

**FLUORIDE VARNISH MANUAL  
FOR  
MEDICAL CLINICIANS**

**Smiles for Life  
A National Oral Health Curriculum**

**Society of Teachers of Family Medicine Group on Oral Health**

SMILES FOR LIFE is a comprehensive oral health curriculum for primary care clinicians. For more information visit us at [www.smilesforlifeoralhealth.org](http://www.smilesforlifeoralhealth.org).

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## IMPLEMENTING FLUORIDE VARNISH IN YOUR OFFICE

1. Take STFM Smiles for Life Module 6b Fluoride Varnish: State Training.
2. Take the post-test and email it to the address listed on the website. File the certificate of training you receive in your office. Report your CME hours.
3. Hold a meeting in your office with other clinicians, nurses, medical assistants, administrative staff, and office manager to explain what a fluoride varnish program is and what it will do to improve children's oral health in your practice. Explain ease of use and that this is now a reimbursable service. Encourage everyone who will be directly involved to take the Module 6b training.
4. Choose an "oral health office champion" who will keep supplies and handouts up to date.
5. Have the "champion":
  - a. Download the "Fluoride Varnish Manual for Medical Clinicians."
  - b. If you use paper charts print the "Fluoride Varnish Progress Note". Add your office logo. Make copies easily available.
  - c. If you have an Electronic Health Record (EHR), use the Connecticut stamp information on page 6 as a guide to create a progress note template.
  - d. Make copies of the "Fluoride Varnish Handout" or add it to your EHR.
  - e. Print and laminate the "Guide to Applying Fluoride Varnish." Keep it near where varnish application occurs.
  - f. **OPTIONAL:** Print "Fluoride Varnish Consent". (A written consent for varnish is not mandatory in most states – check with your state Medicaid office.) Make copies.
  - g. Review "Fluoride Varnish Ordering Information." Identify a local distributor and place order.
  - h. Confirm appropriate billing code(s) for your state with your state Medicaid office and add to encounter/billing forms.
  - i. Confirm with your state Medicaid office which clinicians can legally apply varnish.
  - j. Create a portable fluoride varnish application basket containing:
 

|   |                |
|---|----------------|
| Laminated "Fluoride Varnish Application Facts" document |                |
| Consent Forms (if applicable)                           |                |
| Handouts  | Progress notes |
| Applicators   | Gloves         |
| Light source (head lamp)                                | Gauze          |
| Mouth Mirror (optional)                                 | Stickers       |
6. Consider dividing the fluoride varnish process: eg. medical assistant reviews risk assessment and gets materials ready; physician performs oral exam; nurse applies varnish; physician reviews handouts, provides education and preventive counselling and does billing.
7. Do a few test cases to assess your flow, billing, patient and staff satisfaction. Hold a meeting to get input from all players.
8. Advertise in your waiting room, office newsletters, and web site that you are providing this service.

### **FLUORIDE VARNISH ORDERING INFORMATION**

The following is a list of fluoride varnish manufacturers. It is not exhaustive and does not imply endorsement of any particular company or product. We recommend the 0.25ml unidose size for use with preschool children. Actual ordering must be done through a local distributor.

| <b>Product</b>  | <b>Manufacturer<br/>Telephone</b>                                       | <b>Pricing*</b>  |
|---|---|--|
| All Solutions<br>Fluoride Varnish<br><br>0.25ml unidose | Denstply<br>Professional<br>800-989-8826                                | Pkt 50 = \$80<br>(Unit cost = \$1.60)  |
| Cavity Shield<br>Varnish<br><br>0.25ml unidose          | Omni International<br>800-445-3386                                      | Pkt 32 = \$32<br>(Unit cost = \$1.00)  |
| Duraflor<br><br>0.25ml unidose                          | Medicom<br>800-361-2862   | Pkt 32 = \$43<br>(Unit cost = \$1.35)<br>Pkt 200 = \$172<br>(Unit cost = \$0.86) |
| Enamel Pro<br>Varnish<br><br>0.25ml unidose             | Primier   | Pkt 35 = \$63<br>(Unit cost = \$1.80)<br>Pkt 35 = \$66<br>(Unit cost = \$1.88)   |
| Flor-Opal<br>Varnish<br><br>0.25ml unidose              | Ultradent Products<br>800-552-5512<br>Order direct from<br>manufacturer | Call for price   |
| Vanish<br><br>0.25ml unidose                            | Omni International<br>800-445-3386                                      | Pkt 50= \$119<br>(Unit cost =\$2.38)<br>Pkt 50 = \$118<br>(Unit cost = \$2.36)   |

\* Prices listed are as of January 2009. Volume discounts may be available.

## FLUORIDE VARNISH DOCUMENTATION

Required documentation varies from state to state. Typical requirements include findings on oral examination, caries risk assessment, application of fluoride varnish, oral health instruction, and referral to a dental home. Clinicians should contact their state Medicaid program to ascertain applicable requirements in their state.

One example of documentation is a paper chart stamp:

|                             |          |
|-----------------------------|----------|
| Caries or defects           | yes / no |
| High caries risk            | yes / no |
| Dental visit in last 6 mths | yes / no |
| Fl varnish applied          | yes / no |
| Systemic Fl assessed        | yes / no |
| OH instruction              | yes / no |
| Dental provider             | _____    |

Similar information could be programmed into an electronic health record (EHR). A sample of a more extensive paper progress note is provided on the next page.

*Patient Stamp here***FLUORIDE VARNISH PROGRESS NOTE**

Name of patient: \_\_\_\_\_ DOB: \_\_\_\_\_ MRN: \_\_\_\_\_

**Oral Examination**

Caries or enamel defects present

Plaque present on teeth

**Caries Risk Assessment:**

Moderate to High Risk for Caries (See footnote below\*)

Consent obtained and consent form signed (if applicable).

**Procedure Documentation:**

Child was positioned for varnish application. Teeth were dried. Varnish was applied.

Type of varnish: \_\_\_\_\_ .

Child tolerated procedure well; or Complications: \_\_\_\_\_ ; or

Procedure could not be completed due to child non-cooperation

**Post-Procedure Documentation:**

Fluoride varnish handout provided

Caries prevention handout provided

Child has dentist Y N

If no dentist, dental referral made Y N

\_\_\_\_\_  
Name, Title, Signature of Varnish Provider\_\_\_\_\_  
Date/Time\_\_\_\_\_  
Name and Signature of Supervising Physician\_\_\_\_\_  
Date/Time

I have reviewed risk assessment and have overseen application of fluoride varnish.

\*Children with at least one of the following **risk factors** should be considered at moderate caries risk. The presence of multiple factors places the child at high caries risk.:Social and medical history factors

Lower socioeconomic status (on Medicaid)

Born prematurely

Special Health Care Needs

Limited access to dental care

Family members with cavities

Preventive Behaviors

Brushing &lt; 2 x daily

No fluoride in water or supplements

Dental Findings

Congenital tooth defects

Plaque on teeth

Caries present

Diet Issues

Drinks juice or sugary drinks between meals

Eats sugary snacks between meals

Sleeping with bottle or at breast

## **FLUORIDE VARNISH APPLICATION FACTS**

### **What is fluoride varnish?**

Fluoride varnish has been used in Europe for decades and use is increasing in the U.S. Fluoride varnish lowers caries-causing oral bacterial levels and repairs and strengthens teeth. It is not a substitute for fluoridated water or toothpaste.

### **Which children benefit most from fluoride varnish?**

Fluoride varnish provides a reduction in caries of up to 38% in children who are at moderate to high risk for caries. The best time to start to apply varnish is as soon as the first teeth erupt in the mouth.

### **How is fluoride varnish different from other professionally applied fluorides?**

Fluoride varnish offers several advantages over other professionally applied fluorides:

1. Varnish comes in child-friendly flavors and is easily tolerated.
2. It easy to use and can be applied in less than 2 minutes.

### **Who can apply fluoride varnish?**

Dentists and physicians can apply varnish in all states. In some states physician assistants, nurse practitioners, nurses and medical assistants can also do so.

### **What counseling should be provided to parents?**

Inform caregivers that any tooth discoloration will be gone within 8 hours. Varnish can feel funny to the tongue. Children should not eat or drink for 60 minutes and refrain from brushing teeth for 12 hours. Varnish is most effective if applied 2-4 times per year, but may be applied more often. Clinicians should provide anticipatory guidance with appropriate handouts, and facilitate referral to a dental home.

### **How is fluoride varnish applied?**

Fluoride varnish is most easily applied to infants and toddlers in the "knee-to-knee" position, with the parent in one chair and the clinician in another. This allows better access and control of the head, and the parent can assist. Remove plaque and food debris from the teeth with gauze. Do not excessively dry teeth because varnish requires saliva to set properly. Paint varnish (from the 0.25 ml unidose packet) on all sides of the teeth as a very thin film. The colored tint of the varnish aids in seeing how much has been applied.



### **BILLING EFFECTIVELY FOR FLUORIDE VARNISH**

Reimbursement for the application of Fluoride Varnish by medical providers varies from state to state. Some state Medicaid programs will reimburse 1-3 different procedure codes. Clinicians should contact their state Medicaid office for details on applicable codes, number of times per year the procedure is billable, and covered age groups. Some states will allow fee-for-service medical providers to bill for an office visit (99211) if varnish is applied at a separate visit from a well child visit.

Appropriate billing codes should be added to the practice's billing/encounter form and a system developed within the office to ensure that clinicians bill appropriately when fluoride varnish is applied.



## Information for Caregivers About Fluoride Varnish

- **Why do we recommend putting a fluoride varnish on children's teeth?**  
**Because your baby's teeth are IMPORTANT!**  
 Tooth decay is one of the most common diseases seen in children today. Children as young as 10 months can get cavities (holes in the teeth). Cavities in baby teeth can cause pain and may prevent children from being able to eat, speak, sleep and learn properly. Children should not normally lose all of their baby teeth until they are about 11 or 12 years old.
- **What is fluoride varnish?**  
 Fluoride varnish is a protective medication that is painted on teeth to help prevent new cavities and help stop cavities that have already started.
- **Is fluoride varnish safe?**  
 Yes! Fluoride varnish can be used on babies from the time that they have their first tooth (around 6 months of age). Fluoride varnish has been used to prevent cavities in children in Europe for more than 25 years, and is supported by the American Dental Association.
- **How is it put on the teeth?**  
 The varnish is painted on the teeth. It is quick and easy to apply and does not have a bad taste. There is no pain, but your child may cry just because babies and children don't like having things put in their mouths by other people. Your child's teeth may look a little bit yellow after the fluoride varnish is painted on, but this color will come off over the next few days.
- **How often does the fluoride varnish need to be applied?**  
 The fluoride coating works best if painted on the teeth 2-4 times per year.
- **What do I do after the varnish is put on my child's teeth?**  
 Do not brush your child's teeth for 12 hours. Do not give your child anything to eat or drink for one hour. Do not give him or her sticky or hard food until tomorrow. It is okay to get another varnish treatment after 3 months (with your doctor, dentist or at school) or sooner if recommended. Today's treatment does not replace brushing your child's teeth or taking a fluoride supplement if your doctor or dentist has prescribed it.

### Remember, Baby Teeth are Important!

*This handout is based on The Dorchester House Multi-Service Center "Healthy Teeth for Tots" Program which is sponsored by the Healthy Tomorrows Partnership for Children Grant (HRSA / MCHB) CFDA # 93.110*

*Patient Stamp here*

## Fluoride Varnish Consent Form

Dear Caregiver,

As a preventive dental service program at \_\_\_\_\_, the office is offering the application of a protective coating called *Fluoride Varnish* to your child's teeth to help protect against cavities.

In order to receive this service which is paid for by your insurance, you must provide consent.

\_\_\_ **YES**, I want my child to receive the fluoride varnish application. The risks and benefits have been explained and I have been given a handout about fluoride varnish. ***(please fill in the bottom of this form)***

\_\_\_ **NO**, I do not want my child to receive this preventive fluoride varnish service.

Name of Child: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

I have read the information sheet about the fluoride varnish, and will allow a health professional to apply the varnish to my child's teeth. I understand that this is a painless procedure that will take only a few minutes.

Signature of Caregiver: \_\_\_\_\_ Date: \_\_\_\_\_

Caregivers Name *(please print)*: \_\_\_\_\_

*This form is based on The Dorchester House Multi-Service Center "Healthy Teeth for Tots" Program which is sponsored by the Healthy Tomorrows Partnership for Children Grant (HRSA / MCHB) CFDA # 93.110*

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