

AAOMS TODAY



March/April 2022
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AAOMS TODAY

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Volume 20, Issue 2

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to attend '22 Annual Meeting*

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result of the COVID-19 pandemic – it
will be **better**.*

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2021: Awards of Excellence for Writing
2019: Grand Award winner in Magazine category
2018: Most Improved Magazine



2020: Silver Award for Association Magazine



2021: Gold Award
2020: Merit Award
2019: Gold Award
2018: Bronze Award



2021: Gold Award for Article Writing
2020: Platinum Award for Magazine
2019: Platinum Awards for Magazine and Overall Writing



2019: Silver Scroll Division I winner
2018: Newsletter Division I winner



2021: Platinum Awards for Feature Articles and Gold Awards for Association Magazine and Cover Design
2020: Platinum Award for Feature Article and Gold Award for Association Magazine
2019: Platinum Award for Association Magazine



J. David Johnson Jr., DDS
AAOMS President

“Many members have asked me how they can get involved with AAOMS. I tell each of them there are dozens of ways – as a volunteer – to take an active role, provide support, advance our mission and promote the specialty.”

IN MY VIEW

Words to live by –

For 104 years, the accomplishments and progress of our Association can be credited to one essential element: our member volunteers.

The preeminent volunteerism example is found in the story of our organization’s humble beginnings in 1918 when Dr. Meniffee Howard single-handedly organized a letter-writing campaign to convince prominent exodontists across the United States to meet prior to the start of that year’s National Dental Association convention.

During the resultant meeting, 29 doctor volunteers founded the American Society of Exodontists. Today (after several name changes), AAOMS has more than 9,000 oral and maxillofacial surgeon fellows and members.

AAOMS is only as strong as its volunteers who altruistically donate their time and diverse talents to facilitate the AAOMS Strategic Plan. In 2022, we are honoring our volunteers throughout the year, culminating at the Annual Meeting in New Orleans when we celebrate the theme of Volunteerism: Individuals United in Service.

Many members have asked me how they can get involved with AAOMS. I tell each of them there are myriad ways – as a volunteer – to take an active role, provide support, advance our mission and promote the specialty. Here’s a sampling:

Advocacy

- Download the VoterVoice app and select “American Association of Oral and Maxillofacial Surgeons” to easily send letters to your representatives.
- Join the OMS Action Network to help further our legislative and regulatory goals at AAOMS.org/Action.
- Self-report anesthesia incidents through the Dental Anesthesia Incident Reporting System (DAIRS), an anonymous system used to collect and analyze submissions to improve the quality of dental anesthesia care.
- Join your colleagues to advocate for legislative priorities at Day on the Hill.

Governance

- Express your interest to volunteer on one of AAOMS’s 20-plus committees, special committees and task forces by sending a letter of interest and CV to governance@aaoms.org.
- Provide feedback about resolutions coming before the House of Delegates during summer caucus meetings.
- Attend the Reference Committee hearings at the House of Delegates to hear reports on important issues and ask questions.



Volunteerism: Individuals United in Service

Research

- Become a reviewer for the *Journal of Oral and Maxillofacial Surgery*. Email your CV, summary of qualifications and areas of interest to joms@aaoms.org.
- Participate in the AAOMS Anesthesia Safety Study via the OMS Quality Outcomes Registry (OMSQOR®) to help measure the safety of the OMS anesthesia team model. Email omsqor@aaoms.org for information.
- Take surveys when they arrive in your inbox – whether our triennial membership survey, opioid prescribing survey or deep dives into education, communications, etc.

Communications

- Read AAOMS print publications and emails! They provide up-to-date information on programs, events and issues.
- Join an AAOMS Connect online community featuring discussion forums, private messaging and Clinical and Special Interest Groups.
- Display the AAOMS logo on your website and practice materials. Email communications@aaoms.org to request the digital file.
- Share social media posts from the four public-facing AAOMS accounts on your practice accounts.
- Follow AAOMS on LinkedIn to be notified of events, programs and the latest journal articles.
- Download and use – at no cost – any of the Informational Campaign's videos, infographics, ads and fliers.
- Help promote National Facial Protection Month and Oral Cancer Awareness Month each April.

Education and meetings

- Present as a session or webinar speaker to share your expertise and research. Visit aaoms.org/speakers for current speaking opportunities and more information.
- Take the time to visit the Exhibit Hall at the Annual Meeting and Dental Implant Conference and interact with exhibitors. This helps to demonstrate the value of the exhibitor's decision to attend our meetings.

Professional recognition

- Pursue Fellowship in the American College of Surgeons. Applications from both single-degree and dual-degree

OMs are considered on an annual basis. With a growing membership, we now have an OMS Advisory Council and a seat on the College's Board of Governors.

- Nominate a member for one of the many awards presented during the Awards Ceremony at the Annual Meeting.

Component Societies

- Become involved in your state OMS society. Many definitive decisions, policies, rules and legislation that are critical to our specialty occur at the state level. Attend your component OMS society meetings, join component society committees and become a leader in your own back yard.

Sister organizations

- **OMS Foundation** – Engage with the Foundation's mission by first becoming a donor and then learning about the programs that your gift supports, including cutting-edge research, continuing education and OMS faculty and academic programs.
- **ABOMS** – Diplomates can log in to their profile on the ABOMS website to apply to be part of the Examination Committee, which works throughout the year to develop, calibrate and administer ABOMS examinations and programs.
- **OMSPAC** – As the only AAOMS-affiliated organization permitted to make political contributions, this nonpartisan political action committee helps to elect federal candidates who support the specialty. Fund-raising Chairs in each state encourage members to meet with candidates and build relationships.
- **OMSNIC** – Nearly 70 OMs and residents provide ideas and opinions to the Company by serving on the Advisory Board, Faculty Council, Resident Consultant Committee, or one of the Operational committees. Their voluntary involvement contributes to the defense of the specialty and risk management programs, while also offering insights on the challenges confronting the OMS practice landscape.

In the spirit of this year's volunteerism theme, I challenge every AAOMS member to choose at least one new item from this list to pursue by the time we meet together at our Annual Meeting in September.

The Board of Trustees is looking forward to AAOMS's future achievements and accomplishments when all our members join together to become "Individuals United in Service." ■



22 questions:

*Revealing all the reasons
to attend '22 Annual Meeting*

The AAOMS Annual Meeting experience will never be the same as a result of the COVID-19 pandemic – it will be **better**.

Those who attended the 2021 meeting in Nashville were able to reconnect with colleagues they hadn't seen in a few years. That in-person networking – and learning together side-by-side – was the highlight of the meeting for many.

When they got back home, though, is when the value of the newly designed Annual Meeting really became evident. Every non-ticketed session was available online until the end of the year. Any in-person clinical or practice management session they had missed – whether due to choosing one session over another or having to step out because of a work call – was at their fingertips.

Even those who registered for Online-only Access applauded the flexibility to choose which sessions they wanted to watch live-streamed and then flag the sessions they wanted to watch on-demand later.

While some of the details are still being ironed out, AAOMS is ready to answer 22 questions that will explain the value, details and benefits of the 2022 Annual Meeting for both OMSs and their staff.

1 What makes the 2022 Annual Meeting a must-attend event?

Whether planning to attend in-person in New Orleans, La., or online, this year's program will feature all-new session content in the clinical

and practice management tracks. The goal is for no session to be exactly the same as last year. For example, all 12 clinical tracks will again feature Hot-off-the-press *JOMS* articles with the latest evidence-based information.

2 Will I be able to attend online instead of in-person?

Of course! AAOMS is offering “the best of both worlds” to support attendees' needs and preferences by providing two types of registration – **New Orleans**

with online access (for those attending in-person) and **Online-only access** for those who are not able to travel and/or prefer the enhanced convenience of live-streamed and on-demand offerings. Regardless of the platform, all registrants receive access to more than 100 CE courses.

3

How are the clinical tracks organized?

Twelve clinical tracks will cover the entire OMS scope of practice – anesthesia; dental implants; dentoalveolar; cosmetic; head and neck; orthognathic; OSA; pathology; pediatrics and cleft; reconstruction/nerve;

TMJ; and trauma. Eleven high-level plenary sessions will feature expert speakers leading attendees through the latest research combined with breakout sessions. Tracks also include oral abstract presenters and a Hot-off-the-press session.

4

What kind of anesthesia training and courses are available?

Several sessions focusing on anesthesia will be offered for OMSs and their staff.

- **Anesthesia Update** – This preconference session will provide practical updates in the perioperative considerations in the management of patients in the OMS office. An update on new drugs and techniques as well as the concept of enhanced recovery after surgery (ERAS) will be discussed in the context of office-based OMS and anesthesia care.

continued on next page



Five sessions of the OBEAM anesthesia simulation modules will be offered in 2022.



The Exhibit Hall will feature the latest OMS practice products and technology.

- **Office-Based Emergency Airway Management (OBEAM) anesthesia simulation modules** – OBEAM uses intensive, real-life experiences to allow participants to practice and master critical techniques for administering and monitoring office-based anesthesia. Five four-hour sessions are scheduled.
- **Anesthesia clinical track plenary** – A two-hour session will focus on cardiovascular emergencies (including management of cardiac pacemakers and implantable defibrillators), monitoring equipment and techniques, and medical optimization of patients undergoing anesthesia.
- **Anesthesia Safety Program: A Review of Closed Claims** – A panel will review closed cases illustrating patient safety and risk management principles.
- **Anesthesia Assistant Skills Lab** – OMS assistants can register for one of two Anesthesia Assistant Skills Lab sessions to provide staff with hands-on clinical training. Participants will rotate through multiple stations that include airway management, intubation, venipuncture, defibrillation, preparation of emergency drugs and the crash cart.

5

How will the theme – Volunteerism: Individuals United in Service – be incorporated into the meeting?

Clinical tracks and other educational sessions all tie into the meeting's theme culminating a year of highlighting and honoring AAOMS volunteers. Speakers at the Volunteerism in Oral and Maxillofacial Surgery Spotlight Session will discuss the value of volunteering and describe a variety of surgical

and non-surgical opportunities to get involved in missions, mentoring, teaching and service in local and regional societies and the national Association. A pathology session – Current Concepts in the Management of Oral and Maxillofacial Pathology – will focus on how volunteerism in global surgery has provided opportunities for novel treatment strategies.

6

What hands-on courses are on the schedule?

Three hands-on courses will be available to provide OMSs with experiential learning to practice the techniques being discussed.

- **Rhinoplasty and Lower Facial Cosmetic Surgery Cadaveric Workshop** – This full-day course led by Faisal Quereshey, DDS, MD, FACS, will address rhinoplasty for both functional and cosmetic correction and lower facial cosmetic surgery covering facelifts, facial liposuction and platysmaplasty. Participants will practice techniques at the LSU Health Sciences Center during interactive experiences supervised by experienced course faculty.
- **Contemporary Management of Cleft Lip and Palate Patients** – Participants will gain a deeper understanding of the most common surgical techniques used in the repair of cleft lip and palate deformities by practicing techniques using high-fidelity simulation models. Rafael Ruiz-Rodriguez, DDS, and Daniel Buchbinder, DMD, MD, will present this four-hour session that includes step-by-step instructions using multimedia techniques such as animation, 3D models and illustrative cases.



Multiple networking events are planned for 2022.



- **Office-based 3D Printing for Trauma and Implants**

– Dina Amin, DDS, FACS, and will lead this three-hour workshop that aims to familiarize surgeons with 3D printers and demonstrate a stepwise approach to printing models. Attendees will use their own laptops to learn about open source software and be able print using the 3D printers.

7 What other CE courses are scheduled?

Among the additional educational offerings:

- **How I Do It sessions** – Three sessions (two in-person and one on-demand) will cover cosmetic surgery, zygoma implants, TMJ replacement surgery, Fisher's cleft lip repair, pathology, reconstruction, trauma management.
- **On-demand clinical and practice management courses** – More than 50 sessions are scheduled.
- **Pediatric Craniomaxillofacial Surgery Preconference** – This full-day symposium will discuss the current state of OMS craniomaxillofacial surgery – focusing on multidisciplinary care, evolution of craniofacial surgery and overviews of nine fellowship programs.

8 What is the Research Open Forum?

The four group leaders from the 2022 Clinical Trials Methods Course will present the clinical trial study proposals developed in the spring covering Dentoalveolar/

Anesthesia, TMD/Facial Pain, Pathology/Reconstruction and Craniofacial Trauma/Orthognathic/Facial Deformities. A winner will be selected, but the hope is all four proposals will be submitted for funding and ultimately implemented.

9 How many Master Classes are offered?

Taught by subject experts, 12 in-person and 40 on-demand Master Classes are intended to advance understanding and knowledge by covering popular topics such as implant complications, dentoalveolar surgery and computer-aided surgery.

10 What are the team-based sessions?

Bringing together relevant members of the OMS practice, team-based sessions invite participation and discussion of important topics. Sessions will cover the team's role in an anesthetic emergency, comprehensive management of TMJ



104th AAOMS Annual Meeting, Scientific Sessions and Exhibition

Volunteerism: Individuals United in Service

Sept. 12 – 17

AAOMS.org/AnnualMeeting

The 2022 AAOMS Annual Meeting will be available both in-person and online. Registration will open in early May.

disease, preventative analgesia as well as recordkeeping and risk management for dental practices.

11

Who is presenting the Keynote Lecture?

Kevin Brown, creator of The HERO Effect, will discuss this philosophy that separates world-class organizations

and high-performance people from everyone else. Brown is passionate about helping people expand their vision, develop their potential and grow their results.

12

What is the topic for the Chalmers J. Lyons Memorial Lecture?

This year's Chalmers Lecture is titled Epidemics Past, Present and Future:

Syphilis, AIDS, COVID. Powel H. Kazanjian, MD, PhD – Chief of the Division of Infectious Diseases and Director of the AIDS Program at the University of Michigan – will discuss the historical patterns between society's social, biomedical and public health responses to syphilis and AIDS and how they provide perspective to COVID-19 and any future epidemic.

continued on next page



Members will have the opportunity to record videos – at no cost – for use at their practice and the OMS Experts series (part of the AAOMS Informational Campaign).

13 What sessions are specifically designed for faculty and residents?

- **OMS faculty** – The second annual full-day Educators Summit preconference provides an opportunity for educators to discuss teaching best practices, the culture of research and applicant and resident assessments. The Summit is followed by the OMS Faculty Section Business Meeting. Faculty also are invited to participate in a session on Teaching Philosophies during the Scholarly Teaching Excellence Program on Friday.
- **OMS residents** – The three-hour Disasters from the Masters program will cover complications of dentoalveolar and nerve repair. Residents are encouraged to attend the Volunteerism in Oral and Maxillofacial Surgery Spotlight Session to learn about volunteerism and OMS residents.



A full-day Educators Summit is scheduled as a preconference session.

14 Why should I bring my practice management staff?

Twenty onsite and 15 on-demand courses that address day-to-day practice operations will support the professional development of the OMS team. Topics will cover office emergencies, communications, marketing, the implant treatment coordinator role, buying and selling an OMS practice, and HIPAA and OSHA compliance. These sessions are included in the general registration fee for both AAOMS members and their staff.

15 What will my coding staff learn at the annual workshop?

The Beyond the Basics Coding Workshop will help OMSs and their staff code more efficiently to improve billing and reimbursement. Sessions will cover CPT, CDT and ICD-10-CM coding for the full scope of oral and maxillofacial surgery, documentation guidelines and clinical case studies. New this year, the two-day workshop will be a ticketed course added to an attendee's general registration fee, reducing the cost for those who attend both the workshop and the Annual Meeting.

16 Will the scientific posters be in-person and online?

In-person attendees will be able to browse poster abstracts and meet authors in person, or submit questions to remote authors via the online system.

President's Event

AAOMS President Dr. J. David Johnson Jr. and his wife, Caroline, will be celebrated at the Annual Meeting's main social event – the annual AAOMS President's Event – at The National WWII Museum.



17 Why should I stop by the Exhibit Hall?

Show discounts, dedicated one-on-one interactions with vendors and a chance to explore the latest OMS practice products and technology are a few of the reasons to visit the Exhibit Hall. Beyond the booths, the exhibition also will feature a complimentary lunch on Friday and vendor-sponsored Eat, Drink and be Industry-Educated sessions (Breakfast and Learn, Lunch and Learn, and Snack and Learn) on Thursday and Friday to discuss and highlight exhibitors, products and services.

18 What is the Member Pavilion?

The Member Pavilion provides attendees firsthand information on services and organizations that support all AAOMS members. Booths share information about membership services, AAOMS Advocacy, AAOMS Store, Dental Anesthesia Assistant National Certification Examination (DAANCE), ROAAOMS, OMS Foundation and others.

19 Will AAOMS offer the OMS Experts Video Recording Studio again?

Yes. Members attending in-person will have the opportunity to record videos – at no cost – for use at their practice and the OMS Experts series (part of the AAOMS Informational Campaign). Watch for emails and future *AAOMS Today* stories for details.

20 What networking opportunities are planned?

Multiple events encourage connection with OMS colleagues, including the Opening Ceremony, Awards Presentation and Meeting Dedication as well as the Welcome Reception. New this year, Clinical and Special Interest Groups (CIGs/SIGs) will meet at lunchtime

Thursday and Friday in the Exhibit Hall, allowing members a chance to participate in conversations with peers. Also new this year is the free Exhibit Hall Reception on Friday before the President's Event.

21 Why should I stay for the last day on Saturday?

A packed program of education will again be offered on the final day of the Annual Meeting. The schedule includes the Anesthesia Safety Program, the Chalmers J. Lyons Lecture, 14 Master Classes, two How I Do It sessions and team-based learning. Saturday-only registration is available and encouraged for local OMSs and their staff.

22 What are the plans for the President's Event?

AAOMS President Dr. J. David Johnson Jr. and his wife, Caroline, will be celebrated at the Annual Meeting's main social event – the annual AAOMS President's Event – at The National WWII Museum. Attendees will have access to the entire museum that includes the famous US Freedom Pavilion and the Louisiana Memorial Pavilion exhibits. Live music and entertainment is scheduled to take place in multiple museum locations along with a wide variety of foods and beverages inspired by New Orleans. ■

House composition changes slightly in 2022

In accordance with the Bylaws, allocation of Delegates and Alternates for states and counterparts to the AAOMS House of Delegates is determined based upon the distribution of fellows, members and life fellows and life members as of Jan. 1 of the year in which the House convenes.

The Bylaws state the total members of the House of Delegates shall be 102 – with two of them OMS residents representing the ROAAOMS Executive Committee separate and apart from any District. Regardless of its total fellows, members, life fellows and life members, each of the following is to be represented by one Delegate and one Alternate to start:

- Each state
- The District of Columbia
- Each branch of the five federal dental services
- The U.S. territories (Virgin Islands, Guam) and Commonwealth of Puerto Rico combined

Additional delegates and alternates are granted based upon the remaining number of aforementioned categories to the remaining number of delegates, after allocation of the first delegate, until the ceiling of 100 delegates is reached.

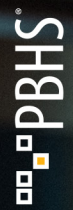
The 2022 House of Delegates is based upon a total membership (fellows and members and life fellows and life members, including unknown addresses) of 7,312 representing 73 fellows/members per delegate as of

Jan. 10. The composition for the House of Delegates has changed slightly for 2022, affecting Georgia (lost one) and Arizona (gained one).

The composition of the 2022 House of Delegates is:

- **District I (Northeastern)** – 14 Delegates; 974 AAOMS members in Connecticut, Maine, Massachusetts, New Hampshire, New York, Rhode Island and Vermont.
- **District II (Middle Atlantic)** – 14 Delegates; 965 AAOMS members in Delaware, District of Columbia, Maryland, New Jersey, Pennsylvania, U.S. Air Force, U.S. Army and U.S. Navy.
- **District III (Southeastern)** – 20 Delegates; 1,779 AAOMS members in Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, Puerto Rico and U.S. Territories (Virgin Islands and Guam), South Carolina, Tennessee, Virginia and West Virginia.
- **District IV (Great Lakes)** – 14 Delegates; 990 AAOMS members in Illinois, Indiana, Michigan, Ohio, Wisconsin, Veterans Administration and U.S. Public Health Service.
- **District V (Midwestern)** – 20 Delegates; 1,231 AAOMS members in Arkansas, Colorado, Iowa, Kansas, Minnesota, Missouri, Montana, Nebraska, New Mexico, North Dakota, Oklahoma, South Dakota, Texas and Wyoming.
- **District VI (Western)** – 18 Delegates; 1,317 AAOMS members in Alaska, Arizona, California, Hawaii, Idaho, Nevada, Oregon, Utah and Washington.
- **Resident Organization** – Two voting Delegates and two Alternates. ■





OMS WEBSITE DESIGN THAT DELIVERS



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COHNORS working to ensure cancer care is

To recognize the 2022 AAOMS Annual Meeting theme of Volunteerism: Individuals United in Service, each issue of AAOMS Today during 2021-22 President Dr. J. David Johnson Jr.'s term will feature articles about several of the 20 AAOMS Committees available for member participation. The stories will highlight the Committees' crucial responsibilities, myriad accomplishments and participating members' valuable service.

The Committee on Oral, Head and Neck Oncologic and Reconstructive Surgery (COHNORS) is responsible for a range of related educational opportunities and the development of white papers and position papers – all with the guiding belief that AAOMS should be the “home” for OMSs who focus on head and neck oncology.

With that principle in mind, COHNORS is responsible for the Head and Neck Oncology for the OMS Conference. The first conference – Principles of Head and Neck Oncology for the OMS

– was held in early 2020 and served as the inaugural event at the OMS Institute for Education and Innovation at AAOMS headquarters. Preconference hands-on sessions were held in the simulation labs, and the main conference was held in the large classroom space.

A second conference – Advances of Head and Neck Oncology for the OMS – is in the works for 2023.

Each year, the Committee also assists in the development of the reconstruction and pathology clinical tracks at the AAOMS Annual Meeting.

The Committee has developed clinical white papers covering Head and Neck Cancer Screening and Prevention,

Tobacco and Electronic Cigarettes and Human Papilloma Virus Vaccinations.

Over the next three years, the Committee will develop position papers covering:

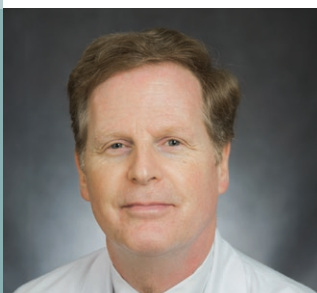
- Management of Oral Dysplasia (in collaboration with the American Academy of Oral and Maxillofacial Pathology and to be published in *JADA* or *JOMS*)
- Lesion Evaluation, Biopsy Techniques and Appropriate Referral for General Practitioners (to be published in *JADA*)
- Care Pathways in Microvascular Surgery (to be published in *JOMS*)

COHNORS Chair, Dr. Eric R. Carlson, and Immediate Past Chair, Dr. Deepak Kademani, shared their thoughts about the committee.

Q What do you consider the committee's major achievements?

A Dr. Carlson: “Our committee has brought together thought leaders within our specialty's academic programs and private practices to address our continued prominence within our subspecialty in oral and maxillofacial surgery. We have discussed the educational aspects of our oral/head and neck fellowship programs, the political ramifications of our leadership within oral/head and neck cancer surgery, our outreach in our communities to assist patients, and our continued collaboration with medical and dental organizations dedicated to caring for patients with oral/head and neck cancer.”

A Dr. Kademani: “The COHNORS committee has been at the center of the evolution of OMS in the management of oral/head and neck cancer. Established in 2005, the committee has provided insight and guidance for cancer care to become an integral part of our specialty. Over the last 16 years, we have seen fellowship training programs expand – resulting



Dr. Carlson



Dr. Kademani



integral part of OMS specialty

in a significant number of OMS residency programs having oncologic care as part of their training programs.

"Additionally, OMSs are now key and integral members of head and neck cancer treatment teams. This evolution also has seen the devolvement of a Certificate of Added Qualification in Oral/Head and Neck Oncologic and Reconstructive Surgery with ABOMS – of which we are the only medical or dental specialty offering this additional qualification to our members."

Q What would you like the average AAOMS member to know about this committee and its responsibilities?

A Dr. Carlson: "It continues to be important for the AAOMS membership to understand the unique service provided to patients with oral/head and neck cancer by properly trained members of our profession. Much work is yet to be done, however. We must continue to educate members of our specialty as well as members of the dental and medical professions that we are duly qualified to provide comprehensive care for these patients."

A Dr. Kademani: "COHNORS is working tirelessly to continue to advocate for AAOMS's position as the premier specialty treating patients with head and neck cancer. The committee provides advocacy, education and training opportunities for AAOMS members to be engaged in oncologic care. Our

goals are to ensure all patients and OMSs have access to a fellowship-trained OMS delivering high-quality cancer care to their patients."

Q How significant has its impact been for the membership/specialty?

A Dr. Carlson: "The committee has provided transformational change for the specialty of oral and maxillofacial surgery. Providing comprehensive care for patients with oral/head and neck cancer represents a unique opportunity to save a life while also favorably impacting patient function."

A Dr. Kademani: "I believe the evolution of oncologic care from OMS has been one of the most significant advances in our specialty. We have a new generation of surgeons and training programs that fully integrate surgical head and neck oncologic treatment with more traditional aspects of OMS practice. My hope is that, in the future, all training programs will offer oncologic training and it will be commonplace for patients to seek a qualified OMS to deliver high-quality head and neck oncologic care as part of their practices."

Q Why should an AAOMS member consider joining a committee?

A Dr. Carlson: "Serving on an AAOMS committee permits meeting great members of our specialty with similar interests.

I have always enjoyed my committee work because it has reinforced my belief that AAOMS is the finest organization of which I am a member."

A Dr. Kademani: "I believe the opportunity to participate in an AAOMS committee is both a privilege and a responsibility of all OMSs. Our specialty is in our hands, and committee participation is critical to continue to shape and advocate for our specialty and the patients we have the privilege to treat." ■



The first Principles of Head and Neck Oncology for the OMS conference featured four hands-on workshops.

Whether for public or members, CPPC focuses

The Committee on Public and Professional Communications (CPPC) provides guidance and oversees all public-facing and member-facing communications. This includes the wide-ranging national AAOMS Informational Campaign, the MyOMS.org and AAOMS.org websites, product development and sales, media relations and member communications. The CPPC also provides input on OMS Foundation communication initiatives.

The CPPC began oversight of the Informational Campaign in 2017 – the year management of the campaign was taken in-house. Committee members went right to work that year to focus more resources on:

- Expanding digital advertising.
- Creating videos and public service announcements.
- Publishing a WebMD microsite.
- Designing infographics.

Since then, the CPPC has enhanced the campaign in myriad ways:

- Created more than 100 new videos.

- Redesigned MyOMS.org and expanded it from 11 to more than 75 webpages covering the full scope of OMS practice.
- Updated keywords and metadata to improve search engine optimization.
- Distributed new radio and airport signage public service announcements.
- Made multiple improvements to the Find a Surgeon function.
- Posted thousands of messages and images to the campaign's four social media accounts.
- Distributed a USB drive with all the campaign's resources to every member.

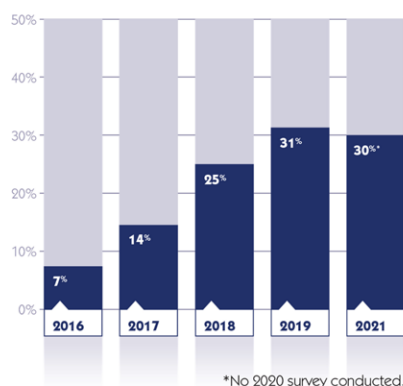
National consumer surveys track the effectiveness of the campaign. Since 2015, consumers have been asked the same question: In the past six months, have you seen or heard advertising or promotions about the importance of consulting an oral and maxillofacial surgeon or the treatments they provide?



AAOMS Informational Campaign

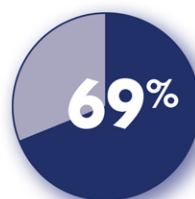
Making a difference for the OMS specialty and AAOMS members

AAOMS conducts annual national surveys* to gauge the public knowledge of OMS treatments and AAOMS. In 2021, **30%** of consumers said they had seen or heard advertising or promotions about consulting an OMS.



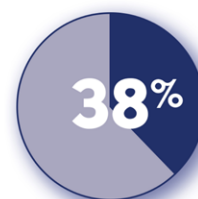
*No 2020 survey conducted.

After seeing these ads or promotions,



said they are more likely to choose an OMS

and



said they had visited **MyOMS.org**.

Annual consumer surveys reveal the effectiveness of the Informational Campaign.



on enhancing communications

The percentage of consumers has risen steadily: 3% in 2015, 7% in 2016, 14 in 2017, 25% in 2018, 31% in 2019 and 30% in 2021. (The survey was not conducted in 2020 due to the pandemic.)

Funding for the campaign was modified by the 2021 House of Delegates, which voted to eliminate the \$350 annual special assessment and instead permanently increase dues by \$300. Campaign funding is being reduced to \$250 (per full dues-paying member) in 2022 and to \$200 in 2023.

Other projects completed or underway under the CPPC's leadership:

- Approved the redesign of *AAOMS Today* to coincide with the Association's centennial.
- Oversees the AAOMS Anesthesia and Patient Safety Spokesperson Program.
- Conducted an audit of the Informational Campaign that concluded that it is "already robust" and that managing the campaign "with internal resources is a testament to your organization's strength," adding some suggestions for technical and SEO refinements.
- Developed a three-pronged strategic plan for the campaign to strengthen communications with the public, AAOMS members and dental students.
- Offering an OMS Experts video booth at the 2021 Annual Meeting that resulted in more than 100 new videos for the campaign (so popular it will be offered at the 2022 Annual Meeting).
- Revised product and shipping pricing as well as *AAOMS Today* classified ad pricing.
- Working on an AAOMS.org redesign to be launched in 2022.

CPPC Chair Dr. Lee Allen and Immediate Past Chair Dr. Steven Fletcher shared their thoughts about the committee.

Q What do you consider the committee's major achievements?

A Dr. Allen: "One of the many major achievements for this committee is the oversight of the award-winning Informational Campaign. This campaign has shown through surveys and metrics to be accomplishing the major goals that AAOMS set out to do in 2014, which is to help the public understand the skillset and procedures OMSs perform.

"We also have a story to tell about how we are uniquely qualified to perform these procedures and how we perform them better. This is so important as we see more and more competition from generalists and other specialties. Our voices should be heard, and we should be proud to be a part of our great profession. I also am proud to say that since we took management of the Informational Campaign in-house in 2017, we have won 74 national and international awards. Our committee continues to look at what has worked and to evolve to be better stewards of this incredibly important initiative."

Dr. Allen



Dr. Fletcher

A Dr. Fletcher: "The most significant achievement of the CPPC over the past several years has been the development and oversight of the Informational Campaign. With the help of our outstanding staff at AAOMS and the support of our members, we have been able to significantly improve the public's understanding and perception of what an OMS is and the expertise we can provide for our communities. It also has provided resources to educate other medical and dental professionals on what we can do to provide their patients with the highest levels of care.

"This committee also has overseen a comprehensive restructuring of the website for both AAOMS members and our patient-facing site MyOMS.org. A significant part of this has been greatly increasing and updating the quantity and quality of information available to the public on procedures and services we provide as oral and maxillofacial surgeons. The CPPC and AAOMS staff are continuously working to keep these resources up-to-date and accessible in an ever-changing online world."

continued on next page



Q What would you like the average AAOMS member to know about this committee and its responsibilities?

A Dr. Allen: “The CPPC has responsibility of developing, monitoring and updating AAOMS educational products, developing and updating public and professional education materials, overseeing the Informational Campaign, monitoring information for inclusion on the AAOMS and MyOMS websites, and providing guidance to the OMS Foundation on its communications. This includes developing public service announcements, patient testimonial videos, infographics, online display ads, social media postings, Patient Information Pamphlets, Patient Education Guides and OMS expert videos.”

A Dr. Fletcher: “This committee is given many responsibilities and is very aware that what we do is the ‘voice’ of AAOMS. We are careful to take into account how we can help all our members. With the Informational Campaign in particular, the CPPC has been given an enormous responsibility to use the resources provided in an effective manner. All CPPC members take this responsibility seriously and continuously re-evaluate what we do to be sure we maintain the trust of the members.”

Q Why did you initially join this committee?

A Dr. Allen: “I initially joined this committee as a way to try to become more involved in the ‘inner workings’ of AAOMS and our great profession. Before joining this committee, I had never been to our headquarters in Rosemont. It is an incredible feeling going through the headquarters doors the first time and seeing all the history and hard work first-hand. I encourage anyone and everyone to become involved. Each of you have a unique voice and background and have significant contributions to offer.

“As a community-based private practitioner, I have a good perspective of the changes affecting day-to-day practices and can hopefully help to lead AAOMS forward in the future. The really great thing about our committee is we have opinions from all backgrounds and types of practices, including private, academics and resident input.”

A Dr. Fletcher: “Initially, I was invited by a trusted colleague and friend to help with an AAOMS committee assignment. I accepted thinking I would serve for a few years, then move along. It has now been much longer than a couple of years, and I have enjoyed being a part of so many important initiatives that have strengthened our specialty and helped show the world who we are. I’m glad I said yes!”

Q How significant has its impact been for the membership/specialty?

A Dr. Allen: “By all metrics, this committee’s work has helped spread public awareness of our unique profession. We also have targeted dental hygienists and dental students to hopefully help them understand why we are the best choice for surgical procedures. We continue to look for new avenues to be better for our members. This includes revamping the member-facing website AAOMS.org, improving the computer and mobile versions of MyOMS.org, new infographics, updated patient information products, and helping members to create OMS Experts videos at the Annual Meeting.

“We invite all members to give us feedback and help us improve the quality and appearance of our products. I am truly honored to be a part of our profession and involved with this committee. We continue to strive to do great things for AAOMS and its members.”

A Dr. Fletcher: “The work of the CPPC has made an enormous impact on our specialty. A lot of the work is done behind the scenes, but by all metrics, we have made significant improvements in what people outside our specialty know about us. We also have greatly improved the resources available to members and the public to continue educating the world about what we can provide. We are always looking for new ideas and strategies to better communicate who we are and what we do – so we encourage members to let us know what they think could help.” ■

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'Let your perspective be heard by participating'

AAOMS Today is publishing a series of interviews with AAOMS members who have served as President of the American Dental Association. They share their perspective, thoughts on collaboration and leadership as well as their journey to this prestigious position. This is the final article.



Robert M. Brandjord,
DDS

Robert M. Brandjord, DDS, served as ADA President in 2005-06, Trustee from 1999-2004 and Delegate from 1995-98.

Dr. Brandjord was active in the Minnesota Society of Oral and Maxillofacial Surgeons as President in 1994-95, and Membership Committee Chair in 1987-88.

At the Minnesota Dental Association, he was President in 1999.

He also served on the Minnesota Department of Health Ad Hoc Committee on Health Care and the University Relations Committee in 1994 and the Minnesota Board of Dentistry HIV/AIDS Task Force in 1991.

He also was active on the staff of Fairview Ridges Hospital – serving on the Surgery Committee and Executive Committee and serving as Chief of the Department of Surgery in 1997-98.

Dr. Brandjord has received several prestigious awards:

- 2000: President's Award, Minnesota Dental Association
- 2006: Distinguished Dental Alumnus Award, University of Minnesota Dental School
- 2007: R.V. Walker Distinguished Service Award, given by AAOMS to those who have made a significant contribution to the OMS specialty
- 2008: Minnesota Dental Association "Guest of Honor"

Dr. Brandjord received his DDS from the University of Minnesota and completed his OMS residency at the Detroit/Macomb Hospital and Children's Hospital of Michigan in Detroit. He is a diplomate of ABOMS.

His academic appointments include serving as an instructor at the University of Minnesota Dental School from 1970-72 and as Assistant Professor at the University of Minnesota Department of Oral and Maxillofacial Surgery from 1979-80 and 1986-88.

Q Why is it important to get involved with the ADA?

A The ADA is the national organization representing all of dentistry – from general practice to specialties – that is often called upon to represent them all in issues of legislation, accreditation and regulation. The perspective of OMSs can be very valuable because of the expansive scope of practice in the office and the hospital.

Q How can involvement in the ADA support positions important to OMSs?

A As the scope of the oral and maxillofacial surgery has expanded and grown, it is often not completely understood by the entire dental community so it is important to have OMS participation. This was apparent when the Department of Health and Human Services created the National Healthcare Information Infrastructure to establish a single electronic health record. The committee supplying input on this issue depended strongly on the OMS members in creating the recommendations.

Q What did you learn or gain from your time as ADA President?

A I learned how well the ADA staff is connected to the political, regulatory and legislative players in the federal system. They can inform you of the history, significant players on the issue and alternatives to finding a solution, and they are open to new ideas.

Q How did you work with AAOMS during your time as ADA President?

A I always felt I had a good open relationship with AAOMS and communicated openly with then-President Dr. Mark Tucker and then-Executive Director Bob Rinaldi. I believe we shared the same concerns over legislation, accreditation and regulation.

– advice from an ADA President

Q What would you say were your major accomplishments and the ADA's major accomplishments during your Presidency?

A I don't consider any of the accomplishments by the ADA that year to be mine. The structure of the ADA is such that committees and taskforces work on issues and present them to the board for action and then to the House of Delegates if necessary.

That said, I believe the work on regulation regarding the National Health Information Infrastructure and Health Insurance Portability and Accountability Act (HIPAA) were managed well and there was an OMS on each of those ADA committees.

There also were the issues of access to dental care that led to the creation of the Workforce Task Force. It recommended expanding the dental workforce and that led to the creation of the Community Dental Health Coordinator.

Q How did you get involved with leadership roles and, ultimately, this Presidency?

A In 1990, I entered the six-year leadership ladder of the Minnesota OMS Society. Healthcare reform – that did not include dentistry – was starting in the state legislature. We worked with our state lobbyist regarding legislative impact on the OMS community. That legislation was vetoed by the governor, a dentist.

Healthcare legislation continued as a hot topic, and the dental community was divided over how to address it. I was asked to address new proposed legislation to groups with opposite opinions on the issue. After one of those meetings, the Minnesota Dental Association asked me to be a member of their Ad Hoc Committee on Healthcare Reform.

The legislature proposed an omnibus healthcare bill that included adding dental benefits to MinnesotaCare (originally called the Health Right Act). At that time, I was Chief-elect of Surgery at my primary hospital. The hospital was part of a very large healthcare corporation that provided educational meetings and material to keep its leadership informed and up-to-date on the status of the healthcare legislation. Dental service benefits were added to the MinnesotaCare program during the 1997-98 legislative session.

I was later asked by the Minnesota Dental Association Board to be a nominee for its leadership ladder.

As the scope of the oral and maxillofacial surgery has expanded and grown, it is often not completely understood by the entire dental community so it is important to have OMS participation.

That led to my involvement in the ADA's 10th district and becoming an ADA trustee.

Q Why is it important to get involved in leadership positions? What would you say to encourage others to get involved in a leadership role?

A If you want to see change or maintain status quo, let your perspective be heard by participating. With the exchange of ideas, your knowledge base grows, and you will be surprised at the relationships and opportunities that evolve. ■

Other AAOMS members who have served as ADA President are:

1936-37 Dr. Leroy M.S. Miner

1946-47 Dr. Sterling V. Mead

1953-54 Dr. Leslie M. FitzGerald

1954-55 Dr. Daniel F. Lynch

1955-56 Dr. Bernerd C. Kingsbury

1975-76 Dr. Robert B. Shira

1978-79 Dr. Joseph P. Cappuccio

1979-80 Dr. I. Lawrence Kerr

1997-98 Dr. David Whiston

2009-10 Dr. Ronald L. Tankersley

2020-21 Dr. Daniel J. Klemmedson



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OBEAM anesthesia simulation trainings offered

More than three dozen sessions of the Office-Based Emergency Airway Management (OBEAM) module are scheduled at the OMS Institute for Education and Innovation at AAOMS headquarters in Rosemont, Ill., and the AAOMS Annual Meeting in New Orleans, La., in 2022.

OMSs can train using recent advancements in technology that simulate a full range of real-life emergency airway situations.

The four-hour OBEAM module is standardized to allow participants to experience the same events, practice and master critical techniques and receive automatic performance evaluation. By the end of the module, OMSs are able to assess their readiness to meet an office anesthesia emergency situation.

Registration and additional information are available at AAOMS.org/OBEAM. ■

OBEAM at Annual Meeting

New Orleans, La. (All times are CT)

Date	8 a.m. to noon	1 to 5 p.m.
Sept. 15	●	●
Sept. 16	●	●
Sept. 17	●	

2022 OBEAM session schedule

OMS Institute for Education and Innovation,
AAOMS headquarters in Rosemont, Ill. (All times are CT)

Date	8 a.m. to noon	1 to 5 p.m.	4 to 8 p.m.
March 27		●	
March 28	●	●	
April 2	●	●	
April 3	●		
April 30	●	●	
May 1	●		
May 13			●
May 14	●	●	
June 5		●	
Aug. 6	●	●	
Aug. 7	●	●	
Aug. 20	●	●	
Aug. 21	●		
Oct. 8	●	●	
Oct. 9	●		
Oct. 22	●	●	
Oct. 23	●		
Nov. 12	●	●	
Nov. 13	●		
Dec. 1	●	●	



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Jasjit Dillon, MBBS, DDS, FDSRCS, FACS
University of Washington
Medication-Related Osteonecrosis



Bach Le, DDS, MD
University of Southern California
1. Bone Graft Complications
2. Point/Counterpoint: Vertical Defects in the Esthetic Zone – Prosthetic or Surgical Solutions?, with C. Misch



Robert A. Levine DDS, FCPP, FISPPS
Philadelphia, PA
Soft Tissue Grafting and the Importance of Phenotype Conversion around Dental Implants: a Periodontal Plastic Surgeon's Perspective



Nicholas Makhoul, DMD, MD
McGill University
Microvascular Reconstruction of the Maxilla and Mandible



Robert E. Marx, DDS
University of Miami
Practical Access to Stem Cells for Oral and Maxillofacial Surgery



James C. Melville, DDS, FACS
The UT Health Science Center at Houston
From Bench to Bedside: The Evolution of Tissue Engineered Maxillofacial Reconstruction, with S. Young



Craig M. Misch, DDS, MDS
Sarasota, Florida
Point/Counterpoint: Vertical Defects in the Esthetic Zone – Prosthetic or Surgical Solutions?, with B. Le



Robert Sader, MD, DDS, PhD
Goethe University Frankfurt
Bone Augmentation and Reconstruction:



Frank Schwarz, DMD
Goethe University Frankfurt
Treatment Concepts for the Management of Peri-Implantitis



Simon Young, DDS, MD, PhD
The UT Health Science Center at Houston
From Bench to Bedside: The Evolution of Tissue Engineered Maxillofacial Reconstruction, with J. Melville

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James R. Hupp, DMD, MD, JD, MBA, FACS
AAOMS Today Editor

Honored to be following a legend

The word “legendary” is commonly used to describe individuals who have left their mark on the world; sometimes it is utilized too frequently as the word loses much of its impact when used to label the lives of honorable, yet overall unremarkable, people. However, in the case of Dr. Dan Laskin, the term is clearly apropos.

Dan was an exemplar of those who seek to serve others through volunteerism and

do so in ways that leave a lasting positive influence on the lives of others.

Dan’s leadership of our Association as its President and as Editor-in-Chief of the Association’s principal means of disseminating information – namely, the *Journal of Oral and Maxillofacial Surgery*

(JOMS) (1972-2002) and its magazine *AAOMS Today* (1965-2021) – are shining examples of volunteerism as the central theme of AAOMS President J. David Johnson’s presidential year.

Dr. Laskin’s spirit of service lasted decades. Even in his 80s and 90s, he continued his tireless efforts, assisting fellow faculty, residents and students in his department in conducting research and then helping them publish the results in JOMS.

Therefore, it was humbling for me to receive a call from Dr. Johnson asking me to take on the mantle of Editor of *AAOMS Today*. Following in the footsteps of Dr. Laskin will be challenging. Knowing that outstanding members of the AAOMS staff professionals will be working at my side, I am confident we can succeed in maintaining the high

standards set by the Laskin and AAOMS staff team – and deserved by AAOMS members.

AAOMS Today is an award-winning publication, with its hardcopy version having the look and feel of a high-quality news magazine. It is my guess many members look forward to reading each issue of *AAOMS Today* as much as they do JOMS. Many readers may be more likely to read *AAOMS*

Today from cover to cover than other specialty publications because every story in every issue has great relevance to the practicing oral and maxillofacial surgeon. Contributions to *AAOMS Today* are succinct and, when appropriate, nicely illustrated.

AAOMS staff professionals and I will strive to provide information of value to members and their

office staff as well as seek out stories that illustrate the vibrancy of our members and specialty, celebrate strides we are making in increasing our diversity and inclusiveness, reveal examples of and opportunities for members to contribute their time and talents to our specialty and society, and demonstrate innovative ideas to apply to one’s career or personal life. We also will invite and welcome suggestions for stories and columns to add to *AAOMS Today* to enhance its value and interest to our readership.

I sincerely thank the AAOMS Board of Trustees for the trust they have placed in me by offering the privilege of serving our specialty through the leadership of this publication. As with other volunteer activities, I know I will gain personal pleasure and feelings of fulfillment by helping forward our Association’s mission, vision and core values. ■

It is my guess many members look forward to reading each issue of AAOMS Today as much as they do JOMS.

We're helping to recruit top talent to the OMS specialty

Student Research Training Awards offer training and mentorship to hand-picked OMS candidates

Aug. 31, 2022, is the deadline to apply to receive funding in 2023



“In addition to guiding my research, my OMS faculty mentors have shared their experiences, provided shadowing opportunities and encouraged my interest in a career in OMS. My student research training has given me confidence in – and a community of support for – my decision to apply for OMS residency after dental school. Thank you for this opportunity!”

– Caleb Braun

*University of Alabama at Birmingham School of Dentistry (Class of 2024)
2021 Student Research Training Award participant*



“One-on-one relationships with OMS faculty are a wonderful introduction to the specialty. If even a few candidates choose OMS residency, we'll have made a significant contribution to the future of the specialty.”

– Brian Kinard, DMD, MD, Assistant Professor and Award Program Director, University of Alabama at Birmingham

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Louis K. Rafetto, DMD
OMS Foundation Chair

Clinical research grant 'powered by OMSFIRE'

The OMS Foundation's Board of Directors is offering another two-year, \$150,000 Clinical Research Support Grant in 2022 – with consideration limited to applications addressing either dental implants or anesthesia. Even if you're not a researcher, this is important news for the specialty.



Clinical research is how we expand the knowledge bank for practicing OMSs – the outcomes will almost certainly impact your work in some way.

The timing of this Request for Applications also is significant. The Foundation was going to offer this Clinical Research funding opportunity next year, but the generosity of our OMSFIRE donors allowed us to accelerate the timeline. If you're a member of that esteemed circle, you can take pride in knowing your annual support is contributing to safer, more effective care for our patients through high-quality research – and we are sincerely grateful for your generosity.

To ensure applications submitted for the 2022 Clinical Research Support Grant are solidly constructed, the Foundation is encouraging potential applicants to attend the AAOMS Clinical Trials Methods Course May 4 to 6 at the OMS Institute for Education and Innovation at AAOMS Headquarters in Rosemont, Ill. The course – offered with financial support from the Foundation – provides faculty, residents, fellows and practitioners a broad overview of research methodology and clinical trial design. Just as important, they have a chance to fine-tune a developing project with guidance and support from the specialty's leading researchers. Travel scholarships are available through the Foundation for residents and OMSs enrolled in accredited fellowship programs.

The Foundation expects to award one Clinical Research Support Grant and as many as four one-year Research

Support Grants in 2022, along with one or more Student Research Training Awards. This latter program has been attracting top talent to the OMS specialty for 40 years, offering hand-picked dental students research training and personal mentorship from the OMS faculty at their

institution. We encourage every OMS program with an affiliated dental school to apply. Mentorship offers rewards unmatched by any other aspect of our profession for both mentors and mentees. It's worth noting Student Research Training Awards also are "powered by OMSFIRE."

Your Foundation is committed to keeping pace with the evolving needs of your specialty. We cannot move forward by continuing to do what we have always done, and we're grateful to every OMS who has recognized that with an increased level of support. Your donations are carefully invested to maximize their impact; look for a report on the important work being accomplished with your help in the March issue of TORCHlight, our e-newsletter. And if you've not yet enrolled as an OMSFIRE donor, please consider making that commitment today. Thank you! ■

Data needed for anesthesia safety study

The AAOMS Anesthesia Safety Study via OMSQOR® is being conducted to document and measure the safety of delivering anesthesia services in everyday practice of oral and maxillofacial surgery. For it to succeed, at least 200 AAOMS members must commit to contribute data from their cases to the study registry.

Email omsqor@aaoms.org for enrollment information.



OMSPAC supported 33 members of Congress in 2021.

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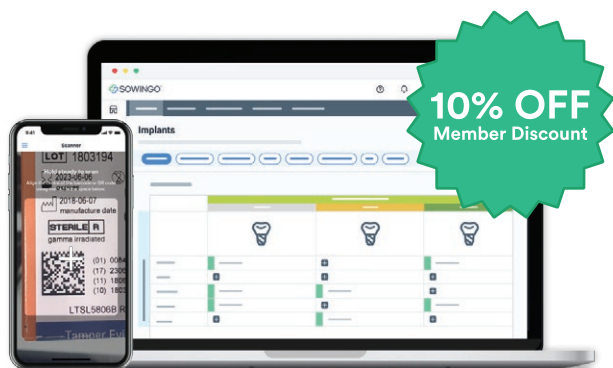
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HEALTH IT BYTES



■ **ONC Cures Act Final Rule** – The Office of the National Coordinator for Health Information Technology (ONC) published its CURES Act Final Rule, which addresses patient access to electronic health information. The final rule sets a Dec. 31 deadline for electronic health records to support smartphone apps that store records. These apps – such as Apple Health – must use the Fast Healthcare Interoperability Resources (FHIR) protocol to transmit information between systems. Information is available at HealthIT.gov.

■ **2021 data breaches** – According to a review by the HHS Office for Civil Rights (OCR), 73.9 percent of breach reports submitted by healthcare providers, insurers and business associates included hacking or IT incidents. Such incidents may involve activity from cybercrime to misconfigured cloud servers. Information on specific breaches is available at HHS.gov/OCR.



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Virtual Day on the Hill: Make an impact

A AOMS members are invited to join their colleagues virtually for Day on the Hill on April 6 to speak directly with members of Congress on behalf of the specialty and share the personal impact of the Association's legislative priorities.

Last year, 102 OMSs from 39 states participated in over 140 virtual meetings with Congressional offices. These numbers met or exceeded in-person participation from prior years. More importantly, the conversations that ensued played a key role in legislative actions – including keeping expansion of Medicare Part B dental benefits out of a reconciliation package.

AAOMS members had productive meetings with congressional staff, with many noting they met with more members of Congress than in a typical year.

This year's priority legislative issues will include access to oral healthcare, student debt repayment reform, congenital anomalies coverage, and drug and supply shortages.

AAOMS will host two evening preparatory events to ensure attendees are ready for their congressional meetings:

- **April 4:** AAOMS federal lobbyists will review and answer questions on each priority issue with the goal of helping attendees make the best use of time in congressional meetings.
- **April 5:** Amy Walter, a popular on-air political analyst as well as publisher and editor-in-chief of the Cook Political Report, will provide an insightful update on the federal political landscape. Attendees will then participate in breakout sessions organized by state to coordinate their congressional visits.

The Virtual Day on the Hill program – a free event held by AAOMS and OMSPAC – is geared for both veteran and beginner advocates. All that is required is a passion for the specialty and the desire to have conversations. Visit AAOMS.org/DayontheHill for more information. ■

Virtual Day on the Hill

What: Advocate for the benefit of the specialty and patients to members of Congress

When: April 6

Where: Virtually from home or office

Who: Open to AAOMS members and residents practicing in the United States

Registration: Register early to provide sufficient time for AAOMS to coordinate congressional visits.

Questions? Call 800-822-6637, ext. 4392, or email dbranch@aaoms.org



AAOMS members met with Rep. Doris Matsui (D-Calif.) during the 2021 Virtual Day on the Hill.

Licensure compact development personal for

A dental licensure compact – in development by a diverse group of stakeholders including the ADA – would increase licensure portability by requiring a dental license to be recognized in all the states that approve the agreement.

For one OMS family, a lack of dental licensure portability has had a direct impact on not only their professional but also private lives. While Lt. Cmdr. Daniel “Dan” A. Hammer, DDS – an OMS currently stationed at Naval Medical Center San Diego – does not need to apply for another dental license as long as he is working on base, the same cannot be said for his wife, Christine “Chrissy” L. Hammer, DMD, a pediatric dentist.



Drs. Dan and Chrissy Hammer, with their two daughters, have lived in five states in eight years. A dental licensure compact – in development by a diverse group of stakeholders – to increase licensure portability would have been helpful.

The two met during an American Student Dental Association conference while in dental school before marrying and starting a family. “I knew what I had signed up for in the sense that we had relocations in our future,” said Chrissy Hammer. “What we couldn’t predict was that Dan’s residency and surgical fellowship would put us on a trajectory to move every year or two for nearly a decade.” For eight of Dan’s 10 years of practice, Chrissy has lived in five states and held state dental licenses in California, Maryland, Texas and Virginia.

Each state has taken a different approach to the initial licensure process, with varying requirements and hurdles for each state. Initially, Chrissy was licensed by examination and later by credential, but some state dental boards required verification of licensure status from all previous states and employers. With each new permanent change of station (PCS) order, the family has had to make the difficult decision of whether Chrissy would follow, what the delay and challenges to secure new dental licensure would have meant for her career, financial implications of those decisions and what the ultimate impact would have been on their family.

At one point, the PCS was for such a short period that the family determined it made more sense for Chrissy to stay behind rather than tackle another licensure process.

“After I completed my residency, my husband received one-year orders to practice on an aircraft carrier which was preparing for deployment,” said Chrissy. “We had to make the decision to move, live together and postpone my work for a year or live separately and work in a place where I could be licensed. Do I live with my husband or work so I can pay my student debt? No family – military or civilian – should be faced with that decision.”

The experience prompted Chrissy to become a leading advocate for the dental licensure compact currently being developed.

In collaboration with the Department of Defense, The Council of State Governments (CSG) is partnering with the ADA and the American Dental Hygienists’ Association to develop an interstate compact for dental licensure portability. While the effort was started to support military families such as the Hammers, it is expected to assist other dental professionals moving between states while continuing to ensure high standards for dental licensure.

William V. Jordan, DDS, chair of the AAOMS Committee on Government Affairs, explained why the initiative is important to oral and maxillofacial surgeons. “All OMSs seeking to transfer between states – be it after residency or for other professional opportunities – would benefit from a basic, standardized dental licensure process. Such an initiative would simplify an already complex licensure procedure.”

The dental licensure compact is expected to address only general dental licensure requirements. Anything above this



one OMS family

What is a licensure compact?

An interstate licensure compact is a legal contract between two or more states that is enacted by state legislatures to bind them to the compact's provisions. Such compacts provide the following benefits:

- Agreement on uniform licensure requirements.
- Shared data systems.
- Enhanced cooperation between state boards.
- Expanded ability to protect public health.



Is this a new concept?

No. There are compacts currently in operation for advanced practice nursing, audiology and speech language pathology, counseling, EMS, medical licensure, nursing, occupational therapy, physical therapy and psychology. Forty-three states plus the District of Columbia and Guam have adopted one or more of these compacts. Another such compact enables recognition of driver's licenses across states.

Who is developing the dental licensure compact?

Through funding from the U.S. Department of Defense, the National Center for Interstate Compacts (a division of The Council of State Governments) is partnering with the ADA and the American Dental Hygienists' Association to develop the compact. A diverse group of stakeholders has been convened to develop the compact, which is expected to be available for public comment this summer. Once finalized, individual legislatures must adopt the compact for it to have any effect.

How will a licensure compact affect the practice of the OMS?

In 48 out of 50 states, a basic licensure in the state is a prerequisite to specialty or sedation/anesthesia permitting. Thus, establishment of licensure compact across states will enable OMSs to already have satisfied the basic licensure requirements and jump directly to addressing the requirements of specialty or sedation/anesthesia permitting.

Even if a state were to enter the compact, however, these permitting functions, prerequisites and requirements would still be governed solely by the state dental board.

Additionally, licensure compacts do not address issues such as scope of practice. That issue will continue to be dictated by individual states and dental boards.



basic licensure – including sedation/anesthesia permits, specialty permits or provisions related to scope of practice – will remain solely in the control of the individual state dental boards.

“AAOMS and its members want to make it easier for the underserved to access needed care, and the ability to practice across state lines might help with that effort,” said AAOMS President J. David Johnson Jr., DDS. “A dental licensure compact is important because it would enable practitioners to take at least their basic dental license across state lines to serve the needs of patients across states.”

CSG has developed and convened a work group comprised of dental regulators, policymakers and dental industry experts to make recommendations for the compact. Once finalized later this spring, the measure is expected to be sent for public comment and stakeholder review. CSG will

collect this information and then share it with the task force for consideration. Once the compact has been finalized, it will be available for introduction by state legislatures that must sign onto the measure via legislation for it to take effect.

“This is a tangible opportunity to change the gateway to our profession to address and acknowledge the transient life and career of today’s dentist and to put into place – on our own terms – the collaboration between individual state jurisdictions,” said Chrissy Hammer.

Dan Hammer also noted that the effort, “has the potential to ease one of the countless stresses placed on military families.”

For additional information, contact AAOMS State Government Affairs at advocacy@aaoms.org. ■

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Congress off to slow start in 2022 while state

The second session of the 117th Congress convened Jan. 3, and Congress accomplished little in the first two months. Significant legislative achievements appear unlikely as members of Congress focus on re-election. Nearly all state legislatures are in session and addressing a wide range of issues, including several of interest to the specialty.

Federal level

Momentum has stalled in the U.S. Senate to pass President Biden's domestic agenda package, the Build Back Better Act (HR 5376), following passage in the House last fall. Regaining traction on the bill will be difficult in an election year. Congress has turned its attention to other priorities that include permanent funding for Fiscal Year 2022 federal spending, filling a U.S. Supreme Court vacancy, dealing with the impact of inflation on the U.S. economy, possible financial relief for small businesses impacted by the COVID-19 Omicron variant and legislation to better prepare the U.S. for future pandemics. Following are updates relevant to the specialty:

- The Resident Education Deferred Interest (REDI) Act was introduced in the Senate as S 3658 Feb. 16 by Senators Jacky Rosen (D-Nev.) and John Boozman (R-Ark.). If passed, the bill would allow medical and dental residents to defer their student loans interest-free while in residency, saving them tens of thousands of dollars in interest. AAOMS is leading a coalition of medical and dental provider groups to support the bill, which also was mentioned as a potential solution to alleviate healthcare workforce shortages in rural areas during a Feb. 10 Senate subcommittee hearing. The REDI Act also was introduced in the House last summer.

- The House Ways and Means Committee held a hearing Feb. 3 on healthcare equity gaps for people with disabilities and chronic conditions. AAOMS worked with a coalition to submit joint testimony following the hearing that calls attention to coding limitations that have severely impacted OMSs' ability to treat patients, including those with disabilities, in hospital outpatient settings and ASCs due to disproportionately low reimbursement rates.
- The National Institutes for Health, through the National Institute of Dental and Craniofacial Research, released its long-awaited report, *Oral Health in America: Advances and Challenges*, in December. The nearly 800-page report covers a comprehensive range of oral health-related topics and serves as a follow-up to *Oral Health in America: A Report of the Surgeon General*, released in 2000. Several AAOMS initiatives were highlighted in the report.
- The Centers for Disease Control and Prevention Feb. 10 released for comment updated draft guidelines for prescribing opioids. The previous guidelines from 2016 focused on chronic pain management, while the updated draft guidelines address the acute – as well as chronic – pain management. AAOMS is reviewing for comments, which are due April 11.

State level

States continue to deliberate on issues important to the specialty. A state legislative trend during the current session – following on the heels of the national debate about dental services in Medicare – is addressing the issue of Medicaid coverage and reimbursement. Driven largely by state dental



legislatures return with full agenda



Maxillofacial Surgeons (NCSOMS) has received many resources from AAOMS, has a lobbying team and is working with a broad coalition of in-state supporters, including the North Carolina Dental Society. AAOMS will provide updates as details become available and new developments arise.

■ **South Dakota** – The legislature passed HB 1103, which requires the state Medicaid program to provide a reimbursement schedule for chiropractic, dental and optometric services and provide additional funding for such services. As of press time, it awaits Gov. Kristi Noem's (R) signature. She is expected to sign.

associations, at least eight states as of press time are seeking to address adult dental coverage under Medicaid, including Alaska, Arizona, Hawaii, Maine, Maryland, Minnesota, New Hampshire and Texas. Additionally, increased reimbursement rates are being discussed in Illinois, Iowa, Kentucky, Mississippi, South Dakota and Vermont.

■ **North Carolina** – The state OMS society continues to defend the specialty and the needs of the patients it serves against anesthesia challenges. The North Carolina State Board of Dentistry held a hearing on a proposed regulatory package and the public comment period remained open through March 4, at which time the Board will decide how to proceed. As of press time, this decision had yet to be announced. The North Carolina Society of Oral and

OMSPAC update

OMSPAC raised \$396,669 from 16.07 percent of the membership as of December 2021. Additionally, OMSPAC has contributed \$94,000 to federal candidates so far in the 2021-2022 election cycle.

Visit [OMSPAC.org](https://www.omspac.org) to view member contribution totals and a list of candidates to whom OMSPAC has contributed. ■



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Topics: Job interviews, offers, employee posters

Q Our OMS practice recently expanded, and we're planning to interview for several new positions. What are some tips for interviewing, and are there any discussion areas to avoid?

A Prior to scheduling onsite interviews, consider conducting phone interviews to explain the requirements of the position and salary range to ensure no confusion and verify the candidate remains interested in the position.

During the onsite interview, be prepared to answer questions about the practice and explain the position in detail, including expectations, benefits and possibilities for career development. The objective for an employment interview is to verify the candidate's qualifications, understand his or her experience and determine character and compatibility with the practice.

Sample interview questions may include:

- What do you know about my practice and/or oral and maxillofacial surgery?
- Why are you interested in working in an OMS practice?
- If this is a billing position: What is your experience with practice management software?
- If this is a surgical assistant position: What have you done in the last year to improve your knowledge?

As for discussion areas to avoid, federal and state regulations prohibit employers from asking potential employees certain questions. Some examples include age, marital status, if they have or are planning to have children, child care arrangements, medical history and political or religious affiliations.

Additional information is available at EEOC.gov or through consultation with legal counsel.

Q We have interviewed several candidates for a position in our practice and would like to extend an offer. What information should be included?

A Before extending an offer, be sure you have contacted the candidate's references and received the results for any required background and drug tests. When you are ready to make the offer, you will want to call the candidate and present the offer, including salary, benefits, start date and any other items that may have been discussed during the interview process. An official offer letter should be sent as well and typically includes:

- Offered position and title
- Start date and hours
- Salary

- Agreed-upon benefits
- Other agreed-upon stipulations

As a courtesy, the practice may send letters or emails to candidates who are not being hired and thank them for their interest. Your legal counsel has information on any state and federal requirements for retaining applicant records.

In addition, the AAOMS CE on Demand library offers the webinar, Benefits of Proper Employee Selection: Recruiting, Hiring, Training and Incentivizing Valuable Employees, at AAOMS.org/CEOnline.



Q I am an owner of a small OMS practice and unsure which workplace posters I am required to post for my employees. Where can I find this information and how can I obtain these notices?

A The U.S. Department of Labor (DOL) enforces some statutes and regulations that require employers to post certain notices in the workplace for their employees. It is important to note these posting requirements vary by statute, so some employers may not be required to post a specific notice. For example, some small businesses may not be covered by the Family and Medical Leave Act and thus would not be subject to this posting requirement.

The elaws Poster Advisor, available through the DOL website, provides information on federal DOL poster requirements and can help employers determine which posters are required for display. Available in English and other languages, these notices may be downloaded for free and printed directly from the Advisor. Additional information is available at DOL.gov.

Each state Department of Labor has information on state requirements, and consulting with legal counsel is encouraged for further explanation. ■



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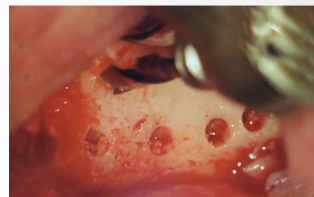
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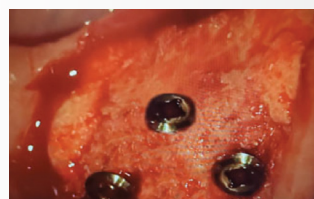
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The importance of inventory management

By Dr. Paul Bhatti, BSc, DDS, MD, FRCD(C)
Founder & CEO, Sowingo

As technologies continue to advance in the ever-evolving world of oral and maxillofacial surgery, practices have the opportunity to assemble data more efficiently when it comes to inventory management. Leveraging the use of procurement technology can directly affect and maximize your practice's growth potential and, most importantly, ensure you are meeting the needs of your valued patients more efficiently.

Dental implants represent the fastest-growing component in OMS practices. As the rate of interest from patients is continuously increasing, it is resulting in greater implant placement. Patient expectations are higher than ever before, and in order to deliver optimal results, practices need to effectively maintain their implant-related inventory and supplies. Running a successful OMS practice requires a multitude of supplies and efficient protocols, and manually ordering and tracking inventory can run the risk of becoming time-consuming and frustrating for OMS team members.

Daily inventory operations are laborious, but necessary, to generate profit and increase the value of your practice continuously. But if day-to-day inventory management tasks become overwhelming for team members, efficiencies can be missed and mistakes are likely to happen. OMSs should not take the out-of-sight, out-of-mind approach when it comes to ordering and managing implant-related supplies. With such an approach, practices risk making impulsive decisions that affect workflow functionality, productivity and overall profitability.

It is important to remember that the optimal OMS practice tends to spend approximately 5 to 8 percent of its total production on supplies annually, but this number can quickly climb upwards of 10 to 12 percent without proper systems in place. Growing an implant-focused practice can be expensive, so spend and usage patterns should always remain top-of-mind.

The price of implants for OMS practices ranges in cost and is affected by multiple factors. Some of the most prominent

factors that can, and will, increase operating costs include hiring appropriate implant-focused staff, purchasing implant-related equipment, incorporating implant planning protocols and implementing the necessary technology and software.

To effectively manage these significant expenses, it is imperative to implement an implant system flow, as streamlining the movement of implants in and out of the office is a determining factor of success. But what exactly does this mean?

An implant system flow is a well-planned and comprehensive strategy that meets the needs of a busy practice. With the right technology and straightforward processes in place, it can be beneficial for not only the bottom line of the practice, but the productivity of team members and patient satisfaction.

Keeping track of inventory is one of the most crucial factors that can ultimately help a practice succeed, and manually ordering and tracking supplies could be slowing you down. Most OMS practices have one team member dedicated to ordering and managing implant-related supplies. But this should not be a one-person job. Clear communication with team members provides ease-of-mind regarding inventory management, and computer-based inventory management takes it one step further.

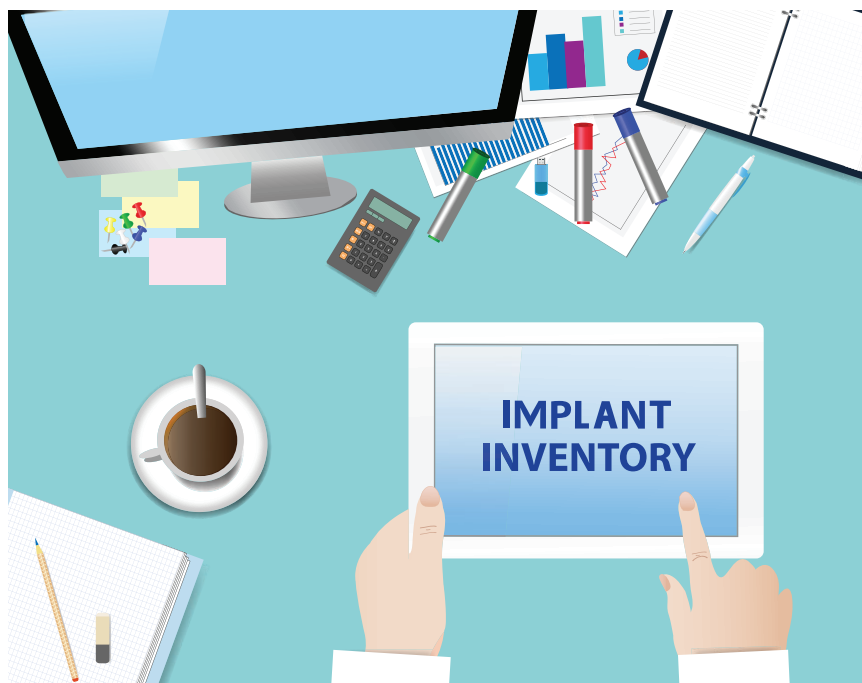
Cloud-based software solutions exist to alleviate the stress of proficiently managing inventory. An online inventory management system eliminates the need for team members to manually monitor what they receive and trust that suppliers deliver what was originally ordered. Without a proper ordering and tracking system in place, there is no way to monitor shipments and reconcile what was ordered is actually what was received.

Ask the following questions:

- What is the most significant expense in your practice?
- Does your practice buy more implants than it needs and spend more on supplies than it should?
- Is your practice properly managing supplies to control the overall spend and usage?

Having a clear understanding of inventory usage – as well as taking the time to reevaluate efficiencies – is crucial

continued on next page



for delivering excellent patient care and ensuring a practice remains profitable.

The following tips can assist OMS practices in finding the right balance in inventory management:

■ **Strongly consider implant management software** –

Software solutions exist for a reason and are designed to cost-effectively manage the supply of implant products with real-time metrics. Whatever system is chosen to enhance the functionality of the practice, it is imperative to ensure it has the capabilities to be intuitive and straightforward for team members to use. Inventory management software can offer a variety of features, such as real-time reporting for placing statistics, instant access to spending data and the ability to reserve implant products for specific patients.

■ **Leverage user-friendly software tools** – OMS practices must maintain a healthy balance of implants, abutments, membranes and bone grafts. When it is time to place an order, inventory management software allows users to easily view stock levels, order history, the price paid, usage patterns and anomalies, and total spend broken down by category, supplier or manufacturer. As more and more surgeons place implants, it becomes increasingly important for the office to track how many implants are being placed each month, year and the location in the jaw(s). An inventory management

system also can link products to patients with the corresponding lot number, implant system, size and type.

■ **Improve visibility by centralizing inventory** –

Centralizing the practice's inventory allows spending to be effectively monitored. An abundance of supplies is necessary for an OMS practice to operate smoothly, and an inventory management system can provide a real-time view of implant-related stock levels. Team members can update inventory counts – including implant lot numbers, expiration dates, locations and prices. These processes are user-friendly and specifically developed to streamline inventory protocols, which will increase overall productivity. As an example, a cloud-based inventory management system can allow team

members to scan dental supply boxes with a mobile barcode scanner to add, remove or find details for specific implant products within the centralized inventory location.

■ **Utilize technology** – Holding implant inventory is a reoccurring issue that OMS practices face. Investing in cutting-edge technology and equipment allows dental professionals the opportunity to provide implant patients with more accurate and faster treatment. CAD/CAM restorations have grown significantly in popularity, making patient care all the more straightforward. With the assistance of digital impressions, 3D models and surgical guides, treatment plans can be custom-tailored to each patient more efficiently and accurately. Though costly, implementing these advancements forces pre-planning and assessment of upcoming cases, limits guesswork on which implant products are needed and reduces the amount of implant-related stock the practice needs to carry.

■ **Understand the difference between minimal and optimal supply levels** – Obtaining optimal inventory levels is a continual challenge, but the process is more manageable with the help of an inventory management system and customized control alerts. The minimum inventory level should be designed to be the bare minimum level of supplies needed on shelves at all times. If implant-related stock



falls below the minimum level, it could potentially cause unwanted operational challenges. The minimum level is based on the available inventory storage space, inventory usage and the allocated budget. Optimal inventory levels are the ideal quantities of implant supplies that an oral surgery practice should have on its shelves at any given time. Setting a higher threshold for frequently used supplies can ensure the necessary amount of implant-related supplies are always on hand.

■ **Learn how to order around expiration dates** – If an overstock of implants unknowingly expires, it directly affects the practice workflow. It is essential to manage stock levels and be organized by ordering implant products in advance, but holding on to an oversupply of implants can prove problematic. There is a fine line between being prepared and being careless. If the appropriate amount of product is on-hand, the practice can offer treatment at the patient's earliest convenience. But if an oversupply of stock is left unattended and happens to expire, there is a potential for considerable monetary loss.

■ **Consider consignment purchasing** – Consignment purchasing refers to paying for implant products as they are used. Currently, 15 percent of all implants are purchased on consignment; however, this trend is likely to grow. This form of purchasing reduces the upfront capital investment, eliminates the risk of shelfware and ensures no monetary loss occurs from expired implants. That said, it is important to remember that consignment purchasing does not replace having an office implant system, especially when it comes to tracking and reporting. The practice must still closely monitor stock levels to ensure implant products are available for cases when necessary.

■ **Continuously strive to reduce stock waste** – It is well-known that an oversupply of inventory can make a practice lose money and creates a risk of not being able to provide patients with necessary treatment and procedures if stock is wasted. Again, alerts can notify practices in a timely fashion about implants reaching their predetermined expiration dates. This is highly beneficial because expired products will ultimately lead to untreated patients and an unwanted hit to the bottom line. Additionally, decreasing the number of implant brands your practice carries can significantly reduce the change of shelfware that, in turn, will limit the overall capital expenditure.

All in all, the reality is that running a profitable and productive practice means doing everything possible to save money on supplies. Implementing an effective inventory management workflow will enable you to fully control your usage, production and spending. ■

Sowing is an AAOMS Advantage Partner. To learn more about Sowing's inventory management system and exclusive benefits for AAOMS members, visit AAOMSAdvantage.org.



This is number 184 in a series of articles on practice management and marketing for oral and maxillofacial surgeons developed under the auspices of the Committee on Practice Management and Professional Staff Development and AAOMS staff. Practice Management Notes from 2002 to present are available online at AAOMS.org.

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Video submissions along with written entries are now accepted for the 2022 Share-the-Savings drawing. Three members whose names are drawn from all entries received by May 2 will be eligible to win FREE registration to the AAOMS Annual Meeting for 2022 or 2023 – their choice. Only entries received on the official Share-the-Savings entry form will be accepted for the contest. Visit the Share-the-Savings page on the AAOMS Advantage website for more details. To read entries from AAOMS members in last year's contest, visit the Our Stories and Reviews page on the AAOMS Advantage website.

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Proceed with caution: Tips for correct crosswalking

From a coding perspective, the concept of crosswalking can be defined as the process of mapping equivalencies among code sets, namely between CDT[®] and CPT[®]. It goes without saying, there are several key differences among these code sets, with CPT incorporating relative value units (RVUs), global surgical packages and the ability to utilize modifiers for increased specificity. Such taxonomic differences make crosswalking inherently complex, demanding both discretion and caution when doing so.

OMSs evaluate a wide range of conditions, and the treatment spans both dental and medical procedures. As such, the necessity often arises for OMSs to report codes for reimbursement under both dental and medical carriers.

Bone grafting is one such procedure. Often integral in cases of trauma, pathology, prosthetic reconstruction and surgical correction of congenital anomalies, several codes exist under both CDT and CPT that describe the various aspects involved, including the material used and the clinical indications of the case. Appropriate coding and documentation practices are essential to the reporting of and accurate reimbursement for services rendered – making it imperative for OMSs and allied staff to outline each of these considerations when coding and ultimately, crosswalking, for reconstructive bone grafts.

Bone grafts are classified as harvested or synthetic. Harvested or autogenous graft uses natural bony material derived from the same individual via donor and recipient sites

(autograft) or transplanted from one individual to another (allograft). Synthetic or nonautogenous (alloplastic) graft utilizes manmade material in lieu of bone.

The two CPT codes most frequently used for bone grafting are:

21210 Graft, bone; nasal, maxillary or malar areas (includes obtaining graft)

21215 Graft, bone; mandible (includes obtaining graft)

Commonly performed in concert with autogenous bone harvest from the anterior or posterior iliac crest, both codes are reflective of complex, reconstructive procedures carrying relatively high RVUs to compensate for the work involved. As such, determining appropriate CDT crosswalks should be determined based on the degree of intensity and/or level of reconstruction being performed.

An appropriate CDT crosswalk to 21210 and 21215 includes:

D7955 Repair of maxillofacial soft- and/or hard-tissue defect is appropriately reported for instances involving reconstruction of the jaws due to trauma or surgical correction of congenital defects rather than in the case of prosthetic restorations.

Coding tip: D7955 does not include obtaining grafting material; thus, *D7295 harvest of bone for use in autogenous grafting procedure* may be reported in addition to D7955 when bone is harvested.





of reconstructive bone grafts

When crosswalking to 21210 or 21215, the procedure code should be reduced with modifier – 52 (reduced service) if bone is not harvested and/or nonautogenous bone is used.

Potential CDT crosswalks for consideration are:

D7995 Synthetic graft – mandible or facial bones, by report

Coding tip: As this is a “by report” code, it can be used to report different types of graft materials, including allogenic material. Crosswalking D7995 to 21210 or 21215 should be limited to cases in which allogenic material is used, as there are more appropriate CPT® codes (i.e., 21125 or 21270) to report the use of synthetic or prosthetic material.

When crosswalking to 21210 or 21215, append modifier – 52 to clarify to the payer bone harvest did not take place. Although carriers will vary in terms of reimbursement guidelines, *99070 Supplies and materials* may be reported for the allogenic bone materials. An invoice for said materials should be included for claim submission.

D7950 Osseous, osteoperiosteal or cartilage graft of the mandible or maxilla – autogenous or nonautogenous, by report

However, note *D7950* should be crosswalked with caution. The use of clinical discretion is emphasized, as the appropriateness of crosswalking is based on both the intensity and degree of reconstruction. In the cases of small reconstructions, the CDT code itself would be more appropriate to report for dental and medical carriers.

Coding tip: The CDT code includes obtaining graft material. Thus, append – 52 to 21210 or 21215 when crosswalking if nonautogenous graft material is used.

A common coding mistake is the use of *D7953 bone replacement graft for ridge preservation – per site* as a crosswalk for 21210 and 21215. This code describes the preservation of ridge integrity at the time of extraction or implant removal and is *not* representative of complex reconstruction of the jaws. As such, *D7953* is not recommended as a crosswalk.

Outside reimbursement, accurate crosswalking from CDT to CPT is important for several reasons. Over the past decade, CMS claims data have shown a steady increase in the reporting of 21210 and 21215, with oral and maxillofacial surgery being the predominant specialty reporting these codes. Inappropriate coding can lead to overutilization of CPT codes with high RVUs and the potential to be flagged for fraudulent coding practices (e.g., upcoding). Given the increased financial scrutiny across the health sector, it is imperative for OMSs and their staff to employ best coding practices and be cognizant of the consequences of not doing so. ■

Coding decisions are personal choices to be made by individual oral and maxillofacial surgeons exercising their own professional judgment in each situation. The information provided to you in this article is intended for educational purposes only. In no event shall AAOMS be liable for any decision made or action taken or not taken by you or anyone else in reliance on the information contained in this article. For practice, financial, accounting, legal or other professional advice, you need to consult your own professional advisers. CPT® © 2022 American Medical Association Current Dental Terminology® (CDT) © 2022 American Dental Association. All rights reserved.



Bone grafting course, resources available

The complexities of coding for bone grafting are explored in the AAOMS Beyond the Basics Coding course with the next in-person session being held during Educational Weekend April 30 to May 1 in Denver, Colo. In addition, coding and reimbursement resources, including the complete series of AAOMS coding papers, are available at AAOMS.org/CodingReimbursement.

CLIA compliance and overview of 2022 Medicare

When rendering a complex dental procedure in the OMS office, certain lab tests – such as those for COVID-19, blood glucose or HbA1C – may be warranted to ensure the safety of a patient. OMSs may choose to perform testing in the office setting if permissible under their state’s Dental Practice Act and practicing within the scope of their license.

In addition, federal and state regulations – including obtaining a specific Clinical Laboratory Improvement Amendments (CLIA) certificate – may affect the OMS’s decision to provide such services.

Lab tests require CLIA waiver

CLIA creates quality standards for all laboratory testing to ensure the accuracy, reliability and timeliness of patient test results, regardless of where the test is performed. Three categories for testing have been established based on the complexity of the testing method: simple/waived, moderate and high. The more complicated the test, the more stringent the requirements.

To meet certain federal requirements, CLIA requires all facilities performing tests (regardless of insurance or lack of insurance) – including waived tests on “materials derived from the human body for providing information for the diagnosis, prevention or treatment of any disease or impairment of, or the assessment of the health of, human beings.” A medical or dental office that performs tests for these purposes is considered a laboratory under CLIA even if the office does not intend to bill for the service, and the office or facility must apply and obtain a certificate from the CLIA program that corresponds to the complexity of the test.

For example, OMS offices that wish to perform blood glucose, COVID-19 or INR testing would need to enroll in the CLIA program and obtain a Certificate of Waiver to meet such requirements. The Certificate of Waiver is a certificate issued to a laboratory to perform only waived tests, which include tests that are simple and have a low risk of erroneous results.

To enroll in the CLIA program, an office or facility must first apply, which involves paying fees and possibly being surveyed or inspected. All states have CLIA divisions administered by their departments of health. Therefore, applications would be submitted to the state in which the office or facility is located. States must follow federal CLIA guidelines at a minimum, but some states also may

have more specific and stringent regulatory requirements to follow.

CMS.gov provides many resources about the CLIA program, including how to apply for a CLIA certificate, certification costs, FAQs and a listing of state agency contact information, at [CMS.gov/Regulations-and-Guidance/Legislation/CLIA](https://www.cms.gov/Regulations-and-Guidance/Legislation/CLIA).

In addition, all claims submitted for testing services must include the laboratory’s CLIA number on the CMS-1500 form as a condition for payment. It is important to check with payers on policy coverage and billing guidelines. To provide OMS offices with coding and billing guidance for COVID-19 testing, AAOMS offers a paper at [AAOMS.org/COVIDCodingBillingPaper](https://www.aaoms.org/COVIDCodingBillingPaper).

2022 Medicare PFS Final Rule highlights

CMS published the final rule of the Medicare Physician Fee Schedule (PFS) on Nov. 19. As expected, many of the provisions in the proposed rule were finalized focusing on healthcare equity gaps, broadening the expansion of telecommunications, increasing vaccine reimbursement and expanding patient care to comprehensive quality health services.

The 2022 Medicare conversion factor was slated to be reduced by approximately 3.85 percent from 34.8931 (2021) to 33.5983 largely due to the expiration of the 3.75 percent increase implemented by the Consolidated Appropriations Act.

Other Medicare payment cuts totaling approximately 9.75 percent included:

- Expiration of the Medicare 2 percent sequestration fee stemming from the Budget Control Act of 2011.
- Implementation of a 4 percent Statutory PAYGO sequester resulting from passage of the American Rescue Plan Act.

However, Congress stepped in and passed legislation to halt the 2 percent sequestration fee through March 31 and suspend the 4 percent PAYGO sequestration cut and 3 percent of the 3.75 percent of the Physician Fee Schedule cut for one year.

The following is a recap of other initiatives finalized in the rule:

- Extension of the timeframe for the inclusion of services added to the Medicare telehealth services list on a



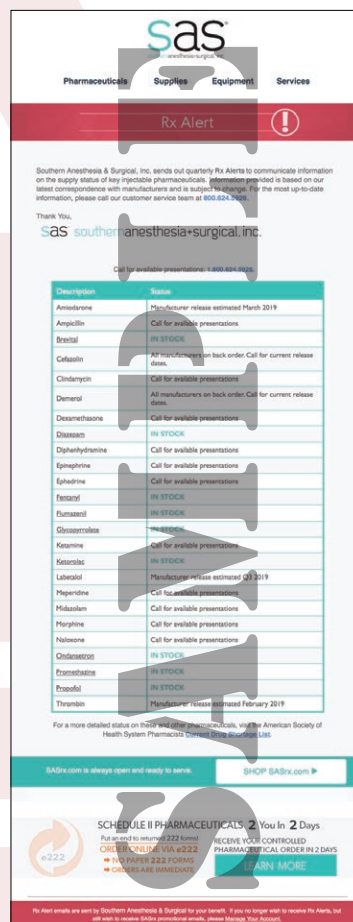
CMS final rule

temporary basis (Category 3) through the end of 2023.

- Delay of penalties for the appropriate use criteria program for advanced diagnostic imaging services to Jan. 1, 2023, or the first January following the end of the COVID-19 public health emergency, whichever is later.
- Clarification of definition under the primary care exception policy with residents restricted to using medical decision-making instead of time to select the level of E/M service.
- Residents may include time spent when the teaching clinician was physically present to determine the level of E/M service.
- A four-year initiative to gradually phase in revised clinical labor pricing updates with implementation to begin Jan. 1. The pricing update has an impact to the OMS specialty of a 4 percent reduction.
- Permanent payment increases for influenza, pneumococcal, hepatitis B and COVID-19 vaccine administration.
- Exceptions to the electronic prescribing for controlled substances (EPCS) mandate, including establishing a threshold in which prescribers would be considered compliant if they prescribe at least 70 percent of their Part D controlled substances prescriptions electronically (excluding those covered by an exception or waiver) and a delay in compliance deadline until Jan. 1, 2023. CMS also decided to enforce compliance by sending letters to prescribers violating the EPCS mandate, though no penalties will be imposed for noncompliance.
- Extension to the CMS Web Interface scheduled to sunset at the end of 2021 will now be delayed until 2025. ■

SAS Rx Alert

Drug shortages and manufacturer backorders affect your practice negatively every day. SAS provides the **SAS Rx Alert** to proactively communicate information that will assist your practice in staying in front of the difficulties created by shortages and backorders.



The screenshot shows the SAS Rx Alert website interface. At the top, there's a navigation bar with 'Pharmaceuticals', 'Supplies', 'Equipment', and 'Services'. Below this is a red banner with 'Rx Alert' and a warning icon. The main content area features a table with two columns: 'Description' and 'Status'. The table lists various drugs and their current status, such as 'Amidone' (Manufacturer release estimated March 2019), 'Ampicillin' (Call for available presentations), 'Bretilol' (IN STOCK), 'Cefazolin' (All manufacturers on back order. Call for current release date), 'Cindrylin' (Call for available presentations), 'Demerol' (All manufacturers on back order. Call for current release date), 'Dexamethasone' (Call for available presentations), 'Diazepam' (IN STOCK), 'Diphenhydramine' (Call for available presentations), 'Epinephrine' (Call for available presentations), 'Ephedrine' (Call for available presentations), 'Fentanyl' (IN STOCK), 'Flumazenil' (IN STOCK), 'Glycotherm' (IN STOCK), 'Kasane' (Call for available presentations), 'Kasane' (IN STOCK), 'Liberal' (Manufacturer release estimated Q3 2019), 'Meprobamate' (Call for available presentations), 'Midazolam' (Call for available presentations), 'Morphine' (Call for available presentations), 'Naloxone' (Call for available presentations), 'Ondansetron' (IN STOCK), 'Propofol' (IN STOCK), and 'Turanol' (Manufacturer release estimated February 2019). Below the table, there's a section for 'SCHEDULE II PHARMACEUTICALS' with a '2 You in 2 Days' banner, encouraging users to 'PUT UP AND TO ORDER 222 FORMS', 'CHECK YOUR STATUS VIA e222', 'FILL PAPER 222 FORMS', and 'CHECK ARE IMMEDIATE'. A 'LEARN MORE' button is also present.

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Explaining the Board certification journey

ABOMS delivered its largest examination at the 2022 Oral Certifying Examination Jan. 31 to Feb. 4 in Raleigh, N.C. Overall, 465 Candidates registered to take the examination, requiring an Examination Committee of 107 Examiners.

The Oral Certifying Examination is offered to Candidates once they have passed the QE and is the final step in becoming a Board-certified OMS. The examination tests a Candidate's clinically applicable knowledge and judgment in three sections – each with four 12-minute cases – for a total exam time of 144 minutes.

The Candidates who took the 2022 OCE will receive their results on their ABOMS profiles in April. Those who were successful will begin their Certification Maintenance journey as a Diplomate of ABOMS.

A Candidate's journey toward Board certification starts long before he or she sits for the OCE. A resident first learns about the Board at the start of his or her residency program. The Oral and Maxillofacial Surgery In-service Training Examination (OMSITE) is offered each year to accredited OMS training programs and designed to measure residents' knowledge base in the scope of the specialty.

In their final year, residents may start their Board certification journey by applying for the Qualifying Examination (QE) using the Fast Track application (or using the traditional application after graduation). ■



LSU Health
SHREVEPORT®

LSU Health Sciences Center Shreveport

LSU Health Sciences Center Shreveport is accepting applications for a Department Chair, a full-time faculty member in the Department of Oral and Maxillofacial Surgery (OMFS). We seek exceptional candidates with expertise in acute maxillofacial surgery, incomparable scholarly vocation, and fervor for resident, fellow, and student education. The selected incumbent will serve as the Chief Administrative Officer of the Oral and Maxillofacial Surgery Department, reporting to the Dean of the Medical School. He/She will implement and over-see programs of excellence in teaching, research and service.

The Chair will direct all aspects of recruitment and professional development for Oral and Maxillofacial faculty and staff. The incumbent will administer all fiscal matters, ensuring that all allocated funds and resources are utilized to the best interest of the Medical School and for the Oral and Maxillofacial Surgery Department. The selected candidate will serve as spokesperson to the Dean in matters of the Oral and Maxillofacial faculty concerns and development as well as working with the Oral and Maxillofacial faculty to provide courses to students.

The candidate must have an MD, DDS or, DMD degree and be eligible for board certification or be board-certified by the American Board of Oral and Maxillofacial Surgery. The candidate must possess or be able to obtain an appropriate license for clinical practice in the state of Louisiana.

Primary responsibilities include a dedication to patient care, fostering clinical instruction of residents and fellows, scholarly ingenuities, and service. This position is both clinical and academic. The candidate is enthusiastic about developing and fostering clinical practices in addition to conducting clinical and basic science research. Qualified candidates are encouraged to email their letter of interest and current CV to Carolyn Winner, carolyn.winner@lsuhs.edu

LSUHSC – Shreveport is an equal opportunity employer and all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law. LSUHSC-S has a strong commitment to principles of diversity, and in that spirit, actively encourages applications from groups underrepresented in medical education.

Things to know about life insurance policies

By Shawn M. Johnson, ChFC, CLU, CLTC

Vice President, Business Development

Treloar & Heisel

It's important to review life insurance periodically. Consider your coverage amounts and types and also understand the ownership and beneficiary characteristics of personal and business policies.

For those who may need a refresher, there are typically three parties to the life insurance policy: insured, owner and beneficiary.

■ **Personal coverage** – Personal coverage is typically set up to benefit a loved one. The primary purposes are to replace income or provide a legacy. Typically, these policies are owned by you, so you are the owner and the insured. The beneficiary may be a loved one or a trust. As the owner, you can change beneficiaries as needed, and it is important to contact your insurance advisor to update beneficiary designations if your situation changes.

For U.S. citizens, life insurance policy death benefit proceeds are typically received income tax-free. However, when you are the policy owner, the policy's death benefit may be included in your estate from an estate tax perspective. With potential changes in estate tax laws, you may want to pay special attention to this and review or update your life insurance portfolio with a licensed advisor and review with an accountant and attorney.

An Irrevocable Life Insurance Trust (ILIT) also can own your policy. The ILIT generally becomes the policy owner and beneficiary. In most instances when your policy is owned by an ILIT, you lose control of the policy, and it becomes difficult to make changes. The policy's death benefit, however, may be excluded from your estate for estate tax purposes.

If you have a policy and would like to transfer ownership to the ILIT, be aware time – called a “lookback period” – must pass before the policy is considered fully owned by the ILIT. Other options to exclude the policy from your estate may be to have your adult children or a charity own the policy, depending on your desires for the benefit's use. Consult your accountant and attorney.

■ **Business uses** – There are two main uses for life insurance in your practice: to help secure lending or to fund a buy-sell agreement. If a bank requires life insurance to approve lending, it may ask for a collateral assignment of a policy, which does not



involve a change in ownership or beneficiary. The policy would typically be set up as a personal policy as usual with your named beneficiary. You sign documents indicating you are collaterally assigning the policy to the lender. If you were to pass away, the bank gets the balance of what is owed to it from the death benefits. The remainder of the proceeds go to your beneficiary.

There are three types of life insurance arrangements for a buy-sell agreement: a cross-purchase plan, entity purchase or stock redemption plan, and trustee cross-purchase plan.

In a cross-purchase plan, each business owner is the policy owner and beneficiary, insuring the other owner's life.

In an entity purchase or stock redemption plan, the entity is the owner and beneficiary of a policy insuring each owner.

For a trustee cross-purchase plan, a trustee is set up to be the owner and beneficiary of a policy insuring each owner.

It is suggested you consult the attorney that created your business entity for advice on an appropriate plan for your practice. Anytime you change ownership of a policy, consult an accountant and a licensed insurance advisor to discuss potential transfer-for-value rules that may be in place.

Life insurance can be a versatile tool and should be implemented knowledgeably by insurance advisors who understand your specific personal and professional needs. ■

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DENTISTS ARE RETIRING LATER*

How will this impact your exit strategy?

You've had to invest years and make significant sacrifices to get to this point in your career.

If you are a practice owner, you have the added job of running a small business, with all the highs and lows of managing people and resources.

With six decades of experience guiding dental professionals in important aspects of their financial life, we can help you make informed decisions so that you can move a step closer to the retirement you envision.

Let's set up a time to speak.

800.345.6040

info@treloaronline.com

* According to the ADA Health Policy Institute, on average, in 2017 a dentist retired at 68.9 years, while in 2001 a dentist retired around age 65.
Source: www.ada.org/en/publications/ada-news/2018-archive/august/hpi-average-dentist-retires-later



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Insurance products offered separately through Treloar & Heisel Inc.



CONTINUING EDUCATION



Orthognathic webinar series set

A two-part Clinical webinar series on orthognathic surgery will launch in March. Combined TMJ-orthognathic Surgeries is scheduled for 6 p.m. CT March 16. A Fresh Look at Intraoral Vertical Ramus Osteotomy will be held at 6 p.m. CT March 23. Registration is available at AAOMS.org/CEonline.

ANNUAL MEETING



Abstracts, posters due by June 1

The 2022 Annual Meeting oral abstract and poster application will be available March 7 to June 1. The new application period is intended to allow for the most up-to-date research.

During this period, the Resident Scientific Award application also will be available. The applications will be posted at AAOMS.org/Speakers.

MEMBERSHIP



Second dues notices sent

Second dues notices were mailed in January to those who have yet to renew for the 2022 membership year. Professional staff previously sponsored for allied staff membership were included on the first and second notices for OMS members. Staff memberships not renewed by Feb. 28 were dropped.

Third notices for OMS members were scheduled to be mailed in April and, per AAOMS policy, will include a late fee.

Members can renew through the Member Center at AAOMS.org. Email membership@aaoms.org for more information or to receive another copy of the annual statement.

ADVANCED EDUCATION



Clinical trials course May 4–6

The AAOMS Clinical Trials Method Course – being held May 4 to 6 at the OMS Institute for Education and Innovation in Rosemont, Ill. – will provide OMS faculty, residents, fellows and private practitioners a broad overview of research methodology and clinical trial design.

The expectation is four clinical trial study proposals will be developed, submitted for funding and ultimately implemented.

Attendees will participate in one of four breakout sessions: dentoalveolar/anesthesia, TMD/facial pain, pathology/reconstruction and craniofacial trauma/orthognathic/facial deformities.

More information is available at AAOMS.org/ClinicalTrials.

ANNUAL MEETING



Recordings available for purchase

Recordings of 2021 AAOMS Annual Meeting sessions are available for purchase at AAOMS.org/Recordings. The full set contains more than 100 sessions, and discounted pricing is offered for meeting attendees.

CONTINUING EDUCATION



Webinar applications open

AAOMS is always accepting applications for webinar presentations. The application is available at AAOMS.org/Speakers. Questions can be emailed to kbrower@aaoms.org.

ADVANCED EDUCATION



AAOMS helps with single-, dual-degree applications for ACS fellowship

The American College of Surgeons (ACS) and AAOMS forged a way for single-degree OMSs who meet eligibility criteria to apply for full fellowship in ACS.

AAOMS initially reviews OMS applications for eligibility of the waiver of the College's standard application requirements, allowing candidates the opportunity to strengthen their application if necessary.

Single-degree OMSs may apply more than once to AAOMS for consideration of the waiver. They can submit the following materials to acsfellowship@aaoms.org by June 1:

- Current CV.
- Proof of Diplomate status with ABOMS. Applicants must have achieved Diplomate status a minimum of 12 months before the ACS application deadline, which is typically Dec. 31.
- Proof of a DDS or DMD. (A scanned copy is required.)
- Proof of a full and unrestricted dental or medical license in the state of practice.
- Three letters of recommendation from current ACS fellows (who may be OMSs or otherwise). A directory of fellows is at FACS.org.
- Proof of current appointment on the surgical staff of a hospital with privileges as defined by the OMS scope of practice.

- A consecutive 12-month listing of the procedures performed within the previous 24 months as a surgical attending with responsibility for the applicant's portion of the patient's care. The surgical list should meet specific criteria, available at AAOMS.org/member-center/ACS-fellowship#criteria. The committee will assess for an appropriate volume and combination of cases.

Applicants should note whether they are single- or dual-degree.

AAOMS also provides case log review for dual-degree applicants, who will still directly apply to ACS. Their case logs should be sent to acsfellowship@aaoms.org by May 1 each year.

Acceptance of a waiver does not guarantee fellowship in ACS. For more information about the waiver application, email acsfellowship@aaoms.org. Applicants are asked to not directly contact ACS about the preliminary application.

Additional information is available at FACS.org/member-services/join/fellows and AAOMS.org/member-center/ACS-fellowship.

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MEMBERSHIP



Senior residents urged to join AAOMS before program completion

AAOMS encourages senior residents to become candidates for active membership. Their resident membership expires July 1. Candidates for active membership can apply at [AAOMS.org/Apply](https://aaoms.org/Apply).

When senior residents apply for AAOMS candidate status before completing OMS training, the first year of membership dues are waived through the end of 2023. AAOMS allows a graduated dues discount for subsequent years. In 2024, one-third of the full-dues level established for AAOMS members will be billed. In 2025, two-thirds of the full-dues level will be billed. The full-dues level will not be billed until 2026.

AAOMS candidates practicing as sole faculty, Public Health Services, Indian Health Service, Veterans Affairs or active duty in the federal services are eligible for additional discounts.

Senior residents entering fellowship programs are encouraged to apply for candidacy early to receive an

extended graduated dues discount through the duration of the fellowship program. Membership dues will not be billed until the next membership year after completion of the fellowship program.

After completing the candidate application, an applicant should forward a copy of his or her fellowship letter (with dates of duration) to membership@aaoms.org to qualify for the extended dues discount.

OMSs practicing outside the United States are eligible for affiliate candidate status through application at AAOMS.org/Affiliate. Although ineligible for the graduated dues discount, affiliate candidates have substantially reduced membership dues.

Additional information is available through Membership Services by emailing membership@aaoms.org or calling 800-822-6637.

ADVANCED EDUCATION



Applications due April 1 for Faculty Educator Development Award

AAOMS is accepting applications for the Faculty Educator Development Award (FEDA) until April 1.

The award was established to support individual faculty members by:

- Encouraging promising, young OMSs to choose a long-term faculty career in the specialty.
- Inspiring promising OMS faculty members who have been on faculty for up to five years to continue a faculty career in the specialty.
- Providing a financial incentive to Commission on Dental Accreditation (CODA)-accredited residency

training programs to retain current faculty and recruit new faculty.

Upon adherence to the FEDA guidelines, the recipient will be awarded \$40,000 annually for three years for a total disbursement of \$120,000. In addition, the faculty member's institution will receive disbursements of \$5,000 for three years for a total disbursement of \$15,000. All funds disbursed to the institution must be used solely to support the FEDA recipient.

FEDA applications and guidelines are available at AAOMS.org/FEDA.

MEMBERSHIP



Office Anesthesia Evaluation recertification due for select members

Office Anesthesia Evaluation (OAE) recertification is due for current members and fellows who last completed an OAE or exemption form in 2015 or 2016 (or 2013 or 2014 if practicing in Delaware and New Jersey).

Those grandfathered from OMS state society membership, and the OMS state society is unable to evaluate, should contact the AAOMS Department of Professional Affairs for scheduling assistance. Members who are eligible for exemption of OAE must reconfirm exemption every five years.

Confirmations of successful completion of the re-evaluation are due from OMS state societies to AAOMS Membership Services no later than July 31. Noncompliance with the OAE Program will result in discontinuation of AAOMS membership.

Additional information is available through Membership Services by emailing membership@aaoms.org or calling 800-822-6637.

PRACTICE MANAGEMENT



Educational Weekend scheduled

AAOMS Educational Weekend is being held April 30 to May 1 at The Westin Denver Downtown in Denver, Colo.

The program will feature:

- Advanced Protocols for Medical Emergencies in the Oral and Maxillofacial Surgery Office (APME)
- Beyond the Basics Coding Workshop
- Practice Management Stand-Alone Meeting

More information is available at AAOMS.org/EduWeekend.

CONTINUING EDUCATION



Complimentary courses online

AAOMS offers a complimentary CE on-demand course to members each quarter. This quarter's course, available until March 31, is Emerging Technologies for Facial Cosmetic Surgery. Next quarter's course, available April 1 to June 30, is Management of the Ramus Condyle Unit in the Patient with Hemifacial Microsomia.

More information is available at AAOMS.org/CEonline.

PRACTICE MANAGEMENT



Online coding courses provided

AAOMS offers online coding and billing courses to navigate a range of topics with resources and guidance. Course access is immediate and can be accessed through AAOMS.org/CEonline. Courses include:

- Basic Coding for OMS
- Beyond the Basics Coding
- ICD-10-CM for OMS
- Medical Terminology and Oral Facial Anatomy 101
- Medicare 101 for OMS
- OMS Billing

MEMBERSHIP



AAOMS Connect assists networking, interest groups

AAOMS Connect – an online community for AAOMS members – features a discussion forum, private messaging and more.

AAOMS Connect is a resource to network with colleagues or become involved in Clinical and Special Interest Groups (CIGs and SIGs) beyond the AAOMS Annual Meeting.

To access AAOMS Connect, members log in to AAOMS.org, click on AAOMS Connect under Member Center and click Join

Group to request access to the CIGs. Discussions are available through the Forum tab on the top-most navigation bar. In each CIG/SIG thread, the corresponding officers and liaisons are listed.

Take the Community Tour at community.aaoms.org

CONTINUING EDUCATION



CE online offers courses, webinars

CE on-demand courses and live webinars have been added to CE online by AAOMS at AAOMS.org/CEonline.

CE online by AAOMS offers a wide variety of subject matter for the OMS, resident and professional staff to participate at their own pace, wherever and whenever convenient. Special member pricing is offered.

Questions and feedback can be emailed to conteducate@aaoms.org.

MEMBERSHIP



Members can update profiles

The AAOMS annual dues statement included member profile and membership directory verification forms.

Members are asked to carefully review this information to ensure Association records are current.

All addresses, emails, websites, phone and fax numbers should be reviewed and noted for inclusion in (or exclusion from) the AAOMS.org members-only directory and the public-facing MyOMS.org Find a Surgeon search.

The AAOMS.org members-only directory and MyOMS.org Find a Surgeon search are updated in real time. AAOMS encourages members to use the AAOMS.org My Account page to update their profiles and contact information whenever there is a change.

COMMUNICATIONS

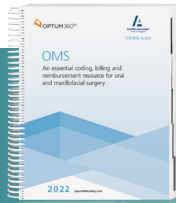


Story subjects needed

AAOMS Today is exploring publishing stories about members who attended school for non-medical education (pertaining to such topics as politics, law or business), members who transitioned from private practice to the military and members who are involved in podcasts about topics other than oral and maxillofacial surgery.

In addition, *AAOMS Today* is seeking stories for its Giving Back section to recognize AAOMS fellows and members who volunteer in the United States and abroad.

Those interested in participating in any of these stories can email information to communications@aaoms.org.



AAOMS
MEMBERS
SAVE 20%
ON SELECTED
ITEMS*

Increase coding efficiency, streamline workflow and maximize revenue for your OMS practice

The Coding Guide for OMS and EncoderPro.com are your one-stop coding, billing and documentation guides for submitting claims with greater precision and efficiency.

Both resources contain the latest 2022 ICD-10-CM, HCPCS Level II, CDT and CPT® code sets, as well as Medicare payer information, CCI edits, helpful code descriptions and clinical definitions.

Take advantage of an exclusive EncoderPro.com Professional and Dental Codes Add-on bundle price for AAOMS members.

Order now using promo code **AAOMSMBR** to receive your 20% discount.*

optum360coding.com/AAOMS 1-800-464-3649, option 1

*20% discount applies to the 2022 and 2021 editions of Coding Guide for OMS, ICD-10-CM Expert for Physicians, ICD-10-PCS Expert, Dental Customized Fee Analyzer and Customized Fee Analyzer, as well as EncoderPro.com and FeeAnalyzer.com. EncoderPro.com Professional and Dental Codes Add-on \$399.95 bundle pricing applies when both items are purchased.

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Practice Quotient, Inc., a national managed dental care contract negotiation firm, helps AAOMS members increase practice revenue by negotiating fair market discounts with third party payors (i.e. insurance carriers).



Visit www.practicequotient.com to learn more about this AAOMS Advantage Partner, or call 470-592-1680.



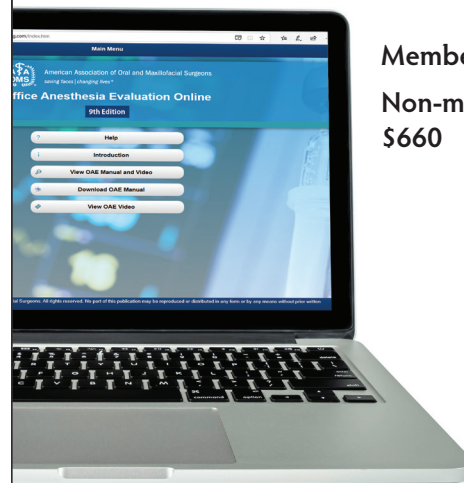
Oral and maxillofacial surgeons:
The experts in face, mouth and
jaw surgery*

Latest Edition!

Office Anesthesia Evaluation Manual Online now available

The web-based version of the popular *Office Anesthesia Evaluation Manual*, 9th Edition, combines the essential manual with nearly a full hour of demonstration videos. ©2019

Be sure your office is prepared with the latest recommendations for anesthetic administration and complications.



Member: \$220

Non-member: \$660

Order at **AAOMSstore.com**

CALENDAR

AAOMS Opportunities

2022

March 27, 28 and April 2, 3

Office-Based Emergency Airway Management (OBEAM) module

OMS Institute for Education and Innovation,
AAOMS headquarters in Rosemont, Ill.
AAOMS.org/OBEAM

April 6

Day on the Hill

Virtual
AAOMS.org/DayontheHill

April 30–May 1

Educational Weekend

The Westin Denver Downtown in Denver, Colo.

- Advanced Protocols for Medical Emergencies in the Oral and Maxillofacial Surgery Office (APME)
- Beyond the Basics Coding Workshop
- Practice Management Stand-Alone Meeting

AAOMS.org/EduWeekend

May 1, 13, 14

Office-Based Emergency Airway Management (OBEAM) module

OMS Institute for Education and Innovation,
AAOMS headquarters in Rosemont, Ill.
AAOMS.org/OBEAM

May 4–6

Clinical Trials Methods Course

OMS Institute for Education and Innovation,
AAOMS headquarters in Rosemont, Ill.
AAOMS.org/ClinicalTrials

June 5

Office-Based Emergency Airway Management (OBEAM) module

OMS Institute for Education and Innovation,
AAOMS headquarters in Rosemont, Ill.
AAOMS.org/OBEAM

June 6

Anesthesia Patient Safety Conference

OMS Institute for Education and Innovation,
AAOMS headquarters in Rosemont, Ill.
AAOMS.org/PatientSafety

Aug. 6, 7, 20, 21

Office-Based Emergency Airway Management (OBEAM) module

OMS Institute for Education and Innovation,
AAOMS headquarters in Rosemont, Ill.
AAOMS.org/OBEAM

Sept. 12–17

104th AAOMS Annual Meeting, Scientific Sessions and Exhibition

New Orleans, La., and online
AAOMS.org/AnnualMeeting

Sept. 15, 16, 17

Office-Based Emergency Airway Management (OBEAM) module

AAOMS Annual Meeting in New Orleans, La.
AAOMS.org/OBEAM

Oct. 8, 9, 22, 23 and Nov. 12, 13

Office-Based Emergency Airway Management (OBEAM) module

OMS Institute for Education and Innovation,
AAOMS headquarters in Rosemont, Ill.
AAOMS.org/OBEAM

Dec. 1

Office-Based Emergency Airway Management (OBEAM) module

OMS Institute for Education and Innovation,
AAOMS headquarters in Rosemont, Ill.
AAOMS.org/OBEAM

Dec. 1–3

Dental Implant Conference

Sheraton Grand Chicago, Chicago, Ill.
AAOMS.org/DIC



Regional & State Society Meetings

The following regional and state society meetings were planned as of press time. Each meeting website is listed for updates.

2022

April 2–3

New York State Society of OMS Meeting

Weill Cornell Medical College in New York, N.Y.
NYSSOMS.org

April 7–10

Southwest Society of OMS Combined Annual Meeting

The Broadmoor in Colorado Springs, Colo.
SWSOMS.com

April 9

Wisconsin Society of OMS Annual Meeting

The American Club in Kohler, Wis.
WSOMS.net

April 26–May 1

Southeastern Society of OMS Annual Meeting

The Montage Palmetto Bluff in Bluffton, S.C.
SSOMS.org

April 27

Middle Atlantic Society of OMS Spring Educational Meeting

The Hotel at Turf Valley in Ellicott City, Md.
MASOMS.org/meetings-and-events.html

April 30–May 1

California Association of OMS 22nd Annual Meeting

The Westin San Diego Downtown in San Diego, Calif.
CALAOMS.org

May 21–22

Ohio Society of OMS Annual Scientific Meeting

Renaissance Columbus Westerville-Polaris Hotel in
Westerville, Ohio
OH-OMS.org/aws/OHOMS/pt/sp/meetings

July 7–9

Florida Society of OMS Summer Meeting

The Breakers Palm Beach in Palm Beach, Fla.
FSOMS.org

July 15–17

Colorado Society of OMS Summer Meeting

Hyatt Vail in Vail, Colo.
CO-OMS.org

Aug. 12–14

Georgia Society of OMS Summer Meeting

Ritz Carlton Lake Oconee in Greensboro, Ga.
GA-OMS.org

Oct. 21–23

Florida Society of OMS Annual Meeting

Marriott Water Street in Tampa, Fla.
FSOMS.org/category/meetings

Nov. 2

Middle Atlantic Society of OMS Fall Educational Meeting

The Hotel at Turf Valley in Ellicott City, Md.
MASOMS.org/meetings-and-events.html



OMSNIC Empowers OMS with Full Scope Practice Protection.

Only OMSNIC offers OMSGuard®, a liability insurance program dedicated exclusively to the complex practice of oral and maxillofacial surgery. Since OMSNIC is owned by OMS and only insures OMS, we have an understanding of the specialty that other insurance companies can't match. Practicing OMS oversee OMSGuard and review member claims, unlike other insurance companies who don't view the OMS practice from a peer perspective. Join OMSNIC and you can focus on patient care knowing that your practice is protected by the comprehensive coverage designed just for you. **800-522-6670** [omsnic.com](https://www.omsnic.com)

OMSNIC
DEFENDING THE SPECIALTY



Photo: Chris De La Mater, DDS, oral and maxillofacial surgeon at Associated Oral & Maxillofacial Surgeons, Maple Grove, Minnesota.





Matthew Nielson elected OMSNIC President/CEO



Mr. Nielson

Matthew Nielson, JD, CPCU, has been elected President and Chief Executive Officer of OMS National Insurance Company (OMSNIC). He was elected to the Board of Directors of OMSNIC and its subsidiary, Fortress Insurance Company, in 2018. Nielson had served as the Senior Vice President of

Claims and Underwriting since 2015.

Dr. Zajkowski appointed to Joint Commission on National Dental Examinations



Dr. Zajkowski

Mark Zajkowski, DDS, MD, MBA, FACS, has been appointed to the Joint Commission on National Dental Examinations.

Dr. Zajkowski has served as President of the American Board of Oral and Maxillofacial Surgery in 2017 and the Maine Dental Association Board in 2007.

He also was appointed by Maine Gov. Paul LePage to serve on the Board of Dental Practices.

To submit member news, email communications@aaoms.org.



CAREERLINE

Looking for a new career in OMS?

Search job postings for FREE!

- Create and post your CV – confidentially, if desired.
- Review job postings and respond online.
- Receive emailed "Job Alerts" as new jobs are posted.

Access to OMS jobs at your fingertips!

Now optimized for easy use from your mobile device.

- See job details at a glance.
- Apply for jobs from your phone.
- Search by keyword, location, company and more.
- Create and receive notifications when jobs match your criteria.

Your all-access pass to OMS employment opportunities

Expanding or selling your practice?

Post jobs for a nominal fee and be accessed by popular websites and search engines, including Google, Yahoo! and MSN.

- Target your search.
- Review the CV database.
- Receive candidate responses immediately.
- Sign up for email alerts.

Get started today!

Visit **AAOMS.org** and click on Career Line or call **888-884-8242**.



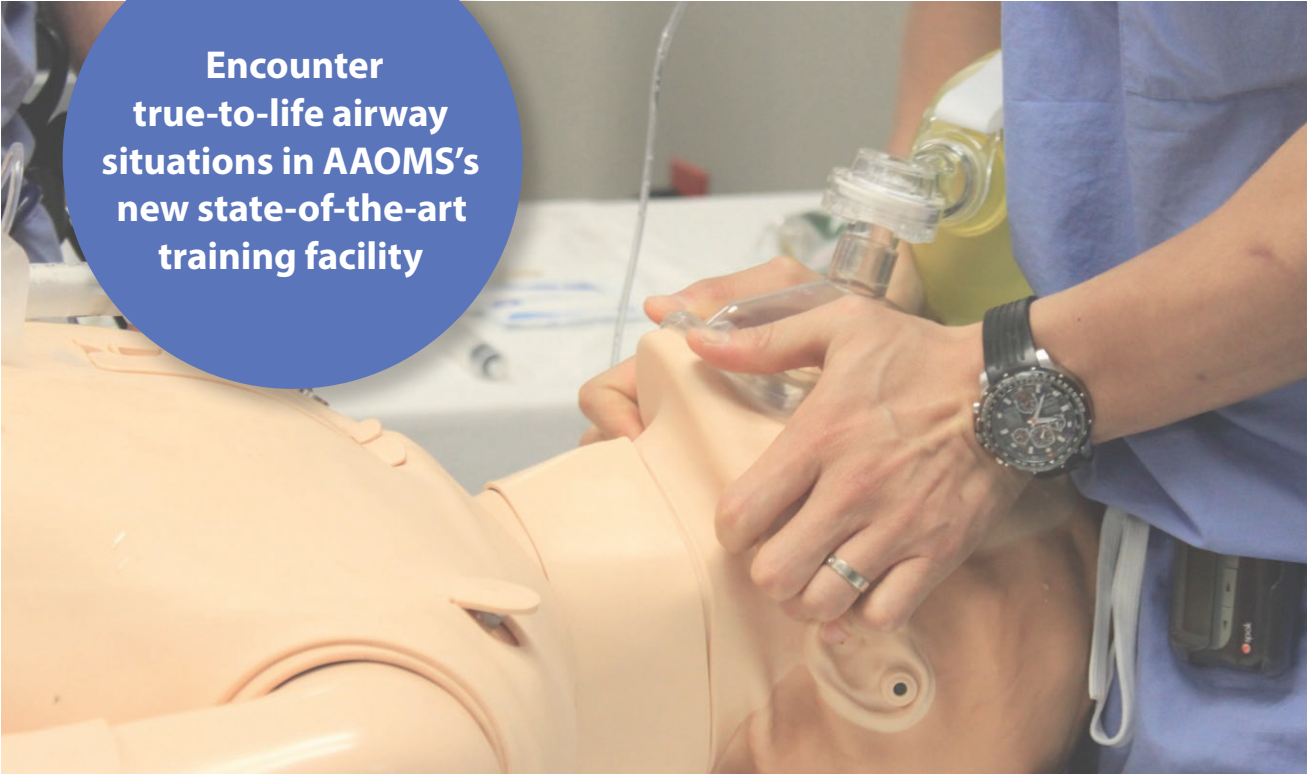


AAOMS National Simulation Program

Office-Based Emergency Airway Management (OBEAM) Module

Sign up to undergo four hours of advanced simulation training of anesthesia techniques through intensive, real-life experiences.

Registration fee is \$800 per member. Each module will be held at the OMS Institute for Education and Innovation at AAOMS headquarters in Rosemont, Ill.



Encounter
true-to-life airway
situations in AAOMS's
new state-of-the-art
training facility

**Visit AAOMS.org/OBEAM
to view the schedule and register.**



Faculty Positions

Alabama

University of Alabama at Birmingham School of Dentistry, Department of Oral & Maxillofacial Surgery Undergraduate Director Position 2021. This position requires board certification or board eligibility in the field oral and maxillofacial surgery. Eligible individuals must have experience in the didactic and clinical aspects of educating dental students. This individual must be proficient in performing risk assessment of patients, deep sedation techniques and dentoalveolar procedures. These procedures must include surgical extraction of teeth, removal of impacted wisdom teeth, placement of dental implants, bone grafting for alveolar ridge reconstruction and biopsy procedures. Academic rank will be based on previous academic accomplishments and experience. The primary responsibility of this position is to educate undergraduate dental students in the clinical aspects of oral and maxillofacial surgery. The job requires for coverage of the undergraduate dental students and oral and maxillofacial surgery residents in the UAB School of Dentistry Oral and Maxillofacial Surgery Clinic for at least three days per week (3-5/days per week). The individual will have the opportunity to have a clinical practice that is not more than two days per week. Additional responsibilities are to help shape the undergraduate curriculum and participate in the teaching of undergraduate didactic dental student courses. The final terms of the position are negotiable. Application: Eligible individuals should send a copy of their current curriculum vitae to Dr. Patrick Louis via email: plouis@uab.edu or contact Ms. Karen Waits: kwais@uab.edu, 205-934-5334.

Georgia

Emory University School of Medicine in Atlanta is seeking applications for a full-time faculty position in the Division of Oral and Maxillofacial Surgery at the Assistant or Associate Professor level. Responsibilities include patient care, didactic education and clinical teaching of residents and research. The position includes responsibilities at Grady Memorial Hospital, The Emory Clinic, Emory University Hospital, Emory University Hospital Midtown Emory and Children's Healthcare of Atlanta. The candidate should have an interest in major oral and maxillofacial surgery with a particular interest in trauma management and is expected to actively participate in the clinical and research activities. The individual will be expected to participate in the Emory oral and maxillofacial faculty practice. Collaborative opportunities are available with area colleges and universities and public health agencies. The position requires a DDS/DMD degree from a CODA-accredited U.S. or Canadian dental school and completion of a CODA-approved oral and maxillofacial surgery residency program. The candidate should be board-eligible or -certified by the American Board of Oral and Maxillofacial Surgery. Candidates must also be eligible for an unrestricted Georgia dental

or medical license. Salary and academic rank are commensurate with experience and qualifications. Emory University is an Equal Opportunity/Affirmative Action Employer. Applicants should submit their curriculum vitae to: Dr. Gary Bouloux, Chief, Oral and Maxillofacial Surgery, The Emory Clinic, 1365 Clifton Rd., Suite B-2300, Atlanta, GA 30322, email: gfboulo@emory.edu.

Massachusetts

The Department of Oral and Maxillofacial Surgery at the Boston University Henry M. Goldman School of Dental Medicine invites applications for a full-time faculty position. The position requires graduation in oral and maxillofacial surgery from a CODA-accredited program. Applicants must be eligible for full, independent dental licensure in the Commonwealth of Massachusetts. Primary responsibilities will include didactic and clinical education of dental students and OMS residents in an outpatient clinical setting with emphasis on ambulatory anesthesia, dentoalveolar procedures and implant surgery. There are no required operating room or on-call responsibilities. Multiple opportunities for scholarly activity and faculty development are readily available on campus. Interested candidates should contact Dr. Pushkar Mehra via email at: pmehra@bu.edu. Boston University is an equal opportunity employer and encourages applications from minorities and women.

Mississippi

The University of Mississippi Medical Center's School of Dentistry is conducting a search for a full-time faculty position in the Department of Oral Maxillofacial Surgery and Pathology. Applicants must have a DDS/DMD degree recognized by ADA, have successfully completed advanced training in Oral & Maxillofacial Surgery from an accredited institution, be eligible for Mississippi licensure and be board-certified or board-eligible by ABOMS. Responsibilities include didactic and clinical instruction for residents and dental students, participation in clinical practice and research. Candidates with additional fellowship training in Orthognathic and TMJ Surgery are preferred. Interested applicants should submit a letter of interest, curriculum vitae to Ravi Chandran, DMD, PhD, FACS, at rchandran@umc.edu.

Nebraska

The University of Nebraska Medical Center (UNMC) College of Dentistry seeks applications for a full-time position at the assistant/associate professor level. Responsibilities include training and supervision of undergraduate dental students and postgraduate residents, local anesthesia, surgery, sedation and medical emergencies. Qualified candidates must have a DDS or DMD degree from an ADA-accredited college or school of dentistry, be eligible for a Nebraska dental and moderate sedation license and be board-

eligible or -certified by the American Board of Oral and Maxillofacial Surgery. Candidates with international dental degrees with OMFS specialty training from an ADA-accredited school are also eligible. One day a week intramural or outside the college private practice opportunities are available. Screening of applications will begin immediately with an expected hire date on/before May 1, 2022. (Inquiries regarding the position may be sent to jbavitz@unmc.edu.) Please note that to be considered for this position, applicants must submit an application and supporting documentation (CV and cover letter) via UNMC's online employment website, UNMC.peopleadmin.com/postings.

New Jersey

Rutgers School of Dental Medicine Department of Oral and Maxillofacial Surgery is searching for a full-time surgeon at the Assistant or Associate Professor level on clinical track. Responsibilities will include staffing the undergraduate and resident clinics as well as participation in the didactic curriculum offered by the department. The ideal candidate must have completed an accredited OMS training program and be eligible for New Jersey dental licensure with board eligibility/certification. Faculty will be expected to participate in scholarly activities and will have the opportunity to participate in the intramural faculty practice. Position will remain open until filled. Salary and rank will be commensurate with experience and training. Rutgers School of Dental Medicine is a component of Rutgers, The State University of New Jersey, and is located on the Newark Campus of Rutgers Biomedical and Health Sciences Division, along with the Rutgers Medical School, the Graduate School of Biomedical Sciences, the School of Health Related Professions and the School of Nursing. Rutgers School of Dental Medicine is an Affirmative Action/Equal Opportunity employer. The final candidate will be required to successfully pass a criminal background check prior to beginning employment. Interested candidates should apply for this position at jobs.rutgers.edu/postings/119090. Any questions can be directed to: Vincent B. Ziccardi, DDS, MD, FACS, Professor, Chair and Residency Director, Department of Oral and Maxillofacial Surgery, 973-972-7462 or ziccarb@sdm.rutgers.edu.

New York

Columbia University College of Dental Medicine (CDM) invites applications for a full-time faculty position in the Section of Hospital Dentistry, Division of Oral & Maxillofacial Surgery. Responsibilities will include residency and predoctoral education, participation in the intramural faculty practice and participation in research. The successful candidate will be expected to work collaboratively between the NewYork-Presbyterian Hospital System at the Columbia University Irving Medical Center Campus, the Morgan Stanley Children's Hospital as well as the Columbia University College of Dental Medicine. The ideal candidate must have completed an accredited OMFS training program, be eligible for New York State licensure and be either ABOMS-

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Faculty Positions

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certified or on the path to certification. A medical degree and fellowship training, while preferred, is not required. Academic rank including possibility of tenure track and salary will be commensurate with experience and training. Interested, qualified applicants should send a CV, letter of interest and the names and contact information of three professional references by visiting pa334.peopleadmin.com/postings/6829. Columbia University is an equal opportunity employer; minorities and women are encouraged to apply. Qualified applicants also may contact Alia Koch, DDS, MD, FACS, at ak2045@cumc.columbia.edu for further information.

New York

Brookdale University Hospital is a comprehensive acute care, Level I trauma center located in southern Brooklyn, N.Y., part of the One Brooklyn Health System. The Department of Oral and Maxillofacial Surgery Advanced Training Program is currently seeking an attending for a three-day week position that is eligible for health insurance benefits. Responsibilities include providing supervision to the Oral and Maxillofacial Surgery residents while in the clinic and the Operating Room and participating in the academic aspects of the program. This is a salaried position with incentives for OR and ED coverage. Contact Dr. Andrew Marks, Chief of OMFS, at amarks@bhmcny.org.

New York

The OMFS department at the University of Rochester is seeking applicants for a full-time faculty position at the assistant-associate professor rank depending on experience and qualifications. Tenure and non-tenure options available. Responsibilities include resident education, research and service. Position entails resident supervision in outpatient clinic, direct patient care in the faculty practice, on-call, research and collaborative activities within EIOH and Medical Center. Seeking an individual with commitment to academia, teaching, research and scholarly activity. Salary commensurate with qualifications and experience. Candidate must have DDS or DMD degree from CODA-accredited dental school, eligible for or hold board certification by ABOMS. Candidate must be able to obtain licensure for clinical practice in New York State. University of Rochester is an affirmative action/equal opportunity employer, has a commitment to principles of diversity and encourages applications from groups underrepresented in higher education. Send CV and letter of interest to: Dr. Antonia Kolokythas, Chair, 601 Elmwood Avenue, Box 705, Rochester, NY 14642.

South Carolina

The Medical University of South Carolina (MUSC) James B. Edwards College of Dental Medicine in Charleston, S.C., is currently seeking outstanding applicants for a full-time program director position at the rank of assistant/associate professor for the Department of Oral and Maxillofacial Surgery. This position entails responsibilities in both predoctoral and postdoctoral programs of the department. Responsibilities include didactic/clinical teaching and supervision of residents in the oral and maxillofacial surgery program, providing direct patient care as part of the faculty practice, including on-call coverage, participation in research programs and other collaborative activities within the MUSC community. Requires a DDS/DMD degree from a CODA-accredited U.S. or Canadian dental school, completion of a CODA-approved oral and maxillofacial surgery residency program, board certification or active candidacy for board certification, eligibility for a S.C. dental license and post-offer health assessment. This position offers the opportunity to develop a diverse and challenging academic oral and maxillofacial surgery curriculum, mentor residents and dental students, and participate in professional collaboration and leadership development activities. Candidate needs to possess excellent interpersonal and communication skills in order to relate to groups at all levels within the organization, including office staff, faculty, senior leadership; must display initiative, a positive attitude, flexibility and commitment to department goals and objectives; must be committed to the highest standards of ethical and professional conduct. Salary and academic rank will be commensurate with qualifications and experience. Open until filled. MUSC is an equal opportunity employer and encourages applications from minorities and women. Applicants should apply online through human resources: MUSC.edu/HR.

Tennessee

Meharry Medical College School of Dentistry, Nashville, Tenn., invites applicants for the position of Director, Oral and Maxillofacial Surgery (OMS) Residency Program. This is a postgraduate, full-time faculty member position. Applicants must have a DDS or DMD or equivalent and a current license or eligibility for a licensure to practice dentistry in the State of Tennessee. The applicant must be board-certified in oral and maxillofacial surgery. Applicants must maintain active license and a DEA license. They will be required to maintain BLS, ACLS, PALS certification. The OMS Program Director should be a strategic thinker, a visionary leader who thrives in a challenging environment. Interested candidates should submit letter of intent, including references, curriculum vitae, to: SODOMS@MMC.EDU.

Washington

University of Washington's Department of Oral and Maxillofacial Surgery seeks two full-time faculty to engage in clinical, didactic and research activities. Ideal candidates practice the specialty's full scope

with a focus in microvascular reconstruction or anesthesia. Rank and salary commensurate with experience. Applicants should submit a personal statement, CV and the names and addresses of three references to Dr. Sujit Joginpally (sujitj@uw.edu). For questions, please contact Dr. Dodson, Professor and Chair, (tbodson@uw.edu). The University is an equal opportunity employer.

Fellowships CODA

California

The San Diego Center for Oral and Maxillofacial Surgery is offering a one- or two-year fellowship in maxillofacial surgery. The practice participates in full-scope oral and maxillofacial surgery, which includes a very busy implant practice, orthognathic surgery, reconstructive surgery, ablative surgery for tumors, cosmetic surgery as well as dental alveolar. The candidate would participate in the Craniofacial Center at Children's Hospital and be a participant in Tumor Board. Candidates should be dual-degree and have a California medical or dental license. Please reply to patty@sandiegooms.com.

Fellowships Non-CODA Accredited

California

UCSF-Fresno Department of OMFS offers a 24-month fellowship in Head and Neck Oncology and Microvascular Reconstruction. There is one fellow per year. Activities include malignant and benign tumor surgery – neck dissections, glossectomy, mandibulectomy, maxillectomy, orbital exenteration, etc.; TORS and skull base surgery; tracheostomies; microvascular free flaps, pedicled and other flaps. Radiation and medical oncology rotations. The fellow will act in a teaching capacity, supervising residents at times. The fellow will have involvement in sleep apnea cases. Research: complete two papers related to cancer and reconstruction. Applicants please email Breana Dennie, bdennie@fresno.ucsf.edu. Include CV, photo, two letters of recommendation and a letter describing intentions/plans after fellowship. For additional questions, email Brian Woo at bwoo@communitymedical.org.

California

This is a one-year fellowship training consisting of facial cosmetic procedures such as facelift, browlift, eyelid surgery, rhinoplasty as well as breast and body contouring. The fellow is also involved in non-surgical techniques of facial rejuvenation such as toxins, fillers and lasers. The program is accredited by the American Academy of Cosmetic Surgery located in southern California. Procedures



are performed in a Joint Commission-accredited Surgical Facility as well as in hospital. The program is affiliated with Loma Linda University, UCLA Jules Stein Institute, performs an average of 700 major surgical procedures per year and is designed to prepare the fellow for board certification in general cosmetic surgery boards. Please email resume to drhaivay@gmail.com.

Florida

A fellowship in cleft and craniofacial surgery is available at the Florida Craniofacial Institute. We are now accepting applications for the July 1, 2023, position. This one-year fellowship is in a private practice environment in Tampa, Fla., and the focus is pediatric OMFS, cleft and craniofacial surgery. The primary goal of the fellowship is to educate and provide additional surgical training in the management and treatment of patients with congenital facial anomalies. The fellow will work in conjunction with the cleft lip/palate and craniofacial team and will gain comprehensive experience and instruction in team-focused treatment. For information on the Florida Craniofacial Institute, visit www.FLcranio.com. Please email CV to admin@flcranio.com.

Massachusetts

Massachusetts General Hospital Department of Oral and Maxillofacial Surgery, Minimally Invasive Endoscopic Oral and Maxillofacial Surgery Fellowship. Acquire the skills of Endoscopic Surgery of the maxillofacial region, including temporomandibular joint (arthroscopy), salivary gland sialoendoscopy, trauma, orthognathic and total joint reconstruction. During the Fellowship, education on translational research, clinical trials, prospective and retrospective studies will be available. Fellow will function as Junior Attending for Level I Trauma, Elective OMS and Resident case coverage. Massachusetts Dental License is required. MassGeneral.org/omfs/education-and-training/fellowships/temporomandibular-joint-fellowship. Interested candidates should submit a letter of interest, curriculum vitae and three letters of recommendation to: Joseph P. McCain, DMD, FACS, Director of Minimally Invasive and Temporomandibular Joint Surgery, Dept. of Oral and Maxillofacial Surgery, Massachusetts General Hospital, 55 Fruit Street, Warren 1201, Boston, MA 02114 or by emailing JMCCAIN@mgh.harvard.edu.

Massachusetts

The Department of Plastic and Oral Surgery and Boston Children's Hospital is pleased to offer a one-year fellowship in Pediatric Craniomaxillofacial Surgery available July 2023. The fellowship provides a unique opportunity for additional surgical training in pediatric oral and maxillofacial surgery as well as in the interdisciplinary management of children with cleft and craniofacial anomalies; temporomandibular joint disease; head and neck pathology; and vascular anomalies. Candidates

must have completed an OMS residency. Please submit a letter of interest and curriculum vitae to: Cory Resnick, DMD, MD, Department of Plastic and Oral Surgery, Boston Children's Hospital, 300 Longwood Ave., Boston, MA 02115; email cory.resnick@childrens.harvard.edu.

Missouri (St. Louis)

2022-23 Oral and Maxillofacial Fellowship. Sponsored by The Oral Facial Surgery Institute (www.ofsinstitute.com) and accredited by The Department of Graduate Medical Education at Mercy. This advanced opportunity is a year of hospital-based oral and maxillofacial surgery centered at Mercy, a Level I trauma center in suburban St. Louis. This intensive fellowship program will focus on facial trauma, TMJ, reconstructive, orthognathic and facial cosmetic surgery. Candidates must have completed an approved OMS residency. Missouri dental and/or medical licensure is required. Salary, benefits and continuing education allowance are included. Please address curriculum vitae and letters of interest to Program Director, Dr. Gregory Tentindo, and Department Chief, Dr. Damian Findlay, Attention: Lacy Wilson, 621 South New Ballas Road, Suite 16A, St. Louis, MO 63141, phone 314-251-6725, fax 314-251-6726, email lacyw@ofsinstitute.com or visit our website at www.ofsinstitute.com.

Nationwide

Want a career in cosmetic surgery? Get trained by the best. The American Academy of Cosmetic Surgery-certified Facial and General Cosmetic Surgery Fellowships offer one-year, post-residency, hands-on training. Limited slots across the U.S. Must have completed a surgical residency in ACGME, AOA-BOS, Royal College of Physicians/ Surgeons of Canada or ADA program. Apply at cosmeticsurgery.org or 312-981-6760.

North Carolina

The fellowship will provide extensive exposure and advanced clinical training for oral and maxillofacial surgeons in orthognathic surgery, temporomandibular joint surgery and complex implant reconstruction. The clinicians completing the fellowship throughout its 12-year history have subsequently applied their experience to both academic and private practice settings. A substantial stipend is offered. The OMS selected for this position must be able to obtain either an unrestricted North Carolina dental license or North Carolina medical license, obtain hospital privileges and be available from July 1, 2021, through June 30, 2022. The candidate will have extensive exposure to consultations, diagnosis, interdisciplinary treatment planning, treatment and postoperative management of a wide array of patients. It is expected that the candidate will be involved with several hundred major surgical cases. Carolinas Center for Oral and Facial Surgery (CCOFS) is located in Charlotte, N.C. CCOFS is a

23-surgeon practice with seven offices in N.C., and six in S.C., with most possessing OR facilities and accredited by the AAAHC. The surgeons are well-known locally and nationally in the OMS specialty. To apply, an application must be completed and returned by Aug. 31 of each year. The selection will be made on Dec. 31 of each year in order to allow time for licensure. Interested candidates can email dketola@mycenters.com for an application. For more information on the practice, log on to www.mycenters.com.

West Virginia

Charleston Area Medical Center, Department of Surgery is pleased to offer a one-year post-residency fellowship in Pediatric Cleft & Craniomaxillofacial Surgery available July 1, 2023, to June 30, 2024. The position involves surgical and multidisciplinary management of children with congenital and acquired deformities. This includes primary participation in management, craniomaxillofacial trauma and reconstruction, orthognathic surgery, pathology, pediatric otolaryngology surgery and other related pediatric treatments. The fellowship is funded at the PGY sixth or seventh year and has an attractive benefits package including assistance with housing. Send inquiries to Paul Kloostra, DDS, MD, Director, CAMC Cleft and Craniofacial Center, 830 Pennsylvania Ave., Suite 302, Charleston, WV 25302; email paul.kloostra@camc.org and jeanne.brown@camc.org; fax 304-388-2951.

Available Positions

Alberta

South Calgary specialty clinic is hiring an Oral/Maxillofacial surgeon to join our established surgical and implant clinic. Partnership opportunities available. Please forward CV to hr@dwgmanagement.ca or call 403-452-0324 for additional information about this opportunity. All applications will be held in confidence.

Arizona

Our OMS practice is seeking a full- or part-time, board-certified (or active candidate), compassionate OMS to join an expanding two-location practice in the Phoenix area. Please send CV to peter739@gmail.com.

California

Well-respected, busy and established oral surgery practice in search of a board-certified or board-eligible, motivated, hardworking and efficient oral surgeon for a full-time position in the Bay Area, Calif., area. Our office provides a full scope of Oral & Maxillofacial surgery including IV-sedation, extractions, bone grafting and PRP, implant

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Available Positions

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placement, biopsies and more. Applicant should have Calif. license, general anesthesia permit and medical malpractice insurance. Medical degree is a plus. Candidate must be able to provide excellent surgical services, establish and maintain relationships with existing and new referring doctors and be interested in growing the practice. Candidates should reply via email with their CV attached to apply. oralsurgery@gmail.com.

California (Silicon Valley)

Opportunity of a lifetime. Premier fee-for-service oral maxillofacial surgery practice with an international reputation specializing in orthognathic surgery and sleep apnea surgery seeks a dual-degree Oral Surgeon to join as an associate leading to ownership after a successful, initial employment phase. Position open to new graduates and experienced oral surgeons. The incoming surgeon will have the option to focus on the full-scope, traditional oral maxillofacial surgery while learning from the principle. This is a rare opportunity to develop a hospital-based practice in a private practice setting. Please reply in confidence with your objectives, Curriculum Vitae and written goals and timetables to: The Sletten Group, Inc. Call 303-699-0990 or email pam@lifetransitions.com.

California

Associate oral surgeon wanted. We are located in the heart of Orange County and have a busy, growing practice. Three days with the hope it grows to full time with the associate. Board-certified preferred. Send CV to drhoover@hooveroralsurgery.com.

California

Well-established, highly respected, productive, growing multi-office OMS practice in Santa Barbara, Calif., is in search of a board-certified/-eligible oral surgeon for a full-time position. Our practice has an emphasis on wisdom teeth, dentoalveolar surgery, implants and full-arch reconstruction with long-standing ties to the dental community and a very committed referral base. We have been a pillar in our community for the past 50 years. This is a wonderful opportunity for an associate leading to a partnership. Enjoy an excellent practice with a great lifestyle in a wonderful community. Please send CV/ resume to mbienstock@sborsurgery.com or call 805-729-2116.

Colorado (Front Range)

Growing practice seeking a board-certified or board-eligible associate for a partner-track position. Full scope technology-based practice with emphasis on dentoalveolar, implants, pathology and orthognathics. Level II trauma center and surgery center availability. Excellent opportunity for a growth-oriented candidate with compassion and interpersonal skills. Great family location with easy access to everything Colorado has to offer. Please email CV/inquiries to mflanagan@rangeviewsurgery.com.

Colorado (Southwest)

Perched on the beautiful western slope of the Rocky Mountains, our micropolitan town is a vibrant, expanding community that offers big-town amenities in a small-town atmosphere. Our well-established and reputable OMS practice has a position available for a board-eligible/ board-certified oral and maxillofacial surgeon in a private, two-doctor practice for a partner track position. Practice emphasis includes dental alveolar, implant reconstruction, orthognathic surgery and pathology. Local hospital is a 75-bed Level III regional medical center with light trauma. An outpatient surgery center is also available. Our location positions us at the doorstep to some of the most coveted options for hiking, biking, fly fishing, rafting, kayaking and rock climbing. Winter months offer proximity to world-class ski resorts (Telluride and Crested Butte), snowshoeing, Nordic skiing and snowmobiling. If you value an active/ outdoor quality of life along with a rewarding professional career, please email CV to billing@montroseoms.com.

Colorado

Well-established OMS practices in Denver/ Lakewood/Aurora/Thornton area seeking an Oral and Maxillofacial Surgeon. No trauma calls. Flexible schedule. Great staff. Excellent compensation and opportunity. Interested applicants can send their resumes to ysehdh@oralsurgerycenter.com.

Florida

An excellent opportunity exists to join Pensacola, Florida's first Oral & Maxillofacial practice that has been serving our community for over 50 years. High-quality, full-scope practice with emphasis on dentoalveolar, orthognathic and implant procedures. Trauma and reconstructive pursuits are also available. Drs. Mark Greskovich and Kevin Dean are seeking a motivated and personable Oral & Maxillofacial surgeon who is board-certified or an active candidate for board certification. Please respond to omfs@greskovichbalcom.com or fax to 850-479-5809.

Florida (Orlando/Daytona/ Jacksonville/Tampa/Ft. Lauderdale)

Join our 90-office group practice. Hospital privileges NOT required. Our current oral surgeons exceed \$600,000/year. Contact Dr. Andy Greenberg at 407-772-5120 or drgreenberg@greenbergdental.com. All contact kept confidential. Apply online – www.greenbergdental.com.

Florida (Orlando)

Central Florida Oral & Maxillofacial Surgery is seeking a board-eligible/certified oral surgeon. Our five-office, five-surgeon, full-scope oral surgery practice has been serving central Florida since 1937. We also have a doctor dedicated to treating TMJ and facial pain. Our surgeons have four to six days of hospital call per month with compensation. All of our locations are within 30 minutes of downtown Orlando. Our practice is highly respected for its service to both the local community as well as the profession. This is an excellent opportunity for a hardworking, energetic, personable individual to be involved in a very productive practice with great potential for the future. Orlando is a pleasant city with an international airport and multiple well-known resorts and beaches less than an hour away. The greater metropolitan area has a population of over 1 million. Florida has no state income tax, and the weather is outstanding! We offer a highly competitive salary and benefit package with a production-based bonus opportunity. Visit our website at cforsurgery.com. Email CV to Tom Meena, Practice Manager, at tmeena@cforsurgery.com or call 407-843-2261.

Florida

Practice with excellent reputation in the Ponte Vedra Beach area, a beautiful place to call home. Current surgeon seeking full partner to increase new patient contacts and expand office into a larger facility. Emphasis on dental implants and dentoalveolar surgeries. Searching for a Board-certified/Board-eligible OMS. Military veterans and drilling reservists are highly desired. Please send CV to: AAOMS Box A-0810.

Florida

Rare opportunity to join a legacy oral and maxillofacial surgery practice in Fort Myers and Cape Coral, Fla., with plans for expansion. Southwest Florida Oral & Facial Surgery, PA, was the first oral and maxillofacial surgery practice in Southwest Florida. Launched by Dr. Gerald Laboda over 55 years ago, our practice has grown in scope, size and reputation as the premier OMFS practice in our area. Drs. Tim Hogan, Mark Streater, T.J. Tejera and Harvey Satz have continued the legacy, specializing in all aspects of a thriving, full-scope oral and maxillofacial surgery practice. We have a



2-office practice with a well-established referral base covering 5 counties, full patient schedules to immediately support an additional OMFS, state-of-the-art equipment, a highly trained team including RNs in each office and DAANCE-certified assistants. We are seeking a BE/BC OMFS with exceptional patient skills to meet the growing needs in our community. We currently offer opportunities to join our practice as an associate only or as an associate with a partnership track. Our compensation package includes base salary plus bonus based on percentage of collections, potential for 7-figure annual income, relocation allowance, paid time off, annual CE budget, annual client promotions budget, medical, dental, vision insurance for OMFS and family; malpractice insurance coverage, 401(k) match and profit-sharing. All this and no state income tax! The Fort Myers area boasts a median age of 39 and has become a popular location for families to settle. Cape Coral is listed as one of the fastest growing cities in the country. Southwest Florida offers sunny days, year-round outdoor activities, cultural events, downtown restaurants, art shows, boating, minutes to beaches, over 150 golf courses, 2 spring training baseball stadiums and home to Florida Gulf Coast University. If you are interested in joining the SWFOFS legacy, please send an introductory email and CV to Julie Simpson, CFO & Executive Director, at julie@swfofs.com.

Florida

Well-respected, busy and established oral surgery practice in search of a board-certified or board-eligible, hardworking and efficient oral surgeon. We offer a full-time associate position to the right candidate with a clear path to partnership. Office focus is dentoalveolar and implant surgery at our state-of-the-art facility. Incoming surgeon will practice in various of our current locations. Our practice is highly respected for its service to both the local community as well as the profession. Competitive salary with bonus incentives, benefits package includes health insurance, CE allotment, IRA, malpractice insurance and license reimbursement. If interested send CV/Inquiries to omsasf@gmail.com. Requirements: DDS/DMD from an accredited university, active state dental, board license and Oral Maxillofacial Surgery residency certificate from an accredited program.

Illinois

Excellent oral surgery opportunity in the Chicagoland area! Our highly successful private oral surgery practice has a great opportunity for an Oral Surgeon to join the team. Primarily fee-for-service, some PPO. State-of-the-art facility. Highly respected, busy practice with great relations in the dental community. Long-term security. Wide range of procedure scope. Excellent earnings to include great benefits package. Please email CV to omaxdoc@gmail.com.

Illinois

Rare opportunity available for OMS board-certified or active candidates to join a thriving and rapidly growing oral and maxillofacial surgery center. Our focus is dentoalveolar, implant and orthognathic surgery, but open to expand in any direction. Our beautifully designed and newly expanded office is now six years new, equipped with CBCT, implant navigational system (XNAV) and other state-of-the-art technology. Join our dedicated team and work with former program director of a reputable OS program. This solo practice is highly visible and has loyal referrals by dentists and orthodontists. Only a half-hour from downtown Chicago and minutes away from I-390, I-90 and the Metra station. Our employment package has a very competitive salary and attractive bonus structure. Please email your resume to huseinads@yahoo.com RE: oms applicant.

Illinois

Established multi-specialty group practice in Chicagoland is seeking an oral surgeon for full time in our Chicago loop office. Our offices are set up for an oral surgeon as we already have oral surgeons on staff. Recent grads are welcome. Guaranteed \$500,000 in salary plus bonus. Please send resume/CV or any questions to drsharma@atooth.com.

Illinois

Full-scope OMS practice with two offices in the northern suburbs of Chicago seeking a board-certified/-eligible OMS. Level I trauma hospital affiliation. Full-time and part-time positions available. Partnership opportunity available. Flexible schedule and excellent salary and benefits. Reply to classifieds@aaoms.org, attention: AAOMS Box A-0311.

Illinois

Fantastic opportunity! Extremely successful, well-respected group practice with a loyal referral base. Partners enjoy great quality of life, rapport and special comradery. Suburban Chicago associateship leading to early partnership in a full-scope practice affiliated with Level I trauma hospital. Teaching possibilities available. Contact classifieds@aaoms.org, attention: AAOMS Box A-1201.

Illinois

Looking for energetic, personable OMS to join established, highly respected, productive practice. Associateship leading to early partnership position available immediately. Mostly FFS contracting with PPOs but no HMOs. Technology includes CBCT, laser, intraoral scanner, Piezosurgery, PRF and X-Nav. Located in Northern Illinois with easy interstate access to Chicago, Madison and Milwaukee. Guaranteed salary with bonus, medical insurance stipend, three weeks paid vacation, pension plan,

malpractice insurance, continuing education allowance and relocation assistance. Please send CV and cover letter to os1161732@aol.com.

Indiana

Premier, highly profitable, highly respected, well-established, busy, thriving three-office (within 7 years) Oral & Maxillofacial Surgery practice in Fort Wayne, Indiana, is seeking a full-time Board-eligible or Board-Certified associate to start ASAP. Candidate must be able to provide excellent surgical services, establish and maintain relationships with existing and new referring doctors and be enthusiastic, very motivated and interested in growing the practice. Partnership opportunity will be available and is negotiable for the right candidate after 2 years of working together and mutually agree that it is a good partnership fit. Practice is Implants, Bone grafting, Dentoalveolar surgery and IV sedation heavy with some Pathology, Trauma and Orthognathic. Full-scope practice is openly available if desired. We are surrounded by four level 2 trauma hospitals all within a 5- to 20-minute radius. Admitting privileges to these hospitals will be expected as we all share call in town. Competitive guaranteed \$500,000 base annual salary with additional year-end production incentive bonuses. Outstanding paid benefits include malpractice, health, vacation, sick time, 401(k) match and CE. We are state-of-the-art, fully digital, including i-CAT FLXs, Intraoral scanners, 3D printing, both Bien-Air & Hall drills, Piezo, PRP, Ellman, DSLR cameras, WinOMS, etc. All offices are in cloud, communicate and accessible anywhere, anytime. Fully trained 3 clinical staff per doctor. Fort Wayne and surrounding counties are a hidden gem with around 600,000 people, second-largest city in Indiana. Great place to live (low cost), lifestyle, work, excellent schools, safe and raise a family. Easy access (air & road) to several major cities. Send CV to Becky at: FortWayneOMS@comcast.net or call 260-490-2013 and ask to speak with Becky directly.

Indiana

Oral and maxillofacial opportunity. Exceptional OMS practice in northern suburb of Indianapolis. Partnership track. 3,500 sq. ft. of office space in a growing community, ranked top 5 city in Indiana to live. Interested candidates, please send resume to recruiter@ddsmatch.com or call 855-546-0044.

Iowa

Fort Dodge Oral Surgery and Implant Center, serving central and northwest Iowa for 40 years, is looking for our next associate leading to partner. We have offices in Fort Dodge, Spencer and Carroll. Our practice has grown immensely over the last few years and our three Board-certified surgeons are looking to help our next surgeon to grow even further. The communities all have excellent public and private schools. There are multiple opportunities to enjoy an active lifestyle with Iowa's

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Available Positions

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Great Lakes (Okoboji), ATV/UTV trails, commercial airline service and an extensive bike trail system all in our backyards. Cost of living, housing and overall lifestyle in this area is outstanding. Our practice is office-based with implant and dentoalveolar surgery the majority of our practice. The office also collaborates with great local orthodontists and the new surgeon has the opportunity to take on as much or as little orthognathic and trauma cases as they desire. The practice has a long tenured and dedicated team of 25 employees. We will entertain a short associateship with easy path to partnership, excellent compensation, benefits and partner-level perks while an associate. Interested applicants should email CV to jon@fdoralsurgery.com or call Jon DeJong at 515-408-1657.

Kentucky

Well-established, highly respected, productive, growing multi-office OMS practice in Kentucky. Practice has an emphasis on wisdom teeth, dentoalveolar surgery, implants and full-arch reconstruction but has unlimited potential for any endeavors the surgeon wishes to pursue. Beautiful offices with state-of-the-art equipment and excellent, well-trained staff. This is a wonderful opportunity for an associate position leading to a fast partnership track. Enjoy an excellent practice with a great lifestyle in a wonderful community. Email classifieds@aaoms.org, attention Box A-0506.

Kentucky

It's a great time to join The Kentucky Center for Oral and Maxillofacial Surgery (KCOMS) Team! We are searching for an energetic board-certified/eligible Oral and Maxillofacial Surgeon to join our growing, multi-location, three-surgeon practice in Lexington, Ky. This position includes a \$50,000 sign-on bonus and a potential opportunity for future partnership. In addition, we offer an excellent compensation and benefit package to include a guaranteed base salary, bonus plan, 401(k), life insurance, paid vacation, medical/dental/vision plans and malpractice insurance. Relocation assistance for the right candidate is possible. If you are interested or know someone who might be interested, please send your CV and cover letter to reda@kentuckyoms.com or contact Reda Vaughn at 859-278-9376, Ext. 1108.

Louisiana

Two-surgeon, two-office practice in metro New Orleans. Senior surgeon retiring. Position leading to partnership, ideal for graduating senior resident or experienced surgeon. Interested surgeons reply via email to oralsurgeryoffice@yahoo.com, and we will contact you.

Maryland

Mid-Maryland Oral and Maxillofacial Surgery, PA, located in beautiful Frederick, Md., is searching for a new associate (board-certified or board-eligible) to join its team of three surgeons. Mid-Maryland Oral and Maxillofacial Surgery is a very busy, well-respected, full-scope office founded over 20 years ago, serving Maryland, Pennsylvania, Delaware, Virginia and West Virginia communities. Our surgeons also have full privileges at Frederick Memorial Hospital. Frederick, voted as one of the best places to live, is located within 45 miles of Baltimore and Washington, D.C. We have access to big city amenities without losing our small-town charm. The successful candidate will have the opportunity to obtain full partnership with an excellent salary/benefit package. Please email CV to Lhogan@midmaryland.com or fax: 301-694-7372.

Maryland/D.C.

Busy private practice seeking to add Board-eligible/-certified surgeon for associateship in D.C./Maryland area. Willingness to obtain hospital privileges and take call. Scope includes: dentoalveolar surgery, implant surgery, pathology and facial trauma. Offering experienced management team, X-ray and CPR-certified assistants, CBCT technology. Competitive salary with bonus incentives, health insurance, CE allotment, 401(k) plan, malpractice insurance and license reimbursement. Opportunity to become a partner after 3 years and board certification. Email pdm203@gmail.com for more information.

Michigan

Plymouth Oral & Facial Surgery, PLC, a long-standing, successful, well-respected and busy OMS group practice with three locations is seeking a full-time, board-eligible/board-certified oral surgeon. We have offices in the Plymouth, Ann Arbor and Chelsea, Mich., areas, and our communities have excellent public and private school opportunities. All our offices are within a short commute to several cities that provide outstanding cultural and sporting events. Our offices are equipped with state-of-the-art equipment, including CBCT machines, intraoral scanners and a CO2 laser. We have a dedicated staff, including a full-time marketing coordinator. Our surgical assistants are highly skilled in assisting and DAANCE-certified. Our practice promotes continuing education of our doctors and employees. We are entering our seventh year as hosts to a Seattle study club. We have a very strong referral base supported by excellent referral relationships throughout the area. It is important that our candidate is friendly, honorable and respectful of our practice and our dental community. Our new surgeon will promote a team attitude and place patient care first. We are offering a full-time position (4.5 days) with a competitive compensation package, including health insurance, 401(k) and a CE stipend. For more information and a comprehensive review of our facility, please visit our website at

www.paaoralsurg.com. Interested applicants should email your CV with contact information to Jeff Wasielewski at jeffwasds@gmail.com.

Missouri

Kansas City Surgical Arts is a full-scope oral/maxillofacial and cosmetic surgery practice. We are a well-established and growing two partner private practice located in Kansas City, Mo. Our philosophy centers around treatment with exceptional skill, compassion and integrity. We are seeking a motivated associate with notable interpersonal skills to join our full-scope practice. The ideal candidate must be board-certified or board-eligible. Trauma call and academic affiliation are available. KCSA offers a competitive salary and a comprehensive benefit package including paid vacation, health/life/dental insurance and 401(k) with vested match. Missouri has an abundance of outdoor activities to enjoy including fishing, hunting and professional sports. Kansas City is a family-oriented community with great school and affordable living. Interested applicants respond to officemanager@kansascitysurgicalarts.com.

Nevada

Looking for an enthusiastic oral surgeon to join a highly reputable private practice. Looking for a surgeon to help grow our practice while cultivating the optimal patient experience each and every time. Ideal candidate will be looking for a part-time position with the support of a full staff. Office located in the heart of northern Nevada, only 30 minutes from beautiful Lake Tahoe. Minutes away from many outdoor activities, making this area perfect for the outdoor enthusiast. Please email CV to manager@renooms.com.

New Hampshire

Rare opportunity to join a state-of-the-art OMS practice in central and southern N.H. with multiple locations; looking for a BC or BE OMS to join this busy and well-respected practice. This well-established practice has a reputation for exceptional surgical care and a family atmosphere. We are a full scope OMS practice one hour from Boston, 45 minutes from the Seacoast and 30 minutes to the White Mountains. Full or part time. If you enjoy the outdoors and want to join a practice combining an incredible quality of life with a successful career, send resume and cover letter to rjrosato@ccoralsurgery.com. Our motto is Competence with Compassion. Join us if you share that vision!

New Jersey

Riverside Oral Surgery, one of the most highly recognized, well-established and respected surgeon-owned practices in the northeast, is seeking a highly motivated oral and maxillofacial surgeon to join our growing practice. This role



presents an amazing opportunity for both recent or upcoming graduates who are Board-certified or Board-eligible as well as experienced surgeons. If you understand what it takes to cultivate the optimal patient experience each and every time, please contact us. We offer a highly competitive compensation package, great benefits, including health insurance, dental, vision, life, LTD, 401(k), PTO, malpractice and CE reimbursement with a defined and proven path to partnership. To apply, please send your CV to Megan Dwier, HR Director, at megan@riversideoralsurgery.com.

New Jersey (N.Y.C.)

Excellent opportunity to join well-established practice with opportunity for growth. Significant dentoalveolar/implant, bone grafting, general anesthesia, pathology, maxillofacial trauma procedures, but practicing full-scope OMS, including small amounts of orthognathic, TMJ, major pathology and cosmetics. Opportunity to grow these areas. Office call required, hospital privileges with participation in hospital call, optional. Competitive salary based on experience/credentials. 30-40 minutes from N.Y.C., with N.J. transit station down the block. Great town to practice with great shopping/restaurants. Please email CV to rutner@yahoo.com.

New Jersey

Central Jersey Oral and Maxillofacial Surgery is seeking a motivated individual to join our progressive and well-respected practice. We are a four-office, five-partner practice in highly desirable central New Jersey, less than an hour from N.Y.C. and just minutes from the Jersey Shore. We practice a full range of oral and maxillofacial surgery with a primary focus on dentoalveolar surgery, implants and associated reconstructive surgery. Our facilities are networked and include I-CAT machines, L-PRF, PRP machines, Piezosurgery unit, lasers, digital impression scans and a digital workflow for treatment planning. We actively provide continuing education for our large referral base consistent with our philosophy of raising the level of dental education in the area we serve. A complete compensation package includes vacations, continuing education, health insurance and retirement plans are available. This is a very attractive opportunity for an excellent surgeon to utilize all his/her skills. Please contact us at admin@cjom.com.

New Jersey

Central N.J. solo oral surgery office is looking for a part-time associate to expand and grow together. Procedures will be mostly dentoalveolar surgery. There is no on-call or hospital coverage. Must be a Medicaid provider with IV sedation permit. Contact classifieds@aaoms.org, attention AAOMS Box 0118.

New York

Outstanding opportunity to join a growth-oriented, innovative multi-location OMS practice in Manhattan and the Tri-State region. We have commitments for many new locations in Connecticut, New Jersey and New York. The metropolitan New York City area is an excellent place to live/work with a vast array of educational, cultural and recreational activities. The ideal candidate must possess top skills and display excellent interpersonal skills. The practice is office-based, full-scope dental alveolar and implant surgery under IV sedation and general anesthesia. The facilities and equipment are high quality and digital. Emergency room call and academic affiliations are available. The practice is the employer of choice with the top compensation and equity participation for ideal candidates. Will support and assist in obtaining state licenses and U.S. work permits (including sponsoring green card or U.S. citizenship). Email CV to robert.bodey@omfsny.com or contact Robert Bodey at 347-590-9910.

New York (Long Island)

Long-standing, established Nassau County practice seeking a motivated, ethical, hard-working and highly skilled full-time OMS. Reply to AAOMS Classified Box A-4416.

New York (Long Island)

Seeking energetic person to join a unique, multi-doctor practice. Association leading to partnership for motivated, personable and ethical OMS. Our group is office-/hospital-based and provides a full scope of oral and maxillofacial surgery, including cosmetic procedures. A full-time esthetician also provides nonsurgical cosmetic services in our medical spa. We offer an excellent salary, plus a comprehensive benefit package that includes malpractice, health, life insurance, 401(k) and profit-sharing. Reply to AAOMS Classified Box A-4442.

New York (Rochester)

Associate/partner wanted for well-established OMFS practice. Two offices, two surgeons, with one retiring in 2021. Contact OMFSeric@aol.com or phone 585-223-1200 for information.

New York

Growing oral surgery practice looking for board-certified/eligible oral and maxillofacial surgeon. Associate position with a path toward partnership. Two locations serving Westchester County. Position is available immediately and includes hospital privileges, call and education with residents. Generous salary and benefits package to include health and malpractice insurance, 401(k), paid vacation and continuing education. Please contact us at AAOMS Box A-0802.

New York

Busy, modern oral and maxillofacial private practice looking to add a board-eligible/board-certified oral and maxillofacial surgeon for associateship. Our practice is located in the Albany area in beautiful upstate New York. Our area offers a fantastic quality of life and is close to the many mountains and lakes of the Adirondack National Park. We are seeking an individual interested in practicing full-scope oral and maxillofacial surgery with an emphasis on dentoalveolar and implant surgery. Partnership track is available. If interested, please send cover letter and CV to msmith@greatoakoralsurgery.com.

New York

Excellent opportunity to join a premier group practice with offices in Long Island. The group practices a full scope of oral and maxillofacial with a major focus on orthognathic surgery, TMJ surgery, reconstructive jaw surgery, craniofacial surgery and alveolar cleft surgery with operating privileges at 3 major medical centers with OMS residencies. The group is also an active member of 3 cleft lip and palate teams in the region. Dentoalveolar and implant surgery is also a major component of the in-office activity. The candidate must be a board-certified or board-eligible OMS and be highly motivated to learn and contribute to the intellectual growth of the practice. This position includes a competitive compensation package with many benefits. Send CV/resume to ddampman@nycoms.com.

New York

Well established, long standing, busy Western Suffolk County practice seeking part-time experienced, highly skilled, ethical, hardworking, OMS to pick up extra days and/or half days. Will accommodate (flexible) work schedule. Reply with CV to omfs327@gmail.com.

North Carolina

The Atrium Health Department of Oral Medicine and Maxillofacial Surgery is seeking an oral and maxillofacial surgeon to join their growing practice. The Oral and Maxillofacial Surgery department primarily provides dentoalveolar, facial trauma, pathology, orthognathic and TMJ surgical services in outpatient (hospital/OR and office-based) and inpatient settings. The current needs of the population, hospital case load and institutional support has cultivated a unique opportunity to develop a robust surgical practice within a busy and fast-growing department. Starting in 2022, faculty within Atrium Health OMFS Department will also fall within the Department of Otolaryngology/Head and Neck Surgery at Wake Forest School of Medicine with clinical academic appointments. To learn more contact Phillip Christofferson at Peter.Christofferson@atriumhealth.org or visit <https://careers.atriumhealth.org/jobs/8336032-oral-and-maxillofacial-surgeon>.

Available Positions

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Ohio

Outstanding opportunity to join a growing and productive group practice on the west side of Cleveland. We are searching for an associate who is board-certified or board-eligible to join a team of six surgeons. We have multiple locations and are on staff at local hospitals. Our practice focuses on excellent patient care in broad scope oral and maxillofacial surgery. Most of the surgeons are primarily office-based, but there is ample opportunity for hospital-based surgery. The new associate will be eligible for an exceptional salary/benefits package immediately. We are looking for a candidate for a partnership track. All of the offices are a quick drive from downtown and conveniently located to Cleveland Hopkins International Airport. Bordered by Lake Erie on the north and Cleveland Metroparks on the east, residents can boat, fish and swim on Lake Erie and take advantage of all the Metroparks have to offer. Please visit our website at CLEOMS.com. Send CV to rachel@cleoms.com.

Ohio

Two-doctor, two-location, busy practice in Dayton/Cincinnati area looking for a board-certified or -eligible, full-time associate with partnership potential. Full-scope modern practices with ample dentoalveolar, implant, reconstructive, orthognathic and Level I trauma. Email resume to reza@daytonfacialsurgery.com.

Ohio

Excellent opportunity in Cincinnati, Ohio, for a motivated surgeon. We are a two-doctor, three-office practice concentrating on dentoalveolar and implant surgery. A full-scope practice is available if desired. The applicant must be a BE/BC OMS with a strong work ethic and excellent patient skills. We are offering a full-time associateship leading to an early partnership in a highly profitable suburban practice. Signing bonus is available for the right candidate. Please email your resume to Tammy at liberty@tboms.com or fax it to 513-755-3568.

Ohio

Rare opportunity to replace a retiring partner in a thriving private practice. Serving northeast Ohio for over 55 years, our 3-office, 3-surgeon practice is busy, respected and profitable. Our offices offer full-scope surgery, with emphasis on dentoalveolar and implant procedures. Searching for a board-certified or board-eligible oral and maxillofacial surgeon interested in a direct path to full partnership. Send CV to Helen at helen@akronoralsurgerygroup.com.

Ohio

Medina Oral Surgeons, a busy, 3-office practice, is looking for board-eligible/-certified OMFS associate for fullpartnership opportunity. Practice emphasis is officebased dentoalveolar and implant procedures. Excellent pay/exceptional benefits. Please email CV to: hazarley@medinaoralsurgeons.com.

Oregon

Two-doctor practice needs energetic, patient-focused, personable, board-certified/eligible oral and maxillofacial surgeon to join our busy, well-established practice as associate/future partner. We have three locations in the beautiful Southern Oregon Cascades. This is a city that functions as a hub for regional healthcare. Hiking, camping, golf, skiing, whitewater rafting/kayaking, hunting and fishing are all available here in abundance. Position is available immediately. Generous salary and benefits package to include 401(k), malpractice insurance, paid vacation and continuing ed, relocation assistance. Please contact alicer@aomsurgery.com.

Pennsylvania

Excellent opportunity to join a well-established, highly respected solo practice in Pittsburgh, Pennsylvania. Offering full partnership after one year. Treatment performed in 3,300 square foot modern facility equipped with CBCT, laser, EMR and a phenomenal staff. Practice full scope of specialty: wisdom teeth and extractions, pathology, PRF, cosmetics and mostly implant reconstruction and placement. Sedations provided by anesthesia group which is optional. Potential to develop own scope of treatment as per level of training. We offer an excellent compensation and benefit package which includes a guaranteed base salary with bonus plan, paid vacation, medical insurance, CE stipend, and others. Please send CV or respond to oralsurgmax@gmail.com.

South Carolina

Well-established, highly respected, growing multi-office OMS practice located in upstate South Carolina is seeking a Board-certified or Board-eligible oral surgeon to join our practice. This is an excellent opportunity with a starting salary of \$300,000, benefits, incentives and bonuses that will transition into a partnership opportunity. Reply to joudeh@upstateoms.com.

Tennessee

50,000 patients can't be wrong! That's the number of patient encounters that we have had in the last 6 months. We are looking for a board-eligible/-certified oral and maxillofacial surgeon to join our 4-doctor vibrant practice in historic Memphis, Tenn. We are looking for someone who wants to

use their education – not only to make a living, but to make a difference in the lives of our patients and employees. Memphis is known for affordable housing and its low cost of living. It's also a major medical center, home of St. Jude Children's Research Hospital, Elvis Presley, BB King, professional sports, world class bar-b-que and outdoor living. Tennessee has no state income tax. Our practice is not limited to dentoalveolar and implant surgery only. You will be encouraged to practice to the fullest extent of your training and capabilities. We provide a compensation package that includes a base salary plus production, pension plan, 401(k), family medical insurance, malpractice insurance, CE, vacation and other benefits. We also offer a clear path to partnership. We have two modern OMS facilities, a diverse patient population pool and staff. Our practice is well-recognized in the region and enjoys a solid referral base of new and established sources. We are committed to providing patient care to the best of our abilities and that is reflected in our motto: "We are here to serve and not to be served." We want to invite residents, recent graduates, retiring military and interested surgeons who may be looking to relocate to explore the opportunity that we have. You may confidentially send your letter of interest and CV to AAOMS Box A-0628.

Tennessee

Locally owned, high-end implant and dentoalveolar practice seeks full- or part-time OMFS. Currently three surgeons in two locations: Maryville and Knoxville/Concord/Farragut. High growth, mostly private insurance and self-pay, new and recently renovated facilities. Booming practice in very desirable East Tennessee! Minimum salary, family insurance, great opportunity for newly matriculated resident or seasoned surgeon. Please call 865-300-7135.

Texas (Austin)

Established, unique practice. High gross and net. 50% TMJ and orthognathic surgery. No insurance contracts, no Medicare, no trauma, no weekends. Great opportunity for experienced surgeon desiring to relocate or recent graduate. Owner will stay to transition with superb referral-team network and teach TMJ techniques/management to facilitate success. Plenty of dentoalveolar and implant surgery. Great dental/medical communities and growth potential. Call Jim Robertson at 713-822-5705.

Texas (Houston)

Excellent opportunity to join a well-established, highly respected practice in metro Houston. Looking for a full-scope OMS who is board-certified or active candidate for certification. Competitive salary and benefits. Email CV to steve28093@gmail.com.



Virginia

Exciting opportunity available to replace retiring partner at established, well-respected oral surgery practice in beautiful central Virginia. Multi-office, five-doctor practice looking for associate to transition to full partner. Applicants must be board-certified/-active candidates for certification. Seeking applicants who are enthusiastic, motivated, dedicated to exceptional patient care, and committed to continuing strong referral relationships. Emphasis on dentoalveolar/pre-prosthetic surgery, implants, pathology, anesthesia, orthognathic surgery, minimal hospital call. Candidate to start in 2023. For more information, please e-mail resume to: ssummers@cvofs.com or sarahesnow@gmail.com.

Virginia

Coastal Virginia/Virginia Beach practice seeking FT surgeon. 3.5 hours to D.C., 1.5 hours to Richmond, 6 hours to N.Y.C. Partnership/equity track for qualified candidates. Motivated and personable associates with vision of expanding oral surgery business, contact drg@myoralsurgeon.com.

Wisconsin

Wonderful opportunity to join our multi-doctor, 3-office practice in the beautiful Chippewa Valley in west-central Wisconsin. Our recently built, 18-operator main office is stunning. We are looking for a motivated and personable full-time, board-eligible/board-certified individual to join our team. We offer a very competitive salary and production bonuses with a 2-year associateship track leading to partnership. Immediate placement for the right person is available. If interested, please send cover letter and CV to: sivankovic@omsaec.com.

Wisconsin

Outstanding opportunity to join a well-established, productive, fast-paced, multi-location practice headquartered in Green Bay. Minutes from Lambeau Field or a short drive to enjoy NCAA, MLB or NBA games. Enjoy an adventure in each season: golf in the summer, hunting in the fall, snowmobiling in the winter and fishing in the spring. Seeking a board-certified or -eligible oral surgeon to join our practice as an associate with an equal partnership opportunity. We are a team of five oral surgeons with favorable call rotation for the clinic and our local hospitals. If interested, please send cover letter and CV to amy@bayoral.com.

Wisconsin

Our multi-doctor practice established 50 years ago is continually growing and has many current amenities including full face CBCTs and DAANCE-certified staff. Area communities provide safe,

friendly environments, excellent schools, plenty of four-season outdoor activities available, several professional and college sporting events and performing arts venues. We are offering a competitive salary and comprehensive benefit package starting as an associateship leading to an equal partnership. Interested candidates should apply with a CV or resume to: info@omswinnabago.com.

Miscellaneous

OMS Partners

Whether your focus is on starting your own practice, buying or selling a practice, or relieving yourself of the management challenges of your existing practice, OMS Partners is uniquely qualified to help you achieve your goals. We understand how valuable your time is. Our goal is to allow you to focus on patient care while we provide the comprehensive practice management required to maximize your productivity and profitability. Our team will become an extension of your practice with billing and timely collections, cash-flow management, accounting and human resources, and long-term planning, including practice growth and development. To find out more about OMS Partners, contact us today! Call Austin Leavitt at 832-683-5084 or email austin.leavitt@omsp.com.

Practices for Sale

British Columbia

Western Canada. Oral & Maxillofacial Surgery full-scope practice. This high-grossing practice is very profitable. Turn-key office with professional staff and a strong referral base. Upgraded facility with newer equipment. Principal has full privileges at local hospital. Please contact Ruth Chatel for details: ruth@heapsanddoyle.com.

California (San Francisco)

East Bay area. This practice has a strong presence in the community. Started in 1987 and acquired by present owner in 1992. Office approximately 1,800 sq. ft. in professional building. Built 9 years ago with new equipment. Four treatment rooms. Digital X-rays, Carestream Win/OMS, 10 computer work stations, 2019 revenue approximately \$548,000 on 3.5-day work week. Great opportunity for any oral surgeon looking to practice in diverse high-tech community. Contact Jim Engel at jim.engel@heneryscheim.com or 925-330-2207.

California (San Francisco Bay area)

Oral and maxillofacial surgery practice for sale in affluent south San Francisco Bay community. Very well-known and respected practice with a 32-year history of providing the highest level of patient care. The practice is in a free-standing, 3,000 square foot, AAAASF-accredited facility in a prime location. Long-term real estate acquisition possible. Excellent patient and referral base with anesthesia support available from a premier location group affiliation. Please send inquiries to OMSpractice4sale@gmail.com.

Colorado (Denver Metro)

Great opportunity for OMS who seeks the Colorado lifestyle or addition to OMS group. Well-designed office in suburban town with median income 30% greater than the Colorado median. Location has great growth, access, visibility and parking. Four functional operatories with maintained equipment. The practice is focused on dental implants and dentoalveolar surgery with opportunity to include the full scope of OMFS. Owner willing to stay during transition. Send inquiries to classifieds@aaoms.org, attention AAOMS Box S-0902.

Colorado

Well-established, busy OMS practice available in Colorado. High-production, low-overhead solo practice with satellite office if desired. Great turn-key real estate available. Very close to a large city, a river, lake and the mountains. Contact larryjacobson@oms-exclusively.com.

Delaware

Solo suburban Wilmington modern practice/facility in an attractive setting, affiliated with a teaching hospital. Experienced staff with strong referral base and room to expand to multi-person practice if desired. Flexible transition available. Reply to AAOMS Box S-0729.

Illinois (Chicago)

Phenomenal legacy OMS practice with the latest CBCT, three surgical treatment rooms. Average collections: \$1,146,000. Loyal referral network, excellent staff. Low overhead. Seller will help transition. Contact Jim Plescia, jplescia@e-ppc.com, 630-890-6074, at Professional Practice Transitions.



Practices for Sale

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Maryland

New listing. Carroll County, Md. – @1043 S/F medical bldg. Abundant free parking. 2 OPs. NueMD software. Low overhead. Excellent growth opportunity. For more information, contact Ellen Dorner at N/L Transitions – 410-616-2042 or edorner@nltransitions.com.

Maryland

New listing. Montgomery County, Md. 1586 S/F in upscale medical bldg. NueMD software. 2 OPS. Low overhead. Currently no marketing done, excellent growth opportunity. For more information, contact Ellen Dorner at N/L Transitions – 410-616-2042 or edorner@nltransitions.com.

Maryland (Bowie)

New listing. Outstanding oral surgery practice in seller-owned condo located in business park. Three fully equipped OP's, @1,000 S/F. Condo is for sale. WIN OMS software. Strong implant and dentoalveolar practice. PPOs and FFS only. For more information, contact Ellen Dorner at 410-616-2042 or edorner@nltransitions.com.

Massachusetts

Solo suburban Boston, well-established practice for sale. Very flexible seller. Good opportunity for expansion or satellite. Owner ready to retire. Please send email to classifieds@aaoms.org attention AAOMS Box S-0104.

Massachusetts

Well-established, solo OMS practice with large referral base centrally located on Cape Cod. Retiring surgeon available for smooth transition. Annual collections are 1 million plus with 3.5 days, significant opportunity for growth. Equipment CBCT, digital X-ray, and WinOMS software. Real estate included: 2,100 square feet. Condominium in medical building, 4 operatories. Long-term, professional staff. Cape Cod has sandy beaches, world class boating, historic towns and only 70 miles south of Boston. Reply to classifieds@aaoms.org, AAOMS Box S-0102.

New York (Lower Hudson Valley)

Well-established practice looking for board-certified/active candidate for certification OMFS for purchase of practice. Current owner willing to remain through transition. Emphasis on dentoalveolar, office-based, implants, general

anesthesia, pathology, hospital call. Experienced staff, good systems in place, cone beam CT, EHR. Please send CV to AAOMS Classified Box S-11803.

New York (Western State)

New to the market is a well-established oral surgery practice seeking partnership for further growth. The current surgeon has practiced in the community for decades and has an excellent referral base with little competition. Equipped with three operatories, the practice supports multiple doctors and is continuing to see growth! Collections of \$3.006 million and EBITDA \$545,000. Located in a free-standing building, the real estate is also available for sale if desired. To learn more, contact Professional Transition Strategies: sam@professionaltransition.com or call 719-694-8320. We look forward to speaking with you.

Ohio

Great opportunity to purchase a practice in Northeast Ohio. Established practice of 27 years. Collections for 2021 were \$1.6 million with a 30-hour work week. Strong referral base, OMSVision EHR system, Planmeca CBCT scanner, CO2 laser, up-to-date equipment and an incredible group of assistants. Current owner is willing to stay on for one year to ensure a smooth transition. Please send email to AAOMS Classified Box S-1019.

Oklahoma

OMS with 47 years private practice ready to retire. Have practiced full scope, but dentoalveolar and implants only with three days per week. Excellent opportunity for expanding back to full scope or "low key" or satellite. Very flexible seller. Contact RJLOMS@live.com.

Oregon

Portland. Urgent sale. Motivated seller accepting about half of market rate. Available 6 months to assist in transition. Portland metro practice includes satellite office. Both locations are fully cone beam-equipped, dual-suite offices. Practice enjoys continued growth with healthy referral base and strong stable staff. \$1.3+ million/year. Contact Paul@mydentalbroker.com, 866-348-3800.

Utah

Oral Surgery practice with four locations in Utah. Practice has a stellar reputation and a strong referral base. Annual gross receipts of these practices have averaged \$1,362,000 over the last three years. Call 801-319-4161 for more information.

Virginia

Established OMS practice for over 35 years in the beautiful Shenandoah Valley. Wonderful place to raise a family. Presently a dentoalveolar and implant practice but expanding to full scope could easily be done. Willing to work with buyer for a smooth transition. Contact wcbig@comcast.net.

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Classified Advertising Deadlines

July/August 2022 issue: May 5, 2022

Sept/Oct 2022 issue: July 7, 2022

Nov/Dec 2022 issue: Sept. 7, 2022

AAOMS Faculty/Fellowship Classified Advertising Order Form

Available Position
(please check all that apply):

- ☐ Chairman
☐ Program Director
☐ Professor
 (clinical or research track)
☐ Associate Professor
 (clinical or research track)
☐ Assistant Professor
 (clinical or research track)
☐ Fellowship
☐ CODA Accredited
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(No additional cost)

☐ **This is a confidential ad.**

Please contact only the following members
of my staff if you have questions:

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**Member ID is required if posting as an AAOMS Member or on behalf of an AAOMS Member.*

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Faculty Ad Costs: **1-120 words: \$0** **121-160 words: \$200**

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Signature _____

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☐ Practice for Sale
☐ Position Wanted
☐ Practice Transitions
☐ Miscellaneous

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Innovative Education in Oral Reconstruction

2022 Courses: Minimally Invasive "Masters" Lecture Series with "Live" Surgical Demonstrations

May 19-21

Tunnel Grafting & Crestal Sinus Elevation

Speakers: Dr. Daniel Cullum & Dr. Michael Block

Participants will gain understanding and proficiency with crestal sinus elevation and tunneling grafting techniques including instrumentation, specialized graft materials and the role of dynamic navigational surgery. We will also discuss advanced crestal techniques including immediate implants & contiguous sinus floor elevation (CSFE).

June 23-25

Immediate Implants & Dynamic Navigation

Speakers: Dr. Daniel Cullum & Dr. Joseph Kan

This course will teach current techniques for immediate management of single & multi-rooted teeth in both maxillary and mandibular extraction sites. Dynamic Navigational Surgery provides a paradigm shift in predictably pre-planning implant treatment for optimal outcomes.

October 20-22

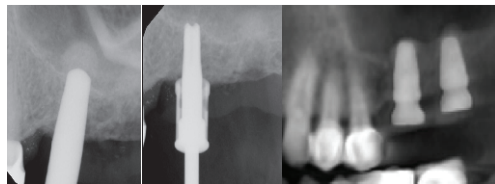
Overcoming Challenges in Ridge Expansion and Horizontal Augmentation

Speakers: Dr. Daniel Cullum & Dr. Bach Le

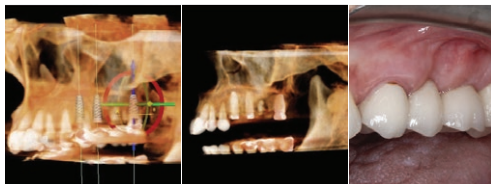
We will discuss CBCT diagnosis, treatment planning and technique selection from a patient centric approach. Technical advances and pearls in horizontal augmentation will be presented to enhance outcomes, prevent and manage complications.

Course Tuition: \$3,900 USD
Early Bird Special: \$3,400 USD
(When paid two months in advance of each course)

Tunnel Grafting & Crestal Sinus Elevation



Immediate Implants & Dynamic Navigation



Overcoming Challenges in Ridge Expansion & Horizontal Augmentation



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Provider ID# 320242

COURSE LEVEL: ADVANCED CE CODE: 690

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