

---

**Subject: Dental Exams**

**Source: Performance Standard, THSteps Schedule**

**Reference: 1304.20 (a)(1); (a)(ii)(A-C); (a) 1iii & (iv); 1304.20 (b)(1-3); 1304.20 (e)(1) & (5)**

---

**EHS Policy:**

One primary role of EHS staff is to make an early assessment with parent/guardians to ensure that dental care of a child is up-to-date and treatment plans are being followed-up and/or completed. Our program will assist families to establish a dental home and funding source.

First dental exam is due at 1 year old and then every 6 months thereafter. Documentation of dental exams and treatment plans will be filed in enrolled child's file. If further assistance is indicated, Health Service in conjunction with Family Services will follow up and assist as needed.

**Acceptable Initial or Periodic Dental Exams:**

- Cleaning (prophylaxis- for 3 year olds)
- Oral Health Education (all ages)
- Application of topical fluoride (3 year olds)
- Maintenance of space (as appropriate)
- X-Rays (as needed)
- Application of sealants (as needed)

**Acceptable Treatment Plans:**

- Restorations (fillings, crowns)
- Endodontic (pup therapy, root canals)
- Periodontic (gum disease)
- Oral surgery (extractions)

**Acceptable Emergency Dental Services:**

- Procedures necessary to control bleeding, relieve pain, and/or eliminate acute infection
- Operative procedures required to prevent imminent loss of teeth
- Treatment of injuries to the teeth or supporting structures

**Procedure:**

1. Staff will assess dental needs for enrolled child at In-Take or prior if situation presents itself.
2. Staff will explain the rationale for dental exams, and that early detection and intervention may prevent many illnesses or dental conditions from becoming worse.
3. Staff will document dental home and funding source for enrolled child on the **Child Health Information Form** at In-Take. This form will be up-dated as needed throughout the year.

**Policy and Procedure: Dental Exams**

4. Health Manager will be primarily responsible for ensuring dental documentation for the child's file. Families will be given the opportunity to complete & sign the **ARI- Authorization to Release & Exchange Confidential Information- Dental form**.
5. All referrals are routed to the Health Manager who will provide assistance and follow-up. **Document on FSW, Progress Notes, and/or Family Contact Notes** as appropriate.
6. Families will have the right to refuse any service for their child's dental services. However, such refusal must be in writing, dated and signed on the **Denial of Services** form. Staff's attempts to inform parent/guardians of the benefits of early detection and intervention will be documented on **Progress Notes or Family Contact Form**.
7. Priority is given to children with emergency dental needs, pain, experiencing difficulties with ADL's (activity of daily living) or impairment of their learning abilities. If this is the situation and a family refuses dental treatment for their child, Family Services will be notified. Family Services will notify Family Services Manager and Health Services Manager regarding medical neglect. If appropriate **Child Abuse Reporting Policy & Procedures** will be followed.
8. If a family is not eligible, refuses, or is denied for (Medicaid or CHIPS) Family Services will  
2e
9. Teachers will record dates for first and second dental exams on the health tracking form.
10. Health Manager will ensure that the Child Plus computer tracking system is up-to-date.