

Oral Health In Your Medical Office Summary

Coding:

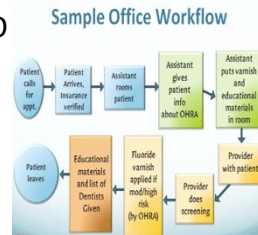
- CPT 99188 + if commercial insurance add 99401 - risk assessment, or 98960 - patient ed by qualified staff
- ICD 10 – Z29.3 + Z13.84, Z41.8, K02.9, K12.2, K08.8 as appropriate

Materials Required:

- Light Source (otoscope, penlight, head lamp)
- Supply bag (varnish, gloves, 2x2 gauze, ± mirror)
- Parent instructions (from varnish or EHR)

Workflow responsibilities to assign

- Office Champion
- Supply ordering (need someone's DEA number)
- Assemble materials at point of service
- Risk assessment—all staff/clinicians
- Examination of teeth—MD, DO, NP, PA
- Varnish Application- MD, DO, NP, PA, Med Asst
- Family education-all staff/clinicians
- Recording/billing under MD/DO
- Maintain Dentist referral list



Positions:

- Knee to knee
- In parent/guardian lap
- Sitting alone or w/parent
- Supine on exam table – after ear exam

Exam Steps:

- Lift the lower lip and slide to side outside the teeth
 - ✓ Mouth will open automatically
 - ✓ Focus on upper incisors, and molars, then lower
- Exam systematically
 - ✓ Upper Arch – front and back
 - ❖ Left side
 - ❖ Middle
 - ❖ Right side
 - ✓ Lower arch – front and back
 - ❖ Left side
 - ❖ Middle
 - ❖ Right side
 - ❖ Tongue
- Apply varnish (to age 21)
 - ✓ Use only enough to cover teeth—not all in the well
 - ✓ Varnish will spread on its own
 - ✓ Caution: Irritates open oral lesions
 - ✓ Pine nut allergy IS NOT A PROBLEM!

Education

- Brushing with fluoride toothpaste - Twice daily
- Tooth paste smear amount-rice, pea [pinky fingernail]
- Flossing as indicated; Brush tongue always
- Dental visits 1-4 times per year depending upon risk
- Fluoride in water

Warm handoff Dental referral

- Who is their dentist?
- Screen local dentists
- Ask your own dentist to accept your calls!

Sample Dental List for Parents

Pediatric Dentists					
Name	Telephone Number	Insurance Plans Accepted	Medicaid/CHIP Accepted (Y/N)	Accepts Children Ages	Other Information
Family Dentists					
Name	Telephone Number	Insurance Plans Accepted	Medicaid/CHIP Accepted (Y/N)	Accepts Children Ages	Other Information
Public Health Dental Clinics, Charity/Donated Time Programs, Other					
Name	Telephone Number	Insurance Plans Accepted	Medicaid/CHIP Accepted (Y/N)	Accepts Children Ages	Other Information

Chart Note: [R.E.F.E.R.]

Risk Assessment:

Risk Factors present:

- Family member w/active decay in past 12 mos
- Parent/Caregiver, siblings have no dentist
- Bottle/sippy cup use with sweet fluid added**
- Child to bed w/sweet substance to drink**
- Frequent snacking during the day**
- Child has special healthcare needs**
- Child is a recent immigrant
- Sibs >3 yo have no dental home

Protective factors present:

- Existing dental home
- Drinks water w/F or takes F supplements if indicated
- Fluoride varnish applied in the past 3 months
- Teeth are brushed twice daily
- Teeth flossed once daily if appropriate

Examination:

- Teeth healthy and gums examined - no gum disease, stains, or caries noted.
- Teeth and gums examined and the following were found:
 - White spots or visible decalcifications
 - Obvious decay
 - Restorations (fillings) present
 - Visible plaque accumulation
 - Gingivitis (swollen/bleeding gums)

Fluoride Varnish Application:

- 5% NaF in xylitol varnish applied with brush to all surfaces of the erupted teeth with patient cooperation and parent verbal consent.
- Explanation: Soft diet for 24 hours, delay brushing and flossing until the next day,

Education offered:

- Dental care with brushing of teeth and tongue
- Use of fluoride containing toothpaste: “Just a dot, not a lot”, twice daily.
- “Spit don’t swish” [e.g. don’t rinse mouth]
- Flossing is encouraged where teeth touch each other.
- Healthy teeth are essential to overall health

Referral to Dentist: