

# Dental Dimensions

*Fall*  
2019

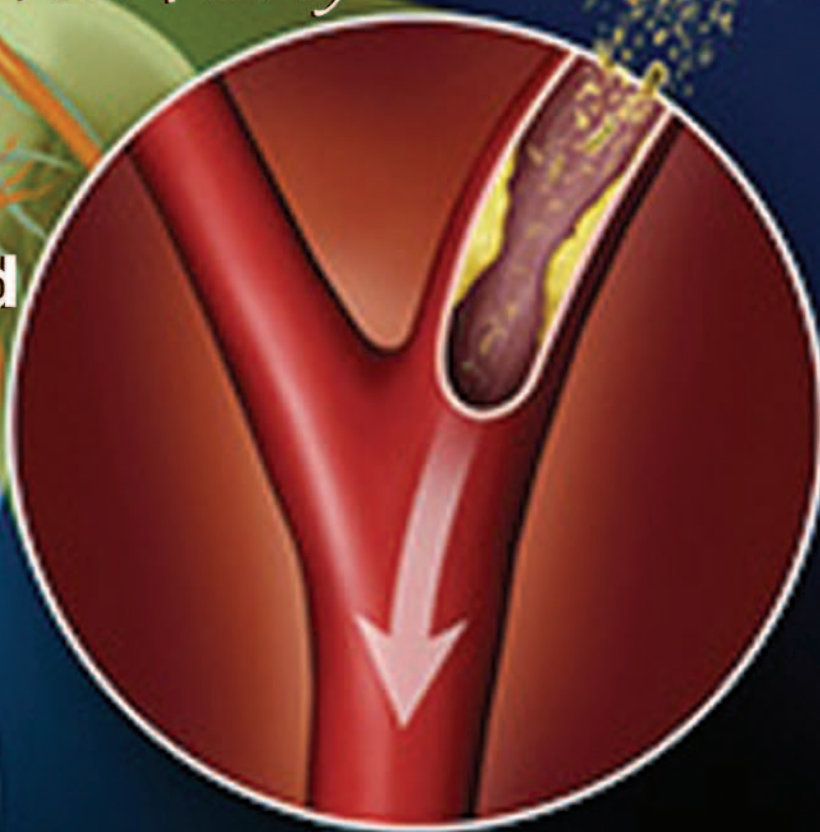
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- **The Periodontal**  
- *Systemic*  
- *Connection*



- SFVDS 8<sup>th</sup>  
*Annual Afternoon Tea Party*

- **Top Tax**  
**Strategies for the End**  
**of the Year 2019**



- Smile Armenia

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# Dental Dimensions

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9205 Alabama Ave., Suite B  
Chatsworth, CA 91311  
Office: (818) 576-0116  
Fax: (818) 576-0122  
E-mail: [exec.sfvds@sbcglobal.net](mailto:exec.sfvds@sbcglobal.net)  
Web Site: [www.sfvds.org](http://www.sfvds.org)

## Executive Committee

Mahfouz Gereis, D.D.S.  
*President* (818) 989-3357

Gib Snow, D.D.S.  
*Immediate Past President*  
(661) 273-1750

Chi Leung, D.D.S.  
*President-elect* (818) 243-3677

Michael Whang, D.D.S.  
*Treasurer* (818) 576-0116

Philomena Oboh, D.D.S.  
*Secretary* (818) 781-5180

Martin Courtney, D.D.S.  
*CDA Trustee* (818) 886-6696

Karin Irani, D.D.S.  
*CDA Trustee*  
[ddsusc03@gmail.com](mailto:ddsusc03@gmail.com)

T. Andris (Andy) Ozols, MA, MBA  
*Executive Director, Managing Editor*  
E-mail: [exec@sfvds.org](mailto:exec@sfvds.org)



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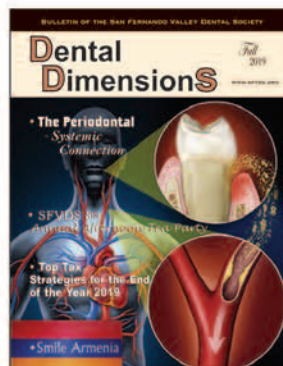
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## Call for Submissions

Do you have an unusual case study  
or an interesting article you would like to have published?  
Dental Dimensions is looking for articles from our members so  
we can share our collective knowledge. Articles should be  
500-1000 words with references where applicable and photos  
if possible. Send your submissions to:  
[exec@sfvds.org](mailto:exec@sfvds.org)  
or contact the dental society office at 818-576-0116



## On The Cover.....

Mounting evidential connections  
between periodontal disease and  
systemic health are explored starting  
on page 10.

Illustration courtesy of Dear Doctor, Inc.



# From the Desk of the President

Mahfouz Gereis, DDS



As this is my last Dental Dimensions column as president, I wanted to take this time to tell you how grateful I am for the opportunity to have served as your president for the year 2019. I have been truly privileged and humbled by this honor bestowed on me by you, the members of this great organization.

At my installation ceremony, I outlined my goals for the year to increase our membership, better serve their needs, appeal to and encourage more new and younger dentists to join and participate. Additionally, I pledged to work more closely with ADA and CDA to promote the general interest of our members at the national and state level.

I am happy to report that we have made progress in all these areas. Our membership has increased and we saw an improvement in our market share. We have recruited and added three new younger members to our board of directors and assigned them to chair some of our committees, and they have risen up to the task and will definitely make great future leaders.

I also want to take this opportunity to acknowledge and thank our executive committee, trustees and board of directors members. Frankly, having been involved in many other organizations' leadership, I have to say, I haven't seen more involved and dedicated board members than at the SFVDS. Just to validate my point, at our last board meeting we started our agenda items discussion around 7 PM and finished close to 11 PM, that of course, after a long day of work at our offices.

Another reason for the success of our component is our efficient, friendly, hard-working executive director Andy Ozols, and staff members Wendy and Bella that work together in harmony to oversee the myriad of activities we offer, and respond to our members various needs with a "Members First" philosophy. They make our work much easier and help us achieve our goals.

In order to reach the high level goals we set for ourselves for the year 2019, I appointed seven task forces to look into all aspects and functions of our association ranging from our continuing education programs, CDA House of Delegates (HOD) resolutions, increasing non dues revenue, finding a new, bigger building to meet the needs of our expanding functions and activities, look into better use of digital and social media to promote our component, and examine our foundation's structure and functions.

Additionally we assigned a task force to look into restructuring the composition of our executive committee and define the role and position of the treasurer. I wanted to take this opportunity to thank our task force leaders, Drs. Afshin Mazdey, Ted Feder (who worked closely with Dr. Mike Bromberg), Irubiel Barbosa, Gib Snow, Michael Whang, Nita Dixit and our upcoming president for the year 2020, Chi Leung.

During 2019, the task forces' recommendations were presented to our executive committee and board of directors for further analysis so that when appropriate, their work will lead to passing board resolutions that will help make our practice of dentistry and the operations of the dental society more effective and efficient.

Another task we took on was to re-evaluate our strategic plan, including our mission and vision statements. We set goals and strategies to accomplish this plan as we spent three days in a retreat reviewing and adjusting our strategic plans for both the dental society and our foundation, and came up with an improved version to cover the next two years.

In mid-September, I was asked to give the opening speech for the 8th annual 'Afternoon Tea Party', which was attended by more than 70 female dentists. Attendees listened to motivational and exciting speakers who addressed the unique challenges faced by our female member dentists in their personal lives and careers. This event was initiated eight years ago by our current CDA trustee, Dr. Karin Irani, who was our membership committee chair at the time. The event is now very well served by our current membership committee chair, Dr. Anette Masters. It was a very heartwarming and exciting.

In past years, we would normally slow down activities in the summer months of July and August, but this year was an exception and we had several activities. These summertime events included a lecture about tobacco, vaping and cannabis by an LA County Public Health dentist, the third in our Dental MBA series, and more importantly, a sexual harassment prevention training course, which was a hit with 70 attendees. As you can see we have offered an array of activities to fit every member's interests and needs.

On a personal note, in addition to serving as a delegate for our component to CDA HOD, I was also privileged to be

*Continued on page 5*



# Trustee Report



Karin Irani, DDS

As a dentist you have the power to protect the profession and help your patients.

At the recent ADA 2019 House of Delegates meeting in San Francisco, Delegates approved two resolutions, HR 14 and HR 15 that would take effect in 2021 to solidify the financial future of the organization. Both resolutions were developed and sponsored by ADA Council on Membership as the result of studying different dues categories and the potential decline in full dues paying members. Both resolutions addressed the biggest structural challenge facing ADA and most of our state societies, the steep decline in full dues-paying members. The approval of both resolutions by the great majority of the ADA House, will give ADA a chance to reverse the 12 year decline in the number of full dues paying category. It will allow the organization to increase operating revenue needed to invest in member value and capacity for states and local components in a sustainable and equitable manner. These changes will help sustain the organization that we are all so proud of and keep the 160 year legacy for the generations to come.

## e-cigarettes

The ADA is calling on Congress to crack down on the use of flavors in tobacco products, including e-cigarettes and cigars.

In a Sept. 9 coalition letter, the ADA and 44 other health groups asked members of Congress to cosponsor the Stopping Appealing Flavors in E-Cigarettes for Kids Act, or SAFE Kids Act. The bill would prohibit tobacco products other than cigarettes from containing flavors other than natural tobacco.

“Cracking down on flavored tobacco products is one of the most important steps Congress can take to reverse an epidemic in youth e-cigarette use and reduce youth use of other tobacco products,” the coalition wrote. The bill would allow some artificial flavors in vaping products, but only if there is evidence that the flavors will help smokers quit or deter youth initiation of nicotine or tobacco use.

On the state level, our members are surely aware that CDA is supporting AB 1519 by Assembly member Evan Low (D-Campbell), which extends the operation of the dental board and, among other things, establishes fundamental consumer protections for patients.

AB 1519 empowers patients by requiring treating dentists using telehealth to provide them with basic information, such as the dentist’s full name and state license number, similar to the requirements for brick and mortar dental practices. The bill also preserves a consumer’s ability to submit complaints about licensees to the dental board even if they have signed an arbitration clause or nondisclosure agreement. Most important, the bill requires that dentists providing orthodontics meet the basic, accepted standard of care by reviewing recent X-rays prior to the movement of teeth. This requirement applies regardless of whether the dentist treats the patient in person or provides services through teledentistry.

Providing dental care to patients, especially the movement of teeth, without sufficient diagnostic information can potentially lead to serious patient harm, including pain, loose or cracked teeth, gum recession and tooth loss.

## From the Desk of the President

chosen as a CDA delegate to the ADA HOD in San Francisco joining delegates from all over the United States. I am proud to say that the California delegation (the largest component with 71 delegates) was very active and influential in shaping up the final draft for resolutions that will affect and direct the future direction of our profession and protects the rights of our patients. In addition, I attended an International Dental Conference in South Korea along with a few representatives

from California including Dr. Carol Summerhays ast CDA and ADA president. That was an eye-opening experience.

Once again, this for me, was a very exciting year serving our members. This service has made me even more proud to be part of the best dental society, the San Fernando Valley Dental Society!

Mahfouz Gereis, DDS  
President



# Legislation Report

Jorge A. Alvarez, D.D.S.



The results for special election on August 13, for LA City Council 12th District declared as elected, John Lee. This election was held due to former City Councilman Mitch Englander's resignation last year. The 12th District covers the communities of Granada Hills, Northridge, Porter Ranch, Chatsworth, West Hills, Sherwood Forrest, and parts of Reseda and North Hills.

Wishing the best to our new 12th District Councilmember, John Lee.

Direct-to-consumer orthodontic patient protection bill awaits governor's signature

A bill that protects patients who undergo direct-to-consumer orthodontic treatment has passed the California Legislature and is awaiting the governor's signature.

AB 1519 by Assemblymember Evan Low (D-Campbell), extends the operation of the dental board and among other things, establishes fundamental consumer protections for patients.

AB 1519 empowers patients by requiring treating dentists using telehealth to provide them with basic information such as the dentist's full name and state license number, similar to the requirements for brick and mortar dental practices. The bill also preserves a consumer's ability to submit complaints about licensees to the dental board even if they have signed an arbitration clause or nondisclosure agreement. Most important, the bill requires that dentists providing orthodontics meet the basic, accepted standard of care by reviewing recent X-rays prior to the movement of teeth. This requirement applies regardless of whether the dentist treats the patient in person or provides services through teledentistry.

Providing dental care to patients, especially the movement of teeth, without sufficient diagnostic information can potentially lead to serious patient harm, including pain, loose or cracked teeth, gum recession and tooth loss.

CDA member dentists were instrumental in providing grassroots advocacy for the bill by responding to a call to action to voice their support to state lawmakers.

Gov. Gavin Newsom has until Oct. 13 to sign the legislation, which ensures that telehealth advancements continue to grow in a thoughtful way that puts patient safety first and is as effective as in-person treatment.

The Legislative Committee wants to thank the San Fernando Valley Dental Society members in the cities of La Canada-Flintridge, La Crescenta, Montrose, Burbank, Glendale, and Tujunga, for their response in calling State Senator Anthony J. Portantino's office to support AB 1519.

ADA files complaint with the FTC against SmileDirectClub

The American Dental Association has asked the Federal Trade Commission to "investigate false and misleading claims made by SmileDirectClub, LLC, to entice consumers to purchase products and services." The ADA is concerned specifically with SmileDirectClub's marketing and direct-to-consumer sales of plastic teeth aligners, which it says do not follow the adequate safeguards required by law.

CDA bill would make silver diamine fluoride a covered Medi-Cal benefit

Silver diamine fluoride would become a covered benefit as a treatment option for tooth decay for specified Medi-Cal Dental Program enrollees under a new bill authored by Sen. Richard Pan (D-Sacramento). Senate Bill 154 would make SDF a covered benefit if applied as part of a patient's comprehensive treatment plan and with the patient's written informed consent.

If you want to become part of the providers of the Medi-Cal program for silver diamine fluoride, please contact CDA, to guide you thru the process.

Network leasing bill gains traction, adds protection for dentists, patients

AB 954, authored by Assemblymember Jim Wood, DDS, and sponsored by CDA, unanimously passed the Assembly Health Committee on April 3, 2019, with favorable amendments to further protect dentists and patients when dental provider agreements are leased by third parties. The bill was introduced to make the network leasing process more transparent. Currently, dentists are not always aware that their existing contract with a health care benefit plan will be transferred or sold as part of a leased network.

Dentistry as part of Medicare benefits

To all our members, in the near future be aware that there is the possibility to incorporate dental benefits within Medicare health services in the near future.



# EPA Amalgam Recycling Rule



## NO SEPARATOR OR NEW OFFICE? MUST INSTALL

All non-exempt practitioners must install a compliant separator by July 14, 2020. Newly opened offices that begin operating on or after July 14, 2017 must be in compliance immediately.

Must file a One-Time Compliance Report within 90 days of installation.



## SEPARATOR ALREADY INSTALLED?

Good until June 14, 2027 or unit needs to be replaced, whichever comes first.

Must file a One-Time Compliance Report by October 12, 2020 or 90 days after transfer of ownership.



## EXEMPT FROM INSTALLING

1) Dentists exclusively practicing in one of these specialties: oral pathology; oral + maxillofacial radiology; oral + maxillofacial surgery; orthodontics; periodontics; prosthodontics.

No further action required.

2) Wastewater discharges from a mobile dental unit or into a private septic system.

No further action required.

3) Dentists who do not place amalgam and do not remove amalgam except in limited emergency or unplanned, unanticipated circumstances, and who certify as such (estimated less than 5%).

Must file a One-Time Compliance Report by October 12, 2020 or 90 days after transfer of ownership. Keep on record for lifetime of practice ownership.

### Installed amalgam separators must comply with the following best management practices:

1. File a One-Time Compliance Report. Keep on record for lifetime of ownership.
2. Monitor according to manufacturer's recommendation.
3. Replace/Repair if malfunctioning according to manufacturer's instructions within 10 business days of discovering defect.
4. Maintain by replacing amalgam retaining cartridge, separator canister or units as directed by manufacturer or when the collection unit reaches capacity, whichever comes first.
5. No use of oxidizing, acidic cleaners when flushing dental unit water lines, chair-side traps and vacuum lines. Therefore no bleach, chlorine, iodine and peroxide cleaning agents that have a pH of lower than 6 or greater than 8.

### Must maintain records on site for 3 years of:

1. Any reports filed
2. A visual inspection log
3. Documentation of any repair or replacement
4. Disposal records
5. Manufacturer's current operating manual for the device in place

# General Meeting Review

*Drs. Bach Le & Baldwin Marchack*



## September 25, 2019 - Implant Complications

Dr. Le is an oral surgeon and Dr. Marchack is a general dentist/prosthodontist, both of whom offered their expertise through their vast experience with implants to explain how best to deal with common implant complications, how to avoid them and how to fix resultant implant problems.

*Harel Simon, DMD*



## October 23, 2019 - Challenges in Implant Dentistry: Provisionals, Passive fit & Loose Restorations – be prepared!

Dr. Simon laid the groundwork for his lecture by reminding attendees that different methods of provisionalization have been developed for various clinical situations and offer numerous advantages. His presentation reviewed the benefits of provisionalization in implant dentistry to the surgical and restorative team. He reviewed the importance of the passive fit of implant frameworks which has been debated for more than a decade. While showing that a microscopic misfit will always exist in the framework interface, he discussed what level of misfit is clinically acceptable. And what practical methods for objective evaluation of implant frameworks are possible. Finally, he reviewed one of the most challenging complications in implant dentistry: a loose implant restoration. As this condition could be a result of multiple different etiologies and might require completely different treatment approaches he reviewed this syndrome and suggested a step by step approach to manage it successfully.

# General Meetings Preview

*Tom Viola, RPh, CCP*

## November 20, 2019 - Pharmacology Declassified: An Overview and Update for Dental Professionals



Tom Viola, R.Ph,C.C.P. draws from his 30 years experience as a pharmacist, dental educator and author to offer a complete overview of the principles of dental pharmacology. Master the art of tailoring dental therapy to patients' existing medical conditions while avoiding potential complications. Attendees will learn to optimize safe, effective, and appropriate pain control to retain and acquire patients.

### A Quick Look at 2020's first half schedule

January 22	Practice Management	Leonard Tau, DDS
February 19	CA Dental Practice Act & Infection Control	Diane Arns, RDH
March 25	Bone Grafting and Implant Success	Alina Krivitsky, DDS & Sam Alawie, MDT
April 22	Adhesive Dentistry	Gerard Kugel, DMD, MS, PhD
May 2 (Hands-On)	3D/Digital Dentistry	August DeOliveira, DDS

Note to SFVDS Members: Watch your emails in December for our annual "Season's Pass" offer: Buy all eight, 2020 CE courses before the start of the January 22, 2020 CE course and only pay for six! This is a \$350 savings versus buying all eight separately.



## HELP WANTED!

Dental Dimensions is in need of an editor to guide and help the dental society assign, edit and put together four, 24 page, quarterly issues for the membership.

The time requirements are minimal:

- A few hours once each year to work with an editorial board to pre-plan four issues per year
- A few hours per issue to make assignments of pre-planned issue articles.
- A few hours per issue to review and edit (together with dental society staff) submitted articles
- A couple of hours to review each issue's final layout prior to printing



Qualifications include:

An avid interest in dentistry, the business of dentistry and members' work-life balance needs.

The ability to attend periodic meetings of the board of directors and its executive committee (in order to remain informed of crucial issues affecting dentistry and the SFVDS).

A good understanding of spelling, grammar, sentence structure, tense use and written English.

Ability to communicate effectively with potential authors

Ability to translate knowledge of members' needs into articles that will satisfy those needs

For more information please contact Andy Ozols, Executive Director at 818.576.0116 or [exec.sfvds@sbcglobal.net](mailto:exec.sfvds@sbcglobal.net)

### Service Animals?



At its September 17, 2019 meeting, the SFVDS Board of Directors approved a new policy prohibiting all animals except legally protected service dogs from being allowed at any SFVDS function. This prohibition applies to all CE meetings, zone meetings, social events and anywhere else where the SFVDS holds an event or provides services to its members.

This new policy was adopted in response to some members who have recently brought their 'emotional support' animals to SFVDS events. 'Emotional support' animals are not protected by law and other members have complained pointing out that we are a professional organization of doctors where non-service animals have no place.

State and federal laws define service animals as dogs (and in rare cases miniature horses under the federal ADA) that are trained to help a specific individual with a disability that limits a major life activity for them.

While there is no legal protection for 'emotional support animals', the dental society has and will always comply with state and federal 'service animal' laws as appropriate and will always make 'reasonable accommodation' for those disabled members who's disability requires it.

The board of directors thanks you for your understanding and compliance with this new policy.

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# The Periodontal - Systemic Connection

The literature in recent years has been replete of how heart disease, diabetes, stroke and pre-term/ low birth weight are showing evidential connection to periodontal disease. However, further continued investigation has also found an association with how the modes of oral pathogens have become associated with other multiple systems affliction. Since periodontitis is usually a response to inflammatory infiltrate, they can become microbial vehicles to other parts of the body which can further involve not only the body's natural defense, but may also release the immune cellular complex entity systems which may be anti-microbial, and can also inflame, act upon and even damage healthy tissues in immediate and distant areas.

Scientists are now investigating that such systemic inroads of inflammation may be a multi-phased factor in complicating many other diseases including arthritis, pancreatic cancer, Alzheimer's disease and rheumatoid arthritis, just to mention a few.

There are several theories that the periodontal inflammation connection may be due to an underlying protective inflammatory response in the body's attempt to overcome the onslaught of the infiltrating pathogen. The inability of the body to prevent certain periodontal disease factors that invade the normal host defense capability, has become recognized due to the pathogen-demonstrated capability to develop their own pockets of colonization which through their numbers alone, enhance invasion and concurrent inflammation. It has also been demonstrated that there may also be a strong immune reaction produced by the antigen content of the microbes which elicits the antibody response which would further allow for the perpetuation of the pathogenic influx.

## ORAL FLORA DISPERSION

While it has been established that oral pathogens can effect other various parts of the body, investigation in a histo-chemical analysis of atherosclerotic plaque in atherosclerotic patients, it was discovered that there was the clear presence of oral bacteria in those plaques and that there appears to be a significant correlation between atherosclerotic bio-markers and the abundance of oral pathogens. Associated hypertension and pathology of cerebral vessels themselves predispose to cerebrovascular stroke incidence.

## OSTEOPOROSIS RELATIVE TO CRESTAL BONE LEVELS

Over the years osteoporosis has become a more public conscious awareness as a result of research provided by the scientific community. Bone loss generally occurs most rapidly in the years following menopause. Recent investigation into any such possible relationship in over a thousand post-menopausal

Heart Disease  
Diabetes  
Osteoporosis  
Respiratory Diseases  
Stroke  
Oral Cancer  
Thyroid/Parathyroid  
Dysfunction  
Kidney Disease

Lung Disease  
Esophageal Cancer  
Rheumatoid Arthritis  
Alzheimer's Disease  
Pancreatitis, Pancreatic  
Cancer  
Pre-Term Birth  
Low-Weight Birth  
Intestinal Disease

Oral Cavity Diseases Increase Risk for Numerous  
Such Listed Above Systemic Conditions

women demonstrated that there was a strong association regarding bone density and crestal bone levels owing to the disruption of calcium-phosphorus utilization and that the relationship was more intense in the higher age groups.

## RENAL FUNCTION AND PERIODONTAL DISEASE LINKAGE

As research has been ongoing for several years, recently a study showed that close to 400 subjects over the age of 70 underwent periodontal examination focusing on assessment of kidney function levels in such patients. Researchers determined that a comparatively weak but significant clear relationship exists between renal failure and periodontal disease.

## ASSOCIATION OF RHEUMATOID ARTHRITIS AND PERIODONTITIS

A study involving the relation of rheumatoid arthritis and periodontitis in more than 100 subjects showed that there were 8-fold increased odds for this relationship when compared to the uninvolved control population, after other factors such as smoking, alcohol, hygiene and age considerations were adjusted for.

## POSSIBLE LINK BETWEEN PERIODONTAL DISEASE & AIRWAY OBSTRUCTION

While studies have shown that the continual flow of periodontal bacteria and their side effects may be factors in cardiovascular disease, diabetes and premature birth weight, there is increasing evidence of additional pulmonary involvement to be considered. This relationship was underscored by a recent study which actually did show a significant association between airway obstruction and periodontal disease. This held true also in former smokers who had no pulmonary compromise previously.

## DIABETES AND INFLUENCE ON BONE HEALTH

It has been established that there is relationship between diabetes mellitus ("uncontrolled" especially) and periodontal hard and soft tissue loss. Specifically, diabetes causes hyperglycemia which in turn increases osteoclast activity resulting in decreased cellular bone healing, decreased collagen formation and stimulating destructive enzyme activity at the same time - all occurring on a simultaneous microscopic, cellular level.

## PERIODONTAL DISEASE AND ORAL CANCER

A recent study by the University of Buffalo and the Roswell Park Cancer Institute investigated the association of periodontitis with tongue cancer and it was found that infective alveolar bone loss was significantly associated with a five plus fold increase in the risk of tongue cancer.



## PREMATURE BIRTH RATES

During pregnancy, the relatively standard physiological and endocrine levels are altered along with increased cardiovascular changes. With the infusion of higher bacterial counts, along with the attendant immune response, it apparently could disrupt normal pregnancy through tissue-vascular damage itself. As such, the negative alteration of the required cardiovascular flow and endocrine levels could, along with other factors, cause a discord of the normal pregnancy cycle.

## PERIODONTAL DISEASE AND GASTRO-INTESTINAL DISEASE

For many decades the health sciences had been baffled by the cause of peptic and gastric ulcers caused by what were thought to be emotional stress-related factors.

Science today, however, has identified a bacterium, *Helicobacter pylorus*, which has been proven to be closely associated with peptic ulcer, chronic gastritis, gastric cancer and mucosa-associated lymphoid tissue lymphoma. It has also been shown that both saliva and dental plaque effectively harbor this organism.

## THE IMPORTANT EFFECT ON HOW SYSTEMIC DISEASES AFFECT THE ORAL ENVIRONMENT

Of significant importance is the reverse aspect of the periodontal-medical connection, whereby many systemic afflictions can show their ill effect on periodontal, tongue, lips, hard and soft palate and all associated oral tissues. These undetected pathogenic processes may include hereditary, endocrine, neo-plastic, dermatological, hematological, arthrological, auto-immune, microbiological, chemical and connective tissue disease factors, and the list goes on. Those undiagnosed systemic problems which can emerge in the oral environment include:

- 1) Dermatological disease – leukoplakia, lichen planus, psoriasis, etc.
  - 2) Endocrine imbalance – diabetes, thyroid-parathyroid dysfunction, etc.
  - 3) Systemic infection – HIV/AIDS, syphilis, tuberculosis, fungal infection, etc.
  - 4) Hormone imbalance – pregnancy, puberty, contraceptives, menopausal desquamation, etc.
  - 5) Genetic factors – suppressed immune factors, blood component irregularities, etc.
  - 6) Neoplasms – lymphomas, leukemia, metastatic lesions, etc.
  - 7) Connective tissue disease – pemphigus, lupus, erythema multiforme, etc.
  - 8) Drug induced lesions – Dilantin, sulfonamides, barbiturates, alcoholism, substance abuse, etc.
  - 9) Allergic reactions – toothpaste, food, dental materials, etc.
- If localized routine treatment for suspicious oral lesions have been ineffective, then communication with the patient's physician for general examination and full blood panels are recommended.

With continual scientific discoveries along these lines, the medical community will also be apprised of these important links not only for health reasons but also for possible future supplemental coverage by medical insurers for the patient's well-being.

By: Richard Benveniste, DDS, MSD



From the historical beginnings of our profession's goals, including the present time, timely diagnosis and timely treatment have always been at the forefront of our existence. Although technological advances are hoped for, it is the strong combined relationship between periodontal-oral health delivery and medical health delivery which provides for the most optimum factor for success for our patients, and for our desired consummate professional integrity.

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Continued on page 12



# The Periodontal - Systemic Connection

## UPDATE TMJ

Over the last several years, it has been found that a greatly increasing number of patients are experiencing chronic painful symptoms of long term suspected life changing migraines, headaches, fibromyalgia and similar neurotropic entities, that are requiring investigation for persistent head, jaw and neck symptoms.

In those patients that had previously been screened and cleared by their medical doctors, when examined thereafter by dental professionals, it was found that over 60% of those symptomatic patients were found to have undiagnosed TMJ involvement and when provided with treatment on just a non-invasive, conservative approach, most all experienced significant degrees of welcomed relief from the many years of painful dysfunction.

In the box, is the list of common TMJ symptoms that have been increasingly described in the literature on a continually growing basis.

Some of the Varying <u>MIGRAINE SYMPTOMS</u> <small>(Recognized by the National Headache Foundation)</small>	Some of the Varying <u>TMJ-TMD SYMPTOMS</u>
Headaches	Headaches
Lightheadedness	Lightheadedness
Dizziness	Dizziness
Neck aches	Neck aches
Jaw pain	Jaw pain
Fatigue	Fatigue
Mental ramifications	Mental ramifications
Throat soresness	Throat soresness
Dental soreness	Dental soreness
Sinus fullness	Sinus fullness
Eye pain	Eye pain
Visual disturbances	Visual disturbances
Numbness/tingling in fingertips	Numbness/tingling in fingertips
<p>Virtually the same basic symptoms. So after seeing the physician, if the migraine patient continually experiences any one of these symptoms, the next obvious step is to consider simple TMJ diagnosis.</p>	

Richard Benveniste, DDS, MSD has been an ADA member for 50+ years. He has been in specialty practice locally for 42 years in San Fernando Valley. He is a past multi-term member and officer of the State Dental Board of California. He is a recipient of the Distinguished Service Citation, California State Dep't. of Consumer Affairs. Presently, and for the past 30 years presenting Continuing Education courses to general practitioners and specialists on Oral Diagnosis, Oral Medicine, Oral Pathology, Latest Treatment Modalities (including periodontal disease therapy), Laser Therapy, Temporomandibular (TMJ) Therapy.

Dr. Benveniste can be reached at (818) 881-7337 for any further inquiries.

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# Another Empowering and Fun Filled SFVDS 8<sup>th</sup> Annual Afternoon Tea Party



We often wonder what our tripartite membership can give us. But sometimes, I'm reminded of the quote from former president JFK. "It's not what your country can do for you, but what you can do for your country." I often find myself wondering about that quote and how I could apply it towards being a member of organized dentistry.

Do I always expect to get something from organized dentistry, or as a dentist who took an oath to serve the public, am I also supposed to serve my profession? When I was asked to serve as your membership committee chair, I took it to heart, just like when I took my oath as a dentist. I am here to serve the best interest of the public and the best interests of my colleagues so they can better serve their patients.

As a dentist, now thinking outside the box after I sold my practice of almost 20 years, being partially retired, raising a family and always multitasking, I find myself advocating for the needs of my fellow dentists. As dentists, we have high expectations to meet from our patients, our peers, society, government and most especially, our families.

So, every year the membership committee along with the board of directors and the SFVDS staff come up with brilliant ideas and activities that are tailored to help encompass the needs of our members in all areas of their careers and lives including business, clinical, physical and social so they can better serve the public.

One of the programs that has been well received during the past eight years is the 'Afternoon Tea Party'. Many of our female members have been able to find connection with their peers, whose struggle to successfully juggle their roles as female business entrepreneurs while maintaining a desired work-life balance, has become more common and apparent.

By: Anette Masters, DDS,  
SFVDS Membership Chair



The Afternoon Tea Party which was first thought out to be just a social gathering of female dentists to listen to inspirational speakers and gather information, has now become a way to gain friends, continue to connect and share experiences that help us build common ground.

Over the course of the past eight years, this event has been a continuing part of the SFVDS interaction between female dentists all the way from New Jersey and New York, to the northern and southern parts of California, as well as special guests like the ADA past-president, Dr. Maxine Feinberg, ADA Executive Director, Dr. Kathy O'Loughlin, past CDA president, Lindsey Robinson and ADA/CDA past president, Carol Summerhays.

The Afternoon Tea has also been duplicated in Kentucky and cities like San Diego and San Gabriel. This love has spread out all over the United State as we continue to encourage "womens' empowerment."

This year, we heard from the tea event's founder, our own Dr. Karin Irani, who through it all continues to achieve and pursue her goal not only as a dentist leader, but her determination to achieve her law degree.

Meanwhile, Dr. Maranga of New York, not only has become a leader in the New York Society of Endodontics but at the American Dental Association as well. Her accomplishments have earned her respect with her peers from all over the US.

*Continued on page 14*



## Another Empowering and Fun Filled SFVDS 8<sup>th</sup> Annual Afternoon Tea Party

Best of all, our keynote speaker, received a well-deserved round of applause after sharing her inspiring stories and experiences. Her approach on how she managed to handle her struggles as a dentist, employer, a mother and minority made it very relatable. She joked about her height as one of the things that made her adversaries think twice. But as we listened to her speech, we realized that the kitten in front of them was a lioness whose advice was not to allow ourselves to stay on the sidelines but to be fearless and to learn to tackle things head on and with determination. She roared like a lion and from deep within we heard and understood the inner strength that comes from each and every one of us. It was like a day of reckoning for those of us who became complacent with our day to day activity as a dentists and have never really tried to reach within to harness our hidden powers and potentials.

The day would not have been complete without the gathering of these great minds and the informational presentation from Mercedes Huizar from Crest OralB, and a heart-warming address from the Senior Vice President of Care Credit, Bete Johnson. As always, our sponsors were well received by our female colleagues as they continue to be a part of women empowerment as they themselves are women of rank who helped make their companies as successful as they are.

To end our tea, Dr. Khanh Le made sure that we left with a quiet, decompressed spirit thru a Reiki experience.

This tea would have not been possible without the help of our the committee members, Dr's Shokri, Oboh, Peterson, Hopkins, Cohen, Leung and the special participation of our president, Dr. Mahfouz Gereis. Lastly, of course, the amazing support of our staff Wendy and Bella, and the guidance of our executive director, Andy.

We look forward to our '9th Annual Afternoon Tea' and we hope that you will join us. For now, enjoy the pictures!



(top) Afternoon Tea Party Committee members, L-R, Drs. Masters, Le, Oboh, Shokri, Cohen and Hopkins.



(left) R-L, Mercedes Huizar (Crest/Oral B), Anette Masters, DDS (SFVDS Membership Chair), Bete Johnson (Care Credit Senior VP)

Dental students Summer Andrada, Vicky Bartolome and Morgan Franco



L-R, Drs. Arlene Lee (LADS) and Emily LeTran (speaker)



L-R, Dr. Leyla Leeds accepts her gold necklace raffle prize from Dr. Anette Masters



L-R, Dr. Masters presents a matching necklace/bracelet raffle prize to Dr. Cohen





# List of SFVDS Periodontist Members

Abelson Michael DDS	25880 Tournament Rd Ste 108	Valencia CA	91355-2383	(661) 254-9640	(661) 254-9642
Benarroch Moshe DMD	27421 Tourney Rd	Valencia CA	91355-2190	(661) 222-7762	(661) 799-0168
Benia Todd DDS	18250 Roscoe Blvd Ste 230	Northridge CA	91325-4269	(323) 510-9708	(323) 536-9362
Benveniste Richard DDS	19231 Victory Blvd Ste 256	Reseda CA	91335-6347	(818) 881-7337	(818) 881-6183
Esmailian LariSoma DDS	somalari@gmail.com				
Exler Steven DDS	16311 Ventura Blvd Ste 1005	Encino CA	91436-4344	(818) 907-1780	(818) 501-0467
Fingerman Gordon DMD	18740 Ventura Blvd Ste 103	Tarzana CA	91356-6301	(818) 705-3232	(818) 705-3260
Grasu Rodica DDS	16055 Ventura Blvd Ste 405	Encino CA	91436-2608	(818) 990-5090	(818) 990-5098
Green Gary DDS	16133 Ventura Blvd Ste 1040	Encino CA	91436-2423	(818) 995-0294	(818) 995-7549
Gross Marc DDS	5400 Balboa Blvd Ste 315	Encino CA	91316-5229	(818) 990-5220	(818) 990-5621
Hanasab Homan DDS	7239 Van Nuys Blvd # 6	Van Nuys CA	91405-5863	(818) 785-2424	
Hendry Tyler DDS	411 N Central Ave Ste 220	Glendale CA	91203-2020	(818) 240-4555	(818) 240-0419
Henick Bertram DDS	26560 Agoura Rd Ste 102	Calabasas CA	91302-1949	(818) 871-9416	(818) 865-2079
Hoang Taylor DDS	3808 W Riverside Dr Ste 204	Burbank CA	91505-4339	(818) 842-6162	(818) 842-2052
Hosn Kalid DDS		Glendale CA	91206-5320	(818) 813-3337	
Imberman Michael DMD	18425 Burbank Blvd Ste 709	Tarzana CA	91356-6669	(818) 345-5300	(818) 345-3863
Isaacs David DDS	4350 Woodman Ave	Sherman Oaks CA	91423-3031	(818) 981-4508	(818) 981-4564
Khorsandi S DDS	4521 Sherman Oaks Ave Ste 201	Sherman Oaks CA	91403-3807	(818) 981-4867	(818) 960-0146
Lascoe Ronald DMD	3808 W Riverside Dr Ste 204	Burbank CA	91505-4339	(818) 842-6162	(818) 842-2052
Levine David DDS	3808 W Riverside Dr Ste 305	Burbank CA	91505-4339	(818) 558-7454	(818) 558-1782
Levy Ori DDS	olevydds@gmail.com				
Matian Fariborz DDS	19900 Ventura Blvd 2nd. Fl.	Woodland Hills CA	91364-2689	(818) 914-7484	(818) 914-7489
Merin Robert DDS	6342 Fallbrook Ave Ste 101	Woodland Hills CA	91367-1613	(818) 887-7772	(818) 887-2231
Naim Sam DDS	16661 Ventura Blvd Ste 308	Encino CA	91436-1919	(818) 336-1120	(818) 332-4312
Nakashyan Vahe DDS	3808 W Riverside Dr	Burbank CA	91505-4325	(818) 842-6162	
Niver Franklin DMD	16311 Ventura Blvd Ste 1110	Encino CA	91436-4354	(818) 788-6600	(818) 788-2905
Okui Matthew DDS	16055 Ventura Blvd Ste 820	Encino CA	91436-2610	(818) 990-5222	(818) 990-4222
Parham Sohail DDS	4955 Van Nuys Blvd	Sherman Oaks CA	91403-1801	(818) 990-5795	(818) 990-5795
Penhaskashi Alfred DDS	5363 Balboa Blvd Ste 226	Encino CA	91316-2822	(818) 788-7091	(818) 788-8876
Safarian Androush DDS	1000 N Central Ave Ste 250	Glendale CA	91202-2912	(818) 241-6860	(818) 241-3810
Saghizadeh Mahasti DDS	12423 Ventura Blvd	Studio City CA	91604-2407	(818) 760-0333	(818) 760-4076
Saifee Huzefa DDS				(818) 462-6968	
Sakhai Sean DDS	6342 Fallbrook Ave Ste 101	Woodland Hills CA	91367-1613	(818) 887-7772	
Sin Elisa DDS		Woodland Hills CA	91364-5620	(617) 620-0873	
Singh Shalini DDS	44443 16th St W #103	Lancaster CA	93534-2840	(661) 723-9414	(661) 723-5686
Sobel Robert DDS	16311 Ventura Blvd Ste 1110	Encino CA	91436-4354	(818) 788-6600	(818) 788-2905
Solanki Vivek DDS	22287 Mulholland Hwy # 73	Calabasas CA	91302-5157	(352) 216-4924	
Tanavoli Sara DDS	6325 Topanga Canyon Blvd Ste 202	Woodland Hills CA	91367-2015	(818) 606-7871	
Wasserstein Jack DDS	27450 Tourney Rd Ste 100	Valencia CA	91355-1829	(661) 254-8484	
Yashar-Matian Aida DDS	19900 Ventura Blvd 2nd. Fl.	Woodland Hills CA	91364-2689	(818) 914-7484	(818) 914-7489



# Smile Armenia

By: Glowe Chang, BA, RDH

The Smile Armenia mission is to improve the quality of dental health of the children of Armenia and to develop a Dental Hygiene curriculum for future licensed Dental Hygienists. This year Smile Armenia will reach out to lower division schools in five different rural villages and treat children in a three-chair mobile clinic. Since Armenia has no dental hygienists and dentistry is extremely limited in the rural areas, they may be the first dental team that some of the children will have seen.

Smile Armenia is the brain child of Seta Kabaklian-Dembekjian, RDH. This September, she will return to Yerevan, Armenia on her second annual trip. Joining her this year are Mamie Kosaka, RDH and Glowe Chang, RDH. The three met as classmates in the West Los Angeles Dental Hygiene Program, graduating in 1981 and continued their friendship as they worked in the San Fernando and Santa Clarita Valleys.

Decay is rampant and Kabaklian-Dembekjian will be teaching parents the preventative approach with diet, plaque control and fluoride. The ability to teach in their local dialect will be key to making headway in this population. Kosaka and Chang will be in the mobile clinic with two assistants/translators to document each child's information. The plan is to treat each child by: charting their plaque index after disclosing, noting caries, scaling, polishing, and applying fluoride varnish. Smile Armenia hopes that with continued regular trips, more families can be reached and dental health can be improved with education and follow up.

Smile Armenia is partnered with the Armenia Christian Medical Association (ACMA). They are



supplying the mobile clinic and the Armenian Relief and Development Association (ARDA) is supporting us with accommodations in Yerevan and transportation in Armenia. Our third partner, Children of Armenia Foundation (COAF), based in New York, has paved the way for us to enter some of the school systems and will provide a volunteer dentist for the third mobile chair at those schools. They have already created several "Brushdromes" where the school children brush daily after lunch.

In addition, Kabaklian-Dembekjian will be a featured speaker at the ACMA annual medical-dental conference running concurrently in Armenia, covering "Pathology and the Link Between Mouth and Body" and "Prevention and Ergonomics of Administration of Local Anesthesia". This strong relationship will provide more outreach in Armenia.

Our thanks to Mehran Abbassian DDS, past president of SFVDS and its foundation, who connected us with the Executive Director Andy Ozols, who immediately collected much needed critical supplies: toothbrushes, paste, floss, bibs, gauze, cotton rolls, masks, saliva ejectors, and so much more. Our heartfelt thanks to the support we have received from The San Fernando Valley Dental Society Foundation. This generous donation of supplies gives us more opportunities to serve the children in Armenia.



Mamie Kosaka,  
RDH, BS  
with one of her  
young patients



L-R Mamie Kosaka, RDH,BS, Seta Kaaklian, RDH,BS,  
and Glowee Chang, RDH

For more information or to join  
Smile Armenia, Kabaklian-Dembekjian  
can be contacted at  
[Setaforarmenia@gmail.com](mailto:Setaforarmenia@gmail.com).



Dr. Lusine Sahakyan



After lunch in the brushrdromes





# Top tax strategies for the end of the year 2019



After completing one of the most challenging and exciting tax seasons due to all the new changes of the Tax Cuts and Jobs Act (TCJA), that took effect for tax years after 2018, we continue our assignment of education of our clients in the dental industry about the steps to take between now and the end of 2019 to improve their position to maximize their tax benefits and minimize their liability under the new law.

This article intends to assist dental professionals take the proper steps during the year to avoid any surprises and develop a systemic plan to enhance their financial position.

Please note, this is just for general information purposes only. Please consult your own CPA before taking any steps based on this article.

Proper and timely tax planning will assist you to be on top of compliance and to take advantage of legal opportunities that are provided by the tax code for dental professionals to elevate their businesses and financial positions. Some of these tax planning goals include:

- a. Reduce your present year's tax liability.
- b. Defer the present year's tax liability to future years.
- c. Reduce any potential future years' tax liabilities.
- d. Maximize tax savings from allowable deductions.
- e. Minimize the effect of the AMT on this year's tax liability.
- f. Maximize tax savings by taking advantage of available tax credits.
- g. Maximize the amount of wealth that stays in your family.
- h. Minimize capital gains tax.
- i. Minimize the Medicare Contribution Tax on net investment income.
- j. Avoid penalties for underpayment of estimated taxes.
- k. Manage your cash flow by projecting when tax payments will be required.
- l. Minimize potential future estate taxes to maximize the amount left to your beneficiaries and/or charities (rather

than the government).

m. Maximize the amount of money you will have available to fund your children's education as well as your retirement.

The new tax code provides some areas to specifically look for potential improvements include:

- a. Pass-through status of your business: If a small-business client is eligible for the 20 percent deduction for pass-through entities, timely planning and review can determine whether there are any changes in the compensation structure they can make that will maximize the deduction.

The deduction will be claimed on individual owner's tax return Form 1040 and is commonly being referred to as the Section 199A deduction (referencing the Internal Revenue Code), or the 20% qualified business income deduction (QBID).

Business income is eligible if the company is structured as a sole proprietorship, a partnership, or an S-corporation. C corporations are not eligible to take this deduction. Personal taxable income must be less than \$315,000 for a married filer or \$157,500 for a single filer to avoid the deduction being phased out. The deduction is fully phased out at taxable income of \$415,000 for a married filer and \$207,500 for a single filer.

The QBI deduction can also be claimed for up to 20% of income from qualified REIT dividends and 20% of qualified income from publicly-traded partnerships (PTPs). So the deduction can potentially be a big tax saver.

Some top strategies for dental practice owners to consider to qualify for this exclusion are:

- a. Increase retirement plan contributions to reduce taxable income.
- b. Employ your children in your practice and pay them the highest reasonable rate for their services.
- c. Review personal & business expenses and determine if you are correctly deducting all applicable business expenses such as meals, travel, CE, phone, health insurance and auto.
- d. Use new limits of Section 179 and Bonus depreciation and review all depreciation schedules and opportunities to





By Fazel Mostashari, DentalCPA  
(SoCalDentalCPA.Com) and Cecilia Chen, Esq.,  
Dental Attorney (www.practiceatt.com).

keep income under the deduction thresholds.

e. Establish and fund a Health Savings Account (HSA). Coverage under an HSA can provide tax-deductible contributions

f. Recapturing AMT : With the new higher income limits for individuals exposed to the Alternative Minimum Tax, more taxpayers will have the opportunity to recapture the AMT paid in prior years. Tax professionals can calculate prior years' AMT credit now and the taxpayers affected can reduce their withholding and enjoy the benefit early.

g. Review your investments and utilize loss harvesting: Sell stocks that may produce a loss if it's consistent with your financial plan.

h. Check out 'reasonable comp' rules: Make sure an S corporation owner's salary meets the "reasonable compensation" standard.

i. Get some big wheels: Buy an SUV or truck that is heavier than 6,000 pounds for a business to take bonus depreciation up to 100 percent of the cost of the vehicle.

### Get A Second Opinion On Your Taxes

Having a second set of eyes take a look at your tax situation can often uncover tax deductions your regular CPA or tax preparer may have missed, especially if the person helping you is not a dental specific CPA or not a CPA at all. Unfortunately, too many times we see that financial statements and tax returns done by so called "low-priced accountant services" lead to financial damages that keep their effects for many years to come.

## Estate Planning for Maximum Income Tax Benefit

Although the lifetime unified credit has doubled (\$11.18 million in 2018), there are still many reasons to consider estate planning under the new tax reform. The larger exemption is set to sunset in 2025. There is optimism that the credit would not be reduced, but there is always concern of the potential for claw back or other changes in the estate tax rules.

### 1. Use Either the Lifetime Gift and Estate or the GST Tax Exemption to Your Advantage

- Under federal law, gifts made during an individual's lifetime which exceed the "lifetime gift and estate tax exemp-

tion" amount are currently taxed at the rate of 40%.

- Similar to the lifetime exemption, a tax of 40% is assessed on transfers (whether made directly or through a trust) to grandchildren, other family members, or non-related individuals no younger than 37.5 years from the gift-transferor, which are in excess of the generation-skipping transfer tax exemption ("GST") amount.

- The GST is independent from the lifetime gift and estate tax exemption –i.e. it is an additional tax.

- Per the TCJA, both the lifetime gift and estate tax and the GST exemption amounts doubled from \$5 million to \$10 million, and are adjusted annually for inflation.

- Beginning 1/1/2019, each of the exemptions will increase even further from last year's \$11.18 million to \$11.4 million for individuals and from \$22.4 million to \$22.8 million for married persons, again, based on the inflation adjustment.

- These increases mean that persons who have already expended the lifetime gift and estate tax exemption amount are now able to gift up to an extra \$220,000 without triggering the federal gift tax.

- Note also that certain transfers or donations –such as qualified medical or tuition expenses or donations to charitable organizations –also are excluded from taxation and are not counted for purposes of either exemption.

- Nevertheless, assuming that Congress takes no action to make this legislation permanent, the benefits associated with the exemption increases are only temporarily available, as both exemption amounts are currently slated to expire on 1/1/2026.

- Once the exemption increases expire, the exemption amounts will return back to the \$5 million limit (which will still be adjusted for inflation).

- Though there was valid concern that the benefits of the exemption increase would be limited to those taxable gifts made by an individual who died prior to the 1/1/2026 expiration date, the IRS recently clarified that there would be no "clawback" of taxpayer gifts made before the end of 2025, whether or not the taxpayer later dies at a time when the lifetime exemption amount is decreased.

- Through careful planning, you can make use of this temporary increase while it is still in effect.

*Continued on page 20*





- Consulting with your advisor is recommended to not only determine which assets you should gift in order to maximize the benefit to your estate, but to also assess how state law and state estate tax exemptions impact your estate.

## 2. Use the Increased Gift Tax Exemption

- Starting in 2018, the annual gift tax exemption increased from \$14,000 to \$15,000 per recipient
- For married couples who are eligible to give “split gifts” --i.e. a gift given by the taxpayer with the consent of their spouse --the exemption has doubled to \$30,000 per recipient.
- Note also that while spouses are able to transfer an unlimited amount of money or property to each other either during their lifetime or at one spouse’s death through the “unlimited marital deduction,” this unlimited deduction is only applicable to spouses who are both U.S. citizens.
- However, the amount that one U.S. citizen spouse may gift to their non-U.S. citizen spouse has increased from \$152,000 in 2018 to \$155,000 for 2019.
- The annual gift tax exemption works in tandem with the lifetime gift tax exemption because gifts made at or below the annual gift tax exemption amount are not counted against an individual’s lifetime estate tax exemption.
- For example, if a married couple gifts \$30,000 to each of their three children, the couple could effectively transfer those funds to their children without either (a) triggering a tax on the \$90,000 gifts or (b) having the \$90,000 reduce their lifetime estate tax exemption.
- Over time, by making annual tax-exempt gifts, the taxpayer is effectively able to reduce the size of his or her “taxable” estate while also excluding the amount of the gift from being credited towards the taxpayer’s total lifetime gift exemption.

## 3. Consider Modifying an Existing California Trust through “Decanting”

- Though one of the advantages of establishing an irrevocable trust is that the assets it holds are not included in the grantor’s estate for tax purposes, a disadvantage was that the irrevocable trust could not be modified once established.

- Thus, if a more beneficial rule or regulation affecting the assets of an irrevocable trust went into effect after the trust’s creation, that trust could not be modified --at least not without considerable difficulty --to properly address the impact of the new legal changes on its assets.

- To illustrate, prior to this legislation, irrevocable trusts could only be modified through (a) the consent of both the settlor and all the trust’s beneficiaries or (b) a court proceeding.

- Now, as of 1/1/2019, CA’s Uniform Trust Decanting Act is in effect, which allows for the modification of certain existing irrevocable trusts and revocable trusts which required either the consent of the trustee or a person with an adverse interest to the trustor’s interest to modify the trust.

- “Decanting” refers to the process of “pouring” the assets from an existing trust into a new trust or trusts, which typically features more favorable terms than the original trust.

- Note however, that neither charitable trusts nor trusts which specifically forbid decanting can be “decanted” under this Act.

- While certain rules and restrictions apply --such as the requirement to give notice to the beneficiaries --the trustee’s newly permitted ability to “decant” an existing trust provides an opportunity for those with existing trusts to modify their trusts using this method.

- Given that there are limitations as to how the trustee can employ decanting, it’s essential to seek the advice of an attorney to determine how to do so advantageously.

## Conclusion

Even if you think estate planning isn’t for you, if you have younger children, own real property, or have any assets, a properly drafted estate plan will not only help you avoid probate, but also ensure that your assets are protected so they may be enjoyed by your future generations.

Moreover, these recent changes could affect your existing estate plan, which should be reviewed by your advisor to either confirm that your estate plan will continue to achieve your desired goals or if you need to modify your estate plan to address and account for the newly enacted tax and estate laws.

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*Fazel Mostashari, CPA, is married to a dentist and specializes in the dental field and is a full-service financial firm providing practice optimization, personal assistance, and tax and financial guidance for dental professionals’ needs. He can be reached at 818.884.2549 or [fazel.mostashari@gmail.com](mailto:fazel.mostashari@gmail.com)*

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*Ms. Chen’s extensive experience as a corporate attorney has assisted her immensely in her practice serving clients in the healthcare industry, which include dentists, physicians, hospice care and assisted nursing facilities throughout California. She can be reached at 714.709.4000*



## Have you been *SPOOFED????*

The Dental Board of California (Board) has learned that scam artists posing as Board staff are calling California licensees as part of an attempted fraud scheme. The callers identify themselves as Board staff members or investigators, notify the licensee that they are under investigation for drug trafficking by the Board and other entities including local police, the Drug Enforcement Agency (DEA), and/or the FBI, and demand money.

The callers may be “spoofing” the Board’s telephone numbers to make the calls appear to be coming from the Board. Board staff members or investigators will never contact licensees demanding money or payment of any form without conducting an official investigation or inquiry. If you receive such a call, please refuse the demand for payment.

## BUSINESS EMAIL IMPOSTERS

Please also consider the following:

- If you receive a call, contact the Board directly at (877) 729-7789 or (916) 263-2300, or via email to [Dentalboard@dca.ca.gov](mailto:Dentalboard@dca.ca.gov), to inquire if an official investigation is being conducted.
- If the caller is stating they are from DEA, report the scam using the DEA’s Extortion Scam online reporting form.
- If the phone number of the caller appears to be the Board telephone number, it is recommended that you submit an online complaint with the Federal Communications Commissions (FCC) using the FCC’s Consumer Complaint form or contacting the Board, so it can provide the information to the FCC.
- Do not disclose any personal information, i.e. social security numbers, date of births, or credit / debit card numbers.

## What’s in a name?

*Reprinted with permission from  
California Dental Association*

A patient’s first impression of a dental practice can be influenced by the practice name. Use a geographical location as part of a practice name and potential patients can tell if the practice is near them. Use “Smile” or “Happy” in the practice name and patients can expect an upbeat practice.

California law requires a dental practice name, whether or not it is incorporated, include the family name or names of the practice owner(s) or past owner. A dentist, dental partnership or dental corporation wanting to operate under a name that does not include the family name of a licensed owner must obtain a dental board fictitious name permit and register the name with the county clerk.

The fictitious name permit is address-specific and is nontransferable. The practice must be wholly owned and operated by the permit holders and the location must be owned or leased by the permit holders. The permit is subject to revocation if practice changes locations or status, such as a change from individual owner to a corporation.

The fictitious name must include at least the family name of a dentist owner or the name(s) of one or more of the past, present or prospective associates, partners, shareholders or members of the group as well as one of the following designations: “dental group,” “dental practice” or “dental office.” The name may include descriptive language such as regional or geographic references and may denote a practice area as long as it is truthful and not misleading. The fictitious name may be more than one line, and if so, the lines do not have to be of equal font size.

A dentist should search the Department of Consumer Affairs database and the county database, if available, to determine if the fictitious name is available.

### EXAMPLES:

Westeros Orthodontic and Dental Care  
Dental Practice of Dr. Arya Stark

Gotham Dental Center  
Drs. Wayne, Grayson and Gordon

1740 Dental  
Dental Group of Claire Fraser, DMD Inc.

Valley Periodontics  
N. Singh Dental Corporation

The permit application can be found on the dental board website, [dbc.ca.gov](http://dbc.ca.gov). The application fee is \$650 (or \$325 if associated dental license renews in less than one year) and permit renewal fee is \$325.

A dentist who seeks to disassociate from a fictitious name permit or to cancel the permit must file a separate application form that can be found on the dental board website.

A dental practice operating with a fictitious name also must file a fictitious business statement with the county where the practice is located. Check the website of your county for more information.



# Antelope Valley *Report*

by: Michael Rabizadeh, DDS



Snow Orthodontics hosts CPR classes in the Los Angeles area. Eric Sarkasian is the Instructor and provides these services for the SFVDS. CPR classes offer 3 CE credits and a Red Cross BLS Certificate. The cost for the class is \$45 per person.

Dates and times do vary so please call Bella at the SFVDS central office, Monday-Friday 9 am -5 pm @ (818) 576-0116 or email her @ bella.sfvds@sbcglobal.net.

On August 27, 2019 Snow Orthodontics provided a California Dental Law Class for the Antelope Valley area which had 46 dental Professionals attend. Bill Holloway from the Shield was the presenter. 2 CE credits were given for the class.

## Other past events

**October 9, 2019**

Dr. Gib Snow hosted an RDH Seminar.

**October 17, 2019**

Sexual Harassment Prevention class with SFVDS in Lancaster Dental Education Seminar

**October 24, 2019**

The Lost Art of Full-Effort, Thoughtful Endodontic Treatment.  
Speaker: Dr. Terry Pannkuk

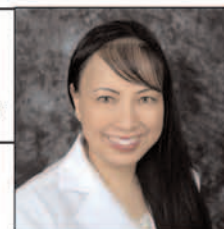
## Coming up

December 5, 2019

Hurts so ... Good! Management of Acute  
Dental Pain and Appropriate Opioid  
Prescribing  
Speaker: Tom Viola, R Ph.

# Glendale-Foothills REPORT

By: Chi Leung, DDS



Time passes with just the blink of an eye. The summer of 2019 disappeared quickly (as vacation time usually does) and the last quarter of the year is almost half over. As a result, dental society activity in the Glendale/Foothill area itself was slow since the summer issue.

However, I was pleased to see many familiar faces during the 8th annual woman's tea party on September 21, 2019, held at the Porter Valley Country Club. Their warm, bright and beautiful smiles gave me great comfort and encouragement, especially from those who attended from the Glendale/Foothills area.

Since there was no specific activity in the Glendale/Foothills area, I will use this space to think out loud a little, about a personal challenge that I have accepted for 2020: President of the San Fernando Valley Dental Society.

As the president-elect in 2019, I realize that I have 'big shoes to fill' in 2020, as Dr. Mahfouz Gereis has done an excellent job leading the dental society this year. I am try-

ing to educate myself and prepare myself to be ready for this important responsibility, which will soon be on my shoulders. With a new strategic plan and momentum established by Dr. Gereis' leadership, my job will be a little easier, but will still be a huge challenge for me.

Because we are a membership organization, I will always welcome members' individual contact and suggestions. In fact, I would like to encourage everyone to get just a little more involved in our events, CE meetings, committee activities and in helping to recruit more of your non-member dentist friends into membership. I also strongly encourage our new dentist members (in practice 10 years or less) to become more engaged with the dental society as the future is yours and I would like to see the dental society prepared to meet your needs, and those of future generations who will follow you.

Please feel free to contact me through the central office with any suggestions or if I can be of service to you as I enter my year of president.



# Welcome New Members

Milad Zadfar, DDS  
9929 Topanga Canyon Blvd.  
Chatsworth, CA 91311  
818-818-5123  
General  
USC, 2016

Daniel Adelpour, DDS  
General  
USC, 2019

Adrien Hamedi-Sangsari, DDS  
General, UCLA, 2015  
University of Pennsylvania,  
Orthodontics, 2019

Remond Nowry, DDS  
8725 Woodman Ave Suite B  
Arleta, CA 91331  
818-891-6670  
General  
USC, 1991

Stefan Filip, DDS  
General  
USC, 2016

Oliver Kamari-Bidkorpheh, DDS  
19366 Soledad Canyon Rd.  
Canyon Country, CA 91351  
818-634-7285  
General  
UCLA, 2014

Sam Rohani, DDS  
General  
Missouri School of Dentistry & Oral Health, 2019  
Samantha Kirzner, DMD  
General  
Nova Southeastern University, 2016

Brian Tsai, DDS  
5620 Wilbur Ave Ste. 102  
Tarzana, CA 91356  
818-881-1261  
General  
USC, 2019

Huzefa Saiffee, DDS  
General, UCLA, 2015  
Periodontics, Harvard School of Medicine, 2019

Parnaz Mansouri, DDS  
16550 Ventura Blvd. Ste. 322  
Encino, CA 91436  
818-849-5457  
General  
UCLA, 2004

Sason Dardashti, DDS  
2601 N Ventura Rd.  
Port Hueneme, CA 93041  
805-985-6966  
General  
University of Colorado, 2019

Arin Hartounian, DMD  
General  
University of Nevada, 2019

Jeyanthi Bhaheetharan, DDS  
755 W Rancho Vista Blvd.  
Palmdale, CA 93551  
661-794-6566  
General  
Indiana University, 2018

Mostafa Mirzabagi, DDS  
2311 Ventura Blvd. Ste. 201  
Woodland Hills, CA 91364  
818-591-0945  
General, Tehran University, 1964  
Orthodontics, Loyola, 1973

Thomas Bordieri, DDS  
General  
Roseman University of Health Sciences, UT, 2019

Pariksha Gunnala, DDS  
20969 Ventura Blvd. Ste. 7  
Woodland Hills, CA 91364  
818-347-3971  
General  
USC, 2010

Brandon Villar, DDS  
General  
Arizona School of Dentistry, 2019

## HELP WANTED!

Dental Dimensions is in need of an editor to guide and help the dental society assign, edit and put together four, 24 page, quarterly issues for the membership.

The time requirements are minimal:

- A few hours once each year to work with an editorial board to pre-plan four issues per year
- A few hours per issue to make assignments of pre-planned issue articles.
- A few hours per issue to review and edit (together with dental society staff) submitted articles
- A couple of hours to review each issue's final layout prior to printing

Qualifications include:

An avid interest in dentistry, the business of dentistry and members' work-life balance needs.

The ability to attend periodic meetings of the board of directors and its executive committee (in order to remain informed of crucial issues affecting dentistry and the SFVDS).

A good understanding of spelling, grammar, sentence structure, tense use and written English.

Ability to communicate effectively with potential authors

Ability to translate knowledge of members' needs into articles that will satisfy those needs

For more information please contact Andy Ozols, Executive Director at 818.576.0116 or [exec.sfdds@sbcglobal.net](mailto:exec.sfdds@sbcglobal.net)

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Lan Su, DMD, PhD, Diplomate, American Board of Oral&Maxillofacial Pathology  
Diplomate, American Board of Orofacial Pain  
31332 Via Colinas, Suite 109 Westlake Village, CA 91362 Telephone: 818 865 1039  
[www.oralpathmed.com](http://www.oralpathmed.com)

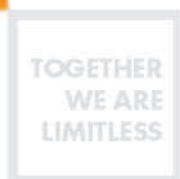


San Fernando Valley Dental Society  
9205 Alabama Ave., Suite B  
Chatsworth, CA 91311

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**[cda.org/refer](http://cda.org/refer)**.