

Instruction Sheet for New Dental Formats (Revised in 2023)

1. Instructions for completing the Monthly Return - School Dental Clinics (H 982):

Regarding 1.4 - Children with Caries in Primary Molars:

- We consider this parameter only in children who have received the Fluoride Varnish application. Please include **Caries Experience** in both "D" and "E" of primary dentition when the child is in Grade one (active caries, restorations, and missing due to extraction). Please check the Fluoride Varnish Application Card to cross-check whether the child had dental caries in D and E prior to Fluoride Varnish application.

Regarding 1.6 - Children identified as High Risk in Grade 1

- Please use the criteria in the guideline to determine a grade one child as "high risk" for caries in the Fissure Sealant programme.

Regarding 5.3- Children Identified as High Risk under the Preschool

- Consider the criteria provided in the guideline for Fluoride Varnish application to identify preschool children as high-risk children.

Regarding 5.4- Children Received Fluoride Varnish 1st time

- Mention the number of preschool children who received Fluoride Varnish 1st time.

Regarding 5.5- Children Received Fluoride Varnish 2nd time

- Mention the number of preschool children who received Fluoride Varnish 2nd time.

Special Note: As there are no cells to report the children received fluoride varnish 1st time and 2nd time for the Grade 1 group please mention it under space 5.6 on the first page. The necessary revisions will be done in the formats that will be printed in 2024.

Grade 1 children received fluoride varnish 1st time (mention the number)

Grade 1 children received fluoride varnish 2nd time (mention the number)

Regarding 9.2 - Fissure sealants (no. of children)

- This should include children who received Fissure Sealants from Grades 1 and 2 in the particular month (out of high risk).

Regarding 10.2 and 10.3 – Restorations in old format 2011

- The term "Amalgam" has been removed in the new format (2023). Please update accordingly.

Regarding 13 -Referrals

- School children needing specialized oral health care should be referred to the nearest government OPD dental clinic, adolescent dental clinic, or community dental clinic first. With the recommendation of a dental surgeon, the child should be referred to the specialized oral health unit.

Regarding 15.1 & 15.2 Oral Health Education -Target group

- Consider the target group as mentioned in the School Dental Service national target.
 - Group- less than 50 individuals participated. (Individual chair-side education sessions should not be included).
 - Mass – more than 50 Individuals participated

Regarding 15.3 & 15.4 - Oral Health Education- Non target group

Please consider the following groups as non-target groups.

- School staff
- Pre-school staff
- Parents
- Pregnant mothers
- Any other particular group

2. Instructions for Completing Examination and History Charts (H 975)

Please note the following updates and additions while filling out the charts:

- 1) A new “Preschool Examination” segment has been integrated into the existing Examination boxes. Kindly complete this section using the same index.
- 2) An additional section has been incorporated as follows:

White Chalky Appearance in Anterior or Posterior Deciduous Teeth: Indicate whether a white chalky appearance is present or absent in the anterior or posterior deciduous teeth.
- 3) The box previously labelled as “condition of gums” has now been changed to “Oral Hygiene Status using Plaque Score/Index.”

4) A new section, "Fluoride Application," has been included. The following three sections were adopted under the fluoride varnish application.

- I. Date of 1st Fluoride Application.
- II. Date of 2nd Fluoride Application.
- III. Findings after the one year of 2nd application (after completing the fluoride varnish therapy)

The success of the fluoride varnish programme provided for preschool children will be evaluated by caries experience in the primary molar teeth (D and E) of children screened at grade 1.

When you start the fluoride varnish application, you have to issue a Fluoride Varnish Application card to the parent of that particular child. The sample format is provided with the instruction sheet. You have to mention whether the child had molar caries (D and E) on that card at the first screening.

3. Instructions for completing the Daily Record of Treatments (H 974):

1. **Care Provided Column:** The term "Amalgam" has been removed. Please update accordingly.
2. **Examination Field:** A new column named "White Spots in Anterior/Posterior Dec" has been added. Fill this column based on the Examination and History Chart.
3. **Fluoride Application Column:** This has been divided into "1st Fluoride Application" and "2nd Fluoride Application." Complete these columns based on the Examination and History Chart.