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Dr. David Phelps

Dr. Mead: Have someone pay for your dental school education if at all possible. The military was a thing when I was there. Now for me, it would be the thing. It would be the only thing, as far as I'm concerned. You have to understand that the income potential with debt that is just not the same as it used to be. So, live as cheaply as you can. Live within your means as much as possible. I don't think that's what a 26-year-old coming out of dental school wants to hear, though.

You are listening to the *Dentist Freedom Blueprint* podcast, with David Phelps. Navigating you through the uncharted waters of a turbulent economy with straight-forward advice to, transform your practice into a self-sufficient cash machine, compound your net worth assets, and multiply, multiply, multiply your passive cash flow streams.

Dr. Phelps: Good day, everyone. This is Dr. David Phelps with the Freedom Founders Mastermind Community and Dentistry Freedom Blueprint Podcast. Back to you today with what's going to be, I think, a really fun interview, one that I've been looking forward to doing for really, quite some time. Our guest today is Dr. Alan Mead. Alan is a dentist and practice owner in Saginaw, Michigan. He graduated from the University of Minnesota school of dentistry in 1997, bought his current practice in Saginaw in 1998. He's been blogging since 2008 at meadfamilydental.com, and thebloggingdentist.com. And he's one of the creators of the Dental Hacks Podcast, which has been downloaded over 1 million times. He's also the creator of the Alan Mead Experience, a more personal podcast about dentists and the stories they tell. Alan lives on a horse farm in Midland, Michigan with his wife, Deborah and two sons, Shawn and Jacob, and an ever-changing menagerie of horses, dogs,

cats, and a miniature donkey named Floyd. So Alan, good to have you on here today, sir.

Dr. Mead: Thank you.

Dr. Phelps: Let's just start right there with Floyd. Tell me about Floyd, a miniature donkey. How big is a miniature donkey?

Dr. Mead: We've had a lot of horses. Since 2004 we've been kind of, a decent-sized horse farm. So, we board a lot of horses. Miniature donkeys are, oh, they probably are a little taller at the shoulder, about at your waist, something like that. They are about as wide as they are tall. They tend to be pretty heavyset. They are amazing pasture pals for other horses, so if you have a horse that's, you don't like to leave horses alone in a paddock. So he's sort of our, he's great. He can go wherever, do whatever. The other thing that you don't know about donkeys and I've learned, is they're super territorial. They are real aggressive. So if you ever had coyotes or any kind of predators, they are real aggressive towards it. So we make sure the dogs and cats don't go in the paddock, because he would love to stomp on them. The other thing, they live a really long time. They live 40, 50, 60 years, potentially. So, Floyd's gonna be a part of our family for a while, I think.

Dr. Phelps: That's amazing. I did not know that at all.

Dr. Mead: Yeah, these are all things we've learned.

Dr. Phelps: Well, that's why I brought you on here today, because I knew we'd bring something out that would be relevant to somebody. So, it's good to get that. Awesome, awesome. So Alan, what was your lead in to dentistry? I'm assuming maybe, your dad?

Dr. Mead: My dad is a dentist, yes. My dad's a dentist. He sold his practice, it's like four or five years ago, now. But he practiced in

Midland, Michigan, had a big practice there. He actually works in my office doing removable a day or two a week most weeks, too. So, he's still in it.

Dr. Phelps: Excellent, excellent. For you, when there's a relevant personal story, and Alan, you know as well as I do, as many people as we both know, people that I think look successful probably are successful to different degrees in life, however you want to describe success. But everybody who gets "there," whatever you want to call it, I think when you dig deep, you go back, there's always times of struggle, turmoil, setbacks, people might even say failures, whatever you want to call it. I don't look at life as failures. I look at life as testing and learning. And I think so many people in life do that, but they don't always have a chance to share, maybe they don't want to share what that was like. They want to just, a lot of people say, "Just look at me, look at me, I'm really great."

You're not one of those people. And I know that, because I've followed you for quite some time. You're a blogger, you're out there. You're not afraid to talk about your story. And I think it's relevant to touch a little bit on maybe, some of the challenges that you dealt with. Because there's people listening right now today that are going through some tough times and feeling like they are all alone, because who do talk to, right? Who do you share stuff, you're supposed to be a professional. You're supposed to be well-educated. You're supposed to have it all together. And who does, really, today? Could you talk a little bit about that? Because you share openly. I think it's good for us.

Dr. Mead: Yeah, so I'm a recovering drug addict, an alcoholic. I literally, just two weeks ago celebrated 16 years clean and sober.

Dr. Phelps: Congratulations.

Dr. Mead: Which is interesting, too, because it's funny, because when I tell the story, when I think back to it, it feels like I'm talking about a different person completely. It hasn't affected me recently the way that it, 16 years ago it was so much closer to real life. And other people say, "Well, you are a different person." It's true, but it also amazing what time can do to something. Because seriously, this was really raw. So, the first, basically the first four years of my career, I graduated from Minnesota in '97. I really got started with, I probably drank like an alcoholic in dental school, but I didn't have any consequences from it, because I always lived close to wherever we were. I didn't drive. So, I avoided real consequences.

But when I got home, I started working with my dad back in Michigan. And I didn't have the social scene that I had a dental school. And so, I knew what would help me cope with stuff was basically, alcohol. I knew that it was something, it's not like I came out of dental school going, "I really need to find something to replace my alcohol habit." What I know is that my coping skills were poor, and that I knew that drinking made me feel better. But drinking alone, I didn't have a big social scene back home, so drinking alone and going to the bar alone or drinking in your car alone seemed weird.

But lo and behold, at the time, you probably remember this, they came out with, they were giving samples of a new medication called Vicoprofen, which was basically, a hydrocodone preparation mixed with Ibuprofen instead of acetaminophen. And it was advertised in dental journals and stuff as being really great for postsurgical patients. And to be honest, it really is. It's probably more effective than acetaminophen preparations.

In any case, they sent these to dentists. All you had to do was send a little postcard back and they would send you a box of

these. I'd love to tell you that I started taking these because I twisted my ankle or had a back problem. I didn't at all. I basically, started taking them because I knew I liked a buzz, I'd never tried that. And what happened was, it took no time at all for me to realize, "Okay, I need this in my life." This is part of my life now. Because drinking alcohol in the situation I was in, was weird. It was going to be awkward to do that. But I can do this and no one would know I was using it.

So, that's how I got started. This was back in 1998. And I could tell the big drunk-a-log, as they call it, but the bottom line is, over time, it's got a lot worse. I started using more and different stuff, and my life spun out of control. And it was basically because I didn't have any mechanisms to cope with being a new practice owner. I bought a practice at this time. Shoot, I bought a practice partially because I knew I couldn't continue to get this stuff without my dad and the office seeing what I was doing. So part of it was I literally, an office came up for sale, the same office that I'm in, but I bought it partly because I knew I could be the king of my kingdom at that point.

Dr. Phelps: Right.

Dr. Mead: I made a lot of really poor decisions at the time, or for the wrong reasons because I was really driven by being able to use the drugs that I liked. It got crazy. And you know, as you can imagine, it gets crazier and crazier. I was active for about four years. And interestingly, the reason that I ended up stopping, or the reason that, I got intervened on by my family and a good friend of mine. And the good friend, he's an oral surgeon. He noticed, it was really crazy, I had a cyst on my neck. It ended up being an ingrown hair, it was a lipoma, and it was something, it was sensitive.

Dr. Phelps: Right.

Dr. Mead: And I was, "Hey, can you take this off for me?" He said, "Yeah, I'll sedate you." And I thought that would be cool. I could score a script from him, we'd get this thing taken care of. When he tried to sedate me, I had such a high tolerance, there wasn't enough to sedate me, right? It was crazy. I never got sedated. And so, literally, I don't know if I was being stupid if it was a cry for help, but basically, he knew something was going on. He may have known to start with. That really sealed the deal. So he kind of, came after me a little bit. And I kept denying it and denying it. Finally, he went to my family, and they came and did an intervention on me, right in the office, and basically, took me away to treatment.

So, I went into treatment for 4 1/2 months in January of 2002. I'd gotten married in September of 2001. I got married three days before the September 11th thing. So, I mean, a lot of weird stuff happening. But I got clean right after that, in January. I was in treatment for 4 1/2 months. My dad covered my practice while I was gone, amazingly enough. So, I'm still in the same practice that I'm in. I was on what's called an HPRP. In Michigan, they have a monitoring program where, I was on three years where I was required to do therapy, I was required to check in.

I had to do random drug screens. I did tons of 12-step meetings and therapy. And basically, they followed me for 3 1/2 years. And I've been, I've been clean and sober ever since I went into treatment, which is an outlier, to tell you the truth. Most people don't do that well. I don't know exactly why, maybe because I used to use alone. I didn't use with anyone. So, once the secret was out, it felt like I was able to, I don't know. But that's kind of, the long and short of it.

I started speaking about this probably, I think I spoke for the first time at the MDA meeting, and it rings a bell there. I think,

okay, it was 2008. It was 2008, for sure, because my oldest son was just a baby. So I told my story in public for the first time in 2008. That was 10 years ago, wow. I've spoken a bunch of times in a bunch of places and talked about it and everything like that. So, that's kind of, where I come from.

Dr. Phelps: So Alan, when you're at the depth of that point where your buddy, the oral surgeon helps with the intervention, and now it's out, you have to help me out. Because I want to know, what are the feelings, what are your emotional feelings? You're relatively newly married, obviously, your family has a reputation in the community. So, I'm trying to help someone else who's right now maybe, in a deep, dark hole in their life right now, maybe, and it's not revealed right now. What advice would you give them?

Help them with your emotions, and what advice would you give them? Because obviously there had to be people around you that loved you, that cared about you. They knew within you there was this great person. But right now, that great person was being greatly subdued by this addiction, this situation. So, give our listeners a little bit of that feeling, and how you came back out and dealt with the shame, or whatever you want to call it. I don't want to put words in your mouth.

Dr. Mead: No, I get it. What's interesting is, like I said, I'm not gonna say it was secret. I think a lot of my office team knew what was going on. I think my family knew something was going on. I let them believe that it was anything but what was actually happening, of course. So, the bottom line is, it wasn't like people knew that I was using drugs the way that I was, publicly. But I did go away for 4 1/2 months, randomly. And yeah, there's a ton of shame, because all of a sudden people that thought one thing of you are hearing something completely different. At the time, I was the president of our local society, the ADA's local chapter and

everything like that. And I had to give that up. I was gone for 4 1/2 months.

I had to admit to a lot of people what I had been doing. The very first time I came back, the very first time I had to do a drug screen, I got there at 5 o'clock in the morning so I could be in and out and I wouldn't have to deal with anyone. The bottom line is, it hands you a lot of humility. I mean, basically, not easy for dentists. But I got into treatment and I just started, I decided that I was gonna do what they told me to do. It took a lot of humility. You just have to decide, "Okay, what I'm doing's not really working. I'm here. I'm not going anywhere. I might as well do what they say, and maybe it'll work."

So, that's essentially, what I did. When you're in the deep, dark hole, you're not very suggestible. I mean, the problem is, when you're in trouble, you think you can do it alone. You don't want to admit to anyone what else is going on, for fear of what they are going to think or what they are going to say. No one wants to admit when they are screwing up, and everyone always thinks, "Well, if I just try this, maybe it'll work," that sort Of thing. I would say that, reach out. Reach out.

If you're in a position like mine, I wasn't going to be able to just tackle this alone. I mean, I had never even heard of, I'd never gone anywhere like a 12-step program or anything like that. That would be a good start. But the reality is, it never even occurred to me that I could get that kind of help. I felt like I was the only guy in the whole world ... dentist that would have this kind of a problem. How did I get myself into this? I gotta get myself out of it.

Realistically, you can't really get yourself out of it. I'm not saying you have to tell the whole world like I did, but at least you have to kind of, get honest with some people and get some help. I'm

the chairperson of the Michigan Dental Association Committee. It's called Care and Well-being, and we help a lot of dentists in this situation. And it's routine that, they want to get help, but they don't want to leave their family, they don't want to leave their office, they don't want to inconvenience you. But I think to some extent, it's going to inconvenience your office. Because it's a big enough deal, it's a medical problem. You gotta go away for it.

Dr. Phelps: Yeah. We are all vulnerable. And I think, again, I'm just asking you Alan, because you deal with this, you help others with these areas of life that are difficult. But we as professionals, people who have gone through a ton of school, had to cross a lot of barriers, reach a lot of mountaintops, we start to feel like, well, we can do this. We can control our lives. We've got this. Is that some of the feeling? And I don't think arrogance is the word, but it's that rugged individualism that I think we built. And we want to take on the world. We want to provide for our families, we went to be the best dentists, and community leaders. I think we rise up and we put ourselves again, not on a pedestal, but we feel like, "That's our responsibility. And if we show weakness, we are not there." Is there a little bit of that, there?

Dr. Mead: Yeah, totally. Well, one thing is, okay, when you're a dentist, I went into detox first for a long weekend. And I was the only professional there. There were some pretty, it was pretty earthy, let's just say that. And my entire experience in treatment help me realize that if I look at myself as a dentist before a person, before being a person, before being a human being, I'm probably in trouble. There is a lot of that. Because of my profession, because of my education, I'm different and better. And to be honest, there's no reason that we shouldn't feel that way. The whole world points it. But I'll tell you what, life's better as being a human first and being a professional second. It

really is. Because I felt like I wasn't worthy of my profession. I felt like if anyone knew what I did, there's no way I could continue doing what I'm doing, because there's so much to, so much is hung up on your education, your profession, all that stuff.

And I feel like you'll do better being a human first. We all put our pants on the same way. And frankly, you can learn from people that didn't go to dental school. You can learn from people that aren't, I was in treatment with physicians, tons of anesthesiologists, family practitioners, surgeons, nurses. I was in a treatment center that was a lot of healthcare professionals. And there was a fair amount of those guys that were there because they were in trouble, but it wasn't soaking in, because they were above this.

And the thing is, is that, my problem was a human problem. My problem wasn't a dentist problem. So, I wasn't really above it. And frankly, I was attracted to the people that, after a while I realized I was gonna learn a lot more from the people that weren't struggling with what, my whole professional, like, my dad was frustrated because I was in treatment for months before he and I even talked about what I was going to do, if I was gonna go back to dentistry or not. He wasn't sure. I mean, I knew I was going to all the time, but I didn't, I sort of, had to take that hat off for a while, if you will. I think it helped a ton that I did that.

Dr. Phelps: So now, now we are years past that, and you have very quickly become a leader, an influencer in our industry, our profession. You blog, you speak, you've got Dental Nations Podcast with your buddy Jason Lipscomb. So, how much of that's come out of kind of, the turn, the turn from being in the hole and coming out, and how much of this is part of you wanting to give back? Because I sense a lot of that in you today. Is that part of this?

Kind of, what's your mission, besides being a great dentist? What's your mission today?

Dr. Mead: It's really funny, because a lot of this stuff was relatively unplanned. I'd love to tell you that I put my head on straight and I knew exactly what I was gonna do. It's not really like that. I mean, basically, I feed horses a lot of days. I have a 40-minute one-way commute two times a day, so I've got a lot of time in headphones. And so, back in the mid-2000's, I knew that, I learned about what podcast was. I'd been listening to podcasts for years. I started listening in 2006. It took a while, and

So, all this stuff is, I kind of, just started. I will tell you this. The most important thing that's ever happened to me is not asking permission to do that stuff, to just, why did I start blogging? I didn't have a website, and I wasn't gonna pay someone a bunch of money to do it, so I just started writing stuff. Realized I liked it, I was pretty good at it. And so, that sort of, stuck. The podcasting thing was a fair amount of me going, "Man, I could

do that." And then instead of asking if it was necessary or if I

actually, I was a blog reader back then, too. Seth Godin was a

professional, you should be writing a blog." So I did. That's the

huge influencer to me. He was always, "Look, if you're a

only website I have, too.

should, I just did it. We just did it.

And I'm not saying we did it because we are awesome.

Actually, we kind of, sucked in the beginning. Had no idea what kind of response we'd get. And I think the Dental Hacks, in particular, got big fast because we were there at the right time. It was the right thing at the right time, and so that's been a huge boon. But I would tell most people, for one thing, don't wait till the idea's perfect, and don't wait till the idea's perfectly formed. You should do it. And if it doesn't work out, do something else. The story is, don't wait for permission and don't tell everyone

your idea and asked their opinion of it, because most people will hate it.

Dr. Phelps: Exactly.

Dr. Mead: And they won't understand it. I'm telling you, the podcast was all about that. No one understood. No one understood. To this day, I will run stuff past people, but I also have to go, "Man, you know," you have to be okay that your good idea might be poohpoohed by people because they just don't understand it. That's so real. Probably, for creative types, man, bounce it off people. But take it with a grain of salt. You don't need permission to do what you do.

Dr. Phelps: That's really, really good advice, Alan. I think that's well-stated. Like a lot of us, you love to take in information. And there's so much out there today, with the Internet in general, but social media, podcasts, YouTube, and there's tons out there. How do you discern what to take in? Because there's only so many hours in the day. How do you distill it down to, "This is what I need to hear"?

Dr. Mead: I literally, struggle with that every day. I mean, I literally, struggle with that every day. Because first off, I mean, we have a really big Facebook page. Dental Hacks Nation is a big Facebook page full of dental people. And there's a lot of noise that you have to kind of, weed out to get the signal, if you will. I mean, there's a lot of great stuff there. There's a lot of great stuff there that just isn't great for me, necessarily. It's a struggle. There are some people that I'm always going to try and read, but podcasts have been helpful for this because you find your trusted sources and kind of, start with that. Because you only have so much time.

And Facebook is literally, the biggest time suck in the entire world. And it is frankly, I occasionally, have to take it off my

phone and my iPad and stuff, because it'll eat more time than it's worth. It's one thing if you're just kind of, if you're, I don't watch TV anymore. I don't have time for that. I'm probably more likely to be on the computer. But let's be honest, I don't blog as much as I used to, and I want to. And a lot of my time gets sucked up in the little dumb things that are less important.

So, you really have to, you have to kind of, defend your time jealously, a little bit. It just so happens that podcasts and audiobooks are a real good fit for me, because I end up with a lot of time, I mean, when you're driving, you can't do anything else. You can't watch video, you can't, so podcasts and audio things work very well. And the other thing, I'm the only employee, or one of the only employees at the farm, so I'm in headphones that way. And that's actually, good exercise.

So I can actually, that's three things with one stone, feeding the horses, getting a good walk in, and listening to some good stuff. So I think when you can multitask on things that are multitaskable, that's really good. I have an app on my iPad called Pocket, and it's a little button you push, basically. And it's a reader, it's a web reader. So if I find an article that looks good to me, I'm gonna put that on Pocket so I can go back later and read it. And that way, I don't have to be looking actively to read. On a browser or on Facebook I literally, can go back and say, "This is something that looked good to me." That's been helpful. There is a ton of those readers out there. I'm a fan of Pocket, because it's cross-platform. I can read it on my phone or my browser-

Dr. Phelps: Right.

Dr. Mead: ... or iPad. That's a huge deal. You have to kind of, you have to curate your own content. And I don't do it perfectly all the time.

But there's some stuff you know you're not going to get stuff out

of, versus, there's certain podcasts that I'm going to listen to every time they come out. And there's certain ones that I'm gonna look and see what the topic is before I dive in. So, you have to be, you have to curate your time. There's only so much time in the day, and there's only so much time you have for taking information in.

Dr. Phelps: Alan, since you've been doing this for a while, that is, blogging and your podcast in the dental world is probably the largest one out there, in terms of members and people that interact, what's the avatar, do you think, of our population? I'm talking about dentistry, specifically, now. We've got 130,000-some private practicing dentists. What's the avatar? Who are we, I say you and any other people who are out there actually podcasting or blogging, who are we reaching and who are we not?

Dr. Mead: I haven't done it for a while, but we did an actual survey using some SurveyMonkey stuff a couple of years ago. Interestingly, we did it too early on. I did it soon after we started the podcast, which was dumb, because I didn't have the listenership. But we skew, and I think probably all podcasts skew, specifically young, probably within the 26- to 34-year-old age group, which is funny, because I'm 10 years older than that. I'm older than that group, but I know that podcast listeners skew young, because they are so comfortable with Smartphones. And that's where most people listen to Them. They listen to them on their phone.

And I think that's one of the reasons I feel like podcasts are very specific to audio for me. I know that there is video podcasts but honestly, podcasts to me are, I'm sort of a purist, they are an audio phenomenon. And they are great because you can take stuff in while you're doing something else, whether it's exercise, or gardening, or walking, or driving to work, or whatever. It's literally, the only time I feel like actual multitasking

works. So, I feel like probably, younger folks understand that better. Now, that's not to say that older folks can't get it, because once they do, they find it super, super helpful, I know.

But I know that our population tends to be younger. And for that reason, I think there's a lot of, the subjects of startups, practice purchase, I think we skew towards that population. I know the Dental Hacks does. I'm going to Voice of Dentistry in a couple of days, and I know that I'm going to be one of the oldest people there. And that's okay, though. It's good. Hey, it keeps me young. But it's also, I think that's who's listening. I think that's who understands the medium.

Dr. Phelps: So to that point, do you think the older generation, so say above 34 years, still gonna be in practice for 10, 15, 20, maybe 25 years, is that group in general, missing out on what's happening? Because again, because I'm active like you are, and I'm definitely older. I'm not in that avatar space that we just described. But I see the issues as you do, as the other people who are active. Do you think there's a lot of our population that's just kind of, running blind out there, that's frustrated, but they don't have a place, a community to go where they can pick up, because it's just not their place, it's not their media? What's happening to them?

Dr. Mead: It's interesting, because Facebook is growing significantly in that older age group. In other words, a lot of the younger folks, Facebook is not as strong of a medium. That's one reason to be in the Facebook space, obviously. It's one reason to kind of, be where we are, because we do, I think our Facebook group probably has more older folks than podcast listeners. It is hilarious, too, because the Facebook group started after the podcast. But the Facebook group is so big, there's a ton of people on Facebook that have no idea that there's a podcast at all. And literally, we have a lot more people in that Facebook

group then we have listeners to the podcast. And that is, clearly, we've been trying to break into that market.

But I think that the reality is, I want to say that maybe the written medium and the social media style might hit that age group a little bit more. So, I do think that they are getting some value from peer interaction on some of the say, Dental Town, Dental Town is doing very well, still. That's kind of, where I got my start with a lot of this stuff. A lot of the Facebook groups, they don't necessarily, skew as young, I think, maybe. I have any actual evidence to say that, but it feels like the Facebookers don't skew as young as maybe, the podcast listeners do.

Dr. Phelps: Good. The future of dentistry, that's a big wide open question, and I don't expect us to solve it or delineate it in a few minutes here. But because you do deal with a lot of the younger people that are coming out of school that are doing startups, or figuring out how to go from associate to private practice, if that's what they want to do, the debt issue, managed care, corporate. Can you just sum up in a few sentences where we're headed, and any the answers on the horizon that you see?

Dr. Mead: It's funny, because everyone sees, you just listed about 10 real challenges for a younger dentist. And everyone sees them. And I'm not convinced that anyone has the right answer for it.

Corporate doesn't scare me as much maybe, as it did a couple years ago, because I think that, I think A, that it's a reality. It's a reality. I don't know that it's a bad thing. I think some of them might be worse than others. That doesn't scare me as much. I do think that it seems like people that come out of dental school now, still, in their heart of hearts, would like to be an owner at some point.

Whether that's through a corporate structure or a private practice, I don't think private practice is dead. I do think the debt thing is, it's kind of, on the educational system that, even undergrads, the debt is too much. I don't know that it's worth what we are paying for it. And I hate to, I always come out sounding like such a downer that way. But it's hard. I don't know if I would do it again myself, just because there's so much debt.

But the other thing is, that I think that there's a little concern about, well, there's enough work to be done by everyone, but is that over-treatment? There is so much going on there. What I would say is, live cheaply, If at all possible, particularly in school, oh my gosh. Because in school, they're gonna give you as much money as you want, and you'll hang yourself. That is a problem. So, if you're a student, understand that whatever dental school you go to, when you get out, same degree. No one ever asks you where you came from. So, honestly, if you can look at that, have someone pay for your dental school education if at all possible.

The military was a thing when I was there. Now, for me, it would be the thing. It would be the only thing, as far as I'm concerned. I have a lot of friends who went the military route and came out looking really good when it came time to look at purchasing a practice. You have to understand that it is not, the income potential with that debt is just not the same as it used to be. So, you know what, don't, live as cheaply as you can. Live within your means as much as possible. I don't think that's what a 26-year-old coming out of dental school wants to hear, though.

Dr. Phelps: No.

Dr. Mead: I understand. I was there. It's easy for me to say as a 46-year-old, but it is hard, because you've worked hard and you want

some of the spoils. But yeah, with as much debt as you probably have, you need to hold off as much as you can. Finding a job as an associate is, that's such a hard thing. That used to be the gold standard. I don't think that it is anymore. But try and be as wary as to what kind of situation you're getting into as possible. It's easy to say, but at 26, I didn't know anything. I had my dad there.

Dr. Phelps: Sure.

- Dr. Mead: But I mean, be as wary as possible. I would say honestly, when you have offers or you have jobs that you're looking at, talk about them with someone you trust, maybe even bring them to social media-type things where people can kind of, kick it around and give you a perspective that's outside of yourself. Because that perspective, having someone who you trust to talk with, is a huge deal.
- Dr. Phelps: That's great advice, great advice, Alan. All right. I want to give a quick plug for Voices of Dentistry, actually happening this week. But for people ho are interested in following and seeing what's going on there, give us just a quick overview of what that's about, and how that came about.
- Dr. Mead: Well, the Voice of Dentistry, it's a meeting, it's a dental meeting that features dental podcasters. Now, what's funny about it is, we have, last year I think all of the speakers were dental podcasters. This year we have some other featured speakers that are not podcasters themselves, but are kind of, featured in the space. We have a lot of speakers that are podcasters. And then there's a lot of podcasters coming. What we found was, and I don't know why you were not there, Dave. This is crazy. I don't quite know how you did that. So, next year you're going to be there, for sure. You qualify.

It's cool. The concept was, proof of concept was last year. The best part of the whole meeting, as much as the speakers being good, was the podcast lounge, which is where people, podcasters would go to do interviews and people would go to be interviewed. And I believe that's where it's at. This year, it's funny, we have an exhibitor space and then we have the podcast lounge separately. And I'm, why did we do that? So this year, it's all in one big room. It literally, is the most interactive dental meeting you'll ever meet. The exhibitors are all in on it, the podcasters are all there to interview, the speakers are all going to be interviewed.

Regular folks are going to be in it. It is the most interactive meeting you'll ever be in. And we had such a blast. It was magic last year. This year's in Scottsdale. You can check it out, voiceofdentistry.com. If you're around there, you can still get a ticket. But it starts on Friday, the 26th, so it's coming right out. It's a blast. We put it together with other podcasters, Dr. Mark Costes, Jason Rye, and Dr. Justin Moody are kind of, the planners of it. But, you'll recognize a lot of podcasters on the speaker docket.

Dr. Phelps: Dr. Alan Mead, fantastic, having a chance to talk with you today. You gave a lot of great pearls. You talked about your back story. Really, really outstanding. Once again, Dental Hacks Nation on Facebook, meadfamilydental.com, thebloggingdentist.com, The Alan Mead Experience, The Voice of Dentistry. You've got a massive platform there, but I would recommend anybody really connect with you, Alan, in one of the areas, or maybe multiple. Thanks again for being here today. Thanks for being the leader-

Dr. Mead: You bet, thanks for having me.

Dr. Phelps: Absolutely, you bet. Have a great day, and we'll talk soon.

Dr. Mead: You, too. Thanks, David.

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