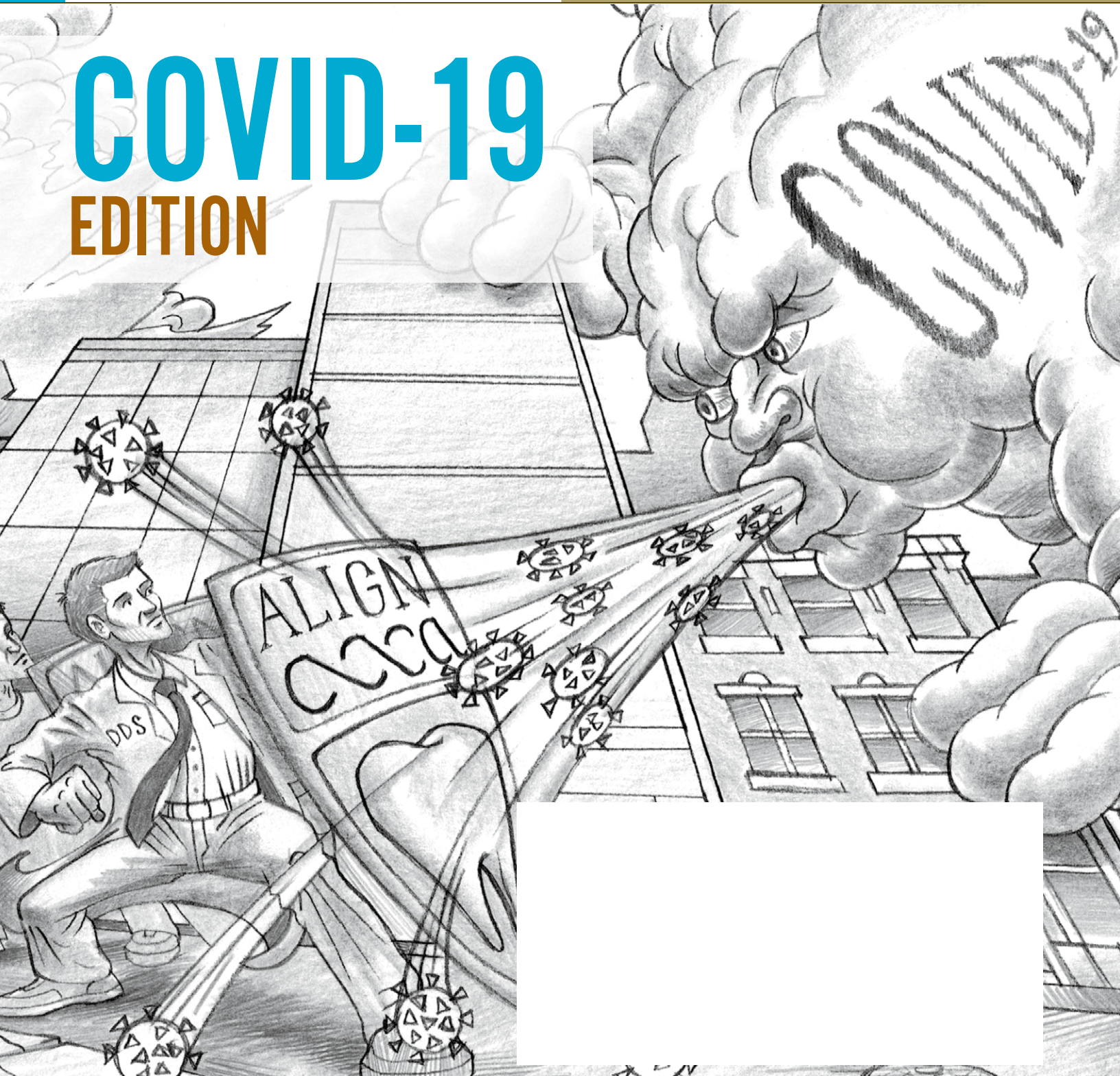


the **Journal**
American Academy of Clear Aligners

The Academy for Clear Aligner Therapy

COVID-19 EDITION





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the Journal

American Academy of Clear Aligners



Editorial

COVID-19 and the AACA

This past March, we completely reworked all the content for this Spring 2020 issue. Instead of featuring the usual articles of clinical relevance, we are presenting timely, practical information on the effects of COVID-19 on our practices and on our patients.

In this issue, readers will find up-to-date information from

- The American Dental Association
- Team Training (our practice management partner)
- Align Technology and Invisalign
- President David Galler

In addition, the AACA has created for its members:

- Free chat rooms with our AACA lawyers, to help members comply with employment law and decipher the new Congressional bill
- Informational resources specifically designed to help guide Canadian doctors through this challenging time for practices and patients
- Up-to-the-minute infection-control regulations posted to all chapter chats
- A stress-relieving Whatsapp room for Memes and Funny Videos
- A "Clincheck Videos" section on our website, featuring 250 short, 2-to-3-minute videos. These videos depict actual, typical ClinChecks that Invisalign has sent to dentists, and, very importantly, crucial suggestions on how dentists can improve these initial ClinChecks by requesting modifications. With this feature, members can remain productive, albeit out of office.

We look forward to a speedy return to normalcy for our profession.

Dr. Jeffrey Galler
Editor



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Creative Direction/Design: Mojo Design Bar

Copyeditor: Marc S. Glasser

Cover Illustration: Tom Lange

Contact

Advertising: aacaligners@gmail.com

Editorial: editor@aacaligners.com

mglasser@aacaligners.com

the Journal

American Academy of Clear Aligners

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Align Launches Virtual Care Platform



The COVID-19 pandemic is presenting dental professionals with unprecedented challenges in balancing public and employee health while providing continuity of care to their patients and maintaining their practices. Government guidelines enforcing social distancing, coupled with ADA and other association guidelines to refrain from all but emergency treatment, are the right measures to help prevent spread of the virus and protect public health. At the same time, these necessary precautions have made it difficult for doctors to continue supporting patient care and in-progress treatment.

Today, new digital technologies are making it possible for doctors to maintain virtual contact with their patients when they cannot visit the office. While the notion of virtual care existed prior to the pandemic, the need for social distancing has brought this technology center stage.

In late February 2020, Align initiated a pilot of new digital tools to help doctors virtually connect to their Invisalign clear aligner patients. In light of the COVID-19 pandemic, Align recently accelerated the availability of its new Smile Consult and Invisalign Virtual Care technology to help support doctors and their patients through this challenging time.

"Providing doctors with access to these technologies was the right thing to do for doctors and their patients," noted Simon Beard, SVP and GM of the Americas, Align Technology. "This is a technology that will help doctors now, and a tool that will be available to help doctors over the long term when practices reopen their doors."

With **Smile Consult**, practices can quickly and easily set up a virtual face-to-face appointment with patients. This helps doctors to:

- Check in on patients' treatment progress
- Discuss patient concerns remotely
- Help answer questions before bringing in prospective patients for an exam

Smile Consult is a fully online, digital and HIPAA-compliant solution that offers an easy-to-use interface which is intuitive for front office team members to learn and implement. Smile Consult is available for Invisalign-certified doctors to begin using in their practice within 24 business hours after accepting the Terms and Conditions.

Invisalign Virtual Care works via the Invisalign Doctor Site (IDS) and the My Invisalign app to connect doctors and Invisalign patients virtually. It enables remote monitoring and virtual appointments with your patients in two ways:

- Remote monitoring: Patients use their smartphones to take progress photos and videos, which automatically upload into the doctor's new Virtual Care tab in the Invisalign Doctor Site (IDS). The Virtual Care tab includes tools and features to monitor treatment progress, and allows doctors to send messages back through IDS via email/texts that their patients then receive in the My Invisalign app.
- Virtual appointments: Doctors can also schedule virtual appointments with their Invisalign patients using the Zoom Cloud Meetings app, so that they can have virtual face-to-face conversations in a HIPAA-compliant virtual environment.

Invisalign Virtual Care is being rolled out to doctors in groups to allow Align to scale for effective training and to permit real-time refinement of the technology based on feedback and suggestions from doctors.

Align is providing these tools at no cost to Invisalign-certified doctors. Additional information can be found at: <https://bit.ly/3czs6f3>.

align



Do you have an idea, treatment, or review that you feel your peers would benefit from? Contact editor@aacaligners.com to find out how to author articles in future issues of the Journal.

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Leadership Report

LEADERSHIP 101

by David Galler, DMD



You went to dental school because you were smart but didn't want to go spend interminable years in medical training, or because you were good with your hands, or because you wanted to have a family life/work life balance, or because you had a father/mother/uncle/brother/sister/cousin who was in the field....

No one went to dental school because the college guidance teacher said, "You are a natural leader; go to dental school."

And now, here you find yourself thrust into a situation in your office and life where you need to make **tough decisions** that will impact the lives of your patients, your family, your staff, and their families...and it sucks.

Here is what you need to know:

This will not be the end of the world. This will not last forever. No cable news report expert knows what happens here and how long it lasts. The country is full of "experts" who make predictions in the hope that they are right and the country remembers them as the genius who predicted it.

As the **dentist** in the office, you are the **leader**. Period. The masses look to you to **lead**—whether it is a natural skill you possess or not. **No** way around it. You are at the podium, the crowd has hushed, and you need to **lead**. It's what keeps civilization going. Right decision or wrong, it doesn't matter. The people need clear, definitive leadership. And **today that person is you** (sorry).

So, here is what you are going to do:

1. Go to a private room and have yourself a good freaking cry about how scared you are and how you are unsure of what is to come and how/when this will all end. Then wipe your eyes/nose (and disinfect your hands with Purell/Lysol/soap), put on a brave face, and call a staff meeting.
2. Analyze the information in front of you: Recommendations vs. mandates. Your patients' needs. Your local hospital's ER capacities. Your local regulations. Your economic realities.

Your staff availability/economics. And **make a decision**. A clear one. What you will or won't be doing. When it starts, and when the first reevaluation date will be.

3. Then get in front of your staff, and speak clearly about what is going to happen. Period. You're not taking opinions today. Not making it seem worse than it is. Not sugarcoating it. Just giving them clear facts about reality.
4. If you need to make tough choices like furloughs (please Google this concept ASAP, and apply it if helpful), **do it clearly and definitively today**. Allow staff to claim unemployment help from the government now. We are awaiting a bill from the Senate to guide us.

Leadership also means you take hits, absorb them, and do not react. Patients might be angry. Staff might be angry and cruel to you. You take these hits and shut up, because that's what leaders do. **Leaders** take hits and personal attacks, and they **lead**.

Today you demonstrate why you have been granted the title of Doctor. I am here to guide and assist you. But it is your time to shine and **lead**. Without it, everything is chaos. People might not like your decision, and with hindsight it might prove to be wrong. But that doesn't matter. **Try your best. Make a decision. And lead.**

When they ran simulations of the "Miracle on the Hudson" airplane landing by Captain "Sully" Sullenberger, the final report concluded that the reason he was able to save everyone was not because the plane wasn't in real danger, not because he had superior skills, and not because he got lucky.

One reason: He was thrust into leadership. He analyzed, made a decision, acted quickly, and executed. Had he taken a poll of air traffic controllers or passengers, or waited for more information, all 155 people on that plane would be dead today.

Try to remember the 3 C's of leadership: **Calm, Confident, Communicate.**

I know you all can do it. The world is running into chaos. Take control of your office and lead.

Your friend and (just finished crying) leader, David Galler ■



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Join the REVOLUTION!

This Too Shall Pass

by Jeffrey Galler, DDS



Most dentists are experiencing a totally unexpected, extended, unpaid vacation. This is unprecedented in our lives and in the history of modern dentistry.

Some liken the situation to the AIDS epidemic in the early 1980s, but it's not quite the same. Then, our main concern was convincing patients that we were following strict universal precautions in

cleanliness and in sterilization, and that dental offices were safe.

And, in fact, for dentists at that time, it was a wake-up call to be more diligent about sterility. For example, until then, dentists were often unable to properly sterilize handpieces. Many instruments needed to be reengineered to allow for proper sterilization.

The problem today is more of an economic one. Most dentists and patients understand that the health crisis will pass, or at least be ameliorated, but the financial impact will be more devastating and longer lasting.

What do we do in the meantime? Instead of moping around, depressed, watching meaningless television shows while mindlessly eating junk food, consider:

- For patients undergoing Clear Aligner Therapy, we can practice teledentistry, in real time, via smartphone cameras and apps. We can ascertain that ClinCheck tracking is proceeding as planned, that patients are fully compliant, and that aligners are being routinely cleaned and disinfected.

- For all our other patients, a friendly phone call from us, simply inquiring about a patient's well-being, and providing emergency treatment options, goes a long way to help maintain our relationship and generate goodwill for the practice.

What else can we do in the interim? Besides logging on to the myriad of online dental CE courses available, for our personal growth and self-improvement:

- Visit world-class museums, at sites like <https://bit.ly/3dS5tUL>.
- Tour major world cities by logging on to sites like <https://bit.ly/2x0u1ua>.
- Listen to "TED Talks"—<https://www.ted.com/talks>—and hear a variety of intelligent, short lectures on a variety of subjects, such as science, technology, social change, nature, and health.

Think of all the great stories you'll get to tell your grandchildren, and remember that "Life is what happens to you while you're busy making other plans" (John Lennon). ■

For up-to-date information and fact sheet about the Coronavirus Aid, Relief, and Economic Security Act (CARES Act), you may wish to visit: <https://bit.ly/2ykWEm4>, or watch <https://bit.ly/2wDzGGf>.



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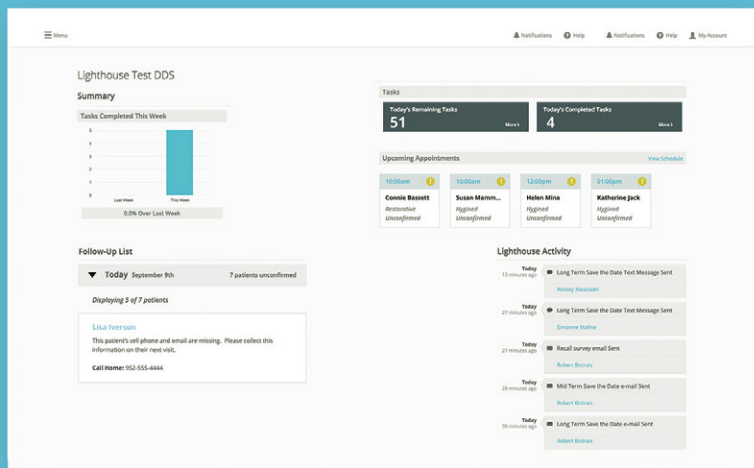
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**What You Need to Be Doing Today, Tomorrow and
Next Week to Wade Through These Uncharted Waters**

Part 1: What You Can Do NOW



Introduction: Be the Leader Your Team Needs

In times of crisis, people look for leaders. Just as a child looks up to his/her parents for reassurance that everything will be okay, your team is craving the same.

Everyone wants to be the leader when things are going well. It's fun to be the owner when everything's great – when you get to be friends with your team, when the

bonus checks are going out, and everyone's riding on cloud nine. But it takes a special person to lead through a crisis like we're facing now. When the s**t hits the fan it's never as much fun.

To help you lead your team, your family, and yourself effectively right NOW, here are ...

7 Things Leaders Do Well in a Crisis

1. Know that you are not their friend.

As a leader, you shouldn't be complaining about the situation, the response, the lack of money coming in. You are not out at a bar having a drink with a friend – you're communicating to your team.

2. Be heard *and* seen.

Leaders don't shy away in times of crisis, they don't run and hide, and they don't disappear. Your team needs to hear from you, and hear from you often. They want to hear from the real you, the genuine you – not a face that you think you need to create. You can talk to them about what is going on, what you are doing, and how you are making your decisions.

It doesn't help your team to be talking about doom and gloom – they need you to be optimistic, but real. Don't say things that aren't true or that you can't follow through on. People respond to transparency, because it helps them process the information and to know that you are doing everything possible to help everyone involved.

Let them know that you will be making decisions – at times tough decisions – so you can ensure that the business continues once this has passed. Be caring about how this is affecting your team and their families. Reassure them that you are concerned about your patients, and that you

want to make sure they are cared for and have a practice to come back to.

Fear comes from our imagination, not our reality. If we don't give your people a reality to calm their fears, their imaginations will run wild. This is why you need to be seen and heard more than normal.

3. Remain confident.

People want to follow someone who is strong, for whom they feel confident in, who makes them feel like they can be successful. For me, I talk to my teams about how we CAN get through, it might be painful (so I am being honest – but confident), but we will get through it, and when we come out on the other side, we will have great stories to tell our grandkids. Now is not the time to be shaky, unsure, or disappear.

4. Don't show fear to your team.

You have every right to be fearful, although I am not fearful. I do believe that we will come through this and we will come through stronger than ever. But if you need to show fear it should be done with your peers and not with your team. They need a confident leader to whom they can express their fears. It's lonely at the top – and this is one of those times.

You need to make sure that you surround yourself with a group of peers that you can talk to in times like this. Our Blue Diamond and CEO members are doing just that. I belong to a CEO Vistage group and we just met yesterday –

and on that call, they were free to express their fears and vent their anger, so that when they go back to their employees they are presenting themselves as confident leaders. They're getting their support from their peers, not their reports.

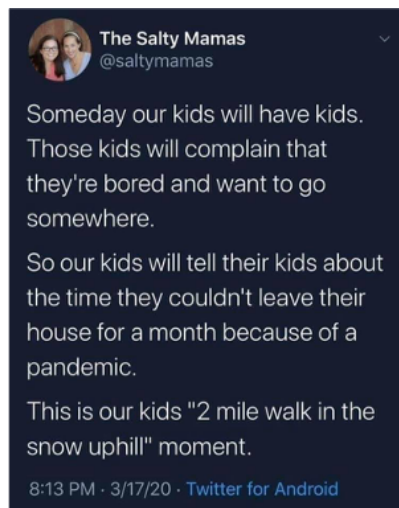
As the owner of the practice, you need to be confident even though you might be personally fearful.

5. It's okay to let them know you are worried.

There is a difference between fear and worry. Fear comes more from the unknown. Let them know what worries you and how you are preparing to respond to those worries. This is a part of transparency. When people understand how you are making your decisions, it lessens their fear and worry because it will never come out of left field and blind-side them. As a leader, I am more worried about our people. I have confidence that I'm going to be fine, that the practice is going to be fine, but I worry about the people and how they are personally getting through the crisis – and I share that worry with my team, so that they know that I care about them.

6. Stay in regular contact with your team.

If you've read my book *11 Habits of Highly Successful Dentists*, you know how I stress the need to create good communication habits. The more people you lead, the more this skill shines. We are facing something we never thought we would see – taking our dental practices virtual. We thought it was hard enough to communicate in practices with multiple locations or practices that are operating in split shifts, but to have all of our teams quarantined in their



own homes is something completely new.

When leaders are afraid, they tend to stop communicating -- and often we may not even realize we are doing this. It may be because they are afraid of giving bad news, or talking about the truth of the situation, or having difficult conversations. But going into your shell and not communicating is the worst thing you can do.

In times of crisis, you want to over-communicate. Tell it to people straight, and do it in a caring and compassionate way. People will be upset regardless, that is human nature, some people are going to be mad, some are going to blame you and at the same time you have to connect with them and let them have their natural reactions. If you and I could wave a magic wand, and make all of this go away, we would. But we can't. So, we need to be consistent with our teams, consistent in our message, consistent in caring about people, and consistent in our communication. Be consistent in your emotions and continue to put a finish line out there in the future for your team (that line may move, and you will update as you find out new information) but having a finish line helps people see that there is an end in sight.

Another way to keep in regular contact is virtual meetings -- daily or every other day. Many teams who successfully work virtually start their day with a daily virtual huddle. While we are not in the practice, we are also losing out on the human contact, socialization and friendship. In addition to updating your team on what is happening, a virtual team meeting allows you to help keep emotional bond and friendships that have been created. You can quickly set up a FREE account at <http://zoom.us> – it's easy to use, and everyone can see each other's faces.

7. Involve and encourage your team.

With the "free" time that has been created, team members can volunteer for things like delivering groceries to those at high-risk, sewing masks for medical personnel, or they can manage your social media to lift people's moods with encouraging posts. In our book, *The Ultimate Guide to Doubling and Tripling Dental Practice Growth*, I talk about how people support what they help create. Great teams band together to come up with solution. Don't underestimate your team's power and willingness to help you in this crisis.

Use Your Downtime Wisely

With the added time we now have, it's a perfect opportunity to start knocking out the projects that have been put off because we never can seem to find the time. But instead of cleaning out closets, let's use this time to better your practice for the long-run! As practice owners, this isn't a vacation; now is not the time rest on your laurels.

1. ANSWER YOUR PHONES.

I've heard of so many practices who just closed their doors and set up the voicemail. Wrong response! I recently saw this local Facebook post. Regardless of what was really happening, the perception was all dental offices were closed.

We have a member who saw 15 emergency patients in the first 2 days that his office was closed. Because he answered his phones!

In my practices, we have a front office team member, a doctor and an assistant each day the practice is normally open. In the front, they answer phones and work on revenue cycle activities (see #2 below). The doctor and assistant are seeing emergency patients. Depending on your state recommendations and mandates, you may or may not be able to do the same.

Make sure that the person/people answering your phone has all the current information on your anticipated re-opening date and all FAQs (updated with answers to all COVID-19 questions)

But the big question is "What are you doing to answer your phones?" In a worst-case scenario, we forwarding the calls to a cell phone with doctors on call to treat emergencies.

** Have you checked or changed your voicemail? Done incorrectly, it may be preventing patients from reaching you. For example, if your voicemail starts with "...our office will be closed until XXXX" before you ever reach

how emergency patients can reach you, you are absolutely losing out on patients who hang up when they hear you are closed. Think about changing that to be "If this is an emergency or you are experiencing pain, please contact the doctor directly at xxx-xxxx." And then go into your instructions for non-emergency patients

** Speaking of changing your messages, have you updated your website? New or emergency patients won't be thinking to check Facebook.

2. Continue regular revenue cycle activities.

There are insurance companies that are open and are continuing to operate. Following the process we teach our members, you want to contact the insurance companies on day 15, making sure they've received your claims. If they have not been received, then you're immediately re-submitting and putting them back on your list to follow up. If they admit to having the claim, then we are asking when can we expect payment.

3. Clean out the old A/R.

Many practices never write off old debt even though it is mostly uncollectable. For us, it means that who hasn't made a payment in six months, we make an adjustment on the account to put the account at zero. Then in the patient's clinical notes, we write the balance that we set aside, and should they come back, we'll attempt to collect that balance or some portion of it. But this way, we have our A/R as clean as possible. Go through the 180-day plus and get it cleaned up.

In this time of crisis, I wouldn't do your normal collections process, as you will come across as tone deaf. But simply changing the conversation and changing the goal, you can showcase your concern and care for your patients. You can call all patients you are currently communicating with about an outstanding balance and proactively tell them you are deferring their patient balance until a certain date (I would start with May 11, as that is 8 weeks from when this crisis really broke). You will have patients express gratitude for what you are doing! And those patients who can afford to make payments will do so and not take you up on the deferment.



4. Document your systems.

In our book *The Ultimate Guide to Doubling and Tripling Your Dental Practice Production*, I talk about “Tiger-Proofing” your practice. The gist of it is that the best practices are built on systems, not people. We grow best around talented people, but if your practice is built on the back of a talented person and that person is no longer there, you no longer have a practice. To build your practice on a system, the first thing to do is start documenting the systems in your practice, so that a new team member can follow the process without error.

If you are new to this, I suggest starting with your revenue cycle activities. Imagine what would happen if your entire front desk disappeared – what would temporary staff need to know to keep your revenue cycle activities running? This would include answering and converting phone calls into appointments, scheduling patients, and your financial and billing systems. You can start anywhere, but make sure you start!

5. Start planning and preparing for your re-open.

What is staffing going to look like? Where will you need more help? Where will you need more resources?

- In my practices, I am planning to have dedicated people who are doing out-bound calling to schedule/reschedule/confirm patients
 - ◊ Do we have enough phone lines and equipment to do this?
- I am also planning for early and late hours where we may not have had those previously, as I am anticipating there won't be enough capacity to see all the patient demand in the first few weeks and months.
 - ◊ We will focus on filling the hygiene schedules first (because 70% of restorative dentistry comes from hygiene).
 - ◊ Then we will reschedule the more productive, restorative procedures that were postponed.
- Have a quick infusion of cash to the first payroll immediately following the re-open, as there will be a gap between production and money in the

bank. You will want to pay close attention to your productivity per hour during that first week as that will foreshadow where your cash will be.

- What are we doing with our marketing during this shut-down? Do we need to re-start or adjust our messaging? I believe people will be responsive to offers related to dentistry re-opening and the new world we are living in after the COVID-19 pandemic (as the virus won't be gone and will still be on people's mind).
- Make sure you understand your cash position. There will be practices who re-open who are not aware of their cash position and they will run out of cash. When you re-open, you will have payroll kicking off day one. If you haven't prepared and done everything possible to have patients coming in the door on day 1, if you don't have your financial systems, if you haven't kept up with your revenue cycle activities, you risk not having enough cash to pay that first payroll check.
- Prepare for employee churn. There is a lot of uncertainty and murkiness out there and as we return, we will be figuring out a new normal. Are you prepared for this churn? What if not everyone on your current team returns? What if you need to add additional staff? Are your hiring and onboarding processes documented and ready to go? Or do you just fly by the seat of your pants?
- Prepare for how you are going to go back to your patient base and let them know you're opening. What's your plan? How are you going to get that message out? There needs to be a plan, the minute you know the date, the patients should be bombarded with messages on social media, through email, through calls, through voice messaging, through text messaging.

What To Do NOW



It all boils down to this: If you want to transform your anxieties and fears into confidence... and go from panic to prosperity... there's no better time to act than NOW.

Because, while much about COVID-19 is unknown... much about how to respond effectively is known.

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- 2. EMAIL:**
Reply to this email and suggest the best time and day for us to talk.
- 3. PHONE:**
Call now 877-732-2124

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With our best to you and yours,



Wendy Briggs and Dr. John Meis,
Co-Founders of The Team Training Institute



Dr. John Meis is the CEO and co-founder of The Team Training Institute. A 4th generation dentist, he has proven to be an effective mentor for dentists looking to build exceptional practices, and those who are looking to create an enterprise. He's a highly sought after consultant, an international speaker, and the bestselling author of three books, including *The Ultimate Guide to Doubling & Tripling Your Dental Practice Production*. John's proven executive coaching process helps businesses strengthen their culture, clarify their strategy, and update their business plan, and he will be joining us at the GRC to share some of that wisdom.



Wendy Briggs is a registered Dental Hygienist with more than 25 years of experience. For more than 16 years Wendy has helped thousands of dentists take control of their practice and uncover millions of dollars of unseen/untapped revenue by serving their patients at a higher level. Production is never the goal, it's the result of taking great care of our patients. She has consulted with more than 3,718 dental practices in 12 countries. She is a published author who has been featured in virtually every dental publication and has lectured for and consulted with many of the top leaders in the industry. In addition to her managerial expertise, Wendy has one of the most highly regarded hygiene and Periodontal programs in the industry. As a co-founder of the Team Training Institute, and Founder of Hygiene Diamonds she teaches dental teams how to maximize their potential. Dental Service Organizations and privately owned practices soar when they adopt her protocol.

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AT-A-GLANCE

NOVEMBER 4

12:00 pm	Registration
12:00 pm–3:00 pm	Convention Floor Opens
3:00 pm–4:30 pm	Opening Session—#buildingbetterlives
4:30 pm–7:30 pm	Convention Floor Reopens
7:30 pm–10:00 pm	Banquet/Awards Dinner

NOVEMBER 5

7:00 am	Breakfast
8:00 am–7:00 pm	Convention Floor Opens
8:00 am–12:00 pm	Breakout Sessions at the top of each hour
12:00 pm–2:00 pm	LUNCH Celebrity Meet and Greet Jeremy Piven from <i>Entourage</i>
2:00 pm–6:00 pm	Breakout Sessions at the top of each hour
7:30 pm	Private Party at Stratosphere (need badge for entry)

NOVEMBER 6

7:00 am	Breakfast
8:00 am–11:30 am	Workshops—Choose 1 (first come, first served) 1) Bioclear Black Triangle Certification 2) Team Training Institute Practice Development 3) DSD (Digital Smile Design) App Certification 4) Healthy Start Certification Start Course
12:00 pm	Convention Ends

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How a Pandemic Can Change Your Practice Overnight

by Perry E. Jones, DDS, MAGD, IADFE



The spread of COVID-19 has had a profound impact on dental professionals. Our response to this pandemic has evolved swiftly over the past few weeks, and our ability to adapt is paramount. If we save one life, the strictest measures are worth the inconvenience and even the financial burden. This article is written to chronicle the past 2 weeks of a “typical”

GP dental practice hoping to preserve life and stay afloat in what may well be the worst of times. Hopefully, we will soon see the best of times!

It seems there is nothing “typical” about anyone’s dental practice, as we are all individuals, different and unique. First, I’d like to give you an overview of my practice, and perhaps you may find it not too much unlike your practice. I live in Richmond, Virginia, and practice about 1 mile away in a small suburb of Richmond called Bon Air. Our practice philosophy is to deliver the very highest level of care for our patients. Many if not most of our patients are friends and relatives, as I practice literally next door to the home where I grew up.

I have a small 5-operator GP practice with 6 employees, including 2 part-time hygienists. It is very much a family practice, as 2 of my sons work in the practice and help with the many technologies we have adopted.

I have been in practice for 40+ years. I am a GP but with great interest in technology. Years ago, we embraced tooth movement with clear aligners, and we were early adopters of intraoral digital scanning. About 6 years ago we left the “Stone Age” of gypsum, and fully integrated 3D printing using a Stratasys Objet 30 printer. We primarily produce models on which we make a plethora of different thermoplastic appliances such as retainers, occlusal guards, mouth guards, and tooth movement appliances. Realizing the value of 3D imaging, together with my sons, we founded Mobile Imaging Solutions, the first mobile cone-beam computed tomography 3D imaging business in the Richmond area. We offer in-house milling of fully sintered BruxZir zirconia to create a “crown in an hour” service. I mention these technologies as they entail ongoing monthly expenses.

I would like to outline the chronology of how my private and professional world changed literally overnight. I am sure many of you have similar stories to tell. My chronicle starts as we returned from a spring break with the grandkids on March 14, 2020. The media were just beginning to report the COVID-19 cases in Washington state and around the world. At that time, any virus threat seemed of concern, but not so much to Virginia, my family, or my practice.

Sunday, March 15, 2020: We called together an emergency meeting with my sons to formulate a plan to address the American Dental Association (ADA) and Centers for Disease Control (CDC) recommendations that at this point we were aware of but had not as yet seen published.

Monday, March 16, 2020: I returned to my practice; my practice world was beginning to change overnight. We started the day with an office meeting to explain our response to the ADA recommendations, and the impact on our patients, our practice, and our employees. That day, the ADA issued a statement calling on “dentists nationwide to postpone elective dental procedures for three weeks, in order for dentistry to do its part to mitigate the spread of the COVID-19 virus.”

<https://bit.ly/2UVgN9P>

Following the ADA’s recommendations, we immediately implemented an “emergency only” patient protocol. We cancelled all hygiene patients as well as patients scheduled for various routine restorative procedures that could be deemed nonemergency. We used the ADA guidelines for a definition of “emergency” treatment as constituting procedures dealing with potentially life-threatening situations, tissue bleeding, severe pain, or infection.

<https://bit.ly/345aV24>

Given the severe economic burden of no patients meaning no income, I placed my employees on furlough to allow them to apply for income assistance and state unemployment so that they might return to work without penalty. We are very fortunate, as our employees have working spouses. Our plan was to cut back the office to “bare bones,” in an attempt to salvage the office for a future return to full patient care. As the worldwide pandemic looked very bad and the future was very much hard to forecast, we began to look for financial help.

Wednesday, March 18, 2020: The Virginia Dental Association (VDA) published the above-mentioned ADA statement as a directive and explanation for Virginia dentists.

<https://bit.ly/2X3ElvX>

The VDA e-mail also included reference to SBA, ELDI and PPP loans available for financial help to dentists impacted by the COVID-19 virus.

<https://bit.ly/2JBjHLK>

Thursday, March 19, 2020: My son Michael and I spent the day making application for a SBA/ELDI loan. Likely the software was a first trial, with a plethora of first-run flaws, but after working literally from 8 AM to 6 PM, the application was finally completed. The application included various financial items that required all hands on deck to find. Luckily, my wife keeps great records and we were able to insert the required information.

Friday, March 20, 2020: We were able to access the SBA/EIDL emergency loan website and verify that our application was complete and assigned a number. Further, the loan was posted as “under review.” This was very encouraging information!

We also received an e-mail from the VDA reviewing the situation and urging all dentists who had not already done so to halt all nonemergency treatment and, if at all possible, to close their offices and practice “social distancing.” The VDA’s president wrote that “I understand that 50% of dental offices here in Virginia are still open and continuing business as usual.”

<https://bit.ly/2wXO8Jp>

The letter alluded to the many questions concerning the ADA “emergency” definitions and exactly what dentists should do. As a member of the Virginia Board of Dentistry, I was also fielding questions from dentists in Virginia as well as in other states. I could only hope that the reference to only 50% compliance was based on incomplete or insufficient data. It was disappointing to think that the recommendations of the VDA, the ADA, and even the CDC were possibly not being followed.

Tuesday March 24, 2020: I received an e-mail from a Virginia dentist who was very concerned about reports that there may be dentists who are intentionally not following the ADA, CDC, and VDA guidelines. He sent the ADA Ethics guidelines as a reminder to dentists in the Commonwealth of Virginia. The guidelines are based on the ADA’s principles of autonomy, nonmaleficence, beneficence, justice, and veracity.

<https://bit.ly/2yuq8xT>

I suggest that dentists reading this article take a close look at the ADA ethics code and its recommendations, as they may apply to patient treatment during the COVID-19 crisis.

Wednesday, March 25, 2020: Virginia’s progressive governor, Ralph Northam, who is also a physician and has fully understood the health implications of a viral pandemic, directed all hospitals to stop performing elective surgeries or procedures to help conserve supplies of personal protective equipment (PPE).

<https://bit.ly/2R657QM>

The VDA followed this directive with an e-mail to help dentists understand the governor’s mandate. The e-mail emphasized that unlike earlier recommendations, this order was mandatory and carried the force of law; violators were subject to penalties that included fines as well as loss of license to practice.

<https://bit.ly/2UX1tK8>

It is extremely rare for the governor of the Commonwealth of Virginia to extend such broad powers to the Virginia Board of Dentistry. No doubt this action will help save lives!

Friday, March 27, 2020: The SBA announced that Congress passed the CARES Act and it was signed by the president. The ADA and the SBA provided an online summary of the financial assistance available to small business, including Economic Injury Disaster Loans (EIDL) and Paycheck Protection Loans.

<https://bit.ly/2RbLFSv>

This was good news, especially as we have a completed SBA loan application that is “under review”! The remaining question was, When will the application result in real help (i.e., money in the bank account)?

To that end, we called the provided SBA number that evening. We were told the wait on queue would be about 2 hours, and after the predicted time, an agent checked and verified that we did in fact have a completed loan application that was “under review” and told us that if we did not hear anything back by Friday, April 3, 2020, we should call again.

Monday, March 30, 2020: Governor Northam made Virginia one of the first three states (with Maryland and New York) to enact a mandatory “stay in place” order. We hope these measures will reinforce the actions that dentists should be taking.

Tuesday, March 31, 2020: Early in the morning we learned that the SBA loans to include the \$10,000 immediate assistance would require a second application. We immediately signed back on to the website to work on this. The second application was in fact significantly easier and quicker to complete.

Summary as of Tuesday, March 31, 2020:

We are currently diligently trying to follow the CDC, ADA, VDA, and Virginia governor’s recommendations and mandates. We are sheltering at home and trying to use tele-medicine to field dental emergencies. We have acquired an .stl file from the Internet and are working to help create headbands for face shields using our Stratasys 3D printer. Hopefully, we will be able to create homemade face shields to donate to local hospitals as the PPE need increases and supplies dwindle. Although our financial condition will likely continue to become more dire, it’s most important that we think of lives saved, not financial impact. Family safety and health are the most important asset. We can always rebuild what we have lost; we cannot replace a life lost! ■

SBA Tells ADA: Dentists Can Apply for Both Economic Injury Disaster Loans and Paycheck Protection Program Loans

The **ADA News** (4/6, Garvin) reports that the Small Business Administration told the ADA on April 6 that “dentists can apply for both Economic Injury Disaster Loans and Paycheck Protection Program 7(a) loans.” The article said that the ADA shared the news with members in an Issues Alert from ADA President Chad P. Gehani that said, “We are happy to report that our ADA Washington Office received a call this morning from the Small Business Administration indicating that eligible

entities can apply for and receive both the [Economic Injury Disaster Loans] and [Paycheck Protection Program 7(a)] regardless of when the entity received their EIDL loan dollars,” and “we expect written confirmation to follow.”

Visit [ADA.org/virus](https://www.ada.org/virus) for the latest information on COVID-19. ■

Help You Can Use

Paycheck Protection Program (PPP)

Economic Injury Disaster Loan (EIDL)

- Payroll Expenses
- Employee Salaries
- Mortgage Interest
- Rent & Utilities
- Interest on debt incurred before 2.15.20



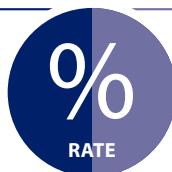
- Payroll
- Fixed Debts
- Accounts Payable
- Other expenses that can't be paid because of the disaster's impact

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3.7%
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then a 10-year term



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with approval

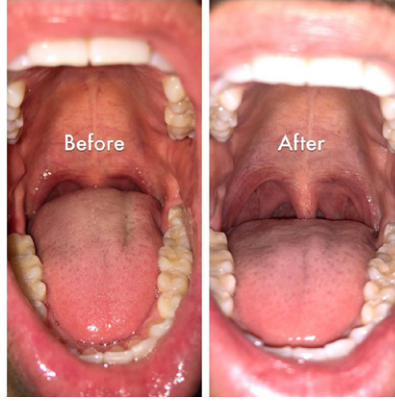


0%
is eligible for forgiveness

This information is accurate and updated as of March 27, 2020. Terms and conditions are subject to change.

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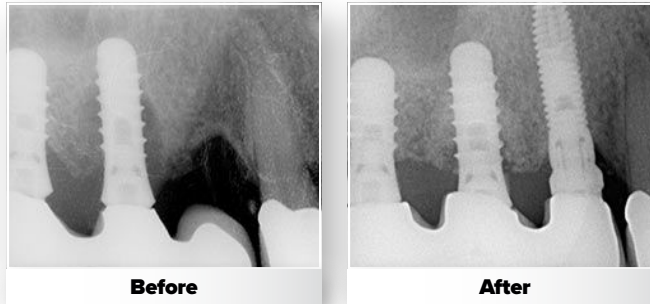
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Reingage News

Reingage Study Club News

Compiled by Jack Von Bulow, DDS, Reingage News Co-ordinator



To All Gallerites,

As we sit in our homes, unsure, frightened and in search of direction. Not knowing when or how this ends. Concerned for our family, friends, colleagues, team members, and patients. Can't sleep. Can't focus. Worried about the mortgage, the practice, the college savings, toilet paper. It has been invaluable to have all of YOU.

You are there on days that go well and days that don't. You respond when needed and reach out to others who aren't responsive. You share a meme or a cry. You have got my back and I have got yours. Who are we? GALLERITES!

Thank you David for this true gift.

Michael I. Wollock, Empire President

Diamond PLUS 1%er, full general dental practice, 32 hour a week office with 5 chairs one Doctor (me) & NO associates..

(Currently submitting more cases then all of Canada combined)



"Ça va bien aller." Translation from French to English: "It's going to be fine." At the beginning of the "stay at home" movement, Isange Remacle from Quebec posted this beautiful photo showing how children in that province are drawing rainbows to spread hope that this too shall pass. Many of our Arch Madness families have shared the fun (and sometimes chaos) in their

lives: the Clary family fished and camped, the Pate family went on a family hike, the Sasek kids played pranks on each other and cut their own hair, Heather Clark nailed the push-up challenge, and the Csaszars celebrated a birthday with Legos. Whether we were making a chicken coop, celebrating with a car parade, making videos for our patients, or holding Zoom meetings with our teams, everyone made lemonade out of the lemons we were given.

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Hello, Capitaligners. It is a strange time we are living in. I am typing this blurb to you from my empty and quiet office. In times past this would have been a welcome break, and now, like a professional athlete, we are all clawing to get back on the field! Please do not lose perspective; take some of this down time to shut off and reset so that you can come back even stronger than before. Like the Phoenix of ancient Greece, we will rise out of the ashes of this pandemic to be even stronger than we are now. I miss you all!



I miss you, and I hope you are doing well and enjoying snuggles with your beautiful babies! Here is my meme for this quarter.



Chicago Style Deep Bite welcomed 10 new doctors this winter, all practicing in our northern neighbor, Canada. Drs. Bhatti, Bonelli, Cantlon, Goswani, Hall, Moore, Nguyen, Shankman, Sinclair, and Spinnato will make excellent additions to our group. Meeting and conferring with other dentists from various places is one of my favorite parts of the AACA. It can be so beneficial to get other viewpoints and make new friends, especially in these “social distancing” times. Let’s not forget that the distancing is only location. Let’s keep our society very very close to our hearts.



In these difficult and uncertain times, we have been forced to distance ourselves from friends and even family. However, fortunately, thanks to modern technology and using systems like Zoom, we are able to connect and continue our social gatherings, and this has helped the Cartel and all of Galler Nation to maintain our morale and our mental well-being.



Golden Gate Straight has traveled all over the country in order to learn and represent. A couple of members were in Miami for the January AACA event. It was an amazing time, and we enjoyed some amazing Argentine BBQ on the beach. GGS grew this quarter as we added more members to our team coming from California, Arizona, Utah, Montana, and Colorado. It was amazing to meet new faces and bond with many other wonderful members. Many of our members are making lemonade out of lemons in this trying time by enjoying family time, and I have seen a lot of backyard camping trips. Stay safe and healthy, and hopefully we will all be together soon.



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LOS ALIGNERS

From SoCal to Canada to North Carolina and back, the last 90 days have been business as usual, promising, and then unbelievably challenging.

The Super Bowl, a dream meeting in Jamaica, and the first time hearing the word coronavirus seem like experiences that happened a decade ago. Shedding some tears watching CNN at 6 P.M. seems more like the order of the day.

But what's inspiring is the daily engagement of the Gallerite family and the reality that we're facing challenges together. And what's exciting is the addition of new Los Aligners, coming to us straight outta San Jose, California, at the end of February.

Yan, Elliott, Mackenzi, Sami, and Kyle, you have a new family of like-minded colleagues. And after 40 years of dentistry and 5 years of having been part of David's vision, I'm beyond grateful to welcome you to Los Aligners.



Happy Coronavacation, everyone. The Spikes are staying busy. Top of the news is that Dr. Alice Cheng is skipping GRC this year because she is expecting her first baby in August. Congratulations, Alice! The Cup is making its way through Mass Spikes territory, so far visiting Massachusetts, Texas, and California. Dr. Theresa Lassetter received her diplomate certification with the IDIA for implant placement. We are all quickly becoming familiar with Zoom meetings, virtual consultations, curbside aligner service, and filling out federal loan applications!



The Metroligners are loaded with superstar positive members. In the words of our Frank Visintini, "never in our lifetimes have we been given 2 months off to concentrate on our families and ourselves." He and his wife are running every morning. His soon-to-be-graduating-college daughter has found joy in baking and cutting Frank's hair! Mariliza LaCap began drum lessons

and gave us a "concert" after her first lesson. Brian Marino, who already plays drums, is taking up the guitar. Dave Nowacki, our Renaissance man of the group, is making the amazing house he built even more amazing. He's starting to draw again **and** considering writing the children's book he's always wanted to do! As for me, Drew Fairweather, I'm finally sitting at the piano again, and doing house projects I've put off for years. Mostly, though, I am grateful for more time with my wife, Judy.



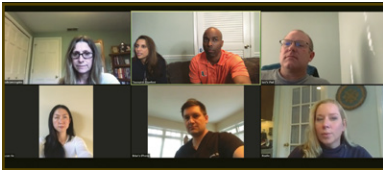
When you focus on the **good**, the good gets **better!**

So thankful for the time we have been given to spend with our families. Know that we are all in this **together**, and we will come out of it and **shine!**



Motor City Movers have had a relatively quiet first quarter. January and February felt like we all had our heads down and were working hard at our practices. We had our first Motor City Movers Zoom call and had a fun time seeing friendly faces and catching up. Several of our team members were at the Chicago Midwinter meeting and got to catch Dr. Galler's lecture! At the beginning of March, 4 Motor City Movers (Dr. Faline Davenport, Dr. Aramesh Darvishian, Dr. Kristin Horman, and Dr. Shawdi Assar) attended the D.C.-area Gallerite study club in Tyson's Corner and

enjoyed a fantastic lecture by Dr. Corey Anolik. Mid-March, everything changed for all of us. Most of us are thankful for the wealth of knowledge and help shared across all of the Gallerite chats, and we hope and pray that all our fellow Gallerites will stay strong, weather this storm, and come out stronger.



Richmond Re-aligners

Richmond Re-aligners, like all AACA members, were busy this quarter trying to weather the storm caused by COVID-related closures. Most spent hours fretting over their staff and patients, and calling advisors. We met to talk about what people were doing with infection control and disaster loans, and even had a cool demonstration on efficient hand drying. There was some fun this quarter: AACA in Tyson's Corner was a success and attended by about 40 Gallerites.



When things are going bad, don't get all bummed out, don't get started, don't get frustrated. No. Just look at the issue and say: "Good."

Accept reality, but focus on the solution. Take that issue, take that setback, take that problem, and turn it into something good.

If you can say the word "good," then guess what?

It means you're still alive.

It means you're still breathing.

And if you're still breathing, that means you've still got some fight left in you.

So get up, dust off, reload, recalibrate, re-engage—and go out on the attack.



The Str8up family has grown again with some fantastic dentists from the San Jose Reingage class in February 2020. We welcome Ali Mustafa, Allen Park, Christopher Rickards, Cindee Melashenko, Jouya Barati, Karim Seddik, and Kevin O'Shea, and wish them all the best in their journey as part of the Gallerite family.

Congratulations to Mark Pasternak's daughter on her acceptance into U of T's dental school, following in Dad's footsteps.

Some members got some vacation time in before travel restrictions were set in place. Sophie L. got in a much-deserved family vacation to Southeast Asia. Jaana K. was also vacationing in Southeast Asia, while Chuck G. got away to Cuba.

Chris Souliotis lectured in Vancouver on "Invisalign Tips and Tricks for Beginners to Advanced Users."

The first quarter of 2020 ended in uncharted territory, but here's hoping that all our members and their families are able to stay healthy and safe.

**STRAIGHT
OUTTA
BRACKETS**

Just before the world turned upside down, Straight Outta Brackets added several amazing new members after the San Jose Reingage course in February. We have been staying in communication via WhatsApp to encourage each other, bounce ideas around, and keep each other accountable with our daily push-ups to have a unified goal we are all striving toward. We will have a big group hug once we're allowed to get within 6 feet of each other again!



In February, the SuperCarlsBad team grew by 10 members, recruited from the San Jose Reingage course. Meet our newest members (L.-R.): Drs. Kain Yi (Walnut Creek, California), JaeWoo Cho (Diamond Bar), Karleen

Boparai (Dublin), Maye Lazaar (Los Gatos), Jayson Chalmers (Sacramento), Min Hee Oh (Los Angeles), Arshia Kalantari (Mission Viejo), SCB president Kristen Ritzau, Hana Rashid (Roseville), Ruxandra Preda (Aliso Viejo), and Ashley Joves (Folsom). These doctors came with excitement and enthusiasm, ready to take their skills to the next level. In turn, they

have brought energy and positivity, which in 2020 have been needed more than ever. While the end of Q1 ushered us into unknown territory as we all learned to navigate the COVID-19 crisis, it has brought our Super Family closer together as many of us have leaned on each other for support, advice, and some much-needed laughter. We are more grateful than ever for our AACA family!



It cannot be overstated how strange a time we are all living in. People are falling ill, some dying, businesses are shutting down, all because of a disease none of us even knew existed 5 months ago. Times like these expose people for who they really are. And I've been astounded by the overall positivity that I've been observing. Sure we're seeing distortion and panic. But we're also seeing companies working with the government to make masks, hand sanitizer, whatever they can make. We're seeing

communities paying tribute to the brave health care workers. Most of us understand the only way we get out of this is together. This has always been a core principle of the AACA; it's just taken COVID-19 for the rest of the world to catch up. This crisis has only brought us closer together as an organization, and I for one could not be prouder to be a part of it. Know that we're there for you no matter what. Stay safe and healthy, and remember, we are family.



Hello, Tri State Tipppers! I hope this meme brings some humor to your lives now. Wishing you and yours to be safe and hopeful. We will get through those difficult times together. ♥



Remember the time B.C. (before COVID-19)? Boy, do we ever. Our team was in the midst of an Invisalign boot-camp challenge, with team morale and learning at an all-time high. Dr. Dana Colson had us all in awe, devoting three weeks to yoga and meditation in Rishikesh, India, and then delivering an impressive lecture at the Pacific Dental Conference titled "Changing Expectations: Healthy Smiles and Mouths Are Possible for 100+ Years!"

More recently, Dr. Isaac Day has inspired us all, devoting his time off work during the COVID-19 crisis to 3D-printing ventilator components out of his dental practice to help replenish hospitals short on supplies. Stay safe and #stayhome, everybody!

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the Lighter Side

I have the most loving wife. Last night I woke up while she was holding a pillow tightly over my face to protect me from COVID19.

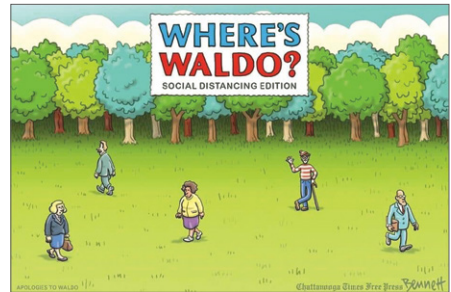
THOUGHTS AND PRAYERS GOING OUT TO ALL THE MARRIED MEN WHO'VE SPENT MONTHS TELLING THE WIFE I'LL DO THAT WHEN I GOT TIME



Day 9 of homeschooling and my child just said I hope I don't have the same teacher next year.

It don't matter anymore 🙄

Dave Jorgenson @davejorgenson
It's Tuesday, or as we call it now: day



I finished Netflix today

Home schooling going well two students suspended for fighting one teacher fired for drinking on the job

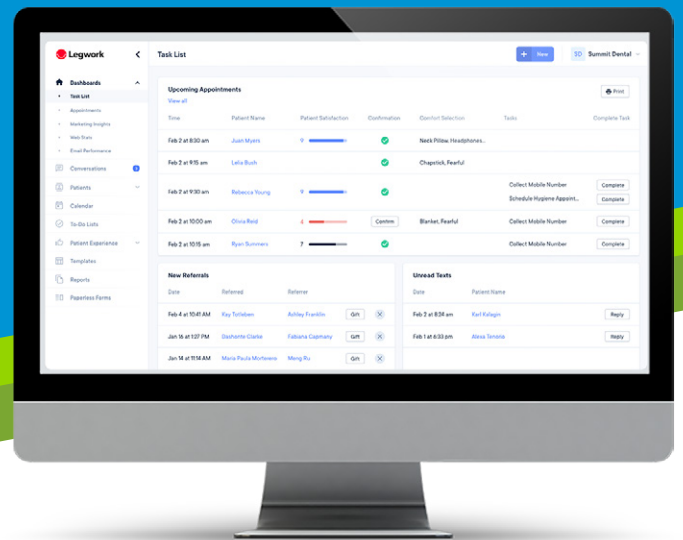
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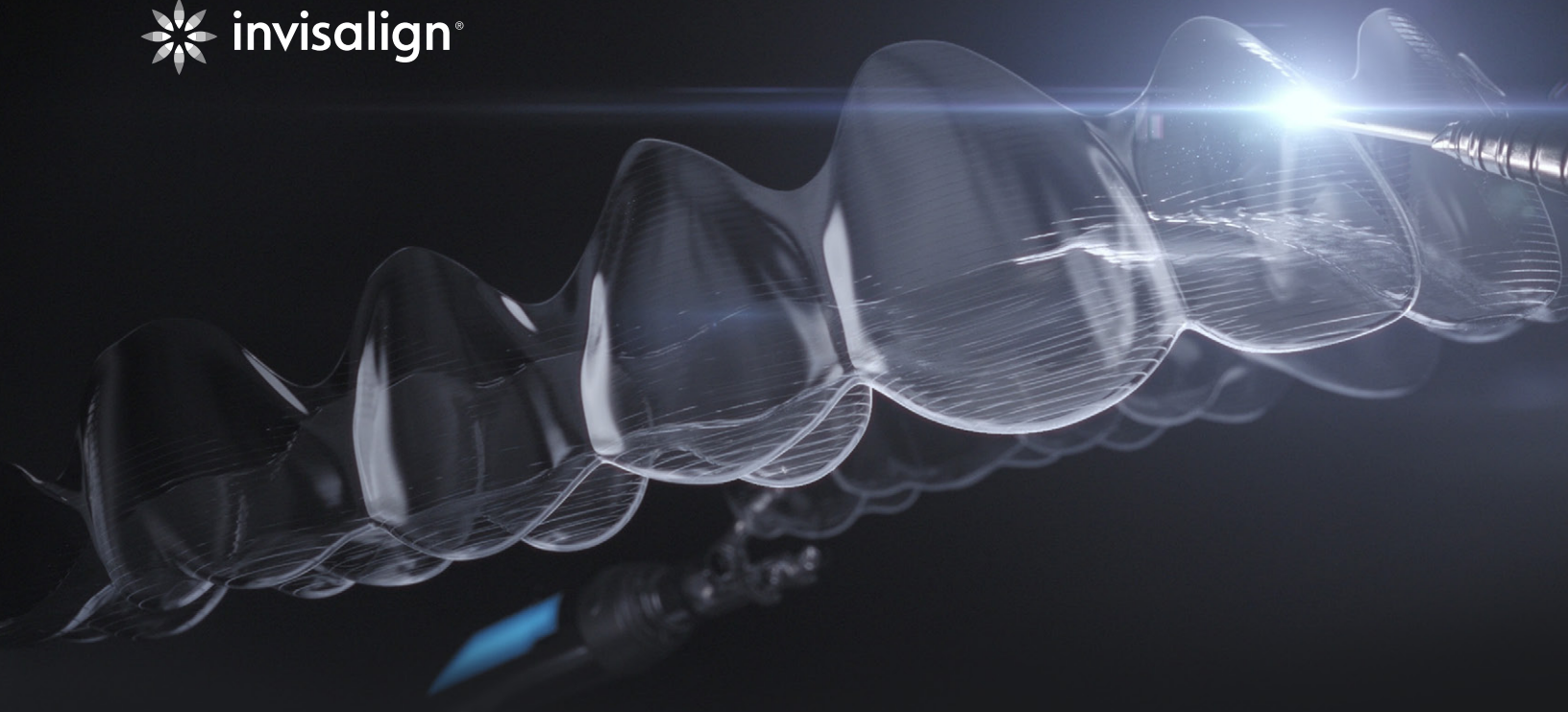
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MANAGING THE PATIENT JOURNEY



THROUGH COVID-19



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*Compared to off-the-shelf, single layer .030in material. Data on file at Align Technology. MKT-0003317 Rev A