

Dental Sealants

A Resource Guide

Third Edition



DENTAL SEALANTS: A RESOURCE GUIDE

THIRD EDITION

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INTRODUCTION

Dental caries is the most common childhood illness in the United States. Nearly half of all U.S. children and adolescents have had dental caries in their permanent teeth. Dental caries is a particular problem among children and adolescents from families with low incomes.

Health professionals, especially if they can implement measures to prevent oral disease, are in a position to improve the oral health of children and adolescents. Since oral health and overall health are intertwined, this means that health professionals (e.g., dentists, dental hygienists, physicians, nurses) can have a positive impact on the health of children and adolescents they serve by ensuring that preventive measures are undertaken beginning early in life.

Dental sealants are one tool in the arsenal available for preventing dental caries. Dental sealants have been found effective in preventing caries in permanent teeth, especially among children and adolescents at high risk for dental caries. By providing dental sealants to children and adolescents whose caries risk levels indicate that they could benefit from this preventive measure, health professionals have an opportunity to assist in reducing the burden of dental caries and improving quality of life for many children and adolescents.

The National Maternal and Child Oral Health Resource Center (OHRC) developed this publication, *Dental Sealants: A Resource Guide*, to provide information to health professionals, program administrators, educators, policymakers, and others about the use and application of dental sealants. The resource guide is divided into three sections. The first section lists journal articles appearing in the peer-reviewed literature from December 2007 to March 2010. The second section describes materials published from 2006 to 2010, including brochures, fact sheets, guides, kits, manuals, protocols, and reports. The third section lists federal agencies, resource centers, and national professional associations that may serve as resources.

Many of the items in the Materials section are available from the Internet. Others can be requested directly from the organizations that produced them or are available for loan from OHRC. Inclusion in the resource guide does not imply endorsement by the U.S. Department of Health and Human Services, Health Resources and Services



Administration, Maternal and Child Health Bureau, Georgetown University, or by OHRC.

Although we have tried to present a thorough overview of materials, we realize that this list is not complete. For further information, we encourage you to contact the organizations listed in the third section. Your state and local departments of health, state or local alliances and coalitions, state dental associations and societies, schools of dentistry and dental hygiene, and university-based libraries are additional sources of information. OHRC will update the resource guide periodically, and we would appreciate hearing from you if you know of any resources that are not included in this edition.

An electronic version of the publication with clickable links to all the URLs shown is available at <http://www.mchoralhealth.org/PDFs/DentalSealantGuide.pdf>.

ACKNOWLEDGMENTS

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Department of Health and Environment; and Mark Siegal, Bureau of Oral Health Services, Ohio Department of Health. Finally, we would like to thank those who submitted items for inclusion in the guide.

JOURNAL ARTICLES



JOURNAL ARTICLES

The articles listed in this section were published in the peer-reviewed literature between December 2007 and March 2010.

CARIES RISK IN FORMERLY SEALED TEETH

Griffin SO, Gray SK, Malvitz DM, Gooch BF. 2009. Caries risk in formerly sealed teeth. *Journal of the American Dental Association* 140(4):415–423. Available at <http://jada.ada.org/cgi/reprint/140/4/415>.

This article describes a study to determine if the risk of developing dental caries in a formerly sealed tooth with a fully or partially lost sealant exceeds the risk in a never-sealed tooth. The results indicate that formerly sealed teeth with fully or partially lost sealants are not at higher risk of developing caries than are never-sealed teeth.

CHANGES IN THE ORAL HEALTH OF US CHILDREN AND ADOLESCENTS AND DENTAL PUBLIC HEALTH INFRASTRUCTURE SINCE THE RELEASE OF THE HEALTHY PEOPLE 2010 OBJECTIVES

Tomar SL, Reeves AF. 2009. Changes in the oral health of US children and adolescents and dental public health infrastructure since the release of the Healthy People 2010 Objectives. *Academic Pediatrics* 9(6):388–395. Available at <http://download.journals.elsevierhealth.com/pdfs/journals/1876-2859/PIIS1876285909002678.pdf>.

This article presents an overview of the changes in oral health status of American children and adolescents and the dental public health infrastructure during the first decade of the 21st century. Based on data from the National Health and Nutrition Examination Survey, the prevalence of dental sealants on at least one permanent tooth increased significantly among children ages 6–11, from 22 percent in 1998–1994 to 30 percent in 1999–2004, and, among adolescents ages 12–19, from 18 percent to 38 percent. The increase was consistent among all racial-ethnic and age groups. Non-Hispanic black and Mexican-American children and adolescents continued to have a significantly lower prevalence of sealants than did non-Hispanic whites.

CLINICAL DECISION SUPPORT CHAIRSIDE TOOLS FOR EVIDENCE-BASED DENTAL PRACTICE

Merijohn GK, Bader JD, Frantsve-Hawley J, Aravamudhan K. 2008. Clinical decision support chairside tools for evidence-based dental practice. *Journal of Evidence Based Dental Practice* 8(3):119–132. Abstract available at <http://www.jebdp.com/article/PIIS1532338208001206/abstract>.

This article presents and discusses evidence-based clinical decision support tools on gingival recession, root exposure, dental caries, dental sealants, caries prevention, and topical fluoride. The tools, designed for chairside use, organize available evidence and risk factors to facilitate clinical decision-making and transfer of knowledge to the client at the point of care. The article describes the Assess-Advise-Decide Approach, which enables clients to determine which course of action is in line with their preferences and values.

A COMPARISON OF THE EFFECTS OF TOOTHBRUSHING AND HANDPIECE PROPHYLAXIS ON RETENTION OF SEALANTS

Kolavic Gray S, Griffin SO, Malvitz DM, Gooch BF. 2009. A comparison of the effects of toothbrushing and handpiece prophylaxis on retention of sealants. *Journal of the American Dental Association* 140(1):38–46. Available at <http://jada.ada.org/cgi/content/full/140/1/38>.

This article describes surface-cleaning methods recommended by manufacturers, findings of clinical studies that compared dental sealant retention by surface-cleaning methods, and systematic reviews of sealant effectiveness. The results of the comparative tooth-cleaning analysis indicate that sealant retention rates after supervised toothbrushing by the client were at least as high as those associated with traditional handpiece prophylaxis cleaning.

DO SCHOOL-BASED DENTAL SEALANT PROGRAMS REACH HIGHER RISK CHILDREN?

Siegal MD, Detty AM. 2010. Do school-based dental sealant programs reach higher risk children? *Journal of Public Health Dentistry* [Epub ahead of print]. Abstract available at <http://www3.interscience.wiley.com/journal/123278198/abstract>.

This article describes a study to assess the extent to which school-based dental sealant programs (SBSPs) in Ohio increase dental sealant prevalence and reach children at higher risk for dental caries. The authors found that 80 percent of students in third grade who attended schools with SBSPs met the study criteria for higher caries risk. Children at higher caries risk attending these schools were about twice as likely to have dental sealants as their counterparts attending schools with no SBSPs. Disparities in sealant prevalence by risk status noted at schools without SBSPs did not exist at schools with SBSPs. Finally, up to 60 percent of children at higher caries risk who had sealants received them at school.

THE EFFECT OF DENTAL SEALANTS ON BACTERIA LEVELS IN CARIES LESIONS: A REVIEW OF THE EVIDENCE

Oong EM, Griffin SO, Kohn WG, Gooch BF, Caulfield PW. 2008. The effect of dental sealants on bacteria levels in caries lesions: A review of the evidence. *Journal of the American Dental Association* 139(3):271–278. Abstract available at <http://jada.ada.org/cgi/content/abstract/139/3/271>.

This article presents findings from a review of studies that examined the effectiveness of dental sealants in stabilizing or reducing bacteria levels in caries lesions. The authors found that sealants significantly reduced bacteria in carious lesions, but that in some studies low levels of bacteria persisted.

EFFECTIVENESS OF A GLASS IONOMER CEMENT USED AS A PIT AND FISSURE SEALANT IN RECENTLY ERUPTED PERMANENT FIRST MOLARS

Barja-Fidalgo F, Maroun S, de Oliveira BH. 2009. Effectiveness of a glass ionomer cement used as a pit and fissure sealant in recently erupted permanent first molars. *Journal of Dentistry for Children* 76(1):34–40. Abstract available at <http://www.ingentaconnect.com/content/aapd/jodc/2009/00000076/00000001/art00006>.

This article describes a clinical trial to evaluate the effectiveness of using a glass ionomer cement (GIC) as an occlusal sealant on recently erupted permanent first molars in preventing dental caries. Children ages 5–8 were randomly assigned to a test group (GIC) or the control group (autopolymerized resin-based sealant or RBS). After 6 months, one occlusal surface in the test group and two occlusal surfaces in the control group showed carious lesions. In the fifth year of follow-up, two occlusal surfaces in the test group and seven in the control group were filled or carious. The mean number of sealed surfaces that became carious or filled was 0.2 for the GIC-sealed teeth and 0.6 for the RBS-sealed teeth.

THE EFFECTIVENESS OF SEALANTS IN MANAGING CARIES LESIONS

Griffin SO, Oong E, Kohn W, Vidakovic B, Gooch BF; CDC Dental Sealant Systematic Review Work Group, Bader J, Clarkson J, Fontana MR, Meyer DM, Rozier RG, Weintraub JA, Zero DT. 2008. The effectiveness of sealants in managing caries lesions. *Journal of Dental Research* 87(2):169–174. Abstract available at <http://jdr.sagepub.com/cgi/content/abstract/87/2/169>.

This article presents a meta-analysis to examine the effectiveness of dental sealants in preventing the progression of dental caries lesions in the pits and fissures of permanent teeth in children, adolescents, and young adults. Sealing caries lesions reduced the probability of lesion progression. Despite variations in study design and conduct, subgroup and sensitivity analyses found the effect to be consistent in size and direction. The results indicate that evidence supports the placement of sealants over non-cavitated caries lesions in the pits and fissures of permanent teeth in children, adolescents, and young adults.

EVIDENCE-BASED CLINICAL RECOMMENDATIONS FOR THE USE OF PIT-AND-FISSURE SEALANTS: A REPORT OF THE AMERICAN DENTAL ASSOCIATION COUNCIL ON SCIENTIFIC AFFAIRS

Beauchamp BJ, Caufield PW, Crall JJ, Donly K, Feigal R, Gooch B, Ismail A, Kohn W, Siegal M, Simonsen R; American Dental Association, Council on Scientific Affairs. 2008. Evidence-based clinical recommendations for the use of pit-and-fissure sealants: A report of the American Dental Association Council on Scientific Affairs. *Journal of the American Dental Association* 139(3):257–268. Abstract available at <http://jada.ada.org/cgi/content/abstract/139/3/257>.

This article presents evidence-based clinical recommendations for the use of pit-and-fissure dental sealants. The expert panel addressed the following questions: Under what circumstances should sealants be placed to prevent caries? Does placing sealants over early (noncavitated) lesions prevent progression of the lesions? Are there conditions that favor the placement of resin-based vs. glass ionomer cement sealants in terms of retention or caries prevention? Are there any techniques that improve sealants' retention and effectiveness in caries prevention? The evidence indicates that sealants can be used effectively to prevent the initiation and progression of dental caries.

AN EXAMINATION OF THE ADVANCES IN SCIENCE AND TECHNOLOGY OF PREVENTION OF TOOTH DECAY IN YOUNG CHILDREN SINCE THE SURGEON GENERAL'S REPORT ON ORAL HEALTH

Milgrom P, Zero DT, Tanzer JM. 2009. An examination of the advances in science and technology of prevention of tooth decay in young children since the Surgeon General's report on oral health. *Academic Pediatrics* 9(6):404–409. Available at <http://download.journals.elsevierhealth.com/pdfs/journals/1876-2859/PIIS1876285909002484.pdf>.

This article examines advances in science and technology associated with prevention of tooth decay in young children since the release of *Oral Health in America: A Report of the Surgeon General*. Topics include the infectious nature of dental caries; caries detection and risk assessment; and interventions to improve prevention of tooth

decay, including occlusal sealants. Data up to 2004 suggest that 32 percent of children receive sealants, up from 23 percent during 1988–1994. The equivalent rate for adolescents (age 14) was 21 percent. Studies of new materials that can be used on erupting teeth to prevent decay are limited.

EXPLORING FOUR-HANDED DELIVERY AND RETENTION OF RESIN-BASED SEALANTS

Griffin SO, Jones K, Gray SK, Malvitz DM, Gooch BF. 2008. Exploring four-handed delivery and retention of resin-based sealants. *Journal of the American Dental Association* 139(3):281–289. Abstract available at <http://jada.ada.org/cgi/content/abstract/139/3/281>.

This article describes a study to explore whether four-handed delivery of dental sealants increases their retention. The study examined findings on the retention of autopolymerized resin-based sealants from systematic reviews of sealant effectiveness. The results indicate that using four-handed delivery to place resin-based sealants may increase retention.

PIT AND FISSURE SEALANTS FOR PREVENTING DENTAL DECAY IN THE PERMANENT TEETH OF CHILDREN AND ADOLESCENTS

Ahovuo-Saloranta A, Hiiri A, Nordblad A, Mäkelä M, Worthington HV. 2008. Pit and fissure sealants for preventing dental decay in the permanent teeth of children and adolescents. *Cochrane Database Systematic Reviews* 4:CD001830. Abstract and summary available at <http://www2.cochrane.org/reviews/en/ab001830.html>.

This article presents a review of studies that examined the effectiveness of pit-and-fissure dental sealants in preventing tooth decay in children and adolescents. The review showed that after 4.5 years, the sealed permanent molar teeth of children ages 5 to 10 had over 50 percent reduction in decay on biting surfaces compared to biting surfaces without sealants. One study with longer follow-up showed that after 9 years, only 27 percent of sealed tooth surfaces were decayed, compared to 77 percent of tooth surfaces without sealants.

PIT AND FISSURE SEALANTS VERSUS FLUORIDE VARNISHES FOR PREVENTING DENTAL DECAY IN CHILDREN AND ADOLESCENTS

Hiiri A, Ahovuo-Saloranta A, Nordblad A, Mäkelä M. 2010. Pit and fissure sealants versus fluoride varnishes for preventing dental decay in children and adolescents. *Cochrane Database Systematic Reviews* 3:CD003067. Abstract and summary available at <http://www2.cochrane.org/reviews/en/ab003067.html>.

This article presents results from a study to compare the effectiveness of pit-and-fissure dental sealants versus fluoride varnish in preventing tooth decay on occlusal tooth surfaces in children and adolescents. The authors found that dental sealants reduce tooth decay more than fluoride varnish, but the number of studies supporting the evidence is low.

POLICY ON THIRD-PARTY REIMBURSEMENT OF FEES RELATED TO DENTAL SEALANTS

American Academy of Pediatric Dentistry, Clinical Affairs Committee; American Academy of Pediatric Dentistry, Council on Clinical Affairs. 2009–2010. Policy on third-party reimbursement of fees related to dental sealants (rev. 2006). *Pediatric Dentistry* 31(7 Suppl.):76. Available at http://www.aapd.org/media/Policies_Guidelines/P_3rdPartSealants.pdf.

This policy statement recognizes that placing and maintaining dental sealants are scientifically sound and cost-effective techniques for preventing pit-and-fissure caries. Topics include sealant placement, maintenance, and repair; third-party coverage for sealants; awareness among oral health organizations, the insurance industry, and consumer groups about the advantages of sealants; and reimbursement for fees.

PREVENTING DENTAL CARIES THROUGH SCHOOL-BASED SEALANT PROGRAMS: UPDATED RECOMMENDATIONS AND REVIEWS OF EVIDENCE

Gooch BF, Griffin SO, Kolavic G, Kohn WG, Rozier RG, Siegal M, Fontana M, Brunson D, Carter N, Curtis DK, Donly KJ, Haering H, Hill LF, Hinson HP, Kumar J, Lampirra L, Mallatt M, Meyer DM, Miller WR, Sanzi-Schaedel SM, Simonson R, Truman BI, Zero DT; Centers for Disease Control and Prevention. 2009. Preventing dental caries through school-based sealant programs: Updated recommendations and reviews of evidence. *Journal of the American Dental Association* 140(11):1356–1365. Available at <http://jada.ada.org/cgi/reprint/140/11/1356>.

This article provides recommendations for dental sealant use in school-based dental sealant programs (SBSPs). It also reports evidence on the effectiveness of SBSPs and practices. Finally, the article presents findings on the consistency between recommendations for SBSPs and those for sealant use developed by the American Dental Association, Council on Scientific Affairs.

PUBLIC HEALTH SEALANT DELIVERY PROGRAMS: OPTIMAL DELIVERY AND THE COST OF PRACTICE ACTS

Scherrer CR, Griffin PM, Swann JL. 2007. Public health sealant delivery programs: Optimal delivery and the cost of practice acts. *Medical Decision Making* 27(6):762–771. Available at <http://mdm.sagepub.com/cgi/content/abstract/27/6/762>.

This article describes a study to determine the optimal combinations of staffing levels and dental sealant stations for school-based dental sealant programs. For general, direct, or indirect supervision, it is optimal to have one dentist; for no supervision, it is optimal to have no dentist. For general supervision, it is optimal to have the dentist and dental assistant screen and place sealants the following day. The cost savings for adding a dental assistant and chair averaged over all program sizes and travel distances ranged from 4.50 to 10.94 percent. Significant cost savings also result from reducing the required supervision level (8.72 to 29.96 percent).

SIMPLE, EFFECTIVE—AND INEXPENSIVE— STRATEGIES TO REDUCE TOOTH DECAY IN CHILDREN

Holtzman J. 2009. Simple, effective—and inexpensive—strategies to reduce tooth decay in children. *ICAN: Infant, Child, and Adolescent Nutrition* 1(4): 225–231. Abstract available at <http://can.sagepub.com/cgi/content/abstract/1/4/225>.

This article provides strategies to prevent tooth decay in children that health professionals can share with parents. Topics include reducing the number of tooth-decay-causing bacteria in the mouth, decreasing the bacteria's ability to produce acid, and making tooth enamel more resistant to acid attacks. Strategies include replacing sugar with xylitol, receiving fluoride treatment, teaching parents how to care for children's teeth, and receiving dental sealants.

TARGETING SCHOOL-BASED DENTAL SEALANT PROGRAMS: WHO IS AT “HIGHER RISK?”

Siegal MD, Detty AM. 2009. Targeting school-based dental sealant programs: Who is at “higher risk?” *Journal of Public Health Dentistry* [Epub ahead of print]. Abstract available at <http://www3.interscience.wiley.com/journal/123227692/abstract>.

This article presents a study to assess the effect of various free and reduced price meal program (FRPMP)—enrollment-based risk thresholds on the ability of school-based dental sealant programs (SBSPs) to reach students at higher risk for dental caries. The study used data from a statewide oral health survey of students in third grade to compare (1) the prevalence of dental caries in students at higher caries risk, using three different sets of child-risk criteria based on social determinants and (2) dental caries and other access-related indicators for students at higher-risk schools based on four FRPMP-based thresholds (≥ 60 percent of students FRPMP-enrolled, ≥ 50 percent, ≥ 40 percent, ≥ 30 percent). In addition, the study used school-enrollment and FRPMP-enrollment data to compare the percentages of schools with students eligible for FRPMP and students at higher caries risk resulting from the various thresholds. Results indicate that targeting higher-risk schools to reach students at higher caries risk is a practical and effective approach for increasing sealant prevalence through SBSPs.

MATERIALS



MATERIALS

The materials in this section were published from 2006 to 2010.

MEETINGS

IMPROVING THE ORAL HEALTH OF SCHOOL-AGED CHILDREN: STRENGTHENING SCHOOL-BASED DENTAL SEALANT PROGRAM LINKAGES WITH MEDICAID/SCHIP AND DENTAL HOMES—SUMMARY OF AN EXPERT MEETING CONVENED BY THE MATERNAL AND CHILD HEALTH BUREAU

Zimmerman B. 2006. *Improving the Oral Health of School-Aged Children: Strengthening School-Based Dental Sealant Program Linkages with Medicaid/SCHIP and Dental Homes—Summary of an Expert Meeting Convened by the Maternal and Child Health Bureau*. Washington, DC: Health Systems Research. 31 pp.

This summary describes an expert meeting held on May 11–12, 2006, in Washington, DC, to address approaches, issues, and challenges faced by school-based dental sealant programs (SBSPs) in enrolling children eligible for Medicaid and the Children's Health Insurance Program and linking them to a dental home. Also discussed are considerations and strategies for SBSP linkages with community resources, including dental insurance and oral health professionals who can meet children's broader oral health care needs. Binder contents include background material on the role of SBSPs in improving oral health, descriptions of six state programs used as examples during the meeting, background information and research on sealants and sealant programs, and policies from several professional organizations on dental and medical homes. [Funded by the Maternal and Child Health Bureau]

Contact: National Maternal and Child Oral Health Resource Center, Georgetown University, Box 571272, Washington, DC 20057-1272. Telephone: (202) 784-9771; fax: (202) 784-9777; e-mail: OHRCinfo@georgetown.edu; Web site: <http://www.mchoralhealth.org>. Available at <http://www.mchoralhealth.org>.

health.org/PDFs/SealantsMedicaidDentalHome.pdf.

POLICY

DENTAL SEALANTS

Maternal and Child Health Advisory Board. 2009. *Dental Sealants*. Carson City, NV: Nevada State Health Division, Oral Health Initiative. 1 p.

This fact sheet addresses the role of dental sealants in preventing tooth decay and reducing dental caries in school-age children. Topics include caries as a public health issue, the prevalence of tooth decay and sealants in Nevada, the impact of sealants on oral health, and why school-based dental sealant programs are recommended. Strategies to increase the use of and demand for sealants and to fund and promote population-based programs in Nevada are included.

Contact: Nevada Department of Health and Human Services, Oral Health Initiative, 4150 Technology Way, Suite 101, Carson City, NV 89706. Telephone: (775) 684-4285; Web site: http://health.nv.gov/CC_OralHealth.htm. Available at http://health.nv.gov/PDFs/MCHAB/Dental_Sealants.pdf.

PROFESSIONAL EDUCATION AND TRAINING

2009 ORAL HEALTH SURVEY PROTOCOL AND CONSENT FORM

Iowa Department of Public Health Oral Health Bureau. 2009. *2009 Oral Health Survey Protocol and Consent Form*. Des Moines, IA: Iowa Department of Public Health, Oral Health Bureau. 2 items.

This protocol was developed for use by health professionals in conducting school-based oral health screenings in Iowa. The protocol addresses the consent form; the parent referral letter; infection control, lighting, retraction, and visualization; visibility; instrumentation; and screening for cavitated

lesions, filled teeth, and dental sealants. A parental consent form is included; it may be used to obtain permission to perform an oral health screening, a height and weight screening, or both. The form includes questions about the child's dental home, dental visits, insurance, and eligibility for the National School Lunch Program. [Funded in part by the Maternal and Child Health Bureau]

Contact: Tracy Rodgers. Iowa Department of Public Health, Oral Health Bureau, Lucas State Office Building, 321 East 12th Street, Des Moines, IA 50319. Telephone: (515) 281-7715; fax: (515) 242-6384; e-mail: trodgers@idph.state.ia.us; Web site: http://www.idph.state.ia.us/hpcdp/oral_health.asp. Available at no charge.

ASTDD BASIC SCREENING SURVEY FOR CHILDREN PLANNING AND IMPLEMENTATION PACKET

Association of State and Territorial Dental Directors and Ohio Department of Health. 2008. *ASTDD Basic Screening Survey for Children Planning and Implementation Packet*. Jefferson City, MO: Association of State and Territorial Dental Directors; Columbus, OH: Ohio Department of Health. 5 items.

This packet contains information for planning and conducting an oral health screening of preschool- and school-age children and adults. Contents include a CD-ROM, a DVD, and reference guides. The CD-ROM contains a planning guide, a presentation for examiner training, Epi Info files for data entry and analysis, and guidance and resources on Institutional Review Board and Health Insurance Portability and Accountability Act compliance. The DVD contains examiner-training videos for oral- and non-oral-health professionals. The reference guides, one each for the dentition of preschool-age children, school-age children, and adults, present oral health indicators and photographs of the scoring criteria. [Funded in part by the Maternal and Child Health Bureau]

Contact: Association of State and Territorial Dental Directors. 1838 Fieldcrest Drive, Sparks, NV 89434. Telephone: (775) 626-5008; fax: (775) 626-9268; e-mail: cwood@astdd.org; Web site: <http://www.astdd.org>. Ordering information available at <http://www.astdd.org/index.php?template=surveybss.html>.

COLORADO SCHOOL-BASED PIT AND FISSURE SEALANTS: BE SMART AND SEAL THEM!

Colorado Department of Public Health and the Environment, Oral, Rural and Primary Care Section. 2006. *Colorado School-Based Pit and Fissure Sealants: Be Smart and Seal Them!* Denver, CO: Colorado Department of Public Health and the Environment, Oral, Rural and Primary Care Section. 10 items.

This packet was developed for use by oral health professionals in identifying students in second grade who would benefit from the placement of dental sealants on their permanent molar teeth. The program provides an oral health screening and one-on-one instruction in oral care, classroom presentations on oral hygiene and sealants, presentations on oral health for parents, and referrals for children who need restorative or emergency care. Information on using sealants to prevent dental caries is also included. The documents are intended for use by volunteer dentists, dental hygienists, and student dentists in providing services on site at elementary schools. Documents include a brochure, fact sheets, and a card. The materials are available in English and Spanish. [Funded in part by the Maternal and Child Health Bureau]

Contact: Colorado Department of Public Health and Environment, Oral Health Unit, 4300 Cherry Creek Drive, South, PSD-OH-A4, Denver, CO 80246. Telephone: (303) 692-2470; fax: (303) 758-3448; e-mail: cdphe.psdrequests@state.co.us; Web site: <http://www.cdphe.state.co.us/pp/oralhealth/OralHealth.html>. Available at <http://www.cdphe.state.co.us/pp/oralhealth/dentalsealants.html>.

FUTURE SMILES: SCHOOL SEALANT PROGRAM

Flint Hills Community Health Center. 2007. *Future Smiles: School Sealant Program*. Emporia, KS: Flint Hills Community Health Center. 6 items.

These materials are part of a program designed to bring oral health care to children from families with low incomes in the elementary school setting. The materials include two brochures, one containing program information and another containing information on the use of dental sealants in preventing tooth decay. A parent/guardian letter, a

patient information and health history form, and a consent-for-treatment form are also included. A report form is provided for use in communicating with a parent or other caregiver about a child's oral health treatment needs and services rendered, including sealants and fluoride varnish. Some materials are available in Spanish. [Funded by the Maternal and Child Health Bureau]

Contact: National Maternal and Child Oral Health Resource Center, Georgetown University, Box 571272, Washington, DC 20057-1272. Telephone: (202) 784-9771; fax: (202) 784-9777; e-mail: OHRCinfo@georgetown.edu; Web site: <http://www.mch.oralhealth.org>. Available at <http://www.mchoralhealth.org/materials/multiples/futuresmiles>.

ILLINOIS DENTAL SEALANT TOOLKIT

Illinois Department of Public Health, Division of Oral Health. 2006. *Illinois Dental Sealant Toolkit*. Springfield, IL: Illinois Department of Public Health, Division of Oral Health. 7 items.

This toolkit is designed to assist health professionals in developing and implementing programs to provide dental sealants for children in Illinois who are at high risk for dental caries. Contents include (1) talking points for oral health education for students in grades 2 and 6; (2) sample handouts and activities for use in the classroom and to take home, including fact sheets in Spanish; and (3) a list of resources. The toolkit also contains an oversized toothbrush, a mouth model, a mirror, a sample container of dental floss, a sealant material container, and a model of a sealed tooth. A video about sealants is included. [Funded in part by the Maternal and Child Health Bureau]

Contact: National Maternal and Child Oral Health Resource Center, Georgetown University, Box 571272, Washington, DC 20057-1272. Telephone: (202) 784-9771; fax: (202) 784-9777; e-mail: OHRCinfo@georgetown.edu; Web site: <http://www.mch.oralhealth.org>. Available on site only.

KANSAS SCHOOL ORAL HEALTH SCREENING INITIATIVE

Kansas Department of Health and Environment, Office of Oral Health. 2010. *Kansas School Oral Health Screening Initiative*. Topeka, KS: Kansas Department of Health and Environment, Office of Oral Health.

These materials are designed for use by oral health professionals and school nurses in providing annual oral health screenings for students entering kindergarten through grade 12 in Kansas. Data collected from school oral health screenings yields information on untreated oral health problems, urgent care needs, previous treatment received, and whether dental sealants have been placed on a child's or adolescent's teeth. Contents include a program brochure, a toolkit, forms, reports, and instructions for submitting screening data. Information about the state statute mandating the program and a calibration-training course are also provided. Parental notification forms are available in English and Spanish.

Contact: Caron Shipley. Kansas Department of Health and Environment, Bureau of Oral Health, 1000 S.W. Jackson Street, Suite 300, Topeka, KS 66612-1365. Telephone: (785) 291-3683; e-mail: cshipley@kdheks.gov; Web site: <http://www.kdheks.gov/ohi>. Available at http://www.kdheks.gov/ohi/screening_program.htm.

ORAL HEALTH AMERICA: SMILES ACROSS AMERICA PRODUCT DONATION PROJECT

Oral Health America. 2006. *Oral Health America: Smiles Across America Product Donation Project*. Chicago, IL: Oral Health America. 5 pp.

This kit contains materials intended for use by community or school oral health programs in applying for product donations. Contents include eligibility requirements; a partnership agreement; a form for programs to request dental sealant and fluoride varnish products as well as toothpaste, toothbrushes, pumice preppies, dental floss, and other products; and a report form to describe program results.

Contact: Melissa Hoebbel. Oral Health America, 410 North Michigan Avenue, Suite 352, Chicago, IL 60611-4211. Telephone: (312) 836-9900; fax: (312) 836-9986; e-mail: melissa@oralhealthamerica.org; Web site: <http://www.oralhealthamerica.org>. Available at <http://www.oralhealthamerica.org/pdf/ProductDonationForm2010.pdf>.

PAIN AND SUFFERING SHOULDN'T BE AN OPTION: SCHOOL-BASED AND SCHOOL-LINKED ORAL HEALTH SERVICES FOR CHILDREN AND ADOLESCENTS

Holt K, Barzel R. 2010. *Pain and Suffering Shouldn't Be an Option: School-Based and School-Linked Oral Health Services for Children and Adolescents*. Washington, DC: National Maternal and Child Oral Health Resource Center. 4 pp.

This fact sheet provides information about the importance of good oral health during childhood and adolescence. Topics discussed include school readiness, disparities, oral trauma, nutrition, dental sealants, fluoride varnish, and school-based and school-linked oral health services. [Funded by the Maternal and Child Health Bureau]

Contact: National Maternal and Child Oral Health Resource Center, Georgetown University, Box 571272, Washington, DC 20057-1272. Telephone: (202) 784-9771; fax: (202) 784-9777; e-mail: OHRCinfo@georgetown.edu; Web site: <http://www.mchoralhealth.org>. Available at no charge and can be ordered at <http://www.mchoralhealth.org/order>. The fact sheet is also available at <http://www.mchoralhealth.org/PDFs/schoolhealthfactsheet.pdf>.

SCHOOL-BASED DENTAL SEALANT PROGRAM MANUAL

Ohio Department of Health, Bureau of Oral Health Services. 2009. *School-Based Dental Sealant Program Manual*. Columbus, OH: Ohio Department of Health, Bureau of Oral Health Services. 36 pp.

This manual provides professional recommendations and states' expectations for school-based dental sealant programs (SBSPs) funded by the Ohio Department of Health (ODH). Contents include local program operations, regulatory compliance, compliance with ODH policies, SBSP eligibility, sample program forms, clinical materials and methods, retention checks, Medicaid billing and collection performance benchmarks and performance standards, reporting, ODH program reviews, and compliance with other ODH requirements.

Contact: Ohio Department of Health, Oral Health Program, P.O. Box 118, 246 North High Street, Columbus, OH 43215. Telephone: (614) 466-4180; fax: (614) 564-2421; e-mail: bohs@odh.ohio.gov; Web site: <http://www.odh.ohio.gov/odhPrograms/ohs/oral/oral1.aspx>. Available at <http://www.odh.ohio.gov/ASSETS/AE87CDD4956643F5A54853F3BAD600A4/Manual%20with%20active%20linksFINAL.pdf>.

SCHOOL-BASED DENTAL SEALANT PROGRAMS

Barzel R, Holt K, Siegal M. 2009. *School-Based Dental Sealant Programs*. Washington, DC: National Maternal and Child Oral Health Resource Center.

This curriculum is designed to provide school-based dental sealant program (SBSP) staff with an understanding of the history, operations, and underlying principles of SBSPs funded by the Ohio Department of Health (ODH). Contents include guidelines for infection control and information about tooth selection and assessment for sealants; the sealant-application process; and SBSP operations, with an emphasis on the specific requirements that apply to programs funded by ODH. [Funded by the Maternal and Child Health Bureau]

Contact: National Maternal and Child Oral Health Resource Center, Georgetown University, Box 571272, Washington, DC 20057-1272. Telephone: (202) 784-9771; fax: (202) 784-9777; e-mail: OHRCinfo@georgetown.edu; Web site: <http://www.mchoralhealth.org>. Available at <http://www.ohiodentalclinics.com/curricula/sealant>.

SCHOOL ORAL HEALTH SCREENINGS: INFORMATION AND FORMS

Montana Department of Public Health and Human Services, Oral Health Program. 2009. *School Oral Health Screenings: Information and Forms*. Helena, MT: Montana Department of Public Health and Human Services, Oral Health Program. 7 items.

These resources are intended for use in implementing a statewide screening program to assess the prevalence of untreated dental caries, caries experience, dental sealants, and treatment urgency among students in third grade in Montana. Contents include a manual (*Basic Screening Surveys: An Approach to Monitoring Community Oral Health—Preschool and School Children*), a video, a school intake form, a screening form and instructions, a parent consent form, and a student report card. Data elements include screener profession and training and child demographics (grade, age, gender, and race/ethnicity).

Contact: Montana Department of Public Health and Human Services, Oral Health Program, 1218 East Sixth Avenue, Helena, MT. Telephone: (406) 444-0276; Web site: <http://www.dphhs.mt.gov/PHSD/family-health/oral-health/family-oralHealth-index.shtml>. Available at <http://www.dphhs.mt.gov/PHSD/family-health/oral-health/family-oralHealth-index.shtml>.

SEAL A SMILE: A DENTAL SEALANT PORTFOLIO FOR DENTAL HYGIENE PROGRAMS AND WISCONSIN COMMUNITIES—A USER’S GUIDE (REV. ED.)

Balnka P, McKenney N, Crespín M. 2006. *Seal a Smile: A Dental Sealant Portfolio for Dental Hygiene Programs and Wisconsin Communities—A User’s Guide* (rev. ed.). Milwaukee, WI: Children’s Health Alliance of Wisconsin. 95 pp.

This manual provides step-by-step guidelines for developing school-based and school-linked dental sealant programs in Wisconsin. It is divided into modules covering the following topics: (1) an overview of oral health needs in Wisconsin, (2) community partners and resources, (3) selection of children for the program and form development, (4) program preparation and communication forms, (5) program implementation, (6) treatment referral, (7) program evaluation, (8) equipment and supplies, (9) grantwriting and funding sources, (10) occupational safety and health training and first aid planning, and (11) problems and solutions. Appendices include resource information, along with sample forms and letters; recommendations from a workshop on guidelines for sealant use; the report of the governor’s task force to improve access to oral health; and the Seal-a-Smile program fact sheet.

Contact: Children’s Health Alliance of Wisconsin, 620 South 76th Street, Suite 120, Milwaukee, WI 53214. Telephone: (414) 292-4000; (414) 292-4004; fax: (414) 231-4972; Web site: <http://www.chawisconsin.org/oralHealth.htm>. Available at <http://www.chawisconsin.org/oralHealth/Resources.htm>.

SEAL A SMILE TEXAS STYLE: A SEALANT MANUAL FOR THE ORAL HEALTH PROGRAM (REV. ED.)

Altenhoff L, Beeman D, Forbes D, Gray W, Hardin R, Howard R, King C, Lopez N, Tesch S, Weber M,

Willberg B, Williams M. 2009. *Seal a Smile Texas Style: A Sealant Manual for the Oral Health Program* (rev. ed.). Austin, TX: Texas Department of State Health Services, Oral Health Program. 32 pp.

This manual provides a description of the mission and goals of the Texas Dental Sealant program to identify children at high risk for dental caries and provide preventive services (including dental sealants) and treatment referrals. Other topics include partnerships and collaborations, a map of oral health coalitions in Texas, planning and preparation for school sealant clinics, sealant program barriers and challenges, an equipment and supplies checklist, an illustrated guide to portable equipment, and referral and follow-up tips. The appendix contains sample letters and forms.

Contact: Texas Department of State Health Services, Oral Health Program, 1100 West 49th Street, Mail Code 1938, Austin, TX 78756-3199. Telephone: (512) 458-7323; fax: (512) 458-7256; Web site: <http://www.dshs.state.tx.us/dental/default.shtm>. Available at <http://www.dshs.state.tx.us/dental/pdf/Seal%20a%20Smile-WG-rev%2009-22-09.pdf>.

SEAL AMERICA: THE PREVENTION INVENTION (2ND ED.)

Carter NL, American Association for Community Dental Programs and National Maternal and Child Oral Health Resource Center. 2007. *Seal America: The Prevention Invention* (2nd ed.). Washington, DC: National Maternal and Child Oral Health Resource Center.

This manual is designed to assist health professionals in initiating and implementing a school-based dental sealant program. Staff of established programs may also find the manual of interest as they work to improve specific aspects of their programs. Contents include information about getting started, gaining and maintaining community support, staffing, purchasing dental equipment and supplies, funding, developing forms and records, tracking students, collecting and analyzing data, preparing to launch, implementing the program, referral and follow-up, and program evaluation. The streaming video segment, titled “Seal in a Smile,” is also available on DVD. [Funded by the Maternal and Child Health Bureau]

Contact: National Maternal and Child Oral Health Resource Center, Georgetown University, Box

571272, Washington, DC 20057-1272. Telephone: (202) 784-9771; fax: (202) 784-9777; e-mail: OHRCinfo@georgetown.edu; Web site: <http://www.mchoralhealth.org>. Available at <http://www.mchoralhealth.org/Seal>.

SEALS: SEALANT EFFICIENCY ASSESSMENT FOR LOCALS AND STATES

Jones K, Griffin S. 2006. *SEALS: Sealant Efficiency Assessment for Locals and States*. Atlanta, GA: National Center for Chronic Disease Prevention and Health Promotion, Division of Oral Health. 1 CD-ROM (software, 2 user manuals, and 2 technical notes).

This software and accompanying user manuals and technical notes provides instruction for an evaluation and benchmarking tool for community dental sealant programs. One set of software, manuals, and notes is intended for use by individual program administrators, and the other is for state administrators to combine data from all local programs.

Contact: Susan Griffin. Centers for Disease Control and Prevention, Division of Oral Health, 4770 Buford Highway, N.E., Mailstop F-10, Atlanta, GA 30341-3717. Telephone: (770) 488-6064; e-mail: sig1@cdc.gov; Web site: <http://www.cdc.gov/OralHealth>. Available at no charge. More information is available at http://www.cdc.gov/oralhealth/state_programs/infrastructure/seals.htm. *Note:* Prior to implementation, programs are asked to contact Susan Griffin, the co-developer and Centers for Disease Control and Prevention lead for this activity.

PUBLIC EDUCATION

ARIZONA DENTAL SEALANT PROGRAM

Arizona Department of Health Services, Office of Oral Health. 2007. *Arizona Dental Sealant Program*. Phoenix, AZ: Arizona Department of Health Services, Office of Oral Health. 2 pp.

This brochure discusses the importance of dental sealants in preventing tooth decay in children and encourages parents and other caregivers to enroll their children in Arizona's sealant program for students in grades 2 and 6 who are at risk for tooth decay. Data and key references from state and national reports on children's oral health

and overall well-being are cited throughout the brochure.

Contact: RaNee Tuscano. Arizona Department of Health Services, Office of Oral Health, 150 North 18th Avenue, Suite 320, Phoenix, AZ 85007. Telephone: (602) 542-2945; fax: (602) 364-1494; e-mail: tuscanr@azdhs.gov; Web site: <http://www.azdhs.gov/cfhs/ooh>. Available at <http://www.azdhs.gov/cfhs/ooh/pdf/programhistorycolor06.pdf>.

DENTAL SEALANTS

Washington State Department of Health, MCH Oral Health Program. 2010. *Dental Sealants*. Olympia, WA: Washington State Department of Health, MCH Oral Health Program. 1 p.

This fact sheet for parents presents information in a question-and-answer format about the importance of dental sealants in preventing tooth decay in children. The fact sheet defines sealants and provides information on how they are applied and how they work to prevent tooth decay. Information on the benefits of sealants and their safety and effectiveness is also provided.

Contact: Washington State Department of Health, Oral Health Program, P.O. Box 47835, Olympia, WA 98504-7835. Telephone: (360) 236-3524; e-mail: oral.health@doh.wa.gov; Web site: http://www.doh.wa.gov/cfh/Oral_Health. Available at http://www.doh.wa.gov/cfh/Oral_Health/Documents/Sealants/fsSealants.pdf.

DENTAL SEALANTS

Illinois Department of Public Health, Division of Oral Health. 2006. *Dental Sealants*. Springfield, IL: Illinois Department of Public Health, Division of Oral Health. 2 pp.

This fact sheet for the public provides a definition of dental sealants and discusses how sealants are applied, how they feel, and how long they last. Information about the time- and cost-saving benefits of sealants is also presented. [Funded in part by the Maternal and Child Health Bureau]

Contact: Illinois Department of Public Health, Division of Oral Health, 535 West Jefferson Street, Second Floor, Springfield, IL 62761. Telephone: (217) 782-4977; (800) 547-0466; fax: (217) 782-3987; Web site: <http://www.idph.state.il.us/HealthWellness/oralhlth/home.htm>. Available at <http://www.idph.state.il.us/HealthWellness/oralhlth/oralsealants.htm>.

DENTAL SEALANTS

Iowa Department of Public Health, Oral Health Bureau. 2009. *Dental Sealants*. Des Moines, IA: Iowa Department of Public Health, Bureau of Oral Health. 2 pp.

This brochure for parents explains what dental sealants are and how they are used. It also addresses when a child's teeth should be sealed and how long sealants last. Information on low-cost or no-cost insurance is provided. The brochure is printed in English on one side and in Spanish on the other.

Contact: Tracy Rodgers. Iowa Department of Public Health, Oral Health Bureau, Lucas State Office Building, 321 East 12th Street, Des Moines, IA 50319. Telephone: (515) 281-7715; fax: (515) 242-6384; e-mail: trodders@idph.state.ia.us; Web site: http://www.idph.state.ia.us/hpcdp/oral_health.asp. Available at http://www.idph.state.ia.us/hpcdp/common/pdf/oral_health/dental_sealants.pdf.

DENTAL SEALANTS: IS YOUR CHILD A CANDIDATE?

Academy of General Dentistry. 2007. *Dental Sealants: Is Your Child a Candidate?* Chicago, IL: Academy of General Dentistry. 1 p.

This fact sheet provides information for parents and other caregivers on how oral health professionals determine whether a child is a candidate for dental sealants. Selected topics include the benefits of sealants, utilization, and risk assessment.

Contact: Academy of General Dentistry, 211 East Chicago Avenue, Suite 900, Chicago, IL 60611-1999. Telephone: (888) 243-3368; fax: (312) 440-0559; Web site: <http://www.agd.org>. Available at <http://www.agd.org/public/oralhealth/Default.asp?IssID=327&Topic=S&ArtID=1311#body>.

FOR THE DENTAL PATIENT . . . SEALING OUT TOOTH DECAY

American Dental Association. 2010. For the Dental Patient . . . Sealing Out Tooth Decay. Chicago, IL: *Journal of the American Dental Association* 141(3): 363. 1 p.

This reprint from the *Journal of the American Dental Association* addresses dental sealants and their role in preventing tooth decay. The reprint is

designed for dentists to clip and copy as a hand-out for their clients. The reprint includes photographs showing how a tooth looks both before and after a sealant has been applied.

Contact: American Dental Association, 211 East Chicago Avenue, Chicago, IL 60611-2663. Telephone: (312) 440-2500; fax: (312) 440-7494; Web site: <http://www.ada.org>. Available at <http://www.ada.org/993.aspx>.

FREQUENTLY ASKED QUESTIONS: DENTAL SEALANTS

Centers for Disease Control and Prevention. 2009. *Frequently Asked Questions: Dental Sealants*. Atlanta, GA: Centers for Disease Control and Prevention.

This fact sheet for the public presents information on dental sealants in a question-and-answer format. Topics include what sealants are, which teeth are suitable for sealants, how sealants are applied, whether they are visible, whether they make teeth feel different, how long they last, whether they replace fluoride for caries protection, how they fit into preventive dentistry programs, and why sealing a tooth is better than waiting until decay is present and then filling a cavity. Links to additional resources on toothbrushing and school-based dental sealant programs are included.

Contact: Centers for Disease Control and Prevention, Division of Oral Health, 4770 Buford Highway, N.E., Mailstop F-10, Atlanta, GA 30341-3717. Telephone: (770) 488-6064; e-mail: oralhealth@cdc.gov; Web site: <http://www.cdc.gov/OralHealth>. Available at http://www.cdc.gov/OralHealth/publications/factsheets/sealants_faq.htm.

PARENT RESOURCE CENTER

American Academy of Pediatric Dentistry. 2010. *Parent Resource Center*. Chicago, IL: American Academy of Pediatric Dentistry.

This section of the American Academy of Pediatric Dentistry's (AAPD's) Web site provides information and resources about dental sealants for parents and other caregivers of children and adolescents. Information is included in the following links: Find a Pediatric Dentist, Questions Frequently Asked by Parents, Parent Education Brochures, and AAPD Policies and Guidelines. Some resources are provided in English and Spanish.

Contact: American Academy of Pediatric Dentistry, 211 East Chicago Avenue, Suite 1700, Chicago, IL 60611-2663. Telephone: (312) 337-2169; (800) 544-2174; fax: (312) 337-6329; Web site: <http://www.aapd.org>. Available at <http://www.aapd.org/parents>.

PUT A SEAL ON DENTAL DECAY: A PARENT'S GUIDE ABOUT SEALANTS (REV.)

Pennsylvania Department of Health. 2009. *Put a Seal on Dental Decay: A Parent's Guide About Sealants* (rev.). Harrisburg, PA: Pennsylvania Department of Health. 2 pp.

This brochure provides information for parents about dental sealants and how they can be used to help prevent tooth decay in primary and permanent teeth. The brochure describes what sealants are, who needs them, the role of sealants in oral hygiene, and how they are applied.

Contact: Pennsylvania Department of Health, 625 Forster Street, Health and Welfare Building, Eighth Floor, Harrisburg, PA 17120. Telephone: (877) 724-3258; Web site: http://www.portal.state.pa.us/portal/server.pt/community/departement_of_health_home/17457. Available at <http://www.dsf.health.state.pa.us/health/lib/health/PutASealOnDentalDecay20090325.pdf>.

SCHOOL-BASED DENTAL SEALANT PROGRAMS

Centers for Disease Control and Prevention, Division of Oral Health. 2010. *School-Based Dental Sealant Programs*. Atlanta, GA: Centers for Disease Control and Prevention, Division of Oral Health.

This fact sheet for the public presents information on school-based dental sealant programs (SBSPs) in a question-and-answer format. Topics include what dental sealants are, what SBSPs are, evidence showing that SBSPs work, and recommendations for SBSPs. Links to key resources such as national reports, fact sheets, best practices, and research are included.

Contact: Centers for Disease Control and Prevention, Division of Oral Health, 4770 Buford Highway, N.E., Mailstop F-10, Atlanta, GA 30341-3717. Telephone: (770) 488-6064; e-mail: oralhealth@cdc.gov; Web site: <http://www.cdc.gov/OralHealth>. Available at http://www.cdc.gov/OralHealth/topics/dental_sealant_programs.htm.

SCHOOL BASED DENTAL SEALANT PROGRAMS

Washington State Department of Health, MCH Oral Health Program. 2010. *School Based Dental Sealant Programs*. Olympia, WA: Washington State Department of Health, MCH Oral Health Program. 1 p.

This fact sheet provides statistics on tooth decay in children and on how it impacts health and school attendance and performance, as well as information on the role of school-based dental sealant programs in preventing tooth decay. Information about sealants, including how they are applied and their benefits, safety, and effectiveness, is also provided.

Contact: Washington State Department of Health, Oral Health Program, P.O. Box 47835, Olympia, WA 98504-7835. Telephone: (360) 236-3524; e-mail: oral.health@doh.wa.gov; Web site: http://www.doh.wa.gov/cfh/Oral_Health. Available at http://www.doh.wa.gov/cfh/Oral_Health/Documents/Sealants/fsschoolsealant.pdf.

SCHOOL DENTAL PREVENTION PROGRAM

South Carolina Department of Health and Environmental Control. 2006. *School Dental Prevention Program*. Columbia, SC: South Carolina Department of Health and Environmental Control. 1 p.

This fact sheet provides parents with information about South Carolina's school oral health program, which includes a dental sealant component and a fluoride treatment (gel, foam, or varnish) component. Definitions of sealants and fluoride treatment are provided, along with information on how children can take part in the program.

Contact: South Carolina Department of Health and Environmental Control, 2600 Bull Street, Columbia, SC 29201. Telephone: (803) 898-3432; fax: (803) 898-3323; Web site: <http://www.scdhec.gov>. Available at http://www.scdhec.gov/health/mch/oral/docs/school_SDPP%20informational%20flyer.pdf.

SEALANTS

California Dental Association. 2006. *Sealants*. Sacramento, CA: California Dental Association. 1 p.

This fact sheet for the public discusses the role of dental sealants as part of an oral health program to prevent tooth decay. Topics include plaque, tooth decay, how sealants are applied, and who should get sealants. The fact sheet is available in English, Spanish, and Hmong.

Contact: California Dental Association, 1201 K Street, Sacramento, CA 95814. Telephone: (800) 232-7645; e-mail: contactcda@cda.org; Web site: <http://www.cda.org>. Available at http://www.cda.org/popup/Sealants_English.

SEALANTS PREVENT TOOTH DECAY!

Nevada State Health Division. 2008. *Sealants Prevent Tooth Decay!* Carson City, NV: Nevada State Health Division. 2 pp.

This brochure for the public describes dental sealants, why they are needed, and how and when they are applied. Color photographs depicting the application process are included. Information on finding a dental home is also provided. The brochure is available in English and Spanish.

Contact: Nevada Department of Health and Human Services, Oral Health Initiative, 4150 Technology Way, Suite 101, Carson City, NV 89706. Telephone: (775) 684-4285; Web site: http://health.nv.gov/CC_OralHealth.htm. Available at http://health.nv.gov/PDFs/OH/APPROVED_Sealant_Brochure_ENGLISH_9-08.pdf.

WHAT IS A SEALANT?

Academy of General Dentistry. 2007. *What Is a Sealant?* Chicago, IL: Academy of General Dentistry.

This fact sheet for the public defines dental sealants and describes their benefits. Other topics include effectiveness, application, longevity, target populations, and insurance.

Contact: Academy of General Dentistry, 211 East Chicago Avenue, Suite 900, Chicago, IL 60611-1999. Telephone: (888) 243-3368; fax: (312) 440-0559; Web site: <http://www.agd.org>. Available at <http://www.agd.org/public/oralhealth/Default.asp?IssID=327&Topic=S&ArtID=1312#body>.

STATE PROGRAM REPORTS

2006 NEVADA STATE REPORT ON SCHOOL-BASED DENTAL SEALANT PROGRAMS

Nevada Department of Health, Oral Health Initiative. 2006. *2006 Nevada State Report on School-Based Dental Sealant Programs*. Carson City, NV: Nevada Department of Health, Oral Health Initiative. 9 pp.

This report outlines results of a 2006 statewide survey in Nevada of school-based dental sealant programs targeting schools in which at least 50 percent of the children enrolled are eligible for the National School Lunch Program.

Contact: Nevada Department of Health and Human Services, Oral Health Initiative, 4150 Technology Way, Suite 101, Carson City, NV 89706. Telephone: (775) 684-4285; Web site: http://health.nv.gov/CC_OralHealth.htm. Available at <http://health.nv.gov/PDFs/OH/NevadaSealantReport05-06CDCFinal.pdf>.

ALASKA: STATE ORAL HEALTH COLLABORATIVE SYSTEMS GRANT—FINAL REPORT

Whistler B. 2007. *Alaska: State Oral Health Collaborative Systems Grant—Final Report*. Juneau, AK: State of Alaska Department of Health and Social Services, Oral Health Program. 10 pp., plus 5 attachments.

This report summarizes the accomplishments of Alaska's State Oral Health Collaborative Systems grant for the period 2004–2007. The report outlines program activities, including hiring a statewide dental sealant coordinator to work collaboratively with tribal, community health center, and private oral health programs to increase availability of sealants in schools with high percentages of children from families with low incomes. The report also includes a summary from the sealant program inventory. [Funded by the Maternal and Child Health Bureau]

Contact: National Maternal and Child Oral Health Resource Center, Georgetown University, Box 571272, Washington, DC 20057-1272. Telephone: (202) 784-9771; fax: (202) 784-9777; e-mail: OHRCinfo@georgetown.edu; Web site: <http://www.mchlibrary.org>. Available at <http://www.mchlibrary.org/MCHBfinalreports/docs/H47MC02094.pdf>.

ARIZONA DENTAL SEALANT PROGRAM: A PREVENTIVE DENTAL PROGRAM (REV. ED.)

Arizona Department of Health Services, Office of Oral Health. 2010. *Arizona Dental Sealant Program: A Preventive Dental Program* (rev. ed.). Phoenix, AZ: Arizona Department of Health Services, Office of Oral Health. 1 p.

This fact sheet provides information about Arizona's program to reduce pit-and-fissure tooth decay in children by using portable dental equipment at the school site to provide oral health screenings and dental sealants (as appropriate) on the permanent molars of students in grades 2 and 6. Topics include program objectives, history, funding and eligibility, child participation, and program staff. The fact sheet also cites statistics for the 2008–2009 school year as follows: the number of counties in which the program was implemented, the number of children who received oral health screenings, and the number of children who received sealants. [Funded in part by the Maternal and Child Health Bureau]

Contact: RaNee Tuscano. Arizona Department of Health Services, Office of Oral Health, 150 North 18th Avenue, Suite 320, Phoenix, AZ 85007. Telephone: (602) 542-2945; fax: (602) 364-1494; e-mail: tuscanr@azdhs.gov; Web site: <http://www.azdhs.gov/cfhs/ooh>. Available at <http://www.azdhs.gov/cfhs/ooh/pdf/programhistorycolor06.pdf>.

CHILDREN'S ORAL HEALTHCARE ACCESS PROGRAM: FINAL REPORT

Richardson DJ. 2007. *Children's Oral Healthcare Access Program: Final Report*. New Orleans, LA: Louisiana State University Health Science Center School of Dentistry. 24 pp.

This final report summarizes Louisiana's Sealant Program Initiative, a school-based dental sealant program supported by Louisiana's State Oral Health Collaborative Systems grant for the period 2004–2007. The report is divided into the following sections: problem, overall experience to date, evaluation, regional and national significance, impact, and sustainability. Goals and achievements; reasons for less-than-expected progress; and trends, significant problems, and constraints are discussed. Appendices include data summary tables and copies of the following grant-funded products: an oral health screening results form and a sealant program information letter to parents,

a parental consent form, and a screening form. [Funded by the Maternal and Child Health Bureau]

Contact: National Maternal and Child Oral Health Resource Center, Georgetown University, Box 571272, Washington, DC 20057-1272. Telephone: (202) 784-9771; fax: (202) 784-9777; e-mail: OHRCinfo@georgetown.edu; Web site: <http://www.mch.oralhealth.org>. Available at <http://www.mchlibrary.info/MCHBFinalreports/docs/H47MC01938.pdf>.

FINAL PROGRESS REPORT: STATE ORAL HEALTH COLLABORATIVE SYSTEMS GRANT—CONNECTICUT COMMUNITY-BASED SEALANT PROGRAM

Wilson AA. 2008. *Final Progress Report: State Oral Health Collaborative Systems Grant—Connecticut Community-Based Sealant Program*. Hartford, CT: Connecticut Department of Public Health. 13 pp., plus attachments.

This final report presents findings from Connecticut's State Oral Health Collaborative Systems grant for the period 2004–2007 to increase entry of children enrolled in Medicaid and the Children's Health Insurance Program, as well as other children, into long-term, comprehensive oral health services. Contents include descriptions of the problem and experience to date. Objectives, accomplishments, strengths, and weaknesses are outlined for each project goal. Recommendations for a model dental sealant program and a list of publications and products are included. [Funded by the Maternal and Child Health Bureau]

Contact: National Maternal and Child Oral Health Resource Center, Georgetown University, Box 571272, Washington, DC 20057-1272. Telephone: (202) 784-9771; fax: (202) 784-9777; e-mail: OHRCinfo@georgetown.edu; Web site: <http://www.mch.oralhealth.org>. Available at <http://www.mchlibrary.info/MCHBfinalreports/docs/H47MC04113.pdf>.

FUTURE SMILES DENTAL CLINIC: STATE ORAL HEALTH COLLABORATIVE SYSTEMS (SOHCS) GRANT—FINAL NARRATIVE REPORT

Mouden L. 2007. *Future Smiles Dental Clinic: State Oral Health Collaborative Systems (SOHCS) Grant—Final Narrative Report*. Little Rock, AR: Arkansas Department of Health, Office of Oral Health. 13 pp.

This report summarizes efforts to increase access to oral health care for a target population of children in the Little Rock, Arkansas, school district with funding from the State Oral Health Collaborative Systems grant for the period 2004–2007. The report contains information on the purpose, goals and objectives, methods, evaluation, work plan, and regional and national significance of the Future Smiles project. Selected topics include establishing a dental clinic, developing a steering committee, providing comprehensive preventive (screenings and dental sealants) and restorative oral health services in the school-based setting, and providing education for children and their parents on the importance of optimal oral health. [Funded by the Maternal and Child Health Bureau]

Contact: National Maternal and Child Oral Health Resource Center, Georgetown University, Box 571272, Washington, DC 20057-1272. Telephone: (202) 784-9771; fax: (202) 784-9777; e-mail: OHRCinfo@georgetown.edu; Web site: <http://www.mchlibrary.org>. Available at <http://www.mchlibrary.org/MCHBFinalreports/docs/H47MC01929.pdf>.

IDPH SCHOOL-BASED SEALANT PROGRAM ANNUAL REPORT: SCHOOL YEAR 2008–2009

Iowa Department of Public Health, Oral Health Bureau. 2009. *IDPH School-Based Sealant Program Annual Report: School Year 2008–2009*. Des Moines, IA: Iowa Department of Public Health, Oral Health Bureau. Annual.

This chart provides statistics for several school-based dental sealant programs in Iowa during the school year. Results for five agencies indicate the number of (1) children examined, (2) children receiving sealants, (3) sealants placed, (4) sealants placed on children covered by Medicaid, (5) children with history of tooth decay, (6) children covered by Medicaid with history of decay, (7) children with untreated decay, (8) children covered by Medicaid with untreated decay, (9) children with private insurance, (10) children with no dental insurance, and (11) children covered by Medicaid.

Contact: Tracy Rodgers. Iowa Department of Public Health, Oral Health Bureau, Lucas State Office Building, 321 East 12th Street, Des Moines, IA 50319. Telephone: (515) 281-7715; fax: (515) 242-6384; e-mail: trodgers@idph.state.ia.us. Web site: http://www.idph.state.ia.us/hpcdp/oral_health.asp.

Available at http://www.idph.state.ia.us/hpcdp/common/pdf/oral_health/summary_sealant09.pdf.

PARTNERING TO SEAL-A-SMILE: A REPORT ON THE SUCCESS OF WISCONSIN SCHOOL- BASED DENTAL SEALANT PROGRAMS

Crespin M, Ordians K, Tatro BJ. 2009. *Partnering to Seal-a-Smile: A Report on the Success of Wisconsin School-Based Dental Sealant Programs*. Milwaukee, WI: Children's Health Alliance of Wisconsin. 43 pp.

This report describes successes of the Seal-a-Smile program, which provided school-based oral health services to children in Wisconsin for the period 2005–2007. Contents include a review of the need for dental-caries-prevention services in the state; use of the program's oral health services (dental sealants and topical fluoride) and education services; the methodology used to collect statewide data and evaluate the program; and key findings, conclusions, and recommendations. County-by-county data and the program logic model are included.

Contact: Children's Health Alliance of Wisconsin, 620 South 76th Street, Suite 120, Milwaukee, WI 53214. Telephone: (414) 292-4000; (414) 292-4004; fax: (414) 231-4972; Web site: <http://www.chawisconsin.org/oralHealth.htm>. Available at http://www.chawisconsin.org/documents/Partnering_to_SAS_Exec_Sum2.09.pdf.

SEAL INDIANA FINAL REPORT: STATE ORAL HEALTH COLLABORATIVE SYSTEMS GRANT PROGRAM (SOHCS)

Yoder KM. 2008. *SEAL INDIANA Final Report: State Oral Health Collaborative Systems Grant Program (SOHCS)*. Indianapolis, IN: Indiana Department of Health. 5 pp.

This report summarizes Indiana's progress in implementing SEAL INDIANA, a statewide mobile dental sealant innovation, with funding from the State Oral Health Collaborative Systems grant for the period 2003–2007. Program background and information on the project goals and achievements and fulfillment of performance measures are discussed. Topics include collaboration between the Indiana University School of Dentistry, dentists, and the Indiana State Department of Health; the provision of oral health services (examinations,

sealants, and fluoride varnish) and dental homes for children who live in rural and urban areas; service-learning experiences for dental and dental hygiene students; and research to promote oral health and access to care. [Funded by the Maternal and Child Health Bureau]

Contact: National Maternal and Child Oral Health Resource Center, Georgetown University, Box 571272, Washington, DC 20057-1272. Telephone: (202) 784-9771; fax: (202) 784-9777; e-mail: OHRCinfo@georgetown.edu; Web site: <http://www.mchlibrary.info/MCHBFinalreports/docs/H47MC02007.pdf>.

STATE SURVEY REPORTS

2009 THIRD GRADE OPEN MOUTH SURVEY REPORT

Brinkman MK, Rodgers T, Chen X. 2009. *2009 Third Grade Open Mouth Survey Report*. Des Moines, IA: Iowa Department of Public Health, Oral Health Bureau. 6 pp.

This report discusses the process for, and results of, an oral health screening of students in third grade conducted in 2009 in Iowa. Contents include data and discussion on oral health status indicators and payment sources relative to race and ethnicity in 2009, and as they compare to indicators and sources in 2006.

Contact: Tracy Rodgers. Iowa Department of Public Health, Oral Health Bureau, Lucas State Office Building, 321 East 12th Street, Des Moines, IA 50319. Telephone: (515) 281-7715; fax: (515) 242-6384; e-mail: trodders@idph.state.ia.us; Web site: http://www.idph.state.ia.us/hpcdp/oral_health.asp. Available at http://www.idph.state.ia.us/hpcdp/common/pdf/oral_health/2009_oral_survey.pdf.

EVERY SMILE COUNTS: THE ORAL HEALTH OF CONNECTICUT'S CHILDREN

Phipps K. 2007. *Every Smile Counts: The Oral Health of Connecticut's Children*. Hartford, CT: Connecticut Department of Public Health, Office of Oral Health. 32 pp.

This report presents findings from Every Smile Counts, a statewide screening conducted during the 2006–2007 school year to assess the oral health

status of 3- and 4-year-old children enrolled in Head Start, as well as of students in kindergarten and third grade in Connecticut. Data and analysis on tooth decay experience and untreated tooth decay, need for early or urgent oral health care, and dental sealants are provided. Information on dental caries prevention, Connecticut's progress in meeting *Healthy People 2010* objectives, and strategies to improve children's oral health is also included.

Contact: Linda Ferraro. Connecticut Department of Public Health, Office of Oral Health, P.O. Box 340308, Hartford, CT 06134-0308. Telephone: (860) 509-7382; fax: (860) 509-7853; e-mail: linda.ferraro@ct.gov; Web site: http://www.ct.gov/dph/cwp/view.asp?a=3125&q=388844&dphNav_GID=1601. Available at http://www.ct.gov/dph/lib/dph/oral_health/pdf/every_smile_counts_final_report.pdf.

MAKE YOUR SMILE COUNT! A SURVEY OF THE ORAL HEALTH OF OHIO SCHOOLCHILDREN, 2004–2005

Ohio Department of Health, Bureau of Oral Health Services. 2007. *Make Your Smile Count! A Survey of the Oral Health of Ohio Schoolchildren, 2004–2005*. Columbus, OH: Ohio Department of Health, Bureau of Oral Health Services. 30 pp.

This report presents findings from a statewide survey to assess the oral health of students in third grade in Ohio. The survey, conducted during the 2004–2005 school year, focused on students' oral health status and access to oral health care. A series of graphs presents data on the percentages of students with a history of tooth decay, with untreated tooth decay and toothaches, in need of early or urgent care, and with one or more dental sealants. The data are presented by county type, family income, and insurance coverage. Additional charts, graphs, and tables present data on the amount of time since the last dental visit, the percentages of students who visited a dentist in the past year, and a comparison of findings between the 1998–1999 and 2004–2005 surveys.

Contact: Ohio Department of Health, Oral Health Program, P.O. Box 118, 246 North High Street, Columbus, OH 43215. Telephone: (614) 466-4180; fax: (614) 564-2421; e-mail: bohs@odh.ohio.gov; Web site: <http://www.odh.ohio.gov/odhPrograms/ohs/oral/oral1.aspx>. Available at <http://www.odh.ohio.gov/ASSETS/318CE478E2784B088377359F69F6A075/FinalOHSreport.pdf>.

MOMMY, IT HURTS TO CHEW: THE CALIFORNIA SMILE SURVEY—AN ORAL HEALTH ASSESSMENT OF CALIFORNIA'S KINDERGARTEN AND 3RD GRADE CHILDREN

Dental Health Foundation. 2006. *Mommy, It Hurts to Chew: The California Smile Survey—An Oral Health Assessment of California's Kindergarten and 3rd Grade Children*. Oakland, CA: Dental Health Foundation. 28 pp.

This brief presents findings of an oral health screening of children in 186 elementary schools in California conducted in 2005. The brief describes the methods used in the screenings, key findings, and recommendations on developing a broad-based approach for reducing the impact of oral disease on children and their families. The recommendations section describes issues and suggests actions in the areas of developing a comprehensive oral health surveillance system, eliminating barriers to care, and preventing tooth decay.

Contact: Dental Health Foundation, 520 Third Street, Suite 108, Oakland, CA 94607. Telephone: (510) 663-3727; fax: (510) 663-3733; e-mail: info@tdhf.org; Web site: <http://www.dentalhealthfoundation.org>. Available at http://www.dentalhealthfoundation.org/images/lib_PDF/dhf_2006_report.pdf.

MONTANA 2005–2006 STUDY OF ORAL HEALTH NEEDS: 3RD GRADERS AND HEAD START CHILDREN

Everitte R. 2007. *Montana 2005–2006 Study of Oral Health Needs: 3rd Graders and Head Start Children*. Helena, MT: Montana Department of Public Health and Human Services, Oral Health Program. 31 pp.

This report presents oral health data collected between February and May 2006 using protocols based on national guidelines and standards to assess statewide needs and disparities in access to care among children at risk for tooth decay in Montana. Data include the number of untreated cavities, caries experience, and treatment urgency recommendations for children enrolled in Head Start and a representative sample of students in third grade; the number of children in Head Start with dental caries in at least one primary tooth; and the number of students in third grade with a dental sealant on at least one permanent molar. Descriptions of the methodologies, analyses, and

limitations are included. [Funded by the Maternal and Child Health Bureau]

Contact: National Maternal and Child Oral Health Resource Center, Georgetown University, Box 571272, Washington, DC 20057-1272. Telephone: (202) 784-9771; fax: (202) 784-9777; e-mail: OHRCinfo@georgetown.edu; Web site: <http://www.mchoralhealth.org>. Available at http://www.mchoralhealth.org/PDFs/MT_OH_Needs.pdf.

OKLAHOMA ORAL HEALTH NEEDS ASSESSMENT 2008: THIRD GRADE CHILDREN

Oklahoma State Department of Health, Dental Health Services. 2008. *Oklahoma Oral Health Needs Assessment 2008: Third Grade Children*. Oklahoma City, OK: Oklahoma State Department of Health, Dental Health Services. 41 pp.

This report presents data and analyses derived from a statewide assessment of oral health status indicators (prevalence of dental caries, caries experience, dental sealants, missing teeth, and need for oral health treatment) among students in third grade in Oklahoma. Contents include a description of the research design and the sample; consent; data collection, entry, and analyses; confidentiality issues; and results. Comparison to *Healthy People 2010* targets, materials for communicating with schools and parents, and descriptions of participants and procedures are provided.

Contact: Oklahoma State Department of Health, Dental Health Service. 1000 N.E. 10th Street, Room 712, Oklahoma City, OK 73117-1299. Telephone: (405) 271-5502; fax: (405) 271-5434; Web site: http://www.ok.gov/health/Child_and_Family_Health/Dental_Health_Service. Available at <http://www.ok.gov/health/documents/DHS%20FINAL%20REPORT%202007-2008.pdf>.

OPEN MOUTH SURVEY OF THIRD GRADERS, NEBRASKA 2005

Nebraska Department of Health and Human Services, Regulation and Licensure. 2006. *Open Mouth Survey of Third Graders, Nebraska 2005*. Lincoln, NE: Nebraska Department of Health and Human Services, Regulation and Licensure. 21 pp.

This report describes the first statewide oral health screening of students in third grade in Nebraska.

Topics include caries experience, prevalence of untreated oral disease, and use of dental sealants. Report sections define methods and results, discuss results in comparison to other states and to *Healthy People 2010* objectives, and provide recommendations.

Contact: Nebraska Department of Health and Human Services, Dental Health Division, P.O. Box 95007, Lincoln, NE 68509-5007. Telephone: (402) 471-0166; Web site: <http://www.hhs.state.ne.us/dental>. Available at <http://www.hhs.state.ne.us/dental/docs/OpenMouthSurvey-Final.pdf>.

ORAL HEALTH OF GEORGIA'S CHILDREN: RESULTS FROM THE 2005 GEORGIA THIRD GRADE ORAL HEALTH SURVEY

Falb M, Kanny D, Duval T, Koskela L. 2006. *Oral Health of Georgia's Children: Results from the 2005 Georgia Third Grade Oral Health Survey*. Atlanta, GA: Georgia Department of Human Resources, Division of Public Health. 7 pp.

This report highlights the oral health status of students in third grade who participated in Georgia's 2005 oral health screening. Topics include dental caries experience, untreated tooth decay, dental sealants, unmet oral health needs, and access to and use of oral health care. A description of the survey methodology and sample size is included. [Funded by the Maternal and Child Health Bureau]

Contact: Georgia Department of Community Health, Division of Public Health, 2 Peachtree Street, N.W., Atlanta, GA 30303-3186. Telephone: (404) 657-2700; e-mail: gdphinfo@dhr.state.ga.us; Web site: <http://health.state.ga.us>. Available at <http://health.state.ga.us/pdfs/familyhealth/oral/2005GeorgiaThirdGradeSurveyApril2006.pdf>.

OREGON SMILE SURVEY 2007

Empey GB, Bradley KJ. 2007. *Oregon Smile Survey 2007*. Portland, OR: Oregon Department of Human Services, Office of Family Health. 18 pp.

This report presents findings from Oregon's second statewide survey to assess the oral health status of students attending public schools (grades 1, 2, and 3) during the 2006–2007 school year, as well as their risk for dental caries. Contents include an executive summary; facts from the *Oregon Smile Survey 2007*; and recommendations for

community water fluoridation, caries prevention, and school-based fluoride supplement and dental sealant programs. The report includes information about changes in the oral health of children in Oregon over the past 5 years that may be used in developing and implementing community-based prevention strategies.

Contact: Oregon Department of Human Services, Oral Health Program, 800 N.E. Oregon Street, Suite 825, Portland, OR 97232. Telephone: (971) 673-0252; (971) 673-0372 (TTY); fax: (971) 673-0240. Available at http://oregon.gov/DHS/ph/oralhealth/docs/smile_2007.pdf.

RESULTS OF THE ORAL HEALTH SURVEY OF ALASKAN THIRD GRADE CHILDREN 2007: ALASKA ORAL HEALTH BASIC SCREENING SURVEY

Hardison JD. 2007. *Results of the Oral Health Survey of Alaskan Third Grade Children 2007: Alaska Oral Health Basic Screening Survey*. Anchorage, AK: Alaska Department of Health and Social Services, Oral Health Program. 76 pp.

This report presents the results of a statewide screening to assess the oral health of students in third grade in Alaska. The assessment comprised a consent form and questionnaire for parents or guardians to complete and a school-based clinical assessment provided by dentists operating under standardized protocols. Contents include data on response rates and demographics, as well as basic frequency tables on the questionnaire and screening variables. The relationships between dental sealants and gender, race-ethnicity, dental insurance status, Denali KidCare/Medicaid status, untreated dental caries, and caries experience are presented. Information on differences in other clinical variables, such as treatment urgency and the presence of sealants, is also provided. [Funded by the Maternal and Child Health Bureau]

Contact: National Maternal and Child Oral Health Resource Center, Georgetown University, Box 571272, Washington, DC 20057-1272. Telephone: (202) 784-9771; fax: (202) 784-9777; e-mail: OHRCinfo@georgetown.edu; Web site: <http://www.mchoralhealth.org>. Available at http://www.mchoralhealth.org/PDFs/AK_3_Survey2007.pdf.

SMILE SURVEY 2005: THE ORAL HEALTH OF WASHINGTON'S CHILDREN

Washington State Department of Health. 2006. *Smile Survey 2005: The Oral Health of Washington's Children*. Olympia, WA: Washington State Department of Health, Maternal and Child Health. 57 pp.

This report presents data collected during Washington's Smile Survey. The report focuses on several groups: children from families with low incomes who attend preschool, children who attend elementary school, and American Indian/Alaska Native children who attend preschool or elementary school. Contents include comparisons to *Healthy People 2010* objectives, oral health trends, and comparisons to other states. Data on tooth decay are presented in the following areas: overall presence of tooth decay, economic level, racial/ethnic background, access to oral health care, and access to dental sealants.

Contact: Washington State Department of Health, Oral Health Program, P.O. Box 47835. Telephone: (360) 236-3524; fax: (360) 236-2323; e-mail: oral.health@doh.wa.gov; Web site: http://www.doh.wa.gov/cfh/Oral_Health. Available at <http://www.doh.wa.gov/cfh/Oral%5FHealth/Documents/Smilesurvey/2005SSFull.pdf>.

SMILES ACROSS KANSAS: 2007 UPDATE

Kimminau KS, Greiner KA, Hou Q. 2007. *Smiles Across Kansas: 2007 Update*. Emporia, KS: Kansas Department of Health and Environment and Kansas University School of Medicine. 3 pp.

This report provides an oral health profile of students in third grade in Kansas and expands on 2004 findings by further describing the nature of their oral health status. A description of the Smiles Across Kansas project, including project methods and results, is presented. Statistical data and trends for untreated tooth decay, dental insurance, barriers to accessing care during the past year, and length of time since last dental visit are provided. The report concludes with a summary of the oral health indicators tracked in the 2004 and 2007 studies, followed by a table depicting the 2007 indicators by race and ethnicity. [Funded by the Maternal and Child Health Bureau]

Contact: Kansas Department of Health and Environment, Bureau of Oral Health, 1000 S.W. Jackson Street, Suite 300, Topeka, KS 66612. Telephone: (785) 296-5116; fax: (785) 291-3959; e-mail: boh@

kdhe.state.ks.us; Web site: <http://www.kdheks.gov/ohi>. Available at http://www.kdheks.gov/ohi/download/Smiles_Across_Kansas.pdf.

SOUTH DAKOTA ORAL HEALTH SURVEY 2006

Clarke J. 2007. *South Dakota Oral Health Survey 2006*. Pierre, SD: South Dakota Department of Health, Office of Health Promotion. 26 pp.

This report presents an analysis of data collected from a statewide oral health survey of 643 students in third grade in 32 public, private, and Bureau of Indian Affairs elementary schools in South Dakota. Contents include a summary of key findings and comparisons to previous surveys conducted in 1995–1997 and 2002–2003, methods, and results. Also discussed are indicators of oral health status and access to care; the impact of dental visit frequency, race and ethnicity, insurance type, and socioeconomic status on oral health status; *Healthy People 2010* objectives; and comparisons to other states. The appendix contains a screening form, a consent form, and a notice to parents.

Contact: South Dakota Department of Health, Oral Health Program, 600 East Capitol Avenue, Pierre, SD 57501. Telephone: (800) 738-2301; (605) 773-3361; Web site: <http://doh.sd.gov/OralHealth/Default.aspx>. Available at <http://doh.sd.gov/OralHealth/PDF/2005-2006.pdf>.

SURVEY OF THE ORAL HEALTH STATUS OF MARYLAND SCHOOL CHILDREN, 2005–2006

Manski RJ, Chen H, Chenette RR, Collier S. 2007. *Survey of the Oral Health Status of Maryland School Children, 2005–2006*. Baltimore, MD: University of Maryland Dental School. 61 pp.

This report summarizes a survey conducted to assess the oral health status and service needs of students in kindergarten and third grade in Maryland. It includes the background and purpose, methods, results, and discussion. The report addresses challenges to the study and assistance received in conducting it. Appendices include a supply request form, an examination form, a report card, a survey questionnaire, frequently asked questions, and a consent form and letter. [Funded in part by the Maternal and Child Health Bureau]

Contact: Maryland Department of Health and Mental Hygiene, Office of Oral Health, 201 West Preston Street, Room 306, Baltimore, MD 21201. Telephone: (410) 767-5300; fax: (410) 333-7106; Web site: <http://fha.maryland.gov/oralhealth>. Available at http://www.fha.state.md.us/pdf/oralhealth/Oral_Health_Survey_Report.pdf.

ORGANIZATIONS



ORGANIZATIONS

ACADEMY OF GENERAL DENTISTRY

211 East Chicago Avenue, Suite 900
Chicago, IL 60611-1999
Telephone: (888) 243-3368
Fax: (312) 440-0559
Web site: <http://www.agd.org>

The Academy of General Dentistry (AGD) serves the needs and represents the interests of general dentists, promotes the oral health of the public, and provides continuing education. Information about dental sealants is included in AGD's annual meeting; in its periodicals for professionals, *AGD Impact* and *General Dentistry*; and on its Web site for consumers, *Know Your Teeth* (see <http://www.knowyourteeth.com>).

AGENCY FOR HEALTHCARE RESEARCH AND QUALITY

540 Gaither Road
Rockville, MD 20850
Telephone: (301) 427-1364
E-mail: <http://info.arhq.gov>
Web site: <http://www.ahrq.gov>

The Agency for Healthcare Research and Quality (AHRQ) provides tools for assessing, measuring, promoting, and improving the quality and safety of health care. AHRQ's Web site contains clinical information, funding opportunities, data and surveys, and research findings specific to dental sealants.

AMERICAN ACADEMY OF PEDIATRIC DENTISTRY

211 East Chicago Avenue, Suite 1700
Chicago, IL 60611-2663
Telephone: (312) 337-2169
Fax: (312) 337-6329
Web site: <http://www.aapd.org>

The American Academy of Pediatric Dentistry (AAPD) advocates for policies, guidelines, and programs that promote optimal oral health and oral health care for infants, children, and adolescents, including those with special health care needs. AAPD's Web site contains funding opportunities,

initiatives, resources, and a policy statement that addresses dental sealants. Information about dental sealants is also available in AAPD's journal, *Pediatric Dentistry*.

AMERICAN ASSOCIATION OF PUBLIC HEALTH DENTISTRY

3085 Stevenson Drive, Suite 200
Springfield, IL 62703
Telephone: (217) 529-6941
Fax: (217) 529-9120
E-mail: natoff@aaphd.org
Web site: <http://www.aaphd.org>

The American Association of Public Health Dentistry (AAPHD) works to improve total health for all citizens through the development and support of effective programs of oral health promotion and disease prevention. Information about dental sealants is available in AAPHD's journal, *Journal of Public Health Dentistry*, and is shared at the National Oral Health Conference.

AMERICAN DENTAL ASSOCIATION

211 East Chicago Avenue
Chicago, IL 60611-2678
Telephone: (312) 440-2500
Fax: (312) 440-7494
E-mail: info@ada.org
Web site: <http://www.ada.org>

The American Dental Association (ADA) is committed to the public's oral health, ethics, science and professional advancement; the association seeks to lead a unified profession through initiatives in advocacy, education, research, and the development of standards. ADA's journal, *Journal of the American Dental Association*, provides information on dental sealants. ADA's Web site's professional resources section contains information about ADA's policy on dental sealants, the evidence base supporting sealants, and related continuing education offerings and volunteer opportunities. The public education section of the Web site also provides information about dental sealants.

AMERICAN DENTAL HYGIENISTS' ASSOCIATION

444 North Michigan Avenue, Suite 3400
Chicago, IL 60611
Telephone: (312) 440-8900
Fax: (312) 467-1806
E-mail: exec.office@adha.net
Web site: <http://www.adha.org>

The American Dental Hygienists' Association (ADHA) advances the art and science of dental hygiene, promotes standards of education and practice in the profession, and provides professional support and educational programs. ADHA's Web site features information about ADHA's annual meeting and its periodicals, *Access* and *Journal of Dental Hygiene*. These and other ADHA resources address issues related to dental sealants, including opportunities for public health advocacy, education, and research. Dental sealant resources for children, adolescents, and caregivers are also provided.

AMERICAN PUBLIC HEALTH ASSOCIATION

Oral Health Section

800 I Street, N.W.
Washington, DC 20001-3710
Telephone: (202) 777-APHA (777-2742)
Fax: (202) 777-2534
E-mail: apha.oh@gmail.com
Web site: <http://www.apha.org/membergroups/sections/aphasections/oral>

The American Public Health Association (APHA) Oral Health Section promotes oral health by disseminating research findings and influencing oral health and other health policy development. APHA's Oral Health Section serves the public, its members, and the public health profession through advocacy and policy, an annual meeting and exposition, programs and resources, and publications. Information about dental sealants appears in APHA's journal, *American Journal of Public Health*; its newspaper, *The Nation's Health*; reports; and policy statements.

ASSOCIATION OF STATE AND TERRITORIAL DENTAL DIRECTORS

1838 Fieldcrest Drive
Sparks, NV 89434
(775) 626-5008
(775) 626-9268
E-mail: cwood@astdd.org
Web site: <http://www.astdd.org>

The Association of State and Territorial Dental Directors advocates for a government oral health presence in states and territories, formulates and promotes policy, increases awareness of issues, and develops initiatives to prevent and control disease. ASTDD's Web site contains information and resources on dental sealants.

CENTERS FOR DISEASE CONTROL AND PREVENTION

Division of Oral Health

4770 Buford Highway, N.E., Mailstop F-10
Atlanta, GA 30341-3717
Telephone: (770) 488-6054
E-mail: oralhealth@cdc.gov
Web site: <http://www.cdc.gov/OralHealth>

The Centers for Disease Control and Prevention, Division of Oral Health, provides leadership in preventing oral disease, promoting oral health, and improving the quality of community water fluoridation. The Web site contains guidelines and recommendations for using dental sealants, as well as related fact sheets, frequently asked questions, and journal articles.

CENTERS FOR MEDICARE AND MEDICAID SERVICES

7500 Security Boulevard, C2-26-12
Baltimore, MD 21244
Telephone: (410) 786-3000
Fax: (410) 786-3194
Web site: <http://www.cms.hhs.gov/MedicaidDentalCoverage>

The Centers for Medicare and Medicaid Services provides guidance to states administering Medicaid and the Children's Health Insurance Program (CHIP) and provides services to beneficiaries and health professionals. The Web site contains an overview of Medicaid dental coverage, a guide to children's oral health care in Medicaid, and Medicaid/CHIP contacts. It also includes national and state reports

as well as information on policy issues, promising practices, and innovations related to dental sealants.

CHILDREN'S DENTAL HEALTH PROJECT

1020 19th Street, N.W., Suite 400
Washington, DC 20036
Telephone: (202) 833-8288
E-mail: cdhpinfo@cdhp.org
Web site: <http://www.cdhp.org>

The Children's Dental Health Project (CDHP) advances policies that improve children's access to oral health. CDHP forges research-driven policies and innovative solutions by engaging a broad base of partners committed to children and oral health. CDHP endeavors to improve children's oral health through school-based and school-linked dental sealant programs. The Web site contains information about dental sealant advocacy, policy, and programs and also offers media resources.

MATERNAL AND CHILD HEALTH BUREAU

5600 Fishers Lane
Parklawn Building, Room 18-05
Rockville, MD 20857
Telephone: (301) 443-2170
Fax: (301) 443-1797
E-mail: ctibbs@hrsa.gov
Web site: <http://mchb.hrsa.gov>

The Maternal and Child Health Bureau (MCHB) provides leadership, partnership, and resources to advance the health of mothers, infants, children, and adolescents, including those from families with low incomes, those with diverse racial and ethnic heritages, and those living in rural or isolated areas who lack access to care. MCHB administers major programs, including the Title V Maternal and Child Health Services Block Grant. MCHB uses the Title V Information System to report on national and state performance measures, including one focused on dental sealants (see <https://perfdata.hrsa.gov/MCHB/TVISReports/default.aspx>).

NATIONAL INSTITUTE OF DENTAL AND CRANIOFACIAL RESEARCH

National Institutes of Health
Building 31, Room 2C39
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Bethesda, MD 20892
Telephone: (301) 496-4261
Fax: (301) 496-9988
E-mail: nidcrinfo@mail.nih.gov
Web site: <http://www.nidcr.nih.gov>

The National Institute of Dental and Craniofacial Research (NIDCR) improves oral, dental, and craniofacial health through research, training, and the dissemination of health information. The Web site contains information on NIDCR-funded research on the use of dental sealants to reduce or eliminate oral health disparities.

NATIONAL MATERNAL AND CHILD ORAL HEALTH RESOURCE CENTER

Georgetown University
Box 571272
Washington, DC 20057-1272
Telephone: (202) 784-9771
Fax: (202) 784-9777
E-mail: OHRCinfo@georgetown.edu
Web site: <http://www.mchoralhealth.org>

The National Maternal and Child Oral Health Resource Center (OHRC) collaborates with federal, state, and local government agencies; national and state organizations and associations; and foundations to gather, develop, and share quality and valued information and materials. The Web site describes and provides links to resources on dental sealants for professionals and families such as brochures, fact sheets, guidelines, manuals, policies, and reports. OHRC also hosts the online manual *Seal America: The Prevention Invention*, 2nd edition (see <http://www.mchoralhealth.org/Seal>).

ORAL HEALTH AMERICA

410 North Michigan Avenue, Suite 352
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Telephone: (312) 836-9900
Fax: (312) 836-9986
E-mail: info@oralhealthamerica.org
Web site: <http://www.oralhealthamerica.org>

Oral Health America (OHA) seeks to eliminate oral disease by educating and empowering communities to provide access to care and by advocating

for policies that create oral health parity. OHA's Smiles Across America program offers resources and technical assistance to help communities build infrastructure for school oral health services, particularly those that provide dental sealants (see <http://www.oralhealthamerica.org/smiles.html>).

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