Monthly Reporting Form Instructions

Note: All numbers refer to Tribal and non-Tribal children. There is no need to separate them.

**Dental Referrals**

1. Number of Medi-Cal children age 0-20 whom you referred for dental services this month.
   - If you referred them to the dental clinic as part of your well-child medical clinic visit, then it counts here.
2. Number of Medi-Cal children age 0-20 who received dental services as a result of your efforts this month.
   - This includes ONLY those children who have been seen in the dental clinic as of the end of the month. Many children will have future appointments for the following month(s). They should not be counted in this category until they have at least one dental appointment in the current month.
   - They should be counted in every month that they received dental services until their treatment plan is complete.
3. Number of Medi-Cal children age 0-20 to whom you provided oral health education this month.
   - Some of you are providing oral health education to the children and/or parents in your well-child medical clinic visits. This is where you count these patients.

**Dental Procedures**

1. Number of fluoride varnish applications performed by you this month.
   - This includes fluoride varnish applications done by you as part of the well-child medical clinic visit. Fluoride varnish applications done in the dental clinic as part of a dental visit do not count here. This is to encourage more fluoride varnish applications for high risk children each year in a primary care setting—up to 3 in medical, in addition to the 2 in dental (more on this later)
2. Number of Caries Risk Assessments (CRA) performed by you this month.
   - This is CRAs done by you as part of the well-child medical clinic visit.
3. Number of dental treatment plans completed this month.
   - This will require you to keep track of your referrals and follow up with the dental staff to find out when treatment plans are complete.