

the cutting edge

The official member publication of the Santa Clara County Dental Society

Fall Membership Special

 **sccds**
Santa Clara County Dental Society



the cutting edge

The official member publication of the Santa Clara County Dental Society

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SCCDS MISSION AND VISION

The mission of the Santa Clara County Dental Society is to assist our member dentists with their practice needs and to improve the oral health of our community. Our vision is to be the leader in providing innovative valuable services to our dentist members and in working to improve the oral health of the community we serve.

POLICIES

Editorial Content: It is the policy of SCCDS to accept articles in its magazine and website as vehicles for the fair sharing of information and opinion germane to and effective and useful for members in their practices. Members and vendors may submit articles. The Editor and Executive Director are authorized to reject an article if it is inappropriate, unnecessarily controversial, written in poor taste, self-promoting or inaccurate. Articles deemed questionable by our Editor and/or Executive Director may be reviewed by the Communications Committee and voted on, with a majority ruling. An author whose article has been rejected may assert their option to present to our Board of Directors for review and a final decision. Opinions published in The Cutting Edge shall be labeled as such and only represent the opinion of the author. SCCDS does not condone, reject, endorse or support published opinions. Members and vendors may author only one article per issue and no more than four in a year. Exceptions are members of the Communications Committee, the Executive Committee and committee chairs. Legislative articles must be reviewed by the Santa Clara County Members Political Action Committee and submitted by that committee chair. The article must be educational without taking a position. Photos must be originals taken and submitted by the author. If there is no provenance for the photo, permission must be received from the photographer or the photo will not be used. Staff and the Editor reserve the right to edit an article for grammatical and spelling errors, sentence or paragraph construction and length, remembering the goal of maintaining the message and tenor of the article.

Advertising Content: It is the policy of SCCDS to accept advertising in its printed publications and website as a service to members to inform them about services, opportunities and products germane to and effective and useful in their practices. Such advertising must be factual, dignified and adhere to the ethical guidelines for advertising established by the ADA Principles of Ethics and Code of Professional Conduct, the CDA and the advertising guidelines of the Dental Board of California. Advertising must be related to dentistry or provide a service or benefit to members. All advertisements submitted are subject to review by the Editor, Executive Director, or President. SCCDS reserves the right to accept or reject advertising for non-adherence to the Code or this policy. Such decisions will be non-discriminatory with regard to gender, religion, age, race or ethnicity.

Anti-discrimination: The Santa Clara County Dental Society is made up of members of diverse backgrounds and orientations. We are proud of our long tradition of mutual professional respect, tolerance and equality. We will always support our members and the communities we serve regardless of their race, country of origin, age, gender, religious background or sexual orientation. SCCDS is committed to fighting racism in all its forms. We are speaking out against all forms of violence, discrimination, xenophobia, racism, hate and harassment. We welcome dentists from all backgrounds as members and to be active in our association.



SCCDS - 1485 Park Ave., San Jose, California 95126
408.289.1480 | info@sccds.org | sccds.org

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SCCDS 3rd Annual GALA

Join us for an intriguing night of mystery and glamour.
Featuring a sumptuous dinner, circus performances, and the
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JANUARY 25, 2026

6:00 PM

The GlassHouse,
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SCCDS GENERAL MEMBERSHIP MEETINGS

2025/2026 Speakers



October 9: "Management of the Edentulous Ridge: Treatment Strategies for the Atrophic Ridge Reconstruction" with Gian Pietro Schincaglia, DDS, PhD



November 11: "Insights into Artificial Intelligence in Dentistry" with Balazs Feher, DMD, PhD



February 12, 2026: "Early Management Solutions for Challenging Dental Anomalies: Short Root, Transposition, and Multiple Missing Teeth" with Heesoo Oh DDS, MSD, PhD



March 12, 2026: "Composites/TBA" with Patrick Roetzer, DDS



April 9, 2026: "My 3D Digital Journey: 3D Printing and Practice Improvement" with Jenny Apekian, DDS



May 14, 2026: TBD



September 10: "Minimally Invasive Rehabilitation: A Healthier, Less Costly and More Predictable Approach" with Jose Luis Ruiz, DDS



Fees:

Non-CDA member DDS: \$90; Non-DDS: \$55;
Life & Retired Members: In person - \$25/Online - Free

In-Person Attendance

SCCDS General Membership Meetings are prepaid for all current members. Hybrid meetings take place at the SCCDS office (1485 Park Ave., San Jose) and online via Zoom. In-person attendance is limited to the first 60 registrants. Please allow time for check-in and parking. In-person attendees enjoy cocktail hour, dinner, and a bonus Q&A session as a member benefit. Advance registration is required—register at sccds.org or call 408-289-1480 by the Tuesday before the meeting.

Online Attendance

Online events are hosted on Zoom, with a unique access link sent 24 hours before the event. If you don't receive the email, check your spam folder before contacting our office. The email will come from Zoom, not SCCDS. We recommend updating Zoom to the latest version and using a wired internet connection for the best experience. SCCDS is not responsible for technical issues related to Zoom, internet speed, or video quality. Online session starts at 6:30 PM. To receive CE credit, you must log in at the start time and stay for the entire program.

Continuing Education

These courses provide 2 units of Category 1 Continuing Education approved by the Dental Board of California.

Keyword verification is required for CE credit.



Register now at sccds.org



The Value of Belonging: A Welcome to New Members

by Hieu Dang, DDS
2025 SCCDS President



As you join or renew your membership with the Santa Clara County Dental Society (SCCDS), I want to personally welcome you. Membership in organized dentistry is more than a formality. It is a commitment to being part of a thriving professional community.

I have had the privilege of serving as the 2025 President of SCCDS, and during this time, I have seen first-hand how membership strengthens not only our profession but also the individual lives of our members. Allow me to share what makes this community so valuable.

More Than Dues: The True Meaning of Membership

When we speak of membership, it is not about a card in your wallet or a line in your budget. It is about belonging to something greater than yourself.

Through SCCDS, we:

- ♦ Advocate for policies that protect both patients and providers
- ♦ Support evidence-based care and ensure science and ethics remain at the forefront.
- ♦ Expand access to oral health through community programs.
- ♦ Create opportunities for connection such as study clubs, social events, volunteer work, and leadership pathways.

Dentistry can often feel isolating. Our days move from operator to operator, with little time to connect deeply with colleagues. That is why membership matters. It provides a home base where you can find mentors, colleagues, and friends who understand your challenges and share in your successes.

Building Resilience Through Relationships

It's no secret that dentistry is demanding. Burnout, stress, and professional isolation are very real risks. But research, and lived experience, shows that relationships are one of the strongest protective factors we have. When you show up at a study club, a networking mixer, or a volunteer event, you're not just ticking a box. You're investing in your own resilience. You're building connections that remind you you're not alone. You're creating a circle of peers who understand your challenges, share your joys, and look to you for the same support. That kind of community isn't a luxury and it isn't optional. It's basic wellness. It's how we protect our mental health and ensure our profession remains not only viable but joyful.

People First, Always

Speaking of community, ours is truly remarkable. Santa Clara County is an amazing place to practice dentistry. We're all very fortunate to serve a community known world-wide for creativity, innovation and technology.

As Silicon Valley dentists, we understand that new technologies like AI diagnostics, digital scanners, 3D printing, and novel biomaterials arrive at dizzying speed. Techniques are refined and developed at an almost exponential pace. Each week brings announcements that could reshape the way we practice. We celebrate our unique cultural connection to technology and innovation every year at the Bay Area Dental Expo.

But, no matter how much technology assists us, or how the science advances, the basic goal remains the same: helping the people who rely on us. Our patients rely on us to be thoughtful stewards of these advances. They need us to know what truly improves health outcomes versus what is just hype

That discernment comes not from one dentist alone, but from the collective wisdom of a profession that works together, shares knowledge, and keeps science and ethics at the forefront. Our colleagues rely on us too. Whether it's to troubleshoot a tricky case, share advice about running a practice, or simply exchange encouragement during a long week, our strength is multiplied when we connect with one another through the dental society.

Shaping the Future Together

Change is constant in dentistry. New regulations, evolving insurance structures, and shifting patient expectations are part of our every day life. But when we act together, we can shape those changes rather than simply react to them. Organized dentistry gives us a unified voice. It ensures that decisions made in Sacramento, Washington, D.C., or even within our own local communities reflect the realities of practice and the needs of our patients. It helps us build a future where oral health care is more accessible, more effective, and more equitable.

That kind of progress doesn't happen in silos. It takes all of us informing one another, supporting one another, and engaging together. Your membership supports that future.

Your Place in the Story

SCCDS is one of the largest, most active dental societies in California. That scale is both a strength and an opportunity. With so many members, it can be easy to step back and let others lead but our society is strongest when everyone takes part.

Whether you serve on a committee, mentor a student, volunteer at a community event, or simply bring a colleague to their first SCCDS program, you play a vital role in our story. Every action strengthens our community.

This Membership Special issue

of The Cutting Edge magazine is designed to help you explore the many benefits and opportunities available to you. I encourage you to dive in, stay connected, and find your place within SCCDS.

Organized dentistry is not just an institution—it is a living community. Together, we are writing the next chapter of oral health in Santa Clara County. I am honored to welcome you into it. 🌈

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6:30PM - 8:30PM

REGISTRATION 5:00PM

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news & notes

Bay Area Dental Expo Breaks Records

The Bay Area Dental Expo has once again proven itself as the region's premier dental gathering, with 2025 marking our most successful year yet.

By the Numbers

- 1,284 tickets sold – a 56% increase over 2024
- 1,103 actual attendees – an 80% increase over last year
- 104 booths sold – a 23% increase, with sponsor booths fully sold out
- 26 of 32 Bay Area dental societies represented

These results highlight the Expo's ability to bring together every corner of the dental profession all under one roof.

What Attendees Said

"Great to see the expo improving with more exhibitors, food options and compliance classes."

"The event was bigger and more people this year. Very great vibe throughout the entire event."

"The expo was wonderful. Thank you so much for making such a wonderful convention. The breakfast was also great!"

A Bright Future Ahead

The team at SCCDS is committed to improving the Expo experience every year, taking your feedback into account, both positive and negative. This year's event shows what we can achieve when members, sponsors, teams and staff innovate together. With your help, the Expo will continue to strengthen its position as a must-attend event for learning, networking, and celebrating the future of dentistry.




SAVE THE DATE: AUGUST 21 and 22, 2026

Welcome to our Newest SCCDS Members


- ✦ Autria Aidun DDS
- ✦ Lucreatia Berozsky DMD
- ✦ Ilbert Bourang DMD
- ✦ Ca Cao DDS
- ✦ Priya Chandnani DDS
- ✦ Jocelyn Chen DDS
- ✦ Kevin Chen DDS
- ✦ Stephanie Cheng DDS
- ✦ Fauzia Dadarkar DDS
- ✦ Peter Dang DDS
- ✦ Trang Duong DMD
- ✦ Dominique Duong DDS
- ✦ Jonathan Ha DDS
- ✦ Scott Hirose DDS
- ✦ Salvia Javidan DDS
- ✦ Fatima Kamara DDS
- ✦ Ja Young Kim DDS
- ✦ Dheeraj Koli DDS
- ✦ Jasmine Kuo DDS
- ✦ Taylor Lam DDS
- ✦ Angela Lee DMD
- ✦ Casey Lee DDS, MD
- ✦ Jingqi Li DDS
- ✦ Nelia Moezizi DDS
- ✦ Krissia Delmy Morales DDS
- ✦ Behnaz Almasi Naghash DMD
- ✦ Pragati Nahar DDS
- ✦ Austin Nguyen DMD
- ✦ Tianna Pham DDS
- ✦ Divya Rallabandi DDS
- ✦ Amruta Sardeshpande DDS
- ✦ Sebastian Tran DMD
- ✦ Adriane Tran DDS
- ✦ Amol Upadhyay DDS
- ✦ Dorina Youhana DDS
- ✦ Giannina Yu DDS
- ✦ Ryan Zarrabian DDS



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Congratulations to our Retirees

David DeLong DDS is retiring after 38 years in the dental profession. Dr. DeLong has been a member with SCCDS since 1990, generously sponsoring the transition to the new Society office building and assisting in planning past iterations of the SCCDF Golf Tournament.

Kruti Shah BDS announced her retirement after 35 years of dentistry. She was an active SCCDS member for 24 years, supporting our Study Club and the Wellness Committee.

William Watkins DDS retires after 42 years in the dental profession and 38 years as a member of SCCDS, generously sponsoring the Society office building.

In Memoriam



Raymond Huang, DMD

We are saddened to announce the passing of Dr. Raymond S. Huang. A San Jose native, Dr. Huang completed his undergraduate degree at UCLA and received his DMD from Tufts University School of Dental Medicine in 1981. In 1982, Dr. Huang returned to San Jose, becoming a member of the SCCDS where he remained active for 43 years. Outside of dentistry, Dr. Huang was an avid local sports and golf fan. He will be fondly remembered by the many lives he impacted and the community to which he dedicated his work.



James V. Keller DDS

It was with great sorrow that we recently became aware of the passing of Dr. James V. Keller in August of 2024. Dr. Keller earned his DDS from Temple University School of Dentistry in 1963 before moving to San Diego to serve as a lieutenant at Naval Air Station Miramar. In 1966, Dr. Keller and his family relocated to San Jose, where he joined SCCDS and built a thriving practice for over 58 years. A devoted Catholic and Lion's Club member, Dr. Keller enjoyed many hobbies but treasured his time with family above all else. He has left an indelible mark on all who knew him and will be remembered for his generous and caring spirit.



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November 9th, 9am-4pm



SCCDS Office



Free for Members and Guests



Breakfast and Lunch Provided

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First 20 members to arrive will receive a special door prize!

AGENDA

- 9am** **Morning Mingle**
*Continental Breakfast & Networking
Provided by: Legally Mine*
- 10am** **Safeguarding Wealth: Lawsuit Prevention & Tax Strategies**
- 11am** **The 3 Pillars of Financial Resilience for Dentists**
- 12pm** **What the "One Big Beautiful Bill Act" Means for Your Dental Practice**
- 1pm** **Lunch**
- 2pm** **Planning for Retirement in a time of Tariffs, Inflation, Economic & Political Uncertainty**
- 3pm** **Leading Through Change: 3 Powerful Ways to Grow Your Practice in Any Economy**

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at the San Jose Country Club



October 27, 2025

From 5:00 PM - 8:00 PM

Country Club Attire is requested.

All are welcome to attend!

Join us for a memorable evening at the newly renovated San Jose Country Club, where we'll come together in support of our Dental Foundation's mission. Enjoy live music, a delicious dinner, signature cocktails, and stunning sunset views, all while bidding on exciting items in our Silent Auction.

Whether you're part of the dental community or just looking for a great night out, everyone is welcome!

Golfers receive a complimentary dinner ticket with their tournament registration.

Let's raise a glass to better oral health, stronger communities, and a night to remember.



Tickets: \$100

Includes a delicious dinner, cocktails, live music, an exciting raffle and silent auction

TICKETS:



Proceeds benefit the initiatives of the Santa Clara County Dental Foundation. The Santa Clara County Dental Foundation is a 501 (C) 3 public charity, EIN 20-2396440.



Visit sccdf.com/2025-evening-gala/ for more information

5 MEMBER PERKS

YOU SHOULD START USING TODAY

When you joined SCCDS, you unlocked a powerful network of support, resources, and opportunities that will make your career (and your life) a whole lot easier. Think of it as your all-access pass to professional growth, community, and experiences that remind you why you chose dentistry in the first place. Here are the top five benefits you can tap into right now.



1 QUICK ANSWERS WHEN YOU NEED THEM

Running a practice comes with a million questions: compliance updates, regulatory changes, practice management tips - you name it. Instead of spending hours digging online, you can call or email SCCDS and get real answers from people who know dentistry inside and out. Fast. Friendly. Reliable.



Megan Duncan - megand@sccds.org
Ask me about membership, compliance and our beautiful office



Katie Lam - katiel@sccds.org
Ask me about payments, refunds or anything financial



Aliya Joy - aliyaj@sccds.org
Ask me about SCCDS Events and programs



Erich Larsen - erichl@sccds.org
Ask me about SCCDS Operations, Communications, and technology



Shadi Kanaan - shadik@sccds.org
Ask me about SCCDS governance, policies, sponsorship and more

2 FREE CE? YES, PLEASE!

Nobody gets excited about compliance training but every dentist has to do it. The good news? As an SCCDS member, you don't have to pay out of pocket for two of the required courses: **Workplace Violence Prevention** and **Harassment Prevention**. That's money saved and fewer hoops to jump through. Starting in 2026, we'll be adding **Mandatory Opioid Training, Annual HIPAA Training** and **CalOSHA Compliance Training** courses to the free lineup. That's a \$310 value, by the way. Now, you'll be able to check off more of your compliance courses for free and spend less of your budget on the boring stuff. You're welcome!



2 MONTHLY MEETINGS YOUR WAY

Membership includes 7 General Membership Meetings (GMMs) a year, most with 2 CE units. Plus, these aren't boring lectures. You'll learn from world-class speakers about cutting edge topics. PRO TIP: Show up in person to get catered dinners, extra Q&A, and a chance to catch up with friends. Education + networking + good food = win-win. You can attend over Zoom, too.



SWAG BAG GAME: ON POINT

4 LEVEL UP YOUR NETWORK

Events, committees, and leadership opportunities give you a chance to connect in ways that make your career more rewarding and way less isolating. At SCCDS, you'll meet colleagues at every stage of their careers, from new grads to seasoned dentists. You'll swap ideas, build friendships, and maybe even find a mentor (or become one yourself). Dentistry is better when you've got a community around you that understands what you do every day. Learn more about committees on page 22.

5 STAY IN THE LOOP WITH THE CUTTING EDGE

Every first Friday of the month, SCCDS drops the Cutting Edge straight into your inbox. This is your go-to update on everything that matters: upcoming events, volunteer opportunities, practice listings, sponsor spotlights, and the latest news in dentistry. Quick, easy, and always relevant, it's the fastest way to stay connected and never miss an opportunity. Make sure to add us to your safe senders so our emails don't go into your junk folder! Scan the QR code to learn how.

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Retirement seen through your eyes

How do you picture your future? Some see retirement as a time to start a new career. Others see it as a time to travel. Still others plan to spend more time with family and friends. With that in mind, here are some things to consider.

What do you absolutely need to accomplish? If you could only get four or five things done in retirement, what would they be? Answering this question might lead you to compile a “short list” of life goals, and while they may have nothing to do with money, the financial decisions you make may be integral to pursuing them.

What would revitalize you? Some people retire with no particular goals at all. After weeks or months of respite, ambition may return. They start to think about what pursuits or adventures they could embark on to make these years special. Others have known for decades what dreams they will follow ... and yet, when the time to follow them arrives, those dreams may unfold differently than anticipated and may even be supplanted by new ones. In retirement, time is really your most valuable asset. With more free time and opportunity for reflection, you might find your old dreams giving way to new ones.

Who should you share your time with? Here is another profound choice you get to make in retirement. The quick answer to this question for many retirees would be “family.” Today, we have nuclear families, blended families, extended families; some people think of their friends or their employees as family.

How much do you anticipate spending? We can’t control all retirement expenses, but we can manage some of them. The thought of downsizing your home may have crossed your mind. One benefit of downsizing is that it can potentially lead to no mortgage or a more manageable mortgage payment.

Could you leave a legacy? Many of us would like to give our kids or grandkids a good start in life, but leaving an inheritance can be trickier than many realize. Tax laws are constantly changing, and the strategies that worked years ago may have more limited benefits today.

Keep in mind this article is for informational purposes only and is not a replacement for real-life advice, so make sure to consult your tax or legal professional before modifying any part of your overall estate strategy. How are you preparing for retirement? This is the most important question of all. If you feel you need to prepare more for the future or reexamine your existing strategy in light of recent changes in your life, conferring with a financial professional experienced in retirement approaches may offer some guidance.



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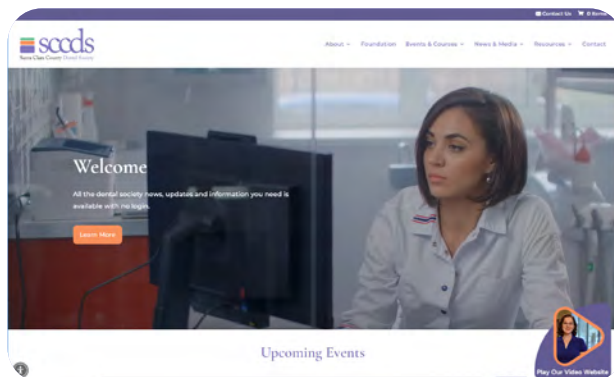
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WHY IT MATTERS

By spreading services across these three platforms, SCCDS makes sure your online experience is smooth and dependable. Whether you're checking news, signing up for an event, or leveling up your skills, your digital toolkit is built to keep you moving forward. If you have any trouble, you can always reach out to us at info@sccds.org or through the contact pages on any of our sites.

Find Your Fit: Join an SCCDS Committee

by SCCDS Staff



Committees are where the magic happens. They're not just about meetings—they're about connecting, creating, and putting your skills to work in ways that actually matter. Whether you're into planning events, giving back, or just want to meet more people in the dental community, there's a spot for you.

Why join? Because you'll:

- ♦ Meet awesome people (networking without the awkwardness)
- ♦ Build your personal + professional skills
- ♦ Get the inside scoop on SCCDS events and CE courses
- ♦ Make a difference in the community
- ♦ Have a say in shaping the future of your Society

Here's the lineup. Pick your vibe:

- ♦ Communications: Amp up our voice, sharpen our image, and help us shine online, in print, and in the community.
- ♦ Community Services: Roll up your sleeves and bring better oral health programs to the people who need them most.
- ♦ Continuing Education: Be the one who helps book incredible speakers and keeps our CE fresh.
- ♦ Leadership Development: Scout out new leaders, set up trainings, and build the next wave of SCCDS leadership.
- ♦ Membership: Welcome new faces, create fun mixers, and keep our membership strong.
- ♦ PAC/Legislative: Step into advocacy and help push policies that matter to dentistry in California and beyond.

Joining a committee isn't just "volunteering." It's how you stand out, get noticed, and level up as a leader. You'll also see firsthand how a big dental society runs, learning about everything from ethics to budgets to bylaws (but don't worry, there's fun stuff too).

And the perks are worth it. Committees are networking goldmines, featuring free food at meetings, and fun committee-specific hangouts that feel more like mini-parties than work. You'll also get VIP-style sneak peeks at upcoming events and perks before anyone else, plus shout-outs, awards, and a little prestige (yep, bragging rights included).

Bottom line? You get to grow, lead, and actually enjoy yourself while making a difference. So, what are you waiting for? Find your fit and join an SCCDS committee today. 🌈

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Not Just a Dentist: A New Grad's Journey Into Oral Health Leadership and Dentistry's Hidden Frontiers

by Pedrom Mashaw,
DDS



Entering dental school, I pictured myself graduating and doing smile makeovers, holding a handpiece daily, and one day owning a thriving private practice. I never imagined I'd be scrubbed into an operating room, treating medically complex patients under general anesthesia shoulder-to-shoulder with Otolaryngologists, Oncologists, Microvascular surgeons, Plastic surgeons, Cardiothoracic teams, Anesthesiologists, and many other medical specialists. I didn't expect to walk into nursing homes to care for our aging adults or to sit on a hospital task force with a team of nurses, physicians, and speech language pathologists helping develop an oral care protocol to prevent hospital-acquired pneumonia. I certainly didn't expect to be teaching so soon—yet that's where this journey has taken me.

In just a few short years from graduating dental school, completing a GPR and Hospital Dentistry Fellowship, I've practiced in elegant private practices, hospital emergency rooms and ORs, skilled nursing facilities, private homes, and academic halls. My days have ranged from routine exams, fillings, and crowns to critical care consults, extractions, as well as teaching and consulting. Along the way, I've discovered something far more important than any procedure: the full scope and power of our dental degree.

To the new or soon-to-be dental graduate, I want to say this: you don't have to specialize to do special things. Your degree is more versatile than you may realize. Hospital dentistry, OR cases, teaching, public health consulting, advocacy, community outreach, even interdisciplinary collaboration with medicine—these are not out-of-reach goals. They are very real, often underserved paths where dentists are deeply needed.

What opened these doors for me was a willingness to say "yes" to unfamiliar opportunities and a passion for seeing oral health as part of something bigger. Through hospital work, I saw firsthand how many of our medical colleagues have little to no training in oral health—despite working with patients whose outcomes are directly affected by it. While institutions increasingly recognize the importance of oral care, few have the knowledge or resources to act on it—and even fewer dentists are stepping into those roles.

At Stanford Hospital, I had the opportunity to consult on developing oral care protocols as part of an interdisciplinary effort to prevent complications like ventilator-associated pneumonia (VAP) in the ICU. I now teach part-time at my alma mater, University of the Pacific, Arthur A. Dugoni School of Dentistry, which allows me to not only give

back but help shape the future of our profession by preparing students to think beyond the operator. Every time I care for a patient in a skilled nursing facility or discuss oral-systemic health with medical colleagues, I'm reminded that dentistry has no ceiling—only the ones we accept.

To my more experienced colleagues reading this: your work and wisdom have laid the foundation for all of us. But I also believe your legacy can grow even deeper. Your knowledge is needed not just at the chairside, but in classrooms, community initiatives, hospital committees, research teams, and leadership roles. Teaching one day a week, mentoring a younger colleague, helping shape oral health policy—

these are not career changes, they're extensions of your existing impact. What if retirement didn't mean stepping away, but stepping forward in a different way? What if we all began to ask, "What else can my dental degree do?"

The truth is, dentistry today needs both bold new energy and seasoned guidance. Our profession sits at a crossroads with broader healthcare, and we have the power—and the responsibility—to lead. Whether it's preventing aspiration pneumonia in hospitals, integrating oral care into special care facilities, or educating the next wave of dentists, we all have a part to play.

Let this be an invitation—to explore,

to mentor, to push the boundaries of what it means to be a dentist, an oral physician, and an oral healthcare leader. I don't have all the answers, but I've found immense purpose in walking paths I didn't even know existed when I received my diploma. I've found immense fulfillment in stepping into spaces where oral healthcare is often overlooked. As a mentor once told me, "There are gaps in society that few people want to fill. Fill one of those and you have truly reaped the value of your education."

So, whether you're just beginning your career or decades in, I ask you to reflect: What else can your dental degree do? 🌈



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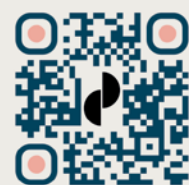
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Baby Bottles: The Good, The Bad, The Ugly

by Randy Ligh, DDS, MA,
FAAC, CLEC, Diplomate,
American Board of
Pediatric Dentistry



As dentists the public entrusts us with the responsibility of providing them with information to protect, guide and ensure that their growth and development, maturation and overall oral health is optimal. We are considered the guardians or gate keepers of the oral cavity. As such, you may occasionally be posed with this question from a parent: What is a good bottle system to use to feed my newborn or infant?

You may or may not have this information. Dental schools and residencies often **do not** have this vital information in their curriculum. This article will provide you with the necessary information to guide the parent in their quest for knowledge. Websites and references in the literature will also be discussed. Precautionary insight into marketing hype will be alluded to.

National organizations such as the **American Academy of Pediatric Dentistry**, the **American Academy of Pediatrics**, and the **American Academy of Breastfeeding Medicine** have policy statements or guidelines that we, as dentists, should be aware of.

- **American Academy Of Pediatric Dentistry Oral Health Policies/ Best Practices Perinatal and Infant Oral Health Care:** Early childhood caries (ECC), formerly referred to as nursing bottle caries and baby bottle tooth decay, remains a significant chronic disease of childhood and public health problem. To decrease the risk of developing ECC, the AAPD encourages eliminating baby bottle and breastfeeding beyond 12 months, especially if frequent and nocturnal. Information should be provided regarding nonnutritive habits, that if prolonged may result in flaring of the maxillary incisor teeth, [and/or] an open bite and posterior crossbite.
- **American Academy Of Pediatrics Policy on Baby Bottles:** The AAP recommends that children stop using bottles by 15 months of age at the latest. Bottle feeding for longer than that can cause children to skip meals and miss out on the nutrients found in solid foods. Obesity and maintaining appropriate BMI was also mentioned
- **Academy Of Breastfeeding Medicine Position on Breastfeeding:** Optimal infant and young child feeding includes immediate and continued skin-to-skin contact, early initiation of baby-led breastfeeding (within 1 hour of birth), exclusive breastfeeding

for at least 1 and up to 2 years or longer, with age-appropriate complementary feeding. This is in accord with the World Health Organization (WHO)/UNICEF's description of optimal feeding.

Baby's Needs and Preferences

When helping parents select a bottle, it's important to first think about the baby's unique needs and feeding behaviors. These factors will guide the decision and ensure that the chosen system supports both comfort and healthy oral development.

Product Considerations

- ✦ Material
- ✦ Nipple type/shape/flow
- ✦ Size and Shape (slope/length)
- ✦ Specialty Nipples
- ✦ Anti-Colic Features
- ✦ Ease of Cleaning
- ✦ Compatibility with Breastfeeding\
- ✦ Price and Brand

Poorly Designed Products

Just as important as knowing what to look for, is knowing what to avoid. Some bottle features can create unnecessary feeding challenges, hygiene concerns, or even health risks for infants.

- ✦ Hard to clean components: An excessive number of small parts and intricate designs create a challenge to clean everything thoroughly
- ✦ Inadequate venting systems:

Inadequate venting can cause the baby to swallow air (aerophagia) leading to gas, reflux, colic and discomfort

- ✦ Unstable base: A narrow or unstable base results in a greater likelihood of the bottle tipping over.
- ✦ Non-ergonomic shape: Feeding can be more challenging if the bottle is difficult to hold or uncomfortable for either the baby or the parent.
- ✦ Poor nipple design: Nipples should neither be too soft nor too hard and be shaped in a way that mimic mother's nipple to prevent "nipple confusion."
- ✦ Inconsistent flow: A consistent flow rate is necessary so that feeding is not disrupted or is frustrating for the baby. The proper flow rate needs to be determined for each baby.
- ✦ Heavy Weight: As babies mature and start to self-feed the weight of the bottle can be difficult for them to hold.
- ✦ Opaque material: The lack of transparency of the bottle can make it difficult to see how much milk is left resulting in a lack of control in the amount baby is eating.
- ✦ Chemical exposure (BPA): Bottles made from materials with BPA are unsafe.
- ✦ Individual circumstances that dictate specific needs for a bottle system

Determination needs to be made if the bottle is being used as a "compensation" or an "intervention".

Examples of circumstances indicating a compensation include:

- ✦ Baby may be premature and/or low tone,
- ✦ There may be the presence of unresolved tethered oral tissues but expected changes allow the bottle to provide temporary feeding support.

Examples of circumstances indicating an intervention may include:

- ✦ Baby has poor weight gain (failure to thrive)
- ✦ Mother's milk supply is reduced/inadequate
- ✦ Mother might be returning back to work.

Transitioning From Breast To Bottle

This bottle system should be a "copy" or "twin" to mother's breast to ease the transition for baby.

Possible choices:

- ✦ Nanobebe Breastmilk Bottle
- ✦ Dr. Brown's Options
- ✦ Comotomo
- ✦ Philips Avent Natural

Transitioning From Bottle Back To Breast

This bottle system should guide behaviors in breastfeeding such as a proper latch, strong sucking and slower milk flow.

Possible choices:

- Lansinoh Momma Bottle
- Medela Calma
- Nanobebe Breastmilk Bottle
- Comotomo
- Evenflo Balance
- Tommee Tippee Closer to Nature

High-Arched Palate

A high-arched palate makes it difficult for the baby to create a proper suction on the nipple. A bottle system with a shorter or flatter bottle teat may be helpful.

- Philips Avent Natural Baby Bottle
- Dr. Brown's Original Bottle
- Comotomo
- Tommee Tippee Closer to Nature Bottle
- Simply Natural Baby Bottle

Pre-Term/Low-Tone Baby

The appropriate bottle system should address possible hypotonia and immature suck/swallow/breathe synchronicity. Flow rate is also important.

- Dr. Brown's Optum
- MAM Easy Start Anti-Colic
- Philips Avent Natural Baby Bottle
- Comotomo
- Medela Special Needs

High-Tone Aggressive / Active Baby


This type of presentation may demonstrate a tight jaw, clamping, an uncoordinated suck/swallow/breathe and low weight gain. The appropriate bottle system might provide a slower flow rate to allow the baby to slow

down and control their suck/swallow/breathe coordination. Anti-colic bottles designed to reduce air intake can alleviate the discomfort and resultant fussiness often caused by gassiness and/or reflux.

- Dr. Brown's Natural Flow Bottle
- Philips Avent Natural Bottle
- Comotomo
- Tommee Tippee Closer to Nature
- MAM Easy Start Anti-Colic

Flow Rates





As an infant advances and matures in their feeding skills an infant-driven progression in nipple flow rate should be followed to custom fit an infant's feeding needs. Flow rate vary from 4.92 ml/min to 7.32 ml/min to 9.88 ml/min to 13.31 ml/min. (see below)




Nipple Flow Rate Guide for Medical Professionals

Dr. Brown's® Nipples, when used in conjunction with the Dr. Brown's® Zero-Resistance™ Bottle Systems, provide reliable and consistent nipple flow rates to custom-fit an infant's feeding needs. Use this guide to help support clinical decisions.

Nipple Flow Rate Guide for Medical Professionals

 Flow rate: 4.92 mL/min*	 Flow rate: 7.22 mL/min*	 Flow rate: 9.88 mL/min*	 Flow rate: 13.31 mL/min*
Ultra-Preemie™ Nipple <ul style="list-style-type: none"> • Excellent first choice for very premature or fragile infants. • Appropriate for use when infant shows stress signals with the Preemie Flow™ nipple. 	Preemie Flow™ Nipple <ul style="list-style-type: none"> • Frequently used for first oral feeding for premature infants or when infant shows stress signals while feeding with faster flow nipple level. • Good choice for supplemental bottle feedings for infants feeding at the breast. 	Level T Nipple <ul style="list-style-type: none"> • Excellent choice for infants transitioning from Preemie Flow™ Nipple. • Useful for late preterm or full-term infants. • Another good choice for supplemental bottle feedings for infants feeding at the breast. 	Level 1 Nipple <ul style="list-style-type: none"> • For more mature infant demonstrating consistent, efficient feeding skills. • If considering for use with infant that is breastfeeding, please consult with a lactation consultant or feeding specialist.
Available in Narrow Only	Available in Narrow and Wide-Neck	Available in Narrow Only	Available in Narrow and Wide-Neck


Internal Vent System is ESSENTIAL to maximize nipple performance.

*Pados, B. Milk flow rates from bottle nipples: What we know and why it matters. *Nursing for Women's Health*. 2021;25(3):229-235. <https://doi.org/10.1016/j.nwh.2021.03.006>

Bottle Alternatives

There are several clinical and practical reasons why a parent or provider might choose alternatives to baby bottles such as syringes, cups, spoons, cup variations, or feeding tubes, however it is beyond the scope of this article to detail those alternatives.

Seeking Unbiased Third Party Non-Proprietary Reviews

It is important to avoid being a “victim” to marketing hype. Companies often use appealing ads and far-reaching claims to create excitement and demand for their products. When

reading recommendations or reviews, look at the authors or researchers of for any information. Do they reveal whether they are paid consultants or offer any disclosures of financial gain? Be careful to look at the subjects involved with a study. Are they randomly selected or pre-selected from a closed pool of subjects? Independent, non-paid authors / researchers or subjects provide a better unbiased opinion.

Surveys or recommendations for “Best Bottles” should be scrutinized for their lack of bias, their authorship credentials/experience and bases for

their evaluations. Product surveys should gather feedback from a large audience and not a pre-selected pool such as only one private practice or just one hospital maternity ward. Authors should have professional and educational backgrounds reflective of the product utilization. Authors that have no “wet-finger” experience in the profession or with the product may exhibit biases

The table below shows bottle systems that were mentioned by the respective publications listed and are highly recommended. They did not list bottles they did not recommend.

Brand	Parenting Magazine	Forbes	Good Housekeeping	Gear Lab
Comotomo	X	X	X	X
Dr. Browns	X	X	X	
Lansinoh	X			
MAM Easy Start Anti-Colic	X			
Philips Avent	X	X	X	X
Nuk Simply Natural	X		X	X
Olababy Gentle		X		
Evenflo		X	X	
Chicco Duo Hybrid			X	
Boon Norsh				X
NanoBebe				X

Bottles that demonstrated a repetitively high number of positive responses in several surveys (8) were :



Selecting a baby bottle that the parent and the baby will be “happy” with or that will achieve the “feeding goal” should consider many factors. “Parent -driven factors” might include: potential leaks, level of effort to clean the parts, eco-health (glass, plastics, plastic-alternatives), esthetics/color/design, cost “Infant-driven factors” might include nipple type, baby’s oral anatomy, baby’s age, baby’s muscular suck/swallow/ breathe capability and stamina, flow rate desirability and tolerance and

feeding responses to the bottle. Experientially and realistically, there will be more than one bottle system that fits the objective and subjective specifications the parent and baby desire. As the baby matures there will be a need to evolve into other bottle systems.

Conclusion

As oral health professionals, we may not always be trained to guide families in choosing feeding systems, yet parents often turn to us for advice. Understanding the guidance from

national organizations, the features that distinguish supportive bottle systems from poorly designed ones, and the unique circumstances of each infant allows us to provide practical, evidence-based recommendations.

Bottle selection is not one-size-fits-all; factors such as oral anatomy, muscle tone, developmental stage, feeding behaviors, and family needs all play a role. Clinicians should encourage parents to balance both infant-driven and parent-driven considerations while remaining cautious of marketing claims and seeking unbiased, third-party

evaluations.

Ultimately, our role is to help families find solutions that promote safe feeding, support optimal growth and development, and reduce the risk of oral and systemic health issues. By staying informed and providing thoughtful guidance, dentists can extend their impact beyond the dental chair and reinforce their role as trusted advocates for children's overall well-being. 🇺🇸

References

Websites

- Rachel O'Brien, IBCLC: This lactation consultant offers insights on introducing bottles to breastfed babies, discussing how to choose the right bottle and avoid issues like nipple confusion and bottle refusal. rachelobrienibcl.com
- Babylist: Their "Best Baby Bottles" guide provides an introduction to various bottle types and outlines top picks based on expert and parent reviews. babylist.com
- Matto's Lactation: This comprehensive list details various feeding devices beyond traditional bottles, helping parents choose the method that best suits their baby's needs. mattoslactation.com
- Nourished Young: This how-to guide assists parents in selecting the right bottle and nipple for their baby, aiming to help avoid common and costly mistakes. nourishedyoung.com
- New York Magazine's The Strategist: "The 9 Very Best Baby Bottles" compiles expert and parent recommendations, highlighting top baby bottles and their unique features. nymag.com
- The Bump: Their "Ultimate Guide to How to Bottle-Feed a Baby" covers topics from selecting and preparing bottles to effective feeding positions,

offering a comprehensive overview for new parents. thebump.com

- britt@infantfeedinglabs.com
Research on flow rates of bottle nipples/teats. Information on variability of flow rate divided into three categories.

Articles

(Publication after 2014)

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What the “One Big Beautiful Bill Act” Means for Your Dental Practice and Personal Wealth

by Sheri Pan, CFP®,
CEO and Founder
at Pantheon Wealth
Planning



READ IT ONLINE



READ IT ONLINE

As a dental professional, you're trained to detect small issues before they turn into major problems. The same is true in financial planning. With the recent passage of the One Big Beautiful Bill Act, a sweeping piece of federal legislation, dentists may face both new opportunities and potential challenges when it comes to managing taxes, retirement, and legacy planning.

While much of the political debate has focused on broader implications, let's zoom in on how this legislation may impact you— here are the top 5 opportunities and strategies to consider:

1. Maximize T Deduction Before It Phases Out

What Changed: The state and local tax (SALT) deduction cap temporarily increased from \$10,000 to \$40,000 in 2025, and then rising annually till 2029. Reverts to \$10,000 in 2030.

Phase-Out: Begins once your AGI exceeds \$500,000.

Strategy: Consider set up retirement plans for your business to reduce your AGI and preserve more of your SALT deduction. This can also build retirement savings efficiently.

Example: Dr. Patel reduced her AGI by \$80,000 through a defined benefit plan, keeping her below the phase-out threshold and maximizing her \$40,000 SALT deduction.

2. PTE Tax Strategy for Dental Practice Owners making over SALT threshold

The Pass-Through Entity (PTE) Tax Election is a workaround strategy that allows owners of pass-through businesses (like S-corps, partnerships, or LLCs) to deduct state income taxes at the entity level, bypassing the federal SALT deduction cap for individuals.

Under the BBB Act, the SALT cap is still in place (\$40,000, with phase-out starting at \$500,000 AGI), so this strategy is especially helpful for dentists in high-tax states like California.

Strategy: If eligible, your S-Corp, LLC, or partnership pays state income tax on your share of profits, and that amount is fully deductible on the entity's federal tax return. This lowers the business's taxable income and reduces your federal personal income tax, even if your AGI exceeds the new SALT phase-out threshold.

Example: Dr. Laura owns a successful dental group in California structured as an S-Corp. Her state income tax liability on pass-through income is \$60,000. Normally, she'd only be able to deduct \$10,000 of that

on her personal federal return due to the SALT cap.

By making the PTE election, S-Corp pays the \$60,000 state tax directly. That amount becomes a fully deductible business expense, reducing the corporation's federal taxable income.

3. Take Advantage of Enhanced Section 179 Expensing

Increased Deduction Limit: The maximum amount a business can immediately deduct under Section 179 has increased to \$2.5 million, up from the pre-OBBA limit of \$1.25 million.

Strategy: Plan large capital investments (like new imaging or CAD/CAM equipment) before bonus depreciation phases down in 2027.

Example: Dr. Chen wrote off \$180,000 in new equipment, reducing taxable income and improving cash flow.

4. Expand Wealth Transfer with Higher Estate & Gift Tax Exemptions

What Changed: Exemptions permanently rise to \$15 million (individuals) and \$30 million (married couples) in 2026, inflation-indexed thereafter.

Strategy: Explore succession planning tools like GRATs, family limited partnerships, or lifetime gifting to pass ownership or real estate tax-free.

Example: Drs. Thompson began transferring shares of their \$6M practice to their daughter under the new exemption, avoiding gift and estate taxes

because it's under the high estate/gift tax thresholds.

5. Use Donor-Advised Funds (DAFs) to Front-Load Charitable Giving

Strategy: Contribute a large amount (either cash or highly appreciated properties such as stock) to a DAF in a high-income year, get the deduction up front, and give it to your favorite charities over time.

Example: Dr. Morales AGI is \$600,000 and donates cash \$40,000 to a DAF. Her AGI is \$600K, so 60% = \$360K. She gets a \$40,000 - \$3,000 = \$37,000 deduction.

Action Steps for Dentists

Here are some immediate areas where dentists should consider planning:

- ♦ Revisit your SALT/PTE deduction strategy – especially if you live and work in high-tax states like California.
- ♦ Evaluate estate plans – the higher exemption levels may allow you to transfer more to your heirs tax-efficiently.
- ♦ Business succession planning – think beyond dentistry. Tax law changes can impact how and when you sell your practice.
- ♦ Integrate tax and financial planning – coordinate with a team that includes a CPA, especially if you're nearing any of the phase-out limits.

Final Thought

As with a dental x-ray, what's beneath the surface of this bill matters most.

At Pantheon Wealth Planning, we specialize in working with medical and dental professionals, helping them translate policy changes into actionable financial strategies.

If you're unsure how this legislation affects your long-term planning, we'd love to help you break it down—without the lidocaine. 🌈

- ♦ Schedule a consultation: <https://www.pantheonwealthplanning.com/contact-page>

Sources:

1 Text of "ONE BIG BEAUTIFUL BILL ACT," Congress.gov, <https://www.congress.gov/bill/119th-congress/house-bill/1/text>

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April 9, 2026: "My 3D Digital Journey: 3D Printing and Practice Improvement" with Jenny Apekian, DDS



November 11: "Insights into Artificial Intelligence in Dentistry" with Balazs Feher, DMD, PhD



May 14, 2026: TBD



February 12, 2026: "Early Management Solutions for Challenging Dental Anomalies: Short Root, Transposition, and Multiple Missing Teeth" with Heesoo Oh DDS, MSD, PhD



September 10: "Minimally Invasive Rehabilitation: A Healthier, Less Costly and More Predictable Approach" with Jose Luis Ruiz, DDS



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