



## Iowa Department of Public Health CERTIFICATE OF DENTAL SCREENING

This certificate is not valid unless all fields are complete.  
RETURN COMPLETED FORM TO CHILD'S SCHOOL.

### Parent or Guardian Section (please print)

Student Last Name:	Student First Name:	Birth Date (M/D/YYYY):
Parent or Guardian Name:		Telephone (home): (mobile):
Street Address:	City:	County:
Name of Elementary or High School:	Grade Level:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female

### Health Care Provider Section (provider to complete all fields)

Date of Dental Screening: \_\_\_\_\_

**Treatment Needs (check ONE only based on screening results, prior to treatment services provided):**

**No Obvious Problems** – the child's hard and soft tissues appear to be visually healthy and there is no apparent reason for the child to be seen before the next routine dental checkup.

**Requires Dental Care** – tooth decay\* or a white spot lesion\*\* is suspected in one or more teeth.

**Requires Urgent Dental Care** – obvious tooth decay\* is present in one or more teeth, the child is experiencing pain, or there is evidence of infection or injury.

\*Tooth decay: A visible cavity or hole in a tooth with brown or black coloration, or a retained root.

\*\*White spot lesion: A demineralized area of a tooth, usually appearing as a chalky, white spot or white line near the gumline. A white spot lesion is considered an early indicator of tooth decay, especially in primary (baby) teeth.

**Provider Type (check ONE only):**  
 DDS/DMD    RDH    MD/DO    PA    RN/ARNP (High school screen can only be provided by DDS/DMD or RDH)

Provider Name: \_\_\_\_\_      Provider Signature: \_\_\_\_\_  
 (please print)

Business Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_

A screening does not replace an exam by a dentist.  
Children should have a complete examination by a dentist at least once a year.

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Iowa Department of Public Health • Oral Health Bureau  
515-281-3733 • 866-528-4020 • [www.idph.state.ia.us/hpcdp/oral\\_health.asp](http://www.idph.state.ia.us/hpcdp/oral_health.asp)

*A designee of the local board of health or Iowa Department of Public Health may review this certificate for survey purposes.*