



# Conducting Your Oral Health Care Appointment

Dental Transformation Initiative (DTI)

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# Overview of the 7 Steps

1. Interview
2. Position the child
3. Oral examination
4. Toothbrush prophylaxis
5. Fluoride varnish treatment
6. Summary and goal setting
7. Documentation

# Preparation

- ▶ Caries Risk Assessment (CRA) form or electronic questionnaire
- ▶ Self-Management and Goal Setting Handout

**Self-Management Goals for Parent/Caregiver**

Patient Name: \_\_\_\_\_

1. Regular dental visits for child

2. Parent receives dental treatment

3. Healthy snacks

4. Brush with fluoride toothpaste at least 2 times daily

5. Wear off bottle (no bottles for sleeping)

6. Only water or milk in sippy cups

7. Less or no juice

8. No soda

9. Last or no junk food and candy

10. Use xylitol spray gel or dissolving tablets

11. Drink tap water

12. Remember: The last thing you touch before bed should be your child's teeth. Brush with fluoride toothpaste.

On a scale of 1-10, how confident are you that you can accomplish the goal? 1 2 3 4 5 6 7 8 9 10

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

California Department of Health Care Services  
Domain #2 Caries Risk Assessment Form for Children <6 Years of Age

Patient Name: \_\_\_\_\_  
ID#: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Assessment Date: \_\_\_\_\_

Please indicate whether this is a BASELINE assessment or a FOLLOW-UP VISIT \_\_\_\_\_  
Provide follow-up visit #: \_\_\_\_\_

RISK ASSESSMENT				
Assessment through interview and clinical examination	High Risk	Moderate Risk	Low risk	Priority for Self-management goal
<b>Check All That Apply</b>				
<b>1. Risk factors (Biological and Behavioral Predisposing factors)</b>				
(a) Child sleeps with a bottle containing a liquid other than water, or nurses on demand		Yes <input type="checkbox"/>	No risk factors	
(b) Frequent use of beverages other than water including sugary beverages, soda or juice		Yes <input type="checkbox"/>		
(c) Frequent (>3 times/day) between-meal snacks of packaged or processed sugary foods including dried fruit		Yes <input type="checkbox"/>		
(d) Frequent or regular use of asthma inhalers or other medications which reduce salivary flow		Yes <input type="checkbox"/>		
(e) Child has developmental disability/CHN (child with special health care needs)		Yes <input type="checkbox"/>		
(f) Child's teeth not brushed with fluoride toothpaste by an adult twice per day		Yes <input type="checkbox"/>		
(g) Child's exposure to other sources of fluoride (fluoridation or fluoride tablets) is inadequate		Yes <input type="checkbox"/>		
<b>2. Disease indicators/risk factors—clinical examination of child</b>				
(a) Obvious white spots, decalcifications, enamel defects or obvious decay present on the child's teeth	Yes <input type="checkbox"/>	No disease indicators	No disease indicators	
(b) Restorations in the past 12 months (past caries experience for the child)	Yes <input type="checkbox"/>			
(c) Plaque is obvious on the teeth and/or gums bleed easily		Yes <input type="checkbox"/>		
<b>OVERALL ASSESSMENT OF RISK* (Check)</b>	HIGH <input type="checkbox"/> Code 0603	MODERATE <input type="checkbox"/> Code 0602	LOW <input type="checkbox"/> Code 0601	



# Preparation

## ► Clinical Supplies

- Gauze
- Light source
- Toothbrush
- Fluoride varnish
- Gloves



# Step 1: Interview

## Build Rapport with the Child

- ▶ Play and talk with the child.
- ▶ Distract with toys or a baby toothbrush while you talk with the caregiver.
- ▶ Ask staff to occupy the child during the interview.



# Step 1: Interview

## Interview the Caregiver (Begin Anticipatory Guidance)

- ▶ Closed questions.
- ▶ Open-ended questions.
- ▶ Questions will follow the CRA form.
  - Bottle use and other dietary habits
  - Reduced salivary flow
  - Developmental disabilities or special needs
  - Daily hygiene habits
  - Fluoride exposure (keep local fluoridation chart handy)
  - Frequency of cavities in primary caregivers and siblings



# Step 2: Position the Child

- ▶ Position knee-to-knee.
- ▶ Slowly lower the child onto your lap.
- ▶ Caregiver holds the child's hands and helps to keep the child stable.
- ▶ Expect crying.
  - Bad news: The child is crying.
  - Good news: You can see the teeth clearly.



# Step 2: Position the Child

- ▶ Tips for Behavior Management
  - Focus on the nature of the cry.
  - Use distraction techniques.
  - Use the “tell, show, do” method with older children.
  - Use positive self-talk.
  - Above all, stay calm.



# Step 3: Oral Examination

- ▶ Look for:
  - Presence of thick plaque
  - Chalky white spots, brown spots, or obvious dental caries
  - Recent restorations
  - Tooth defects
  - Abscesses
  - Visually inadequate saliva flow
- ▶ Show caregivers any signs of tooth decay.

# Step 3: Oral Examination

- ▶ Teach the caregiver to “lift the lip” to check for chalky white spots or brown spots.



# Step 4: Toothbrush Prophylaxis

- ▶ Remove plaque thoroughly (or help the child or parent do it) with a toothbrush.
- ▶ Discuss home care.
- ▶ Reinforce the use of a small smear of fluoride toothpaste for infants, and pea-size for older children.



Smear

Age less than 2 years



Pea-size

Age 2 to 5 years



Regular

Age more than 5 years

# Step 4: Toothbrush Prophylaxis

## ► At-home care:

- Begins when first tooth erupts.
- Cleaning method for small children can include:
  - The knee-to-knee position
  - Baby on lap with face up
  - Cleaning front of teeth during bath time or while on the changing table
- Include fluoride toothpaste in daily routine.

# Step 5: Fluoride Varnish Treatment

- ▶ Get started:
  - Dry teeth lightly with a gauze square.
  - Open the packet of varnish.
  - Stir with applicator.



# Step 5: Fluoride Varnish Treatment

- ▶ Apply varnish:
  - Do the outsides of all teeth and then the insides.
  - Begin with lower teeth.
  - Repeat with upper arch.
  - Less is more!



# Step 5: Fluoride Varnish Treatment

## ► Finish up:

- Raise the child back into the caregiver's arms for comforting.
- Provide child with a toy.
- Tell the parent: “don't brush until the next day.”

# Step 6: Summary & Goal Setting

- ▶ Summarize your findings for the parent and the child.
- ▶ Recommend follow-up care.
- ▶ Discuss risk and determine appropriate recare interval.
- ▶ Set goals for home care using **motivational interviewing**.

## Self-Management Goals for Parent/Caregiver

Patient Name \_\_\_\_\_

DOB \_\_\_\_\_



Regular dental visits  
for child



Family receives  
dental treatment



Healthy snacks



Brush with fluoride  
toothpaste at least 2  
times daily



No soda



Less or no juice



Wean off bottle  
(no bottles for sleeping)



Only water or milk in  
sippy cups



Drink tap water



Less or no junk food  
and candy



Use xylitol spray, gel  
or dissolving tablets

**IMPORTANT:** The last  
thing that touches  
your child's teeth  
before bedtime is  
the toothbrush with  
fluoride toothpaste.

Self-management goals 1) \_\_\_\_\_

2) \_\_\_\_\_

On a scale of 1-10, how confident are you that you can accomplish the goals? 1 2 3 4 5 6 7 8 9 10

Signature \_\_\_\_\_ Date \_\_\_\_\_

Practitioner signature \_\_\_\_\_ Date \_\_\_\_\_

# Self- Management Goals & Plans

# Motivational Interviewing

- ▶ Understand why they do/do not want to change behaviors.
- ▶ Discover changes they are willing to make.
- ▶ Set 1 or 2 short-term goals, using the “self-management” sheet for younger children.
- ▶ Ask open-ended questions:
  - Can you tell me what brushing your child’s teeth looks like in your family?

# Motivational Interviewing

## ► Affirmations

- “Thank you for bringing Julie in today. I can imagine how busy your schedule is.”

## ► Reflective listening

- “I hear that you would like to limit Julie’s snacking on cookies and other sugary treats, but you are also a bit worried that she will cry and be unhappy if you tell her ‘no’ when she asks for a cookie. Is that right?”

# Motivational Interviewing

## ► Summarize

- “You have set goals to increase Julie’s fruit and vegetable snacks and replace the milk in her bedtime bottle with water, that’s great! We will be following up on the progress you are making with these goals when we see Julie at her next appointment in 3 months.”

# Small Steps for Change

- ▶ Choose 1 or 2 key messages.
- ▶ Remain positive.
- ▶ Treat patients with respect and kindness.
- ▶ It takes multiple triggers over time to change behavior.



# Step 7: Documentation

- ▶ D0601 – CRA, low risk
- ▶ D0602 – CRA, moderate risk
- ▶ D0603 – CRA, high risk
- ▶ D0140 – Limited oral evaluation, problem focused
- ▶ D0145 – Oral evaluation for patient under 3 years of age and counseling with primary caregiver
- ▶ D1310 – Nutritional counseling for the control of dental disease
- ▶ D1330 – Oral hygiene instruction
- ▶ D9993 – Motivational Interviewing
- ▶ D1206 – Topical application of fluoride varnish
- ▶ If bringing a child back for an additional fluoride varnish application, may also bill for an office visit (99211) as well as the fluoride varnish (D1206)

# Resources

- ▶ TYKE: Treating Young Kids Everyday
  - A free online program for educating and training dental and primary care teams in using Caries Risk Assessment and early intervention to reduce Early Childhood Caries.
  - <https://www.cda.org/member-resources/education/tyke-training>

# Resources

- ▶ Smiles for Life: A National Oral Health Curriculum
  - A free online series of courses designed to ensure the integration of oral health and primary care.
    - Course #2 Child Oral Health
    - Course #6 Caries Risk Assessment, Fluoride Varnish, and Counseling
    - Course #7 The Oral Exam
  - [Smilesforlifeoralhealth.org](http://Smilesforlifeoralhealth.org)

# Questions?

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