

# AAOMS TODAY



July/August 2024  
VOLUME 22, ISSUE 4

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American Association of Oral and Maxillofacial Surgeons

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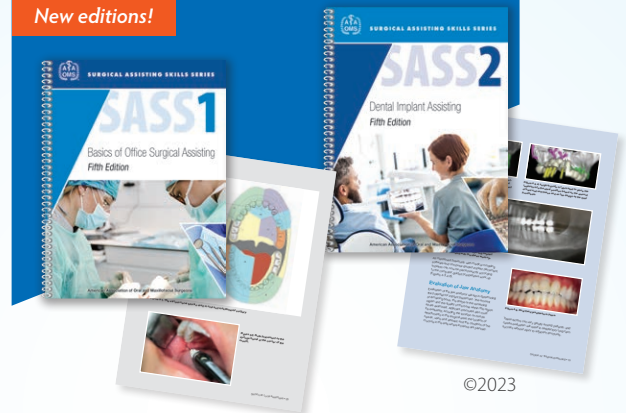


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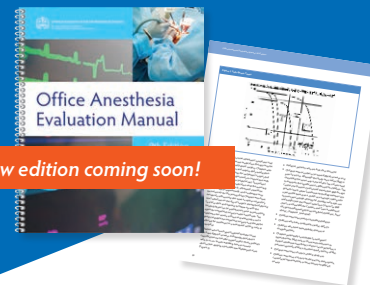
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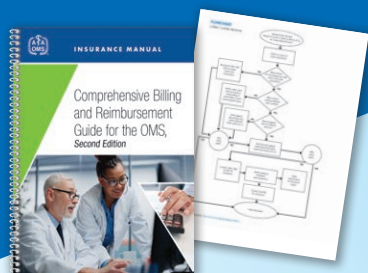
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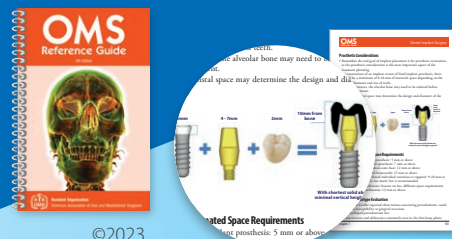


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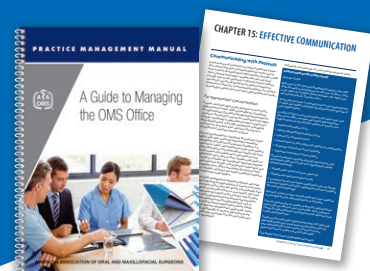
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## COVER STORY

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# Meditation: Unlocking remedy for stress

*Healing for the mind and body*

“Meditation is just like oral surgery; it's a practice. You don't sit down one day on a cushion, a chair or on your bed and suddenly decide you're a completely enlightened person.

– Dr. Ronald C. Quintia”



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## AAOMS Today: Award-winning AAOMS member magazine



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**2024:** Gold Award  
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**2019:** Platinum Awards for Magazine/Writing



**2023:** Gold Awards for Association Magazine, Design and Feature Article  
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**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



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Mark A. Egbert, DDS, FACS  
AAOMS President

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*Throughout my time in AAOMS leadership, I have witnessed the strides we can make when we unite behind a common purpose.*

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## IN MY VIEW

### Celebrate our specialty's

There will be no greater embodiment of my presidential theme, "Stronger Together," than the AAOMS Annual Meeting. This event has always served as a testament to the strength that comes from gathering together as a community of professionals dedicated to excellence in patient care. At the 106th Annual Meeting, Scientific Sessions and Exhibition, which will be held this September in Orlando, Fla., we will emphasize the power of uniting as a specialty to leverage our skills and insights through a robust educational program of clinical and practice management education.

Throughout my time in AAOMS leadership, I have witnessed the strides we can make when we unite behind a common purpose. Our specialty is built upon a foundation of shared knowledge and experience, and it is through our collective efforts that we continue to further the oral and maxillofacial surgery specialty.

From seasoned veterans to young professionals just starting their careers, each OMS brings a unique voice to the conversation – a voice that is strengthened and amplified when joined with others. I encourage members who have never attended an Annual Meeting or who have not attended in quite some time to make their way to the meeting in September and offer their voice to the collective.

### We are stronger when we... learn together

The Annual Meeting provides attendees an extensive and diverse program of clinical and practice management sessions, each of which are designed to address participants' various educational needs and goals while providing the most up-to-date information and developments. From clinical best practices to practice management strategies, the topics explored are sure to tick off a box for everyone.

This year's meeting will showcase eight clinical tracks ranging from dentoalveolar and nerve to trauma and reconstruction. Catch up on the latest in the management of pediatric and adult patients with Pierre Robin Sequence, anesthesia for longer office-based cases and clinical controversies in TMJ trauma management.

Experiential learning is one of the cornerstones of the Annual Meeting. Hands-on courses and interactive demonstrations furnish the opportunity to master new skills or improve upon existing ones. The lineup this year delivers lessons in full-arch dental implants, surgical airway management, surgical



# collective strength at Annual Meeting

approaches to the facial skeleton, advanced life support and coding and reimbursement.

These hands-on courses also allow us to forge connections with new mentors and peers as we advance our skills. Through these shared experiences, we cultivate the expertise and camaraderie that are essential to our continued success.

Additionally, more than 40 practice management sessions will delve into all aspects of effectively running an OMS practice, such as maintaining OSHA compliance, generating referrals and promoting well-being.

## We are stronger when we... collaborate

At the center of this year's meeting are sessions designed to foster discussion and exchange of ideas.

Experts will share their insights, innovative approaches, techniques and strategies in the International Expert Forum (formerly GLOBE). Presented with IAOMS, the session draws OMSs from Europe, Asia and North America to discuss "My Worst Case and What I Learned." In addition, the Global Health Café returns, giving an international perspective of case studies, best practices and solutions to common diagnoses and care in oral and maxillofacial surgery.

When we unite with our international colleagues to compare notes, we often find we have a lot more in common than we may think as we gain a better understanding of our differences.

I also encourage members to get involved in a Clinical/Special Interest Group, which will meet during the lunch hour on Sept. 12 and 13. Become acquainted with like-minded individuals

who are invested in the same topics as you, whether that is pediatrics, cosmetic surgery, OSA, women in OMS or other interests. A CIG/SIG is a great way to become more involved in AAOMS and work in unison to improve the specialty at large.

## We are stronger when we... make connections

In addition to the educational and collaborative components, the Annual Meeting aims to foster meaningful connections.

From networking receptions to research forums on the role of artificial intelligence in oral and maxillofacial surgery, these events provide attendees with the opportunity to build long-lasting relationships. Academic OMSs can find helpful discussions in the Faculty Section Educational Session on "Stronger Together: Training Resilient OMS Residents."

As once stated by Helen Keller, "Alone we can do so little; together we can do so much." When we work in silos, we close ourselves off to the possibilities that collaboration can bring – from sharing information to brainstorming and learning new techniques from one another.

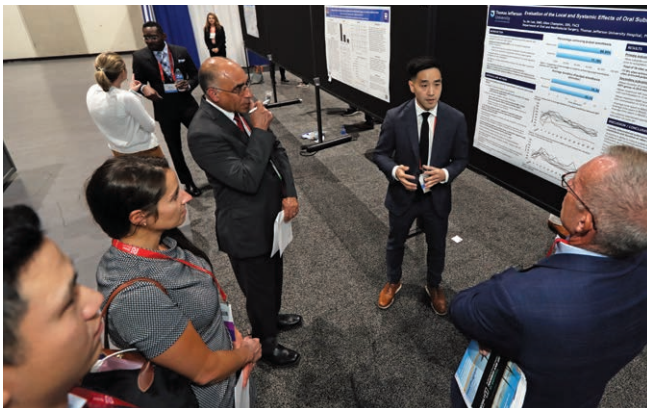
Relationships are not always built in formal sessions, so consider connecting with other OMSs during breaks in the Exhibit Hall between sessions or at the end of the day Happy Hour in the Exhibit Hall reception Sept. 13.

Also, join me at the Opening Ceremony, Awards Presentation and Meeting Dedication on Sept. 11, where we will celebrate the many achievements of our colleagues in areas of advocacy, research, education and humanitarianism. A reception will follow the ceremony, which is yet another great time to strengthen existing friendships and develop new ones.

## We are stronger when we... gather together

The Annual Meeting always serves as a reminder of the strength that comes from unity; this year's theme will offer us the chance to expand on that idea and lean into our collective spirit. By coming together as a community, we not only honor the legacy of those who have paved the way before us but also chart a course for a brighter future for our specialty and, most importantly, for the patients we serve.

I look forward to seeing you in Orlando and connecting again. For more information, visit [AAOMS.org/Orlando](http://AAOMS.org/Orlando). ■



The background of the entire page is a light purple color. In the center, there is a dark blue silhouette of a person sitting in a meditative pose, viewed from the back. Surrounding the head and shoulders of the silhouette is a large, semi-circular halo composed of numerous blue dots of varying sizes. The dots are more densely packed near the silhouette and become sparser as they move outwards. A white rectangular box with a dark blue vertical bar on its left side is positioned in the lower half of the image, containing the text.

# Meditation: Unlocking remedy for stress

*Healing for the mind and body*

# Meditation is known for transforming an individual's life – both personally and professionally – by alleviating stress and anxiety.

A seasoned yoga instructor and three OMSs who practice meditation offer advice on how others can incorporate similar techniques to improve physical and mental well-being.

## 'Cleaning house' mentally and physically

Longtime exercise physiologist and yoga teacher William Ryan, PhD, emphasizes the significance of prioritizing mental health for individuals working in dental professions and especially in high-stress specialties such as oral and maxillofacial surgery.

Ryan said people who are very stressed have an overactive sympathetic nervous system, and the part of their autonomic system that helps them relax is basically shut down. "They're in chronic fight or flight mode, which is very destructive on the body," he said.

*Our mind is scattered. It's hard to focus especially if we have a lot of anxiety and a lot of stress. Meditation is designed to master those roaming tendencies.*

As a meditation practitioner for over 50 years, Ryan has been helping individuals cope with life's pressures through meditation, a practice he began pursuing in college. After earning his doctorate in exercise physiology from the University of Wisconsin-Madison, Ryan spent nearly 30 years teaching in higher education. He then spent seven years at the Himalayan Institute in Honesdale, Pa., where he immersed in yoga and meditation teacher training, biofeedback therapy and holistic wellness practices.

Ryan teaches that managing negative stress can be achieved through meditation, which he describes as any practice that cultivates the peaceful, inward flow of the mind. "Our mind is scattered. It's hard to focus especially



William Ryan, PhD  
Exercise physiologist  
and yoga teacher

if we have a lot of anxiety and a lot of stress. Meditation is designed to master those roaming tendencies," he said.

Attaining a meditative state starts by restoring healthy breathing patterns like diaphragmatic breathing where the abdomen moves rather than the chest.

In his work as a biofeedback therapist, Ryan estimates 90 percent of the roughly 1,000 stressed people he worked with were chest-breathers. "When you can restore healthier breathing, the mind will automatically begin to quiet down, and that's going to make any kind of meditation you implement more effective," he said.

To clear the mind, Ryan suggests individuals find an approach that works best for them. It might be listening to sounds, reciting a mantra or prayer, or focusing on an object. No approach is better than the other, he said.

Besides relieving stress and anxiety and enhancing focus, Ryan said meditation can improve overall health. For example, he said breathing through the nose activates the paranasal sinuses to produce nitric oxide (NO), which plays a crucial role in the body as a vasodilator. NO also has lipophilic and antimicrobial properties.

In addition, he said research shows that the brains of people who practice meditation adapt and function better than the brains of those who do not. As a result, attention is improved as is the mind's ability to discriminate. When the mind can accurately interpret what's happening, Ryan said individuals are more proactive and less emotionally reactive.

The key is tapping the resources already available inside oneself by "cleaning house. We're making the body healthy. We're breathing healthy. We're calming the mind and getting it nice, still, quiet and really focused." ■

*continued on next page*



## Meditation 101: Where to start

*Yoga teacher William Ryan offers four steps for beginners interested in trying the practice of meditation to relieve stress.*

### 1. Find a comfortable, stable position

This is one of the most important steps in meditation. A person can sit or kneel anywhere, as long as the spine is in a stable and upright position. Consider which of these three positions works best:

- **Sit up straight in a chair.** Feet should be on the floor or a prop (not dangling). Consider lumbar support with a pillow or blanket to help maintain proper alignment. “There’s absolutely nothing wrong with sitting in a chair. You don’t get yogi bonus points for sitting on the floor,” Ryan said.
- **Sit with legs crossed on the floor.** How the legs are crossed is not important. “Each of us finds our own variation. A lot of this depends on your hip flexibility,” Ryan said. Sitting on cushions or blankets may help keep the spine vertical.

- **Kneel on the floor.** A small kneeling bench or a cushion between the legs can give stability, help with alignment and ease muscle fatigue.

To achieve ideal vertical alignment for meditation in any position:

- The head is over the torso, which is over the sit bones.
- The chin is parallel to the floor.
- Shoulders are relaxed.
- Hips should be slightly higher than the knees to straighten the spine.
- Arms are relaxed, and hands are resting comfortably.

*Tip:* Avoid lying down because a person is more likely to fall asleep. A slouched seated or kneeling position also can lead to drowsiness.

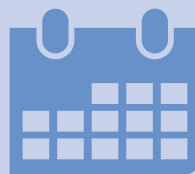
## How to sustain a daily meditation routine

Establishing a routine is fundamental to tapping the mind-calming and stress-relieving benefits of meditation. Yoga teacher William Ryan offers tips for creating daily mindfulness habits.

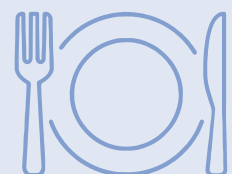
› **Pick a time that works best.** “I like to do my morning meditation practice first thing before I eat breakfast or do anything else. Once your day is started, then you find a million reasons not to sit down and do it,” Ryan said.



› **Start simple.** Try to cultivate a daily routine. Don’t expect perfection overnight. “Regularity is key for a lot of reasons, so start with something that’s very manageable,” Ryan said.



› **Practice before a large meal, if possible.** The body feels clearer before a big meal. After a meal, individuals often are more lethargic.



## 2. Establish relaxed breathing

Breathe through the nose – attention following the air in and out – for a minute or two. Relax the abdomen and the sides of the rib cage while focusing on inhaling and exhaling. Allow breathing to become deep and diaphragmatic.

*Tip:* Don't try to force your breathing to change. "You're not trying to artificially manipulate your breath because that's not going to work toward relaxation," Ryan said.

## 3. Scan the body

Focus attention to each part of the body from the head to the feet. Notice any areas of tension, such as in the shoulders, jaw, back and abdomen. Consciously let go of any physical tension and move onto the next area of the body.

*Tip:* The idea is to take an inventory of the body and systematically relax.

## 4. Meditate

A variety of methods are available for meditating. Find a practice that fits best. Ryan suggests focused attention, where a person concentrates on a task or object, which can include:

- Listening to music, bells or gongs.
- Chanting a mantra or prayer.
- Focusing on a candle, picture or nature.
- Visualizing scenes or images.
- Following a guided meditation session, whether on an app or a video or audio recording.

When the mind wanders away, gently bring it back to the object of your meditation.

*Tip:* The length of the meditation session varies for each person. Don't struggle to sit or kneel for longer than you feel comfortable. Establishing a daily practice is important. "If you could do five minutes every day, you will be far better off than doing an hour once a week," Ryan said.

*continued on next page*

› **Evacuate the bladder and bowels.** It's usually unpleasant and difficult to focus when feeling the urge to use the restroom.

› **Find a quiet, pleasant location.** Avoid common distractions in the modern world. Turn off the cell phone, and don't have a computer or other electronic devices nearby.

The exception would be if the device is being used for guided meditation or listening to music. Earplugs or headphones can restrict or eliminate background noise.



› **Pay attention to what the mind and body are willing to give.** Don't struggle to sit longer than the mind and body feels comfortable to avoid creating tension and stress.



› **Don't judge the quality of the practice.** There is no good or bad meditation session. Every meditation is helpful and beneficial.



## Quest for balance traverses through South Asia



Ronald C. Quintia, DDS  
AAOMS Life Fellow

Ronald C. Quintia, DDS, of Tucson, Ariz., recalls the difficulties and stressors he faced when he first started in the profession 37 years ago.

"Despite all the trappings of a successful practice and all the usual things people are looking for, I just found there was something still not quite right. I can't say that I was 'missing something,' but I had a sense of feeling a little out of kilter," he said.

His journey toward balance led him to Nepal, Bhutan and India. Eventually, Dr. Quintia found solace in guided meditation, a daily practice led by a teacher, in person or via audio or video.

Mindfulness and mediation helped Dr. Quintia become a "compassionate, understanding and focused person" – all qualities he said are invaluable as an OMS. "When I'm operating on my patients, I am there; I'm not distracted. I'm guided by whatever energy that's within me," he said.

"Meditation is just like oral surgery; it's a practice. You don't sit down one day on a cushion, a chair or on your bed and suddenly decide you're a completely enlightened person. It takes time because it requires you to turn off that thinking brain of yours and just be," Dr. Quintia said.

*Dr. Ronald Quintia, left, has known Tibetan lama Khenpo Drupon for years. Dr. Quintia traveled to Bhutan, India and Nepal to find where his "level of spirituality" fit in with the rest of his "rather intense life."*



## Finding respite after transitioning from military to civilian life



Gary J. Geracci, DDS  
AAOMS Fellow

After 21 years in the military – including deployments in Iraq, South America and Central America – U.S. Air Force Col. Gary J. Geracci, DDS, of Las Vegas, Nev., retired from the structured life and returned to civilian ranks.

However, the sudden paradigm shift was not what he expected. Dr. Geracci, who never experienced sleeping issues before, suddenly found himself lying awake at night preoccupied with worries about his work week.

Realizing he needed to find alternative ways to cope with stress other than working out at a gym, Dr. Geracci turned

to a meditation app for mindfulness exercises. He said the daily morning practice sets a positive tone for the day.

"The whole idea is centering yourself in the world and getting the hecticness of the world out for a minute," he said.

Dr. Geracci said he likes the ability of an app to walk him step-by-step through a guided meditation and the positive thought for the day at the conclusion, which he says helps him stay focused.

*Dr. Gary Geracci and his dog, Zulu.*



## Clearing the mind provides focus and clarity



Cathy Hung, DDS  
AAOMS Fellow

For Cathy Hung, DDS, of Monroe Township, N.J., meditation isn't just a practice. "It's a lifeline. It's my secret weapon for maintaining focus and clarity amid the chaos."

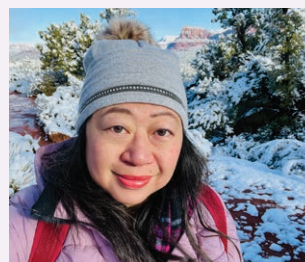
Meditation to Dr. Hung is about focusing on the present, letting go of control and clearing the mind. "It's kind of like dumping out dirty water," said Dr. Hung, who serves as a consultant on the AAOMS Committee on Membership and is a former Wellness Ambassador supported by the ADA Council on Dental Practice's Dental Wellness Advisory Committee.

Calming music helps Dr. Hung channel her energy. "Music has always been a significant part of my life, from classical piano training to a diverse range of genres," she said.

She prefers meditating while barefoot on her patio or in the backyard. "You literally imagine you are a tree with roots going into the earth. Whether it's barefoot on grass or simply visualizing roots extending into the earth, grounding anchors us in the present moment," Dr. Hung said.

Typical half-hour mediation sessions sometimes are punctuated by 15 minutes of journaling. "Journaling is an excellent way of releasing your energy and keeping track of your mental well-being," she said.

*Dr. Cathy Hung traveled to Sedona, Ariz., for a personal retreat in early 2024.*



## Learn and collaborate T-O-G-E-T-H-E-R at

Now is the time to make plans for the 2024 AAOMS Annual Meeting – being held Sept. 11 to 14 in Orlando, Fla. – to learn new techniques, refine skills and exchange ideas with colleagues while exploring the theme “**Stronger Together**” through numerous educational and networking opportunities.

“As a community dedicated to excellence in patient care, we aspire to advance the OMS specialty. The Annual Meeting allows us to leverage our skills through education and collaboratively share our knowledge and expertise for the benefit of our patients,” said AAOMS President Mark A. Egbert, DDS, FACS. “My hope is for everyone to leave the Annual Meeting with strengthened relationships, deeper insights and a unified spirit for continued engagement.”

The strength, value and benefits of the 2024 Annual Meeting for both OMSs and their staff can be summed up in the word TOGETHER.

### Tourist destination

Orlando, Fla., is renowned for its world-class theme parks and sprawling resorts. But the city also boasts a plethora of fine dining choices and activities for outdoor enthusiasts. Central Florida maintains a comfortable average annual temperature of 72 degrees, and September is a perfect time to visit to avoid the crowds. Check out VisitOrlando.com for lists of things to do.

### Options for attendance

Two registration opportunities are available to support the needs of all attendees. With early-bird discounts expiring at the end of July, review the meeting platform opportunities and secure a spot:

- **Orlando with online access** for those attending in-person with access to the full library of on-demand content and session recordings. On-demand content will be available Sept. 9. Select non-ticketed sessions will be available online Sept. 30 through Jan. 31.
- **Online-only access** including on-demand courses beginning Sept. 9 and recordings of select sessions Sept. 30 through Jan. 31. (Online-only registration is available through Dec. 31.)

### Groups for collaboration

Getting together with other OMSs is not just about networking; it also is about collaborating and exchanging ideas and information with peers. The Annual Meeting provides ample opportunities to catch up with colleagues and meet new peers.

OMSs can partake in discussions around the topics that interest them most during **Clinical/Special Interest Groups (CIGs/SIGs)** meetings. CIGs/SIGs contribute to Annual Meeting track session planning and have groups on AAOMS Connect, which all members are welcome to join by visiting [AAOMS.org/Communities](https://AAOMS.org/Communities).

“CIG/SIGs are the best of both worlds. It’s a chance to see what’s new but also to network with colleagues who have similar interests. If you are a new AAOMS member or starting your career, the CIG/SIG members can provide support, mentorship and sponsorship. If you are interested in serving on a committee or lecturing, this is another way to introduce yourself to your colleagues,” said Jasjit K. Dillon, DDS, MBBS, FDSRCS, FACS, Chair of the CIG on Trauma and past Chair of the SIG on Women in OMS.

The following meetings will be held for CIGs/SIGs during the Annual Meeting:

- **Noon to 12:30 p.m. Sept. 12** – Dental Implants, Pediatric Surgery, Pathology and Reconstruction, Orthognathic Surgery and Sleep-Related Breathing Disorders, Cosmetic Surgery, Women in OMS
- **Noon to 12:30 p.m. Sept. 13** – Trauma, Temporomandibular Disorders, Neurology, Anesthesia, Global Surgery, Simulation, Predoctoral Education

*Annual Meeting attendees can participate in Clinical and Special Interest Groups meetings to engage with others interested in specific topics.*





# Annual Meeting

Also, consider attending the **International Expert Forum** on Sept. 13 to hear OMSs from countries such as Finland, Mexico and India discuss My Worst Case and What I Learned. Held in collaboration with IAOMS, the forum will explore global surgery and the differences and similarities of practicing oral and maxillofacial surgery internationally.

Additionally, OMSs from around the world will gather Sept. 12 at the **Global Health Café** to converse about the management of common OMS cases, including case studies, best practices and solutions, all from an international perspective.

Academic OMSs can partake in the **Faculty Section Educational Session**, which this year on Sept. 13 will focus on Training Resilient OMS Residents. Learn about conflict resolution, applicant assessment, emotional intelligence, connected outcomes and championing well-being.

*My hope is for everyone to leave the Annual Meeting with strengthened relationships, deeper insights and a unified spirit for continued engagement.*

– AAOMS President  
Dr. Mark A. Egbert

## Education

The Annual Meeting is the premier gathering each year for OMSs seeking to learn from the experts in their respective fields. Choose from a mix of clinical education options covering the latest innovations and updates in all scopes of practice and Master Classes in a variety of topics.

Attendees can explore eight clinical tracks, each with its own plenary and a Hot-off-the-Press and Abstract session. The eight clinical tracks and their plenaries are:

- **Anesthesia** – Anesthesia for Longer Office-Based Cases: Pearls and Pitfalls. Examine patient selection, modification of anesthetic techniques and recommendations to prevent complications.

*continued on next page*



## 106th AAOMS Annual Meeting, Scientific Sessions and Exhibition

### Stronger Together

**When:** Sept. 9 to 14

*Offered in-person and online*

**Where:** Orlando, Fla.

### Housing information

Special housing rates are available exclusively for AAOMS members through Orchid Events, the only official housing agent for the AAOMS Annual Meeting. Reservations can be made by visiting [AAOMS.org/AMHousing](https://AAOMS.org/AMHousing). Group rates are available until Aug. 15 for Rosen hotels and Aug. 20 for the Hyatt Regency Orlando (headquarters hotel).

**[AAOMS.org/AnnualMeeting](https://AAOMS.org/AnnualMeeting)**



## Register now to get early-bird discounts

AAOMS members and fellows discounts:

- › **Register by July 31**  
**\$100 off onsite general registration**

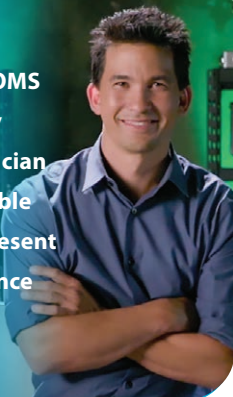
AAOMS allied staff and professional staff discounts:

- › **Register by July 31**  
**\$50 off general registration**

Additional information and registration are available at [AAOMS.org/AnnualMeeting](https://AAOMS.org/AnnualMeeting).

## Keynote

The Keynote Lecture at the 2024 AAOMS Annual Meeting will be presented by Jason Latimer, world champion magician and the creator and host of “Impossible Science” on YouTube. Latimer will present Impossible Science LIVE, a performance of illusions to challenge attendees’ understanding of what is possible.



- **Dental Implants** – Lessons Learned: Failures and Complications. Learn to effectively prevent, diagnose and address challenges that arise during and after dental implant surgery.
- **Dentoalveolar and Nerve** – Nerve Injury in Dentoalveolar Surgery. Explore the current best practice guidelines in terms of diagnosis, documentation, referral and management of nerve injuries.
- **Orthognathic and OSA** – Considerations in the Management of Dentofacial Disharmonies and Coexisting Obstructive Sleep Apnea. Learn about select topics such as identifying patients for sleep workups and palatal expansions as well as virtual treatment planning and perioperative management.
- **Pathology and Head and Neck** – Current Concepts in the Management of Oral and Maxillofacial Pathology. Review the latest in the diagnosis and management of singular pathologic entities of the oral and maxillofacial region.
- **Pediatrics** – Robin Sequence: From Infancy to Adulthood. Gain knowledge of the perinatal needs and treatment options for patients with Pierre Robin Sequence and how these relate to long-term outcomes.
- **Reconstruction** – Update in Head and Neck Reconstruction. Reflect on contemporary surgical techniques and reconstructive options for complex and challenging reconstructive scenarios.

- **Trauma and TMJ** – Clinical Controversies in TMJ Trauma Management. Evaluate the available evidence and clinical experience in management of both adult and pediatric patients with TMJ trauma.

Twelve in-person and 40-plus on-demand Master Classes in addition to two on-demand and two in-person Team-Based Education sessions will cover topics such as performing effective biopsies, antibiotic stewardship, management of gunshot wounds and combined TMJ and orthognathic surgery.

### ■ Practice management education

Practice managers, office staff and OMSs alike can benefit from the expertise shared by presenters of practice management sessions. The Annual Meeting will provide 24 onsite and 13 on-demand practice management sessions, many of which will reflect this year’s theme of “Stronger Together” by exploring topics such as team-building, creating a positive practice culture and enhancing staff and OMS well-being. Other topics include:

- Attracting, onboarding and retaining employees
- Creating a DEI and community engagement plan
- Maintaining effective communication within a team
- Protecting a practice from cyberthreats
- Competing with and working with DSOs

### ■ Preconference sessions

Arrive by Sept. 11 to participate in one of two all-day preconference sessions:

- **Anesthesia Update: Office-Based Anesthesia: Building Bridges** – Review the current controversies and concerns in the administration of office-based anesthesia. Topics will include the management of

*OMSs and reimbursement staff can improve their understanding of OMS-specific coding in the Beyond the Basics Coding Workshop.*



patients with diabetes, the effects of GLP-1 agonists on anesthesia, coordination of emergency services in medical crises and the role BMI plays in sedation.

- **Facial Cosmetic Surgery: Facial Enhancement Surgery and Facial Rejuvenation** – Learn the latest trends in multiple types of facial cosmetic surgery, including non-invasive, minimally invasive and alloplastic augmentation. Topics will include dermal fillers, energy-based skin rejuvenation, mandibular angle implants, blepharoplasty and neuromodulators.

## Team-building events

Attend the Annual Meeting not only for the education but also the team-building activities.

AAOMS offers many opportunities to meet new colleagues and network with OMSs and professional staff throughout the meeting, including:

- **Opening Ceremony, Awards Presentation and Meeting Dedication** – Dozens of OMS innovators and colleagues will be honored on Sept. 11 for research, advocacy, education and other areas.
- **Welcome Reception** – The annual complimentary kickoff event will follow the Opening Ceremony. Refreshments will be served.
- **Keynote Lecture** – The Keynote will be presented by Jason Latimer, world champion magician and the creator and host of “Impossible Science” on YouTube. Watch Latimer’s Impossible Science LIVE, a performance of illusions to challenge everyone’s understanding of what is possible.
- **Happy Hour in the Hall** – After education sessions are over Sept. 13, stop by the Exhibit Hall in the afternoon to mingle and visit exhibitors.
- **Breaks in the Exhibit Hall** – Utilize the breaks between sessions to visit Exhibit Hall vendors and connect with colleagues.
- **President’s Event** – Celebrate AAOMS President Dr. Mark A. Egbert and his wife Dr. Lisa Egbert at Universal Orlando Resort on Sept. 13. See page 21 for more information on the President’s Event.

**Be sure to register early. Select sessions sell out early.**

*Anesthesia assistants can review key skills in office-based anesthesia administration in the Anesthesia Assistants Skills Lab.*



## Hands-on learning

AAOMS offers more than a dozen hands-on sessions at the Annual Meeting, including a new cadaver lab and two dental implant courses. These hands-on courses are ticketed and often sell out, so registering early is recommended. To add tickets to an existing registration, visit [AAOMS.org/AddRegistration](https://AAOMS.org/AddRegistration).

The cadaver lab, **Surgical Approaches to the Facial Skeleton**, will be held Sept. 11 offsite at the University of Central Florida. Review the surgical anatomy associated with approaches to the facial skeleton that might be required in facial trauma surgery and ablative tumor surgery. Procedural exercises – including salivary gland surgery, neck dissections, tracheotomy and local flap surgery – will be discussed.

Two dental implant courses will be presented:

- **Advanced Full-Arch Implant Rehabilitation for the Atrophic Maxilla: Solving Serious Problems Using Zygomatic, Pterygoid and Patient-Specific Implants** – Delve into the challenges associated with reconstructing the severely resorbed maxilla, especially in patients with multiple failed attempts at dental implant placement. The step-by-step course on Sept. 12 will cover the surgical and presurgical planning procedures and protocols for zygomatic, pterygoid and patient-specific implants.
- **Digital Full-Arch Techniques for Predictable Implant Outcomes Workshop** – Learn the entire process of restoring full-arch hybrid cases using a completely

*continued on next page*



digital workflow, including selecting patients and assessing the need for digital rehabilitation. The Sept. 13 workshop will examine digital restorative protocols such as intraoral scanning, photogrammetry and 3D printing of temporary teeth.

Other hands-on sessions for OMSs and their team members to consider include the following:

- **Office-Based Emergency Airway Management (OBEAM) modules** – OMSs can choose from eight two-hour sessions that will be offered Sept. 12, 13 and 14. OBEAM uses intensive, real-life experiences to allow participants to practice and master critical techniques for administering and monitoring office-based anesthesia.
- **Anesthesia Assistants Skills Lab** – Anesthesia assistants can receive hands-on clinical training to aid with anesthesia administration in sessions on either Sept. 13

or 14. Learn to recognize airway obstruction, utilize the principal airway adjuncts and identify critical cardiac dysrhythmias by rotating through different stations.

- **ACLS and PALS** – Assistants, OMSs and other staff can earn certification in the American Heart Association's Advanced Cardiovascular Life Support (ACLS) on Sept. 12 and Pediatric Advanced Life Support (PALS) on Sept. 13. Pre-course preparation is necessary.
- **Beyond the Basics Coding Workshop** – OMSs and their coding and billing staff can learn how to code more efficiently to improve billing and reimbursement in this intermediate-level two-day workshop Sept. 11 and 12. CPT, CDT and ICD-10-CM coding for the full scope of oral and maxillofacial surgery, documentation guidelines and clinical case studies will be covered.

## Join in OMS Foundation and Alliance activities

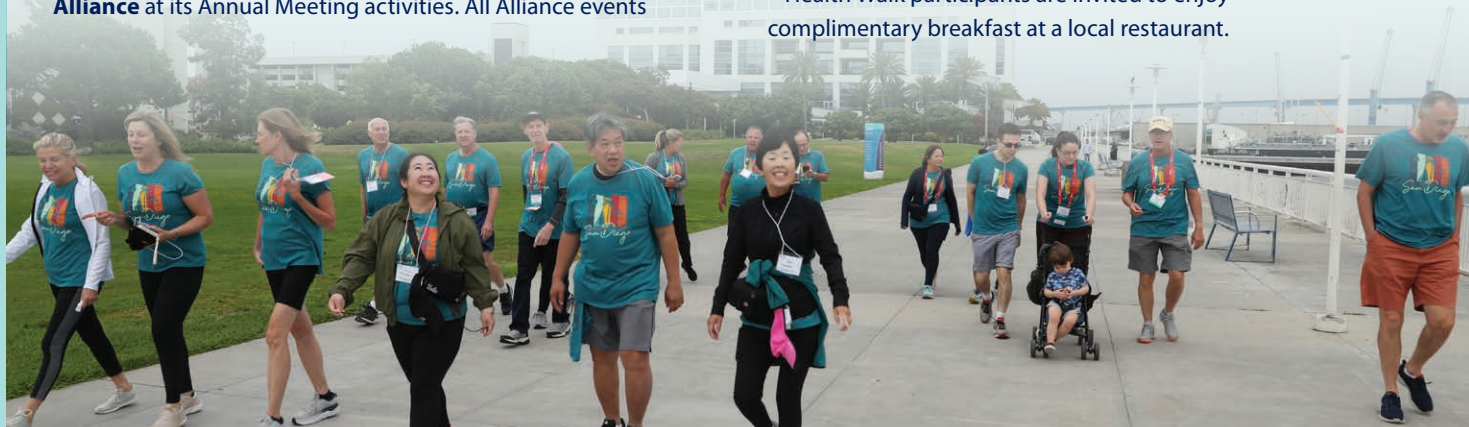
The **OMS Foundation** is offering the following activities at the 2024 AAOMS Annual Meeting:

- **OMS Foundation Booth** – Sept. 9 to 11 in the House of Delegates lobby and Sept. 12 to 14 at Exhibit Hall Booth 1430. Every gift to the Annual Fund received during the Meeting will be matched by Beacon Oral Specialists, up to a total of \$35,000.
- **Poster Session and Reception** – Sept. 12 in the Exhibit Hall.
- **Faculty Lunch and Learn** – Kelly Dore, PhD, will discuss OMS Applicant Assessment: Concept of Connected Outcomes on Sept. 13.

Celebrate '30 Years of Welcome' with the **OMS Foundation Alliance** at its Annual Meeting activities. All Alliance events

support the Global Initiative for Volunteerism and Education (GIVE).

- **Alliance Luncheon and FUNraiser for GIVE** – Have lunch on Sept. 12 at Primo at JW Marriott Orlando, Grande Lakes, featuring 2024 GIVE awardees and the JW Marriott chef speaking on "Integrating Sustainability into a Luxury Brand." Register by Aug. 15 for early-bird pricing at [OMSFoundation.org/Alliance-events](https://OMSFoundation.org/Alliance-events).
- **Alliance Daily Health Walks** – Departing from the Orange County Convention Center entrance at 7:30 a.m. Sept. 11, 12 and 13. Or sign up to walk at a time/place of your choosing. Register at [OMSFoundation.org/Alliance-events](https://OMSFoundation.org/Alliance-events).
- **OMS Foundation Alliance Networking Breakfasts** – Health Walk participants are invited to enjoy complimentary breakfast at a local restaurant.



## Exhibit Hall

More than 100 exhibitors will showcase the latest technology, products and services in the oral and maxillofacial surgery specialty Sept. 12 to 14. Connect with vendors throughout the Exhibit Hall, or drop in at the Member Pavilion to meet with representatives from AAOMS Advocacy, AAOMS Store and Membership Services, ROAAOMS, IAOMS, OMS Foundation, OMSNIC, OMSPAC, Treloar & Heisel, Inc., and AAOMS Advantage partners.

Additionally, be sure to stop by the Exhibit Hall for:

- **Breaks in the Exhibit Hall** – Explore the Exhibit Hall between sessions to visit vendors and catch up with colleagues.
- **AAOMSopoly** – Play the game by scanning QR codes at participating booths and answering multiple choice questions. Answer questions correctly for a chance to win one of many prizes available, including registration to the 2025 Annual Meeting or the Dental Implant Conference.
- **AAOMS Block Party Pavilion** – Check out the pavilion between sessions or at the end of the day to meet colleagues or play Skee-Ball and basketball Pop-A-Shot or try out a virtual reality golf simulator.
- **Industry Symposiums** – Keep up-to-date on the latest developments in the field with exhibitor-hosted morning sessions Sept. 12 and 13.
- **Eat, Drink and Be Industry-Educated sessions** – Join AAOMS supporters Sept. 12 and 13 for Breakfast and Learn, Lunch and Learn as well as Snack and Learn events to hear about issues, opportunities and products.
- **Happy Hour in the Hall** – Eat, drink and mingle with exhibitors following the conclusion of sessions the afternoon of Sept. 13.
- **Career Fair** – Find the right match at the Career Fair hosted by CareerLine and AAOMS from 3:30 to 5:30 p.m. Sept. 13. Job-seekers looking for new opportunities are encouraged to bring resumes. Employers interested in participating can email [info@healthcareers.com](mailto:info@healthcareers.com).

A virtual Exhibit Hall will feature more than 100 exhibitors. Companies can be searched by category, name and more. Online booths will feature web links as well as the ability to learn more about each company.

## Record a complimentary video

Members attending the Annual Meeting will have an opportunity to record their own professional videos on Sept. 12. This complimentary opportunity will be presented as part of the AAOMS Informational Campaign, which educates the public about the expertise and skills of OMSs. Participants will record two 60-second videos – a personal version for their OMS practice and a second one for the campaign's Faces of OMS or OMS Experts video series. Only a limited number of slots are available. Registration must be completed in advance at [AAOMS.org/Videos](https://AAOMS.org/Videos).



## Recorded/on-demand sessions

### Recorded sessions

Both in-person and online-only registrants will have access from Sept. 30 to Jan. 31 to the following recorded sessions:

- **Chalmers J. Lyons Lecture** – Istvan Urban, DMD, MD, PhD, will explore Perspectives on Vertical and Horizontal Augmentation.
- **Eight clinical tracks** – The plenary and Hot-off-the-Press and Abstract sessions for each of the eight clinical tracks will be available.
- **International Expert Forum** – IAOMS will bring OMSs from around the world together to discuss My Worst Case and What I Learned.

*continued on next page*



## 2024 AAOMS ANNUAL MEETING *(continued)*

- **How I Do It** – Two How I Do It sessions will include presentations on Biological Substitutes in Oral Mucosal Reconstruction, Neck Dissection, Update for Osteoradionecrosis, Surgical Approaches for Sub-Condylar Fracture Repair and Patient-Specific Implants (PSIs) in Minimally Invasive Orthognathic Surgery.
- **Team-based Education** – Two team-based sessions – Stronger Together: Advocating for Women in Oral and Maxillofacial Surgery and Antibiotic Stewardship Practices in Dentistry: A Team Approach – will offer educational opportunities for the entire practice staff.
- **OMSNIC Anesthesia Patient Safety Program** – A panel of OMSs and a practicing attorney will illustrate patient safety and risk management principles to help OMSs minimize adverse events related to the in-office administration of anesthesia.
- **Anesthesia Update: Office-Based Anesthesia: Building Bridges** – The popular Anesthesia Update preconference is available online and in person. Note: A separate ticket is required to access the recording.

### ■ On-demand sessions

All registrants will be able to earn 55.0 CDE/43.0 CME credits via the on-demand content library. On-demand sessions will be available beginning Sept. 9. These sessions include:

- **40-plus on-demand Master Classes** covering topics such as building a mobile OMS practice within the DSO ecosystem, perioperative management of pregnant and lactating patients, blepharoplasty, addiction and opioid genomic testing and orbital reconstruction.
- **13 practice management sessions** focusing on DEI, HIPAA compliance, data security, tax reduction, artificial intelligence, retaining staff, well-being and opening a new office.
- **Two team-based sessions** on Performing Effective Biopsies and the Importance of Communication Between the Surgeon and the Pathologist and Jaw in a Day: Successes, Lessons Learned and Where We Went Wrong.

To register, visit [AAOMS.org/AnnualMeeting](https://AAOMS.org/AnnualMeeting). ■

*Annual Meeting attendees can explore the Exhibit Hall during breaks between sessions or during the Happy Hour in the Hall on Friday afternoon.*



## AAOMS President's Event

Friday, Sept. 13 | 7:30 - 11:30 p.m.

Universal Orlando Resort



## President's Event to bring food, fun to Annual Meeting

AAOMS President Dr. Mark A. Egbert and his wife, Dr. Lisa Egbert, will be celebrated at the annual AAOMS President's Event being held at Universal Orlando Resort.

Open to all attendees and guests, the Sept. 13 event kicks off at Universal CityWalk followed by dessert, attractions and entertainment in The Wizarding World of Harry Potter™ - Hogsmeade™ in Universal Islands of Adventure theme park.

A dinner buffet will be served from 7:30 to 9:30 p.m. along the promenade. Attendees also can enjoy entertainment and food and beverage service at:

- Red Coconut Club
- Bob Marley – A Tribute To Freedom<sup>SM</sup>
- Pat O'Brien's® Orlando
- CityWalk's Rising Star
- Hot Dog Hall of Fame®
- The Cowfish® Sushi Burger Bar

Once festivities at CityWalk wrap up at 9:30 p.m., head over to Universal Islands of Adventure for the last two hours to eat dessert, sip on a mug of Butterbeer™ and take advantage of exclusive access to ride attractions and entertainment at The Wizarding World of Harry Potter™ - Hogsmeade™ and Jurassic Park. Featured attractions and entertainment includes:

- **Harry Potter and the Forbidden Journey™:** Soar above the Hogwarts™ castle grounds with Harry Potter™ and his friends on a thrilling adventure.



- **Flight of the Hippogriff™:** Learn the proper way to approach a Hippogriff before you dive around the pumpkin patch and fly past Hagrid's hut.
- **Hagrid's Magical Creatures Motorbike Adventure™:** Fly deep into the Forbidden Forest and discover some of the wizarding world's rarest magical creatures.
- **Frog Choir:** Hear the vocal stylings of a small choir of Hogwarts students accompanied by their giant throaty frogs.
- **Ollivanders™ Wand Shop:** Visit the most trusted wand maker for a magical experience.
- **Jurassic World VelociCoaster:** Head over to Jurassic World and race alongside Raptors.

The event concludes at 11:30 p.m. Casual attire is appropriate for this event.

Tickets for the evening will cost \$150 for adults (rises to \$175 after July 31) and \$100 for children under age 21 (rises to \$125 after July 31). The price includes food, beverages, rides, entertainment and transportation to and from the venue.

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# Orlando



# 2024 AAOMS ANNUAL MEETING EDUCATION PROGRAM-AT-A-GLANCE



THURSDAY, SEPT. 12									
	Track	Track	Other Sessions						
7 a.m.			Industry Symposiums (GCF1)						
7:30 a.m.									
8 a.m.									
8:30 a.m.	Dental Implant Plenary: Lessons Learned: Failures and Complications (GP1a)	Pediatrics Plenary: Robin Sequence: From Infancy to Adulthood (GP2a)	Practice management sessions (PM01, PM02, PM03 and PM04)	Global Health Café (GS01)	Advanced Cardiovascular Life Support (ACLS) (XACLS)	Begins 7:30 a.m. Beyond the Basics Coding Workshop: Day 2 (XCW02)	Office-Based Emergency Airway Management (OBEAM) (XSIM1A)	Exhibit Hall open	
9 a.m.									
9:30 a.m.									
10 a.m.									
10:30 a.m.	Networking break in Exhibit Hall								
11 a.m.	Dental Implant Track: Hot-off-the-Press and Abstract Session (GP1b)	Pediatrics Track: Hot-off-the-Press and Abstract Session (GP2b)	Practice management sessions (PM05, PM06, PM07 and PM08)	Advanced Full-Arch Implant Rehabilitation for the Atrophic Maxilla (XH02)					Office-Based Emergency Airway Management (OBEAM) (XSIM1B)
11:30 a.m.									
Noon	CIG/SIG meetings noon to 12:30 p.m. in room 340AB								
12:30 p.m.	Complimentary Attendee Lunch in the Exhibit Hall								
1 p.m.									
1:30 p.m.									
2 p.m.	Pathology and Head & Neck Plenary: Current Concepts in the Management of Oral and Maxillofacial Pathology (GP1c)	Orthognathic and OSA Plenary: Considerations in the Management of Dentofacial Disharmonies and Coexisting Obstructive Sleep Apnea (GP2c)	Practice management sessions (PM09 and PM10)				Office-Based Emergency Airway Management (OBEAM) (XSIM1C)	OMSNIC Anesthesia Patient Safety Program (GS02)	
2:30 p.m.									
3 p.m.				Poster Session and Reception (GPS1)					
3:30 p.m.	Networking break in Exhibit Hall								
4 p.m.									
4:30 p.m.	Pathology and Head & Neck Track: Hot-off-the-Press and Abstract Session (GP1d)	Orthognathic and OSA Track: Hot-off-the-Press and Abstract Session (GP2d)					Snack & Learn (GPT3)		
5 p.m.									

FRIDAY, SEPT. 13									
	Track	Track	Other Sessions						
7 a.m.			Industry Symposiums (GCF2, GCF3 and GCF5)						
7:30 a.m.									
8 a.m.									
8:30 a.m.	Trauma and TMJ Plenary: Clinical Controversies in TMJ Trauma Management (GP3a)	Dentoalveolar and Nerve Plenary: Nerve Injury in Dentoalveolar Surgery (GP4a)	Practice management sessions (PM11, PM12 and PM13)	ACS Update (SOF1)	Chalmers J. Lyons Lecture (GS03)	Oral Abstract Session One (SA1)	Pediatric Advanced Life Support (PALS) (XPALS)	Office-Based Emergency Airway Management (OBEAM) (XSIM2A)	Research Open Forum (SOF2)
9 a.m.									
9:30 a.m.									
10 a.m.									
10:30 a.m.	Networking break in Exhibit Hall								
11 a.m.	Trauma and TMJ Track: Hot-off-the-Press and Abstract Session (GP3b)	Dentoalveolar and Nerve Track: Hot-off-the-Press and Abstract Session (GP4b)	Practice management sessions (PM14, PM15, PM16 and PM17)	Digital Full-Arch Techniques for Predictable Implant Outcomes Workshop (XH03)				Office-Based Emergency Airway Management (OBEAM) (XSIM2B)	Breakfast & Learn (GPT4)
11:30 a.m.									
Noon	CIG/SIG meetings noon to 12:30 p.m. in room 340AB								
12:30 p.m.	Networking lunch break in Exhibit Hall								
1 p.m.									
1:30 p.m.									
2 p.m.	Anesthesia Plenary: Anesthesia for Longer Office-Based Cases: Pearls and Pitfalls (GP3c)	Reconstruction Plenary: Update in Head and Neck Reconstruction (GP4c)	Practice management sessions (PM18 and PM19)	Anesthesia Assistants Skills Lab (XASL01)	Oral Abstract Session Two (SA2)	Faculty Lunch & Learn	Faculty Section Edu Session (SF1)	Office-Based Emergency Airway Management (OBEAM) (XSIM2C)	Lunch & Learn (GPT5)
2:30 p.m.									
3 p.m.									
3:30 p.m.	Networking break in Exhibit Hall								
4 p.m.									
4:30 p.m.	Anesthesia Track: Hot-off-the-Press and Abstract Session (GP3d)	Reconstruction Track: Hot-off-the-Press and Abstract Session (GP4d)							
5 p.m.									
5:30 p.m.									
6 p.m.									

SATURDAY, SEPT. 14									
8 a.m.	Immunotherapy and Head and Neck Oncology (SS01)	Mgmt of Mandible Condyle Fractures: What Is the Best Evidence? (SS02)	Stronger Together: Advocating for Women in OMS (SS03)	How I Do It Session (SS04)	Oral Abstract Session Three (SA3)	Practice management sessions (PM21 and PM22)	Anesthesia Assistants Skills Lab (XASL02)	Disasters From the Masters: Complications and Management in Anesthesia (SR1)	Office-Based Emergency Airway Management (OBEAM) (XSIM3A)
8:30 a.m.									
9 a.m.	Guidelines for Avascular vs. Microvascular Reconstruction (SS05)	Clinical Decision-Making in Sleep Surgery (SS06)	Comprehensive Face and Neck Rejuvenation (SS07)	How I Do It Session (SS08)					
9:30 a.m.									
10 a.m.									
10:30 a.m.	Networking break in Exhibit Hall								
11 a.m.									
11:30 a.m.	Women's Cardiovascular Health (SS09)	Avoiding Nerve Injury in Oral and Maxillofacial Surgery (SS10)	Third Molar Pain Management: What is Old and New? (SS11)	Maxillary Orthognathic Surgery Revisited (SS12)					
Noon	Office-Based Anesthesia: New Drugs, Complications & Patient Selection (SS13)	Parotid Pathology for the Oral Surgeon (SS14)	Update in Mgmt of TMJ Intraarticular Pain and Dysfunction (SS15)	Antibiotic Stewardship Practices in Dentistry: A Team Approach (SS16)					
12:30 p.m.									
1 p.m.									

## ON-DEMAND SESSIONS (available Sept. 9 to Jan. 31)

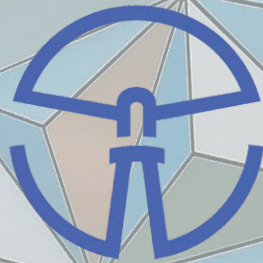
40-plus Master Classes	13 Practice management sessions	2 Team-based sessions
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**"THINK. BELIEVE.  
DREAM. DARE."**

*-Walt Disney*

**WE ARE BEACON**



**MEET US AT THE 2024  
AAOMS ANNUAL  
MEETING**

**SEPTEMBER 12-14  
ORLANDO, FL**

**BOOTH  
#710**

**PROUD SUPPORTER OF AAOMS  
& THE OMS FOUNDATION**





## New course to review successful risk management

The ability to effectively manage risk by recognizing and avoiding common pitfalls can help an OMS practice build a solid foundation and protect patient safety.

A new, in-person AAOMS course – Legal Aspects of Practice and Successful Risk Management for the OMS – will share real-world examples of practice negligence facing dental and specialty practices and reveal how easily mistakes can be made. OMSs, practice managers and staff who attend the day-long course – being held Nov. 2 in Rosemont, Ill. – will review the most common dental board, OSHA and HIPAA violations to equip their teams with best practices and strategies to minimize the chances of repeating similar errors.

Additionally, attendees will learn from course speaker Olivia Wann, JD, founder of Modern Practice Solutions, LLC, in Dover, Tenn., how to identify must-have elements for inclusion in a patient's dental record and how proper recordkeeping contributes to effective risk management of the practice.

Wann serves as a consultant and attorney for the dental profession in areas of compliance and has authored compliance manuals and articles in leading industry journals.

Wann said the risk management strategies discussed in the program will help OMSs and practice managers avoid legal issues that might arise in their practices, adding that “a lack of understanding of the legal aspects of managing a practice can result in fines, penalties, litigation, an interruption of a practice's operations and a deterioration of the practice's reputation.”

She suggests OMSs reassess their risk management practices regularly, such as on an annual basis, to ensure their practice aligns with current rules and regulations, as “identification of potential land mines can help steer practice owners away from disastrous results that can negatively impact the practice.”

### Minimizing risk

Effectively managing risk is essentially about providing the best patient care, said Thomas A. McDonald, DMD, MD, Chair of the AAOMS Committee on Practice Management and Professional Staff Development. “Our patients benefit from our preparation and skills. Optimizing our strategies leads to better outcomes for those patients. Our referring doctors also benefit when their patients have the best outcomes, which can lead to more confidence in our practice,” he said.

### Legal Aspects of Practice and Successful Risk Management for the OMS

**When:** 8 a.m. to 4 p.m. Nov. 2

**Where:** Daniel M. Laskin Institute for OMS Education and Innovation, 9700 W. Bryn Mawr Ave., Rosemont, IL 60018

**CE credit:** 6.0 CDE

**Who:** OMSs, practice managers and staff

**Member cost:** \$375

**Registration:** Visit [AAOMS.org/RiskManagement](http://AAOMS.org/RiskManagement)

While in dental school and residency, OMSs learn how to treat a wide variety of oral and maxillofacial issues but often do not learn much about the legal risks that need to be considered when they are out in practice, Dr. McDonald said. “Knowing how to protect your business so that you can provide great patient care is critical for the oral and maxillofacial surgeon,” he said.

Complications can occur even in the best of circumstances and with the best of intentions, Dr. McDonald said. “It is important to have strategies and plans in place to minimize the pitfalls of daily practice. Also, being prepared usually mitigates the extent to which problems progress when they happen. No one has ever been sorry that they were overprepared when a legal or medical complication occurred,” he said.

Should an OMS become the subject of a complaint, Dr. McDonald said complete and accurate records are a benefit to the OMS's legal team.

### Course can benefit new, experienced OMSs

The course will provide insight for both the new OMS and the seasoned veteran to learn and identify vulnerabilities in their practice to avoid legal traps.

Dr. McDonald said beginning with best practices in mind is an ideal way to start a business. “It is best to start out on the





## practices for OMS



right foot and build good habits than to try and make changes later. That is one reason this topic is important to the newer OMS," he said.

For OMSs who have been in practice for years, he said there is a certain comfort in doing things the same way. "Taking a fresh look and considering new legal and risk management strategies are never bad ideas. Protecting the business you have worked so hard to build is important to the more seasoned OMS," Dr. McDonald said. ■



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## Enhance cybersecurity for practice safety

Protecting oral and maxillofacial surgery practices from cyberattacks is vital, as attacks can have a financial, operational and emotional effects on practices, employees and patients. AAOMS provides resources to help OMSs and their teams bolster their cybersecurity to keep their and their patients' data safe.

Cybercriminals use a variety of tactics to infiltrate practices' systems and collect sensitive protected health information or other data, which can be used as leverage for fraud schemes or to extort the practice by demanding a ransom payment.

These tactics include phishing emails, such as sending via email an attachment that appears to be a new patient form. Bad actors may call the practice ahead of time to ask if they can send information via email, claiming that the practice's online portal or registration form isn't working. Always think before clicking email attachments and links, especially if the email is coming from an unknown source. Verify the identity of the sender and the security of the attachment.

Bolstering the security of any practice computer that accesses the internet and email also is recommended.

AAOMS recommends members take the following steps to ensure their data stays secure:

- **Training** – All team members need to learn how to identify social engineering attacks such as phishing. Training is typically available from cybersecurity companies.
- **Turn on multifactor authentication (MFA)** – Enable MFA on all websites and applications as an added layer of defense. When logging into a website or app that has MFA enabled, a user will receive a text message or interact with an app on their phone to approve the log in, preventing unauthorized access to applications.
- **Focus on password management** – Password management tools create unique and strong passwords for every website and app and then store them in a password-protected vault.
- **Identify vulnerabilities** – Practices should utilize a vulnerability scanning tool that scans their computers and firewalls daily to identify areas of the network that bad actors may exploit to gain access to your network and data.
- **Monitor finances** – Check bank accounts and credit reports for suspicious activities. Never wire money without verbally confirming the account number and routing number with the recipient.



- **Invest in AI antivirus software** – This technology, typically known as MDR or EDR, uses artificial intelligence to detect malicious code and hacker behaviors and can alert security engineers and/or autonomously fight back.

AAOMS offers the following two on-demand cybersecurity webinars in its CE library:

- **Cybersecurity: What's the Cost of Doing Nothing?** – Learn best practices to avoid falling prey to hackers as well as how they select their victims.
- **Don't Click This! HIPAA Compliance and Cybersecurity Updates for Oral Surgeons** – Ensure the practice has a risk assessment completed and the right training, policies and procedures in place.

Another informative resource is the Cybersecurity for OMS Practices episode from the AAOMS On the Go Podcast. This 30-minute episode features Gary Salman, CEO of Black Talon Security, who outlines the potential operational, reputational and financial impacts of cyberattacks. Visit [AAOMS.org/Podcast](https://AAOMS.org/Podcast) to listen.

For additional resources, visit [AAOMS.org/Cybersecurity](https://AAOMS.org/Cybersecurity). ■





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AAOMS Today Editor

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*“Asking the right people the right questions in the right way and then carefully listening to and considering their responses may be the most powerful way to determine if and what changes may be in order.”*

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*Please email me at [jhupp@aaoms.org](mailto:jhupp@aaoms.org) with your comments, questions and suggestions. I look forward to hearing from you.*

## FOR WHAT IT'S WORTH

### Ask and listen to

I know we as OMSs regularly change how we think and do things. In the May/June edition of *AAOMS Today*, I addressed the various categories of customers we serve and for whom change is expected, even if the customer is not aware something has changed.

As Sir Winston Churchill stated, “To improve is to change; to be perfect is to change often.” As surgeons, we all learn from our successes but usually learn more powerfully from our mistakes. Changing is not a foreign concept. What might be true is that we often don’t see the need to change, especially when we perceive all is going well. However, history is full of instances in which individuals and organizations believed all was fine, until things suddenly weren’t. (Think Boeing for one example.)

Sometimes bad circumstances and outcomes are unavoidable, but much more commonly they are foreseeable and thereby avoidable. The challenge is recognizing and reacting to the need for change before being forced to do so when less comfortable or controllable situations arise.

What might be the reasons or impetus for change? For an organization like AAOMS, it might include changes in member (and potential member) expectations.

Some say the younger generation of surgeons have higher expectations for organizations of which they are members or might choose to join. Back in my day (way, way back) most OMSs joined AAOMS because it was just the thing to do. I don’t recall having other specific expectations other than a useful program at the Annual Meetings.

AAOMS leadership has long recognized this is no longer the case as exemplified by a much wider array of programming and more robust sharing of information related to advocacy, practice management, patient safety, etc. There also are more channels of information sharing such as podcasts, remote attendance and learning opportunities, social media presence and a revamped website. In addition, AAOMS leaders over the past decade have been more approachable to the general membership than I recall in the past. Do all these changes mean AAOMS can now sit tight? In my mind, that would never be appropriate.





# determine if and what changes may be in order

## Changes in academia

My colleagues in OMS academia have experienced changes. Again, younger trainees have a wide variety of preferred learning styles. Granted, that has always been the case. But I believe gone are the days when faculty could simply choose one way to teach dental students and residents and expect them to learn and be satisfied. Better trainees expect to challenge the pronouncements of faculty and be treated as respected colleagues. I hope the days of bullying trainees have passed. Academic OMSs must manage the challenges of generating ever-growing percentages of their income through faculty practice while still attending to the expectation of scholarly accomplishments, participation in university and hospital administrative affairs, and dealing with the extremely serious shortage of academic OMSs.

Private practice OMSs have businesses to manage on top of patient care (unless, I suppose, they followed the siren call to join corporate dentistry). Even those in large corporate practices must stay abreast of patient expectations for not only top-notch clinical care but also greater doctor-patient communication and face-to-face time than in earlier eras.

In the past, at least in the United States and Canada, most patients simply accepted what the doctor said as gospel. Many patients now search online for information about their condition and even about us as individuals. Practitioners also are aware of the ever-growing competition from other dental specialists and generalists, particularly in the areas of dentoalveolar and implant surgery.

OMS staff team members have evolving expectations too. Even in the post-COVID era, shortages of talented staff members bring the desire for better pay, more flexible working hours, greater in-office communication and the need for paid child care while they are working in the office. Meeting these challenges brings another impetus for change.

How does an organization, large or small, or an individual know what changes might be needed? My simple answer is to ask and listen. I'm one of those people who typically responds to surveys asking for my opinion, whether it be from a restaurant I've visited or a help line I needed to access. Am I doing it to just get my concerns off my chest? No, I do so because I admire organizations that seek feedback from customers because that is how they determine if changes are needed.

## Asking the right questions

I know many healthcare organizations ask for feedback from patients. But do those same organizations ask for feedback from staff members? Do the leaders of those organizations ask for feedback on how well they are leading from others

in the leadership structure or organization members? Do organizations reach out to those who have left or turned down job offers from the organization to ask why? Do organizations find a way to learn why certain groups or individuals decide not to join the organization? Do organizations ask why some members don't contribute to advocacy funds or charitable arms of the organization or

seek leadership opportunities?

Asking the right people the right questions in the right way and then carefully listening to and considering their responses may be the most powerful way to determine if and what changes may be in order. Then one must be ready to gauge what changes are worthy of adoption, or at least trial runs.

Once a change is determined to be carried out, it is important to create a change plan. Change can be messy and concerning to those who are fully comfortable with the status quo. Be careful not to minimize how threatening change can feel within an organization. Transparency is

*continued on next page*





useful when explaining the rationale for change, and it's important to be empathetic to those likely to resist or undermine planned changes. As a dental school dean, I learned to listen extra carefully to naysayers to not only address their concerns but also because they often were stating what others were silently thinking. Frequently their concerns were completely valid and helped modify the planned change for the better.

Avoid overselling or overconfidence when explaining planned changes. Be sure to set reasonable expectations for outcomes for more major changes and prepare for partial or complete failure. Set milestones to be used as when to assess how changes are working out. Additionally, for more major changes, be ready to implement midcourse corrections.

Although organizations of all sizes must continuously change to stay vibrant and relevant, never underestimate the challenges of changing to others – and even to you as the change agent. For most leaders, major changes can be emotional rollercoasters with peaks and valleys. However, once a planned change has successfully played out, the rewards to all involved are invigorating and usefully serve as a launching pad when future changes are needed. ■



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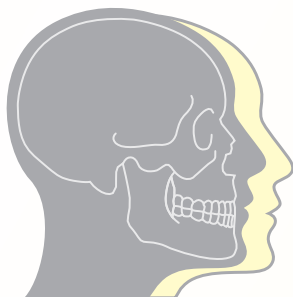


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## OMSs can transform lives by donating services

For the past 50 years, Dental Lifeline Network (DLN) has worked to provide oral healthcare to those who cannot afford treatment and desperately need it. Through a network of volunteer OMSs, dentists and labs, DLN's Donated Dental Services (DDS) program helps individuals receive comprehensive dental care. Since its inception in 1974, DLN has provided \$538 million in donated treatment to over 170,000 people in need.

To celebrate its 50th anniversary, DLN is recognizing the individuals and volunteers who have helped patients through its programs. OMSs who volunteer for the DDS program are critical in treating the patients, and their participation in the program makes a large impact. Without volunteer oral and maxillofacial surgeons, much of the care patients desperately need could not be completed.

The DDS program can change lives. Ron, 65, of Colorado, was originally referred to the DDS program by the oncology department at his hospital. Ron was diagnosed with metastatic lung cancer and needed dental clearance before he could move forward with cancer treatment. He was missing several teeth and many of his remaining teeth were decayed, leaving him vulnerable to infection and unable to meet the requirements for the cancer treatment he needed.

Ron and his wife struggle to make ends meet, surviving on his short-term disability benefit and her part-time income. This made access to dental care seem far out of Ron's reach.

A team of DDS program volunteers came to Ron's aid. Rebecca Facy, DDS, MD, moved quickly to extract his remaining teeth within a week of his consultation. Dr. Facy's timeliness and willingness to volunteer allowed Ron to move on to the next steps of his treatment and played a pivotal role in restoring Ron's dental health. A general dentist and volunteer lab then partnered to donate full upper and lower dentures. The general dentist also offered to continue helping Ron with any future adjustments he may need. Because of the collaborative team of volunteers, Ron received thousands of dollars in donated treatment that restored his dental health and enabled him to move forward with cancer treatment.

Ron shared his gratitude saying, "You have made my life more fulfilled. The cancer was hard but what you have done for me made it much easier."



*Donated Dental Services care recipient Ron (right) received care from Rebecca Facy, DDS, MD (center), so he could move forward with his cancer treatment.*

With a waitlist of people across the United States in need of care, the DDS program relies on the generosity of volunteer OMSs who have an opportunity to make an impact and change lives. DLN makes it simple to help those who need oral healthcare by offering DDS coordinators to organize the details while OMSs treat patients in the convenience of their own offices.

To sign up or learn more about volunteering, visit [WhyIDental.org](http://WhyIDental.org). ■







Dr. Chris Johnson of Johnson Oral Facial Surgery in Dallas, TX

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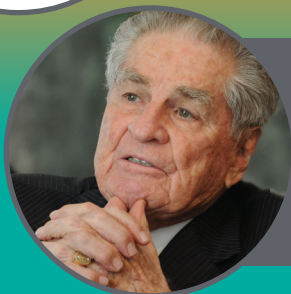
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Brett L. Ferguson, DDS, FACS  
*OMS Foundation Chair*

## Early research investments yield solid returns

**L**ike any investor following the stock market's latest turns, I'm grateful for the expert advice – backed up by diligent research – that guides my investing decisions. As the Foundation Chair, I'm doubly grateful for the knowledgeable and perceptive volunteers serving on our Committee on Research, whose recommendations guide the Foundation's annual disbursements for research and education.

Each year, this Committee is tasked with reviewing, critiquing and ranking a sheaf of proposals and identifying those that promise to expand our knowledge, refine our best practices and advance our capacity to offer the highest level of care to our patients. Selecting these proposals is an arduous, time-consuming task, but ultimately leads to substantial and lasting rewards.

A recent episode of the PBS "Life on the Line" series that aired during Oral Cancer Awareness Month attests to this Committee's aptitude for identifying promising OMS researchers in the earliest stages of their careers and opening doors to greater opportunities. Chi Viet, DDS, MD, PhD, FACS, an Associate Professor at Loma Linda University and a leader in our specialty's efforts to understand and vanquish head and neck cancer, is prominently featured in "Keep Moving Forward."

In the episode, Dr. Viet leads the fight to save the life of a father of six afflicted with a devastating cancer necessitating removal/replacement of his mandible. With time running short, the surgical team opts for a Jaw in a Day procedure, offering their patient – and his family – a shot at hope. Told from the patient's perspective, the episode showcases the expertise and compassion that are the hallmarks of our OMS specialty. Watching it, I was overcome with pride for this extraordinary young surgeon, for the Foundation's role in

supporting her dreams and for the dedication to excellence I witness every day among my AAOMS colleagues.

The Foundation was among the first to recognize and encourage Dr. Viet's extraordinary potential, funding investigations into the origins and treatment of oral squamous cell carcinoma and the intractable pain that often accompanies it. Three of those investigations were selected for the Foundation's Stephen B. Milam Award for the highest-ranked proposal submitted that year. Dr. Viet received the OMS Foundation Research Recognition Award at the 2023 AAOMS Annual Meeting, becoming the youngest recipient of the award.

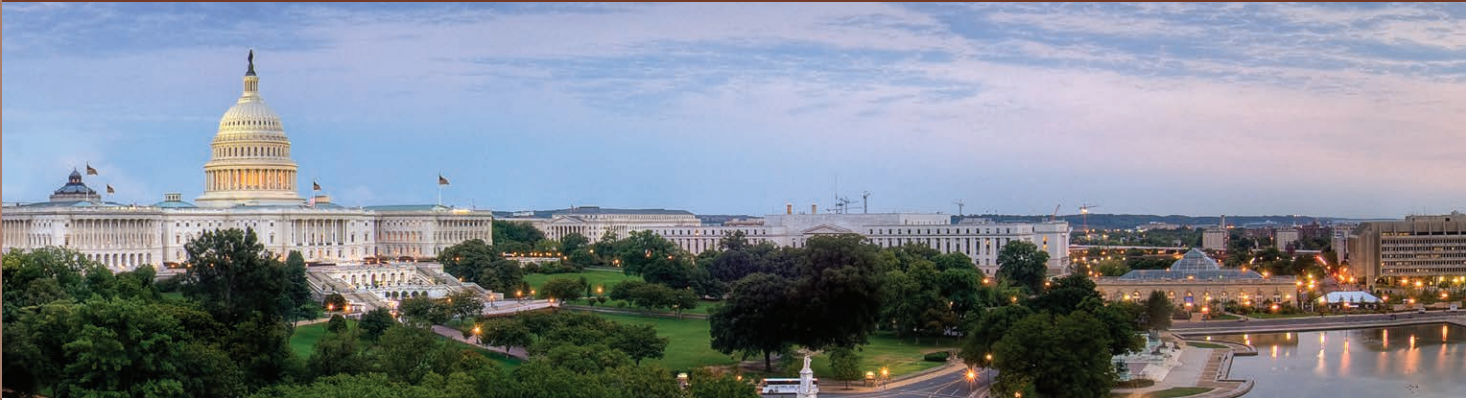
She also is part of a small, elite cadre of OMS researchers whose current work is supported by major grants from the National Institutes of Health. Since 2022, four NIH grants listing an OMS as the principal investigator or co-PI – with a collective value of \$11.4 million – have been awarded to research teams whose origin stories include a grant from the Foundation.

I don't need to consult my financial advisers to know that \$11.4 million is an impressive return on a handful of \$75,000 Research Support Grants. And if you have any doubts about the value of our investments in cancer research, I encourage you to watch the PBS episode. We are part of a massive multidisciplinary battle against cancer – a foe that continuously threatens us, our patients and those we love. As a Foundation donor, I'm proud to support that effort. Today I ask you to join me in this fight with a gift at [OMSFoundation.org/Donate](https://OMSFoundation.org/Donate) in September, when your gift will be matched by Beacon Oral Specialists up to a total of \$35,000.

Scan the QR code to view the PBS episode. ■







## States closing out spring legislative sessions by

State legislatures are starting to wrap up as legislators, along with Congressional leaders, gear up for the final months of the 2024 election season. Several national organizations have passed or announced initiatives regarding key aspects of the OMS specialty.

### State level

Significant movement occurred this spring in some legislatures on state licensure and billing issues including:

■ **Licensure Compact** – Nine states (Colorado, Iowa, Kansas, Maine, Minnesota, Tennessee, Virginia, Washington and Wisconsin) passed legislation to join the Council of State Governments (CSG) Dentist and Dental Hygienist Compact. The goal of the new interstate compact is to create reciprocity among participant states and reduce the barriers to license portability for dentists and dental hygienists.

As the minimum number of states needed for the CSG Compact to take effect has been met, the states now will

work on forming the administrative body to oversee the compact and develop regulations for implementation. The compact only applies to basic dental licensure. The compact does not address issues such as specialty licensure, anesthesia permitting or scope of practice, whose authority is retained by the individual states. Additional information on the process is available at [DDHCompact.org](http://DDHCompact.org).

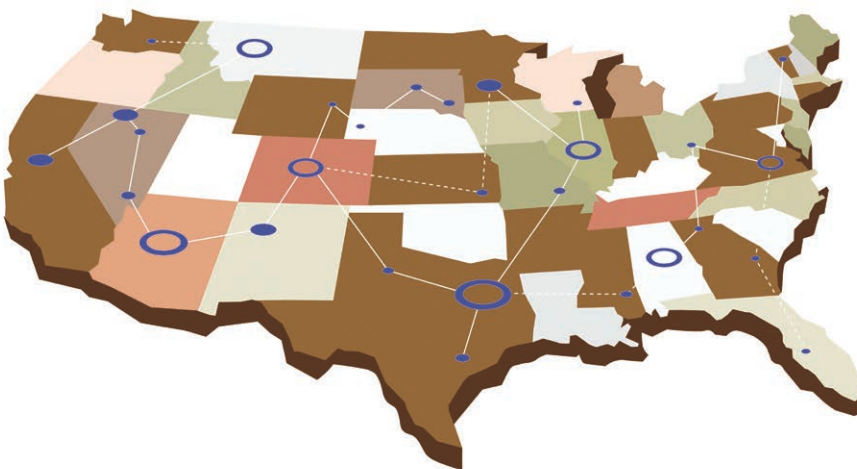
■ **Arizona** – Gov. Katie Hobbs (D) signed into law SB 1070, which mandates health insurers accept tangible checks. It also includes a provision on opting out of payment methods such as virtual credit card payments.

■ **Iowa** – Gov. Kim Reynolds (R) signed HF 2400 into law, requiring dental insurance providers offer alternative payment methods beyond virtual credit cards. Additionally, HF 2400 grants dentists the option to decline participation in network leasing agreements.

Several national organizations are paving the way for changes in the oral and maxillofacial surgery specialty in

the areas of state dental loss ratios (DLRs) and standardizing dental assistant career pathways. Key initiatives include:

■ **NCOIL Dental Loss Ratio model** – The National Conference of Insurance Legislators (NCOIL) ratified a model bill addressing DLRs. The health subcommittee agreed to the package – which was negotiated by the ADA and the National Association of Dental Plans in January – and the full NCOIL body approved the measure in April.







## taking action on licensure, insurance issues

■ **DANB survey results** – A survey by the Dental Assisting National Board (DANB) of 500 dentists and 600 dental assistants highlights the national shortage of qualified dental assistants affecting practice efficiency. The October 2023 survey revealed dentists prioritize hiring qualified assistants, while assistants prioritize further education as patients expect educated and credentialed assistants. These insights were confirmed by a separate public survey of over 1,000 consumers, analyzed by DANB's partner, McCabe Message Partners. DANB is using this information as part of a broader effort to address existing barriers and discrepancies and standardize dental assistant career pathways and scope of practice across states.

Visit [AAOMS.org/TrackingMap](https://AAOMS.org/TrackingMap) for a full list of legislation being tracked by the Association and stay connected with your state OMS society and dental association for future developments.

### Federal level

Congress has not advanced any notable healthcare legislation this year. However, addressing issues such as price transparency, drug shortages and reauthorizing the expired pandemic and emergency preparedness law before the end of the 118th Congress remains a priority. The Senate Health, Education, Labor and Pensions (HELP) Committee held a hearing on May 16 titled, "Examining the Dental Care Crisis in America: How Can We Make Dental Care More Affordable and More Available?" AAOMS submitted written comments, which can be found on [AAOMS.org](https://AAOMS.org). Senate HELP Committee Chair Bernie Sanders (I-Vt.) at the hearing also unveiled the Comprehensive Dental Reform Act of 2024 (S 4537), which among other provisions seeks to expand comprehensive

dental coverage to all Medicare, Medicaid and Veterans Affairs beneficiaries. The bill is not expected to gain traction in the near future.

The Biden administration recently released several proposed and final rules on topics such as competition in the healthcare sector, disability discrimination, Medicaid, Medicare, overtime requirements and student debt. Detailed summaries of these rules can be found on [AAOMS.org](https://AAOMS.org).

### OMSPAC

- OMSPAC raised \$330,412 from 12.89 percent of the membership as of April 30, 2024. Additionally, OMSPAC has contributed \$233,500 to 62 federal candidates and three party committees so far during the 2023-24 election cycle.
- Visit [OMSPAC.org](https://OMSPAC.org) to view information on member contribution totals or a list of candidates to whom OMSPAC has contributed. ■



- ◆ Provides election support to congressional candidates who value the specialty.
- ◆ Builds relationships with members of Congress who make decisions that impact OMSs and patients.
- ◆ Supports AAOMS advocacy efforts such as Day on the Hill.

## The Specialty's Voice in Washington, D.C.

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■ **Change Healthcare** – UnitedHealth Group reported a major hack that potentially compromised a significant portion of Americans' health and personal data. The attack occurred Feb. 21 to its Change Healthcare unit, which processes half of U.S. medical claims, despite UnitedHealth issuing a ransom payment. CEO Andrew Witty affirmed the attack's severity, indicating cooperation with law enforcement and cybersecurity firms. While no full medical histories were reportedly taken, sensitive patient information was accessed. Hackers, identified as ALPHV or BlackCat, have not responded. Screenshots potentially linked to the breach surfaced on the dark web. UnitedHealth is providing support amid the ongoing investigation. Meanwhile, HHS has published a website for providers and patients on the breach with answers to frequently asked questions: [HHS.gov/hipaa/for-professionals/special-topics/change-healthcare-cybersecurity-incident-frequently-asked-questions/index.html](https://www.hhs.gov/hipaa/for-professionals/special-topics/change-healthcare-cybersecurity-incident-frequently-asked-questions/index.html).

■ **Artificial intelligence** – The Biden administration issued stricter guidelines for federal artificial intelligence use, emphasizing governance and risk mitigation. The Office of Management and Budget mandates agencies disclose AI usage, risks and mitigation strategies. Guidelines enforce protective measures against bias and discrimination, and those who do not comply risk AI system discontinuation. The policy also promotes transparency, requiring annual AI use case inventories and public release of government-owned AI assets.

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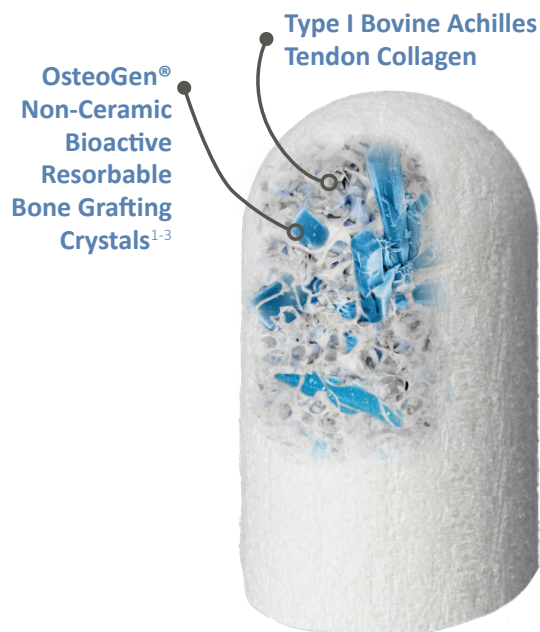
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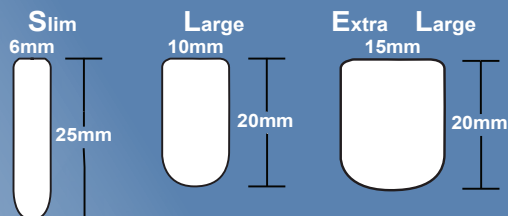
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1. Spivak, J Biomed. Mater Research, 1990  
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## Defusing tense situations with de-escalation tactics

Your OMS practice may encounter a disgruntled patient, family member or visitor. To be prepared, it is imperative to empower your team with the support and skills needed to defuse certain situations through proper training on how to recognize, assess, de-escalate and report potential threats.

The Cybersecurity and Infrastructure Security Agency (CISA) offers non-confrontational techniques, tools and resources to empower and educate individuals to identify and mitigate potential risk. The following questions and answers were adapted from its materials.

### Q Are there recognizable warning signs for someone who may become hostile or violent?

**A** There are three key points to remember that may help you recognize possible warning signs:

- **Stressors** – These situations can be positive or negative developments that cause strain or tension in a person's personal or professional life, such as financial pressure, illness or addiction.
- **Changes** – These represent a variation in an individual's baseline behavior, normal mood or response to everyday activities, such as an outgoing person suddenly becoming socially isolated or a normally hard worker no longer caring about work performance.
- **Behavioral indicators** – These indicators may be non-physical or physical in nature, such as an unwillingness to comply with established rules or policies, violating others' personal space or exhibiting argumentative or uncooperative behaviors.

### Q How do you navigate a situation when someone is escalating?

**A** When someone is escalating, it is important to assess the situation and determine whether an emergency response is needed or if de-escalation is possible. Use the following assessment techniques before trying to navigate the situation:

- **Assess yourself** – Remain calm, control your breathing, relax and project confidence.
- **Assess the individual** – Consider the individual's appearance, clothing, behaviors and reactions.
- **Assess the environment** – Look at the environment and determine if it is conducive to de-escalation.

Be sure to keep in mind that there may be barriers to assessment and de-escalation, such as lack of empathy, defensiveness, lecturing, criticizing or language and cultural differences.

### Q What is de-escalation, and how can it be used to defuse a disgruntled patient?

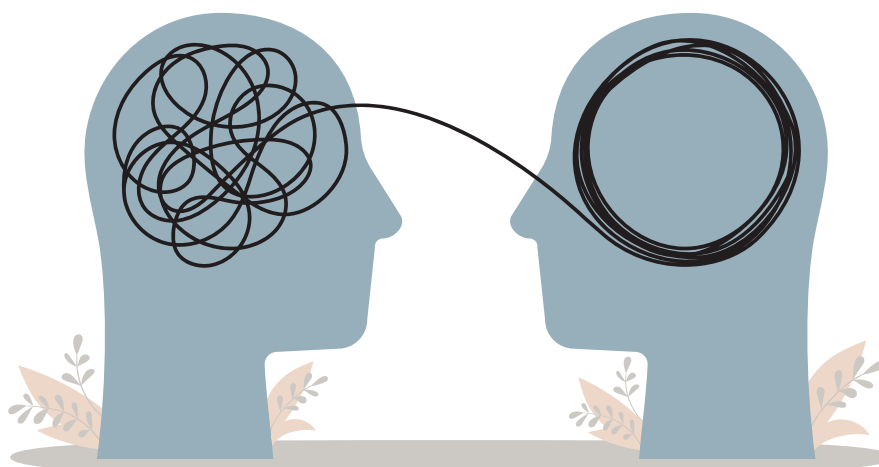
**A** De-escalation is the use of communication or other techniques during an encounter to stabilize, slow or reduce the intensity of a potentially violent situation without the use of physical force or with a reduction in force.<sup>1</sup>

Be aware of your non-verbal communications by ensuring your tone, facial expressions, body language and gestures relay calmness and empathy. Remain respectful and courteous by addressing the individual with civility and using phrases

such as "please" and "thank you."

Individuals are encouraged to use purposeful actions, verbal communication and body language to calm a potentially dangerous situation. Purposeful actions may include changing the setting, offering empathy and respecting personal space. Pay attention to your tone, volume, rate of speech and

*continued on next page*





inflection as well as your body language. Be sure to keep a relaxed stance with your hands down, open and visible while maintaining a neutral and attentive facial expression.

When trying to de-escalate a situation, remember that your safety and the safety of others is the highest priority. Know your limits and obtain help from others if needed.

### **Q What should staff do if there is a concern or an incident occurs in the practice?**

**A** Reporting is critical to the prevention of workplace and community violence. Threats that are not known cannot be managed. Be sure that your practice has a system in place for reporting incidents or concerns and encourage reporting through a culture of shared responsibility – if you see something, say something.

Learn how an individual can deter threats and prevent harm by spotting suspicious activity and reporting it at [CISA.gov/topics/physical-security/non-confrontational-techniques](https://www.cisa.gov/topics/physical-security/non-confrontational-techniques). ■

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*For additional training, the on-demand webinar Defusing Angry Patients at the Front Desk is available at [AAOMS.org/CEonline](https://www.aaoms.org/CEonline).*



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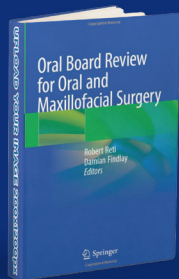


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# Implementing screening plan for substance use

Information for this article was provided by NIDAMED.

NIDAMED is an outreach initiative from the National Institute on Drug Abuse (NIDA). NIDAMED's mission is to develop science-based resources for health professionals and those in training about screening, addressing and treating addiction.

Part 2 of 2: This article explores how screening for substance use can improve patient care and help curb the rising number of teen opioid overdose deaths in the United States. Part 1 in the May/June issue of AAOMS Today focused on how pain management guidelines assist OMSs in having discussions with patients.

Screening to identify drug use early can help OMSs improve patient care and better understand patients' substance use and its possible impact on oral and overall health.

When screening reveals that a patient is at risk for or may have symptoms of a substance use disorder, OMSs can consider alternatives to prescribing drugs like opioids and benzodiazepines, which have addiction potential.<sup>1</sup> Understanding a patient's substance use behaviors also can ensure safer prescribing by preventing drug interactions.

Steps an OMS can take to start screening for substance use – found at [NIDA.NIH.gov/NIDAMED-medical-health-professionals](https://www.nida.nih.gov/NIDAMED-medical-health-professionals) – include:

- **Select a screening tool and find guidance on screening** – The National Institute on Drug Abuse (NIDA) has tools to help assess for substance use disorders among adolescents, enabling OMSs to screen patients as young as 12 years old. For patients older than 17, OMSs can review the NIDA screening and assessment tools chart to find a suitable screening tool.
- **Screen all patients at every appointment** – Asking every patient about substance use at every visit can help prevent bias, help providers avoid missing key information and prevent a patient from feeling singled out and defensive.<sup>2</sup> Letting teens know you ask these questions of all your patients – and using destigmatizing language when having these discussions – also can help normalize the conversation.
- **Provide education** – If you typically provide education on the oral health effects of substances (e.g., smoking, vaping), you can deliver that information during this conversation.



- **Deliver medically accurate messaging** – It is important to be matter of fact and to frame the information in the context of successful oral and maxillofacial surgery and a smooth recovery. Evidence suggests that scary or overly dramatic messaging about substance use may be counterproductive with adolescents.<sup>3</sup> As AAOMS recommends, you can start these discussions during the health history with risk assessment.<sup>4</sup>
- **Establish a baseline and watch for changes** – Although you may only see the patient a few times, include notes in the patient's chart about their oral health and behaviors (including substance use) so you can recognize changes over time.

## Reinforce, intervene or refer

Be cognizant that if a parent is in the room with the patient, the patient may be reluctant to provide honest answers during screening. However, whether or not a patient reports substance use during the screening, addressing the results afterward is important. These four steps provide guidance for these discussions:

- **If no risk of substance use is identified** – Continue the conversation by providing positive reinforcement. Use encouraging words to acknowledge that refraining from substance use is a healthy and positive choice. You also can use this opportunity to correct the common teen misperception that most of their peers use drugs or alcohol.

*continued on next page*

For instance: “I’m glad to hear you’ve never tried alcohol. Most people your age haven’t, and that’s definitely the healthiest choice.” Using this language also helps ensure the patient does not misinterpret the screening as an implication that others the same age are using substances.<sup>5</sup> Prevention messaging is important, especially for teens, who are often curious and open to talking about what drugs do to their bodies.

- **If risk of substance use is identified** – Have an honest, nonjudgmental conversation about it. While not all people who use substances have a substance use disorder or require treatment, learning how patients’ substance use may be affecting their oral health can improve care. Choose destigmatizing language that addresses unhealthy substance use in an open and nonjudgmental manner. A report of any substance use may indicate a patient’s readiness to discuss it and can be a starting point for a conversation about their use.

It is important to note that individuals with substance use disorders who feel stigmatized may be less willing to seek treatment.<sup>6,7</sup> Stereotyping of people with substance use disorders is common and can lead others to feel pity, fear, anger and a desire for social distance from them.<sup>7</sup> Coming from a place of caring helps prevent or dispel feelings of stigma or shame. To prepare for these discussions, learn the terms to avoid and utilize as outlined in NIDAMED’s Words Matter guide for clinicians available on its website.

- **Assess the severity of substance use and consider a brief intervention** – Learning about the patient’s levels of use will help determine next steps in the discussion, which should be kept as conversational as possible. Consider a brief intervention, which focuses on increasing insight and awareness regarding substance use and motivation toward behavioral change.<sup>8</sup> An intervention could be as simple as briefly discussing the patient’s willingness to change behaviors and how positive changes could benefit them.

People have various reasons for using substances, so letting them know why substance use is relevant to their surgery (e.g., “I want you to be as healthy as possible for your surgery and to have a non-eventful recovery”) can be a conversation starter for giving actionable recommendations. For example, cannabis use can affect the body’s response to anesthesia, so it is crucial that patients undergoing surgery disclose their cannabis use.<sup>9</sup> Visit SAMHSA.gov and learn more about screenings and delivering brief interventions and the systems-level



implementation of screenings, brief intervention and referral to treatment from the Substance Abuse and Mental Health Services Administration.

- **Provide resources and referrals for addiction treatment or counseling** – If a patient reports difficulty controlling substance use or other related health problems, refer the patient to treatment.<sup>8</sup> You can refer patients to their primary care provider or to a local behavioral health care provider (FindTreatment.gov) to work toward management or recovery. If possible, consider addressing severe substance use concerns before treating any dental issues. Some patients with untreated substance use disorders could have adverse reactions connected to their drug use during dental treatment.

### Changing behavior to avoid stigma

Stigma is a set of negative attitudes and stereotypes toward a particular group. Stigma about people with substance use disorders might include assumptions that they are dangerous, incapable of managing treatment or at fault for their condition.

When talking to people who use substances or with substance use disorders, their loved ones and your colleagues, use language that reflects a nonjudgmental, science-based understanding of substance use and is consistent with your professional role.

Because clinicians are typically the first points of contact for a person with a substance use disorder, health professionals should take all steps necessary to reduce the potential for stigma and negative bias.<sup>10</sup>

Use person-first language, which focuses on the individual – not the illness or behavior – and removes words that define the person by a condition or that have negative meanings.<sup>11</sup> For example, the phrase “person with a substance use disorder” has a neutral tone and separates the person from the disorder.<sup>12</sup>





OMSs can contribute to reversing the trend of overdose mortality among adolescents by screening every patient for substance use. For patients already receiving substance use disorder treatment, the comprehensive oral care you provide can improve their treatment outcomes.<sup>13</sup> With an increasingly unsafe, illicit drug supply driving adolescent overdoses, taking full advantage of these opportunities has never been more important. ■

*NIDAMED is an outreach initiative from the National Institute on Drug Abuse (NIDA) that gives medical professionals tools and resources to screen patients for tobacco, alcohol, illicit and nonmedical prescription drug use.*

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*This is number 198 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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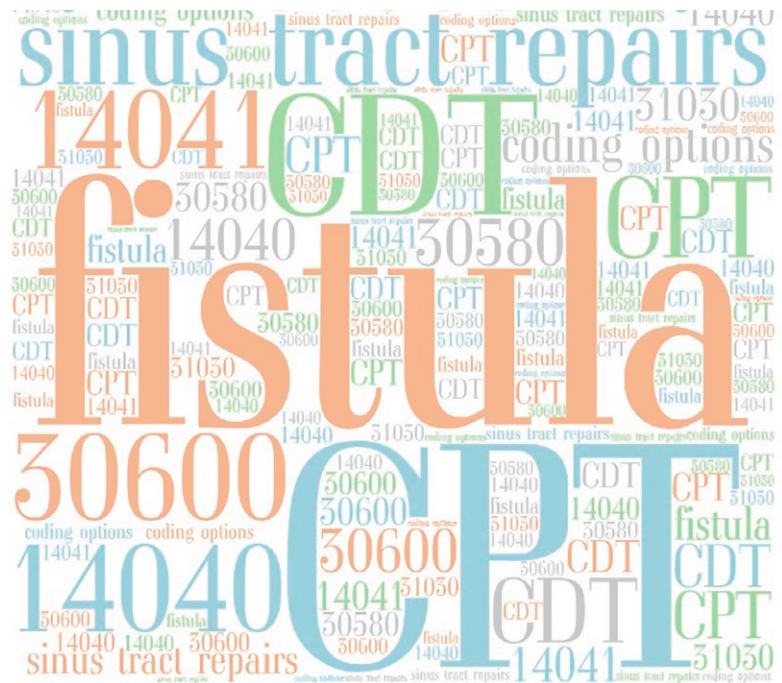
# Correcting abnormal channels: Coding guidance

**F**istula and sinus tract repairs involve the correction of abnormal passages or openings that develop between different anatomical structures, often due to underlying infections or complications. A fistula is a narrow tunnel-like passage that forms between two areas of the body, while a sinus tract is a similar abnormal channel that connects an infected area or pathological condition to the skin surface or another structure (e.g., oral cavity). These communications can occur as a result of trauma, infection or surgical procedures involving the maxillary sinus or adjacent teeth.

Coding for fistulas in the oral cavity varies based on the type of communications involved. Common fistula types include:

- **Dentoalveolar fistula:** A communication between the oral cavity and the alveolar bone
  - Common causes: Periodontitis, infected cysts, necrotic teeth, tooth extractions, mandibular and maxillary fractures, other forms of trauma
- **Oroantral fistula:** A communication between the oral cavity and the maxillary sinus
  - Common causes: Tooth or dental implant extraction, osteonecrosis, cyst and tumor, trauma
- **Oronasal fistula:** A communication between the nasal and oral cavities
  - Common causes: Tumor resections, cleft palate, trauma resulting in damage to the palate
- **Orofacial (or orocutaneous) fistula:** A communication between the cutaneous surface of the face and the oral cavity
  - Common causes: Malignant neoplasm, infection, inflammation, trauma

Examples of surgical techniques such as buccal fat pad flap and adjacent tissue transfer are often used to repair oroantral communications or fistulas, depending upon the size and location of the defect and the condition of surrounding tissues. Both CDT<sup>®</sup> and CPT<sup>®</sup> offer a variety of codes to report different types of communication repairs.



CDT codes for communication repairs include:

## **D7260 oroantral fistula closure**

Excision of fistulous tract between maxillary sinus and oral cavity and closure by advancement flap

## **D7261 primary closure of a sinus perforation**

Subsequent to surgical removal of tooth, exposure of sinus requiring repair of immediate closure of oroantral oronasal communication in absence of fistulous tract

CPT codes for communication repairs include:

## **30580 Repair fistula; oromaxillary (combine with 31030 if antrotomy is included)**

## **30600 Repair fistula, oronasal**

## **31030 Sinusotomy, maxillary (antrotomy); radical (Caldwell-Luc) without removal of antrochoanal polyps**

## **14040 Adjacent tissue transfer or rearrangement, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hand and/or feet; defect 10 sq cm or less**



# for fistula and sinus tract repairs

**14041 Adjacent tissue transfer or rearrangement, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hand and/or feet; defect 10 sq cm to 30 sq cm**

There is not a specific CPT or CDT code for a sinus tract repair. However, consider reporting either an unlisted code and include a narrative describing the procedure or consider reporting a wound repair code. To report wound repairs, search Repair > Wound in the CPT alphabetic index, which directs to several families of codes to consider for applicability. The codes found in this section describe the repair of wounds of the skin (integumentary system) and are classified by the extent of the surgical repair (e.g., simple, intermediate, complex). Note the appropriate code will be determined by the length of the wound itself. Therefore, it is important to review the specific guidelines for reporting repair (closure) procedures located in the Integumentary System chapter of the CPT manual under the heading "Repair (Closure)."

## Fistula, sinus tract repair coding scenarios

### Scenario 1

**Q An OMS extracted a partially bony impacted Tooth #1. After the tooth extraction, a large oroantral fistula is noted and a mucoperiosteal flap is elevated with a buccal releasing incision to obtain primary closure. How would you code for the closure of the oroantral opening?**

**A** Since the oroantral opening was detected immediately after the extraction, D7261 would be appropriate and is supported in the code nomenclature and descriptor. For immediate closure via an adjacent tissue transfer or buccal fat pad, CPT code 14040 or 14041 may be considered depending upon the size.

### Scenario 2

**Q One month after extraction of Tooth #1, a patient returns to the office and is diagnosed with a large oroantral opening and fistulous tract with no signs of infection. How would you code for this procedure using a buccal advancement flap as a delayed procedure?**

**A** Since the fistula was noted one month after the extraction, D7260 would be appropriate if reporting to dental payer and 30580 would be appropriate if reporting to a medical payer.

### Scenario 3

**Q A patient had a tooth extracted three months ago without complication. However, the patient presents to the OMS with a persistent pimple on the cheek in the area of the extraction. Upon examination, the OMS determines the patient has a draining sinus tract from the surgical site. How would you code for the closure of the cutaneous sinus tract if the wound was 1.8 cm in length?**

**A** There is no specific code for the closure of the cutaneous sinus tract; however, the OMS may consider coding a wound repair of the cheek. In this scenario, since the wound measured 1.8 cm, 13131 would be appropriate if reporting to a medical payer and D7911 to a dental payer. ■

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# Accreditation, payment conditions for advanced

To qualify for Medicare reimbursement, suppliers of advanced diagnostic imaging (ADI) services are required to obtain accreditation, a mandate enforced by CMS since Jan. 1, 2012. This requirement – stemming from the Medicare Improvements for Patients and Providers Act (MIPPA) of 2008 – applies to all providers, including OMSs, who furnish ADI services such as computed tomography (CT) and cone-beam computer tomography (CBCT) to Medicare beneficiaries.

These advanced imaging modalities – including magnetic resonance imaging, nuclear medicine (including positron emission tomography), CT and CBCT – are utilized to generate detailed images or image volumes for diagnosis and treatment planning. CMS's accreditation requirement ensures that facilities providing ADI services comply with specific standards regarding equipment quality, staff qualifications, safety protocols and quality assurance processes.

Achieving accreditation is essential for providers and facilities to be eligible for Medicare payments. The process evaluates the technical component of service delivery, focusing on operational elements like equipment maintenance and use, the service environment and the technical staff's qualifications. CMS has designated specific accrediting bodies authorized to assess and accredit facilities offering ADI services, including the American College of Radiology, The Joint Commission, RadSite and the Intersocietal Accreditation Commission (IAC).

Notably, the IAC provides targeted accreditation for practices conducting maxillofacial CT exams with CBCT systems. AAOMS serves as a sponsoring organization for the IAC's CT division, contributing to the development of the standards and the application process tailored for dental providers utilizing the dental CT system. This collaboration aims to ensure the accreditation process is both comprehensive and relevant to the specific needs of oral and maxillofacial surgery practices.

Upon achieving accreditation from the IAC, a practice and its providers, operators and staff are recognized as compliant with IAC standards. Information on IAC standards, program updates and the dental CT accreditation checklist, along with access to the online application are available at [Intersocietal.org/programs/CT-dental-CT](https://intersocietal.org/programs/CT-dental-CT).



## Adherence to safety standards

In addition to complying with the standards established by ADI accrediting bodies, the Protecting Access to Medicare Act of 2014 mandates that suppliers of ADI services, as defined under MIPPA, and hospital outpatient centers offering CT services must adhere to safety standards outlined in the National Electrical Manufacturers Association (NEMA) Standard XR-29-2013. That mandate went into effect in 2016.

Standard XR-29-2013 is important for all OMS practices, including those seeking IAC accreditation, as it establishes guidelines aimed at optimizing and managing radiation doses.

To comply with the NEMA XR-29-2013 standard, CT scanners are required to support:

- DICOM-compliant radiation dose structured reporting for detailed monitoring and documentation of radiation dose information.
- Dose check features to alert and mitigate excessive radiation exposure.
- Automatic exposure control that tailors radiation doses based on the patient's size and the specific area being scanned.
- Reference protocols for both adult and pediatric patients, establishing scanning parameters that optimize dose efficiency.

Starting in 2017 and continuing today, facilities using CT scanners not compliant with NEMA XR-29-2013 standards face a 15 percent reduction in Medicare reimbursements.



## diagnostic imaging

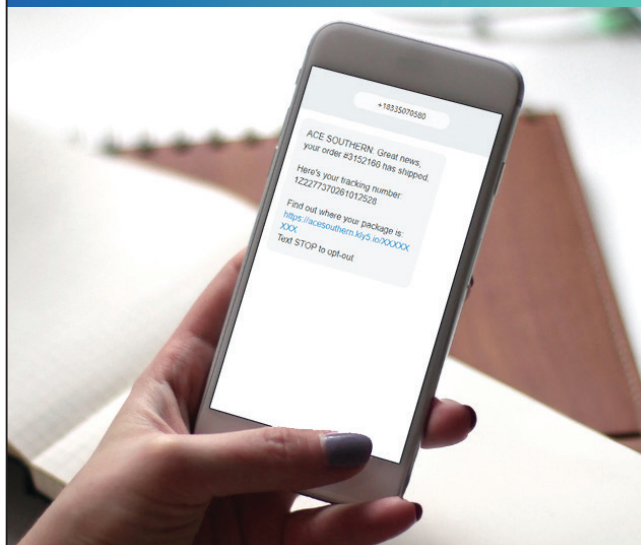
Regardless of Medicare participation, it is essential for OMSs and their teams to understand CMS guidelines and requirements as it is not uncommon for private payers to adopt them. Specifically, major health insurance carriers – including Aetna, UnitedHealthcare and select Anthem and Blue Cross Blue Shield plans – have introduced similar accreditation requirements for advanced imaging services.

The IAC maintains a list of third-party payers that have incorporated CT reimbursement policies aligned with these accreditation standards, available at [Intersocietal.org/reimbursement/payment-policies](https://intersocietal.org/reimbursement/payment-policies). Given the dynamic nature of insurance policies, which are subject to change and regular updates, practices are advised to directly engage with insurance carriers for the latest information.

The criteria AAOMS has developed with the IAC should fulfill the accreditation requirements of these carriers. Nevertheless, in instances where a third-party payer notifies a practice of the need for accreditation by an organization not recognized by Medicare, it can be beneficial for the practice to advocate for alignment with Medicare's established standards.

Additional information on Medicare's ADI accreditation requirements is available on the CMS website at [CMS.gov/medicare/health-safety-standards/quality-safety-oversight-general-information/accreditation-advanced-diagnostic-imaging-suppliers](https://www.cms.gov/medicare/health-safety-standards/quality-safety-oversight-general-information/accreditation-advanced-diagnostic-imaging-suppliers). ■

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## 2024 Oral Certifying Examination results are in

The American Board of Oral and Maxillofacial Surgery (ABOMS) conducted the 2024 Oral Certifying Examination (OCE) earlier this year in Raleigh, N.C. The intensive oral-based exam evaluates the Candidates' knowledge and judgment to diagnose, plan and manage complex clinical scenarios across a wide array of conditions and treatments to achieve optimal surgical outcomes and provide exemplary patient care. The OCE is one of two exams Candidates must pass to become ABOMS Diplomates.

The OCE is designed to reflect oral and maxillofacial surgery's broad scope and the evolving nature of the specialty. The 144-minute exam features three sections:

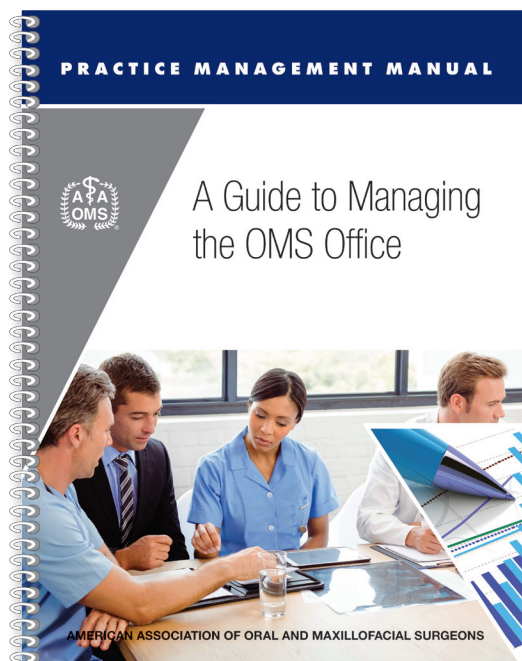
- **Surgery Section I:** Orthognathic Surgery, Infection, TMJ, Pathology
- **Surgery Section II:** Trauma, Implants, Reconstruction, Dentoalveolar
- **Surgery Section III:** Adult Medical Assessment/Anesthesia, Pediatric Medical Assessment/Anesthesia, Emergency Management, Focused Additional Short Topics

This year, the Board examined 383 Candidates, with 90 Examination Committee members overseeing the examination process.

The 2024 Oral Certifying Examination had a pass rate of 91 percent, showcasing the high level of proficiency among ABOMS Candidates, along with the rigorous training required of those who chose to specialize in oral and maxillofacial surgery.

By Candidate type, the breakdown of 2024 examination statistics reveals:

- **First-time Candidates:** 83 of 89 passed (93 percent pass rate)
- **Fast Track Candidates:** 171 of 184 passed (93 percent pass rate)
- **Repeat Candidates:** 95 of 110 passed (86 percent pass rate) ■



## Gain indispensable guidance with the *Practice Management Manual*

Secure the practical resource perfect for OMSs and their practice managers looking for trusted guidance to help manage an OMS practice.

*Practice Management Manual: A Guide to Managing the OMS Office*, 3rd Edition, offers valuable information on risk management, human resources, technology, marketing and other essential resources for all OMS practices. ©2022

Member: \$250

**AAOMSstore.com**

# How early medical underwriting can help OMSs

By Joseph F. Pantoja, CLU, MBA

*Regional Vice President*

*Treloar & Heisel*

One of the necessary steps in applying to purchase disability income (DI) insurance is medical underwriting. Medical underwriting is an insurance company's review of your health. Underwriting allows the insurance company to review each applicant, assess their health history and determine an offer based on their risk factors.

## Age and health drive policy costs

Given that both age and health impact pricing, it is best to go through medical underwriting as soon as possible. Buying DI insurance early in your career gives you the opportunity to secure insurance at a younger age and while you are – theoretically – in better health.

You may think DI insurance is yet another burdensome expense, especially if you have yet to graduate or if you recently graduated. Finances may very well be tight early in your career. But when comparing a 28-year-old purchasing a disability policy versus a 38-year-old buying the same policy, there is a substantial difference in cost. The long-term cumulative savings that come from purchasing insurance early are significant compared to buying insurance when you are further along in your career.

By going through medical underwriting early, you will be able to secure the insurance at a lower rate. Keep in mind, you don't have to insure a high income. The important thing is to get the insurance. You can always adjust how much coverage you buy as your income increases to keep your out-of-pocket costs low while you get financially established.

## Eliminate the 'what ifs'

Once you secure a policy, you will have peace of mind that you're covered in the case of an injury or illness. Don't assume that degenerative conditions only affect older people. Anyone can get sick, and anyone can be injured at any age.

If you get your DI insurance while you are young and healthy and a year later a health condition results in you filing a claim, you are protected. Once you have a policy, you eliminate many of the "what ifs" in life. What if your health changes? What if you need to use your policy and didn't buy one?

If you're still in school or are a very recent grad, be sure to take advantage of student discounts for disability income insurance. Most companies offer a student discount, so it's highly advisable to buy DI insurance while you still are in school. You don't want to pay too much for insurance, so if there is a training discount available to you, grab it while you can.

## Flexible policies

One of the great things about DI policies is how flexible they are. There are many bells and whistles that can enhance a basic policy. Those features are called riders, and they allow you to tweak your policy. Riders may allow you to make your student loan payments if you are not able to work, or they give you the option to easily increase your insurance without undergoing medical underwriting. Features can be added and subtracted along the way. You can even increase or decrease your base coverage – as long as you have a DI policy.

Buying disability insurance is one of the first business decisions you will make early on in your career. Research it, make the decision and then review your limits each year. Disability insurance is something you don't simply buy and set aside. You want to look at it every year as you progress through your career. An experienced financial adviser should be able to guide you. Work with someone who knows not only about DI insurance but also has experience working with dentists and specialists.

If looking for guidance on an income amount to insure, consider protecting as much of your income as you can until you're financially independent. If you become independently wealthy at 55 or 60 years old, you potentially can self-insure the need for disability insurance. You may decide you don't need to pay for this anymore, and you are going to let it go. But you also have the option of maintaining the policy until you're 65 years old. You don't need to keep your policy forever. It's only until you're financially independent, at which point you can decide to keep it or not.

If you're an established OMS, or if you are looking to purchase a practice, you may have several insurance needs in addition to disability income. Most insurance companies offer discounts when customers buy several products at once, which is worth keeping in mind as you explore DI insurance. ■

*Treloar & Heisel and Treloar & Heisel Risk Management are divisions of Treloar & Heisel, Inc. Insurance products offered through Treloar & Heisel, Inc. For advice on the discussed topics, please review with your licensed advisor.*



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TH-24-001



# AAOMS Advantage Partners

AAOMS Advantage Partners have been chosen because of their commitment to the oral and maxillofacial surgery specialty. Their stream of royalty payments\* throughout the year helps fund the goals of AAOMS, including its advocacy efforts and other important programs and services. To learn more about these valuable offerings, visit [AAOMSAdvantage.org](http://AAOMSAdvantage.org).

*\*Royalty payments vary based on AAOMS member usage of each of the AAOMS Advantage Partners.*



**AAOMS Advantage®**  
Partner Program

*Look for this logo on a company's advertisement.*

## 3 reasons to use AAOMS Advantage Partners

### 1 Reviewed and approved by AAOMS Advantage

The first step is to evaluate whether the company has a desirable product or service for AAOMS member practices. If the answer is yes, the potential Partner undergoes a rigorous review. All Partners also must offer a special discount to AAOMS members and provide royalties based on member usage. Information about the potential Partner is reviewed by the ASI Special Projects Committee and ASI Board of Trustees. Once approved, the company becomes an AAOMS Advantage Partner. Visit [AAOMSAdvantage.org](http://AAOMSAdvantage.org) to view more details about Partner Programs.



### 2 Find insights

Read reviews from colleagues to see how they use AAOMS Advantage Partners to enhance their practice. Visit [AAOMSAdvantage.org](http://AAOMSAdvantage.org) and click the **Reviews** tab at the top of the page.

### 3 Prize opportunities

**Share-the-Savings Contest** – Share your experience about one or more of the AAOMS Advantage Partners in your practice and become eligible to receive FREE registration to an AAOMS Annual Meeting. Visit the **Share-the-Savings** page at [AAOMSAdvantage.org](http://AAOMSAdvantage.org) for more information on how to submit an entry.



**Partner Program<sup>SM</sup>**  
**Spend. Save. Support.**  
AAOMS Services, Inc.

To check out all AAOMS Advantage Partners, visit

**[AAOMSAdvantage.org](http://AAOMSAdvantage.org)**



U.S. Oral Surgery  
Management

# THE PREMIER PARTNER FOR PRACTICE EXCELLENCE

## About Us

Today's healthcare landscape is rapidly evolving, transforming the practice of oral surgery as you know it. We see the headwinds every Oral Surgeon is facing. Our network of premier oral surgeons works not only to help you weather those gusts that threaten your practice but also successfully outpace them.

## Our Mission

To build a best-in-class community of Oral and Maxillofacial Surgery practices and partner with them to fuel innovation and clinical excellence, while providing wealth-creation opportunities that can secure their financial futures.

## Our Values

- ✓ **Passion for Patient Care**
- ✓ **Outstanding Results**
- ✓ **Winning Attitude**
- ✓ **Embrace Continuous Improvement**
- ✓ **Respect for Self & Others**

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### Clinical Autonomy

It is your brand, vision and quality care that we serve and support.



### Organizational Ownership

Stake a larger claim in the \$14 billion oral surgery market.



### Operational Efficiencies

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### Financial Stability

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### Strategic Expertise & Leadership

Our experienced team of business strategists and oral surgeons collaborate and help you make the right decisions when it counts most.



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### 2025 ANNUAL MEETING



#### Speaker applications due Oct. 1

The application to present a session at the 2025 Annual Meeting is open until Oct. 1. Apply for a clinical or practice management topic at the 2025 AAOMS Annual Meeting, being held Sept. 15 to 20 in Washington, D.C. Applicants are encouraged to submit courses that fit the 2025 theme, "The Patients We Serve." The application is available at [AAOMS.org/Speakers](https://AAOMS.org/Speakers).

### ONLINE CE



#### Register for upcoming webinars

The August Dental Implant Series will consist of two webinars:

- **Limited Vertical Bone in the Posterior Maxilla** – 6 p.m. CDT Aug. 13 with Tara L. Aghaloo, DDS, MD, PhD
- **Techniques to Improve Success of Immediate Implant Placement in Any Site and Digital Immediate Temporization** – 6 p.m. CDT Aug. 20 with Naushad R. Edibam, DMD

Also register for the July facial cosmetic webinar, **Upper Lip Lift Surgery** at 6 p.m. CDT July 10 with Michael P. Morrisette, DDS, FACS.

Visit [AAOMS.org/CEonline](https://AAOMS.org/CEonline) to learn more and register.

### MEMBERSHIP



#### Final dues notices mailed

Final dues notices were sent in mid-April to those who have yet to renew for the 2024 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. 29 were dropped. Members can renew at [AAOMS.org/MyAccount](https://AAOMS.org/MyAccount). Email [membership@aaoms.org](mailto:membership@aaoms.org) for more information or to receive another copy of the annual statement.

### ONLINE CE



#### Import CE credits to dashboard

The new transcript feature in the CE Online Dashboard can be used to store outside continuing education credits. This transcript feature not only stores all AAOMS CE Online courses automatically but also allows users to import external credits, so all CE credits can be kept in one place. Visit [CEonline.AAOMS.org/my-dashboard](https://CEonline.AAOMS.org/my-dashboard) to learn more.

### ONLINE CE



#### Meeting MATE Act compliance

AAOMS is offering complimentary courses targeted toward the eight hours required by the Medication Access and Training Expansion (MATE) Act for members until the end of 2025. More information on the MATE Act requirements and eligible webinars can be found at [CEonline.AAOMS.org/MATEAct](https://CEonline.AAOMS.org/MATEAct).



## MEMBERSHIP



### Share insights by participating in AAOMS Member Spotlight series

AAOMS members are invited to share their knowledge and life experiences by participating in the Member Spotlight. This digital profile on AAOMS.org highlights the diverse talents and accomplishments of AAOMS members both inside and outside the practice.

Visit [AAOMS.org/MemberSpotlight](http://AAOMS.org/MemberSpotlight) to view current and previous participants and download the application. Forward the completed application and a photo to [membership@aaoms.org](mailto:membership@aaoms.org).



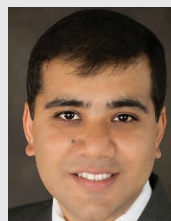
Dr. Jarred Abel



Dr. Nicholas Callahan



Dr. Melissa Moutray



Dr. Varun Arya



Dr. Roderick Kim



Dr. Sidney Bourgeois Jr.



Dr. Nkemakonam Egolum

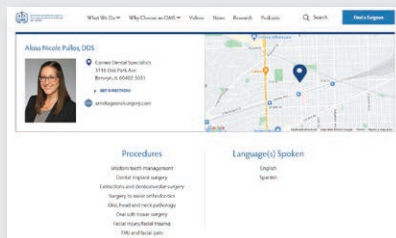
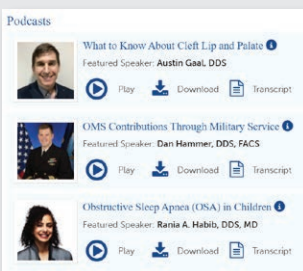
## INFORMATIONAL CAMPAIGN



### Take advantage of free podcasts, videos, infographics, other resources

Members have access to over 300 complimentary promotional materials as part of the national AAOMS Informational Campaign. The award-winning campaign features a wide range of resources, including:

- Podcasts** – The public-facing podcast OMS Voices regularly releases episodes on topics such as dental implants, MRONJ, jaw surgery and bone grafts. OMSs can download these episodes and embed them on their websites to help patients understand the procedures they might need.
- Videos** – An expansive library of AAOMS-produced videos is available for members to download and use at no cost on their websites and social media. These videos include patient testimonial videos, animated explainer videos, promotional videos, PSAs, educational videos and OMS Experts videos.



- Infographics** – Covering the entire OMS scope of practice, this series of 24 infographics offer a way to communicate statistics and information visually. Members can download the PDFs to use on their websites and social media. Eighteen infographics are available in Spanish.
- Ads and fliers** – Downloadable ads and fliers can help members promote their practice to other dental professionals and potential patients.
- MyOMS.org Find a Surgeon Search** – The Find a Surgeon Search tool on MyOMS.org helps connect potential patients to providers. Keeping profile information current allows patients to easily find an OMS. Visit [AAOMS.org/Login](http://AAOMS.org/Login) and click MyOMS.org Directory Profile to update information. Visit [AAOMS.org/InfoCampaign](http://AAOMS.org/InfoCampaign) to learn more and access these complimentary resources.



## AAOMS CARES



## Confidential well-being program accessible to AAOMS members

AAOMS has launched a program called AAOMS Cares: Being Well Together to serve as a resource for members of the oral and maxillofacial surgery specialty affected by substance use disorders.

AAOMS has partnered with Parkdale Center for Professionals, an independent treatment facility with a proven track record in treating professionals across the United States struggling with substance use disorders, to offer innovative programs and solutions to meet the needs of oral and maxillofacial surgeons.

Privacy, confidentiality and anonymity are of the utmost importance to the team at Parkdale and to AAOMS. All aspects of treatment, private discussions and information shared with Parkdale will be held with the strictest

confidence to protect the privacy and dignity of all participants. AAOMS is only facilitating access to the experts at Parkdale; the Association will not receive identifiable information regarding individual inquiries or subsequent treatment.

Members who are struggling, or know someone who is, are encouraged to take advantage of this confidential well-being program by calling 888-462-2706. Visit [AAOMS.org/AAOMS-Cares](https://AAOMS.org/AAOMS-Cares) for more information.



## ANESTHESIA



## Complete OAE recertification or exemption by the July 31 deadline

Office Anesthesia Evaluation (OAE) recertification is due for current members and fellows who last completed an OAE or exemption form in 2018 (or 2017 if practicing in Delaware or New Jersey).

OMS state societies should provide confirmations of successful completion of the re-evaluation to AAOMS Membership Services no later than July 31. Noncompliance with the OAE Program will result in discontinuation of AAOMS membership effective at the 2024 AAOMS Annual Meeting.

Those grandfathered from OMS state society membership, and whom the OMS state society is unable to evaluate, should contact the AAOMS Department of Professional Affairs at [jscfield@aaoms.org](mailto:jscfield@aaoms.org) for scheduling assistance.

Notify AAOMS of any scheduled evaluation dates, difficulties experienced in scheduling a re-evaluation or changes in practice status. Questions? Email [membership@aaoms.org](mailto:membership@aaoms.org) or call 800-822-6637.

## INFORMATIONAL CAMPAIGN



### Share links to newest episodes of OMS Voices public-facing podcast



OMS Voices: An AAOMS Podcast is the Association's public-facing podcast that helps educate patients about the expertise of OMSs and their scope of practice. The podcasts feature conversations on a variety of topics

related to the specialty, such as third molar removal and oral cancer. Members answer questions from the public in an easily digestible and accessible format.

Members are encouraged to share links to the OMS Voices podcasts on their social media accounts or download/post them to their practice websites. Visit [MyOMS.org/Podcast](http://MyOMS.org/Podcast) to listen and learn more or listen on any of the popular

listening platforms: Apple Podcasts, iHeart, Pandora, Podcast Mirror, Spotify, TuneIn or YouTube Podcasts.

New episodes include:

- **Recovering from Wisdom Teeth Surgery** – Dr. Caitlyn McGue discusses how a patient should take care after surgery to allow time for the jawbone and gum tissue to fully heal.
- **Quality of Life for Patient Diagnosed with Trigeminal Neuralgia** – Dr. Gary Bouloux speaks about the quality of life for patients experiencing trigeminal neuralgia.
- **Dental Extractions: Infections and Use of Antibiotics** – Dr. Erin Sheffield explains the extraction process, signs of infection and how proper use of antibiotics may help.

## COMMUNICATIONS



### Not receiving AAOMS emails?

Members who do not receive AAOMS emails may have removed themselves from the email distribution list. To receive AAOMS emails, which detail the latest news and alerts affecting the Association and the specialty, these members must re-subscribe. Visit [AAOMS.org/Subscribe](http://AAOMS.org/Subscribe) and select "All communications" or choose among individual topics:

- AAOMS Services, Inc.
- Educational offerings
- Important member alerts
- Member benefits and opportunities
- OMS advocacy and government affairs
- Other regular newsletters (e.g., Faculty E-News, Resident E-News)
- President's letters

## ONLINE CE



### Level up coding online

AAOMS offers online coding and billing courses to navigate a range of topics with resources and guidance that can be accessed immediately through [AAOMS.org/CEonline](http://AAOMS.org/CEonline). Courses include:

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



## PUBLICATIONS



## Stay up-to-date with AAOMS on the Go member podcast episodes



AAOMS On the Go is the member-facing podcast for OMSs and anyone interested in the specialty. Podcasts feature conversations on a variety of topics related to the specialty and Association initiatives. Members can access episodes at

AAOMS.org/Podcast or on any of the popular listening platforms: Apple Podcasts, iHeart, Pandora, Podcast Mirror, Spotify or TuneIn.

Among the new episodes are:

- **AAOMS Cares: Being Well Together** – Rodrigo Garcia from the Parkdale Center for Professionals Treatment Center discusses AAOMS's complimentary and confidential well-being program.
- **Diversity, Equity and Inclusion in the OMS Specialty** – Drs. Cathy Hung and Brett Ferguson discuss how hospitals, schools and practices can implement DEI plans.
- **AAOMS Today: The Inside Scoop** – Dr. James Hupp explains his role as Editor of *AAOMS Today* and how the bimonthly publication benefits members.

## ONLINE CE



## Bundle coding, billing webinars

AAOMS offers some of its most popular coding and billing webinars in bundles priced at \$495 each, providing an opportunity to learn while saving more than 35 percent over buying them individually. Each bundle includes three webinars:

- **Common OMS Coding Questions Answered** – Learn about anesthesia coding, mastering modifiers and CDT, CPT and ICD-10-CM coding insights specific to the OMS practice.
- **Master OMS Reimbursements** – Gain an understanding of the OMS operative report, medical and dental coordination of benefits and non-covered services, denial codes and effective appeal writing.

Visit AAOMS.org/CEonline to learn more.

## PUBLICATIONS



## Seeking story subjects

*AAOMS Today* Editor James R. Hupp, DMD, MD, JD, MBA, FACS, would like to feature more OMSs and their personal stories in upcoming issues of the award-winning member magazine. Know of someone who fits any of the topics below? Email [communications@aaoms.org](mailto:communications@aaoms.org).

- **Families of OMSs** – Looking for families with multiple generations of OMSs.
- **Pilot OMSs** – Looking for OMSs who fly patients to medical treatments with charitable organizations such as Angel Flight.
- **Careers before residency** – Looking for OMS residents who had non-healthcare careers (e.g., teacher, engineer, skilled laborer) before entering residency.
- **Interesting hobbies** – Looking for OMSs who enjoy unusual or creative pastimes.
- **Unique patient stories** – Looking for impactful stories about ground-breaking procedures and life-changing surgeries.

## AAOMS GOVERNANCE



### Keep current on Board actions

All Association members are encouraged to review the quarterly Actions of the Board of Trustees, available on [AAOMS.org/member-center/resource-documents](https://AAOMS.org/member-center/resource-documents).

## ONLINE CE



### Access CE 24/7 with subscription

AAOMS offers a Clinical CE Subscription service allowing OMS members access to all clinical on-demand courses 24/7, 365 days a year. This includes over 120 hours of content, and at least 20 new courses are added annually. The Clinical CE Subscription is \$249 per year and does not automatically renew. Details can be found at [AAOMS.org/CEsubscription](https://AAOMS.org/CEsubscription).

## ONLINE CE



### Save on webinars, grow practice

Save \$300 when purchasing any three practice management recordings from AAOMS's library of on-demand webinars. For \$495, gain access to any three webinars covering a wide range of valuable topics that are essential for the growth and efficiency of an OMS practice, such as employee retention, cybersecurity and infection control.

To learn more, visit [AAOMS.org/CEonline](https://AAOMS.org/CEonline). Use the code PMBUNDLE24 at checkout.

## UF | College of Medicine – Jacksonville UNIVERSITY of FLORIDA

### University of Florida College of Medicine Jacksonville Department of Oral & Maxillofacial Surgery

The Department of Oral & Maxillofacial Surgery at the University of Florida College of Medicine – Jacksonville, is seeking a full-time, board eligible oral and maxillofacial surgeon (DDS, DMD, and/or DDS/MD, DMD/MD). This will be a non-tenure accruing position (Clinical Track) at the level of assistant and/or associate professor, starting on July 1, 2024, or sooner. Fellowship-training is not required. This position offers the ability to earn a competitive income with excellent benefits, including 403(b) retirement plan, paid holidays and vacation, as well as the ability to practice the full scope of contemporary oral and maxillofacial surgery, educate and train oral and maxillofacial residents, and enjoy all the benefits of living in Northeast Florida. Candidates must be eligible for board certification through the American Board of Oral & Maxillofacial Surgery.

Please contact Debbie McAlister at  
[Debbie.McAlister@jax.ufl.edu](mailto:Debbie.McAlister@jax.ufl.edu) or call 904.244.3216.

[omfs.med.jax.ufl.edu](https://omfs.med.jax.ufl.edu)



Oral and maxillofacial surgeons:  
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jaw surgery®

## Clinical CE Subscription service



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[AAOMS.org/CEsubscription](https://AAOMS.org/CEsubscription)

## CALENDAR



### AAOMS Opportunities

#### 2024

##### Sept. 9–14

###### **106th AAOMS Annual Meeting, Scientific Sessions and Exhibition**

Orlando, Fla., and online  
[AAOMS.org/AnnualMeeting](https://AAOMS.org/AnnualMeeting)

##### Oct. 26 and Dec. 5

###### **Office-Based Emergency Airway Management (OBEAM) module**

Daniel M. Laskin Institute for OMS Education and Innovation  
AAOMS Headquarters in Rosemont, Ill.  
[AAOMS.org/OBEAM](https://AAOMS.org/OBEAM)

##### Nov. 2

###### **Legal Aspects of Practice and Successful Risk Management for the OMS**

Daniel M. Laskin Institute for OMS Education and Innovation  
AAOMS Headquarters in Rosemont, Ill.

##### Nov. 4

###### **Master Coding and Reimbursement Workshop**

Daniel M. Laskin Institute for OMS Education and Innovation  
AAOMS headquarters in Rosemont, Ill.  
[AAOMS.org/MastersCoding](https://AAOMS.org/MastersCoding)

##### Dec. 5–7

###### **Dental Implant Conference**

Chicago, Ill., and online  
[AAOMS.org/DIC](https://AAOMS.org/DIC)

### AAOMS Summer Caucuses

*2024 Annual Meeting Delegates and Alternates are asked to attend their District Summer Caucus. Fellows and members from their respective Districts also are invited to witness Caucuses on a space-available basis and should contact the Caucus Chair to participate. Chair email addresses are provided.*

##### Aug. 3

###### **AAOMS District II Caucus**

Pier 5 Hotel in Baltimore, Md.  
[Imgorzelnik@gmail.com](mailto:Imgorzelnik@gmail.com)

###### **AAOMS District VI Caucus**

UNLV School of Dental Medicine in  
Las Vegas, Nev.  
[libbyk@seattleoralsurgeon.com](mailto:libbyk@seattleoralsurgeon.com)

##### Aug. 10

###### **AAOMS District III Caucus**

Atlanta Airport Marriott in Atlanta, Ga.  
[Igrenevicki@yahoo.com](mailto:Igrenevicki@yahoo.com)

##### Aug. 10–11

###### **AAOMS District V Caucus**

InterContinental Minneapolis –  
St. Paul Airport in Minneapolis, Minn.  
[julia.plevnia@aspensurgicalarts.com](mailto:julia.plevnia@aspensurgicalarts.com)

##### Aug. 17

###### **AAOMS District I Caucus**

Hilton Garden Inn in Windsor, Conn.  
[gdonnarumma@northtownsoralsurgery.com](mailto:gdonnarumma@northtownsoralsurgery.com)

###### **AAOMS District IV Caucus**

AAOMS Headquarters in  
Rosemont, Ill.  
[malou.sabino@gmail.com](mailto:malou.sabino@gmail.com)

### Regional & State Society Meetings

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

##### Aug. 2–4

###### **Georgia Society of OMS Summer Meeting**

The Ritz-Carlton Reynolds, Lake Oconee in Lake Oconee, Ga.  
[GA-OMS.org](https://GA-OMS.org)

##### Aug. 24

###### **Tennessee Society of OMS Summer Meeting**

Franklin Marriott Cool Springs in Franklin, Tenn.  
[TSOMS.org](https://TSOMS.org)

##### Oct. 11–12

###### **Florida Society of OMS Annual Meeting**

The Ritz-Carlton Orlando, Grande Lakes in Orlando, Fla.  
[FSOMS.org](https://FSOMS.org)



# Selling your practice? Hiring an OMS? Place a classified ad in AAOMS Today!

Did you know filling an OMS position or selling a practice can take an average of six to seven months?

Plan ahead and boost visibility of your career and practice listings with a classified ad in *AAOMS Today*. Ads appear in print and online, reaching all AAOMS members.

Whether you are promoting practice openings, faculty positions, fellowships or practice sales, connect with members actively seeking opportunities.

Questions? Contact [classifieds@aaoms.org](mailto:classifieds@aaoms.org).



[AAOMS.org/Classifieds](https://AAOMS.org/Classifieds)







# AAOMS National Simulation Program

Encounter  
real-life  
airway  
experiences

## Office-Based Emergency Airway Management (OBEAM) Module

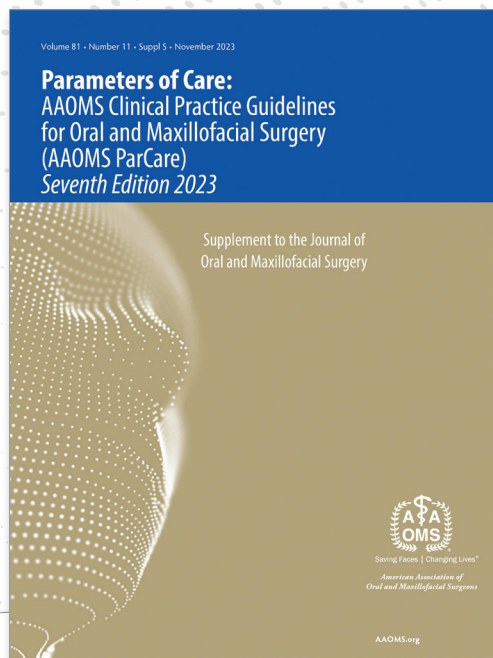
Sign up to participate in advanced simulation training of anesthesia techniques through intensive, real-life experiences.

This program is held at the Daniel M. Laskin Institute for OMS Education and Innovation at AAOMS headquarters in Rosemont, Ill.

### Upcoming sessions:

- Oct. 26: 8 a.m., 11 a.m. and 2 p.m.
- Dec. 5: 8 a.m., 11 a.m. and 2 p.m.

Visit [AAOMS.org/OBEAM](https://AAOMS.org/OBEAM) to register



## Journal of Oral and Maxillofacial Surgery

November 2023 • Volume 81 • Number 11 • Suppl 5

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e120	Cleft and Craniofacial Surgery
e147	Trauma Surgery
e195	Temporomandibular Joint Surgery
e221	Diagnosis and Management of Pathological Conditions
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## Faculty Positions

### 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 in 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 have ABOMS candidate status or be a Diplomate of American Board of Oral and Maxillofacial Surgery. Candidates with international dental degrees with OMS specialty training from an ADA-accredited school also are eligible. One-day-a-week intramural or outside college private practice opportunities are available. Screening of applications will begin immediately with an expected hire date on/before July 1, 2024. Inquiries regarding the position may be sent to [jbavitz@unmc.edu](mailto:jbavitz@unmc.edu). Please note that to be considered for this position, applicants must submit an application and supporting documentation via UNMC's online employment website, [unmc.peopleadmin.com/postings/84454](http://unmc.peopleadmin.com/postings/84454).

### New York

General OMS faculty at the State University of New York at Buffalo: The University at Buffalo is accepting applications for a full-time faculty position in the Department of Oral and Maxillofacial Surgery. Academic rank and salary will be commensurate with qualifications and experience. Both tenure and nontenure positions available. Major responsibilities include patient care, resident teaching and research. This position is clinical and academic, and the candidate should have an interest in major oral and maxillofacial surgery. Candidates must have a DDS or DMD degree and have completed a CODA-accredited residency program and be eligible for licensure in New York. Candidates must be a Diplomate of ABOMS or have ABOMS candidate status. Fellowship training is encouraged and strong interest in orthognathic trauma, obstructive sleep apnea, TMJ reconstruction and complex dental implants is preferred. Applications are currently accepted online at: [posting.F230236.Clinical-Track.ubjobs.buffalo.edu/postings/45539](http://posting.F230236.Clinical-Track.ubjobs.buffalo.edu/postings/45539). [posting.F230235.Tenure-Track.ubjobs.buffalo.edu/postings/45538](http://posting.F230235.Tenure-Track.ubjobs.buffalo.edu/postings/45538). Direct inquiries to Michael R. Markiewicz, DDS, MD, MPH, FACS, Professor and Chair, Department of Oral and Maxillofacial Surgery, email address: [mrm25@buffalo.edu](mailto:mrm25@buffalo.edu). The University at Buffalo is an equal opportunity, affirmative action employer and welcomes all to apply regardless of race, color, gender, national origin, age, religion, creed, genetic information, sexual orientation, gender identity or gender expression. We also encourage protected veterans and individuals with disabilities to apply.

### New York

OMS – Head and Neck Surgery Faculty at the State University of New York at Buffalo: The University at Buffalo invites applications for a full-time faculty position in the Department of Oral and Maxillofacial Surgery. Academic rank and salary will be commensurate with qualifications and experience. Both tenure and nontenure positions available. Major responsibilities include patient care, resident teaching and research. This position is both clinical and academic, and the candidate should have an interest in building and fostering a practice and conducting research in head and neck oncologic and microvascular reconstructive surgery. Candidates must have a DDS or DMD degree and have completed a CODA-accredited residency program and be eligible for licensure in New York. Candidate must have fellowship training in head and neck oncologic and microvascular reconstructive surgery. Candidates must be a Diplomate of ABOMS or have ABOMS candidate status. Applications are currently accepted online at: [Posting.F230233.Clinical-Track.ubjobs.buffalo.edu/postings/45536](http://Posting.F230233.Clinical-Track.ubjobs.buffalo.edu/postings/45536). [Posting.F230234.Tenure-Track.ubjobs.buffalo.edu/postings/45537](http://Posting.F230234.Tenure-Track.ubjobs.buffalo.edu/postings/45537). Direct inquiries to Michael R. Markiewicz, DDS, MD, MPH, FACS, Professor and Chair, Department of Oral and Maxillofacial Surgery, email address: [mrm25@buffalo.edu](mailto:mrm25@buffalo.edu). The University at Buffalo is an equal opportunity, affirmative action employer and welcomes all to apply regardless of race, color, gender, national origin, age, religion, creed, genetic information, sexual orientation, gender identity or gender expression. We also encourage protected veterans and individuals with disabilities to apply.

### 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 position at the rank of assistant/associate professor for the Department of Advanced Specialty Sciences, Division of Surgical Services and Applied Technology. 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 South Carolina 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 – [musccareer-pages.com/jobs/univ-open-rank-department-of-oral-and-maxillofacial-surgery-charleston-south-carolina-united-states](http://musccareer-pages.com/jobs/univ-open-rank-department-of-oral-and-maxillofacial-surgery-charleston-south-carolina-united-states).

### Washington

University of Washington's Department of OMS seeks full-time faculty to engage in the tripartite academic mission and a focus on microvascular reconstruction. Submit a personal statement and CV to Dr. Sujit Joganpally ([sujitj@uw.edu](mailto:sujitj@uw.edu)). We are an equal opportunity employer.

## Fellowships Non-CODA

### Illinois

The Oral Cancer Institute ([OralCancer.com](http://OralCancer.com)) is offering a 24-month fellowship in head and neck oncologic and microvascular reconstructive surgery. Fellows will obtain broad exposure in the management of malignant head and neck pathology, including neck dissections, SNLB, glossectomies, mandibulectomies, maxillectomies and management of salivary gland tumors. Fellows will be trained in reconstructive surgery including microvascular free tissue transfer. Email fellowship director at [mohammed.qaisi@aah.org](mailto:mohammed.qaisi@aah.org).

### Missouri (St. Louis)

Oral and Maxillofacial Fellowship for 2026-27: Sponsored by the Oral Facial Surgery Institute ([ofsinstitute.com](http://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 1 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 S. New Ballas Road, Suite 16A, St. Louis, MO 63141, phone 314-251-6725, fax 314-251-6726, email [lacyw@ofsinstitute.com](mailto:lacyw@ofsinstitute.com) or visit our website at [ofsinstitute.com](http://ofsinstitute.com).





## Oregon

The Head and Neck Institute (HNI) is offering a 12-month fellowship in advanced craniomaxillofacial and trauma surgery (ACMF-trauma). This fellowship is based at Legacy Emanuel Medical Center (LEMC) in Portland, Ore. The fellowship covers advanced training in head and neck surgery, maxillofacial trauma and airway management. It also includes experience in sleep surgery (upper airway stimulation) and craniofacial surgery. The faculty includes Drs. Bryan Bell, Allen Cheng, Ashish Patel, Caitlin Magraw, Baber Khatib and Lance Thompson. Dr. Eric Dierks also serves as an emeritus faculty member. Please contact us directly for more detailed information about the program. Information about our practice and fellowship program also can be found at head-neck.com. Please email us at chenga@head-neck.com.

## Available Positions

## Alabama/Georgia

Incredible opportunity for immediate associateship with clear partner track in an actively expanding, four-surgeon, four-location practice across central Alabama into west Georgia. Emphasis on dentoalveolar, dental implants, bone grafting, pathology and some orthognathic. Limited trauma call. CV to joshua.everts@gmail.com.

## Arizona

Looking for an excellent opportunity to join a unique, long-standing, successful and respected, busy oral surgery practice with a focus on wisdom teeth and implants but with the potential for whatever is desired? Experienced and dependable staff. A partner wishing to matriculate to ownership is desired. Seeking a motivated, full-time and personable, candidate who is a Diplomate of ABOMS or has ABOMS candidate status. Actively growing area of Northwest Phoenix. Wonderful area to practice and raise a family. Competitive salary/benefits. Send inquiries to mdallard2017@gmail.com.

## California

Well-respected, busy and established oral surgery practice in search of a Diplomate of ABOMS or OMS who has ABOMS candidate status. Must be a motivated, hardworking and efficient oral surgeon for a full-time position in the Bay Area. Our office provides a full scope of oral and maxillofacial surgery including IV-sedation, extractions, bone grafting and PRP, implant placement, biopsies and more. Applicant should have California 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](mailto:oralsurgery@gmail.com).

## California

Practice in Northern California looking for associate leading to partnership. Dentoalveolar, implants, pathology and pediatrics are the primary focus. Looking for great interpersonal skills with patients, staff and referral base. Busy practice so be ready to work. Send inquiries to [classifieds@aaoms.org](mailto:classifieds@aaoms.org) attention AAOMS Classified Box A-121823.

## California

Rare opportunity! Bay Area, Marin County, respected solo practitioner looking for a Diplomate of ABOMS or one who has ABOMS candidate status oral and maxillofacial surgeon for a full-time position, unless part-time at this point is preferred. This arrangement will lead to a partner position and potential buyout situation. All traditional aspects of oral surgery are currently being performed. This is a two-site practice, with each office located in a conveniently desirable area of Marin County. This practice enjoys a committed loyal referral base. Please email [hicklesurg@comcast.net](mailto:hicklesurg@comcast.net).

## Colorado

Full-scope OMS practice located in Boulder in search of a full-time associate, with a matriculation to partnership. Seeking energetic, personable, highly motivated, team-oriented oral surgeon willing to grow the practice. Must be a Diplomate of ABOMS or have ABOMS candidate status. Established practice in a newly renovated office, state-of-the-art fully digital practice. Offers competitive salary, malpractice, health insurance and retirement benefits. Please email [floms1420@gmail.com](mailto:floms1420@gmail.com) with inquiries.

## Connecticut

Full-scope OMS and cosmetic surgery center looking for FT or PT associate or partner to join upscale, modern, downtown practice. Located in safe, friendly, affluent waterfront community <20 miles from NYC. Dedicated, pleasant staff. Send CV to [facialsurgery777@yahoo.com](mailto:facialsurgery777@yahoo.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 one 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 [cforalsurgery.com](http://cforalsurgery.com). Email CV to Tom Meena, Practice Manager, at [tmeena@cforalsurgery.com](mailto:tmeena@cforalsurgery.com) or call 407-843-2261.

## Florida

Excellent opportunity to join an established, growing oral surgery practice in North Central Florida. We are seeking an OMS associate who is a Diplomate of ABOMS or has ABOMS candidate status for an opportunity for partnership. This area is rapidly growing, and our associate will have a full schedule in a short time. Competitive pay with base salary as well as production compensation. Robust benefit package which includes professional licensures, health and malpractice insurance. Send resume, CV or inquiries to AAOMS Classified Box A-122123.

## Florida

Multiple-office, high-producing practice with a high reputation for exceptional surgical and patient care in Tampa Bay area. We provide close contact with our robust referral base and regularly provide CE courses as part of our study club. State-of-the-art offices with CBCT, digital impression scanner, operating rooms and full anesthesia equipment and other state-of-the-art technology. Perform a full scope of OMS procedures with a heavy emphasis on dental implants and dentoalveolar surgeries, full-arch teeth-in-a-day implant-supported fixed prosthesis treatment, zygomatic and pterygoid implants, soft- and hard-tissue grafting, reconstructive and orthognathic surgeries, facial plastic and cosmetic surgeries (willing to teach), office-based IV sedation and general anesthesia. Searching for a motivated, hardworking and personable OMS for associate position leading to partnership. Very competitive salary and bonus structure plus a comprehensive benefit package. We are in a nice area for raising a family and at the same time the associate will have a lucrative practice. Please send CV to [facial97@gmail.com](mailto:facial97@gmail.com).



## Available Positions

*continued from previous page*

### Georgia

Excellent opportunity to join a busy, well-established practice in Athens, home of the University of Georgia. Seeking an oral surgeon who is a Diplomate of ABOMS or has ABOMS candidate status for immediate associateship leading to partnership in our solo practice founded over 40 years ago. Our practice has long-term ties to the dental community and a loyal referral base. Our focus is implant reconstruction, bone grafting and traditional oral surgery. We are open to expand in other directions. There is a level 2 trauma center within a mile of our standalone facility. Our office is equipped with the latest Carestream CBCT (9600), digital impression scanner and other state-of-the-art technology. The facility has four operating rooms including a larger OR with a general anesthesia machine with sevoflurane vaporizer for longer cases. Candidates may visit [athensoms.com](http://athensoms.com) for more information and should send an introductory email with CV to Miranda Cross at [office@athensoms.com](mailto:office@athensoms.com).

### Georgia

Coastal Oral Surgery is looking for a board-eligible/certified oral surgeon to join its 25-year established practice! Position available immediately and open to graduating residents. Two practice locations, St. Simons Island and St. Marys. Both are fee for service and offer state-of-the-art technology equipped with ICAT cone beam and digital scanners. Coastal Georgia is a hidden treasure, located right between Savannah, Ga., and Jacksonville, Fla. When people talk about work-life balance, this is the definition! If you have an interest, it can be found here (water, land, air). The local airport is serviced by Delta Airlines, so travel is easy. Need the big city? With Jacksonville and Savannah an hour away, your needs are met! This position offers competitive compensation of base salary plus production, relocation package and sign-on bonus! Benefits include health insurance/retirement plan, dues for GDA/AAOMS membership and CE reimbursement. Visit our website at [capesoralsurgery.com](http://capesoralsurgery.com) and email CV to Carly Tristao, Clinical Recruiter at [carly.tristao@affordablecare.com](mailto:carly.tristao@affordablecare.com).

### Illinois

Full-scope private OMS in Lake County seeking an OMS associate leading to partnership. Must be a Diplomate of ABOMS or have ABOMS candidate status. Excellent compensation and benefits. Paid Level 1 hospital call and opportunity for FACS. Third molars, implants, orthognathic surgery and full facial trauma. Reply to [classifieds@aaoms.org](mailto:classifieds@aaoms.org), attention: AAOMS Classified Box A-311.

### 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](mailto:os1161732@aol.com).

### Illinois

Are you a talented oral surgeon looking to transform lives and fast-track your career? Join our thriving downtown Chicago practice associated with Northwestern Hospital. We're a fee-for-service clinic focusing on full-spectrum oral surgery and high-volume implants. With a great reputation and steady referrals, you'll enjoy a full schedule in no time. We're offering a total compensation package worth over \$400,000/year, plus a percentage based on production. Want a partnership track option? We have that, too. You'll fit right in if you're a team player, always learning and a great communicator. Ready to make a difference and grow your career on a solid track in a supportive environment? Get in touch, and let's create amazing smiles and lifestyles together! Send CV or inquiries to [classifieds@aaoms.org](mailto:classifieds@aaoms.org) attention AAOMS Classified Box A-110922.

### Illinois

Endodontic & Periodontic Associates is searching for a trained oral and maxillofacial surgeon interested in practicing part-time exodontia. We are a multispecialty practice with five offices located in the south suburbs of Chicago, Ill., and four in northwest Indiana. We are looking for an OMS to help us with our overflow of extractions, more difficult extractions and to build the third molar extraction portion of our practice. We are continuing to expand and are looking for someone who would be interested in joining our team and building their own niche in our practice. We offer a professional and ethical work environment and will provide trained chairside assistants and any supplies needed to deliver optimal treatment. If you might be interested in joining our team, know of someone who is or if you have any questions or need additional information, please contact Mike Cvengros, COO of Endodontic & Periodontic Associates directly at 708-922-1165 or email at [mcvengros@endoperio.com](mailto:mcvengros@endoperio.com).

### Illinois

Associateship leading to equal partnership for a hardworking oral surgeon with strong interpersonal skills. Must be a Diplomate of ABOMS or have ABOMS candidate status. Primarily fee-for-service and privately owned practice with a long-term, dedicated staff and well-established referral base. Competitive salary with an incentive bonus based on production, malpractice and medical insurance. Please reply to [oralsurgery@750almar.com](mailto:oralsurgery@750almar.com) or fax 815-939-9820.

### Kentucky

Immediate associateship opportunity in a one-surgeon, two-location practice in Louisville, Ky. Large referral base of active duty and retired military veterans. Seasoned surgeon looking to mentor or expand practice with another. CV to [jtoney@oms360.com](mailto:jtoney@oms360.com).

### Massachusetts

We are seeking an oral and maxillofacial surgeon who is a Diplomate of ABOMS or has ABOMS candidate status to join our busy two-location practice with a loyal referral base and a great staff. Our offices are state-of-the-art with CBCTs and intraoral scanning for efficient implant guide fabrication. A full schedule can be provided from day one for a motivated, caring and personable surgeon who is interested in an early partnership. Our highly successful practice emphasizes dentoalveolar and implant surgery, with trauma and orthognathic surgery available if desired. Hospital call is 10 days, every other month, with the option to be as involved as you like. We offer a competitive benefits package, the opportunity to live near major cities and still hike, hunt and ski from your backyard. Please send CV to [chris@odisurgery.com](mailto:chris@odisurgery.com).

### Massachusetts

Well-established and growing two-office OMS practice in Greater Boston area seeking skilled and personable oral surgeons. Candidates must be a Diplomate of ABOMS or have ABOMS candidate status and provide excellent surgical skills, bedside manner and be interested in growing the practice. Our employment package includes a high base salary with a sign-on bonus, a production incentive and an equal partnership track. For more information about our practice and our surgeons please email CV to [manager@mvsoralsurgeons.com](mailto:manager@mvsoralsurgeons.com) attention Sandra.

### Michigan

A well-respected OMS practice in southwest Michigan searching for an oral surgeon for a full-time position. Must be a Diplomate of ABOMS or have ABOMS candidate status. Our practice was



established over 40 years ago and has grown to be the premier oral surgery practice in Southwest Michigan. We are a full-scope practice, which allows you to guide how you want to practice oral and maxillofacial surgery. We have four surgeons, two offices and a strong referral base. Southwest Michigan is known for its beautiful inland lakes, ski slopes, walking/hiking/biking trails, hunting and fishing. Each season has something to offer the outdoor enthusiast! We are about a 40-minute drive from Lake Michigan beaches including South Haven and St. Joseph. Academics are important to this location as well. Kalamazoo is home to Western Michigan University and the distinguished Kalamazoo College, a private liberal arts university with an outstanding reputation for academics. We are also home to the Stryker Corporation, Pfizer, Bronson Health Group and Borgess Hospital. The most impressive thing about Southwest Michigan is our community. It offers a great family atmosphere and a wonderful place to raise a family. Kalamazoo is a smaller community which offers a lower cost of living, affordable housing and ease of travel from home to the office and the hospital. This is a great location to perfect your career in oral and maxillofacial surgery. For additional information please email at [dwilson@kaloms.com](mailto:dwilson@kaloms.com).

## New Hampshire

Busy and well-established two-location practice in southern New Hampshire. Seeking an oral and maxillofacial surgeon who is a Diplomate of ABOMS or has ABOMS candidate status. Competitive salary and benefits. Perfect opportunity for family or individual to live and work near metro Boston and the Seacoast. The practice has excellent opportunity for growth and flexibility. For more information about this opportunity email [curtinosa@gmail.com](mailto:curtinosa@gmail.com).

## 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 dentoalveolar 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@mofsnyc.com](mailto:robert.bodey@mofsnyc.com) or contact Robert Bodey at 347-590-9910.

## New York

Seeking an 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 [classifieds@aaoms.org](mailto:classifieds@aaoms.org) attention AAOMS Classified Box A-4442.

## New York (Catskills)

I am seeking a quality person to help me serve our community. The location: Located in beautiful, upstate New York, two-college town, yet rural (can still purchase hilltop acreage), three hours to NYC, great place to raise a family, 30 minutes to Cooperstown. The patients: Salt of the earth people, pleasant and appreciative. The practice: 100 percent fee for service (no insurance), no call, no IV sedations (done in hospital), a 10-month waiting list (no other surgeons in our area), large, stand-alone building with excellent accessibility, CBCT, awesome staff. Bottom line: This is a rare opportunity to be a partner in a modern practice without the headaches of insurance or competition. Reply to [classifieds@aaoms.org](mailto:classifieds@aaoms.org) attention AAOMS Classified Box A-030124.

## North Carolina

The Atrium Health Department of Oral and Maxillofacial Surgery is seeking an oral and maxillofacial surgeon to join their growing practice of two full-time oral and maxillofacial surgeons and three full-time oral and maxillofacial surgery interns. The Oral and Maxillofacial Surgery department primarily provides dentoalveolar, facial trauma, pathology, orthognathic and TMJ surgical services in outpatient and inpatient settings. Charlotte's rapidly expanding population combined with committed institutional support has created a unique opportunity to develop a robust surgical practice amongst supportive colleagues. Atrium Health OMS Department also falls within the Department of Otolaryngology/Head and Neck Surgery at Wake Forest University School of Medicine with clinical academic appointments. To learn more contact Laneisha Faggart at [laneisha.faggart@atriumhealth.org](mailto:laneisha.faggart@atriumhealth.org) or visit [careers.atriumhealth.org/jobs/8336032-oral-and-maxillofacial-surgeon](https://careers.atriumhealth.org/jobs/8336032-oral-and-maxillofacial-surgeon).

## 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 an OMS with a strong work ethic and excellent patient skills and

must be a Diplomate of ABOMS or have candidate status. 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 Tammy at [liberty@tboms.com](mailto:liberty@tboms.com) or call her at 513-755-3500 for more information.

## Ohio

Outstanding opportunity to join a growing and productive private practice on the west side of Cleveland. We are searching for an associate who is board-certified or board-eligible to join our practice. 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 or can maintain associate status. All 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](http://CLEOMS.com) or email [jeffrey@cleoms.com](mailto:jeffrey@cleoms.com).

## Ontario, Canada

A full-scope oral surgery practice is seeking a full-time associate leading to partnership. Only 1.5 hours from Toronto. The 407 extension has led to incredible growth and opportunity in this region. Live and work in cottage country. Must be a FRCD(C) or planning on taking the fellowship exams. The price point for membership is of unparalleled value. Please contact [omfsptbo@gmail.com](mailto:omfsptbo@gmail.com) for more information.

## Oklahoma

Full- or part-time oral and maxillofacial surgeon associate needed. Graduating residents are welcome to apply! Private practice located in Moore, Okla. This modern practice opened in 2018 and has experienced rapid growth. We are looking to add another surgeon to our team! This position will have future ownership opportunities. Patient care and safety are high priorities for us, with stable staff and investment in making our clinical assistants equipped with the best skills. The new associate has the opportunity if desired to participate in resident and dental student education with a faculty appointment. Multiple hospital appointments for non-office surgical procedures are readily available. Interested or have questions? Please contact Dr. Steven Sullivan at 405-271-4955 or [stevensullivan@sbcglobal.net](mailto:stevensullivan@sbcglobal.net).

## Available Positions

*continued from previous page*

### Oregon

Two-doctor practice needs energetic, patient-focused, personable oral and maxillofacial surgeon to join our busy, well-established practice as associate/future partner who is a Diplomate of ABOMS or has ABOMS candidate status. We have two locations in the beautiful southern Oregon Cascades. This is a city that functions as a hub for regional healthcare. Hiking, camping, golfing, 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, continuing ed and relocation assistance. Please contact [alicer@aomsurgery.com](mailto:alicer@aomsurgery.com).

### Pennsylvania

Multi-location group adding associate. Thriving eastern Pennsylvania OMS practice within easy driving distance to New York City, Philadelphia and the Poconos looking for associate. Flexible options from part time to partnership track. Full scope of OMS practiced with a focus on patient care. Very competitive base salary and benefits. Ideal location for metro or rural living. Contact us via email at [cburgess@valleyoralsurgery.com](mailto:cburgess@valleyoralsurgery.com) if you would like to learn more about this opportunity.

### Pennsylvania

Oral and maxillofacial surgeon – Geisinger, Pa. The Department of Oral and Maxillofacial Surgery at Geisinger, a national leader in quality, innovation, research and education, is seeking an oral and maxillofacial surgeon who is a Diplomate of ABOMS or has candidate status to join their team at the Geisinger Medical Center in Danville, Pa. A successful candidate will join a full-scope academic CODA-accredited training OMFS practice that takes a multi-disciplinary approach to patient care, working in collaboration with multiple departments within the health system. The practice has a special emphasis on maxillofacial trauma, dentoalveolar and implant surgery with in-office sedation, corrective jaw surgery, cleft palate, TMJ and reconstructive surgery. Position details: competitive straight salary model linked to quality and value instead of productivity measures, three weeks of annual CME time and an annual CME fund allowance, four weeks of annual PTO, relocation assistance and opportunities to participate in teaching, research and optimizing access for patients. The role also offers support and leadership from a full range of dedicated, experienced specialists and subspecialists, professional opportunities for mentorship, growth and advancement, an excellent benefits package that includes 401(k), 403(b) and 457(b) plans, life insurance, AD&D and disability coverage, malpractice and tail coverage for Geisinger employment, a fully integrated electronic health

record system (EPIC), and forgivable recruitment loan/medical school loan repayment for residents or fellows may be available upon signing. For more information, please contact Oral Medicine Dept., Surgery Institute Geisinger – Sarah Lipka, Geisinger Provider Recruiter at [slipka1@geisinger.edu](mailto:slipka1@geisinger.edu).

### Pennsylvania

Leading Edge Oral Surgery – Offering high-end, comprehensive oral surgery across the northeast. Now hiring in Pennsylvania! Offering competitive compensation, benefits and tuition support. Please send your resume directly to Dr. Joshua Gish, President, at: [jgish@leadingedgeos.com](mailto:jgish@leadingedgeos.com). Learn more at [leadingedgeoralsurgery.com](http://leadingedgeoralsurgery.com).

### Tennessee

Booming practice in beautiful east Tennessee! Locally owned and operated, high-end implant and dentoalveolar practice seeks full- or part-time OMS. We have resisted private equity overtures. Currently three state-of-the-art locations with a new office on the horizon. Maryville, Knoxville, Lenoir City and Sevier County, Tenn. High growth, mostly private insurance and self-pay. Great opportunity for new resident or seasoned surgeon. Email [jules@tnvalleyos.com](mailto:jules@tnvalleyos.com) or phone 865-300-7135.

### Texas (Austin)

Join our world-class practice at Hill Country Oral Surgery and Dental Implants. We are a tight-knit family focused on dentoalveolar and high-end implant surgery. We are well respected in the community and have an excellent referral base. We offer a flexible opportunity for full-time employment with associateship and/or partnership track options. Enjoy paid vacation, health insurance as well as retirement. Email [vcavaretta@gmail.com](mailto:vcavaretta@gmail.com) with your CV.

### Texas (North Houston)

Opportunity with an established and well-respected, doctor-owned oral surgery group practice located north of Houston, Texas. We are seeking a board-certified/-eligible or recent graduate candidate. The practice consists of seven board-certified oral surgeons who practice the full scope of OMS in six offices. Serving the area for over 45 years, the practice has successfully grown by maintaining long-standing referral relationships and providing excellent care to the patients in our communities. The city and suburbs are experiencing incredible growth and are great places to live and raise a family. We offer a competitive base compensation and bonus package, 401(k), family medical insurance, malpractice insurance, CE allowance and generous paid vacation with a pathway to partnership. Contact our Practice Administrator, Donna Kotsios, at [dkotsios@nwoms.net](mailto:dkotsios@nwoms.net).

### Virginia

Exciting opportunity to join an established, self-owned group practice. Primary office in Charlottesville (home of the University of Virginia) with a satellite office in Culpeper. One-year associateship with clear terms to partnership thereafter. Applicants must be a Diplomate of ABOMS or have ABOMS candidate status. Seeking applicants who are dedicated to maintaining the strong referral network across central Virginia. Excellent work-life balance with majority dentoalveolar surgery and minimal hospital call. Candidate to start as soon as possible. For more information, please email resume to [ldelbridge@cvofs.com](mailto:ldelbridge@cvofs.com).

### Washington/Idaho

Liberty Oral Surgery is a two-doctor, two-location practice in the beautiful, growing Inland Northwest with offices in Spokane, Wash., and Post Falls, Idaho. We are a full-scope practice that does routine oral surgery with over 600 dental implants per year as well as jaw surgery cases. With one doctor relocating in early 2024, we have a fantastic opportunity to work as an associate with a partnership opportunity (preferred). Interested candidates, please email Dr. Bryan McLelland at [bryan@libertysurgerycenter.com](mailto:bryan@libertysurgerycenter.com).

### West Virginia

The Charleston Area Medical Center, Inc. (CAMC), located in Charleston, W.V., is seeking an oral and maxillofacial surgeon to join our dynamic team of healthcare professionals. The position is an excellent opportunity to grow a full-scope hospital-based practice in a supportive environment. This established seven-surgeon group practice blends the benefits of academics and private practice. There are additional opportunities to conduct research or participate in leadership if desired. Requirements: a Doctor of Dental Surgery (DDS) or Doctor of Dental Medicine (DMD) degree from an accredited dental school, completion of an accredited residency program in oral and maxillofacial surgery, board certification or eligibility for board certification in oral and maxillofacial surgery, active licensure to practice dentistry in the state of West Virginia, excellent clinical skills and proficiency in performing a wide range of oral and maxillofacial surgical procedures, strong communication and interpersonal skills, with the ability to effectively interact with patients, families and colleagues, a commitment to providing compassionate, patient-centered care and maintaining the highest standards of professionalism and ethical conduct and a desire to help develop an academic surgical program. Benefits: join an established group of seven OMSs with decades of experience and broad scope of practice, enjoying the balance of group practice and academic teaching with the income level of a private practice, a supportive work environment with focus on collaboration and teamwork, a vibrant community, a superb family environment



with outstanding school systems, unsurpassed year-round recreational activities, a comprehensive benefit package, a generous sign-on bonus, occurrence-based malpractice insurance and a highly regarded established practice with immediate positive benefits. The Facial Surgery Center is an ambulatory surgical center affiliated with CAMC that specializes in a broad scope of facial surgery procedures. The center has locations at CAMC's General and Women and Children's hospitals. The center's physicians are board certified by the American Board of Oral and Maxillofacial Surgeons and serve as the primary resource team for cleft, craniomaxillofacial surgery, trauma as well as providing services in head and neck surgical oncology, microvascular reconstructive surgery, dentoalveolar and cosmetics for CAMC and southern West Virginia. To apply, send CV to carol.wamsley@vandaliahealth.org.

## Wisconsin

Our multi-location, multi-doctor practice with up-to-date amenities and a reliable referral base offers a competitive salary and benefit package for the right candidate looking for an associateship with opportunity for equal partnership. Trauma call is minimal at area hospitals. The practice locations are set in friendly, safe environments with excellent schools, multiple possibilities of outdoor activities, professional and college sporting events and performing arts venues. Larger cities are located within an easy, short drive for weekend adventures. The area provides a low cost of living and opportunity for an exceptional quality of life. Interested candidates please apply with a CV or resume to: markjridenour@gmail.com.

## Miscellaneous

### New York

Licensed and board-certified OMS looking to purchase a practice in New York State. Ideally: transition of ownership of practice and building combined. Plan is to maintain and grow practice for many years into the future. Will respect confidentiality during process. Please contact by emailing classifieds@aaoms.org attention AAOMS Classified Box M-010724.

## Practices for Sale

### California

Established OMS practice for sale in Sonora (Northern California). Very desirable area. Please respond to nfantovrn@aol.com for inquiries.

### Florida

Available for sale is a highly profitable, fee-for-service oral and maxillofacial surgery practice located in the Tampa Bay metropolitan area. 2023 collections totaled just over \$1.9 million with the selling doctor seeing patients 4.5 days/25 hours per week. Overhead 37 percent. The facility occupies about 4,000 sq. ft. of space within a single-story, stand-alone building and includes three fully equipped operatories. There is an excellent staff in place. Contact nupro1958@gmail.com for more information.

### Georgia

Efficient OMS practice for sale located in the northwestern region of Georgia, just a stone's throw away from a vibrant town known for its rich history and charm. 2023 collections totaled \$1.2 million. The 5,000-square-foot facility is available for sale or lease and boasts four surgical suites, two consult rooms and two treatment rooms. CBCT Panoramic 9600 unit. Diode Laser. Selling doctor looking towards retirement. Contact mattk@mcgillhillgroup.com for more information.

### Indiana (Indianapolis)

Five operatories, collections of \$3.373 million, recently remodeled with RE available. Busy practice with 165 new patients/month. Would prefer to sell to another oral surgeon! Contact Professional Transition Strategies: bailey@professionaltransition.com. Reference #IN90723.

### Michigan

For sale – well-established, solo OMS practice located in SW Michigan. Strong referral base with consistent excellent net collections on a four-day week. Emphasis on dentoalveolar, implants and bone grafts with opportunity to expand scope. Level 1 trauma hospital nearby. Home to Homer Stryker WMU Medical School and the Kalamazoo Promise. Great place to raise a family. Owner willing to stay on for a smooth transition. Interested surgeons who are Diplomates of ABOMS or have candidate status send CV to lynnhyland1900@gmail.com.

### Nevada

Established OMS 32 years of practice in prime Las Vegas location ready to retire. Flexible transition options. Practicing full-scope OMS working 20 hours per week, EHR WinOMS and Carestream CBCT. Excellent opportunity for new graduate entrepreneur. Contact classifieds@aaoms.org attention AAOMS Classified Box S-122703.

### New Jersey

Solo OMS practice in Central New Jersey focused on profitable dentoalveolar, implant, bone grafting, pathology and general anesthesia procedures. Surgeon owns 2,900-square-foot office in professional center. Excellent exposure/signage facing main road. Recently constructed office designed for two surgeons: five operatories, Dexta OS Chairs, i-CAT, Sirona Digital Pan, CO2 Laser, Piezosurgery Unit, Ellman Surgitron Radiosurgery Unit, Osstell IDx, IntraSpin L-PRF Centrifuge, 16 Camera CCTV, 45KW 2.4L Generator, WinOMS CS. Please send inquiries to classifieds@aaoms.org, attention AAOMS Classified Box S-0701.

### New York (Western)

Elevate your career and lifestyle with a highly profitable oral maxillofacial surgery practice in upstate New York's tranquil countryside. Boasting low competition and a high volume of implant procedures, this solo practitioner office promises not just success, but a life enriched with outdoor adventures – boating, fishing, hiking, skiing right at your doorstep. Operating with a stellar \$2.8 million in production over 4.5 days weekly, it offers an unparalleled balance of work and play. Transition seamlessly, available immediately up to two years. Don't miss this rare chance to own not just a practice but a dream lifestyle. Act now! Visit westernnyoms.com for more details. Your future awaits!

### New York (Syracuse)

Four operatories, \$4.190 million collections. Seeking 50/50 partner. Contact Professional Transition Strategies: bailey@professionaltransition.com. Reference #NY13124B.

### New York

Four ops, collections of \$1.245 million and real estate availability. Seeking to transition to retirement in ~1 year. Contact Professional Transition Strategies: bailey@professionaltransition.com. Reference #NY42424.





## Practices for Sale

*continued from previous page*

### North Carolina (Outer Banks)

Thriving FFS oral surgery practice for sale in picturesque Outer Banks, N.C. Two locations, six operatories, over 100 new patients monthly, with expansion potential. Open to various transition options. A rare opportunity in a growing, desirable area. Contact: [bailey@professionaltransition.com](mailto:bailey@professionaltransition.com), REF# NC71421.

### Ohio

Wonderful opportunity in Northwest Ohio. No upfront investment. Lease to own. Two office locations with room to expand practice included in the sale, four surgical operatories in the main office, two operatories in the satellite office. Owned by a solo practitioner. Collections \$1.4 million working four office days. Thriving community, great schools and highly motivated trained staff. Practice emphasis is on in-office anesthesia, dentoalveolar surgery, dental implants and reconstructive surgery. Only one other oral surgeon in the area. Please contact [tluna79@gmail.com](mailto:tluna79@gmail.com) for more information.

### Ohio

Are you tired of working for a corporate or group practice and want to own your own practice? This is a great opportunity to purchase a 30-year-old practice in Northeast Ohio. Average collections have been \$1.6 million on a 34-hour work week. A well-trained staff with 10 to 25 years of experience will help to keep the practice flourishing. The current owner is looking to retire but is willing to stay for up to six months to ensure a smooth transition. Contact [classifieds@aaoms.org](mailto:classifieds@aaoms.org) attention AAOMS Classified Box S-022924.

### Oregon

Portland – Recently renovated, strong OMS practice with six surgery suites. Collects \$2.4 million. Gorgeous office in central location and tenured staff. Surgeon possibly able to stay on as a part-time associate. Contact [paul@mydentalbroker.com](mailto:paul@mydentalbroker.com) or 866-348-3800.

### Pennsylvania (Lancaster)

Prime opportunity to own a well-established oral surgery practice in Greater Philadelphia, Southern Pennsylvania. Features 55 to 60 new patients monthly, five operatories and significant earnings. Real estate available. All offers considered. Contact: [bailey@professionaltransition.com](mailto:bailey@professionaltransition.com), REF #PA122622.

### Rhode Island

Well-established, profitable practice with experienced staff offering a unique opportunity for practice ownership. Solo practitioner looking to transition into retirement. Willing to work with interested parties to allow for a smooth transition. If you would like to learn more about this opportunity, please reply to AAOMS Classified Box S-011024.

### Texas

Austin OMS practice, three operatories, consult room, 615+ patients, robust FFS model. Collections of \$1.898M. Contact PTS [bailey@professionaltransition.com](mailto:bailey@professionaltransition.com), call 719-694-8320, REF #TX92823. Would prefer to sell to another oral surgeon!

### Washington

Satellite oral surgery office for sale. Located in the heart of Seattle adjacent to Swedish Hospital. Perfect for group looking to expand or new OMS, without the build-out costs. Staff travels with current OMS. 2,500 square feet, fully remodeled three years ago. Three exam rooms, three operatories. Includes 2020 iCAT, Trioss intraoral scanner, three Boyd oral surgery and Boyd exam chairs, two M11 autoclaves, Statim, Biosonic, BienAir consoles. Practice net \$775,000 last three-year average, working 12 to 15 hours per week. \$375,000. Main office too busy to support satellite any longer. Contact Mark at 425-239-5600. No brokers please.

## Practice Transitions

### OMS Exclusively Premier Transition Specialists for Oral Surgeons

Leader since 2004 in the recruitment of oral surgeons nationwide. We understand oral surgery; we are the specialists. Time to sell or buy, transition into retirement, value your practice, restructure your partnership or add an associate/partner? We have over 30 years in transitions, including practice sale experience. We work with residents, experienced surgeons and military. We are not practice brokers, do not charge 10 percent or sign exclusive agreements. We have buyers/associates, tremendous success. You have seen us at AAOMS/ we provide you personalized solutions. Webpage/ National Job Board: [OMS-Exclusively.com](http://OMS-Exclusively.com), [larryjacobson@oms-exclusively.com](mailto:larryjacobson@oms-exclusively.com), call 866-241-9003.

## Classified Advertising Deadlines

Sept/Oct 2024 issue: July 9, 2024


Nov/Dec 2024 issue: Sept. 6, 2024


Jan/Feb 2025 issue: Nov. 8, 2024

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Contact only the following staff members  
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with questions:

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\_\_\_\_\_

☐ AAOMS Member ☐ Non-member **AAOMS Member ID No.** \_\_\_\_\_

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

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Contact Email \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

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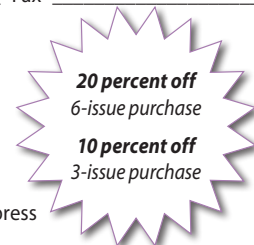
**Every 40 words thereafter: additional \$300**

☐ Visa ☐ MasterCard ☐ Discover ☐ American Express

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV \_\_\_\_\_

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