Getting to Know You

Dr. Jenna Hatfield, a general dentist in Norfolk, Neb., takes a picture with her 2-year-old daughter, Clara, during this year’s Fourth of July holiday.

Why was he saying? I ultimately decided general dentistry was my passion as I love working with patients of all ages and like the variety every day brings.

Why are you an ADA member? I love being a part of something bigger. I think it’s amazing to have a common bond between me (smack dab in the middle of the U.S.) and someone who practices on the coast. I’ve made so many friends through organized dentistry and have learned so much. Sometimes, I think I learn more from talking with peers and sitting in board or council meetings for my state association than I do at any continuing education course. I’ve created a network of people that I can reach out to with almost any question or concern.

What was your first job? I was a lifeguard at the local YMCA in high school.

What has been the best time of your career so far? Truthfully, the conferences I’ve attended. I have been fortunate enough to attend a New Dentist Conference, the ADA annual meeting, the Rocky Mountain Dental Conference and various state and local meetings and there’s not one that I didn’t have a great time.

When I’m not practicing, I’m: volunteering within my community or just hanging out with my 2-year-old daughter. She amazes me every day.

One fun fact about me: I’m 6’1” and I’m a horrible basketball player. Put a volleyball in my hands and it’s a different story.

Two new dentists address being a leader in the dental office

Though Drs. Gabriel Holdwick and Alexandra Barton Otto work in two different practice settings, they share similar challenges when it comes to being a leader in their dental offices.

“Just like the art of dentistry, learning the traits of leadership is something that I practice and work on daily,” said Dr. Otto, a general dentist practicing as an associate in a six-location pediatric-focused group practice in the greater Fort Worth area in northern Texas. “I make mistakes, learn from them and try to be a little better today than I was yesterday.”

“I am not sure you are ever really ready to take on the mantle of leadership,” said Dr. Holdwick, a general dentist with one hygienist, one assistant and a receptionist in his Harbor Beach, Michigan, practice in a town of 1,700. “There are just things you can only learn from doing it. Situations arise, and I don’t always have the answer. With each day comes new challenges, and as time has progressed I have gained more experience and am more effective at both leading and managing the practice.”

Dr. Otto works at five different offices alongside more than 30 assistants, six hygienists and dozens of other auxiliary staff. Being dependably constant is one thing she has learned since she graduated from the Virginia Commonwealth University School of Dentistry in 2013.

“It is critical that I am consistent with my mood, demeanor and methods of practice so that they know what to expect from me. When they know that they can rely on me to be consistent with how I function as a dentist and leader it is a lot less stressful for everyone on the team.”

To Dr. Otto, encouraging reinforcement is key to being an effectual leader.

“Not only verbally tell
Dr. Mai-Ly Duong's six-day work weeks don't offer her all the time she'd like to study and evaluate the latest scientific research. But being up-to-date on science and applying it to patient care is important to her, she said, which is why she uses the ADA Center for Evidence-Based Dentistry as a resource.

"I truly think it is one of the fundamental building blocks of delivering the best possible care to our patients," said Dr. Duong, an assistant professor at the Arizona School of Dentistry and Oral Health and a clinician two days a week in Phoenix.

The ADA Center for Evidence-Based Dentistry publishes, on EBD.ADA.org and in the Journal of the American Dental Association, critical summaries that succinctly recap the findings contained in systematic reviews. The summaries, written by expert researchers and reviewed by ADA staff, include a summary of a particular systematic review, a critique of that review's methods and identified evidence, and an explanation of the review's implications for clinicians. But even more valuable for Dr. Duong, she said, is the Center for Evidence-Based Dentistry's clinical practice guidelines. These ADA-developed guidelines on topics such as oral cancer, sealants, and topical fluoride include recommendation statements intended to help dentists provide the best possible patient care.

These guidelines account for some of the strongest resources available to help dentists in professional clinical decision-making, Dr. Duong said.

"Instead of reading and trying to make sense of thousands of articles, the Center for Evidence-Based Dentistry's critical summaries and clinical practice guidelines make the research more accessible and understandable to new dentists — or any clinician," said Dr. Duong.

Dr. Duong, who graduated five years ago from the Arizona School of Dentistry and Oral Health, is already a leader of evidence-based dentistry in her community.

At the Arizona School of Dentistry and Oral Health, where she now teaches in the special care and advanced education in general dentistry clinics, she also instructs an evidence-based dentistry course and is taking a lead role in expanding the program further. Earlier this year, she attended the ADA's Intensive Evidence-Based Dentistry Workshop, which aims to help dental clinicians and educators better understand evidence-based dentistry and implement it into their practice, curriculum or research.

Since the workshop, she's been working with ADA Center for Evidence-Based Dentistry staff on two different research projects, and she said she hopes to continue to be active and involved in making evidence-based dentistry accessible to all dental professionals.

"Evidence-based dentistry helps us present really difficult information to the patient in a concise and simple way that gives patients the necessary information they need to make the best decisions for their own care," she said.

For more information about the ADA Center for Evidence-Based Dentistry, visit EBD.ADA.org or email ebd@ADA.org.

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my team how much I appreciate their effort and positive attitudes during the work hours, but I try to make it clear how much I appreciate and value them as an individual as well," she said. "I make an effort to attend events to celebrate their outside lives that I am invited to — everything from baby showers to supporting my hygienist at her bodybuilding competition. The assurance that I am there to support their success and happiness both in and out of work has made for a positive and healthy work environment."

As for Dr. Holdwick — a graduate of the University of Detroit-Mercy School of Dentistry in 2014 — being a leader in the office should translate to being active in the community.

"My patients expect me to lead while I have an instrument in my hand, but they also look to me for guidance on matters related to treatment planning, finances and the balancing act of dovetailing dental care seamlessly into lives that are often filled with other pressures. In a town like Harbor Beach, part of leading the practice is making sure it is visible in the community. I am a member of the local Rotary Club, chamber of commerce and a local historical association. I enter a float in the annual lighted Christmas parade, and I support causes and organizations where my patients are trying to make our community a better place to live. A vibrant community is in the best interests of myself, my staff and my patients. As a dentist, I have an opportunity and responsibility to play a role in that work.

Both espouse the view that being a servant leader and collaborative are goals to aspire to, whether you are a team member or lead your own practice. And as new dentists, they realize that effective management skills are gained throughout a long career. "All the study and introspection in the world doesn't always translate perfectly into practice when working with actual people in stressful situations," said Dr. Otto. "I know that learning how to be the best possible leader is something I will have to keep working on for the rest of my career."

To learn more on how to manage a dental team, "The ADA Practical Guide to Leading and Managing the Dental Team" is available. Readers can save 15 percent on this book and all ADA Catalog products with promo code 17155 until Dec. 15. To order, visit ADAcatalog.org or call 1-800-947-4746.

The ADA Center for Professional Success features resources on leadership and management of the dental team, including a podcast on being a great boss and a guide to running effective team meetings. The resources are available at Success.ADA.org.
Dental licensure portability remains a work in progress

When Dr. Laji Wiggins moved from North Carolina to Oklahoma for a one-year general practice residency program, she was hoping to moonlight at a practice to earn some extra income or, at the very least, volunteer and provide services to those in need. “I genuinely wish things were different,” she said. “Ideally, it would be amazing to start at least making payments on my student loans that I have obtained over the course of undergrad and dental school. It’s just too bad I’m not allowed to make additional income to assist in making payments on my student loans.”

The 2017 graduate of East Carolina University School of Dental Medicine passed her dental licensure exam administered by the Council of Interstate Testing Agencies, Inc. (CITA). Unfortunately, she said, the Oklahoma Board of Dentistry only accepts dental licensure examination results administered by the Western Regional Examining Board (WREB) and would only allow her to obtain licensure under a resident permit. “At the end of the day, I’ve been trained by very highly qualified dentists from the state of North Carolina who would not have allowed me to graduate unless I was prepared to adequately provide comprehensively care to the general public,” Dr. Wiggins said. “I know I’m capable and complete the same procedures every day in my residency program.”

Licensure portability continues to be an issue for many new dentists who decide to move across state lines and pursue professional opportunities after dental school, according to the ADA, which continues to work on encouraging states to advocate for portability in dental licensure.

There are five clinical test administration agencies for dentistry: the Commission on Dental Competency Assessments (CDCA, formerly NERB), Central Regional Dental Testing Service Inc. (CRDTS), CITA, Southern Regional Testing Agency Inc. (SRTA), and WREB. Overall, the exams should be able to identify a “safe beginner” dentist for initial licensure.

The ADA has analyzed the examinations administered by each of the testing agencies — CDCA and CITA administer the American Board of Dental Examiners (ADEX) dental exam, while CRDTS, SRTA and WREB administer their own exams — and found that these examinations “adhere to a common set of core design and content requirements that renders them conceptually comparable.”

For example, each agency:
- Utilizes the Standards for Educational and Psychological Testing as the guidelines for evaluating the validity for their exams.
- Produces a technical report that documents and summarizes available validity and reliability evidence concerning the examinations.
- Utilizes conjunctive scoring, requiring candidates to pass each of a series of tests in order to pass the full examination.

In 2015 and 2016, the ADA and partnering organizations called on state boards to increase licensure portability. Today, only Colorado accepts all six licensure pathways, while 30 states accept results of all five clinical testing agency examinations.

Earlier this year, the ADA Board of Trustees created a new steering committee tasked with overseeing the development and implementation of an Objective Structured Clinical Examination for dental licensure purposes. The Board had directed that a pilot of the DLOSCE be available in 2019 with an exam deployment in 2020. The ADA Board of Trustees sought the creation of the exam to help address issues of portability.

The development of the DLOSCE also supports current ADA policy calling for the elimination of patients from the dental licensure examination process. It addresses potential ethical concerns stemming from the use of patients in traditional exams.

“I’m glad the ADA continues to work on those same goals and continues to fight for the interest of both its members and public.”

“Creating a non-patient-based exam and portability were among the many issues we advocated for alongside members of the ADA,” said Dr. Wiggins, who served on the 2015-16 American Student Dental Association Board of Trustees. “I’m glad the ADA continues to work on those same goals and continues to fight for the interest of both of its members and public.”

Although Dr. Wiggins considers herself a native of North Carolina, she was born in Hawaii whose parents both served in the military. “I’m used to moving and adapting to new environments,” she said. She ultimately her family settled in North Carolina. Dr. Wiggins said she knew she would be busy with her general practice residency program but says she would be more than willing to find time to work part-time at a dental practice or volunteer for different community projects.

“Right now, in moments that I am not responsible for emergency trauma call or fulfilling my other resident responsibilities, I devote my spare time to activities for personal growth,” she said. These activities include reading novels, taking additional CE courses and exploring the Midwest. “If I can find time to do all of those things, I am certain I can find time to work as well.”

With the cost and time associated with taking a licensure exam, Dr. Wiggins said it wasn’t worth taking the WREB. She plans on moving back to North Carolina after she completes her general practice residency in June 2018.

“I understand states want to make sure they’re producing well-qualified dentists,” she said. “But if everyone just put their own interest aside and consider about what’s best for patients and our colleagues, we can collaborate to find a more opportune solution that works for all parties involved.”

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ADA News

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ADA American Dental Association®
Online or in-person: Choosing the right CE course

D
tal school may be over but learning about the best ways to treat your patients and improve your practice never takes a break. With every dentist required to log a minimum amount of continuing education credits each year, juggling courses along with seeing patients can be challenging.

The ADA provides members with online and in-person CE opportunities to help dentists balance busy lives as well as meet state licensure requirements.

But how do you know which style is right for you? For Dr. John Heffernan, a general dentist from Strongsville, Ohio, there’s no question: in person CE is the only thing that works for him. “I enjoy hands-on courses and courses that are multiday,” said Dr. Heffernan who keeps track of his CE by using a spreadsheet. “I love the business aspect of dentistry, and there are a lot of good courses out there for the business aspect of the profession.”

I one thing Dr. Heffernan suggests is doing research before committing to a class. “You never know if you are going to show up to a direct resin CE event and the presenter ends up talking about the importance of loupes for three hours,” he said. “Reading reviews from other dentists always helps. I usually call on my friends in the profession and see what they have found rewarding and worth the investment.”

Dr. Scott Morita, an orthodontist in Honolulu, prefers online courses. “As a young dentist, it is often difficult to take off work to attend a CE course that requires travel,” he said. “Since you can take the CE class at your convenience, online CE is necessary for many young dentist who are working six days a week trying pay off the student debt of dental school.”

Dr. Morita, who is president of the Hawaii Dental Association’s Young Dentist Group, says he saves his CE verification letters to Dropbox, a cloud-based file storage system, each year, so he can reference it at anytime. “I prefer to receive CE certificates digitally. This makes it easier if you get audited to provide the necessary CE,” said Dr. Morita, who works five days as an orthodontist and spends a sixth day volunteering at the advanced residency dental programs in Hawaii.

For what kinds of courses, both Drs. Heffernan and Morita said they enjoy practice management courses. “If I want to add a new skill to benefit my practice then I will seek that out, or if my practice is in need of some business help then I will look for that,” Dr. Heffernan said. “If I decide to learn a new clinical or business skill then I will seek out all the CE related to that topic and plan accordingly. I try not to bounce around between CE topics so that I can really learn and implement the new knowledge.”

Dr. Morita agreed, saying, both educational and practice management CE classes are “critical for the success of the young dentist today if they want to open their own private practice.”

Looking for CE of your own? ADA CE online courses are developed by dentists, who understand the practical challenges you face every day. To find a class for you, visit ADA.org/CE New dentist members receive 50 percent off on ADA CE online courses using promo code NEWDENTIST. Check your state continuing education requirements by visiting ADA.org and searching “state continuing education.”

ADA Business Resources

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