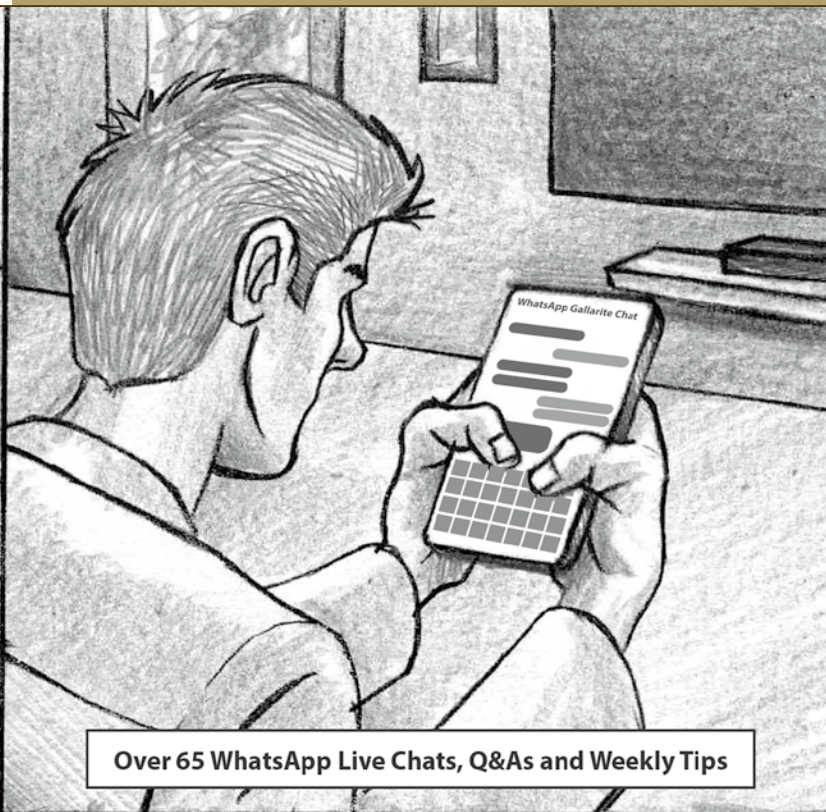


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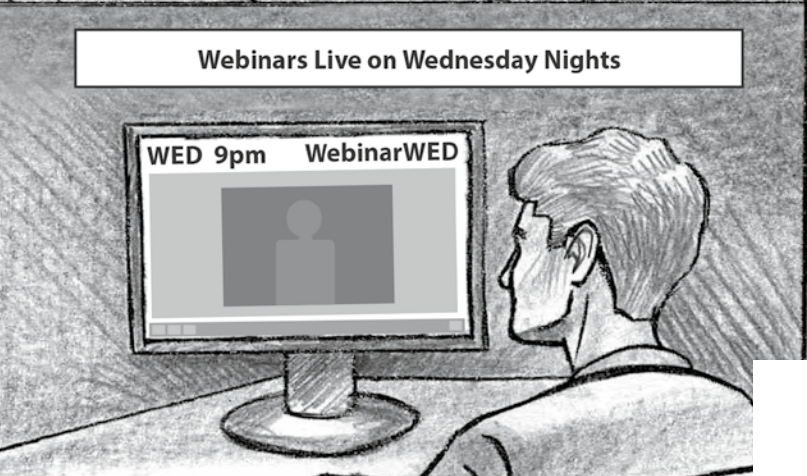
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**Dr. Jeffrey Galler**  
Editor

## Editorial

### To Restrict or Not to Restrict?

This past January, the Federal Trade Commission (FTC) proposed a new rule that would prohibit employers from including a noncompete clause in employment contracts.

Currently, when a dentist who owns a practice wishes to hire an associate, the young dentist will, typically, agree not to work in a competing dental practice within a certain geographic area for a specified amount of time.

Or, when an established dentist wishes to sell his practice, the dentist will, naturally, agree not to work in another dental practice within a certain geographic area for a specified amount of time.

This noncompete clause (or “restrictive covenant”) protects not only an established dentist who seeks to hire an associate, but also a dentist who has just purchased an existing practice.

Imagine hiring a young associate, sharing your patients, hard-earned experience, and wisdom, and then watching, to your horror, when the associate leaves your office and opens a competing practice across the street.

Or, imagine purchasing an existing practice and then watching, with horror, as the dentist who sold you the practice opens a competing practice across the street.

Laws vary from state to state, but generally, clauses relating to noncompetition and nonsolicitation of patients and staff members have been deemed enforceable, if “reasonable” in geographic and time restrictions.

And in fact, dental sales executives such as Shannon Helms caution that current restrictive covenants “do not go far enough in protecting a dentist who has invested years of time, money, and sweat equity to build a top-notch practice.”

The FTC claims that “The freedom to change jobs is core to economic liberty and to a competitive, thriving economy,” and that its proposal would “increase wages and expand career opportunities.” The proposed rule would also require employers to “rescind existing noncompetes and actively inform workers that they are no longer in effect.”

But this proposal typifies bureaucratic shortsightedness. If it becomes law, established dentists will be reluctant to hire associates, new dentists will have difficulty finding employment, and the value of established practices will plummet.

What should we do? We urge our members to not only lobby their representatives in Washington, but also contact their local, state, and national dental associations and urge their active support in fighting this FTC proposal.

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# Case Reports

## Munchie! Munchie! Munchie!

by Kelly Groskopf, DDS

*This case was a Golden Aligner Competition winner at the 2023 Gallerite Reunion in Las Vegas.*



Dr. Kelly Groskopf is a general dentist practicing in Delafield, Wisconsin. Dr. Groskopf received her DDS from the University of Minnesota. She started her career with Dr. Leslie Showalter of Fort Atkinson, Wisconsin. Since then, she has completed significant Invisalign-specific

education, including Reingage, Treatment Planning Service, and the Clear Aligner Teen Residency. Dr. Groskopf enjoys providing a conservative treatment modality to help develop a healthy occlusal foundation for patients of all ages.

Dr. Groskopf loves providing her patients with a comfortable experience while still delivering high levels of care. Her passion for dentistry has evolved by watching her mother and sister pursue careers in dental hygiene. Their excellent patient care is a source of inspiration and admiration for Dr. Groskopf.

When she is not in the office, Dr. Groskopf loves spending time with her husband, David, and their 2 young children and 2 dogs. She and her family love to enjoy summer on the lake boating, skiing, and simply enjoying the sun.

### Introduction

I first met Jamie, a healthy 45-year-old male, on January 9, 2020, at his routine cleaning appointment. He had been a long-time patient with our office before I joined in early 2019. Jamie had received periodontal scaling and root planing in all four quadrants back in 2015. Since then, Jamie had been regular with his periodontal maintenance visits at our office. Upon first look, I instantly recognized that Jamie was in dire need of orthodontics (**Figure 1**). His arch forms were terribly collapsed, and I could feel abfractions beginning to form in all quadrants. Also, Jamie's lower incisors were supraerupting so severely



**Figure 1:** before and after.

that he was starting to experience clinical attachment loss. Jamie was unaware that Invisalign could help him. For so long, he had been told that he needed braces with an orthodontist and surgery—none of which Jamie wanted to consider. But I proposed that I try and improve his mouth: I might not make it perfect, but it would be a lot healthier than where it started. Jamie was very receptive to this.

### Diagnostics and getting started

At the cleaning appointment in January 2020, I performed a comprehensive evaluation of Jamie's dentition. I obtained a panoramic radiograph, bitewings, photographs, and VPS impressions (this was before we bought an iTero). Jamie's occlusal analysis included the following (**Figure 2 and Table 1**):

- Class II, division 2 bilaterally
- 100% overbite (OB)
- 6.6 mm overjet (OJ)
- Severe crowding upper and lower
- V-shaped arch forms upper and lower
- Maxillary arch width of 33.6 mm at first premolars
- Mandibular arch width of 29.9 mm at first premolars



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- Upper midline centered to patient's face, lower midline shifted to patient's right
- Severe Curve of Spee
- Reverse Curve of Wilson
- Tooth #18 missing
- Partially impacted teeth #1, #16, #17, #32, with early decay and persistent periodontal pocketing

COVID forced us to pause our process for a while, but finally, Jamie was ready to start his treatment. In February of 2021, I referred him to the oral surgeon. It was August 13, 2021, by the time his third molars were removed.

By early 2022, Jamie told me he was ready to start Invisalign. Thankfully, I had just completed the "Treatment Planning Service" education program with Dr. Galler at Align headquarters and bought an iTero. That course provided me with additional tools to effectively design and navigate Jamie's difficult case. I scanned Jamie on May 05, 2022 (**Figures 3-5**), and he started Invisalign on May 27, 2022.

### Treatment plan

My overall plan for Jamie was to improve his dental health, but he and I both knew that we might not achieve perfection. My Invisalign plan focused on 3 main goals.

1. **Significant anterior intrusion.** This would help with his overall periodontal health and flatten his Curves of Spee and Wilson.
2. **Significant dental expansion.** I aimed to upright his collapsing premolars to prevent further abfraction formation and to provide more tooth show in his dark buccal corridors.
3. **Unraveling of Jamie's severe crowding on both arches.** I also anticipated the need to manicure the worn/chipped incisal edges and even perform some bonding at the end of treatment.

### Treatment mechanics

In order to perform significant anterior intrusion, I provided a counterforce on the posterior teeth. We planned the posterior teeth to be either stagnant, with 0 mm intrusion/extrusion, or slightly extruded. Furthermore, I was able to take advantage of 0.5 mm of extrusion on tooth #7 to provide some counterforce as the other upper anterior teeth were intruding. I had Jamie use the Blue EPS Munchies® every time he inserted his aligners. He was also advised to chew the Munchies 20 minutes per day with just the anterior teeth. I chose to employ the Munchies because they were developed as an orthodontic adjunct that can accelerate treatment not only through optimizing the fit, but also through significantly increasing inflammatory biomarkers that yield faster intercellular exchange. Every time I saw Jamie, I would chant "Munchie! Munchie! Munchie!" to him. That was my fun and silly way for Jamie to remember the importance of the Munchies as an adjunct for his treatment.

For Jamie's arch expansion, I planned buccal crown tipping and some buccal translation. This portion of my plan was



**Figure 2:** pre-treatment.



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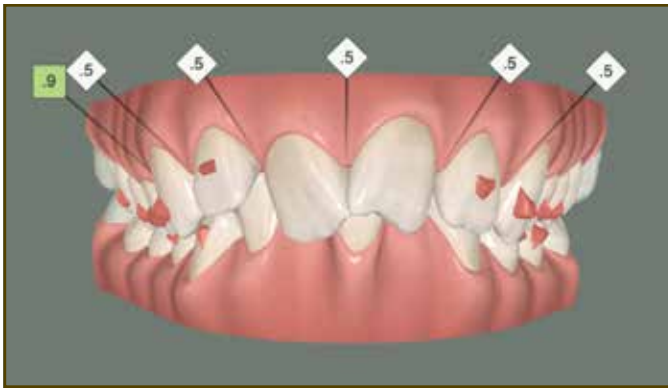
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**Figure 3:** anterior view initial iTero scan, IPR, and attachment placement.



**Figure 4:** right view initial iTero scan, IPR, and attachment placement.

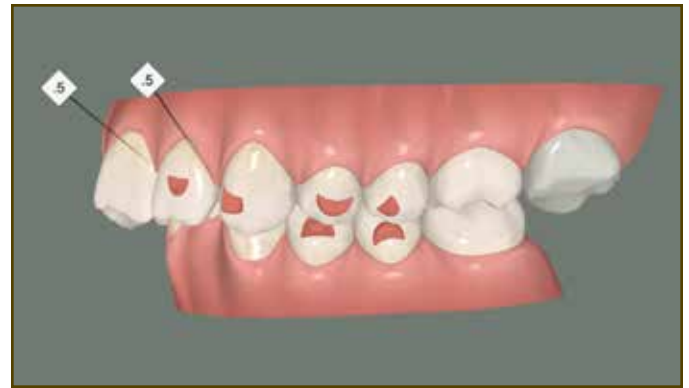
very nuanced and required significant oversight throughout treatment. I kept a close eye on Jamie's gingival margins and constantly noted any signs of clinical attachment loss. I utilized the Optimized Expansion Support attachments on several teeth, at least one in each quadrant. These attachments provided significant support and were coupled with the support provided by the molars, which were virtually unmoved.

Finally, I utilized Optimized Rotation and Root Control attachments, Power Ridges, and Bite Ramps throughout the anterior to unravel Jamie's severe crowding. In this case, I allowed the aligners to fit intimately with all the lower incisors without any attachments in place. These methods were significantly enhanced by the use of Munchies as well.

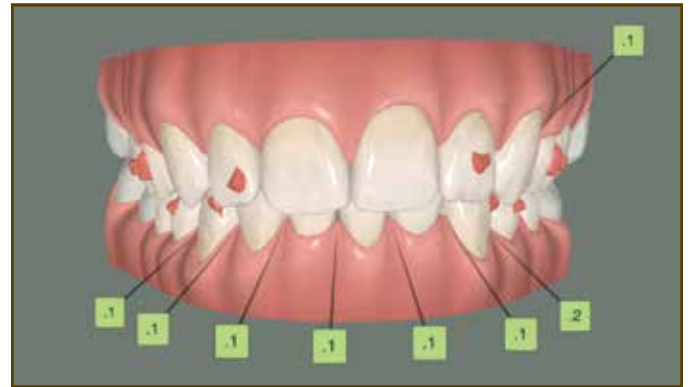
### Treatment execution

Jamie's first round of Invisalign was programmed with 32 active aligners and 3 upper overcorrection aligners. Upon completion of the 32 active aligners, I decided that the overcorrection aligners were not needed. Rather, I scanned Jamie on February 2, 2023, for a Refinement to correct iatrogenic open contacts in areas that did not receive IPR and to angulate teeth #8 and #9 for better esthetics (**Figures 6-8**). After 10 active Refinement aligners, on April 27, 2023, Jamie's case was completed. Final clinical findings included (**Figure 9 and Table 1**):

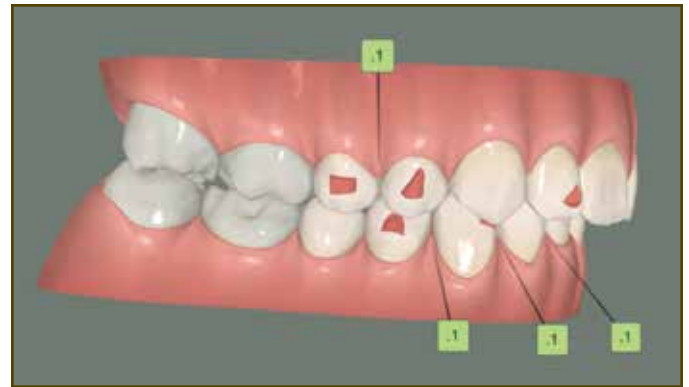
- Comfortable posterior occlusion
- Closed interproximal contacts
- 50% OB



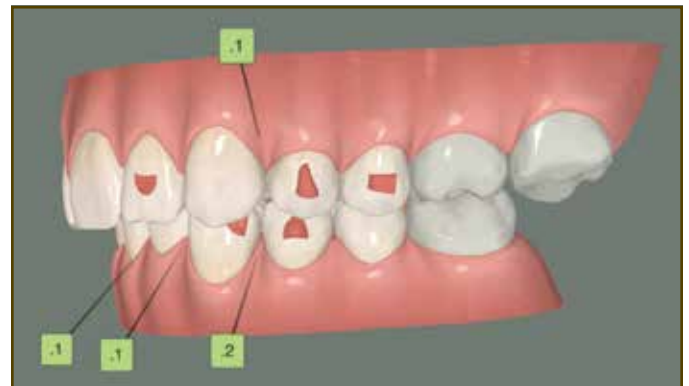
**Figure 5:** left view initial iTero scan, IPR, and attachment placement.



**Figure 6:** anterior view Refinement iTero scan, residual spacing, and attachment placement.



**Figure 7:** right view Refinement iTero scan, residual spacing, and attachment placement.



**Figure 8:** left view Refinement iTero scan, residual spacing, and attachment placement.



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Figure 9: post-treatment.

Initial Clin Check				Refinement Clin Check			
Upper arch				Upper arch			
Teeth	Initial	Align final		Teeth	Initial	Align final	
5 - 11	33.4	34.8	+1.4	5 - 11	35.1	34.8	-0.3
5 - 12	38.6	37.4	+3.8	5 - 12	37.2	37.4	+0.2
4 - 13	40.0	41.8	+1.8	4 - 13	41.5	41.7	+0.1
3 - 14	45.6	45.6	0.0	3 - 14	45.7	45.7	0.0
Lower arch				Lower arch			
Teeth	Initial	Align final		Teeth	Initial	Align final	
27 - 22	24.4	28.8	+4.4	27 - 22	28.3	28.4	+0.1
28 - 21	29.9	34.0	+4.1	28 - 21	33.6	33.4	-0.2
29 - 20	35.1	37.2	+2.1	29 - 20	37.4	36.9	-0.5
30 - 19	42.8	42.8	0.0	30 - 19	43.2	43.2	0.0

**Table 1:** initial arch width measurements are noted in blue. Initial ClinCheck planned expansions are noted in yellow. Realized arch width measurements after the first series of aligners are noted in red.

- 3.5 mm OJ
- Maxillary arch width increase of 3.6 mm at first premolars
- Mandibular arch width increase of 3.7 mm at first premolars
- Flattened Curves of Spee and Wilson
- Intrusion of the lower anterior alveolus
- Even gingival margins
- Stabilized and improved periodontal pocketing
- Natural, full, handsome smile

**Conclusion**

Jamie’s case was an incredible learning experience. If I were to embark on another case like this, I would do some things differently. First, I would overengineer the anterior intrusion. I achieved about 60% of the OB opening that I prescribed. My first series of aligners should have improved the OB by 5.7 mm, but we only achieved an improvement of 3.4 mm. Despite this, Jamie’s case still landed with very natural Curves of Spee and Wilson. Second, I would engineer more extrusion through the posterior teeth to help with leveling the Curves of Spee and Wilson. The counterforce pushing up in the posterior would greatly help the downward force intruding the anterior. Finally, I would place more supportive attachments throughout the posterior teeth. I would gravitate toward a horizontal occlusal beveled attachment or an Optimized Extrusion attachment on the premolars and first molar.

Another treatment adjunct that might have been helpful in this case is a motion appliance. Using a motion appliance would have provided more anterior retraction and subsequent improvement with OJ. Also, an improvement in OB is commonly seen in Class II cases that are distalized with a motion appliance. If I had been educated sufficiently on motion appliance use in adults in early 2022, Jamie and I might have considered its use.

Despite my self-criticisms, I would still employ Munchies. In my opinion, Jamie’s compliance with the Munchies was the star of this show. Jamie was dedicated to achieving a healthier smile, and it clearly shows. ■



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# A Victory for Vick

by Nadia Saad, DDS

Vick, a young man of 31, came to our office in the spring of 2019. His anterior open bite and widely spaced front teeth were conspicuous (**Figure 1**). When we spoke with him, he told us, "I have been to several orthodontists who told me that they may not be able to close my gaps. I want my gaps closed and I want to smile."

## Exam and evaluation

We gave Vick a comprehensive dental exam, periodontal exam, and routine dental cleaning. We also took a full-mouth series of X-rays, along with panoramic and cephalometric images. The exams showed that he had excellent oral hygiene and no decay present. There was past dental work completed.



Dr. Nadia Saad has a passion for creating beautiful smiles in a comfortable dental setting. She pairs her expertise and her love of beauty to give her patients the advanced care that they deserve. She is proud to be "changing smiles, one tray at a time."

Dr. Saad completed her undergraduate studies at the University of Michigan and received her DDS from the University of Detroit Mercy School of Dentistry with an extended award in periodontics. She is a firm believer in Continuing Education, ensuring that her procedures only follow the latest dental techniques with the most updated technology available.

Dr. Saad has a passion for teaching as well as learning. She believes that her patients deserve to be educated on their oral health, which ultimately aids in their general health.

She is a member of the American Academy of Clear Aligners, is certified with the American Academy of Facial Esthetics, and is an active member in her community. Aside from her love of dentistry, Dr. Saad enjoys spending time with her family and friends. She likes to maintain both physical and mental health. You may see her at the gym, reading a book, or planning her next vacation.

Our evaluation confirmed that his anterior open bite and wide anterior spacing (canine to canine) were most probably the result of tongue thrusting. Vick's midline was off, 1-2 mm to his right. We checked his airway and cleared him for Clear Aligner Treatment using Invisalign.

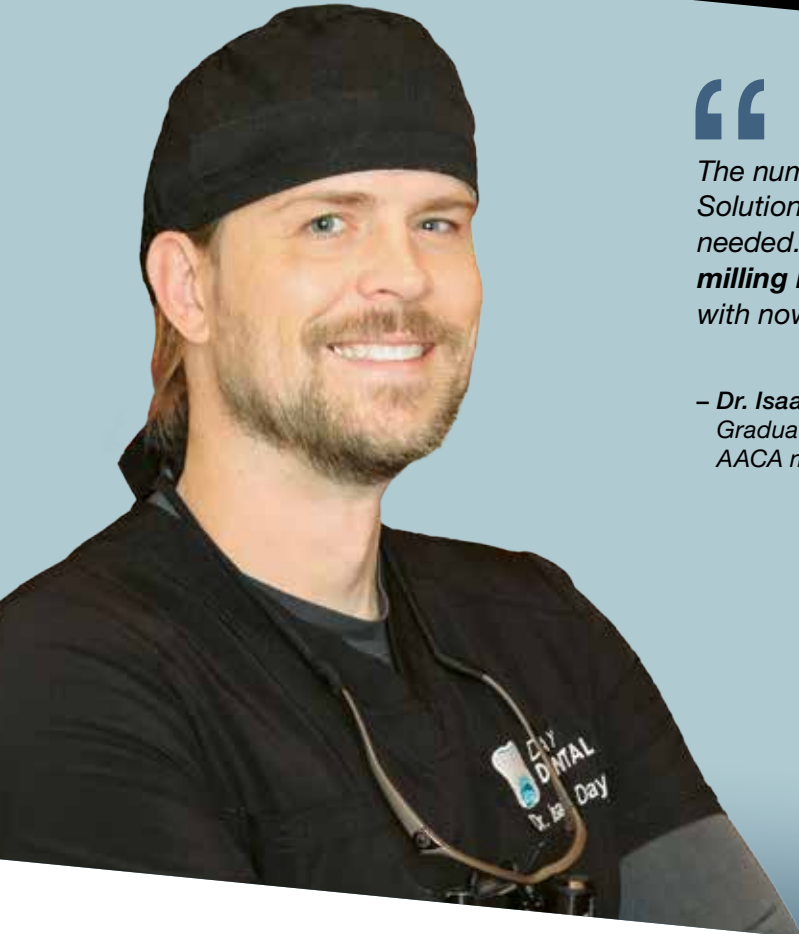
## Treatment

Vick's treatment took 13 sets of aligners. We had him change trays at intervals of 2 weeks at first, but accelerated him to



**Figure 1:** before.

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1-week changes starting with the third set. We issued him Munchies at the very start and instructed him to bite on them for 20 minutes upon every insertion throughout the day.

Treatment took 3.5 months. At its conclusion, we installed upper and lower anterior lingual bonded retainers to counter the effects of the tongue thrusting, and supplied Vick with 4 sets of Vivera trays to wear over the bonded retainers.

As of his 3-year follow-up, Vick's teeth are still perfectly aligned (Figure 2). His happiness with his result is apparent in his ready smile! ■



Figure 2: after.

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# Office Management

## Back to the Basics

Shawn Cooper



Shawn Cooper is a native Virginian, and currently resides in Alexandria, Virginia. She holds a BS in biology from Elizabeth City State University (Elizabeth City, N.C.). She worked her way up through the administrative ranks in the medical and dental field, where her leadership abilities

put her in charge of multimillion-dollar practices while opening the door for her to start her own consulting business (B2B Strategic Services). Currently, she is a practice administrator for Dunn Dental Group in Washington, D.C.

Shawn has been selected as an Elite AACA Office Manager and is an active member in AADOM (American Association of Dental Office Management) and Delta Sigma Theta Sorority, Inc. She thrives on community service and giving back, whether through her time or by teaching others how to improve their lives or business.

In addition to running a busy dental practice and teaching business strategies, she is a mother to 3 beautiful children (Keenan, Lyndsi, and Keyana), and they are the reason why she works so hard. She enjoys traveling, learning, spending time with her family, watching movies, and attending church.

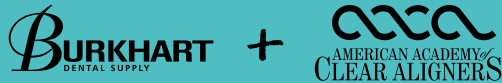
After an awesome GRC 2023, I was reminded of the superpowers that we hold as office managers. As I circulated through the venue and listened to the chatter, excitement, and anticipation of the conference, I realized that we all needed this. However, while in our sessions, I saw fatigue, frustration, and the “overloaded” look starting to turn into piqued interest, reminders of how our leadership impacts our offices, and the realization that we are all in this together. I had to get my own thoughts together and admit that I had gotten away from what had formed my superheroism, and I wanted to remind all the leaders—specifically the office managers, team leaders, and administrators—**to get back to the basics!**



*“Being a superhero is not just about strength, but about strategy.”*

What does that mean? It means to do the things that made you successful leaders and enabled your offices to grow. Being a superhero is not just about strength, but about strategy. Day-to-day operations can consume us or allow us to slip into complacency. Technology and success can lead us to forget how we got there, so I am here to remind you:

1. **Put in your systems:** Systems give you a flow. Systems give you structure. Systems keep confusion out of the equation. Systems are your standard for running your office. It’s OK to revisit, revise, and reiterate those systems so that the team can be on the same page.
2. **Train your team:** Many of us have so many things on our plate that training someone just seems too time-consuming. However, if we want to alleviate the stress and clear off the plate, then we must train one team member at a time. You can’t afford not to. Lack of training increases mistakes, creates frustrations, and costs you more money.
3. **Delegate:** Being a superhero often leads us to believe that we must do it all. However, that is not true. The fictional superheroes that we know all have either a sidekick or someone that they can go back to in order to assist with the mission, heal them when they have been hurt in battle, or strategize with them. They have no problem delegating duties in order to propel the mission. Being willing to let go of duties in order to advance your day, week, month, and year proves pivotal to your goals and mental health. Learn to let go!



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4. **Invest in your team:** If there's one thing that you should learn, it's that our profession is people focused, not tooth focused. The pandemic proved that we need people. However, it also proved that when people feel unappreciated, devalued, and misused, they will leave and desert you. So why do I say you should invest in them? Investing in people creates goodwill and loyalty. You may feel that people are not worth it; that is not true. You see, people want to be a part of something special. Facilitating a class or conference gets them outside of their comfort zone, allowing them to meet and engage with others in their profession, and pulls them out of the day-to-day details of office life. Teams/staff remember those things, whether they express it or not.
- Business owners may expect a pat on the back when they pay for a class or a trip away to a conference; but the truth is, it is for the betterment of your business. The way you invest in equipment and get excited about the unlimited possibilities of producing more revenue is the same way you should get excited about the people that will operate the shiny new toys. Even when you have to let someone go, that person will always remember what you did for him or her or the team by causing them to learn and grow. You can always start by taking the team to a Gallerite Convention!
5. **Write out your goals:** Figure out what it is that you want to accomplish, and write it down. You need to see and have reminders of your goals. As kids, we dream big and run around and tell everyone what we want and what we want to be. As office managers and executives, we need to remind ourselves of what it is that we want. After writing out your goals, develop your strategy to get them accomplished. Set your deadlines and timelines.
- Get yourself an accountability partner, especially if it's a colleague. Our colleagues understand our struggles;

however, they can also be very strong mentors. Just get someone to hold your feet to the fire because he or she wants to see you succeed. We are all warriors and work well under pressure, but we cannot win on strength alone without strategy to accomplish those goals.

6. **Pay it forward:** Nothing is more satisfying than giving back unselfishly. Giving is not always monetary, as I find my professional gratification comes from teaching someone a better way of doing something and seeing it have an impact on their business. Go out and do something nice for someone today, because all the good that you put out always returns to you. Remember, light attracts light. Doing good and helping others boosts your energy, gives you purpose, and puts a smile on your face as well as that of the other person.
7. **Remember to smile:** For heavens' sake, we are in the teeth and smile business! Surely, we must learn to smile. There are days when life can be a little crazy, but through it all, smile. Smiling creates an emotional connection and it keeps your face looking younger. Smiling reminds us that goodness is near. If nothing else, allow your profession to cause you to smile, but allow your purpose to continue your smile. We aren't here for a long time, so we might as well have a good time! **Smile!**

Those are the basics. Nothing fancy, nothing expensive, nothing that you can't handle. Just a little grit, patience, and love all wrapped up for one great superhero. Go out and save the world, but don't forget how it all started, because we all need a reminder now and again. ■



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Improve your clinical and practice management skills at your monthly AACA-hosted dental study club. Each meeting features a 2-hour CE course and includes dinner. [Visit aacaligners.com](https://www.aacaligners.com) to join YOUR local group for a year of meetings and 24 CE credits.



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*“Don’t be stupid. It’s a no brainer.” – Dr. Galler*



# AACA Fellowship

A highlight of the 2023 GRC was the induction of the third annual class of AACA Fellows. The 16 doctors in this year's group, like their predecessors, have successfully completed the rigorous requirements to achieve the distinction of Fellowship in the AACA:

- Completion of 100 clear aligner cases
- 50 hours of Continuing Education in orthodontics or AACA programs
- Membership in the AACA of at least 12 months
- Passage of a written examination



**From left to right:** Dr. David Galler, Dr. Kristin Wade, Dr. Stephanie Adelia Susanto, Dr. Sama Salim, Dr. Ruxandra Preda, Dr. Maria Saguin, Dr. Keith Schwartz, Dr. Dari Shapiro, Dr. Colby Livingston, Dr. Christopher Anton, Dr. Angela Anton, Dr. Haewon Choi, Dr. Amanda Sheehan, Dr. Aanchal Chandra, Dr. Deirdre Denis, Dr. Andrew Paek, Dr. Gina Johnson-Higgins, Dr. Jason Sala.

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The switch to Aspro dental has been a game-changer for us! The all-in-one cloud based software has an incredibly intuitive user-interface, and it has allowed us to streamline our workflows and communication between the front and back office teams. On top of that, the relationship we have been able to develop with their highly responsive and supportive customer service team has been second-to-none. We treat our patients as family at our office, and Aspro has extended that same level of service to us.



**DR. LINDSAY COSTANTINO**  
UCLA School of Dentistry continuing lecturer, AACA member

Aspro dental was designed by a dentist for dentists. I was able to cancel many subscription services (appointment reminders, texting, payment plan billing, anywhere access to our schedule, prescription orders, etc) and have all of these features easily accessible in one easy-to-use dental charting system. The software just makes sense and their service is top notch.



**DR. ADRIANN HOOKS**  
Invisalign Diamond level provider, AACA member, Align faculty



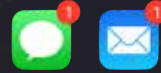
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More convenient for patients and faster for the office team.

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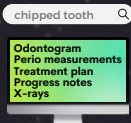
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Eliminate busywork by automating appointment and hygiene reminders via text and email.



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Cloud access to x-rays, images, and CBCT scans opens the door to mobile and tele-dentistry.



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# AACA Spotlight

## National Align Your Teeth Day: Peak Performers

August 11, 2023—TOTAL CASES STARTED: 1685

Two years ago, the AACA brought about the creation of a new holiday. Now and forever, August 11 will be known as National Align Your Teeth Day. You can find it on the National Day Archives calendar at [www.nationaldayarchives.com](http://www.nationaldayarchives.com).

Why have we done this? Because “A healthy, perfect smile enables a person to reach their maximum potential in life.” That is our credo and our mission statement. A healthy smile is a magical gift to each of our patients.

We are few, but with our dedication, we can and do change the world. We do it quietly every day, and on this one day we declare it out loud for all to hear.



\*CS = Case Starts

### ELITE PERFORMANCE

Name	CS*	Name	CS*	Name	CS*	Name	CS*
Sigrid Mojica	61	Andrea Dernisky	42	Dani Cszasz & Nick Dehr	28	Katie Beach	25
Patrick Vuong	51	Bhawna Gupta	36	Carlos Beltran	27	Mireily Martinez Llaurador	25
Hamasat Gheddaf Dam	51	Frank Neves	30	Kristen Ritzau	26		
Shenilee Hazell	45	Mark Edington	28	Christopher Hart	26		

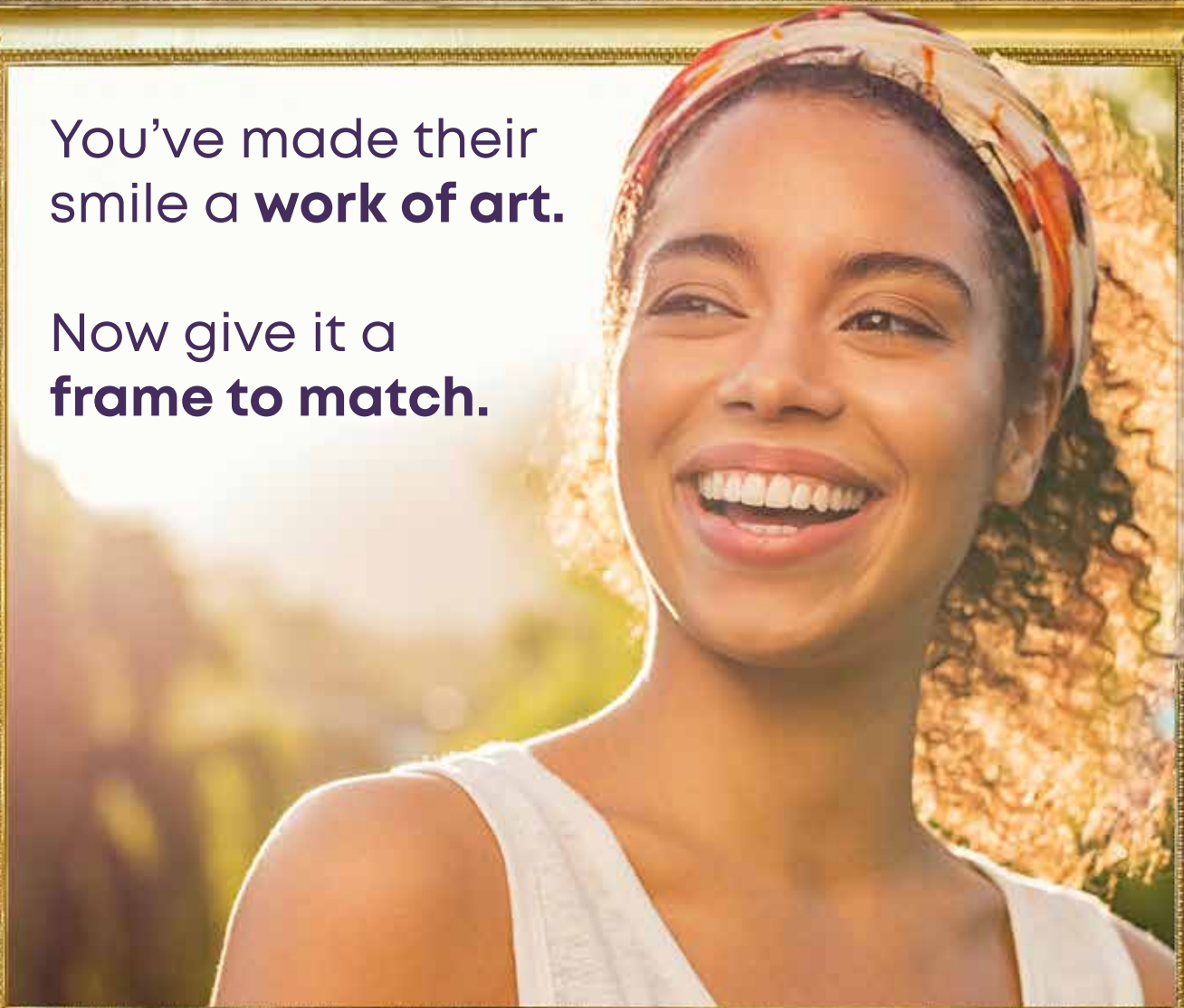
### DISTINGUISHED ACHIEVEMENT

Name	CS*	Name	CS*	Name	CS*	Name	CS*
Maria Fraticelli	24	Seth Wasson	19	Mardily Gonzalez	16	Thuy Le	13
Michael Huguet	24	Andrea Ho-Fatt	19	Karen Ho	15	Chelsea Mortell Petisme	13
Tony Thomas & Associates	23	Sama Salim	18	Dari Shapiro	15	Karishma Chopra	13
Vladimir Meskin	23	Danny Lawen	18	Mithila Sharma	15	Ingrid Puig	12
Kyle Low	22	Sheena Sood	18	Yiska Furman	14	Jessica Nieva	12
Deepthy Thomas	22	Sarah Pless	18	Ruxandra Preda	14	Mai Ly	12
Adriann Hooks	22	Jennifer Veurink	17	Adriana Leone	14	Brady S. Marshall	11
Kern & Rayek	20	Kerri White	16	Angela D. Anton	14	Gin Goei	11
Alexander Fu	19	Meghan Toland	16	Lee Boyd	13	Stephanie Manning	11
Ashley Izadi	19	Deirdre Denis	16	Jose Abadin	13	Palmi Testa	11



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<sup>1</sup><https://onlinelibrary.wiley.com/doi/abs/10.1111/dsu.1210>  
Photos courtesy of Andrea Ball, DND



## HONORABLE MENTION

Name	CS*	Name	CS*	Name	CS*	Name	CS*
Michael Cimino	10	Sonal Deshpande	9	Jen Kim	7	Franny Catibog	5
Mark Anderson	10	Alvin Lo	9	Frank Neves	7	Prachi Deore	5
Julia Lokitis	10	K.T. Dao	9	Zahra Omar	7	Sukhman Chauhan	5
Dori Katz	10	Lamiaa Elghandour	9	Andrea Ball	6	Marianna Rexan	5
Marlene Rivera	10	Amy Jung	9	Sumbul Naqvi	6	Angela Abernathy	5
Erick Hosaka	10	Thomas Layton	8	Kiran Khemani	6	Jessica Brigati	5
Keith Schwartz	10	Christopher Anton	8	Allan Mulandi	6	Rivka Goldenhersh	5
Samaneh Daftarian	10	Jonathan Kohler	8	Angela Berkovich	6	Nandini Murthy	5
Kari Blankenship	10	Kasia Marelich	8	Rahul Kode	6	Hedy Akhlaghi	5
Rajab Zaza	10	Patricia Chao	8	Kavneet Bindra	6	Youstina Guirguis	5
Stephanie Sager	10	Sergio Rauchwerger	8	Stacie Morrison	6	Deore Prachi	5
Carlos A. Izcoa	9	Lisa Jo Adornetto	7	Amy Bender	6	Joanne G. Hoppe	5

## PARTICIPANT

Name	CS*	Name	CS*	Name	CS*	Name	CS*
Wendy Steger	4	Andrew Orman	3	Viviana Waich	2	Matthew Miller	1
Malik Usman	4	Kenneth Bevan	3	Thi Hoang	1	Brian Brodersen	1
Dana Colson	4	Marlene Shaw	2	Howard Vogel	1	Roy Kim	1
Geoffrey Gillespie	4	Shilpa Desai	2	Shauna Lee	1	Arun Narang	1
Adrian Cummins	4	Maryz Estedrak	2	Gina Marcus	1		
Frances H. Yankie	3	Ashley Keen Ramirez	2	Martin Pak	1		
Gina Johnson-Higgins	3	Michael Gertsen	2	Rich Dickinson	1		
Andreea Torok	3	Shwetha Silver	2	Luis Ochoa	1		
Keith Hollinger	3	Lindsey Zeboski	2	Sophia Polymeneas	1		



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# Jack's Corner



by Jack Von Bulow, DDS

## Me and My Robot

So this story begins decades ago when I was a recovering dental student, a new business owner, and a young man who had lost his recreational basketball “hops” as well as the will to play 6-hour rounds of golf. I thought maybe tennis would provide some physical outlet and relief from the anxiety I experienced on realizing the scope of all I didn’t know that I didn’t know—stuff like life, taxes, compound interest, insurance, and payroll taxes.

And one day, following another session at the local park’s tennis courts, I took a shower, did a hygienic inspection, and discovered that maybe I hadn’t stopped growing. I wasn’t taller. I wasn’t heavier. I’d made a point of choosing a profession that didn’t require my lifting heavy objects (I’d survived being a skinny warehouseman for 3 years during off hours at Cal State, L.A.). But there it was.

## Bunker mentality

Years earlier, my dad and I had watched a freakin’ hilarious episode of *All in the Family* featuring “Archie’s Bad Day at the Hospital” and a straight-razor shave south of the Equator prior to surgery. A few days following my discovery, I was experiencing more Archie empathy than hilarity. Following 3 days in the hospital and 2 weeks walking while looking straight down at my shoes, my inguinal hernia repair #1 was history.

In dentistry back then, any kind of marketing could land you in dental society purgatory. Amalgams and PFM crowns were the art forms. Eighteen x-rays went into the mechanical developer/fixer, and at least 15 were guaranteed to emerge.

Years went by, and aside from the chest pains I developed while playing tennis all day on weekends without drinking water or wasting my time stretching, I was the picture of health. But when NBA Hall of Famer Pete Maravich died playing pick-up ball at a Pasadena church basketball court in 1988 (at age 40), I became convinced I might also be congenitally missing a coronary artery. I demanded a stress echocardiogram and got an eye roll from my primary care physician. After I’d escaped the treadmill without leaving my teeth on the handlebar and heard the results, my symptoms disappeared. When he heard I had

sought out a chiropractor after spending a muscle-spasmed night trying to sleep while sitting in a straight-back chair, my PCP fired me.

## Fitness campaign

After the treadmill/chiropractor episode, I started doing stuff like going to the gym. And instead of spending time with oversized piano movers from Muscle Beach, I found myself in an environment that offered up attractive women, focused on health, beauty, and flexibility. My first visit was a turning point. I immediately signed up, continued showing up, and stood, jumped, grapevined, and even stretched while delivering daily in my newfound health culture. A colleague in town went to a gym in nearby Pasadena; and when he shared that a tall, cut African American who drew a crowd working out at his gym turned out to be Michael Jordan (visiting L.A. to do a commercial), I joined gym #2 stat. And I stayed with the same trainers and instructors in various gyms for the next 30 years.

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*“I demanded a stress echocardiogram and got an eye roll from my primary care physician.”*

---

Meanwhile, in dentistry, teeth whitening, tooth-colored restorative materials, and adhesion dentistry were making a long-awaited debut. The prospect of cementing anterior porcelain crowns that looked like real teeth hit me like a legit semi-religious experience.

Then, one day, 20 years after *All in the Family*, I was doing abdominals in class when it happened again. I skulked outta the gym, vowing to be quick with the towel in the future and keeping the new inguinal report to myself. Forever.

## Living with it

Time passed, and fortunately my dentistry required no heavy lifting. I even managed to hire strong dental assistants, a young male associate dentist, and even my first male dental assistant

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with job descriptions that included changing the Sparkletts water bottle.

For the next 15 years or so, we implemented verbal systems, traveled the U.S. just like a road show, and formed a strong bond with our community. Now, in addition to putting ads in the local paper, I was writing full-out columns! And if someone edited my content, I fired them.

And I don't know if it's just a family trait, or what? My grandpa died from a bowel obstruction when I was a little kid; but he was a 6'5" dockworker during the early 20th century. I used to break the downcast mood when adults asked me how Grandpa died. I translated obstruction of the bowel to "destruction of the balls." Back then, I couldn't believe or understand why I was getting big laughs.

### Once more with feeling

But 7 years ago, the left side started acting up. Some of the symptoms included my continued barking like a seal with "Greatest of All Time" hiccups (it took me 5 minutes to clear the Kaiser waiting room). And after discovering exactly how it feels to have a hose up your nose, I had another surgery. This time, I hitched a ride with my team leader and her husband and ordered a pizza and salad "to go" on the way home. I devoured the pizza in about 20 minutes; didn't need any pain meds. And in a development having nothing to do with hernias, I also found a mentor.

I took the "Course That Changed Everything," met Dr. David Galler, and found myself onstage at the Aria in Las Vegas, and dentistry, for me, was never the same. I began providing Invisalign care like never before, attended meetings in the Bahamas, Jamaica, New Orleans, and of course Las Vegas, and became part of something bigger than myself—a dominant, progressive organization, with core values like family and support.

I sold my practice to a friend last year, and the new guy has been kind and generous enough to let me hang around without the threat of a mandatory injunction (so far).

*"The prospect of cementing crowns that looked like real teeth hit me like a semi-religious experience."*

### Aye, robot

Seven years ago, during a dental visit, I had been admonished by a kid patient who turned out to be a distinguished general surgeon, "At your age? WTH! Don't do bilateral." A week ago, I had a repeat consult with Doogie Howser, M.D. #2 (the post-op-pizza surgeon). And, finally, after freakin' COVID-19, I finally got fixed—I mean repaired. And after 7 years, my 2016 surgeon still looked like a teenager...with a few white hairs. We went laparoscopic, robot assisted. The anesthesia nurse called post-op the "Happy Hour." My ride home was courtesy, once again, of Team Leader Dani. We ordered Italian to go, and I negotiated a 2-mile walk after dinner.

Dentistry is digital, minimally invasive, and with procedures that used to take 2 weeks now accomplished in one day. A pandemic slowed us down, but not for long.

And I guess, as hernia repairs advance, so does dentistry. ■

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# the Lighter Side



## Letter to Myself

by Nathan Oakes, DMD



Dr. Nathan Oakes lives and practices in Maine with his wife, Dr. Laura Oakes, with whom he owns 4 Aspen Dental locations. He earned his DMD from Tufts University School of Dental Medicine in 2013.

Nate has been an AACA board member since 2019. When he isn't practicing dentistry, he's working with Aspen, on a scientific advisory board, and on an advisory board for Made by Dentists Toothpaste. He and Laura have 2 boys, Landon and Woody, who are helping them learn how to balance work, life, and family.

Hey there, Dude from the past,

Well, well, well, looks like you've crossed the finish line of dental school—a journey that's tougher than a 7-10 split, man. But you know what they say: dentistry is tough, but it's the rug that really ties it all together. Just like that rug in my pad, your education is the foundation that ties your dental career into one awesome Dude package.

So, let's talk about predictability, man. Life can be as unpredictable as a runaway bowling ball, but here's a nugget of wisdom: trying to be predictable is helpful and calming. Patients dig routine, man. They want to know what to expect when they step into your office. So, keep that schedule rolling, and offer your patients a calming experience in a world that sometimes feels like a never-ending league night!

### In the pocket

And now, onto a biggie—humility. You're diving into the dental world with all your skills and smarts, but remember to stay humble, dude. Just like that humble little bowling ball can knock down all the pins, your humility can create connections and trust with your patients. Admit when you're not sure, seek advice from others, and always remember that you're here to serve and heal. It's not about being the Big Lebowski of dentistry; it's about being a Dude who makes a difference.

So, there you have it, man. Dentistry's like a wild bowling alley, but your rug—your education and the community you surround yourself with—ties it all together. Be as predictable as a well-aimed roll, find strength in humility, and keep spreading those good vibes. The Dude abides, even in the world of dentistry.

Stay chill,  
Future Dr. Nate Oakes

---

*“Your humility can create connections and trust with your patients.”*

---



Do you have an idea, treatment, or review that you feel your peers would benefit from? Contact [DrJeffreyGaller@gmail.com](mailto:DrJeffreyGaller@gmail.com) to find out how to author articles in future issues of the Journal.

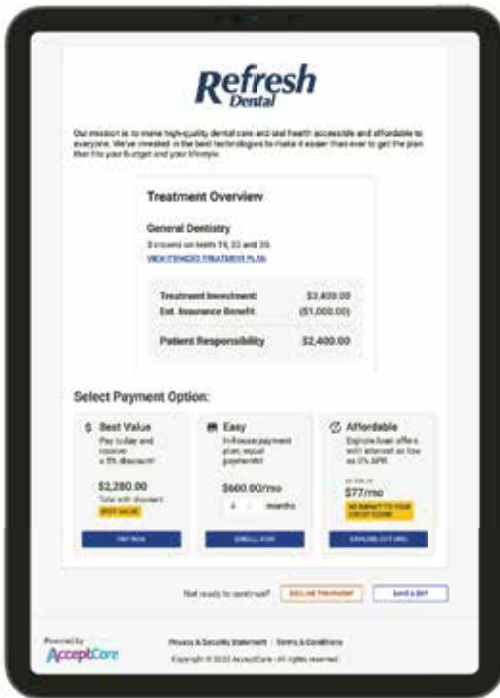


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The firm consisted of 8 employees and recovered **\$105,000** for 2020 and 2021.

### I T S CALIFORNIA OPTOMETRY PRACTICE

Practice with 39 employees recovered **\$180,000** for the years 2018, 2019, and 2020.

### I T S WASHINGTON DENTAL OFFICE

The company consisted of 10 employees and recovered **\$173,000** for 2020 and 2021.



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Grab a **FREE** copy of  
our training book!  
(just pay shipping)



# WE'LL TRAIN YOUR DENTAL TEAM

At The Team Training Institute, we work with dental practices around the country to make sure their offices run smoothly and profitably each day. We provide teams with the processes and systems they need to deliver excellent care, operate efficiently, and build a successful practice in the community.

## WE TRAIN TEAMS IN:

- Efficiency
- Profitability
- Patient communication & service
- Practice management
- Smooth, consistent processes
- And more...



### HYGIENE TRAINING

Transform your hygiene department with excellent and consistent patient care.



### BUSINESS TRAINING

Learn proven systems and processes for long-term practice success.



### LEADERSHIP COACHING

Create cohesive, productive teams and develop leaders to step into bigger roles.

Book a call with us and we'll talk through your unique practice goals and put together a **FREE** custom plan for your practice, complete with an action plan and a timeline.



Schedule with us at [www.TheTeamTrainingInstitute.com](http://www.TheTeamTrainingInstitute.com)



A new iTero™ scanner<sup>1</sup>  
feature to be thankful for.

## Introducing the Align™ Oral Health Suite<sup>2</sup>.

The Align Oral Health Suite is an intuitive and visually engaging digital interface designed to enhance dental consultations and drive dental treatment acceptance.<sup>3</sup>



### Key benefits

- **Facilitate comprehensive oral health conversations.**  
The Suite provides an innovative clinical framework, empowering you and your staff to conduct personalized patient assessment on a range of dental health conditions.
- **Enhance patient trust.<sup>3</sup>**  
Compelling visualization tools and patient-friendly terminology that allows you to help patients better understand their oral health conditions and proposed treatment options.
- **Designed to drive consultation efficiency.<sup>3</sup>**  
Integrated digital hub of multiple iTero scanner visualization and diagnostic aid tools - all accessed via a single iTero scan - simplifies the entire assessment and consultation process.

<sup>1</sup>Align Oral Health Suite is only available on the iTero Element™ Plus Series.

<sup>2</sup>The Align Oral Health Suite is expected to be commercially available in limited markets by the end of 2023; for more information on its availability in a specific market, please contact your local Align marketing representative.

<sup>3</sup>Subject to the healthcare provider's independent professional judgment. 'Align Technology Introduces New Software Innovations Designed to Accelerate Digital Practice Transformation' (2023, September 6)



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QR code to  
learn more.

