a proud native of North Dakota, it's a privilege to participate in this community of doctors committed to bringing high-quality, accessible dental care to the state we call home. Thank you for the chance to provide to you a little bit about myself and my partnership with a dental service organization.

I wanted to take this opportunity to introduce myself – Krista Johnson, DMD, business owner, ULCA adjunct faculty mentor, teacher, student, wife and mother. I grew up in Bismarck and graduated from Century High School before heading to UND for undergrad and later Midwestern University for my DMD. When my husband and I started our family, there was no other place we could imagine raising our kids, so we headed "home". Having a desire to give back to the community that shaped me and now my children, I decided to open my first dental practice and have grown that practice into three locations.

I'll address the elephant in the room before I go any further – I'm a local practice owner with Aspen Dental, a dental support organization with nearly 1,000 offices across the country independently owned by local practicing doctors. I know some of you may have strong reactions when you hear the term Aspen Dental or DSO, but hear me out –

I own all three of my offices and run them on my terms, just like you. One of the misconceptions about Aspen Dental and DSOs at large is that the doctors are just part of a big corporate machine. In my experience, the opposite is true. I'm empowered to run my offices around a high ethical standard by building my team and caring for patients the way I know is best, to create a workplace that I am proud of. Aspen Dental is committed to helping me do just that – supplying resources, providing training and professional development, and connecting me and my teams to other experts to work through clinical challenges.

There is a very real, tangible need for more dental practices in the state. As designated by the U.S. Department of Health and Human Services, 28 out of 53 counties in the state are dental health professional shortage areas. Not surprisingly, the number of walk-ins my office encounters on a daily basis averages about nine new patients a day. None of us can meet this high demand on our own. We need one another if we ever hope to make an impact and see our fellow community members and neighbors get the care they need. Another way I am trying to combat the shortage of dentists is by being on staff at UCLA and investing in D4 students on rotations to give them ample clinical experience, but also to get exposure for our state which in turn will hopefully get more professionals to move to the area. If any of you are interested in this opportunity, please reach out to me!

RENEW YOUR 2023 MEMBERSHIP

It's a new day for dentistry and you have the power to influence what's next. Your voice and perspective are essential to the work we do -- from creating new wellness, financial and career programming, to advancing legislation and moving patient care forward.

LET'S BUILD OUR NEW DAY TOGETHER. RENEW TODAY.

OUR FUTURE OF DENTISTRY In North Dakota (Continued)

Each of us has our own areas of clinical expertise and patient focus – let's lean into that. Across this doctor community, there are different areas of clinical and patient experience represented, not to mention different insurance providers, and administrative and intake processes that support different patient groups and needs. For example, because of Aspen Dental's focus on reaching patients who haven't received dental care in several years, our administrative and intake process is tailored to be more accessible to those patients. Dentures is an area of my teams that we take special pride in. We have partnered with other practices across the state to support that growing need, especially our oral surgeons in the areas as the demand for implants rises.

Each one of us has our "why" – the reason we got into dentistry in the first place. The reason we get out of bed every day and go to the office. The reason we've persisted amidst the seemingly insurmountable challenges presented by COVID-19 and labor shortages. For me, my "why" is that I truly believe oral health is a critical component of overall health and we have the privilege of changing patients' lives for the better. At the same time, there are so many people in our world and specifically in our state who don't have access to quality, affordable dental care. We can meet their needs!

I care about this state and its people, and I know all of you do too. I would appreciate getting to connect – whether individually or as a group – about ways we can partner together to leverage our expertise and resources to bring better care to more people. Please reach out to me at 701-202-7805 and we can get the conversation going!



124TH NDDA Annual Session





















2022 Guest of Honor Award Winner Dr. Brad Bekkedahl *Presented by Dr. Kami Dornfeld*



Year Award WinnerDr. Tessa Lagein
Presented by Dr Jeremy Messer



2022 Outstanding Achievement Award Winner Dr. John Clayburgh Presented by Dr. Jackie Nord



2022 President's Award Winner George & Kathy Keiser Presented by Dr. Dusting Hollevoet (left) and William Sherwin (right)

NDDA WELCOMES TWO NEW BOARD MEMBERS



Dr. Peter Mecham

Dr. Peter Mecham - NDDA Secretary

Dr. Peter Mecham received his bachelor's degree from Brigham Young University-Idaho and then attended dental school at Case Western Reserve University in Cleveland, Ohio. He then attended the University of Florida in Gainesville where he earned a master's degree and completed his endodontic training. Dr. Mecham practiced in Greeley, Colorado immediately following residency and in 2014 decided to settle in Grand Forks. Dr. Mecham and his wife, Brittany have five children, Jackson, Maxwell, Janie, Tilly, and Tate. They love North Dakota and decided to settle here because they felt it was a great community to raise their children.



Dr. Taylor Zmoos

Dr. Taylor Zmoos - Western At-Large Trustee

Dr. Zmoos is a board-certified Pediatric dentist. The greatest joys in his life are his wife Abbey, their twin boys Sam and Mack, their son Finn, and their baby girl Rosie. Dr. Zmoos is a native of the Midwest and was born and raised in Cedar Rapids, Iowa. He studied economics at Brigham Young University where he was on the Dean's list, was a research and teaching assistant. He completed dental school at The University of Iowa, where he was very involved in class leadership. In Dental School Dr. Zmoos served as class president, America Student Dental Association president, and the college of dentistry student body president. After dental school he chose to specialize in pediatric dentistry and was accepted to the prestigious program in Denver, Children's Hospital Colorado. Being a top 10 Children's Hospital, he had the opportunity to complete research on pediatric oral sedation and showed an interest in infant frenectomies and esthetic pediatric dentistry. In his spare time Dr. Zmoos loves to do almost anything outside, be it warm or cold! Golfing, fishing, skiing, hiking and wrestling his children just to name a few!

2022 - 2023 OFFICERS/TRUSTEES

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- Save up to \$650 on your closing costs²
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²Laurel Road offers up to \$650 in lender's credit towards your mortgage closing costs. Credits cannot exceed borrowers actual costs to close. For more information refer to the Rewards Program below. http://www.laurelroad.com/partnerships/ada/#Disclaimers

³100% financing is only available to interns, residents, fellows, doctors, dentists, clinical professors, researchers, or managing physicians with a current license and a degree of Doctor of Medicine (MD), Doctor of Osteopathic Medicine (DO), Doctor of Podiatric Medicine (DPM), Doctor of Dental Surgery (DDS), or Doctor of Dental Medicine (DMD). Only available when purchasing or refinancing with no cash out on a primary residence and loan amount does not exceed \$1,000,000. Retired dentists are not eligible. Additional conditions and restrictions may apply.

Only available to interns, residents, fellows, doctors, clinical professors, researchers, or managing physicians with a current license and a degree of Doctor of Medicine in Dentistry or Doctor of Dental Medicine (DMD), Doctor of Dental Surgery (DDS). Retired dentists are not eligible. Additional conditions and restrictions apply.

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CHANGE OF ADDRESS?

Contact the NDDA Central Office if you have moved your home or practice, changed your phone number, name or email address. Email your change to info@smilenorthdakota.org or call 701-223-8870

Immediate Opening for Dental Assistant (CDA): 👺



Kemmet Dental Design in Minot is searching for a lead dental assistant to Dr. Kemmet. After 10 years, his lead dental assistant is retiring and he is looking for someone who wants to have a fun-filled career of positive growth, excitement, travel, and friendship.

We are looking for a CDA with at least 2 years of chairside dental assisting experience with proficiency in all forms of dentistry. We are a high-tech office utilizing 100% digital scanning, 3D printing, in-office milling, hard/soft tissue laser, and orthodontics.

To apply, email your resume <u>grace@kemmetdental.com</u> or call our office at 701-852-4789 and start having fun in your daily work life with our close-knit work family.

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