

ORAL HEALTH SCREENING FORM

Your child's oral health is important. In other school years, preventive dental services have been offered to children in schools, but that is on hold this year due to COVID-19. We are asking parents to complete this short screening form so that your child can be connected to dental care if needed. Please complete this form and return it to your child's school.

Cavities are the most common disease of childhood, and cavities can often grow unnoticed. Children who have cavities or tooth pain might talk about it in different ways. A child might mention pain when they eat, sleep, or try to concentrate. The following questions are other ways to see if they have pain in their mouths.

Does your child say that their teeth or jaw hurt?	Yes ___	No ___
Can your child chew hard foods (<i>carrots, crunchy snacks, etc.</i>) using both sides of their mouth?	Yes ___	No ___
Do your child's gums bleed when they brush their teeth?	Yes ___	No ___
Does your child say that cold or hot foods bother their teeth?	Yes ___	No ___

Cavities can start in your child's mouth without them knowing, so it's important to look inside their mouth. Taking a look about once a month is helpful if they are not able to visit a dentist for regular check-ups. When looking in their mouth, it's best to use a flashlight and look at all surfaces of their mouth. This means looking at the gums, the teeth, under the tongue, on the inside of the cheek, and on the roof of the mouth.

___ Swelling on the gums	___ White spots on the gum line or tooth surface	___ Cavities or dark spots on any tooth surface
___ Active bleeding	___ Broken teeth	___ Rashes or discoloration of the roof of the mouth

Has your child had a dental appointment in the last year?	Yes ___	No ___
Do you plan to take your child to a dental check-up? <i>(please see page 2 for what this includes)</i>	Yes ___	No ___
Do you need help locating a dental provider?	Yes ___	No ___
Do you have dental insurance?	Yes ___	No ___
If no, would you like help finding insurance?	Yes ___	No ___

Has your child received a fluoride varnish application from a dental provider or medical provider within the last year? <i>(see page 2 for definition of fluoride varnish)</i>	Yes ___	No ___
Has your child received a sealant on any of their permanent molars from a dental provider? <i>(see page 2 for more information about a sealant)</i>	Yes ___	No ___

If you see anything concerning, contact your dental office or use the contact information provided with this form.



COLORADO
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What is a dental check-up?

A dental check-up for a child includes a dental provider looking in the mouth, taking x-rays, and cleaning the teeth. It may include applying sealants and fluoride varnish to prevent cavities.

What is fluoride varnish?

Fluoride varnish is a sticky gel that is painted on the teeth to prevent cavities, slow them down, or stop them from getting worse. Fluoride varnish is made with fluoride, a mineral that strengthens tooth enamel (the outer coating on teeth).

What is a sealant?

Dental sealants are thin coatings that when painted on the top of the back teeth (molars) can prevent cavities (tooth decay) for many years. Sealants protect the tooth from cavities by covering them with a protective coating that blocks out germs and food.

Thank you for completing this screening form. _____
has your permission to contact you for any follow-up dental care needs.

Yes ____ No ____

Please provide your contact information below.

Child name: _____

Guardian name: _____

Guardian signature: _____

Phone number: _____

Remember to:

- Brush twice a day, for two minutes. If your child is young, make sure to assist them and model good brushing habits.
- Don't share your toothbrush.
- Change your toothbrush after you've been sick.
- Look in your child's mouth to identify any swelling, bleeding gums, or broken teeth, and call a dental office in your community if you see urgent dental needs.

For more information about your child's oral health please visit the following websites:

<https://www.mouthhealthy.org/en/babies-and-kids>

<https://www.aapd.org/resources/parent/>



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