

Iowa: Recommendations for EPSDT Care for Kids Dental Services

These recommendations are based upon guidelines from the American Academy of Pediatric Dentistry¹ and Iowa's definition of a dental home in <u>Iowa Administrative Code</u>.

	Child's Age	
Component	Birth to 12 months	I year through 20 years
Clinical oral examination/oral screening	Upon the eruption of the first tooth and no later than 12 months	Every 6 months, or as indicated by child's risk assessment
Caries risk assessment	At every visit	At every visit
Radiographs	For trauma or emergency	Timing, selection, and frequency determined by child's history, clinical findings, and risk assessment
Prophylaxis	NA	Timing, selection, and frequency determined by child's history, clinical findings, and risk assessment
Fluoride varnish	2 – 4 times per year, as indicated by child's risk assessment	2 – 4 times per year, as indicated by child's risk assessment
Pit and fissure sealants	NA	Through age 18, as indicated by risk assessment (primary molars and/or permanent molars/premolars)
Oral hygiene instruction/dietary counseling	At every visit (with parent)	At every visit (with parent and/or child)
Anticipatory guidance/counseling	 At every visit (with parent) Injury prevention Non-nutritive sucking Speech/language development Fluoride exposure Diet/carbohydrate exposure 	At every visit (with parent and/or child) Injury prevention Non-nutritive sucking Speech/language development Fluoride exposure Diet/ carbohydrate exposure Substance abuse Intraoral/perioral piercing
Assessment and treatment of developing malocclusion	NA	As indicated
Assessment and/or removal of third molars	NA	Children over 12 years of age

¹ <u>www.aapd.org/media/Policies_Guidelines/G_Periodicity.pdf</u>;