Dr. O’Loughlin at Women Dentists Conference Nov. 8

QCD is proud to host a Women Dentists Conference on November 8 at the New York University College of Dentistry. This is the first time that any local dental component is hosting such a conference with a continuing education program that is open to all dentists, followed by a panel discussion on “The Woman Dentist and Developing Strength as a Leader.”

“We are honored to have Dr. Kathleen O’Loughlin, executive director, ADA, and Dr. Kathleen Roth, past president, ADA, as part of our team,” said QCD President Dr. Praba Krishnan.

Attendees can earn 5 CE credits learning about the systemic-oral relationship in women, right from Puberty, Pregnancy, Menopause, Medications, etc.

“We have almost 200 registrants for this event and QCD continues to be flooded with more,” Dr. Krishnan said. “We are thankful to the New York State Dental Foundation for their generous support, as well as New York University College of Dentistry for the venue. Those of you, who have not yet signed up for this conference, should do so as soon as possible.”

Dr. Ashok Dogra Becoming Next QCD President, Dr. Alvin Orlian To Receive Emil Lentchner Award

The QCD annual Installation and Gala Dinner Dance is scheduled for January 16 at the Chateau Briand in Carle Place, the site of the 2007 dinner dance.

Dr. Ashok Dogra will be formally installed as the 2010 QCD president. Nominated to serve with him are Dr. Mercedes Mota-Martinez, president-elect; Dr. Beatriz Vallesco, vice president; Dr. Doron Kalman secretary; Dr. Bijan Anvar, treasurer; and Dr. Sudhakar Shetty, historian.

In addition, nominated by the Institute for Continuing Dental Education are officers, Dr. Sudhakar Shetty, president; Dr. Rekha Gehani, vice president; and Dr. Stuart Kesner, secretary/treasurer, will be installed.

QCD will be presenting the Emil Lentchner Distinguished Service Award to Dr. Alvin Orlian in recognition of his lifelong dedication to organized dentistry. Dr. Orlian is a founding member of the Eleventh District Dental Society, the predecessor to the Queens County Dental Society, and served as president in 1979. He is a prominent clinical professor of oral surgery at the New York University College of Dentistry and was longtime chairman of the Department of Dentistry at Flushing Hospital Medical Center, from which he retired in 2003 after having directed the growth of its dental residency program. He has received numerous awards, including the L.P. Pederson M.D. Memorial Award from Flushing Hospital and its prestigious Leadership Award in 1994.

Fans Win at Oral Cancer Screening

By Alan N. Queen, DDS

The home team may not have won, but the 30,000 fans at the game did at the second annual QCD oral cancer screening at Citi Field, Flushing, on September 23.

A team of volunteer dentists led by Dr. Stuart Kesner screened fans at a table just off the Jackie Robinson Rotunda, the main entrance to the Mets new stadium, Citi Field.

“It only takes two minutes to poten- tially save someone’s life,” Dr. Kesner said. “By doing this program each year with the Mets, it makes people aware of oral cancer and reinforces the dangers of smoking.” Lisa Marini, representing the “Queens Quits” tobacco-cessation program, worked with the dental society at the event, counseling fans on smoking cessation.

As occurred last year, several suspi- cious lesions were found and patients were referred for biopsies, Dr. Kesner related.

One patient, who had a suspicious le- sion on his tongue, said he was glad to have the opportunity to be screened, and promised to get a biopsy done.

Continued on page 11
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As my term as president of the Queens County Dental Society draws to a close, it is time to look back and reflect on all that we have done.

I have had the privilege of serving as your advocate and spokesperson for the public at national, state, and local levels. I have been able to look back at the progress that has been made over the past term and take pride in knowing that we have accomplished so much.

I would like to take this opportunity to thank each and every one of you for your confidence in me. Wow, time goes by so fast when you are having fun! We started off the year with a bang. Our Installation Dinner-Dance at the Crest Hollow Country Club was a true gala, attracting almost 500 guests, including many dignitaries, demonstrating unity within the profession. As a follow-up to this event, our full day continuing education courses in January and February were very successful, attended by almost 200 and 350 dentists respectively.

Throughout the year, our Continuing Education courses have covered the various disciplines in dentistry, including periodontics, orthodontics, endodontics, restorative and implant dentistry, law and regulation in dentistry, patient management, and much more. Due to high demand from the attendees, many of these courses were held on Sundays. Our free Friday morning Continuing Education seminars are a member benefit course.

We were honored to host the deans of all of the three local dental schools, Dr. Ira Lamster, of the Columbia University, School of Dental and Oral Surgery, Dr. Charles Bertolami, of the New York University College of Dentistry, and Dr. Ray Williams, of the Stony Brook University, School of Dental Medicine, at our general membership meetings this year. We are also grateful to both the State Education Department and the Office of the Medical Inspector General for providing representatives to address our members regarding regulatory issues that can affect them.

Our annual Resident Night was attended by nearly 50 residents from our neighborhood hospitals. This event provides an opportunity for these new dentists to meet with the leadership and explore the benefits of membership in organized dentistry. At this event, the Residency Program Directors were honored and presented with the Spirit of Excellence Award. Dr. Gustave Lasoff, the oldest member on our Board of Trustees, was also recognized that night for his 60-year involvement in organized dentistry. He is a true link between the past and future of the Queens County Dental Society. This year, QCDs celebrated National Children’s Dental Health Awareness Week with State Senator Amy Yang, an eighth grader from the St. Anastasia School in Douglaston who won first place in our local and state contest.

As part of our community outreach for the children of Queens, a dedicated team of volunteers led by Dr. Prabhakar Kesner, Mota-Martinez, and Goldberg screened more than 800 school children. We believe outreach efforts like this and regular dental check-ups are an important way to teach children about the importance of good oral health.

Due to excellent response, we were again invited by the Mets to repeat our Oral Cancer Screening Program, spearheaded by Dr. Kesner at Citi Field this fall. The diligent efforts of our volunteers again made this event a success. This October, QCDs also joined hands with our colleagues from Nassau and Suffolk at our annual Belmont Racerbark oral cancer-screening event. In these uncertain financial times, “access to care” is much more than a catch phrase and we have demonstrated our commitment to the community by actions, not words.

Looking Back and Looking Forward

By Prabhakar Krishnan, DDS

...we have demonstrated our commitment to the community by actions, not words.

Continued on page XX
From the Editor’s Desk

HO HO HO Merry Christmas
By Viren Jhaveri, DDS

Well, boys and girls, I hope you’ve been good for goodness’ sake because it’s that time of year again. Time to lube up the ole sleigh.

Time to, more than anything else, make a list, check it twice, and find out who’s been naughty or nice.

As always at this time of year, life here in Santa’s Village is busy, busy, busy. Before things get really crazy, I thought I would take a moment to let you know what’s been going on in the Claus household this year.

First, let me say, I am sorry about the mass e-mail. The economy has forced us to put new efficiency measures into place, and I’m just not sure I will be able to answer all of your notes left in/near stockings hung by the chimney.

You can bet, though, that I will devour your much-appreciated milk and cookies! If ever there were a year that the Grinch might steal Christmas, this is it. But, I want to put to rest the rumors circulating on the Internet: There is no way that the Grinch, or anything else, will prevent me from making my rounds again this holiday season.

The elves are working tirelessly building I-phones and I-pods as I sit contemplating the meaning of this time of the year and wonder if a holiday without boxes or packages could be a good thing. What if the Christmas this year didn’t come from a store, what if it meant a little bit more? Well, that’s it from me.

With good cheer to all,
Santa Claus

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GE-41810(a)(10/07)
As 2009 concludes, we usually look back on the year to see what has been accomplished and what remains to be done in 2010. Our president, Dr. Krishnan, is writing a recap of the year’s activities at QCDS, which I will defer to her. However, there are other accomplishments, especially on the statewide level, that are worthy of mention and should not go without notice.

The 2009 legislative year presented quite a challenge to organized dentistry, where theiasco and battle for control of the Senate precluded what constitutes a typical legislative agenda. Many bills, which may have had a negative impact on dental practitioners, were successfully challenged by our New York State Dental Association team and the good will established over the years by NYSDA’s government affairs and lobbying programs paid dividends in the successes NYSDA secured. Some of the significant highlights include:

**STATUTE OF LIMITATIONS:** Senate bill 1729 sought to virtually eliminate the present statute of limitations relating to malpractice actions involving dentists and physicians. The bill never came to a vote and was vigorously opposed by NYSDA. However, ongoing efforts will continue to let legislators know this bill is unacceptable as it has the potential to increase health care costs and benefit the trial lawyers who strongly support the bill. We urge you to contact your local State legislators and express your opposition to this proposed legislation on the grassroots level.

**OFFICE BASED SURGERY:** Oral surgeons with dual degrees (MD and DDS/DMD) will not need to adhere to Department of Health regulations regarding standards and inspection requirements in their offices. Dentists not dually licensed had been previously exempted. However, a technicality omitted dually licensed practitioners from the same exemption, which they now have obtained.

**LIMITED PERMITS:** The Governor recently signed legislation removing an onerous requirement that residents in the required PGY1 program leading to licensure obtain a limited permit to participate in the residency program.

**MANDATORY ETHICS COURSE:** Dental students may now fulfill this requirement by taking the course while enrolled in dental school.

In addition, some bills that were opposed by NYSDA never came to the floor from their committees including:
- Assembly 6677 removing dental services from the Medicaid program,
- Assembly 5816 creating a profession of denturology,
- Assembly 5811/Senate 4994, known as the “Mercury Free Water Bill,” limiting the use of amalgam,
- Senate 3673 requiring dentists to disclose where dental devices were manufactured, and
- Senate 1041 creating a State Board for Dental Hygiene and allowing an independent scope of practice for dental hygienists in any setting.

NYSDA supported bills to allow Block Anesthesia to be provided by dental hygienists, as well as bills to allow an impaired dentist to seek help in the Professional Assistance Program without a surrender of the practitioner’s dental license, but these proposals did not receive consideration in this session but will be addressed in the next legislative session.

NYSDA is also pursuing the appointment of a dentist as the Executive Secretary of the State Dental Board as required by law, rather than the temporary non-dentist appointee currently holding that position due to budgetary considerations. Organized dentistry provides a strong voice for the profession and draws its strength from its membership. I urge all dental practitioners to consider tripartite membership in the ADA, NYSDA and your local component, thus ensuring your concerns continue to be heard on the national, state and local levels of government.

I would like to thank the officers and leadership of QCDS for their countlesshours devoted to servicing the needs of our members and providing timely information as well as worthy programs for our members. These volunteers receive no compensation and take many hours from their practices in an attempt to see that the needs of our members are being addressed. In particular, I can personally attest to the efforts Dr. Prabha Krishnan has made, as I can honestly say that not a day goes by where she is not communicating with me on one matter or another. We are also fortunate that Dr. Chad Gehani, in a well-deserved honor, assumes the NYSDA president elect position next year in what should be an interesting year under the newly adopted NYSDA governance structure.

In closing, please make an effort to support those who support us through their financial support of QCDS programs and their advertising in our publication. We value your continued membership and our staff looks forward to serving you in the coming year. Please consider attending our Installation and Dinner Dance on January 16th as a show of support for our incoming leadership.
FDA Issues Final Regulation on Dental Amalgam

The U.S. Food and Drug Administration issued a final regulation classifying dental amalgam and its component parts—elemental mercury and a powder alloy—used in dental fillings. While elemental mercury has been associated with adverse health effects at high exposures, the levels released by dental amalgam fillings are not high enough to cause harm in patients.

The regulation classifies dental amalgam into Class II (moderate risk). By classifying a device into Class II, the FDA can impose special controls (in addition to general controls such as good manufacturing practices that apply to all medical devices regardless of risk) to provide reasonable assurance of the safety and effectiveness of the device.

The special controls that the FDA is imposing on dental amalgam are contained in a guidance document that contains, among other things, recommendations on performance testing, device composition and labeling statements.

Specifically, the FDA recommended that the product labeling include:

• A warning against the use of dental amalgam in patients with mercury allergy.
• A warning that dental professionals use adequate ventilation when handling dental amalgam.
• A statement discussing the scientific evidence on the benefits and risk of dental amalgam, including the risks of inhaled mercury vapor. The statement will help dentists and patients make informed decisions about the use of dental amalgam.

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Dental amalgam is a “pre-amendment device,” which means that it was in use prior to May 28, 1976, when the FDA was given broad authority to regulate medical devices. That law required the FDA to issue regulations classifying pre-amendment devices according to their risk into class I, II or III. Although the FDA previously had classified the two separate parts of amalgam—elemental mercury and the metal powder alloy—it had not issued a separate regulation classifying the combination of the two, dental amalgam.

During this time, however, dental amalgam has been subject to all applicable provisions of the law. Today’s regulation also reclassifies the mercury component of dental amalgam from Class I (low risk) to Class II (moderate risk).

Over the past six years, the FDA has taken several steps to assure that the classification of dental amalgam is supported by strong science.

In 2002, the agency issued a proposed rule to classify dental amalgam and identify any special controls necessary for its safe and effective use.

Due to a high number of comments on that rule, the agency held an advisory committee meeting in 2006, inviting dental and neurology experts to review existing scientific data on dental amalgam, especially with regard to its toxicity in pregnant women and children.

The agency drafted a review of recent and relevant peer-reviewed scientific literature on exposure to dental amalgam mercury. The advisory committee asked that the agency conduct an even deeper review of the scientific literature on this topic. In all, the agency considered some 200 scientific studies.

On April 28, 2008, the FDA reopened the comment period on the 2002 proposed classification in order to elicit the most up-to-date comments and information related to classification of dental amalgam. Today’s rule reflects the years of agency review on this topic.

Dr. Dogra Becoming New QCDS President

Dr. Dogra has been a QCDS member since 1978 and has been an active member of organized dentistry. He is a strong proponent of continuing dental education and has held positions within the Indian Dental Association, including director of continuing dental education. He is an attending at Flushing Hospital Medical Center and practices general dentistry at the Kissena Dental and Pediatric Care Center where his wife, Dr. Mridula Dogra, is a pediatric physician.

The Dogras have three children. Their oldest son is enrolled in a residency program at Wykoff Heights Medical Center in Brooklyn. Their daughter is doing her first year of residency in Anesthesia at Stony Brook Medical Center. Their youngest son has just begun his undergraduate studies at SUNY Binghamton.
Protecting Custodial Accounts and Assets for Children and ‘Generation-Skipping Trust’

By Michael Markhoff, Esq. and Stanley E. Bulua, Esq.

Danziger & Markhoff LLP

Protecting Custodian Accounts

Many people have accumulated funds in custodian accounts for their children with the intention of using the funds for college. However, in many instances, the parents were able to pay the tuition from current income, leaving a substantial balance in the custodian account.

The funds in the custodian account become property of the child when he or she attains age 21. At this point, the parents have two concerns: first that the account will be at risk in case the child marries and the marriage ends in divorce, and second, that the child may spend the money frivolously.

The best approach in either case is to have the child transfer his or her custodian account to an irrevocable trust created by the child, with the parents as trustees. The trust’s income and principal will only be paid to the child at the discretion of the trustees. Upon the child’s death, the assets are distributed to the child’s children. The important point is that the account cannot be distributed to the child’s spouse.

If the parents decide at some point that the trust is no longer necessary, they can, in their role as trustee, consent to collapse the trust and distribute the assets to the child.

The trust’s income will be taxed to the child. The trust does not have to file separate income tax returns and does not have to apply for a taxpayer identification number.

Upon the child’s death, the trust will count as an asset of his or her estate for estate tax purposes. No marital deduction will be available in the child’s estate because the trust property cannot pass to the child’s spouse. The trust agreement provides that the trust is to bear its own share of the child’s estate taxes.

The virtue of such a trust is that the child has given up control of the assets to his or her parents. In exchange, the trust helps earmark the assets as “separate property” for equitable distribution purposes and insulates the assets from any divorce proceedings. Since it is frequently awkward for parents to recommend a prenuptial agreement, this is a more palatable alternative. Of course, such a trust will not protect earned income or other assets not in trust from spousal claims. Also, the child now cannot use the custodian account to purchase sports cars or take lavish vacations.

The trust has estate tax consequences at the child’s death and should be drawn with these in mind.

Protecting Your Assets From Your Children When You Die

Instead of relying on your children to plan for their own protection against potential creditors’ claims, there are techniques, which you can employ to prevent creditors from obtaining the inheritance left for your children.

Rather than leaving your inheritance outright to the child, you should consider leaving the inheritance in the form of ‘generation-skipping trusts’ for your children. These trusts provide income to the children and distributions of principal with the consent of another trustee. When the child dies, the trust will be distributed to grandchildren.

The advantage of the trust is that since the child does not have control of the assets (the trustee has the control), creditors cannot attach the trust principal. As a side benefit, this technique enables you to “dictate from the grave” that your estate will not pass to your son-in-law or daughter-in-law upon your child’s death if that is the desired result.

Michael Markhoff, Esq. and Stanley E. Bulua, Esq. are partners in the White Plains, New York law firm of Danziger & Markhoff LLP. The firm is a business and tax-oriented law firm that has been representing dentists for over 45 years. Mr. Markhoff and Mr. Bulua can be reached at 914-948-1156 or by email at markhoff@dmlawyers.com or sbulua@dmlawyers.com respectively.

CRESO Corner: Learning More on X-Ray Operator Position

By Martin Schnee, Big Apple Radiation Safety

A previous article in the QCDS Bulletin covered operator position while taking x-ray exposure. It needs to be taken one step further. While the operator should always stay behind the wall when taking x-rays, the position behind the wall can also affect the scatter measurements. The operator should take note when they are positioning the cone for the exam. If the cone is pointing directly to where you are standing, try to stretch your body to the side when making the exposure. If the cone is pointing away from where you are standing then you will get the minimal scatter through the wall.

If a protected position is still getting substantial scatter measurements as determined by a survey during an inspection, then based on the ALARA regulation (As Low As Reasonably Achievable), additional shielding shall be provided. Sometimes this can be accomplished by hanging lead aprons on the inside wall. Another solution is to move the exposure switch to another location. Note: this may be a problem if your waiting room or receptionist is on the other side of the wall.

Holding of dental patients during the x-ray is not allowed. No one other than the patient is allowed in the room during the x-ray. This is not always practical, especially with children who are traumatized or patients who are medically or psychologically handicapped. In these cases certain rules should be followed. The first is that the holder is not pregnant. The holder should not be someone who routinely takes x-rays. The holder must be at least 18 years of age. The holder should be a relative or friend of the patient. Records of patient holding are to be maintained. The holder shall be provided with protection of a lead apron, and if available lead gloves and personnel monitoring (film badge).

Positioning of the holder is also crucial for scatter purposes. The trunk of the holder’s body should not be in line with the pointing of the cone. The holder should reach on either side of the patient’s head while keeping their body away from where the cone is pointing. The holder should not stand directly behind the patient’s head during the exposure. The holder may receive from 1-5 percent of the patient dose, which is really not much to worry about with dental x-rays.

If you have any questions concerning this topic contact the author, x(718) 986-9996 or by e-mail at Scientinst0144@aol.com. The author’s web page is NYCRESO.com
QCDS Special Event

Fans Win at Oral Cancer Screening

—Continued from page 1

quickly. “God bless you,” he said after the screening. “You guys are doing a great job.”

QCDS President Dr. Prabha Krishnan, who helped screen fans at the event, was one of those who found a suspicious lesion in a cigar-smoking fan. “Early detection is important to saving lives,” she said. “I think this was a very good service for the community.”

The oral cancer screening by QCDS was part of a health fair held that night by the Mets featuring 14 booths set up across the stadium. Other organizations participating included the New York Hospital of Queens, Elmhurst Hospital, New York City Department of Health, American Cancer Society, and the Glaucoma Caucus Foundation.

“Through local hospitals and health organizations like the QCDS we are able to give back to our fans and the community,” said Stephen Karl, senior group and inside sales representative for the Mets.

“Fans have the opportunity to have their blood pressure & blood-sugar level screened, eyes examined for glaucoma and mouths checked for any potential signs of oral cancer. In addition, information regarding current health issues, such as H1N1 (Swine Flu), is provided to further educate the public on these important matters,” he explained.

“Nicotine patches were also distributed to those who are considering or already trying to quit smoking. All of these services are provided to the fans free of charge. It is our hope that the fans will take advantage of these services and get a quick check-up while at the game. The Health Fair provides easy access to information and services for the community and benefits those who may not normally be proactively informing themselves,” Mr. Karl said.

Both Dr. Krishnan and Mr. Karl said they hoped to be able to repeat the program again next year.

QCDS President Dr. Prabha Krishnan helps screen the many Mets fans at the oral cancer screening.

QCDS Vice President Dr. Mercedes Mota Martinez and residents from Queens Hospital in action at Citi Field.

QCDS President Dr. Prabha Krishnan (Periodontist) and Treasurer Dr. Doron Kalman (Oral Surgeon) screening Mets fan.

A delegation from the QCDS was welcomed onto the field before the Mets game, including (from left) Past President Alan N. Queen, Event Chairman Stuart Kesner, Mr. Met, President Prabha Krishnan and Executive Director Bill Bayer.

True Mets fan being screened by true Queens hospital resident at Citi Field.

QCDS volunteers and hospital residents at Citi Field.

Mets Event Chair Dr. Stuart Kesner watches on as QCDS volunteer screens Mets Fan.

QCDS Vice President Dr. Mota Martinez with Queens Hospital Resident screening a Mets fan, other volunteers in the background talking to fans about importance of oral cancer screening.
**Dental Practice Coaching**
Sponsored by NuLifeLong Island
Presented by Dr. Steven M. Katz and Kelly Fox-Galvagni

**Subject:** Presented by Berry Stahl, DMD

**Date:** November 20, 9 a.m.

**Tuition:** ADA member: $105 Non-ADA member: $200

**Instructor:** Robin Zalewski, BLS Instructor

**Additional Information:**
- **Certification/Recertification:** To re-certify, you must submit a copy of your BLS Card, or you will need to take the complete certification course again.
- **Examinations:** The ability to recognize the signals of a heart attack and provide stabilization of the victim at the scene of a cardiac arrest is a priceless commodity. Life over death may some day become a reality to someone you know or care for. Be prepared to help save a life.
- **CPR/Basic Life Support Certification:** The CPR course is certified by the American Heart Association. Proper administration of CPR and proper use of automated external defibrillators (AED) is demonstrated.
- **Objectives:** Proper certification for CPR training for the dental team is now mandated by OSHA and the American Dental Association (ADA). This certification is required for all states as part of their holistic care mandate.

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Patients will benefit from a comfortable and interactive experience that ultimately results in a beautiful restoration. As a dentist, you will appreciate an enhanced digital image for your dental practice, a high level of patient satisfaction and fewer procedure steps. Let the Lava C.O.S. be the foundation for the dental practice of the future.

**Tuition:** ADA member: $35 Non-ADA members: $75

**Instructor:** Dr. Al Galum

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**Infection Control 4 C.E. Credits**

**Date:** November 6, 9 a.m.

**Tuition:** ADA member: $85 non-ADA member: $260

**Instructor:** Harold Edelman, DDS

**Additional Information:** The Infection Control course will cover 1 and 2 rescuer CPR, Heimlich maneuver, child CPR and AED.
- **Certification:** For resuscitation courses, participants will be issued certification cards by the AHA.

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**Types of overdentures and their definitions, implant placement for overdentures, types of attach- ments.**

**Dental Emergency 4 C.E. Credits**
**Date:** November 15, 9 a.m.
**Tuition:** ADA member: $105 Non-ADA member: $200

**Instructor:** Dr. A. Galum

**Additional Information:**
- **Preparation:** For your upcoming emergency today!
- **Objective:** Demonstrates on the live patients for you and your staff to analyze and determine appropriate emergency treatment.
- **Certification:** This is a great staff training aid! Your team needs to be educated in medical emergencies that will occur. We never know when a medical emergency will happen in our office. Oftentimes, it has nothing to do with planned treatment. This video includes diagnosing and dealing with many potential emergency medical problems, including loss of consciousness, respiratory distress, allergies, chest pain and other life-threatening situations. Examples “medical emergencies” are demonstrated on the live patients for you and your staff to analyze and determine appropriate emergency treatment. Prepare for your upcoming emergency today!
Study Clubs November – February

Steinway Study Club
CONTACT DR. KIRSCHNER (718) 634-2123
Nov 17 6:30-9:00 p.m.
Topic: Partial design, Veneer & Crown Prep Updates
Speakers: Irving Nelson, Director, NYU Prosthetic Lab / Americas
Location: Mezzo Mezzano Restaurant, 31-29 Ditmars Blvd., Astoria

Jan 8 8:30 a.m.-5:00 p.m.
Topic: Implant Certification Program
Speaker: Dr. Bernard Falkoff, DDS
Location: 56-03 214 St., Bayside

Dec 15 6:30-9:00 p.m.
Topic: Implant Case Overview
Speaker: Dr. Wallace P. Chan, PG2, Mount Sinai Hospital
Location: Mezzo Mezzano Restaurant, 31-29 Ditmars Blvd., Astoria

New York Hospital Queens Dept of Dentistry
CONTACT MS. VIZZAN (718) 779-2840
Dec 11 8:30 a.m.-5:00 p.m.
Topic: Implant Certainty Training Program
Speaker: Dr. Bernard Falkoff, DDS
Location: 56-03 214 St., Bayside

Dec 1 8:00 a.m.-5:30 p.m.
Topic: Oral and Maxillofacial Pathology: A Comprehensive Review Course
Speaker: Stanley Kerpel, DDS, Paul D. Freedman, DDS
Location: Theresa and Eugene M. Lang Center for Research and Education Lang Auditorium

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QCDS Installation and Dinner Dance
The QCDS Installation of officers will be held on Saturday, January 16, at the Chateau Briand, located at 440 Old Country Road, Carle Place.

Join in honoring the new QCDS president, Dr. Ashok K. Dogra, and the officers of both QCDS and ICDE by attending the event which promises.

A cocktail hour begins at 7 p.m., followed by an evening of dinner and dancing.

The volunteer officers devote significant amounts of their time to the Society in an effort to bring programs of interest to the dental community, along with timely information relative to the profession. Your participation in this evening provides an excellent way to express your appreciation.

Reservations can be made by calling the QCDS office and sending a check, made payable to QCDS or by credit card for $95 per person.

If you wish to make a donation to offset the cost of the evening, forward your donation directly to QCDS at 86-90 188th Street, Jamaica, NY 11423.

Donations can be made in the following categories:
$200 Supporter  
$300 Friend  
$500 Bronze  
$1000 Silver  
$2000 Gold  
$5000 Platinum  
$10,000 Diamond

Donations of $50 or more include tickets to the event.
Obstacles on the Road to Retirement

By Harish Chugh

AXA Advisors

You can see the light at the end of the work tunnel: it’s called retirement, and it’s coming into view. You’re feeling pretty good about it, because you’ve been planning for it. What you were supposed to do was socked money into a 401(k), IRA, and/or mutual fund, paid off the house, eliminated your debt. You’re in good shape.

But, this is no time to become complacent, especially since there are few risks that loom, threatening to derail your plans if not faced head-on. Some may be outside your control, but that doesn’t mean what matters is being addressed and overcome to keep your retirement on track.

Risk #1: Inflation

Every year, a pesky little thing called inflation erodes the buying power of a dollar. A few cents here, a few cents there—after a while, it adds up. Thirty years ago, a gallon of milk cost about half as much as it does today. That means that if you buy a gallon of milk tomorrow, your same dollar will only stretch half-way to the dairy.

For working people, these changes go virtually unnoticed since salaries generally keep pace with inflation. But, when your income becomes fixed—as is often the case in retirement—the changes hit a little harder. Add to it the real possibility of a 30-year (or longer) retirement, and suddenly inflation becomes a formidable risk to your purchasing power. You may begin your retirement in good shape financially, but if your income is not increased to keep up with inflation, you may find yourself much worse off a few decades down the road.

So, how much is inflation? The Consumer Price Index acts as the bellwether for our economy’s inflation. Essentially, it compares the prices of various products and services and calculates the difference in the dollar’s buying power year to year. Over the last 30 years, the average increase has floated between 2 and 4 percent according to the Bureau of Labor Statistics. Consumer Price Index Table (February 21, 2007). But, to put it into perspective, consider this: today, you will have to spend $24.57 to purchase the same thing you could buy for $10 in 1980 according to the Bureau of Labor Statistics. Inflation Calculator (February 28, 2007). To preserve your standard of living, your retirement budget needs to adjust accordingly year after year.

Risk #2: Market Performance

Sometimes, it’s the lack of the draw—you may plan to retire at age 60, and then once you reach that age some circumstance outside your control is woefully impacting market performance. Believe it or not, something as cyclical as a bear market could significantly erode your retirement savings.

Therefore, to impact the way much you have to draw upon going forward. Though you cannot predict if the market is about to take a downturn and if so, for how long, you can, at least attempt to create market performance and adjust your budget accordingly to adapt to the market’s volatility and help your dollars stretch farther into the future.

Besides conscientious portfolio evaluation, another way market risk can be mitigated is through annuities. These products are designed to preserve your capital while creating a guaranted income stream for a duration of your choosing—be that several years, several decades, or for as long as you live. When it comes to annuities, there are many options, including how they are funded and how much risk they carry. A financial professional can explain the variations and help you decide if these types of products might complement your overall plan.

Risk #3: Longevity

When it comes to living a long life, most of us think the longer the better! But when it comes to preparing to finance a retirement of 30 or 40 years, longevity becomes an important planning factor. No one wants to outlive their money, become a burden on their family. Therefore, making sure you save enough to last as long as you do is critical.

In April of 2006, the CDC’s National Center for Health Statistics reported that the average life expectancy for Americans had reached an all-time high: 77.9 years, according to the Centers for Disease Control and Prevention (April 19, 2006). Women are living an average of 80.4 years while men are living 75.2 years, again according to the Centers for Disease Control and Prevention (April 19, 2006). Mind you, that is just the average. By definition, an average means that, statistically, half fall below and half fall above those numbers. Thus, there’s a fairly good chance one member of a couple will live past “life expectancy.”

Will you be prepared if it’s you?

Projecting retirement income in a variety of scenarios is a wise approach. It is foolish to know just what you can afford to withdraw given various circumstances. That way, you are prepared to maneuver or make alterations to your plan as need be.

Risk #4: Getting Your Due

Depending on your circumstances, you may expect to receive income from an employer-sponsored retirement plan or pension as well as Social Security and your personal savings. You may even be lucky enough to get retirement health coverage through your former employer. All of these components play into your overall retirement strategy. But, if one or more of these factors are reduced or disappear entirely, do you have a contingency plan?

If Your Pension is Discontinued

It’s a frightening predicament in which too many Americans have wound up. Though you should, by all means take advantage of all these benefits if available to you, you should also make sure you don’t put all your eggs in one basket, just in case. Remember, a diversified approach is important.

If the worst should happen and your company claims bankruptcy or defaults on pension payments, the Pension Benefit Guaranty Corporation (PBGC) is an organization that picks up the slack on your program. If you have participated in a pension program insured by PBGC, the PBGC will ensure that you receive the promised benefits. If PBGC determines that it cannot pay your promised benefits, it has to wind up the pension plan. Benefits that are vested and nonforfeitable will be paid directly to you. If PBGC cannot pay your promised benefits, you will be entitled to a benefit from the PBGC insurance program, provided you meet certain eligibility requirements.

If Your Health Insurance is Discontinued

Fewer and fewer companies are offering health insurance to their retirees. Thankfully, Americans quality for Medicare once they turn 65. If you find there will be a gap between when your employer-sponsored insurance ends and your Medicare begins, you can investigate COBRA options through your company’s plan, or you might consider buying a high-deductible (also called “catastrophic”) plan to get you through.

Though Medicare does as well as the country’s largest insurance program, it does not cover everything associated with medical care. There are some out of pocket costs, especially for vision, dental and pediatric care. Further, Medicare does not cover long-term care unless directly associated with a hospital stay; even then it only covers the first 3 months of care. To learn more about what is and is not covered through Medicare, visit www.medicare.gov.

Long-Term Care

As we age, the likelihood of needing some form of assistance increases. Unfortunately, the cost of long-term care is extremely high and could quickly erode retirement savings if or your spouse should need prolonged help performing the activities of daily living.

There are two ways individuals can protect themselves. Long-term care insurance and living care riders. Long-term care insurance policies are stand-alone insurance contracts that will, in accordance with policy specifications, pay for qualified long-term care costs if such care is ever needed. These policies can be expensive, and if the owner never needs care, the premium payments will have been spent for naught. A living care rider works with the same idea. Unlike stand-alone policies that require years’ worth of premiums, some insurers offer a living care rider which can attach to qualified permanent life insurance contracts for a fee. This rider can accommodate the permanent life policy’s death benefit if necessary, to pay for the costs associated with long-term care.

If, on the other hand, long-term care is never required, the premium policy remains in effect and no additional premiums have been paid.

For specific information about long-term care costs, contact your financial professional.

Social Security

Though there has been much discussion about Social Security and its future, analysts seem to think cuts to the program will impact generations to come so much today’s pre-retirees. If benefit reductions are ever required at all, they will be phased in over time. People who are already retired or planning to retire in the near term should not be affected. For more information on Social Security benefits, visit www.ssa.gov.

Retirement is a new chapter in which you can explore options you never had the freedom or time for before. You’ve worked hard and kept your eye on the ball financially. Now, it’s time to stay down those four key risks and make sure you’re ready if should ever present themselves.

For a thorough assessment of your retirement plan, contact your financial professional today.

AXA Advisors does not provide tax or legal advice. The information provided is based on a general understanding of the subject matter discussed and is for informational purposes only. Please consult your tax and/or legal advisors regarding your particular circumstances.

Harish Chugh offers securities and investment advisory services through AXA Advisors, LLC, 1111 Marcus Avenue, Suite 100, Lake Success, NY 11042, member of FINRA, SIPC, and offers annuity and insurance products through AXA Network, LLC and its subsidiaries.

SAVE THE DATE!

QCDS Presents

“Law & Regulation”

We have scheduled a program for the morning of JANUARY 17th which will address many aspects of the regulatory processes governing your dental practice including the Office of Professional Discipline and the Medicaid Program. We have commitments from both of these offices to provide speakers who will unravel many of the mysteries surrounding the disciplinary process as well as to discuss areas of interest regarding the Medicaid program. A similar program held at QCDS earlier this year was very well attended and many members who did not attend have asked for this program to be scheduled again.

We anticipate another full house therefore we encourage you to register as soon as possible. Full program details will be posted on the web site, www.qcds.org in the near future.

QCD S Presents

“Law & Regulation”

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The IRS has suspended the mandatory withdrawal rules from pension plans and IRAs for 2009. You will not have to add the skipped payment to your 2010 withdrawal. Your 2010 withdrawal will be based on your age and December 31, 2009 balance. Inherited IRAs and pensions get the same break. If you turn 70.5 years of age in 2009, you needn’t take any pension withdrawal.
Report Of The Nominating Committee

In accordance with QCDS Bylaws, the Nominating Committee met and considered all nominations that were received. The following Committee recommendations are made for 2010:

President: Ashok Dogra (per QCDS Bylaws, automatically ascends to the office)
President Elect: Mercedes Mota-Martinez
Vice-President: Beatriz Vallejo
Secretary: Doron Kalman
Treasurer: Bijan Amvar
Historian: Sudhakar Shetty

NYSDA Trustee
Joseph Caruso

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J. Caruso E. Huang A. Queen B. Vallejo
A. Dogra P. Krishnan K. Serle R. Yang

In accordance with QCDS Bylaws, any additional nominees for an elective office may only be made by written petition signed by 20 members in good standing and received by the executive director not later than ten days after the October 13th general membership meeting at which the report of the Nominating Committee is presented. No additional nominations, including nominations from the floor, shall be accepted for elective offices to be filled by a vote of the General Membership unless otherwise specifically provided in these Bylaws. Voting shall take place at the November 4th General Membership meeting.
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Pediatric Dentist: Fabulous opportunity. Join an established practice in Forest Hills, Queens. Seeking energetic, motivated, pediatric dentist. Full time employment with great benefits and partnership potential for the right person. E-mail: FPI@OPTIMUM.NET or phone 718-459-7900 for confidentiality. Please ask for Patty.

Jackson Heights, Queens: 1,400 sq. ft. co-op and 40 year practice/large database for sale. Prime location/high traffic Street. Will introduce. No broker’s fees. Dr. Ascher 718-424-661 e-mail: rickjascher@gmail.com

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