

Nevada Health CO-OP Dental Care Guidelines

Age:	Examination/Assessment with Radiographs:	Diagnostic Radiographs required:	Counseling, included in exam or prophylaxis appointment:	Treatment, including but not limited to prophylaxis and restorative care:	Treatment Frequency
Infant 0-2	<ul style="list-style-type: none"> • Oral examination every 6 months • Including oral hygiene assessment • Including presentation of treatment plan 	<ul style="list-style-type: none"> • X ray if situational trauma such as abscess or trauma • X-rays as indicated (if child is manageable) 	<ul style="list-style-type: none"> • Parent education • Nutritional analysis and counseling • Feeding behavior assessment and counseling • Oral home health care plan 	<ul style="list-style-type: none"> • Prophylaxis • Apply topical fluoride • Present treatment plan • Carious lesions, removal and restoration • Pulpal Therapy when appropriate • Extractions when appropriate 	<ul style="list-style-type: none"> • 6 months • 12 months
2-4	<ul style="list-style-type: none"> • Oral examination, every 6 months • Including oral hygiene assessment • Including presentation of treatment plan 	<ul style="list-style-type: none"> • X rays as indicated 	<ul style="list-style-type: none"> • Home oral hygiene regimen • Dietary education involving parent and child • Parental supervision for performance of oral hygiene 	<ul style="list-style-type: none"> • Prophylaxis • Topical fluoride • Present treatment plan • Carious lesions, removal and restoration • Pulpal Therapy when appropriate • Extractions when appropriate 	<ul style="list-style-type: none"> • 6 months • 12 months
5-11	<ul style="list-style-type: none"> • Oral examination, every 6 months • Including oral hygiene assessment • Including evaluation of growth and development • Including presentation of treatment plan 	<ul style="list-style-type: none"> • Bite-wing X rays • Panoramic or full mouth x-rays as the first permanent dentition begins to erupt, not more than once every 3 years • Single x-rays as indicated 	<ul style="list-style-type: none"> • Parent and patient education of prevention program • Dietary Instruction • Transition of responsibility from parent to child 	<ul style="list-style-type: none"> • Prophylaxis • Topical fluoride • Resin sealant; pit and fissure sealant in susceptible permanent dentition (see note) • Present treatment plan • Carious lesions, removal and restoration • Pulpal or Endodontic Therapy when appropriate • Extractions when appropriate 	<ul style="list-style-type: none"> • 6 months • 12 months • Once per permanent tooth
11 –18	<ul style="list-style-type: none"> • Oral examination, every 6 months • Including oral hygiene assessment • Including evaluation of soft tissue • Including evaluation of occlusion • Including presentation of treatment plan 	<ul style="list-style-type: none"> • Bite wing X rays, every 6 months if indicated • Panoramic or full mouth x-rays, not more than once every 3 years, with the exception of a panoramic for the extraction of third molars • Single x-rays as indicated 	<ul style="list-style-type: none"> • Reinforce oral hygiene regimen • Dietary Instruction 	<ul style="list-style-type: none"> • Prophylaxis • Topical Fluoride • Resin sealant; pit and fissure sealant in susceptible permanent dentition (see note) • Carious lesions, removal and restoration • Endodontic Therapy when appropriate • Extractions when appropriate 	<ul style="list-style-type: none"> • 6 months • 12 months • Once per permanent tooth

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18 - 20	<ul style="list-style-type: none"> Oral examination, every 6 months Including oral hygiene assessment Including evaluation of soft tissue Including evaluation of occlusion Presentation of treatment plan 	<ul style="list-style-type: none"> Bite wing X rays, every 6 months if indicated Panoramic or full mouth x-rays, not more than once every 3 years, with the exception of a panoramic for the extraction of third molars Single x-rays as needed 	<ul style="list-style-type: none"> Reinforce oral hygiene regimen Dietary Instruction 	<ul style="list-style-type: none"> Prophylaxis Topical Fluoride Resin sealant; pit and fissure sealant in susceptible permanent dentition (see note) Carious lesions, removal and restoration Endodontic Therapy when appropriate Extractions when appropriate 	<ul style="list-style-type: none"> 6 months 12 months Once per permanent tooth

Note: Sealant placement based on anatomical structure of the tooth, likelihood of caries development. Sealant application when tooth has erupted sufficiently to permit isolation, permanent molars in child with history of prior carious lesions in primary dentition, permanent molars with deep anatomical grooves, premolars with defined grooves, primary second molars with deep groove and history of early childhood caries and previously sealed teeth with partial or complete loss of a prior sealant.

REFERENCE PERSON:

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REFERENCES:

- UNLV School of Dentistry Patient Oral Disease Preventative Studies/Protocol
- Counseling to Prevent Dental and Periodontal Disease, Guide to clinical preventive services, 2nd edition, Baltimore MD, Williams & Wilkins; 1996, 711-722, National Guideline Clearinghouse
- CMAJ March 1995, Prevention of Dental Caries, National Guideline Clearinghouse