



Los Angeles
DENTAL SOCIETY

Los Angeles Dental Society's mission is to serve the needs and interests of its members and lead in promoting oral health in the community.

EXPLORER

Summer 2020

FOSTERING UNITY AND TEAMWORK

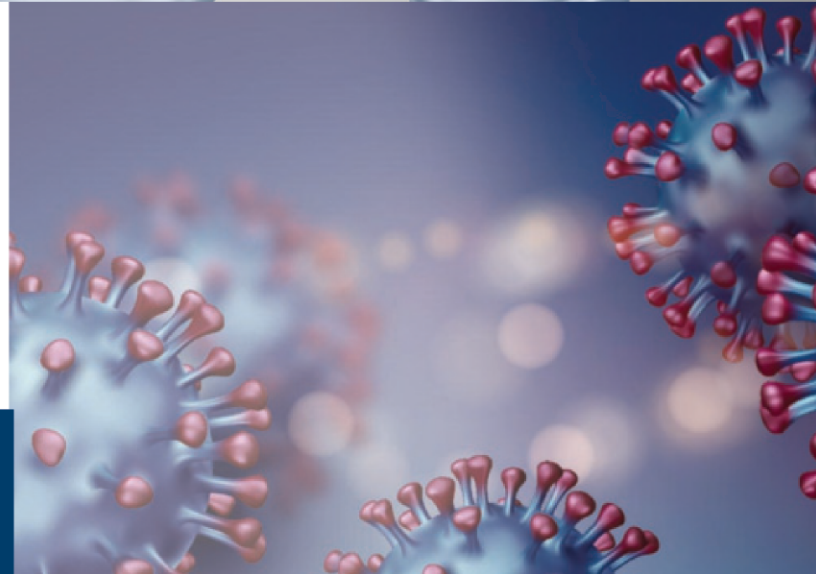


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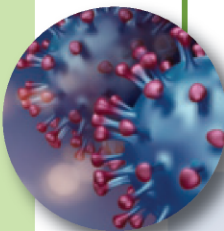
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Calendar of Events

MONTH	DATE	MEETING/EVENT
August	11	LADS Executive Committee Meeting
September	8	LADS Board of Directors' Meeting
October	13	LADS Executive Committee Meeting
	20	Anterior Esthetic Reconstruction: Teeth and Implants – CE Course
	31	SHREDDING EVENT
November	2	CPR Class 
	10	LADS Board of Directors' Meeting
	17	Marijuana in the Workplace and Dental Office – CE Course 



Los Angeles
DENTAL SOCIETY

Explorer

published by
Los Angeles Dental Society

Editorial Staff

Clark A. Martin, DDS - Editor
Gregg Orloff - Executive Director

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EDITOR'S CORNER

By Clark A. Martin, DDS

Well, here we are and what a different world it seems we're living in today. One day in March, you woke up and your entire life had changed. Your work was disrupted, patients were put in limbo and some maybe still are. Your extended family's safety and security all went from normal to cautious with fear of the unknown. An invisible threat that seemed distant (maybe not), but from all of the news reports, night after night this threat seemed so much closer, so real, so dangerous. Maybe you've been touched directly from Covid 19 or know someone who was. Regardless, it has changed our lives forever, both professionally as well in our everyday lives.

We search for those elusive N-95 masks each morning on the internet, probably have several surgical masks to use as a backup. We keep some in our cars, pockets or handbags. Maybe some hand sanitizer or Wet-Ones too, just in case. We've gradually come to live with this invisible enemy lurking everywhere. Our eyes and ears have been fixated to the TV day and night watching the tally of infections and deaths across the country and around the world. We can't get away from it and our Friday nights are now spent at home watching Netflix rather than out at our favorite restaurants with family and friends or going to a movie.

Our imaginations lead us to so many places in the future as we quarantine. When will this end, will this end and what will be our normal? Will our kids go back to school, and when? Our incomes, the security of our jobs, all

pulled out from under us in a matter of weeks. How could this have happened? We've worked so hard to line up our ducks, we've done what we were always told to do.

“Soon we all will be looking back having regained our control and again enjoying those things that mean the most to us.”

But we as dentists have worked through adversity before, several years of late nights and weekends of self-quarantine in the library and pre-clinical labs, acquiring our skills and confidence to be who we are. Well, never doubt yourself, we will overcome these challenges, we will get past this, so never lose hope. Soon we all will be looking having regained our control, and again enjoying those things that mean the most to us.

And a few more words:

Just when we've begun to figure out all of our protocols, all the precautions to take, after all the sacrifices, concessions we've each made and trying to envision a plan for ourselves going forward,

another terrible dark chapter reared its ugly head to the forefront of our collective lives. The brutal reality of racism and the malignant deviation of humanity was shown to all of America and to the world on May 25th, 2020 in videos of George Floyd's death by several Minneapolis police officers. These casual and heartless actions documented by several videos played over and over again. The reality was just too much for everyone, sparking protest, rallies and more than that. Day after day, the frustrations, surely compounded by our months of isolation and lack of normalcy just wouldn't allow for apathy or inane excuses towards these disgusting actions to be ignored any longer. Passions and pent up anger were ripe for release and that is exactly what happened. Along with the protests came uncontrolled destruction of property and further isolation that we had to endure because of it, for our safety once again.

Let's hope, no, let's demand that we move forward from these reminders of our dark past and be better, more inclusive, more caring for everyone, especially those whom we don't know or maybe don't understand. We are so much better than what we've seen in the media and observed firsthand too. When we can and the time is right, let's get out, feel safe from the hidden dangers around us, get past the false assumptions that may lurk inside our minds. Yes, we will again experience all that is good around us and create dreams that will come true. All of us will. Let's start today, making some realistic goals and go from there, step by step. ■



PRESIDENT'S MESSAGE

By Joan Otomo-Corgel, DDS, MPH, FACD, FICD

Who would have expected our lives to be flipped like an “on-off” switch?

The better question is what have you learned from the flip – are you on or off?

The Los Angeles Dental Society has been definitely on. We have been working diligently, nonstop, and with the primary purpose of finding ways to help our members. It was a time to test who we are as an organization. It has been heartwarming working with our dedicated leadership who have diverse skills and experiences, commitment to LADS and are not reticent to put in the time needed. Let me give you an update:

We have hired a fabulous Executive Director, Mr. Gregg Orloff. His intro letter is in this edition. (Thank you to the Search Committee chaired by Dave Anson, plus members Michelle Frawley, Adam Geach, Sonia Molina, Sue Merrell, and Sam Tarica).

PPEs – Dr. Roger Fieldman procured some N95 masks that were mailed to members who requested them. Currently, Dr. Jeff Lee has procured masks N94. We will be providing 10 to LADS members at no cost – soon, so stay tuned. Also, our New Professionals Committee chaired by Alexa Martin and assisted by Rhonda Kalasho developed a flyer regarding the requirements to “Return to Practice” with photos on how to don and doff the equipment. I hope you downloaded it from the email. Also, one of our members was featured



on a local news station starring Dr. Abraham Nobel regarding dental office safety protocols. His media spot represented the practicing dentist in the new COVID environment with professionalism and scientific accuracy. Kudos, to Dr. Nobel.

COVID updates – Sue Merrell and Kenny Jacobs have kept us up to date on new developments via the ADA, CDA, LA County, and CDC. Constant Contacts were sent via email to members within a day (sometimes minutes) upon receipt. We held a Town Hall with Dr. Rick Nagy, the current President of CDA. You all had an opportunity to Q & A with a gentleman in the know.

The LADS Bylaws were updated and revised. (Thank you to chair Irving Lebovics, and his all-star cast of Morel Fidler, Jeff Lee, Monic Bruce and Chuck Wang).

Finances – BIG Shout Out to Roger Fieldman who has gotten our finances back on track, accountable and accurate. Roger spent days recovering data, working with banking, and providing punctilious oversight. Kudos, thank you!

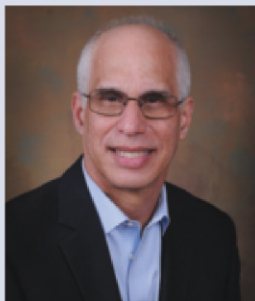
Home Base – Thanks to Roger Fieldman, Scott Kim, Irving Lebovics and our new Executive Director, Gregg Orloff we have a new home base as of September 1st! 3701 Wilshire Blvd, Suite #520 in Los Angeles. When it is safe, we will open the doors for board meetings, CPR courses, and committee meetings. Of course, it is your home base too, so LADS members are welcome!

Finally, and most importantly, THANK YOU, Sue Merrell. There are no words to acknowledge the gracious time and energy you have provided to bring LADS back to be the best we can be for our members. You are a special, amazing lady!

So – today, your membership dues have never been more valuable. We are stronger as a team so please contact us if you are interested in being active with your organization. You do not want your flip to be off. ■

“Things turn out best for the people who make the best of the way things turn out”.” Coach John Wooden

LADS HAS A NEW EXECUTIVE DIRECTOR!



After several months of postings and research by an Executive Search Firm, several candidates were presented

to our Executive Director Search Committee. The committee met several times to review multiple excellent applications. Then came COVID-19! But understanding the significance of this hire to the success of the LADS, the committee forged ahead and held interviews via Zoom. One candidate surfaced to the top. May I have the pleasure of introducing you to your new Executive Director, Mr. Gregg Orloff!

Gregg graduated from the UCLA with a BA in Economics and the University of Judaism with an MBA in Business Administration and a specialization in Nonprofit Management. Previously, he was the Assistant Executive Director of Valley Beth Shalom where he managed day-to-day operations and led all executive support services to the Executive Director that included oversight of administrative, accounting, and maintenance staffs. Mr. Orloff has also co-designed and implemented communication software to enhance calls, text, and emails to members.

Assuming a new job during the peak of the pandemic was certainly a test of his qualifications. Gregg hit the ground running! With the sage advice and

counsel of our “not so retired” past LADS Executive Director, Sue Merrell, he became a quick study. Webinars, dental vernacular, dental politics and policies, procuring PPEs, return to office questions....are just a few of the issues that bombarded him from day 1 on the job. He is still smiling and ready to move us forward!

Please welcome Mr. Gregg Orloff to the Los Angeles Dental Society family. Speaking of family, Gregg has 2 daughters as well! We are very fortunate to have found an experienced Executive Director from the Los Angeles area to navigate our Society through many future challenges.

JO-C

Leading the News

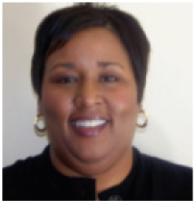


ADA Responds To Change From CDC On Waiting Period Length

The [ADA News](#) (6/19, Burger) reports that the ADA is advising that it is “still important to wait before disinfecting patient treatment rooms after aerosol-generating procedures, even though the U.S. Centers for Disease Control and Prevention recently removed a recommendation calling for a 15-minute waiting period” in its Guidance for Dental Settings. “The safety of patients, dentists and dental team members has been and always will be ADA’s utmost concern,” said ADA President Chad P. Gehani. Dr. Kirk Norbo, co-chair

of the ADA’s Task Force on Dental Practice Recovery agreed, stating, “While there is no strong evidence that supports a one-size-fits-all 15-minute waiting period recommendation, it’s still very important to allow some time for aerosol droplets to settle prior to disinfection of the room to reduce the potential for virus transmission. How much wait time is needed before disinfecting patient treatment rooms is dependent on a number of variables based on the individual practice setting.”

For more information and resources on COVID-19, visit the ADA’s Coronavirus Center at [ADA.org/virus](https://www.ada.org/virus).



By *Joni Forge, DDS*
Community Relations Chair

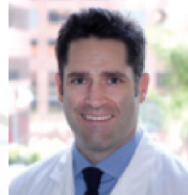
The Community Relations Committee has always been an integral part of Los Angeles Dental Society. Historically, we have participated in outreach efforts such as dental screenings, health and educational fairs. Oftentimes, our school and neighborhood screening programs expose children and adults alike to dental services for the first time. Our goal, therefore, is to promote the importance of oral health care, dental hygiene, as well as, dental visits. Now more than ever, we must continue our efforts to encourage this agenda. Despite major improvements overall, oral health disparities exist for many racial and ethnic groups, by socioeconomic status, gender, age and geographic location. Our aim is to bridge this gap through education, neighborhood programs and safe access to dental care.



By *Scott Kim, DDS*
CDA Trustee

Your CDA Board of Trustees has been especially busy this year and who would have thought the meeting held in Sacramento, March, 2020 would be our last in person meeting? The COVID-19 pandemic was a catalyst for numerous unprecedented decisions the BOT had to make over Zoom meetings. For the first time in CDA history, we canceled both the Anaheim and San Francisco CDA Presents meetings. This has resulted in significant loss of non dues revenue for our members. Both the CDA and ADA House of Delegates will be done virtual this year and perhaps even next year. Most of our staff at Sacramento have been working remotely and all the Councils and Committees have had their meetings virtual. All this while providing valuable real time virtual seminars for our members regarding PPE, PPP, EIDL, etc. Although, it's been good to see and hear peoples voices at Zoom meetings, nothing can replace the human to human interactions we have with friends and colleagues.

VOICES OF OUR COMMITTEES



By *Adam Geach, DDS*
Program Committee Chair

We hope everyone is on the path of reopening their practices during this difficult time. On a positive note, LADS has organized some great programs to help us through the rest of the year! Put these events on your calendars.

CPR Courses: Monday, November 2nd

Virtual CE Courses

On Tuesday, October 20th, Dr. Joseph Kan will be speaking on "Anterior Esthetic Reconstruction: Teeth and Implants." Dr. Kan is one of the best lecturers on this topic and you do not want to miss this!

On Tuesday, November 17th, Dr. Brett Kessler will discuss "Marijuana in the Workplace and Dental Office." This is a new and interesting topic that will cover drug-free workplace policies which can coexist with legalized marijuana.

Other Events:

The always popular Shredding Event will be held on Saturday, October 31st.

Stay posted for course details as the dates arrive.

THOUGHTS FROM OUR COMMUNITY

By Dr. Rachelle Kim, a member of the LA Dental Society

How am I a racist? This was the question I asked myself in light of the painful reminders that we live in a society where violence, modern day slavery, and segregation still exist against Black people and people of color.

Growing up as a Korean American, I was taught to study hard, get a good job, and not make any trouble. It was never instilled in me to vote or be politically active. I never mobilized for a cause and was silent on many matters, because it was too taboo to discuss. Because I didn't experience or understand the depths of the systemic racism that still continue to infiltrate our society, I believed it absolved me from any responsibility.

The truth is, racial bias exists in every domain of American life without exception. This has divided people into left wing liberals vs. right wing conservative camps and has polarized people in differing social orders. However, this movement goes beyond race, class, ideologies, and politics. This is about humanity and holding every

person accountable for holding up an unjust society, including oneself.

As I dug deeper into my own biases, privilege, and ignorance, I came face to face with some uncomfortable truths. As I educated myself on our country's history, I learned how stubbornly entrenched racism has pervaded the structures that rule and govern our citizenry. I realized I had been complacent and impassive in the oppression of Black people, and this inaction was perpetuating the plights of people of color communities.

I also examined how I could use the privileges afforded to me in my own spheres of influence by initiating difficult conversations about racism in my home and circle of friends, in the workplace, and the businesses I patron. I reached out to government officials and organizations to see if they reflected values of diversity and inclusion.

I questioned how to be a force of change as institutions and how we can collectively do more to understand the generational impact of continued

systemic racism on lifestyle and health in our communities. We can expand our reach to include disenfranchised populations by committing resources to them. By addressing implicit biases and consulting health perspectives of all races and cultures, we can increase access, quality, and quantity to care. We have the power to bring healing and uplift our most vulnerable communities by volunteering, donating, organizing, and advocating for them. It is our responsibility as health care professionals and Americans to account for the vast disparities that exist.

I implore all of us to start paying attention to inequities and getting involved, no matter what our differences are. It will take unyielding work and persistent vigilance to dismantle the structures of oppression, but I'm hopeful because the American people and our dental community are resilient and altruistic at heart. It's time to reimagine and strive for a principled society. Every voice counts in the fight for equality and justice. How will you use your voice and influence to make a difference? ■

WELCOME NEW MEMBERS

Victoria Chen, DDS
UCLA School of Dentistry,
2020

Heather Chiurazzi, DDS
UCLA School of Dentistry,
2020

Joon Choe, DDS

Ji Ni Chung, DDS
University of Pacific School
of Dentistry, 2017
Jacobi Montefiori,
General, 2019

Diane Costandi, DDS
University of Pacific School
of Dentistry, 2012
Herman Ostrow USC
School of Dentistry,
Periodontics, 2015

Esthella Flores, DDS

Joe Ha, DDS
UCLA School of Dentistry,
2012
New York Medical College
Metropolitan Hospital, Oral
and Maxillofacial, 2018

Mia Harrison, DDS
Herman Ostrow USC School
of Dentistry, 2015

Suk Li, DDS
UCSF School of Dentistry,
2020

Ellen Park, DDS
Loma Linda University
School of Dentistry, 2016

Sunyoung Park, DDS
University of Pennsylvania
School of Dentistry, 2014
Brookdale Hospital,
General Practice, 2017
Columbia University School
of Dentistry, Endodontics,
2019

Jonathan Shapiro, DDS
Harvard Dental School,
2018 VA Medical –
Sepulveda, General
Practice, 2019

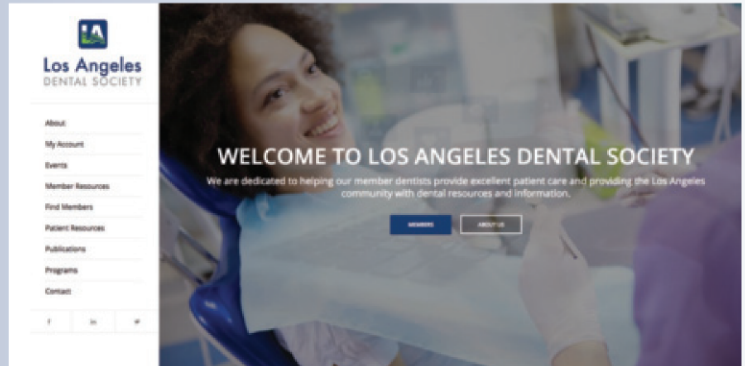
Jeemin Son, DDS
Loma Linda University
School of Dentistry, 2019

Stefan Zweig, DDS
Herman Ostrow USC
School of Dentistry, 1986
Herman Ostrow USC School
of Dentistry, Endodontics,
1992

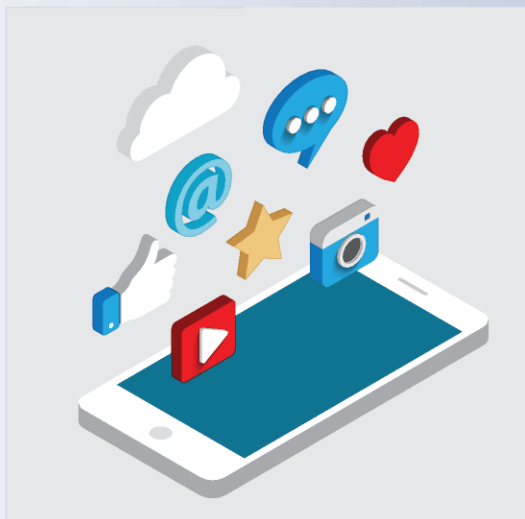
LADS NEWS



LADS will be moving to a new location! As of September 1st, the new office will be located at 3701 Wilshire Blvd, Suite #520. Our new home has a very nice work area for the staff with a spacious conference room to hold meetings, programs and classes. When you are in the area, please stop by to check it out and say hello.



We are very excited to announce that we are in the process of designing a new LADS website. We look forward to launching it in the near future. To ensure we have your current contact information which will be listed on the "Find a Dentist" section, please confirm your email address with the LADS office. In the meantime, please do not try to visit our current, out-of-date website.

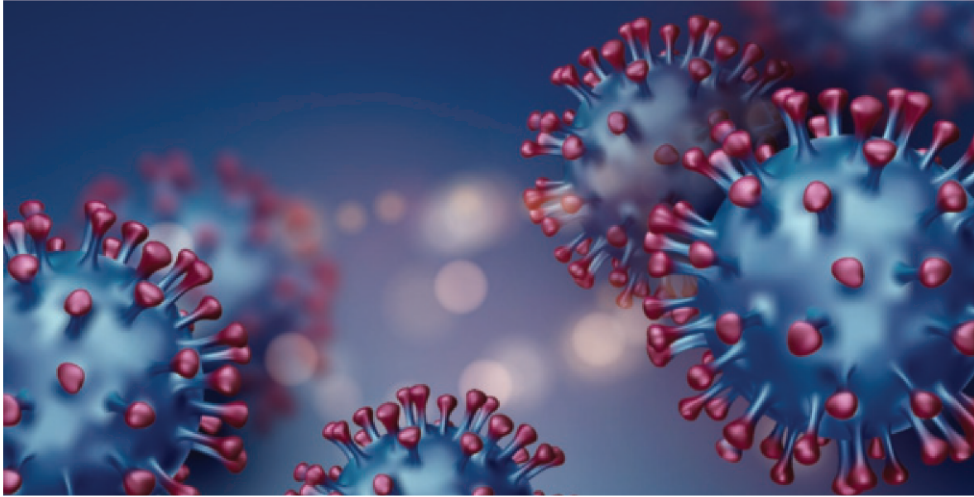


LADS is on Instagram and Facebook. Follow us @LADentalSociety and like our Facebook page, "Los Angeles Dental Society" for the latest updates on what is happening at LADS - From CE webinars to COVID updates in LA, we've got you covered. Got a quick question or want to get involved? Send us a message on social.

FACT SHEET: SMALL BUSINESS ADMINISTRATION LOANS FOR DENTISTS



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On March 27, the Senate and House passed the Coronavirus Aid, Relief and Economic Security (CARES) Act and it was signed by the President. Following passage, guidance and interim rules for this new law continue to become available. To advise dentists on the options available to them, both of our associations have been working hard to clarify the guidance and rules to assist with the economic hardship that the dental profession is facing during this crisis and beyond.

There are multiple Small Business Administration (SBA) loan options available for employers. There has been a lot of confusion about not being eligible for the new Paycheck Protection Program (PPP) loan if you already have an Economic Injury Disaster Loan (EIDL). That is not correct; you can apply for both and have both, but you cannot use the proceeds for the same purpose. You should also consult with your financial advisors to determine whether the tax credit provisions created by the CARES Act might be a better fit for your individual practice.

On June 3, the Paycheck Protection Program Flexibility Act passed Congress. This bill, which included many provisions supported by the ADA, would provide additional flexibility for PPP loans. The ADA will continue to advocate for PPP flexibility and will monitor developments as Congress develops the next COVID-19 relief package.

Below is a quick recap of the loans affected by the CARES Act and the updates provided by the Paycheck Protection Program Flexibility Act:

PAYCHECK PROTECTION PROGRAM (PPP) LOAN - SECTION 7(A) OF SBA

- This loan will be provided by SBA-approved banks. We encourage you to contact your business banker for additional information. You can search for preferred lenders here.
- Beginning April 3, small businesses and sole proprietorships were allowed to apply for PPP loans.
- These loans are provided on a first come, first served basis.
- On April 23, Congress provided an additional \$310 billion for these loans

after the initial \$349 billion was exhausted.

- For PPP loans received before June 5, the terms are: 1% interest, up to 2-year repayment, no payments until the lender makes a determination regarding forgiveness but interest will accrue; however those borrowers can negotiate with their lenders to expand the loan's maturity to up to 5 years. Any loans received after June 5 will automatically be given a 5-year repayment term.
- Further, the borrower will need to begin to make payment if they do not submit an application for forgiveness within 10 months after the forgiveness period.
- Lenders are expected to provide loan dollars to the borrower within 10 days of loan approval.
- Loan proceeds are limited to 2.5 times the average monthly payroll costs (employee wages, health insurance, PTO, retirement benefits and state or local payroll taxes assessed on compensation of employees) and do not include federal payroll taxes. This includes employee/owner compensation up to \$100,000 annually.
- There will be an amount eligible for forgiveness—this amount must be calculated and cannot exceed the sum of the payroll costs, mortgage interest, rent and certain utility payments in the 24-week period following funding.
 - Amount of loan forgiveness is contingent on you spending no less than 60% of the loan amount on payroll costs
 - Your loan forgiveness amount

FACT SHEET: SMALL BUSINESS ADMINISTRATION LOANS FOR DENTISTS

will also be reduced proportionally based on reduced number of employees by the end of the 24-week period unless you can show that:

- There are no eligible candidates available in your area for rehire to replace workers who were your employees on February 15 but chose not to return to work or;
 - You can document that your practice is unable to return to the same level of business activity due to guidelines issued by certain government agencies and due to requirements relating to sanitation, social distancing or any other worker or customer safety requirement related to COVID-19 that illustrates why a reduction in the number of employees is appropriate.
- o Employees' compensation during the covered period cannot be reduced by more than 25%.
- You can opt to choose an "Alternative Payroll Covered Period," that aligns with your payroll. Borrowers with a biweekly (or more frequent) payroll schedule may elect to begin the 24-week (168-day) period that begins on the first day of their first pay period that occurs after they receive their PPP funds.
 - You can include payroll costs that are paid or incurred during the 24-week period.
 - If you extend a rehire offer to an employee and they refuse, they will not be counted toward your full-time employees or equivalent for determining loan forgiveness. Just be sure to document the rehire offer and rejection.

o Further, if an employee refuses to return to work and is receiving unemployment benefits, you must notify your state unemployment office about the employee's refusal within 30 days.

- Independent contractor employees (1099s) are eligible for their own PPP loans and therefore, payments made to them cannot be included in any loan forgiveness for payroll for the employer/owner.
- To seek forgiveness, documentation will be provided to the lender that includes the qualified expenses during the 24-week period subsequent to receiving the loan funds.
- If you use your EIDL loan for payroll costs, you must refinance your EIDL into the PPP loan.
- You are not prohibited from obtaining both PPP and EIDL loans regardless of when you receive either loan dollars.
- If you decided to take the Employee Retention Tax Credit that was created by the CARES Act, you cannot take out a PPP loan.
- Even if you receive a PPP loan, you can defer the employer portion of the FICA payroll taxes for 2020. Any employer payroll taxes deferred through the end of 2020 must be paid 50% no later than December 31, 2021 and 50% no later than December 31, 2022.
- You must apply for forgiveness no later than ten months after the end of your 24-week covered period.
- You must apply for a loan under this program no later than June 30, 2020

ECONOMIC INJURY DISASTER LOAN (EIDL) - SECTION 7(B) OF SBA

- It is ONLY available through the SBA website.

o Please use this link to be processed for an application online: <https://www.sba.gov/page/disaster-loan-applications>

- The amount of EIDL grant money will be \$1,000 per employee with a max of \$10,000.
- This grant will not have to be repaid even if you are not approved for the EIDL loan.
- Only \$10 billion is set aside for the grant program, and the grants are to be given out first come, first served. On April 23, Congress provided an additional \$50 billion for EIDL loans and \$10 billion for the EIDL grants.
- Any forgiveness granted on a Paycheck Protection Program loan will be reduced by the amount of any EIDL grant received.
- For the EIDL loans, the terms are: 3.75% interest, up to 30-year repayment, 12 months no payments but interest will accrue.
- The credit score of the applicant is the primary factor in approval, as well as a practice's annual collections and annual expenses.
- The SBA will determine the amount of an EIDL loan, and the loan is available to pay for working capital expenses that could have been met had the disaster not occurred, including payroll and other operating expenses. However, we encourage you to use these loans for costs other than payroll if you plan on receiving a PPP loan, as described above.
- The EIDL loan cannot be used for debt retirement, capital acquisitions or tax liabilities.
- Currently the SBA has capped EIDL loans amounts at \$150,000.
- For any EIDL loan made under this program, no personal guarantee will be required on loans up to \$200,000. ■

C.E. WAIVER EXTENSION GRANTED FOR CALIFORNIA DENTISTS, RDHS, RDAS



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California-licensed dental professionals whose licenses expire in July and August now have through Dec. 1 to complete their required C.E. according to a waiver issued today by the Department of Consumer Affairs.

In late March, following CDA's advocacy efforts, the California Department of Consumer Affairs temporarily waived the license-renewal continuing education requirements for dental professionals whose licenses expire between March 31 and June 30, giving them until Sept. 30 to satisfy any waived C.E. requirements. That waiver has not been extended.

Gov. Gavin Newsom's March 4 state-of-emergency order granted the Department of Consumer Affairs the authority to waive statutory or regulatory professional licensing requirements as part of the state's response to the

COVID-19 pandemic. CDA advocated for the C.E. waiver knowing that licensees would have difficulties completing C.E. due to the cancellation

of in-person courses forced by the statewide stay-at-home mandate and social distancing requirements intended to slow the spread of the coronavirus.

The first waiver was a relief for individuals facing immediate re-licensure, but with in-person education likely restricted for months, CDA has continued to underscore the need for an additional waiver.

Licensees are still required to renew and pay for their licenses by the normal expiration date. The waivers only grant an extension to complete the required C.E.

LICENSURE EXAM WAIVER

Dental professionals who are applying for licensure in California but whose clinical examinations or graduation from RDH and RDA programs have been delayed as a result of COVID-19 now have additional time to complete the required licensing examinations.

The Department of Consumer Affairs last week approved a waiver for applicants whose applications are

deemed abandoned between March 31 and July 1 due to the applicant's failure to take the examinations. The waiver is subject to the condition that applicants take the licensing examination within two years and six months after the date the Dental Board of California received the application.

Although the waiver applies to dentists, as a result of CDA's advocacy efforts that began in March, dental school graduates in California may use passing scores on the WREB and ADEX manikin-based examinations this summer to apply for licensure in the state.

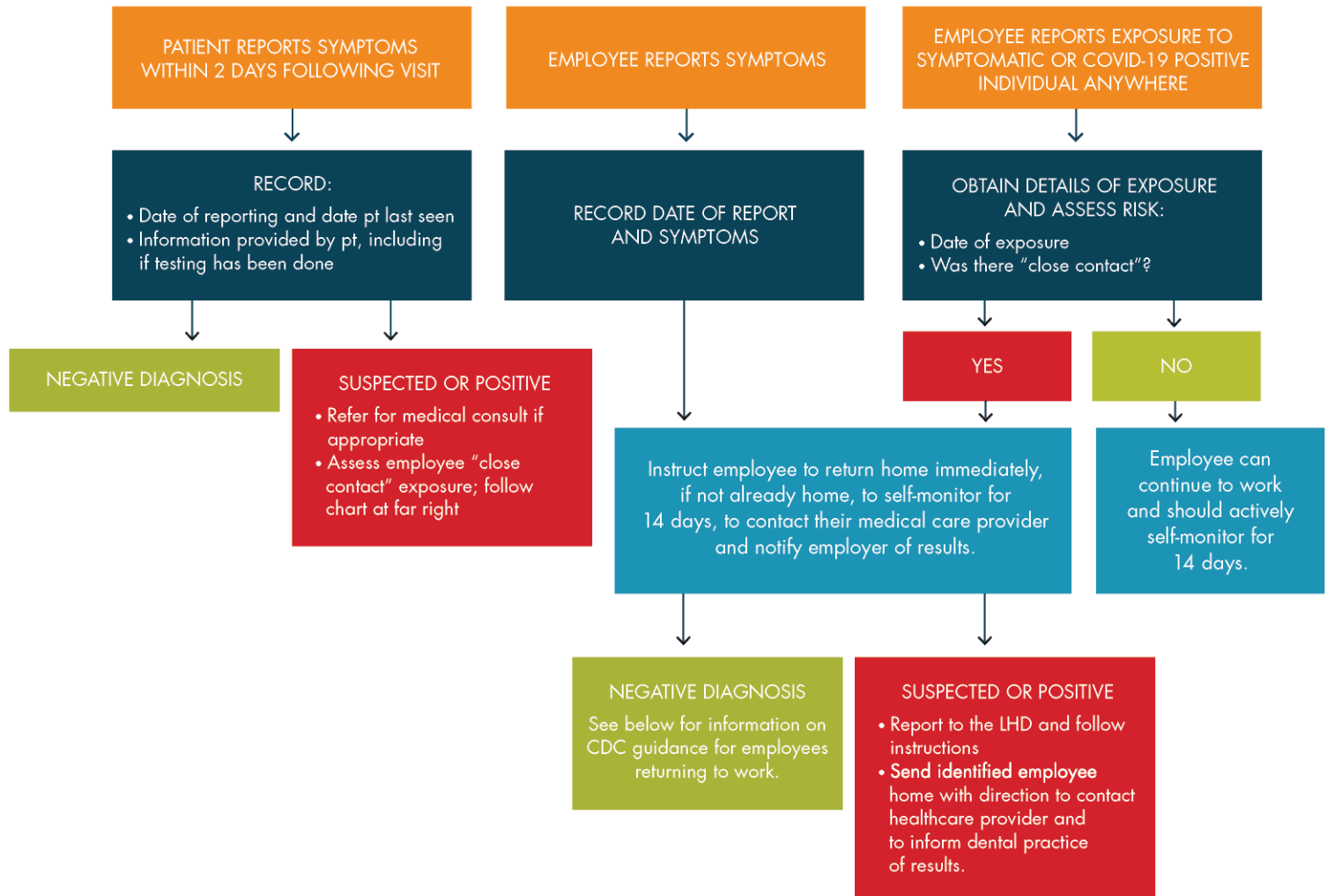
OPTIONS FOR CONTINUING EDUCATION

C.E. courses are available to dentists and their teams through CDA's online learning platform, Brightbox, including self-study courses and recordings of webinars on a range of topics. CDA members can access courses by logging in to their cda.org accounts. (Each dental staff member will need an individual account login to enroll.)

Additionally, CDA is already at work developing more innovative learning opportunities for dentists and their teams, including a virtual C.E. event to be held this fall, and will announce more details soon. ■

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Symptoms/Positive Test for COVID-19 Regulatory Reporting Requirements



Glossary of terms:

- **Close contact** – Within 6 feet of an infected or symptomatic person or within operating area; 15 min exposure without wearing PPE that is NIOSH or CDC approved (i.e. not cloth masks).
- **Screening and symptoms guidance** – [Employee Screening Form](#)
- **Contact tracing** – Identifying patients and employees in the office in contact with the infected or symptomatic patient or employee. Advise person to seek medical evaluation.
- **LHD** – local public health department



ADDITIONAL INFORMATION IF YOU HAVE AN EMPLOYEE DIAGNOSED WITH COVID-19:

Employees who are not close contacts of the employee with COVID-19 may remain working as long as they have no symptoms of the virus. Whether the dental practice remains open depends on whether it can continue to operate without the employees who are sent home.

Contact your workers comp carrier if employee reports positive diagnosis for COVID-19, and believes they contracted COVID-19 at work.

California employers must report to the nearest Cal/OSHA office any serious illness or injury, or death of an employee that occurred at work or in connection with work within eight hours of when they knew or should have known of the illness, injury or death. This includes a COVID-19 illness if it meets the definition of serious illness.

“Serious injury or illness” is defined in Title 8 Section 330(h) and includes inpatient hospitalization for a reason other than medical observation or diagnostic testing.

Eligible employees who have been advised by their health care provider to self-quarantine related to COVID-19 or are experiencing symptoms and seeking a diagnosis may be eligible for up to two weeks (80 hours, or a part-time two-week equivalent) of emergency paid sick leave under Families First Coronavirus Response Act (FFCRA). Please refer to the required notice provided by the Department of Labor for more detailed information on qualifying reasons for leave. Further, any additional COVID-19 employee policies you may wish to implement in your office should be developed in consultation with an HR professional.

Following is the CDC’s guidance on when an employee suspected or having COVID-19 may return to work:

Employers should not require sick employee to provide a negative COVID-19 test result or healthcare provider’s note to return to work. Employees with COVID-19 who have stayed home can stop home isolation and return to work when they have met one of the following sets of criteria:

OPTION 1:

If, in consultation with a healthcare provider and local public health authorities knowledgeable about locally available testing resources, it is determined an **employee will not have a test** to determine if they are still contagious, the employee can leave home and return to work after these three conditions have been met:

- The employee has had no fever for at least 72 hours (that is, 3 full days of no fever without the use medicine that reduces fevers)

AND

- respiratory symptoms have improved (for example, cough or shortness of breath have improved)

AND

- at least 10 days have passed since their symptoms first appeared



OPTION 2:

If, in consultation with a healthcare provider and local public health authorities knowledgeable about locally available testing resources, it is determined the employee will be tested to determine if the employee is still contagious, the employee can leave home after these three conditions have been met:

- The employee no longer has a fever (without the use of medicine that reduces fevers)

AND

- respiratory symptoms have improved (for example, cough or shortness of breath have improved)

AND

- they received two negative tests in a row, at least 24 hours apart. Their doctor should follow CDC guidelines.

Additionally, CDPH provides COVID-19 Workplace Outbreak Employer Guidance that includes notification and reporting requirements.

The reader should be aware this is the most current information, but may be amended in the future. ■

This guidance was updated on June 17, 2020 and complements the following CDC guidance documents:

- [Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 \(COVID-19\) in Healthcare Settings](#)
- [Framework for Healthcare Systems Providing Non-COVID-19 Clinical Care During the COVID-19 Pandemic](#)

Summary of Recent Changes

- The recommendation to wait 15 minutes after completion of clinical care and exit of each patient without suspected or confirmed COVID-19 to begin to clean and disinfect room surfaces has been removed to align with CDC [Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 \(COVID-19\) in Healthcare Settings](#).
- The time period recommended for patients to inform the dental clinic if they develop symptoms or are diagnosed with COVID-19 following a dental appointment has been changed to 2 days to align with CDC's [Healthcare Personnel with Potential Exposure Guidance](#).
- Clarifying language has been added to Engineering Controls.



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