Dental Sealant Program

Keeping your child's smile healthy!

Tennessee Department of Health's School Based Dental Prevention Program offers dental preventive services to your child for ***FREE!***

- **Screenings and Education**
- **Sealants**
- **Fluoride Varnish**

Complete the back of this form to help your child have healthy teeth! **ALL** children are eligible who return this completed consent form. No child is turned away. Services are ***FREE!***

A referral note will be sent home after the visit explaining services provided and information to help find a dental home, if needed.

PREVENTION VS. TREATMENT

Sealants, free and at your school

Treatment, a costly trip to the dentist

My child has already had sealants and sees a dentist regularly, should they participate?

YES!
Sealants can last for many years but if your child's sealants come off, we can replace them on all permanent back teeth as needed for ***FREE!***

For more information about our program and dental health, visit us on our website.

Tooth Decay: *The Problem*

- Tooth decay is the single most common chronic childhood disease.
- About 1 of 5 (20%) children aged 5 to 11 years have at least one untreated decayed tooth.

Dental Sealants: *The Solution*

- Dental sealants are thin plastic coatings applied to the grooves on the chewing surfaces of the back teeth.
- Sealants prevent tooth decay and also stop cavities from growing.

Prevention vs. Treatment

- Preventive sealants are a short and easy process. The chewing surfaces of teeth are cleaned to help the sealant stick to the tooth. The sealant is painted into the grooves of the chewing surface, where it bonds to the tooth.
- Treatment requires an appointment with the dentist and may include (drilling) removing tooth structure/ replacing tooth structure.

The Tennessee Department of Health has placed over 3.5 million sealants on children in Tennessee schools since 2001. Visit us at: TN.gov/health/section/oralhealth

TN Department of Health

Centers for Disease Control and Prevention: Dental Sealants - http://www.cdc.gov/oralhealth/publications/faqs/sealants.htm
American Dental Association (2014), Action for Dental Health: Bringing Disease Prevention into Communities. A Statement from the American Dental Association, 2013

DENTAL SEALANT PROGRAM PARENT CONSENT FORM

Dental Sealant & Fluoride Varnish Program

About Your Child

Child's Name: _____ ____ ____/____/____ ____
First Middle Last Sex Birth Date Age

Home Address: _____
Street City State Zip Code

_____
Best Number to Reach You **Name of School** **Grade** **Teacher**

Race (Please check all that apply): ❑ White ❑ Black/African American ❑ Asian ❑ American Indian/Alaska Native ❑ Hispanic ❑ Native Hawaiian/Pacific Islander ❑ Other

_____
Child's Social Security Number

Does your child have TennCare? ❑ Yes ❑ No

Tooth decay is one of the most common diseases found in children. Fluoride varnish can be painted on teeth to protect teeth from cavities. Fluoride varnish can be applied up to four times a year.

Health History

Has your child seen a dentist within the past 12 months? ❑ Yes ❑ No

Does your child have allergies? ❑ Yes ❑ No

If yes, what? _____

Is your child taking any medications? ❑ Yes ❑ No

If yes, what? _____

Is there anything else we should know about the health/behavior of your child? ❑ Yes ❑ No
(Examples: ADHD, Autism, Seizure Disorders, etc.)

If yes, what? _____

Parent Consent

I give consent for my child to participate in the school-based dental preventive program conducted by Tennessee Department of Health. To the best of my knowledge, the medical history questions have been answered accurately. I have been given a copy of the health department's notice of privacy practices, or it is available to me through the school nurse or by calling my local health department.

_____ _____
Signature of Parent or Guardian **Date**

Unprotected
No Sealant

Protected
After Sealant