

Oral Health and Fluoride Varnish

CHILD AND TEEN CHECKUPS (C&TC) FACT SHEET FOR PRIMARY CARE PROVIDERS

C&TC Requirements

General

At each C&TC visit, the following is required:

- Perform a thorough physical exam of the dentition and oral soft tissues.
- Provide anticipatory guidance on prevention of caries and the importance of regular preventive dental care.
- Provide fluoride varnish application (FVA) at every C&TC visit, beginning at the eruption of first tooth, through age 5 years. FVA may also be provided for older children based on risk factors.
- Provide a verbal referral to a dental home at every C&TC visit, beginning with the eruption of the first tooth, or no later than 12 months of age.

C&TC providers should also refer children to a dentist for sealants when permanent molars erupt, typically around 6 and 12 years of age.

Personnel

Physical exam, anticipatory guidance, FVA, and verbal referral to a dentist may be provided by a physician, nurse practitioner, physician assistant, or registered nurse who has completed the 3-day C&TC training from the Minnesota Department of Health.

FVA may also be applied by trained clinic staff under supervision of the health care provider.

Documentation

Document each of the required components, including verbal or written consent for FVA, and application of fluoride varnish or reason why it was not applied.

For documentation examples, refer to the [C&TC Provider Documentation Forms \(www.dhs.state.mn.us\)](http://www.dhs.state.mn.us).

Procedure

Physical exam

Lift the lips and include a thorough examination of the teeth and soft tissues of the mouth as part of the routine physical exam.

Anticipatory Guidance

Instruct parents to avoid sharing drinks or utensils, perform oral care from the eruption of the first tooth, and avoid giving sugary drinks. All children should have their teeth brushed for 2 minutes twice a day (Smiles for Life, 2015).

Educate about caries risk prevention, including avoiding a diet high in refined sugars and low in calcium, and avoiding cigarette and drug use (Council on Clinical Affairs, 2014).

Fluoride Varnish Application

Refer to [Fluoride Varnish in the C&TC Setting \(www.health.state.mn.us\)](http://www.health.state.mn.us) for FVA information, resources, and training.

All staff providing FVA should complete a recommended training, such as the online course: [Smiles for Life Caries Risk Assessment, Fluoride Varnish & Counseling, Course 6 \(www.smilesforlifeoralhealth.org\)](http://www.smilesforlifeoralhealth.org)

Verbal Referral to a Dental Provider

At every C&TC visit, beginning at the eruption of the first tooth, a verbal referral to a dental provider must be provided to support the family in establishing consistent preventive care in a dental home.

Additional Recommendations

Oral Health Risk Assessment

An [oral health risk assessment \(www.aap.org\)](http://www.aap.org) can be used to decide if oral fluoride supplement or an active referral to a dental provider is needed. (Smiles for Life, 2015).

Dental Sealants

Refer children to a dentist when permanent molars erupt. The dentist will assess and apply sealants, if indicated.

Importance of Oral Health

Dental caries, or tooth decay, is a preventable condition and is the most common chronic disease in children (Smiles for Life, 2015).

Children and adolescents on Medicaid are less likely to receive preventive dental services and are at risk of developing early childhood caries (Council on Clinical Affairs, 2014).

Professional Recommendations

American Academy of Pediatrics

Children should visit the dentist every 6 months or as recommended by the dentist, beginning at the eruption of the first tooth.

Providers should inquire about the fluoride in the child's drinking water, beginning when the child is 6 months old, and prescribe a fluoride supplement if deficient.

U.S. Preventive Services Task Force

Primary care clinics should provide FVA to the primary teeth of all children, beginning when their first tooth erupts, through 5 years of age (Grade B recommendation) (Moyer, 2014).

American Dental Association

Children who are at risk for developing tooth decay should receive dental sealants on primary and permanent molars.

Resources

Minnesota Department of Human Services

- [Minnesota Health Care Programs Provider Manual C&TC Section \(www.dhs.state.mn.us\)](http://www.dhs.state.mn.us)

Minnesota Department of Health

- [Fluoride Varnish in the C&TC Setting \(www.health.state.us.mn\)](http://www.health.state.us.mn)
- [Child and Teen Checkups \(www.health.state.us.mn\)](http://www.health.state.us.mn)

Other resources

- [Guidelines on Caries Risk Assessment and Management for Infants, Children and Adolescents \(www.aap.org\)](http://www.aap.org)
- [Dental Fluoride Supplements \(www.ada.org\)](http://www.ada.org)
- [Children's Oral Health \(www.aap.org\)](http://www.aap.org)

References

Council on Clinical Affairs. (2014). Guideline on Caries-risk Assessment and Management for Infants, Children, and Adolescents. *American Academy of Pediatric Dentistry*, 36(6), 127-134.

Griffin, S. O., et al (2014). *Use of Dental Care and Effective Preventive Services in Preventing Tooth Decay Among U.S. Children and Adolescents*. Atlanta: CDC.

Moyer, V. A. (2014). Prevention of Dental Caries in Children From Birth Through Age 5 Years: U.S. Preventive Task Force Recommendation Statement. *Pediatrics*, 63(2), 1102-1111.

Smiles for Life. (2015, February). Retrieved from Module 2: Child Oral Health: www.smilesforlifeoralhealth.org/

For More Information

The Child and Teen Checkups (C&TC) program is administered through a partnership between the Minnesota Department of Human Services and the Minnesota Department of Health.

For questions about this fact sheet or to obtain this information in a different format, call 651-201-3760 email health.childteencheckups@state.mn.us.

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