

ACTION

September • 2026

Journal of the Georgia Dental Association



FEATURES:

**2026 GDA Convention
& Expo Recap** ▶ PG. 8

2026 Semi-Annual Report
▶ PG. 24

2027 Legislative Session
▶ PG. 28

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features

- 8 2026 GDA CONVENTION & EXPO RECAP
- 20 A FINDING YOUR PATIENT WILL REMEMBER MOST
- 24 2026 SEMI-ANNUAL REPORT
- 28 2027 LEGISLATIVE SESSION AGENDA
- 32 A LOOK AT THE GEORGIA DENTAL HYGIENE WORKFORCE SHORTAGE IN 2027
- 48 LASER ENDODONTIC ABLATION PROCEDURE (LEAP)

in every issue

- 2 COOL TOOLS
- 6 LETTER FROM THE EDITOR
- 16 DISTRICT SEEN & HEARD
- 34 MEMBER PROFILE
- 51 GDA CLASSIFIEDS
- 53 ADVERTISERS INDEX

additional articles

- 26 FALL CE CONFERENCE
- 38 DENTAL COLLEGE OF GEORGIA
- 46 SKI & CE



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DR. RHODA J. SWORD
GDA Editor

Whether you resonate more with the Byrds, “To everything (turn, turn, turn), There is a season (turn, turn, turn) and a time to every purpose under heaven” or Ecclesiastes 3:1-2 “There is a time for everything, and a season for every activity under the heavens: a time to be born and a time to die, a time to plant and a time to uproot,” you get the point! Life ebbs and flows, often taking us places we could have never dreamed of, if we allow it. I want to share with each of you about my next journey and a place I never would have dreamed of moving, Milwaukee, WI! What is there, you might ask? Marquette University School of Dentistry.

In academics, scouting firms are often used to facilitate nationwide searches, which was the case in my situation. When notified and told I was nominated to apply for the Chair position of the entire General Dental Sciences department, I did what every super busy professional would do: I ignored it! After a month, they reached out again, and I decided, “What could a phone call hurt?” Could God be guiding me in a new and challenging

EVER ONWARD: Embracing the Next Season

direction? So, I followed through, first with a conversation, then a Zoom call, then an in-person interview. When I was offered the job, I was a bit in shock, but there was also a lot of excitement just beneath the surface! After much prayer and discussion with my husband, Jeremy, and other amazing mentors and friends, I agreed to accept this new and challenging role. It became more clear that this is my next step for this season of my professional and personal life!

Here are a few things I love about Georgia and, more specifically, the GDA. I’ll carry these memories with me forever! I was born and raised in Statesboro, GA, on a farm, with cows, a horse, corn, peanuts, and even cotton. I did scout cotton as a college girl, and I was the only girl at Effingham County cotton scouting school (yes, that is a thing)! I learned a hard work ethic and how to fix things with my hands (thanks mom and dad)! I attended Baylor University for undergrad and began at DCG in 1999. My whole life, I planned to become a veterinarian. Then, during my junior year at Baylor, I felt God calling me from veterinary medicine to dentistry. After graduating from DCG, I began teaching part time in October 2003 while in a practicing in Evans. I transitioned to academics full time in 2009 after feeling called to leave private practice for my current role. See the trend? Once in this amazing profession, I realized what a perfect fit it is for me. Through ASDA and being active in the GDA for 23 years, I have learned the true power of organized dentistry, so I can wholeheartedly advocate for it to each and every dental student! This is truly an example where the laws of physics are disproven, and as Aristotle indicated, “*the whole is truly greater than the sum of its parts.*” Together, we can move mountains,

and we can get laws modified that never really made sense in the first place, work we cannot do alone. **We must band together, focusing on what joins us as a profession, not on what divides us!**

I will forever love and support DCG and the GDA, and I have been so honored to have many leadership roles, especially this leadership role as the GDA Editor. Please know that this decision was not made lightly, and I appreciate all of the support I have been given in this singular role!

In the light of my ponderings on life and love and the pursuit of dreams, I try to pass on a bit of wisdom to my dental students. I have found myself telling some of them in our treasured one-on-one conversations, “Money comes and goes, but you only get time once. Spend it wisely.” I have come to realize that I am a one-on-one person, and I am grateful to those who take the time to meet with me whenever possible. What a gift time can be from one person to another. Do not delay chasing your dreams! If you have a dream or calling of something you want to do or be or develop, do it now! There may not be time tomorrow... or later...

Thank you for the gift of your time, reading these columns and pondering with me. I see this as not a letting go, but a pressing onward!

I finish with one of my favorite authors and excerpt from her poem,

The Summer Day

“...Tell me, what else should I have done?

Doesn't everything die at last, and too soon?

Tell me, what is it you plan to do with your one wild and precious life?” Mary Oliver

Ever onward...  Dr. Rhoda J. Sword
rhodasword@outlook.com

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SATURDAY, OCTOBER 24, 2026

WHAT TO EXPECT

- A day of adrenaline-pumping clay shooting with friends, family, and supporters of dental health
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Beach. Vibes. Dentistry!



That is what attendees experienced at the 2026 GDA Annual Convention & Expo this July.

The GDA returned to Jekyll Island, GA, this July 2-4, and celebrated America's 250th anniversary in style! From expert CE, exhibitor bingo, and Olympic-level networking, to fireworks on the beach, there was something for everyone.



Thursday kicked off with our semi-annual House of Delegates meeting, where more than 75 dentists across all seven districts represented your interests, reviewed the past six months of business, and finalized the direction for the next six months, including our legislative priorities for the January 2027 legislative session. The House of Delegates will meet again January 29, 2027, in Atlanta. If you would like to represent your fellow dentists as a delegate, please contact your district president.

Following the House of Delegates meeting, our high-quality continuing education courses began. The day started with opioid prescribing updates, followed by an energetic presentation from



Elijah Desmond, who emphasized how important mental wellness and connection with others are to a fulfilling and prosperous dental career, stating, "understanding oneself and authentically connecting with others can transform the entire culture of a practice."

Lastly, we heard from the Board of Dentistry in a mixed panel answering your top questions, including the upcoming teledentistry rule and the Board's official adoption of CE Broker as the platform to track and conduct CE audits.

Thursday wrapped up with our open bar Welcome Reception in our newly designed exhibit foyer. This year, vendors were available at easy, approachable tables lining the main foyer, allowing for more organic, spur-of-the-moment conversations. GDA Foundation raffle baskets were spaced



throughout the foyer, giving attendees the opportunity to win prizes ranging from a free two-person quail hunt at Fieldstone Hunting Preserve, to Savannah Bananas tickets and gear. Those weren't the only prizes available at the Welcome Reception! All adult attendees received a door prize ticket upon arrival and were entered into our free prize drawings throughout the reception. Prizes ranged from a backpack cooler and Bluetooth speaker for a day on the beach to a portable, Wi-Fi-capable projector for at-home movie nights.



Friday was another action-packed day starting with a celebration of your colleagues who have reached milestones in their membership and careers at our Awards & Keynote Brunch. U.S. Olympic athlete and fastest rugby player in the world Carlin Isles closed out our brunch with a moving speech



on resilience and seeing the long-term goal through the noise of life and going for it. Following the brunch, we enjoyed Bloody Marys and ice cream bars in the exhibit foyer to kick off the afternoon. CE started with the incomparable Dr. Len Tau discussing what to do when you get a bad review online, "the perfect dental practice isn't the one with the perfect online reviews, it's the one with an action plan for managing reviews." Friday also included the ever-popular Trends in the Business of Dentistry panel led by Harris Gignilliat with UBS,



a comprehensive course on treating patients with bleeding disorders by Dr. Bobby Tran, the importance of salivary testing with Dr. Zulema Valdivia, tips and best practices for building or acquiring your dream dental practice with Ed Pease from NU Real Estate, and how to keep that practice and yourself safe with Ryan Oliver from Fortune Law Firm. As if that wasn't enough, attendees then headed out to the beach for our



exhibitor happy hour, providing a relaxed atmosphere to network with exhibitors and colleagues while taking advantage of the scenery, not to mention the free drinks.

As Convention came to a close, the party ramped up as we prepared

for an epic celebration of America's 250th anniversary of independence. The morning started with some friendly competition on the beach at our inaugural GDA Foundation Cornhole Tournament. Thirty-two players, beach jams, a longest throw challenge, and an oceanfront setting—what more could you ask for. Attendees then had the day free



to enjoy the holiday with family and friends, coming back together for our New Dentist & First-Time Attendee reception that afternoon. The reception led into our annual GDA Celebration party on the convention center lawn. Attendees were encouraged to come in their best July 4th gear to show off their patriotic spirit while enjoying beach jams, carnival-



style games, face painting, henna artistry, caricature drawings, a giant blow-up slide, and HUGE festival turkey legs! Of course, it wouldn't be July 4th without a fireworks show, so as the sun sank below the horizon, attendees were met with the bright flashes and loud booms of an oceanside fireworks show to put the cherry on top of a fabulous GDA Convention week!

—Chelsea Skalski, CMP
GDA Events & Office Manager



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CELEBRATING MEMBERSHIP—GDA



Congratulations!

Life Members | 25-year Members | 50-year Members

The members listed have been honored for reaching their Life, 25-Year, or 50-Year membership milestones during this calendar year.

ADA LIFE MEMBERS

These members fulfilled all of their ADA Life member criteria in 2026 and will be Life Members starting in 2027.

EASTERN DISTRICT

Dr. Jennifer Wells

NORTHERN DISTRICT

Dr. Barry Kaplan
Dr. Carmen McCaffrey
Dr. Wesley Powell
Dr. Steven Ricci
Dr. Jolanda Warren

NORTHWESTERN DISTRICT

Dr. Kenneth Goldstein

SOUTHEASTERN DISTRICT

Dr. Mark Dusek
Dr. Charles Fana Jr.

SOUTHWESTERN DISTRICT

Dr. Bradley Adams
Dr. John Hopkins Jr.
Dr. Douglas Maxwell
Dr. Harry Merritt Jr.

WESTERN DISTRICT

Dr. Leonard Allen
Dr. Rene Roberts

25-YEAR GDA MEMBERS

These members achieved 25 consecutive years of GDA membership during 2026.

CENTRAL DISTRICT

Dr. Rodney Clark

EASTERN DISTRICT

Dr. DeAnn Harmon-Smith
Dr. David Miller
Dr. Rhonda Mobley
Dr. Christopher Moldovan
Dr. Brent Nail

NORTHERN DISTRICT

Dr. Jonathan Eaton
Dr. Kevin Eatmon
Dr. Mark Gray
Dr. Wendy Macke
Dr. Weldon Morgan
Dr. Aubrey Scher

NORTHWESTERN DISTRICT

Dr. Joshua McIntire
Dr. Douglas Singleton

SOUTHEASTERN DISTRICT

Dr. Samuel Norris Jr.

SOUTHWESTERN DISTRICT

Dr. Brent Depta
Dr. Jay Williams
Dr. Holland Wright

WESTERN DISTRICT

Dr. Brett Helton

50-YEAR GDA MEMBERS

These members achieved 50 consecutive years of GDA membership during 2026.

CENTRAL DISTRICT

Dr. Robert Betzel
Dr. Braswell Collins Jr.
Dr. Bennie Evans

NORTHERN DISTRICT

Dr. Robert Bays
Dr. James Begley
Dr. James Collins
Dr. Richard Weinman

NORTHWESTERN DISTRICT

Dr. Gordon Austin
Dr. Jimmy Bellamy
Dr. Richard Kinsey
Dr. Steven O'Neal
Dr. Gary Watts

SOUTHEASTERN DISTRICT

Dr. Douglas Anderson
Dr. Stephen Arthur
Dr. James Coleman Jr.
Dr. Melvin Geer
Dr. Lonnie Guinn

SOUTHWESTERN DISTRICT

Dr. Robin Wise Sr. 



CELEBRATING MEMBERSHIP—GDA

Welcome New Members

June through July 2026

New members are classified as dentist joining for the first time since graduating dental school, dentists who have returned to membership after 3+ years away, or dentists who are new to Georgia.

Central District (CDDS)

Dr. Nancy Patel
Dr. Esther Lee
Dr. Anh Dang
Dr. Joseph Sumrall

Eastern District (EDDS)

Dr. John Baxter
Dr. Craig Martinson
Dr. Weichen Chai
Dr. John Good

Eastern District (EDDS) Continued

Dr. Adam Cobb
Dr. Melina Gable
Dr. Brooklyn Williamson
Dr. Trevor Staton
Dr. Katelyn Deguzman
Dr. Kennedy Murphy
Dr. Maya Grimes
Dr. Cameron Emam
Dr. Coby Hancock

Northern District (NDDS)

Dr. Kamal Smith
Dr. Elizabeth Bilodeau
Dr. Margaret Scarlett
Dr. Nicolette Beatenbough
Dr. Yi-Ping Liu
Dr. Doreen Wilson-Roberts
Dr. Jessica Didato
Dr. Curtis Holmes



GDA BLOCK PARTY!

Who's ready for round 2?! GDA Members and DCG students - drills down, brews up! 🍻

February 12, 2027 | 4:00 PM

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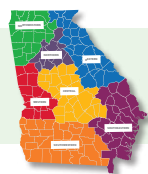
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DISTRICT SEEN & HEARD

Members making news and news for GDA members.

NDDS Northern District GEORGIA DENTAL ASSOCIATION

As the **Northern District** reflects on the year so far, we are grateful for the connections, learning opportunities, and advocacy efforts that have brought our members together. None of this would be possible without the continued support and involvement of our dedicated members.

Throughout the year, members have had the opportunity to earn CE credits through presentations from outstanding speakers, network with colleagues at our Vino Venue Member Social, welcome new members to the Society, and connect with community leaders, including meeting the mayor at our Greater Hall District event. These gatherings have strengthened our professional community and reinforced the value of staying engaged.

We are thankful for every member who attends events, volunteers, supports our initiatives, and contributes to the success of the Society. Your involvement helps us continue our mission of serving dental professionals and advancing organized dentistry throughout our region.

We look forward to the rest of the year and hope to see you at an upcoming event. To view our full calendar, register for events, and learn more about membership opportunities, visit www.NDDS.org.



Golf Tournament Honors Dr. Sidney Tourial

Congregation Or VeShalom honored GDA Foundation President Dr. Sidney Tourial on August 17 with a golf tournament at Bear's Best Atlanta. The event celebrated Dr. Tourial's decades of service to the congregation and his longstanding leadership in the Atlanta Jewish community. A past president of the Georgia Dental Association, Dr. Tourial has also dedicated decades to serving the dental profession and the GDA

Foundation. More than 80 golfers participated in the tournament, which raised funds to support Or VeShalom's programs. An avid golfer, Dr. Tourial enjoyed the opportunity to celebrate with family, friends and members of the community while supporting the congregation to which he has devoted more than 50 years of service.



2026 Michael T. Rainwater Dentist of the Year: Amy Kuhmichel, DMD

The Greater Atlanta Dental Foundation (GADF) proudly announced, at their 2026 Gala for Smiles, that Amy Kuhmichel, DMD had been named the 2026 Dentist of the Year.



This prestigious award recognizes a dentist who exemplifies excellence in the profession while demonstrating an outstanding commitment to patients, colleagues, and the dental community. Dr. Kuhmichel's dedication, leadership, and contributions to dentistry make her truly deserving of this honor.

Dr. Tyler Rathburn, longtime friend and colleague of Amy's presented her with the award. The evening also included a special recognition of the past recipients of the Dentist of the Year Award, celebrating the many outstanding dentists whose leadership, dedication, and commitment to the profession have made a lasting impact.

We are thrilled to celebrate Dr. Kuhmichel and recognize the positive impact she continues to make throughout the dental community. Congratulations, Dr. Amy Kuhmichel, on this well-deserved honor!



WDDS Western District GEORGIA DENTAL ASSOCIATION

Making an Impact Across West Georgia

There's always something happening in the **Western District**! From giving back to the community to bringing members together, WDDS continues to find ways to keep our district connected.

The district is proud to support the Georgia Mission of Mercy (GMOM) in Columbus, with WDDS President Annie Wilson, incoming President Drake Childress, and past WDDS leader Rene Roberts working alongside the GDA Foundation to help make this important community initiative possible. GMOM is a great example of what can happen when members come together to make a difference.

And there's more to look forward to! WDDS will be celebrating the season with a Legislative Reception and Holiday Party at the Big Eddy Club in early December. It will be a great opportunity to catch up and celebrate the year. Date and RSVP details coming soon!



SWDDS Southwestern District

GEORGIA DENTAL ASSOCIATION

The Southwestern District is proud to recognize the member and student accomplishments happening throughout our district.



Congratulations to Dr. Erica Greene and Dr. Hardy Gray on being named Honorable Fellows! We're excited to recognize this well-deserved achievement and their contributions to the profession and our district.

We're also excited to highlight Samuel Cook, a Dental College of Georgia student who has been helping grow The Hub and create more opportunities for DCG students to connect with members. His work is helping build relationships between students and dentists and strengthen connections within our dental community.

We're also pleased to announce that Anna Cook is the recipient of this year's SWDDS Dental College of Georgia scholarship. Congratulations to Anna, and we look forward to supporting her as she continues her journey in dentistry!

Upcoming Events

Join us for our **Fall CE Event on September 18** at the UGA Tifton Conference Center in Tifton, Georgia. The program, "Connecting the Dots in Modern Practice," will cover important topics including OSHA and HIPAA, with members able to earn up to 6 hours of continuing education.

Looking ahead to January, mark your calendars for the **Winter CE Event on January 8**, followed by **Casino Night at Doublegate Country Club on January 9**. More details will be shared soon.

SAVE THE DATE

Southwestern District Dental Association's

CASINO NIGHT

GDA Foundation Fundraiser and Member Event



Saturday, Jan. 9, 2027

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NWDDS Northwestern District

GEORGIA DENTAL ASSOCIATION

Looking ahead, the Northwestern District is excited to host a New Member Social on October 1, providing an opportunity for new dentists and established members to connect and build relationships. Our Fall CE Program will take place on October 16 at the Bartow College and Career Academy. In addition to the educational program, attendees will have the opportunity to tour the facility and learn more about its dental assistant training program. The event will also provide opportunities to connect with the dental assistant students and showcase the many career paths available within dentistry.

We also look forward to our **Legislative Reception on December 2 at the Clarence Brown Conference Center**, where members can connect with local legislators and discuss the issues impacting dentistry, patient care, and our profession's future.



SEDDS Southeastern District

GEORGIA DENTAL ASSOCIATION

The Southeastern District has had an active season, strengthening connections across our membership and supporting professional growth throughout the district. Recently, district officers gathered in Brunswick for a productive meeting featuring presentations from Dr. Theresa Gonzales, Associate Dean at the Dental College of Georgia and fellow SEDDS member, along with other speakers.



Looking ahead, we are excited to continue building momentum with several upcoming events designed to foster engagement and connection among our members.

On September 10, we will host our first New Members Social at Starland Yard in Savannah, offering a relaxed opportunity to welcome and connect with new and seasoned members in the district. Following that, we have our **Legislative Reception on November 19 at the Savannah Yacht Club**, where members will engage in important conversations surrounding issues impacting our profession.



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A FINDING YOUR PATIENT WILL REMEMBER MOST Hint—It's Not the 5 mm Pocket or Craze Line



JULIA PRICE, DDS

Dr. Julia Price is a GDA member, board-certified Oral and Maxillofacial Pathologist and 2026 GDA Fall Conference speaker. To view a demonstration of a comprehensive head and neck examination, visit PreciseOralPathology.com, where readers can access educational resources and a linked YouTube channel dedicated to oral pathology and oral cancer detection.

While giving your surgical extraction of #14 patient a break, you ask your hygienist to check your face for blood or debris, before stepping into her room for a new patient comprehensive exam. The schedule is already behind. There is a 5 mm pocket, recurrent decay, a high smile line with esthetic concerns, and financial discussions still ahead. During the examination, a white patch is noted on the gingiva of this 30-year-old nonsmoking female patient. She says it has “been there forever.” It does not hurt.

Moments like this occur nearly every day in every dental practice. And often, they become the most important moments in that patient's life.

Modern dentistry is demanding. Appointments are packed with restorative concerns, treatment planning, insurance limitations, esthetic expectations, and production pressures. In the middle of all of that, subtle mucosal findings can quietly become background noise.

A small white patch may seem insignificant compared to a fractured cusp, a failing restoration, or a patient focused on cosmetic concerns. Yet oral potentially malignant disorders (OPMDs) and early oral squamous cell carcinoma are often asymptomatic, deceptively subtle, and easy to underestimate in a busy clinical setting.

While many oral mucosal lesions are benign and reactive in nature, others carry varying degrees of malignant transformation risk.^{1,2,3} Recognizing which lesions warrant monitoring, biopsy, or referral is one of the most impactful contributions dentists can make to long-term patient outcomes.

The World Health Organization (WHO) defines OPMDs as a “heterogenous group of clinically defined conditions associated with variable risk of progression to oral squamous carcinoma (Table 1). Most produce clinically

Oral Potentially Malignant Disorders (OPMDs)	
Erythroplakia	Erythroleukoplakia
Leukoplakia	Proliferative Verrucous Leukoplakia (PVL)
Submucous Fibrosis	Palatal Lesions Associated with Reverse Smoking
Oral Lichenoid Lesions ^a	Oral Lichen Planus
Smokeless Tobacco Keratosis ^a	Oral Graft-Versus-Host Disease
Lupus Erythematosus	Familial cancer syndrome including Fanconi anemia, dyskeratosis congenita, xeroderma pigmentosum, Li-Fraumeni syndrome, Blood syndrome, ataxia-telangiectasia, and Cowden syndrome

Table 1: Oral Potentially Malignant Disorders (Adapted from the WHO Classification of Tumours)⁴

^a Oral lesions resembling lichen planus but lacking typical clinical or histopathological appearances.

^b Risk varies with tobacco type.

visible lesions.” This group includes, but is not limited to, leukoplakia, proliferative verrucous leukoplakia (PVL), erythroplakia, erythroleukoplakia, oral submucous fibrosis, actinic cheilosis, oral lichenoid lesions, and oral lichen planus.⁴ These lesions vary significantly in appearance and malignant transformation risk, but all deserve thoughtful clinical evaluation.

Leukoplakia remains one of the most encountered OPMDs in clinical practice and is defined as a white plaque of questionable risk that cannot be otherwise diagnosed clinically.^{1,2,3,4} Upon biopsy, a leukoplakia may microscopically demonstrate hyperkeratosis, epithelial dysplasia, or even squamous cell carcinoma.

Some of the most concerning lesions are not dramatic. In fact, one of the greatest clinical

challenges in oral dysplasia is that dangerous lesions are often neither painful nor visually alarming. Patients frequently report lesions have been present “for years,” are asymptomatic, or “have never changed.” Unfortunately, lack of symptoms does not correlate with lack of risk.

Among OPMDs, proliferative verrucous leukoplakia deserves particular attention. Early PVL may initially resemble frictional keratosis or lichen planus, yet it often behaves aggressively over time with multifocal progression, recurrence, and a high rate of malignant transformation. Importantly, many affected patients do not fit the traditional oral cancer stereotype. PVL commonly affects older women and may occur in nonsmokers without significant alcohol history. Lesions often begin subtly before progressing into widespread verrucous or erythematous disease over time.⁵

Erythroplakia and erythroleukoplakia are especially concerning due to their high association with severe dysplasia or carcinoma. These lesions often present with mixed red-and-white coloration, nonhomogenous surface texture, and ill-defined borders. Red lesions deserve particular respect clinically. While many white lesions prove reactive or benign, persistent red lesions are far more likely to represent significant epithelial dysplasia or invasive disease.²

Certain clinical findings should raise concern for increased malignant transformation risk. High-risk lesion characteristics include erythroplakia or erythroleukoplakia, nonhomogenous appearance, ill-defined margins, multifocal disease, larger lesion size, and high-risk anatomic locations such as the ventrolateral tongue and floor of mouth. Persistent ulceration, induration, fixation, or unexplained bleeding should also lower the threshold for biopsy or referral.

Patient factors matter as well. Tobacco and alcohol use remain important risk factors for oral squamous cell carcinoma, but clinicians must avoid anchoring bias. Oral dysplasia and carcinoma can absolutely occur in younger patients and nonsmokers. Clinicians should remain especially cautious when lesions persist despite removal of obvious local irritants or



when the clinical presentation does not fully fit a reactive process.

Despite increased awareness surrounding oral cancer screening, oral cancer is still frequently diagnosed at advanced stages. According to SEER data, only approximately 26% of oral cavity and pharyngeal cancers are identified while still localized (Figure 1).⁶

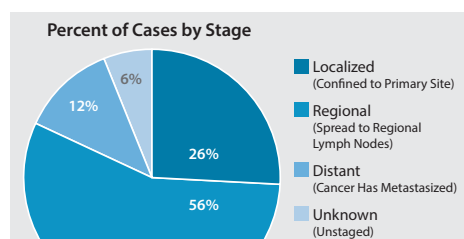


Figure 1: Percent of Cases of Oral Cavity and Pharynx Cancer by Stage at Diagnosis (Adapted from the National Cancer Institute SEER*Explorer)⁶

This statistic is sobering because localized disease carries significantly improved survival outcomes compared to regional or distant-stage disease (Figure 2)⁶. Delayed diagnosis

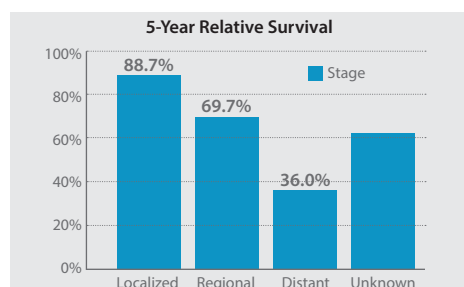


Figure 2: 5-Year Relative Survival of Oral Cavity and Pharynx Cancer by Stage (Adapted from the National Cancer Institute SEER*Explorer)⁶

often results in more aggressive treatment, greater functional impairment, and increased morbidity for patients.

Why are we still diagnosing oral cancer late?

In many cases, oral cancer is not missed because clinicians do not care. More often, it is missed because findings are subtle, schedules are busy, appointments are short, patients are asymptomatic, and the lesion simply does not appear urgent in the context of everything else happening during the visit. Additionally, many practitioners feel uncertain about which lesions truly warrant concern, when to biopsy, or where to refer patients for further evaluation.

Monitoring also deserves thoughtful discussion. Observation can be appropriate in select situations, particularly when a clear

traumatic or reactive etiology is identified. However, “monitoring” without defined follow-up, detailed documentation, or meaningful reassessment can unintentionally become passive delay. Persistent lesions that fail to resolve within an expected timeframe deserve escalation in management, whether through biopsy or referral to a provider experienced in oral mucosal disease.

Human papillomavirus (HPV), particularly HPV-16, has also dramatically changed the landscape of head and neck oncology and deserves mention in any discussion surrounding cancer awareness. HPV-associated oropharyngeal squamous cell carcinoma has increased significantly over recent decades and often affects a different patient population than traditional tobacco- and alcohol-associated oral cavity cancers. Many patients are nonsmokers, nondrinkers, and may not fit the “classic” oral cancer profile clinicians were historically taught to recognize. While a comprehensive discussion of HPV-associated disease, vaccination, risk factors, and clinical presentation is beyond the scope of this article, it is important for dental professionals to recognize that the epidemiology of head and neck cancer continues to evolve. In many ways, HPV-associated oropharyngeal carcinoma warrants an entire discussion of its own.^{7,8,9}

Establishing referral relationships before they are urgently needed can significantly improve patient care. Dentists should feel comfortable identifying local oral pathologists, oral surgeons, oral medicine providers, or academic centers equipped to evaluate suspicious mucosal lesions. Clinical photographs, background information, careful descriptions, and documented follow-up intervals can further improve continuity of care and reduce delays in diagnosis.

Comprehensive oral cancer screening does not require advanced technology or significant additional chair time. It requires intentionality. A systematic soft tissue examination, attention to subtle mucosal abnormalities, palpation of high-risk areas, and willingness to investigate persistent lesions remain among the most valuable tools clinicians possess.

Dentists restore teeth every day. Crowns, periodontal therapy, and esthetic dentistry all meaningfully improve quality of life. But identifying an early dysplastic lesion or squamous cell carcinoma may ultimately become one of the most important diagnoses made during an entire career. The lesion that

changes a patient’s life may be an incidental finding, which reinforces the importance of a head and neck exam at every appointment.



Image 1: Biopsy signed out as squamous cell carcinoma, moderately differentiated with perineural involvement



Image 2: Biopsy signed out as mild epithelial dysplasia



Image 3: Biopsy signed out as “Hyperorthokeratosis.” Clinicopathologic diagnosis: Proliferative Verrucous Leukoplakia (PVL).

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Dental Day at the Ballpark brought GDA members, dental teams, families and friends together at Truist Park in August for an afternoon of Braves baseball and fun.

The event also made an impact. A portion of every ticket supported the GDA Foundation for Oral Health, raising more than \$1,400 to help fund programs that expand access to dental care across Georgia.

Thank you to everyone who joined us and made it a great day for the GDA community!



GDA

A MESSAGE FROM THE



Executive Director

KRISTEN MORGAN

Advocacy remains at the heart of the Georgia Dental Association's mission.

During the first half of the year, GDA worked to protect the interests of dentists and advance oral health policy, while also providing continuing education, fostering leadership, and strengthening connections among members across the state. These accomplishments reflect the power of organized dentistry and the value of a strong, engaged membership. — Kristen



Your Association at Work

Advocacy Wins

- ✓ 2 bills signed
- ✓ \$150,000 in state funding for GMOM
- ✓ \$3.2 million in state funding supporting rural health clinics
- ✓ 110+ advocates at LAW Day

Education/ Membership/ Leadership

- ✓ 3,318 members (as of 6/3/26)
- ✓ 24 CE courses delivered
- ✓ 12 Leadership GDA participants
- ✓ \$261,284 in care delivered at GMOM

Growth & Engagement

- ✓ 215 dentists & students at the Inaugural GDA Block Party
- ✓ 50 mentees in Mentorship Program
- ✓ 259,273 website views
- ✓ 4.8% growth in GDIS business insurance lines
- ✓ 1,035 group health plan members

GDA in Action

Highlights from the past six months of advocacy, education, service and member engagement.



Governor Kemp Signs GDA Bill into Law



BOT Networking



Savannah Campus dental school groundbreaking



DCG Spring Golf Tournament



GDA House of Delegates



GDA Phlebotomy CE Course



Annual GDAPAC Golf Tournament



GDA Block Party



Leadership GDA Class



Georgia Mission of Mercy



GDA Officer's Visit (SWDDS)



LAW Day at the Capitol



2026 FALL CE CONFERENCE

September 18-19, 2026
Sonesta Atlanta Northwest Galleria

FULL AGENDA, PRICING
OPTIONS, AND MORE!!



Interested in a convenient way to earn relevant, in-person CE before the 2027 renewal year?

The GDA Fall CE Conference gives dentists and dental team members the opportunity to earn valuable CE in one focused weekend—without scrambling for last-minute credits or piecing together courses throughout the year.

With clinical updates, required courses, and practical business insights, you'll leave with knowledge you can apply immediately while staying ahead of your 2027 license renewal requirements.

Take advantage of one weekend to earn valuable CE while investing in your professional growth.



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GDA Member Dentist

Full Event (2-Day): \$450

Single Day: \$325

Dental Team Member

Full Event (2-Day): \$175

Non-Member Dentist

Full Event (2-Day): \$650

Single Day: \$525

Student/ASDA

Early-bird pricing does not apply.

Full Event (2-Day): \$60

Single Day: \$30

A SNEAK PEEK AT THE CE LINEUP



Julia Price, DDS

Oral Pathology: A Practical Review of Common (And Commonly Missed) Lesions

Trudy-Ann Frazer, DDS

*Find and Keep an Aligned Associate:
A Culture-First Blueprint for Hiring, Onboarding, and
Retention—Without Losing Your Mind or Your Tea*



Rico Short, DMD

Endodontic Pearls for the General Dentist

Beomjune B. Kim, DMD, MD, FACS

Oral Precancer/Cancer Work Up and Treatment



Judy Greenlea-Taylor, DDS, MPH, FACD, FICD

Teledentistry

GDA

Legislative Insider

The 2027 Legislative Agenda considers feedback from stakeholders across the association. Building on the GDA's historic legislative development process, the latest agenda benefits from new surveys and focus groups. In early 2026, the Georgia Dental Association sent out a survey to all of our members asking them about their membership experience. The survey included questions about how the GDA can strengthen its advocacy to better reflect member needs. The Government Affairs Committee also appointed a health policy subcommittee to review a menu of proposed policy initiatives and to propose new ideas. After the subcommittee completed its review work, they presented their suggestions to the Government Affairs Committee. The Government Affairs Committee and the Government Affairs team then sent out a pop survey to all of our members asking them to rank policy areas and specifics to help finalize the agenda. Thanks to the member survey, the review of the health policy subcommittee, and the results of the pop survey, the items that made the 2027 legislative agenda reflect the top priorities reported by members of the Georgia Dental Association. 📌

Dental Insurance Reform

Fixing dental benefits remains a priority.

Dentists continue to report challenges related to transparency and reimbursement for private as well as public benefit plans.

The 2026 agenda updated state law related to provider payment choice, and the 2027 agenda will push the boundaries of state law related to information sharing while moving the ball forward on existing law.

Here's what we're fighting for:

Limit time frame for retroactive denials

Currently in Georgia, insurance companies have up to 18 months to complete a retroactive denial for claims submitted in a timely manner. This agenda item would reduce that time frame to 6 months.

Transparency for coverage and fee schedules

The Georgia Dental Association believes that patients and their dentists, regardless of network status, should have accurate and timely information related to coverage and reimbursement levels. Because of this, this agenda item will help to create new resources to support added transparency and accountability.



Workforce Development

Georgia continues to suffer from a shortage and maldistribution of dental hygienists

in the postpandemic era. Georgia's population continues to grow, but the state's capacity to educate hygienists has declined since 2018. Upcoming expansions to some programs will help reverse this trend, but more is needed to ensure that Georgia has enough hygienists in the places that need them most.

Here's what we're fighting for:

Internationally-trained dentists as hygienists

As one way to address the workforce shortage of hygienists, the Georgia Dental Association will seek a path to allow internationally trained dentists to be licensed as hygienists. Following a clinical assessment and review by the Board of Dentistry, this license will only allow them to work as a hygienist.

Hygiene loan reimbursement

The Georgia Dental Association will seek an opportunity for hygienists to receive some loan forgiveness if they work in a dental practice in a rural area. This program would mirror the programs already in place for loan forgiveness for dentists and nurses.



Medicaid

Medicaid reimbursement rates continue to lag behind the costs associated with providing dental care. In 2025, Georgia's fee-for-service reimbursement was just 38.8% of average charges. The 2026 legislative session brought support from Georgia's legislature; however, a last-minute disregard by the governor stalled hard-won progress. The goal in 2027 will be to continue to pursue adequate reimbursement for dental practices as well as to pursue new processes that promote transparency.

Here's what we're fighting for:

Increase Medicaid reimbursement rates

In 2027, the Georgia Dental Association will ask for an increase to Medicaid dental reimbursement to better reflect market realities.

Create rate review board

This review board will examine Reimbursement Rates for all Medicaid codes in three-year cycles. Reviews for each type of service would be staggered to allow ongoing evaluation. The members of this review board would be appointed by the members of the Legislature.



Dental Public Health

Dentists across Georgia prioritize the well-being of their patients. Local efforts to cease community water fluoridation in some communities continue to pop up. Meanwhile, the GDA Foundation continues to help members give back to their local communities, and the state is supporting these efforts. Together, many different initiatives can help protect and improve the dental health of those who face the biggest hurdles to oral health care.

Here's what we're fighting for:

Protect community water fluoridation

- ▶ There has been some advocacy around the state aimed at ending fluoride in specific communities. The Georgia Dental Association will continue to defend community water fluoridation at the local and state level, ensuring optimal oral health for our kids and future generations.
- ▶ Because of the incredible response from patients and volunteers, the Georgia Dental Association will ask for \$150,000 to support two more GMOM events in the AFY 2027 budget. In 2026, we hosted two GMOM events – one at the Ben Massell Clinic in Atlanta and one at Columbus Tech in Columbus. With continued support for the State, the GDA Foundation can continue to host at least two events per year in different parts of the state to help provide more access to care for all Georgians.



Non-Legislative Items

Throughout the year, GDA's Government Relations team aims to support initiatives as they move from paper to reality. Passing a law is just the first step in solving policy problems, and sometimes others need to be engaged and informed to be sure that a change on paper leads to something of substance.

Here's what we're fighting for:

- ▶ Expand training for dental assisting programs in high schools and college and career academies.
- ▶ Smooth the transition back into the workforce for hygienists with lapsed licenses.
- ▶ Amend CODA requirements by allowing dual enrollment and improving student-to-teacher ratios.



Looking Forward to 2027

The end of the 2026 session is the end of an era in Georgia. The 2027 legislative session is going to bring new leadership, new legislators, and a great deal of new relationship-building. Georgia is getting ready to vote for a new governor, lieutenant governor, and attorney general. Next year, approximately 20% members of the Georgia General Assembly will be brand new. They will fill the seats of those who either ran for higher office or retired. The Georgia Dental Association will be particularly interested in who becomes the new governor since that person will have veto power over our legislative victories, as well as in any new committee chairs, especially for the Senate Appropriations Committee. The 2027

legislative session is also the beginning of a new legislative biennium. This means that all legislation will be new, and any legislation not passed during the 2027 session will live on in the 2028 session. A new biennium allows for more legislator education and flexibility in our advocacy efforts to be as successful as possible.

Perhaps the most significant change relates to Georgia's executive branch. Polls continue to show a competitive race for the governor's seat, and who wins could have a big impact on next year's advocacy work. As of this writing, the governor's race appears close to deadlocked. Both Keisha Lance Bottoms and Rick Jackson will bring unique perspectives to health care in Georgia. As the founder of Jackson

Healthcare, Rick Jackson could bring industry knowledge, including a special familiarity with staffing and workforce problems, to the governor's office under the Gold Dome. Meanwhile, Keisha Lance Bottoms offers a health-forward platform, listing her "CARE" plan as the first entry in the issues section of her website. The actual policy solutions favored by each would look different, but each brings something new to the table compared with the current administration.

While we are grateful for all the work accomplished under the current administration, the GDA is looking forward to the work the new administration is planning. 📌

Upcoming Legislative Events

2026 Legislative Reception Dates (subject to change)

- OCTOBER 1:** SWDDS/Valdosta | Friends Bar and Grille, 5:30 pm
- OCTOBER 6:** EDDS/Athens | Athens Country Club, cocktails at 5:45 pm, meal at 6:45 pm
- OCTOBER 20:** EDDS/Augusta | Augusta Country Club, 6:00 – 8:30 pm
- OCTOBER 29:** SWDDS/Albany | Doublegate Country Club, 5:30 pm
- NOVEMBER 5:** NDDS/Hall County | Royal Lakes Golf and Country Club, 6:00 pm
- NOVEMBER 19:** SEDDS | Savannah Yacht Club, 6:00 – 9:00 pm
- DECEMBER 1:** CDDS | Idle Hour Country Club, 6:00 pm
- DECEMBER 2:** NWDDS | Clarence Brown Convention Center, 6:30 pm – 9:00 pm
- DECEMBER 10:** WDDS | Big Eddy Club, 6:00 pm

Please check the GDA website to confirm dates and locations.

LAW Day – Georgia State Capitol | Atlanta, GA | JAN. 28, 2027

As we head into the fall, our Legislative Receptions are getting ready to begin.

We hope that you will join us at your district's legislative reception and take the opportunity to network with your legislators and your colleagues. The dates of our legislative receptions are to the left. **Please scan the QR code for any updates.**



**YOU ALREADY KNOW
WHAT MATTERS MOST.**

**JOIN THE CONTACT
DENTIST NETWORK
& TELL THE STORY.**

GDA Georgia Dental
ASSOCIATION



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OF GEORGIA

Share. Guide. Shape.

Share your perspective on
digital dentistry in Georgia.

Digital technologies are transforming dental practice. The Dental College of Georgia is conducting a statewide survey to understand which digital technologies Georgia dentists currently use and which they want to adopt.

Your input will help align education and continuing education with the real needs of practicing dentists across Georgia. The survey is anonymous and takes about 8 to 10 minutes.



GDA Member Benefit Spotlight

HIPAA SECURITY REVIEW FOR GDA MEMBERS

Prepare your practice for anticipated HIPAA Security Rule changes with an independent, third-party readiness review designed specifically for dental practices.



Understand your current security



Identify potential vulnerabilities



Get actionable recommendations



Start Your Review



A Look at the Georgia Dental Hygiene Workforce Shortage in 2027

Jon Hoin, GDA Senior Health Policy Manager

Conversations about a shortage dental auxiliaries are evergreen.

For the past several years, advocates throughout the United States have encouraged policy changes that could potentially expand the dental auxiliary workforce as well as restructure what they can do. Consequently, other groups have pushed back. The American Dental Hygienists' Association (ADHA) has engaged in direct, and often inaccurate, messaging around this issue. In Georgia alone, communications have been sent to legislators and posted on social media that seek to persuade without necessarily representing facts about the past or present state of Georgia's workforce. My aim in this article is to lay out facts from official sources and to demonstrate that they indicate a shortage of hygienists in Georgia.

Is there a Shortage?

The signs of a shortage are present in national data and policy analysis. Only 60.3% of dentists say they have adequate number of assistants, and over 90% of those recruiting say it is either very or extremely challenging.^{1,2} The Health Resources and Services Administration's (HRSA) Workforce Projection continues to predict a shortage in Georgia. FY 2025's model indicates a need for 100 hygienist full-time equivalents (FTE) in 2027.³ HRSA's model also indicates a growing national shortage, rising from 24,390 FTE in 2027 to 33,220 FTE in 2038.³

Georgia is seeing hygienists' wages rise faster than inflation, a possible sign of a tight labor market.^{4,5} Adjusted annual income for the 25th percentile rose from \$67,309 in 2020 to \$81,140 in 2025. In the 5 years prior to 2020, annual incomes at the 25th percentile ranged from a low of \$66,301 to a high of \$73,817. Annual

median income is at the highest it has been since 2014 at \$95,490.

Thinking Through Supply and Demand

Determining whether a given area has a sufficient supply of dental auxiliaries requires looking at several factors. Different populations use different amounts of dental care. Depending on factors like age distribution, dental benefits coverage, and household income, a given group of people will seek dental care at different rates. Only 40.6% of working-age adults saw the dentist in the past year, but 53.2% of children had at least 1 appointment.⁶ Households with incomes above 400% of the federal poverty line (FPL) see the dentist more than twice as much as those below 100% FPL.⁶ Generally, utilization has risen since 2024.

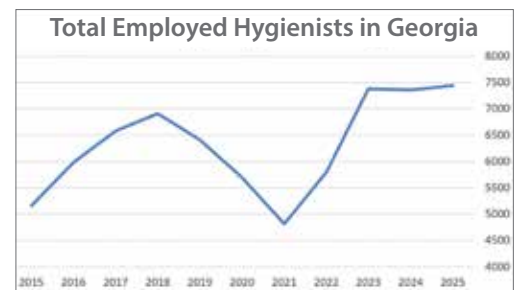
Whether the overall labor supply is rising with utilization and population growth is an open question.¹ HRSA's model predicts a national decline in supply.³ National trends in admission and graduation rates are on the right track. The number of students admitted to hygiene programs grew between 2022 and 2026, 15.7% or 1,285 students, as did the number graduating, 7.6% or 557 students.^{1,7} Meanwhile, the Bureau of Labor statistics projects employment growth of 7 percent with an average of 15,300 openings projected each year.⁸ Unfortunately, even positive national education trends are not reflected in Georgia's enrollment. Georgia hygiene schools' reported total capacity has fallen from 342 in 2019 to 321 in 2025, and in that time graduation rates have hovered around an average of 269 graduates each year.⁹

An Analysis Using Georgia Specific Data

National models are helpful, but it also helps to consider observed trends at

the local level. A substantial number of dental hygienists took a hiatus from the workforce during the COVID-19 pandemic and several subsequent years (Figure 1). Only after 2022 did the workforce return to full strength, and even then, absolute growth appears to be relatively flat, especially compared to the period between 2015 and 2018.

Figure 1.



Recent years have been characterized by significant anxiety about post-pandemic workforce attrition.^{10,11} This narrative continues to be propagated on social media and in public forums; however, it does not reflect current realities. Data provided by the Georgia Board of Dentistry confirms that the count of hygienist licenses lapsed as a proportion of licenses that could be renewed does not appear to be trending upward. In other words, stagnation or decline in supply is most likely a result of restrictions on entry into Georgia's hygiene workforce.

Even with a rosier picture with respect to attrition, Georgia needs to add more hygienists. I predict that Georgia will need a minimum 72 additional hygienists in 2027 just to meet existing demand, a number similar to HRSA's projection. To arrive at this estimate, the following steps were taken. To estimate demand, begin by examining population and utilization (Table 1).^{2,6,12-14} Assuming a standard 2 cleanings annually for all patients, and an additional annual cleaning for some based



on the burden of severe periodontitis in Georgia, results in an estimate of just over 11 million hygiene appointments required to meet existing demand.

Table 1. Estimating Hygiene Annual Appointments Needed in Georgia

A. Population	11,544,713	Census
B. Utilization Rate	45.8%	ADA HPI
C. Utilizing Population	5,287,479	A * C
D. GA Periodontitis Burden	8.3%	Wang et al. 2026
E. Appointments Needed	11,012,919	C*2 + C*0.083

Will Georgia’s hygienists in the workforce in 2027 be able to cover this demand? Probably not (Table 2).^{5,15–23} To estimate supply, project the number of hygienists using bureau of labor statistics and Georgia Board of Dentistry licensing data. Multiplying annual time spent on patient care by the number of hygienists yields just under 11 million appointments and a gap between supply and demand of around 100,000 appointments. Dividing this by the total number of annual clinical hours yields a need for 72 additional hygienists in 2027.

Table 2. Estimating Hygienist Shortfall in 2027

F. Estimated 2027 GA Hygienists	7657.5	BLS and GBD
G. Average Annual Clinical Time	1,425	SCAHEC
H. 1 Hour Appointments	10,910,406	F * G
I. Unavailable Appointments	102,513	E (Table 1) – H
J. Hygienists Needed	72	I / G

Potential for Variation

Uncertainty is baked into the above analysis. To quote Yogi Berra, “It’s tough to make predictions, especially about the future.” Small adjustments to weekly time

worked, the number of appointments required per patient, or the length of each appointment, may shift this analysis toward a surplus of available appointment time rather than a deficit. Recognizing this uncertainty, steps were taken throughout to pad the estimate in favor of greater time available per hygienist and to reduce the time needed per patient. Sources and methods selected for use in developing the estimate were ones that would present the most optimistic case.

Perhaps the most significant statistic in this discussion is utilization. Sources indicate that less than half of all Americans routinely access dental care.^{6,14} Some may avoid the dentist by choice, but many do not have that choice due income and other factors. The result is an untapped reservoir of demand for preventative care.

Responding to the Shortage in the Short Term

In 1992, ADHA published a report on retention of the hygiene workforce.²⁴ Part of the reason the study remains interesting is due to the cultural cache of its arguments. Statistically significant factors distinguishing hygienists who leave permanently versus temporarily included input into decision making, both related to care and office policies, and boredom.²⁴ Hygienists who were temporarily unemployed cited salary and benefits as major motivating factors for transitioning settings.²⁴ These preferences are still used in talking points today.

Fast forward several decades, and the picture of why hygienists leave a particular job has not changed all that much. Hygienists cited workplace culture, salary, and feeling overworked as reasons for dissatisfaction, and those departing voluntarily from practices mentioned similar reasons.¹⁰ Meanwhile, expenses

have been rising, and reimbursement is lagging inflation.^{1,2} HPI has dubbed this a “fiscal squeeze” on dental practices.

It’s important to note that both in 1992 and in 2022 most hygienists were satisfied with their role.^{10,24} Factors related to this satisfaction included work-life balance, positive culture, and an ability to help patients.¹⁰ Practices interested in attracting and retaining staff can always look at reimbursement and benefits structures, but soft skills matter too. A focus on a healthy and collaborative work environment where individual contributions to the team are recognized can go a long way.

In the long-term, more hands will be needed to stabilize the workforce. Different strategies are being tried. Some argue that the Commission on Dental Accreditation is the main bottleneck, and that tight clinical education ratios restrict new entrants.²⁵ Others are seeking new licensees with training from foreign jurisdictions or allowing dental assistants to scale above the gumline to free up hygienists for other tasks. Georgia is investing in new spaces to educate hygienists.^{26,27} GDA will continue to advocate for reforms that grow Georgia’s dental auxiliary workforce to an adequate level. 🟢

To view the full version of this article with references, please scan the QR code:

GDA MEMBER PROFILE

Jamie Austin, DMD



JAMIE AUSTIN, DMD

GDA DISTRICT:

Northern District Dental Society

DENTAL SPECIALTY:

General Dentistry

What did you want to be when you were growing up, and what or who inspired you to become a dentist?

Growing up, I wanted to be a marine biologist and work with dolphins. As college approached, my interests shifted toward healthcare, and I considered careers in nursing and optometry.

The turning point came during a summer break from college. While working at Michael's, a coworker told me about an opening at her pediatric dental office and introduced me to the practice manager. I ended up working days at the dental office and evenings at the craft store. I started in the chart room, then moved into sterilization, and eventually helped support the clinical team in the operatories.

This experience was my first introduction to dentistry, and it immediately sparked my curiosity. Watching the dentist study

radiographs, diagnose conditions, and perform procedures on such small patients fascinated me. I was especially intrigued by how he knew what to look for, how he determined the best course of treatment, and the skill and precision involved in the procedures.

The following semester, I took a biology course and loved it. Encouraged by my professor, I decided to major in biology, and everything seemed to fall into place. From that point on, I knew dentistry was the career I wanted to pursue, and I never looked back.

Which GDA benefit has been the most valuable to you, and why?

Over the past ten years as a GDA member, I've benefited from countless opportunities, but what stands out most is the organization's commitment to leadership development, continuing education, and networking. The GDA has created a strong sense of community by bringing dental professionals together to learn from one another, build meaningful relationships, and support the profession.

One of the highlights of my membership is attending the summer Annual Convention. The quality continuing education, opportunities to connect with colleagues, and participation in the House of Delegates make it an event I always look forward to.

My favorite Annual Convention memory was in 2019 on Amelia Island. While representing the Eastern District, I joined former DCG professors and one of my classmates in the District Challenge. We dressed as KISS and gave it our all with a lip-sync performance that earned us first place. It was a fun and unforgettable experience that perfectly captured the camaraderie and spirit of GDA.



This column highlights GDA members talking about their path to dentistry and the value they find in GDA membership. This month we hear from **Jamie Austin, DMD.**

GDA

Has anything over the years been a gamechanger for you and your patients?

Two technologies have truly transformed my practice: the digital scanner and CBCT. I adopted a digital scanner about two years ago, and it has become an invaluable tool for patient education and communication. Being able to scan a patient's mouth and show them exactly where a crack, cavity, or malocclusion exists helps them better understand their oral health and the reasons behind my treatment recommendations.

CBCT has also been a game changer. I've been using it for the past eight years, and I can't imagine practicing without it. The detailed 3D imaging allows me to diagnose conditions that may not be visible on traditional 2D radiographs, while also improving treatment planning for surgeries and dental implants. It provides a level of precision and confidence that ultimately leads to better outcomes for my patients.

What advice would you give to a dental student?

First, stay focused, be confident, and keep moving forward. Dental school has a lot of moving parts, and it can feel overwhelming at times. Remember that you worked incredibly hard to earn your place there. In many ways, the hardest parts of dental school are getting in and making it to graduation.

As you transition into the clinic, it can feel like you're balancing three jobs at once, but you're not doing it alone. Lean on the resources available to you, connect with



mentors, and support one another. Your classmates are experiencing many of the same challenges, and those relationships can make all the difference.

After graduation, always treat your patients the way you would want to be treated—or the way you would want a member of your own family to be treated. Stay true to the education and values that guided you through dental school. There may be times when you feel pressure from an employer, a team member, or even yourself to make a certain decision, but always rely on your training and professional judgment. Put your patients first, and make decisions based on what you know is in their best interest.

What is a fun fact about yourself?

I am a certified scuba diver, although I have not been diving in several years. I first became certified during a Caribbean vacation and would love to return to the sport someday. The most memorable diving experience I've had was in St. Lucia. The country was beautiful, and the people were incredibly welcoming, which made the experience especially memorable.

How has the GDA supported your professional growth?

Participating in GDA Leadership in 2019 was a turning point in my professional development. The program helped me build confidence as a leader, strengthen my leadership skills, and connect with an incredible group of dentists from across the state.

One of the greatest benefits has been

the relationships I formed through the program. Many of the dentists and colleagues I met during the Leadership Academy have become trusted friends and professional connections, and we continue to stay in touch today. Those lasting relationships have been just as valuable as the leadership lessons themselves.

Without saying "I'm a dentist," how would you answer someone who asks what you do for a living?

I am a health coach that focuses on oral and systemic health, with a focus on prevention and education. When necessary, I am an artist and a scientist who helps restore smiles and confidence in my patients and community.

What are some of your favorite summer activities?

Summer is all about spending quality time with my family including my two young daughters, who are 4 and 6. We love spending time together at the pool, gardening, cooking and making memories together.

As a working mom, I'm especially mindful of how quickly these years pass. I have often heard that about 75% of the time we spend with our children over our lifetime happens before they turn 12, and that perspective reminds me to be present and intentional with the time we have together. It's important to me that my daughters know how loved they are and how important they are to me.

They also love visiting the practice and get so excited when they get to "come to

work with Mommy" or help around the office in any way they can. Watching them take an interest in what I do makes those moments even more special.

What are you most proud of professionally?

I am most proud of becoming a practice owner while also starting a family. Leading a team while balancing the roles of wife, mother, business owner, and dentist has been both challenging and incredibly rewarding. Wearing all those hats has been a journey, and one that I truly enjoy.

I'm proud to have built a practice where I can provide the kind of dentistry I believe in—treating every patient the way I would want to be treated—while also growing my family. Finding that balance has been one of my greatest accomplishments.

None of it would be possible without the support of my husband. He is an incredibly hands-on father, and his partnership gives me the flexibility to balance my career with being present for our family. I'm grateful that we've built a life where we can support each other while raising our children together. 🦋



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DENTAL COLLEGE OF GEORGIA IN MEMORIAM:

Dr. Nancy Young (1967-2026)

NANCY YOUNG, DMD
Former Dean of The Dental
College of Georgia

The dental profession lost one of its most dedicated advocates

with the passing of Dr. Nancy Young, DMD, MED, on June 6, 2026, following a courageous battle with cancer. She was 58.

As dean of the Dental College of Georgia (DCG) at Augusta University, Dr. Young shaped the future of oral health in Georgia through visionary leadership, unwavering advocacy for students and an enduring commitment to expanding access to care. Her accomplishments transformed an institution, but those who knew her best will tell you that buildings, programs and awards capture only part of her story. Her true legacy is measured in the confidence she imbued in others, the careers she launched and the compassion she nurtured in thousands of students, faculty, colleagues and patients.

"Nancy had a remarkable gift for bringing out the very best in everyone around her," said Dr. Greg Griffin, DCG Associate Dean for Student Affairs and Alumni. "She had a unique ability to see potential in people, encourage them, and help them grow into the most successful version of themselves. Whether it was a student finding their confidence, a colleague taking on a new challenge or a young faculty member developing as a leader, Nancy was always building others up. She was resilient and determined, but also incredibly genuine. Her greatest legacy is not only what she accomplished herself, but the countless people she inspired, supported and empowered along the way."

Dr. Young earned her DMD in 2006 after a nontraditional path into dentistry,

balancing dental school while raising two young children. That experience stayed with her, and as a DCG alum herself, she brought it to every leadership decision.

"Having walked in their shoes, Nancy brought a rare, lived empathy to her leadership," said Interim Dean Theresa Gonzales, DMD, MS, MSS, COL (RET), USA. "She never addressed students from an administrative height, but always met them eye-to-eye, speaking from a place of deep compassion and personal understanding."

Dr. Young joined the DCG faculty in 2012 and quickly emerged as an influential educator and mentor. She became associate dean for student affairs in 2018, served as interim dean, and stepped into the role of dean in 2023. She championed student success while upholding the highest academic standards, expanding the Thomas P. Hinman Simulation Center, establishing wellness and attendance policies that still guide the college, and creating programs that strengthened student support and employee engagement.

Dr. Young's vision extended across Georgia. She played a pivotal role in launching DCG's Savannah campus, helping address the state's growing need for oral health professionals while upholding the educational excellence that defines Georgia's only dental school. She also established DCG's first clinic for patients with special needs in Macon, in partnership with Mercer University.

Her influence reached across the profession. As a member of the Georgia Board of Dentistry and an active leader





within organized dentistry, she worked to strengthen oral healthcare statewide and built lasting partnerships with dental organizations, alumni and practitioners.

Dr. Young believed research, education, patient care and community service formed one inseparable mission. She expanded faculty research initiatives and partnered with Dr. Babak Baban, DCG associate dean for research, to grow the Southeastern Regional Dental Research Symposium. Under her leadership, community outreach programs grew significantly and expanded access to care for underserved Georgians.

According to Dr. Gonzales, “Nancy led through empowerment, her vision was always transformational, never transactional. She brought relentless passion to addressing dental shortages in our state, driven by a simple, powerful conviction: where a person lives should never limit the quality of care they receive. Together, we shared the deep belief that while genetics may set our biological baseline, geography must never determine our health outcomes.”

Her colleagues consistently describe a leader who found her greatest strength in investing in others.

“Nancy never did anything for herself - it was always about the Dental College of Georgia and the people who made

it special,” said Dr. Greg Griffin, DCG Associate Dean for Student Affairs and Alumni. “Her focus was never on personal recognition or self-promotion. Every decision she made was guided by what was best for our students, our faculty, our staff, and the future of this institution. She poured her heart into helping others succeed and worked tirelessly to elevate those around her. Nancy had an unwavering vision of making the Dental College of Georgia the very best dental school in the nation, and she pursued that goal with passion, humility, and determination. Her legacy is not found in accolades she received, but in the lives, she touched and the stronger institution she left behind.”

That spirit of encouragement shaped every aspect of her career. She recruited talented faculty, encouraged professional growth, supported conference participation and celebrated successes across the college, whether in the classroom, clinic or community. She believed empowered people build great institutions.

Her leadership earned numerous honors, including fellowship in the American College of Dentists, the International

College of Dentists and the Pierre Fauchard Academy, along with the American College of Dentists Faculty Professionalism Award, the DCG ASDA Advocate Award and multiple outstanding faculty recognitions.

Outside dentistry, Dr. Young embraced life with the same enthusiasm she brought to her profession. An avid rower, runner and outdoors enthusiast, she and her husband, David, competed together in rowing regattas across the country and later became certified U.S. Rowing referees. She cherished time with her family and stayed active in her church and community. Dr. Young is survived by her husband, David Young; her children, Jefferson Whitfield Morgan (Kimberly) and Tara Morgan Smith (Casey); her grandchildren, Rhett and Stetson; and her brother, Jeffery Elliott (Debbie).

The Dr. Nancy B. Young Memorial Scholarship has been established to support future DCG students, ensuring her passion for developing the next generation of dental professionals continues for years to come.





**THERESA S. GONZALES,
DMD, MS, MSS**

Interim Dean,
Dental College of Georgia
Augusta University



DENTAL COLLEGE OF GEORGIA:

Partnering for the Future of Oral Healthcare in Georgia

Dear Colleagues and GDA Members,

It is a profound honor to step into the role of Interim Dean at the Dental College of Georgia—though my appointment comes with a heavy heart following the loss of our beloved Dean, Dr. Nancy Young. Dr. Young was a remarkable leader, mentor, and advocate whose authenticity, warmth, and steady vision transformed our institution. She personally recruited me to join the DCG faculty to help amplify our shared mission of expanding care to vulnerable and underserved populations across Georgia.

Having spent over four decades across academic healthcare, clinical practice, and military service, I have learned that organizations that thrive operate at the complex intersection of patient care, higher education, research, and community service. Leading academic health centers like ours recognize their role as essential safety-net providers and anchor institutions within their regions. Throughout these varied roles, my guiding core value has remained constant: leveraging clinical expertise and collaborative leadership to expand health access and improve patient outcomes. As I travel the state, I am continually inspired by the dedication and resilience of our dental community in Georgia.

As we look ahead, our institution remains steadfast in its core mission: delivering clinical excellence, advancing innovative research, and preparing the next generation of compassionate, highly skilled oral health leaders. Essential to this mission is our commitment to expanding healthcare access for vulnerable and underserved populations across our state. Through strategic initiatives—including the continued development and momentum of our new DCG Savannah campus—we are actively broadening our clinical reach to ensure high-quality care touches every corner of Georgia. Simultaneously, we are conducting world-class research that directly addresses real-world clinical challenges and community health disparities.

Finally, we are investing heavily in faculty development, leadership pipeline initiatives, and preserving institutional legacy while welcoming fresh perspectives. Moreover, our Continuing Education Office routinely offers robust continuing education (CE) programs and professional development opportunities to support alumni and community practitioners throughout their careers.

None of this vital work occurs in isolation, and this progress would not be possible without the unwavering support of the Georgia Dental Association. From legislative advocacy under the Gold Dome



that secures vital state support for novel programming to the generous student scholarships, mentorship, and clinical opportunities provided through the GDA Foundation and volunteer networks, GDA members are the lifeblood of organized dentistry in our state.

Outreach programs like the Georgia Mission of Mercy (GMOM), the Costa-Layman Health Fair, and Give Veterans A Smile (GVAS) initiatives exemplify how our shared commitment to service directly transforms lives in underserved communities. The strong, enduring partnership between the Dental College of Georgia and the Georgia Dental Association is critical to addressing the evolving healthcare needs of our state. Together, we are advocating for our profession, driving innovation, and transforming patient outcomes.

Thank you for your warm welcome and steadfast support. A special thanks to GDA President Peter Shatz for his direct and deliberate efforts in helping secure grant funding for our off-site rotations



L-R: AU First Lady Karen Keen, Gonzales, AU President Russell Keen at the 2026 Costa Layman Health Fair. Photos by AU Photographer Mike Holahan

and clerkships. In the days ahead, I look forward to working closely with each of you as we build upon our shared foundation of service and excellence. In the immortal words of Helen Keller, *"Alone we can do so little; together we can do so much."*

With sincere appreciation and gratitude,
Theresa S. Gonzales, DMD, MS, MSS
 Interim Dean, Dental College of Georgia
 Augusta University





DENTAL COLLEGE OF GEORGIA:

White Coat Ceremony

A New Chapter Begins for the Class of 2029.

For the Class of 2029, the white coat represents more than the next step in becoming a dentist. It marks a commitment to patients, to the profession and to the responsibility that comes with both.

That commitment was celebrated this summer as the Dental College of Georgia (DCG) welcomed the Class of 2029 at its annual White Coat Ceremony. Surrounded by family, friends, faculty and mentors, students received their white coats and

officially began the clinical phase of their dental education.

It is a meaningful transition—from the classroom and pre-clinical labs into the operatory, where the knowledge and skills they have spent years developing will begin translating into patient care.

But as DCG leaders and distinguished guests reminded the class, dentistry is about more than technical skill.

“Keep healthcare human” is the guiding principle behind the White Coat Ceremony tradition, which began in 1993 through the Arnold P. Gold Foundation. The ceremony is designed to reinforce the importance of



To learn more about DCG's traditions and rituals, please scan the QR code:



compassion, empathy and professionalism alongside clinical excellence.

For the Class of 2029, that message came through clearly. Interim Dean Dr. Theresa Gonzales encouraged students to remember that the trust patients place in them is one of the greatest privileges in healthcare—and one they must work to earn and protect.

Dr. Brad Greenway, representing the International College of Dentists, offered a similar reminder from his 38 years in private practice: patients may come to the office for a crown, a filling or a denture, but they are never simply a procedure.

They are people with their own needs, emotions and stories.

That perspective is at the heart of the student pledge taken during the ceremony, a promise to uphold the professionalism, ethics and compassion expected of those entering the dental profession.

The day also offered a chance for students to recognize the people who helped them reach this milestone. Class President Tyler Diamond reminded his classmates that while the white coats were placed on their shoulders, the achievement belonged in part to the family, friends and mentors who supported them along the way.

The Class of 2029 now begins a new chapter—one filled with first patient encounters, new challenges and countless opportunities to grow.

Their white coats will serve as a daily reminder of what they promised on this day: to keep learning, to lead with compassion and to care for every patient as a person.

Congratulations to the DCG Class of 2029. We're proud to welcome you to the profession and look forward to seeing the impact you make. 🦷





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We will also host a cocktail reception Tuesday evening at the beautiful Ludwig Sunroom, open to all registered spouses and guests. With peak scenery and peak learning, there is no better way to jump-start your biennium license renewal year.

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A 'PEAK' AT THE CE LINEUP



Jay Smith, DDS

Prosthodontic "Pearls" for Enhanced Efficiency in Implant Dentistry - Part 1

Tyler Rathburn, DMD

Airway Issues from Birth to Adulthood: Orthodontic Perspective - Part 1



Glenn Maron, DDS

Airway Issues from Birth to Adulthood: Surgical Perspective

Tyler Rathburn, DMD

Airway Issues from Birth to Adulthood: Orthodontic Perspective - Part 2



Tom Van Dyke, DDS, PhD

Is Predictable Control & Treatment of Periodontal Disease Becoming a Reality? Impact on Periodontal Bone Grafts & Regeneration

Jay Smith, DDS

Prosthodontic "Pearls" for Enhanced Efficiency in Implant Dentistry - Part 2



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LASER ENDODONTIC ABLATION PROCEDURE (LEAP): A Novel Approach to Root Canal Disinfection Using the Picasso Pro Diode Laser



**RICO D. SHORT,
DMD, BCE, FICD**

The field of endodontics is always changing. Is it time to “LEAP” into something new?

Root canal therapy has one primary biological objective: elimination of microorganisms from the root canal system and prevention of reinfection. While advances in instrumentation, irrigation, and obturation have dramatically improved clinical outcomes, complete disinfection of the root canal system remains a significant challenge.

The complexity of root canal anatomy—including fins, isthmuses, lateral canals, apical ramifications, and dentinal tubules—creates areas that are difficult or impossible to instrument mechanically. As a result, clinicians rely heavily on chemical irrigation, particularly sodium hypochlorite, to reduce bacterial contamination.

Although sodium hypochlorite remains the gold standard irrigant because of its antimicrobial and tissue-dissolving properties, it is not without limitations. Cytotoxicity, unpleasant taste and odor, risk of extrusion

accidents, open apices, incompatibility with certain irrigants, and incomplete penetration into complex anatomy continue to challenge clinicians.

As endodontics moves toward more conservative shaping and biologically driven treatment protocols, new technologies are emerging that seek to improve disinfection while preserving tooth structure. One such innovation is the Laser Endodontic Ablation Procedure (LEAP), performed using the Picasso Pro diode laser system by AMD.

Challenges of Current Disinfection Strategies

The success of root canal therapy is closely tied to microbial control. However, bacteria are not confined to the main canal lumen. Microorganisms can colonize dentinal tubules and anatomical irregularities beyond the reach of traditional instrumentation.

To address this challenge, clinicians have adopted a variety of activation systems, including sonic, ultrasonic, and laser-assisted irrigation techniques. These technologies are designed to improve irrigant penetration and enhance cleaning efficiency.

While these systems may improve irrigant distribution, they remain dependent on chemical irrigants and do not necessarily guarantee complete bacterial elimination. Additionally, many advanced irrigation platforms require significant capital investment, may increase procedural complexity, and treatment time.

Consequently, there is ongoing interest in technologies that combine mechanical, chemical, and energy-based approaches to improve canal disinfection while maintaining efficiency and affordability.

What Is LEAP?

Laser Endodontic Ablation Procedure (LEAP) is a disinfection protocol that combines a specialized diode laser tip with a proprietary irrigation solution. The objective is to utilize

both physical and chemical mechanisms to reduce bacterial contamination throughout the root canal system while maintaining safety.

The protocol utilizes the Picasso Pro diode laser, an 810-nm laser platform capable of performing multiple soft-tissue and endodontic procedures. A specially designed LEAP tip is attached to the laser handpiece and advanced into the canal following instrumentation. The tip contains a proprietary material that converts laser energy into heat, allowing localized thermal ablation of residual tissue and bacteria within the canal space.

Unlike traditional laser-activated irrigation systems that primarily agitate irrigants, the LEAP concept emphasizes direct thermal effects combined with subsequent chemical disinfection.

The LEAP Workflow (Figure 1.)



The LEAP protocol follows a straightforward clinical sequence:

1. Access and canal negotiation.
2. Instrumentation to approximately a size 20–25/.04 preparation.
3. Irrigation during shaping.
4. EDTA rinse and canal drying.
5. Laser ablation using the LEAP tip.
6. Placement of LEAP irrigating solution.
7. Saline rinse and drying.
8. Obturation.

One notable aspect of the protocol is its emphasis on conservative shaping. Because the laser tip measures approximately 200 microns in diameter, extensive enlargement of the canal



may not be necessary to achieve apical access. This concept aligns with the growing trend toward minimally invasive endodontics and preservation of radicular dentin.

The Picasso Pro Platform (Figure 2.)



The Picasso Pro is an 810-nm diode laser designed for multiple clinical applications, including soft-tissue surgery, periodontal procedures,

photobiomodulation, whitening, and endodontics. The system is controlled through a mobile application interface (a mini iPad) and incorporates wireless operation features (a Bluetooth controlled foot pedal).

For endodontic use, the platform employs disposable LEAP tips specifically designed for root canal disinfection. The versatility of the system may be attractive to general dentists and specialists because the laser can be utilized for a variety of procedures beyond endodontics.

The Role of the LEAP Solution (Figure 3.)

The protocol also incorporates a proprietary irrigating solution containing chlorhexidine and alcohol. According to the developers, this combination is intended to provide antimicrobial activity while reducing surface tension, potentially enhancing penetration into lateral canals and dentinal tubules.

Lower surface tension may improve wetting characteristics and facilitate irrigant distribution throughout complex canal anatomy. The solution is used following laser ablation as part of the overall disinfection strategy.

Safety Considerations

One concern frequently raised regarding intracanal laser use is heat generation and the potential for damage to surrounding periodontal tissues.

The LEAP developers evaluated temperature changes at cervical, middle, and apical root locations during laser activation. Reported

temperature measurements remained below the threshold generally associated with periodontal ligament injury. Histologic evaluation also suggested preservation of cementum and periodontal ligament integrity under the tested conditions.

As with any energy-based technology, clinicians should follow manufacturer-recommended protocols and receive appropriate training before clinical implementation.

Current Evidence

The most intriguing aspect of LEAP is its reported antimicrobial performance.

In vitro investigations demonstrated bacterial reductions exceeding 99.99% against *Enterococcus faecalis* biofilms. Subsequent in vivo studies reported bacterial reductions approaching 99.999% when the complete LEAP protocol was utilized.

Clinical observations also reported favorable postoperative outcomes, with substantial reductions in pain and symptoms following treatment.

While these findings are encouraging, it is important to recognize that long-term outcome studies remain essential. As with any emerging technology, broader clinical validation, multicenter investigations, and long-term healing assessments will ultimately determine its place in routine endodontic practice.

Clinical Implications

The future of endodontics will likely involve a combination of conservative instrumentation, enhanced disinfection, and biologically driven treatment strategies.

The LEAP protocol represents an attempt to address several persistent challenges simultaneously:

- Enhanced disinfection of complex anatomy
- Reduced reliance on sodium hypochlorite
- Conservative canal shaping
- Simplified workflow
- Expanded use of diode laser technology in endodontics

For clinicians already incorporating lasers into their practices, LEAP offers an additional application that may complement existing treatment protocols. For those considering laser integration, the ability to utilize a single

platform across multiple disciplines—including soft-tissue management, photobiomodulation, and endodontics—may improve overall value and versatility.

Conclusion

Root canal disinfection remains one of the most important determinants of endodontic success. Despite significant advances in irrigation and instrumentation, complete elimination of microorganisms from the root canal system continues to be a clinical challenge.

The Laser Endodontic Ablation Procedure (LEAP) introduces a novel approach that combines thermal ablation with chemical disinfection through the use of the Picasso Pro diode laser and a proprietary irrigation protocol. Early laboratory and clinical data suggest promising antimicrobial effectiveness while supporting minimally invasive shaping concepts.

As additional research becomes available, LEAP may represent an important step toward more predictable, efficient, and biologically focused root canal therapy. Regardless of future developments, innovations such as LEAP highlight the ongoing evolution of endodontics and the profession's commitment to improving patient outcomes through science and technology.

Disclosure: Dr. Rico D. Short is an independent expert clinical evaluator for various dental companies. He serves as a consultant, educator, and key opinion leader for AMD Lasers. The author has experience using the Picasso Pro laser system in clinical practice. The views expressed in this article are intended for educational purposes and are based on currently available evidence and clinical experience. Clinicians should exercise their own professional judgment and evaluate emerging technologies in the context of individual patient needs and treatment goals. There is more evidence based research in progress utilizing the LEAP concept. ■



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ClassPass ... 22

DDD Foundation ... 53

DDSMatch ... 18

Fortune Law Firm ... 54

GDA Dental Supply Company ... 26

Georgia Dental Insurance Services ... 31

Henry Schein ... 15

Center for TMJ & Sleep Therapy,
Dr. Manoj Maggan ... 52

Medpro ... 44

Moore Colson ... 37

Oberman Law Firm ... 5

Panacea ... 4

Practice Quotient ... 52

SouthState Bank ... 54

UBS ... 45

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