

# Free Oral Health Screening at Your School



## What will happen?

- Bendigo Health Dental Services will visit your school on **Wednesday 31 May 2019**
- You will need to sign the consent form on the back of this letter so that we can see your child
- Your child will sit in a dental chair and dental staff will have a look in their mouth
- This is a quick way to check for major problems but will not replace a full check-up
- They will use a sterile mouth mirror and light
- Fluoride varnish will be applied unless you tick the box to say no to this
- We will do fun learning activities on the day
- All dental staff have 'Working with Children Checks'
- We will try to visit your school every 6 months to reapply fluoride varnish



## Why are we providing this service?

- A lot of children have tooth decay and gum disease
- We want to find any problems early



## Why do we use fluoride varnish?

- We use fluoride varnish to help slow down any tooth decay
- It is made with fluoride, which is a natural mineral
- We will paint it on all of your child's teeth to help make their teeth strong
- It does not cause any pain, it dries quickly, and has a mild taste
- We will ask the child to try to not eat or drink for 30 minutes
- Until it dries it can feel a bit sticky on their teeth
- For it to work best it should be used on your child's teeth every 6 months
- Without fluoride varnish any tooth decay may get worse and cause pain
- Are there any risks?
  - Swallowing too much fluoride can be dangerous but the small amount we use on your child's teeth will not reach toxic levels.
  - An ingredient in the varnish can cause an allergic reaction. Children with an allergy to rosin, colophony or sticking plaster, or who have been hospitalised with asthma or an allergy, should avoid the fluoride application.





# Oral Health Screening Consent Form

Please return forms to school before:

**Wednesday 22nd May 2019**

School	<b>Maldon Primary School</b>		
Teacher		Grade	

Child's first name		Surname	
Postal address			
Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	Date of birth
Contact phone number			
Email			
Is the child Aboriginal? <input type="checkbox"/> Yes <input type="checkbox"/> No		Is the child Torres Strait Islander? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Is the child of refugee background? <input type="checkbox"/> Yes <input type="checkbox"/> No		Is the child an Asylum Seeker? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Was the child born in Australia?	<input type="checkbox"/> Yes <input type="checkbox"/> No, they were born in _____		

Are there any significant medical issues we should be aware of?	<input type="checkbox"/> Yes (please provide details) <input type="checkbox"/> No	
Does the child have any allergies?	<input type="checkbox"/> Yes (please provide details) <input type="checkbox"/> No	
Do you have any concerns regarding the child's oral health?	<input type="checkbox"/> Yes (please provide details) <input type="checkbox"/> No	

<b>Medicare number:</b>	<b>Child's reference number:</b>	<b>Medicare expiry date:</b>

**Consent to oral health service**

1. I give permission for my child to participate in an oral health screening visit at school.
2. I understand that the screening may not identify all dental disease and does not replace a full examination performed at a dental surgery.
3. I understand that the child's oral health information is private and will be stored securely at Bendigo Health. Your child's screening information will not be available to the school.
4. I understand that I may be contacted by Bendigo Health regarding the child's oral health.
5. I understand that my consent for this service will expire 12 months after I sign this form.

I do **not** want the child to receive fluoride treatment

Full name of parent/guardian		
Signature of parent/guardian		Date

If you have any questions please email [dental@bendigohealth.org.au](mailto:dental@bendigohealth.org.au) or telephone 5454 7994.

*Office use only:*

1.  2.  3.  4.       Current / Recall    Exam    Declined    Private    Message