

School Sealant Program

Oral Health Service Results

Date ____/____/____

Patient Name _____ School _____

Services Provided

- Oral Hygiene Instruction and Education Screening Cleaning
- Fluoride Treatment Sealants # of sealants _____

_____ Your child has no obvious dental problems but should continue to have routine examinations by your family dentist.

_____ Your child has some teeth which should be evaluated by your family dentist. Your dentist will determine whether treatment is needed.

_____ Your child has some teeth which appear to need immediate care. Contact your family dentist as soon as possible for a complete evaluation.

A screening is not a comprehensive clinical examination. No x-rays were taken and the screening does not replace an in-office dental examination by your family dentist. All children need to have regular routine care by a dental professional.

IMPORTANT: When contacting a dentist for a follow-up appointment, please let them know your child had the above services through the Kansas School Sealant program

Additional Comments _____

