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2014



A close-up portrait of a woman with blonde hair and blue eyes, smiling warmly. She is wearing a dark blue top. The background is a solid dark blue.

Mary DeRose

DENTISTRY BY
Dr. Ann Malotky, Redding, CA
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editor's note



*I hope you enjoy reading this
special HOLIDAY edition of VISIONS.*

I encourage all of you to set some office goals as you head into 2015. Make the New Year your time to really achieve great and wonderful things. You can accomplish anything you set out to do as long as you take massive action! Please share your stories with us so that others can learn from your achievements.

Cheers,

A stylized, handwritten signature of Heidi Dickerson in red ink.

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THE IMPORTANCE OF POSTURE IN DENTISTRY

William G. Dickerson, DDS, LVIM, FAACD

If you are a physiologic based Neuromuscular conscious dentist reading this, then you are aware of the importance of posture when trying to find the correct position of the mandible. It's imperative that you take the bite with the patient in as good posture as possible. We are aware of the fact that the position of the head affects the position of the mandible and hence the position of the mandible can affect the position of the head. So forward head posture can cause a retruded bite and a retruded bite can cause forward head posture. Chronic forward head posture can be impossible to fix with just a bite correction, although it certainly would need to be one of the steps to achieving desirable results. Often it is necessary for a dentist to help their patients correct their own posture. Understanding this cervical connection to dentistry is the foundation of the *Practical Advanced TMD Practice, Level 2 (PAT 2)*, held on the LVI campus.



It has been said that posture is the window to the spine. According to research by noble prize winner Dr. Roger Sperry, 90% of the stimulation and nutrition to the brain is generated by the movement of the spine. One of the worst health problems people experience is a loss of the natural curves of the spine. Ideally

we should have a 40-45 degree curve in our neck that many refer to as "the arc of life." Forward head posture reduces that natural curve and causes all kinds of problems.

So what is the problem with forward head posture (FHP)? For every inch of forward head posture, an additional 15 to 30 lbs of pressure is put on the cervical and back muscles. This can cause chronic neck and back pain. Also, the forward head posture creates compression of the cervical vertebrae resulting in dehydration of the discs and arthritic changes that can have lasting effects on the quality of life the patient experiences. Weight of head doubles at 1" FHP and cervical spine increases by 21 Newton's. Muscles of the back and the neck feel an additional 26 lbs. of tension and the pelvis tilts forward 4 degrees.

In a recent study done with over 1500 postural exams across all age and gender groups, a posture number of 10 or above was found in 96.4% of the patients. Remember that prevalence does NOT mean it's normal, just prevalent. The average score was 17.



Below is the meaning of the postural numbers.

0-5 = Little to no structural stress.

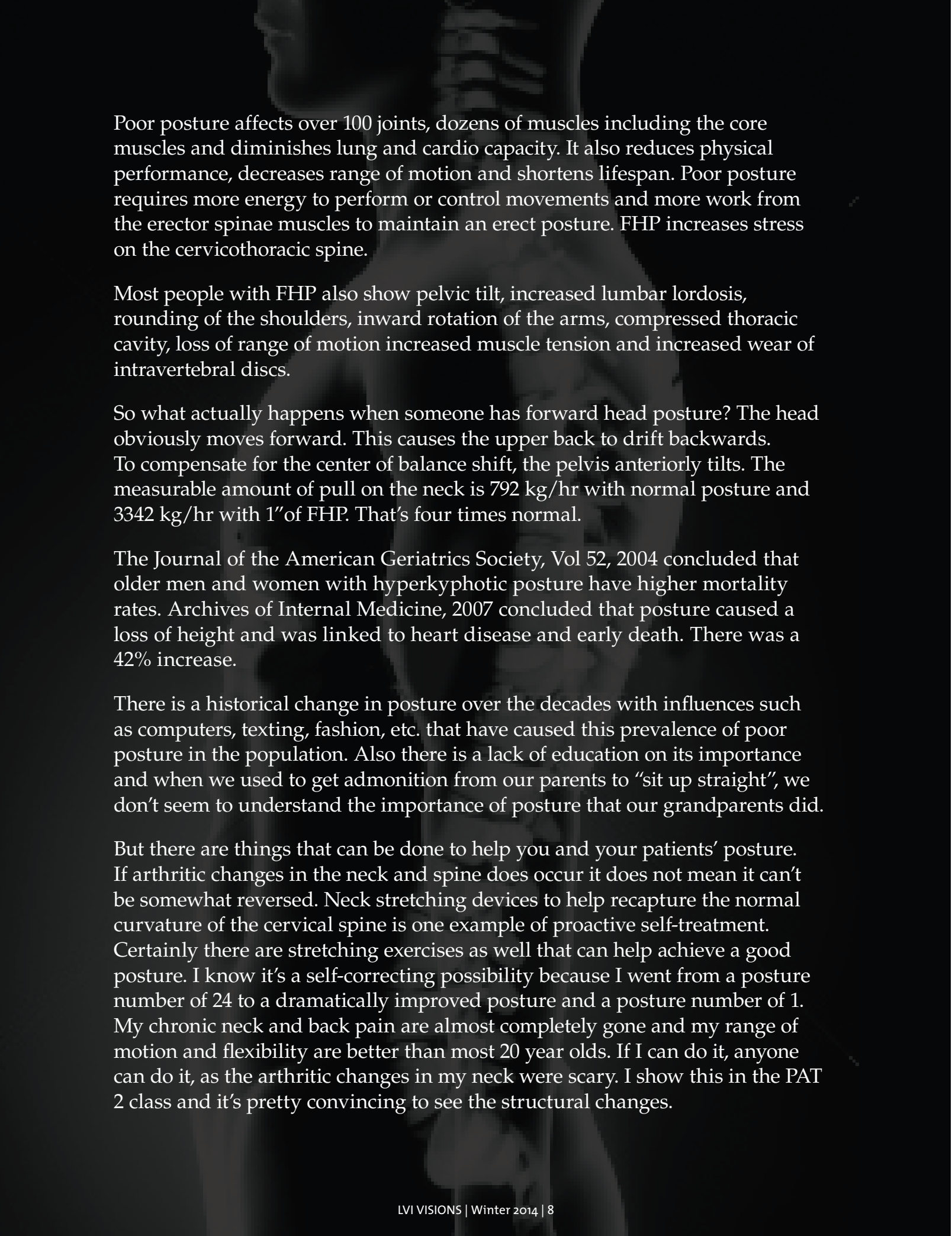
6-10 = Beginning of structural stress and increased tension on the musculo-skeletal system.

11-15 = Structural stress is evident.

16-20 = Stress and tension are causing symptoms that need to be addressed.

20-30 = Structural damage is occurring and needs to be prevented.

30+ = Structural damage has occurred, life-long problems may already exist.



Poor posture affects over 100 joints, dozens of muscles including the core muscles and diminishes lung and cardio capacity. It also reduces physical performance, decreases range of motion and shortens lifespan. Poor posture requires more energy to perform or control movements and more work from the erector spinae muscles to maintain an erect posture. FHP increases stress on the cervicothoracic spine.

Most people with FHP also show pelvic tilt, increased lumbar lordosis, rounding of the shoulders, inward rotation of the arms, compressed thoracic cavity, loss of range of motion increased muscle tension and increased wear of intravertebral discs.

So what actually happens when someone has forward head posture? The head obviously moves forward. This causes the upper back to drift backwards. To compensate for the center of balance shift, the pelvis anteriorly tilts. The measurable amount of pull on the neck is 792 kg/hr with normal posture and 3342 kg/hr with 1" of FHP. That's four times normal.

The Journal of the American Geriatrics Society, Vol 52, 2004 concluded that older men and women with hyperkyphotic posture have higher mortality rates. Archives of Internal Medicine, 2007 concluded that posture caused a loss of height and was linked to heart disease and early death. There was a 42% increase.

There is a historical change in posture over the decades with influences such as computers, texting, fashion, etc. that have caused this prevalence of poor posture in the population. Also there is a lack of education on its importance and when we used to get admonition from our parents to "sit up straight", we don't seem to understand the importance of posture that our grandparents did.

But there are things that can be done to help you and your patients' posture. If arthritic changes in the neck and spine does occur it does not mean it can't be somewhat reversed. Neck stretching devices to help recapture the normal curvature of the cervical spine is one example of proactive self-treatment. Certainly there are stretching exercises as well that can help achieve a good posture. I know it's a self-correcting possibility because I went from a posture number of 24 to a dramatically improved posture and a posture number of 1. My chronic neck and back pain are almost completely gone and my range of motion and flexibility are better than most 20 year olds. If I can do it, anyone can do it, as the arthritic changes in my neck were scary. I show this in the PAT 2 class and it's pretty convincing to see the structural changes.

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So what should you do?

Consciously think about your posture as you sit in a chair. Use lumbar support in your car, office and home. Use a cervical pillow while you sleep to help support your neck. Get into a daily stretching routine. Take Glucosamine and Omega 3 for your joints. Use arnica gel on your neck to help decrease joint inflammation. And listen to your grandparents...

SIT UP STRAIGHT!



A good understanding of the spine, particularly the neck, should be essential for every dentist as not only does it affect the bite the dentist takes in trying to correct TMD pain the patient may be experiencing, but elimination of the chronic pain the patient is experiencing may be impossible without such postural correction. There are postural related headaches for example, and your orthotic treatment may not be working because you need to address the posture first. Make it your goal to become better educated to the relationship of the occluding mechanism and posture. Doing so will help you achieve faster and better results treating your pain patients and may even change your own life for the better.

Having a good posture is one of the healthiest things you can do for your body. Numerous experts are now stating that posture is not just about looking good, but could be the key to better health and a better life. According to the American Journal of Pain Management, "Posture affects and moderates every physiologic function from breathing to hormonal production."

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Making A List And Checking It Twice

Heidi Dickerson, DDS

New Year's office resolutions to **STICK** to in 2015

1. WORK ON YOUR BUSINESS... NOT JUST IN IT

Instead of just showing up and working in your office... take time to work **ON** your office. To do this, spend some down time figuring out what would make your business grow. Ask yourself, 'what would take us to the next level?' Then use the answer to that question to make an action plan to get there!

2. SET FINANCIAL GOALS

Set financial goals for 2015 and work together with your team to attain them. Keep everyone on target with updates at regular team meetings. A great idea is to reward everyone with a prize at the end of the year if the goal is achieved. Perhaps a weekend retreat, shopping spree, or party? Come up with the prize as a team and you will see everyone work hard to attain it!

3. UPDATE

We all are so used to our work environment we don't even realize when things get old or dated. Have an outside individual do a 'walk thru' of your office. Ask him/her to write down what they think could be improved aesthetically, what needs to be decluttered, and what needs a revamp. Take the constructive criticism and run with it. Improve the recommended areas and see the compliments come your way!

4. INCREASE EFFICIENCY

How much time do you and your team waste each day on social media? Twitter, Facebook, Instagram, and Texting... these all take away from productive time. Be a good example of time management, this starts from the top down. Let your team know what you expect from them and see these areas of time wasting dwindle away.

5. CLEAN UP SHARED SPACES

From the front office to the staff lounge refrigerator, take some time to clean up shared spaces. Start the New Year organized and clean!

6. CREATE AN ENJOYABLE WORK ENVIRONMENT

Try to create a good work/life balance for you and your team. You spend more of your waking hours at work than you do at home. The office should be an enjoyable environment where you all want to be each day. Create some flexibility this year so that work and family engagements can be balanced in your schedule and your coworkers as well.

7. GIVE PRAISE

Let individuals know they are doing a great job! Praise is the biggest motivator and driver of productivity. Take time out to give someone positive feedback each day.

8. LEARN A NEW SKILL/PROCEDURE

Increase your skills and knowledge so that you can expand your practice offerings and become a better practitioner. Provide opportunities to stretch individuals who work for you as well. The more you all know, the more your practice will soar. Education never ends.

9. GIVE BACK

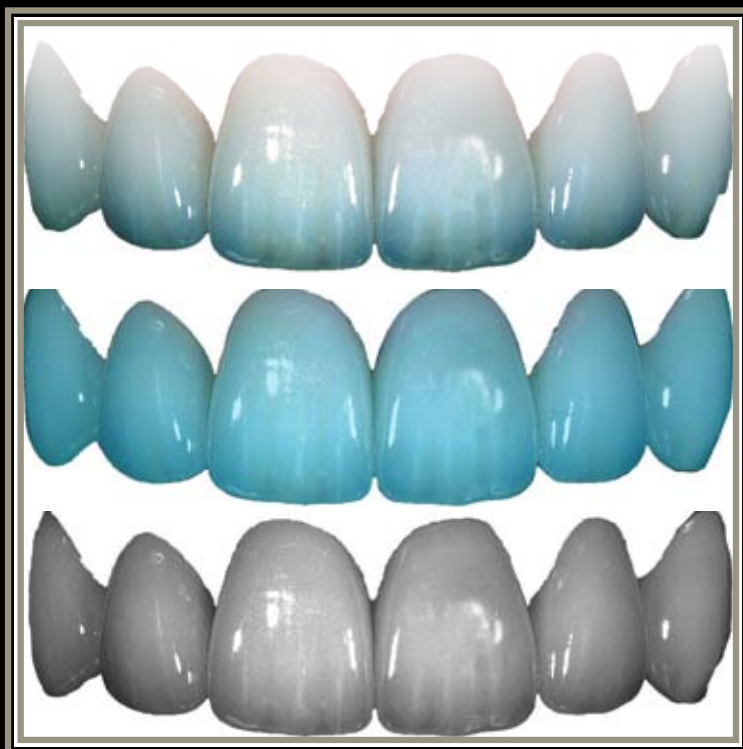
Due to your increased knowledge, skills, and production you will be able to **GIVE BACK**! Pick a worthy cause that you and your team decide on and donate some money or time to it. Make your patients aware of how you **PAY IT FORWARD**... they will feel good that they are a part of that as well.

10. HAVE FUN

This is probably the most important resolution you can make in 2015! Make your office a place you and your team look forward to going to each and every day. How awesome would it be to look forward to getting up and going into your practice? Create an atmosphere that you all enjoy and watch your happiness increase!

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for achieving your LVIM at this years IACA/ 2014."*



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Naughty & Nice

Dental Confessions

I remember as a kid my mom telling me I would get coal in my stocking at Christmas if I were naughty. **I wonder if Santa has a Dental Naughty list for patients?** It is easy to be nice to our mouths: consistent homecare, not smoking or chewing tobacco, eating sugary foods with a meal and not as a snack, or not using our teeth as ice grinders. I wonder what Santa might put in our stocking if we had a Naughty Dental habit?

So what happens when you have a Naughty patient? How can you help play Santa even if your patient has a Bad habit? Let's consider five of the worst dental habits patients can have and what Santa might suggest to curb the habit: smoking, chewing tobacco, too much candy or sugar, not flossing, and crunching ice or popcorn kernels.



Smoking

Put vitamin C spray (Ascorbate Form= Alkaline) in the stocking with a post-it that gives an acronym to repeat each time the dose is given: **(NOPE- Not One Puff Ever)**. Spray vitamin C into the back of the mouth and throat each time you want a cigarette.

Mix a tablespoon of baking soda in an 8-ounce glass of water and drink it, twice a day for the first week, then once a day for a second week. It tastes like a flat Alka-Seltzer but lessens the craving.



Chewing Tobacco

With any bad habit, there are always triggers. A possible list of substitute habits when confronted with a trigger that Santa can use as a stocking stuffer:

- ✓ Sugar-free gum
- ✓ Tickets to someplace where tobacco can't be used (movies)
- ✓ Toothpick
- ✓ A bag of coffee or flavored tea bags
- ✓ A pedometer (for walking)
- ✓ Healthy snacks: carrots, raisins, sunflower seeds
- ✓ Playing cards
- ✓ Bath salts for a hot bath or shower

Naughty & Nice Dental Confessions

Naughty



Too Much Sugar

Dietary changes suggested by Santa: Take a multivitamin, since some nutrients help keep blood sugar stable. Eat more protein in the morning and limit the amount of sugar before 3pm. Eating sweets in the morning or early afternoon tend to stimulate sweet cravings throughout the day. Have oatmeal or fruit instead. Oat bran is actually a soluble fiber and wheat is an insoluble fiber. A soluble fiber will actually help reduce cholesterol too!

✓ Sugar substitute

The sugars in fruits are digested differently than normal table sugar or sugar in candy and processed foods, mainly because table or processed sugar contains about 50% fructose, which is difficult for the liver to metabolize. Reach for a stick of sugar free gum instead of a Popsicle. Research shows that chewing gum can decrease cravings and consumption of sweets.

✓ Finally hide the sugar or get rid of it

Santa can go through the refrigerator and food pantry and throw out cakes, ice cream, cookies, etc. He will suggest that, when food shopping, make a conscious effort not to buy sweets.

✓ Get distracted by reading a good book, dancing to a favorite song, or even just taking a nap

Naughty



Not Flossing

Just putting floss in the stocking is not going to help these patients “remember” to dental floss. Most patients don’t floss not because they don’t remember but more because they don’t have the dexterity to master the task, or their teeth shred the floss, or it hurts. Santa won’t make them floss, so he will put a WaterPik in their stocking. WaterPik stats: 99.9% removal from treated areas with 3 second application. 70% more effective than Air Floss & 50% more effective at reducing gingivitis than dental floss.


Naughty



Chewing Ice or Popcorn Kernels

Santa might put an iron supplement in the stocking since chewing ice habitually has been associated with a pica deficiency. Santa might put in a prescription for an orthotic by an amazing LVI NM dentist as well since chewing hard foods will lead to cracking teeth and fillings.

I am hoping these tips will get your patients back on the nice list!



Sherry Blair

10 BRIGHT IDEAS to recharge you and your practice!

1 Write or Re-Visit Your Mission Statement

Write and read the answers to the following questions at your next team meeting. “Why should I be a patient in this practice?” When all is said and done, the most important things are...? When you overhear colleagues talking about you, what would you like to hear them say?

2 Plan Internal Training

Decide which of the clinical areas the practice needs more internal training, choose one, decide who will do the training and which team meeting it will be done. NM, High-end Restorative, Periodontal/Laser Therapy, Airway, etc.

3 Increase Team to Team Communication

Have each team member write and read their answers to the following questions at a team meeting. What is my role in this team? What do other team members not understand about my role? What are three things that I need from other team members in order to do my job the way I would like?

4 Schedule “Fun Days” For The Year

Take time out to work on team to team relationships. Once a quarter mark off an afternoon. Bowling, Laser tag, movie, and a dancing lesson - learn to play together as well as you work together. Rules for fun day... You may not talk about dentistry or patients. Take lots of pictures. Create a “dental family album” for your reception room and post these pictures on social media. Your patients love to see you playing together and will start suggesting things to do on fun day.

5 Focus on Small Wins

Start your morning meeting with a win from yesterday where one team member (not all) will voice something

that went well yesterday. If we place our attention on that little, ordinary, non-spectacular “win” they will add up to the big successes. It will allow us to gain the confidence to go after and create the big wins.

6 If Dentistry Has Been Good To You, Give Back

Decide as a team how you will choose a “complimentary case” that you will provide this year. A battered wife, a child, a veteran, etc. Contact an organization that will assist you in finding the right candidate and plan how we will financially provide the case. Will we see this patient on our day off? Can we get the lab to reduce their fee?

7 Cross Training

Has the teams “job EKG” gone flat? Energizing a job means structuring ways for the team to get the growth, challenge and renewal they want without leaving their current jobs. You can create this by cross training in the practice. Ask them; “In what area would you like increased responsibility for your current task?”

8 Increase Internal Marketing

Choose one item that you can add to your “give aways.” Of course all items will have the practice information printed on them which will go out of your door and hopefully in front of the eyes of potential patients. Pens, lip gloss, etc.

9 Spread The Love

Ask co-workers to write something they truly like and admire about a team member on a scrap of paper, then frame them along with a photo of that team member.

10 Remember to Use Two Secret Words

The two most underused words in corporate America that get the highest ROI are the simple words “THANK YOU.”

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Snoring affects millions of Americans, and of those approximately 67% may have some type of significant sleep disorder.

Dentists are in a great position to help screen and in many cases treat these problems with airway management. Helping patients improve their sleep can profoundly improve their health, quality of life and the well being of their loved ones.

The “Gold Standard” for the treatment of sleep disordered breathing is the CPAP type device. Following that in 1981 was the introduction of Mandibular Advancement Devices (MAD). Compliance with both of these treatment modalities shows a reduction in compliance over time and significant side effects. However, the **NIGHTLASE™** Snoring and Sleep Apnea Reduction Therapy protocol is a unique approach to treatment using the Fotona Lightwalker dental laser with a proprietary protocol and handpiece.

NIGHTLASE™ uses the photothermal capabilities of the Lightwalker laser to convert and initiate the formation of new and more elastic collagen. The target mucosal tissues are the oropharynx, soft palate and uvula. The proprietary “Smooth Mode” pulse characteristics create a non-ablative heat generation or “Heat Shock” that initiates the conversion of existing collagen to more elastic and organized forms and also initiates “neocollagenesis”, the creation of new collagen.

This process results in a visible elevation of the soft palate and uvula and tightening of the oropharyngeal tissues resulting in an improvement in the upper airway volume. **The results can be seen in image 1.**

Image 1



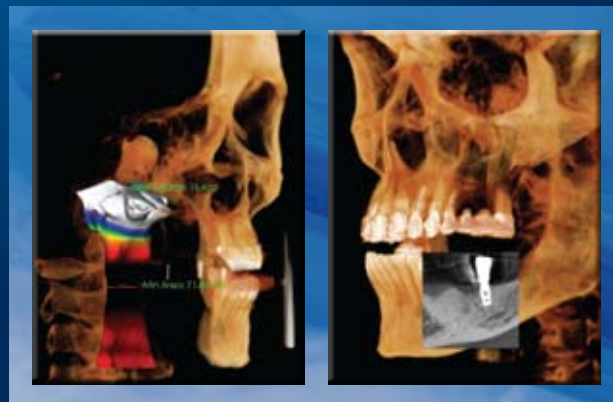
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NIGHTLASE™ therapy is indicated for cases when the patient has been diagnosed with chronic snoring, UARS or mild to moderate sleep apnea and either cannot or chooses not to wear an appliance or CPAP device. It can also be used in co-therapy with those devices and represents a less invasive alternative to current surgical chemical or radiosurgical options that may require hospitalization, general anesthesia or soft tissue mutilation.

NIGHTLASE™ has a significant success rate in producing a positive change in sleep patterns. Research has shown that it can reduce and attenuate snoring, and provides an effective non-invasive modality to lessen the effects of Obstructive Sleep Apnea. As with any treatment, there are potential risks with laser treatment. However, the risks are minimal and certainly less than alternative therapies if the protocol is followed correctly.

NIGHTLASE™ therapy is not a permanent alteration and lasts anywhere from 6-12 months and is easily touched up at follow up appointments.

SMOOTHLASE™ is also a thermally mediated therapy using the Lightwalker laser, that has been developed to be used intraorally for facial rejuvenation. Depending on the depth of the vestibule we are able to treat wrinkles, lines and sagging from the infraorbital area to the angle of the mandible. This includes peri-oral vercticle lip lines and the “disappearing lips” seen in mature adults.

SMOOTHLASE™ uses a high tech proprietary handpiece that allows for virtually painless therapy that requires no injections or anesthetics and shows immediate results that continue to improve over the course of treatment. **SMOOTHLASE™** is age based for the number of treatments necessary. We see improvements not only in wrinkles and lines, but improvements in sagging and jowly appearances.

The color and tone of the tissue is improved as the increase in natural collagen holds more moisture in the tissue. Tissue stretch is reduced and

SMOOTHLASE™ is also indicated to help prevent wrinkles and sagging in patients in their 20's and up.

Compared to chemical and surgical alternatives, **SMOOTHLASE™** is an all natural therapy, with no requirements for injecting toxins or artificial fillers. There are minimal side effects such as dryness and intraoral roughness that lasts for 1-2 days.

SMOOTHLASE™ treatment lasts from 6-12 months and can also be easily touched up in 1 or more appointments. See image 2.

Image 2



As an adjunct to **SMOOTHLASE™** is **LIPLASE™** which is an additional natural therapy directed to lip rejuvenation, it can be a standalone therapy or done in conjunction with **SMOOTHLASE™**. The same Lightwalker laser handpiece is used to rejuvenate, sculpt and plump the lips. Immediate results are seen and will continue to improve during the 30 days needed for “neocollagenesis” or the formation of new young collagen. Treatment will depend on the extent of rejuvenation (regain volume, definition, shape) needed and the results will usually last from 4-6 months similar to the results from injecting artificial fillers without the side effects, pain and potential irregularities. See image 3.

We are excited to present these modern, minimally invasive and more natural treatment modalities to the public. Using the Lightwalker laser, we can now offer our patients cosmetic and health improvements that reach beyond restorative and rehabilitative dentistry.

Image 3



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New Year's Resolutions And Good Oral Health



Is There a Connection?

Deborah M. Lyle, RDH, BS, MS
Director, Professional & Clinical Affairs, Waterpik

Do you make New Year's resolutions? I am one of those people who look at the new year as a 'do over'. It allows me to start fresh with exercise, improving my diet, or other altruistic activities.

Approximately 45% of Americans make resolutions each year.¹ That means up to 158 million people pledge to lose weight, get organized, quit smoking, get fit, and fall in love to name a few. On average, only 8% of those making resolutions are successful. The good news is that 49% are sometimes successful and those who make resolutions are 10 times more likely to attain their goal.^{1,2}

Change is hard!

Even after a life threatening disease, such as a heart attack, people find it hard to change behavior. One study which followed up on patients who were prescribed 3 medications found 12.1% stopped taking all medication, 4% stopped 2 medications, and 18% dropped one medication all within one month after hospital discharge.³ Another study found that after a myocardial infarction hospitalization 24% did not fill their cardiac medication in the first week after discharge.⁴ It is no better for those who are at risk for a heart attack with 71% reporting taking low dose aspirin, 46% taking their β -blockers, and 44% taking their lipid-lowering agents within 6-12 months of diagnosis.⁵ This persists over the long term with data showing only 40% still taking their lipid-lowering drugs 2 years after hospitalization for acute heart disease.⁶

This would not be a problem if there was no adverse effect from not taking prescribed medication but that is not the case. Not taking cardiovascular medications has been shown to lead to a higher risk of mortality and morbidity.³ So why don't people comply? There are many factors involved such as age, number of medications, communication, values, and perceived risk by the patient.

Do words matter?

We often tell people what they need to do to keep their mouths healthy and prevent disease with the belief that if they know what to do they will do it. When they don't do what we say they are considered 'non-compliant'. Compliance implies a passive role for the patient and creates an authoritarian role for the practitioner. It does not take into account the individual who may have preconceived ideas and is not ready to absorb what is being said.^{7,8}

Concordance has also been considered as a way to help people develop good health habits. This means there is an agreement between the person and the practitioner on the regimen or behaviors that the patient will adopt. Now the patient and practitioner are in 'harmony' and all is well. Not so fast. This also implies that the patient has to take a greater responsibility for their health and associated risk factors. This

sounds fine on the surface but not everyone is ready or able to do this and may feel that there is an imbalance between the parties.^{8,9}

The term that is gaining acceptance is adherence. It comes from the Latin work *adhaerere*, from *ad-* 'to' plus *haerere* 'stick'. It is defined as 'persistence in a practice or tenant; steady observance or maintenance'.^{7,8} Patients are not a homogenous group. They have different needs, values and cultural beliefs that should be considered to help develop good health behaviors.

What motivates behavior change?

There are different models that assess how knowledge, attitudes and beliefs are processed and translated into action.⁷ Some models are poor predictors of health behavior but may have components that can impact the patient such as feeling personally vulnerable to the health problem and not taking 'it will not happen to me' attitude.⁹ This is known as an optimistic bias where people significantly underestimate their personal risk for a disease or condition. Other models look at the intention to change behavior. There is no strong evidence either way whether this works but it is based on whether the individual has a weak intention which is identifying a behavior they plan to incorporate vs a specific 'when' and 'where' they will begin and may be more likely to establish the health behavior.¹⁰

The Transtheoretical Model consists of 5 stages (Table 1). Change is based on what stage the person is in and how quickly they can progress to the action stage and ultimately the maintenance stage.¹¹

Table 1: Transtheoretical Model: Stages of Change¹²

Precontemplation	Resist change, often feel their situation is 'hopeless'
Contemplation	Acknowledge they have a problem, making plans to take action, exploring possible solutions
Preparation	Highly aware of need to change behavior, make their intentions public
Action	Realizes and accepts commitment, time, and energy needed, sees results
Maintenance	Continues to work to prevent lapses, requires continued commitment



What to do?

Health care professionals can be more persuasive if they address both cognitive and emotional factors. In healthcare, fear is often used as a way to persuade people to change.⁷ The current anti-smoking ads use fear as a way to encourage people to stop smoking with visuals of very sick people who have lost limbs and suffer other severe health problems. Research shows that fear does not necessarily work and prompted a move to a more positive

approach such a healthy 'lifestyle' or humor. Sometimes humor can interfere with the message. Another approach is to incorporate an element of 'surprise' which is unexpected and can help the viewer process the message.⁷

Modelling and reinforcement is still another way to help people change behavior.⁷ For instance, how impactful can a health care professional be when discussing the need to lose weight if they are also overweight or obese due to poor habits or bad choices? What message does it send when health care professional smoke? Sports figures are often emulated by children, hence the concern over smokeless tobacco use being shown during the game.

Summary

Looking at the literature it is apparent that multiple models and methods should be used to promote good oral health behaviors. Like exercise, it can take a while to establish or change a behavior where it becomes a part of a daily routine.

Take a moment to look at your own health behaviors or New Year's resolutions. Healthcare professionals are no different than everyone else. We may have better overall health behaviors but there is probably something you need to change or improve. Now see if you can do it. You may think twice about why your patients won't 'take your advice'.

I will still make my New Year's resolution for 2015 and I plan to be realistic and successful.

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Brian Sachs

5 KEY STEPS YOU NEED TO TAKE TODAY TO PROTECT YOUR PRACTICE

What would you do if your patient data was stolen or if there was a fire or flood that destroyed your office? Suppose a patient accused you of compromising their personal information. Who would you call first? How long would your practice be interrupted? Do you have an Incident Response Plan in place and employees trained to minimize your down time and get your practice back up and running? Many practices don't. And HIPAA is cracking down on the lack of attention from practices regarding the overall protection of their patient data.

With most medical records being stored digitally, it's not a matter of if you'll experience an incident regarding your electronic patient information; it's a matter of when. If Target, JP Morgan Chase, Neiman Marcus, Apple, and others can be breached, almost on a weekly basis, why do so many practices not act proactively?

Why would a hacker want your patient health information? It's because dental and medical practices typically possess thousands of patient files in their practice. A social security number, date of birth and address is worth approximately \$500 per record out on the black market. Small medical practices are becoming low-lying fruit for identity thieves.

Whenever our organization, PCIHIPAA, responds to a data breach, we find that with just a little bit of proactive planning, the breach could have been easily prevented.

Here are 5 Key Steps Your Practice Should Take Today!

1 Execute Business Associate Agreements to Transfer Liability: In September of 2013, HIPAA enacted the Omnibus Rule. It was the most sweeping change to HIPAA in years. The main focus of the Omnibus rule was to have a Business Associates agreement signed with any vendor that you share patient health information (PHI) with. The Business Associates Agreement (BA) protects your office in the event that if you forward PHI to a vendor, and they are breached, the liability gets transferred to your BA. The BA insures that your vendor has been enacting the proper safeguards in their office to insure that the PHI you are sharing with them is properly protected. HIPAA now requires every practice update their BA and have them signed by BA's of every medical practice. The scope of risk and liability is growing every day and actions must be taken by the practice to protect patient information that is being transmitted (read below regarding e-mail encryption).

2 Employee Training on HIPAA Rules, Regulations, and Incident Response: HIPAA now requires that every practice maintain one set of guidelines that each office employee is trained on and signs off on. We see many dental practices just purchase a HIPAA book from the ADA, leave it on the shelf, and never execute what it really takes to create a "culture of compliance." This is no longer acceptable by HIPAA, as they are requiring more and more accountability every year. Compliance starts at the top. It is critical that you adopt the right culture in your practice and a good idea is to immediately assign a HIPAA Security and Compliance Officer in your office. HIPAA requires that each employee be adequately trained on the proper protocols regarding protecting PHI. This includes training on Privacy Policies, Security Policies, implementing a Disaster Recovery Plan and fully documenting an Incident Response Plan. Most mistakes occur because employees are not properly trained on the correct policies and procedures with regards to protecting PHI. Having a clear understanding, and training your employees on one set of guidelines while implementing the right accountabilities will help you accelerate the adoption and create a culture of compliance for your practice.

3 Use An Encrypted E-Mail Service When Sending PHI: When your office sends an email containing PHI, as soon as you press send, you have lost all control as to where that digital record ends up. It may end up on a laptop computer, mobile device, thumb drive, or just about anywhere these days. Who has visibility to your PHI once it leaves your practice? If you forward PHI, you must send it through an encrypted e-mail service. Many practices are still using free services like Google Mail, Yahoo Mail and AOL. Not only are these service not encrypted, but they also sell advertising based on your e-mail subjects and content. I'm sure you can only imagine the impact to your practice if a patient sees an ad that is somehow related to their PHI. Also,

5 KEY STEPS YOU NEED TO TAKE TODAY TO PROTECT YOUR PRACTICE

as stated above, anyone you send PHI to should have an updated BA signed so you are properly indemnified if they do not take the proper safeguards to protect the PHI you sent them. In addition, a HIPAA certified encrypted email also gives you the ability to see if your email was forwarded to any other third parties. Having control over who has access to your PHI after it leaves your offices control is a critical component to protecting digital PHI.

4 Purchase Data Breach Insurance: Data breach insurance is now being offered to protect your practice in case of a breach. Your standard business insurance policy does not cover data breaches and the fines you may incur if you experience a PCI (Payment Card Industry) or HIPAA violation. Securing a Data Breach Policy will give you the peace of mind that if your practice is breached that the proceeds will help your practice get up and running quickly with limited financial impact. Many practices we speak with don't understand the financial impact caused by a data breach or loss. It should cost less than \$5 per day to make sure your practice is adequately covered.

5 Take a HIPAA Required Risk Assessment: HIPAA has not done a great job communicating the requirements of what a practice needs to do to become HIPAA compliant. Whenever I lecture my first question is "How many

Doctors are aware of the Omnibus Rule?" The Omnibus Rule was truly the most sweeping change in HIPAA's history. However, when I ask this question maybe 1 in 10 raise their hands and fully understand what is required. This is exactly why the HIPAA Security Rule has made it mandatory for EVERY practice to take an annual Risk Assessment. The HIPAA Risk Assessment goes through a series of questions and identifies areas of vulnerability, including, but not limited to technical controls, policies and procedures, emergency and incident response and other key areas. A risk score will be provided and a corrective action plan that clearly defines areas the practice should focus on. If you don't understand your vulnerabilities how can you correct them? HIPAA does not provide a certificate of compliance. The only way to know that you are properly securing your PHI, according to HIPAA guidelines, is to take the Risk Assessment. If you have not taken a RA you are out of compliance. I understand how difficult it is to manage a successful practice. You did not get into business so you could be a HIPAA expert and jump through HIPAA hoops in order to become compliant. However, with just a few simple steps you can greatly reduce the likelihood of a loss of your PHI, and insure your practice is protected in case an incident does occur. Creating a culture of compliance starts with you. There are undoubtedly steps you can take today.

YOU JUST NEED TO ASK YOURSELF, "WHAT CAN I DO TODAY?"

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A Few of Mark's Favorite Things



I'd like to end the year by offering you 12 gifts. They are powerful and useful in your practice!



One of the coolest things available today has incredibly far reaching benefits! It helps you to work on calm, comfortable patients without medication – and also helps them to be healthier as a benefit! My first gift to you is the NuCalm System! Dentistry is easier for both you and your patients and the bonus is you have a plug and play system to take advantage of the myriad health benefits of meditation!



Your next box is a year's supply of Panasil from Kettenbach. It is quite simply the easiest and most predictable material out there. Between the industry leading contact angle for wettability and the fact that it is at a much better price, this is the material you want to use for your impressions if you are interested in accuracy.



You will also get a SonicFill handpiece. Using this for your directs will make them fun again – combine it with the Garrison ring matrix system and you will find that this is one of the easiest and most profitable services you provide!



The next box will arrive after the holidays as it isn't released quite yet, but Ivoclar is consolidating their adhesive solutions into one convenient system. You will have the option of using it for light cure or dual cure and eventually the much loved MultiLink will be incorporated into a kit that is simple to follow and easy to use to create exceptional bonds.



Because one of my favorite dental companies is Bisco, the season wouldn't be the same without a Bisco gift box – and in it you will find materials that literally changed our profession! The newest in what is essentially the gold standard AllBond line is AllBond Universal – and it can be used under light or dual cured material. You will also find TheraCal which will allow for direct and indirect pulp capping that will release Calcium ions for more than a year!





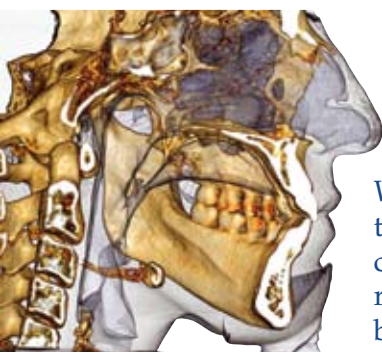
Because your hands are the greatest asset you have, you will also get a couple cases of the MicroTouch gloves. They wrap and protect your hands from the gross things we make them do – but also help to keep them soft and supple. The best form of protection is intact skin – so protect yours!



The next box will be a little bigger – but will also be incredibly cool! To make digital impressions super easy, super accurate, and super fast, the PlanScan will make single to multiple unit porcelain restorations digital and if you like, in one day!



Because technology is so powerful, I also want you to have the opportunity to have the largest perspective in your 3D diagnostics! We utilize the NewTom on campus at LVI and the ability to image airway and cervical alignment is a giant treatment planning asset! As you know, the airway is the most important physiology to protect and it is directly affected by occlusion – so you may as well be paying attention!



While the digital data is amazing, it's nothing without the benefit of interpretation so I will also send you a current version of Anatomage. It is the leader in virtual rendering and will allow you to select out airway or bone or which ever tissue you would like to see.



I am absolutely certain that every dentist should be actively in the implant world. You may choose to not place them; however you still will be the doctor restoring them and so you need to know the advantages of the Implant 1 system. To explore those, you will get both an Implant 1 surgical kit and also a voucher to spend three days with Leo Malin in the Implant 1 course at LVI. You won't find a better introduction to the advantages of platform switching and how to incorporate implants into your practice!



I believe that one of the unsung heroes on your team is your lab and the best approach to excellence is a well-trained technician who is in sync with you across the board. As a part of helping you to experience that kind of communication and precision, you will get a voucher for a 10-unit case from the LVI partner lab of your choice. Once you start with them, continue! All it takes is communication and you will experience one of the best working relationships in your practice!



In order to give you something to look forward to all year, I will also send you the registration for the 20th LVI/IAPA Gala event on October 22-24th! This will be one of your most cherished professional memories and will include several events that you will not want to miss! So go ahead and mark your calendar right now!

*So be on the lookout as these
should arrive for the holidays.*



A HAPPY TEAM REQUIRES GREAT LEADERSHIP

Ashley Johnson

If Your Leadership Bulb Is Not **Burning Bright**, Don't Expect Your Team's To Be

Teamwork requires leadership, first and foremost. What I have found working with dentists in all stages of their careers, with all different sizes of practices and locations, success is a journey and its foundation is leadership.

If you WANT different, you have to DO different. Thinking, planning, and goal setting is necessary to create your road map. If you want to actually get to that place you need to saddle up and start riding in that direction. If you don't take action you might as well turn your calendar to Dec 2015.

Once you pick your "path", let everyone know what it is. First and foremost in effective leadership is communicating this with your team. They want to know

what you will tolerate and what you won't. Everyone on the team needs to be empowered with the "rules of the game." When dilution happens, it's your job as team leader to bring them back quickly, help them understand why and help them come up with a better decision next time.

Secondly, let your patients/guests know what you and your practice stand for. This can be as simple as de-cluttering your office (even behind closed doors) and freshening your decor, to investing in technology and your education. It can mean communicating with your patients where you draw the line in the sand when it comes to treatment. That you will let everyone of them know that you will be completely honest about



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My wish for all of you is that you start

today practicing in a way that is authentic to you. If you are living a life that is out of alignment with that, it's like trying to hold a beach ball under water. It can be done but it has to be done over and over and it's exhausting. If you have people on your team, patients in your practice, friends in your life that are just that frustrating to you, well, maybe that is your clue to let them go.

I have found that the best leaders attract the best teams. The best leaders know how to have fun every day, even in the midst of hard work and less than perfect days. The best leaders know how to say thank you. Tell them what their unique contribution is to your team and your success and see how they shine bright.

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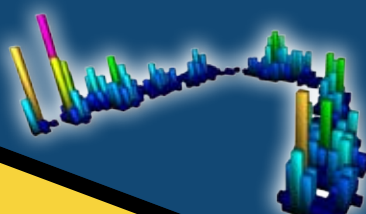
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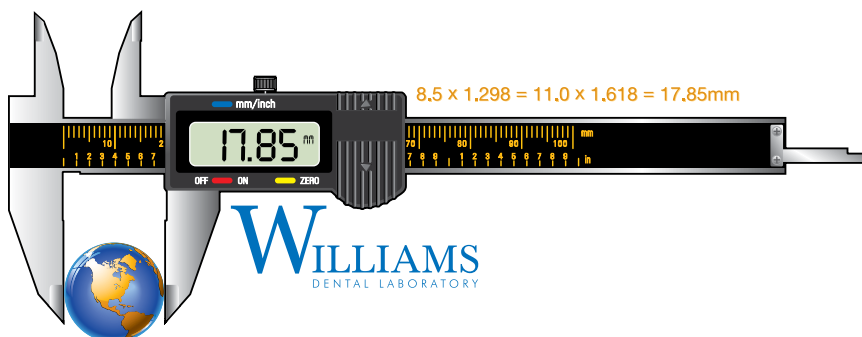
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Dr. Raman pictured with wife, Woonmi
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