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# Triaging Appropriately

Clinical Training for School Dental Sealant Programs



# Triaging Appropriately

- Triage categories 0, 1, 2
  - Numbering based on CDC SEALS\* categories
- Triaging for your program – Use BSS\*\*
  - Then develop “program-specific” protocols for students who triage as a “1” but really need to see a dentist soon.
- Reporting to parents – Use OBD\*\*\*
  - Required by law

\*SEALS: Sealant Efficiency Assessment for Locals and States

\*\*BSS: Basic Screening Survey

\*\*\*OBD: Oregon Board of Dentistry

# What is BSS?

- Developed by ASTDD and Ohio Dept. of Health
- Used for standardized oral health surveillance
- Not recommended for research

# BSS Populations

- Pre-school populations (Including early Headstart and Headstart students)
  - Untreated decay (includes active and potentially arrested carious lesions)
  - Treated decay
  - Treatment urgency

# BSS Populations

- Older Adults
  - Dentures and denture use
  - Number of natural teeth
  - Untreated decay
  - Root fragments
  - Need for periodontal care
  - Suspicious soft tissue lesions
  - Urgency of need for dental care

# BSS Populations

- School Age (Kindergarten – 12<sup>th</sup> grade)
  - Untreated decay (includes active and potentially arrested carious lesions)
  - Treated decay
  - Sealants on permanent first and/or second molars
  - Urgency of need for dental care

# BSS Treatment Urgency

## 0. No obvious problems

- Decay only on primary teeth about to be exfoliated
- Child can have decayed teeth but not need tx
- Routine dental care at next scheduled visit

# BSS Treatment Urgency

## 1. Early dental care

- **Caries without accompanying signs or symptoms [no pain; no abscess] or individuals with other oral health problems requiring care before their next routine dental visit**
- **Dental care within next several weeks**
- These situations can look really bad, but still be a level “1”

# BSS Treatment Urgency

## 2. Urgent dental care

- **Signs or symptoms that include pain, infection, or swelling**
- **Child with an abscess should always be coded as urgent, even if the abscess is draining**
- **Needs dental care as soon as possible**
  - CCOs/DCOs are expected to provide care within two weeks
  - There is also a CCO/DCO category “Emergency” which indicates care within 24 hours

# No Obvious (0); Early (1); or Urgent (2)?

- No pain



# No Obvious (0); Early (1); or Urgent (2)?

- No pain
- No abscess



# No Obvious (0); Early (1); or Urgent (2)?

- No pain



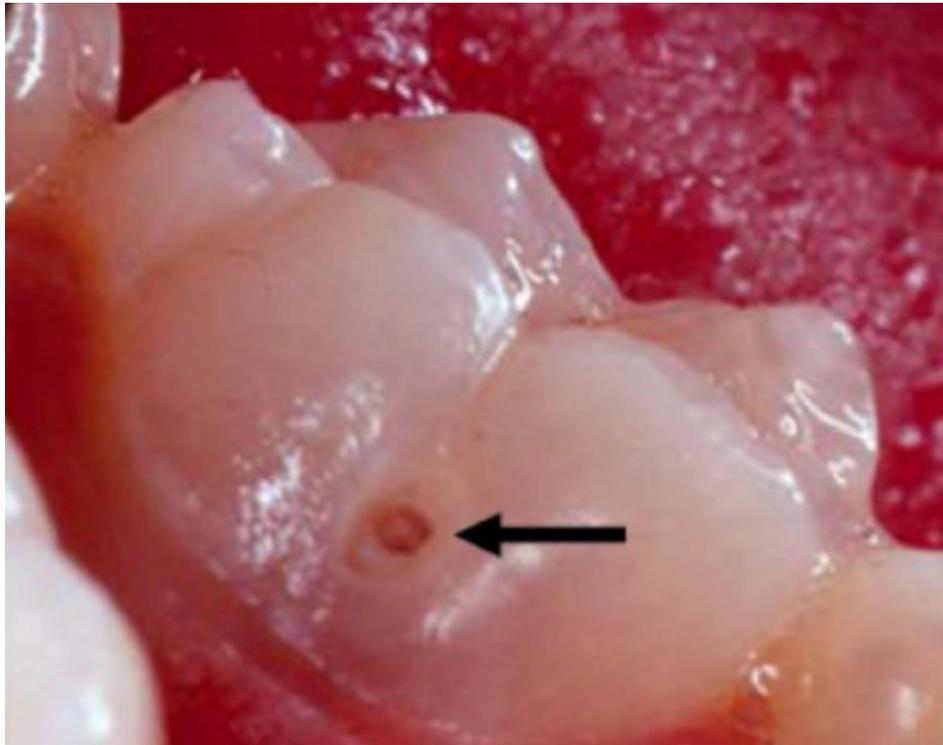
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# Triaging Appropriately

One reason for standardizing our use of the BSS categories is that if a student is categorized as needing “urgent” treatment, a dentist may squeeze the student in on a Friday afternoon or weekend, only to find the tx could have waited a few weeks.

Both the local program administrators and their hygienists want the students to be seen within an appropriate period of time. What program protocols will ensure this happens?

# Parent “Results” Letter

- By law, if a screening occurs, parents/guardians are to receive a letter regarding their child’s screening results.
- Put your “clinical hat” back on.
- Information on parent letter does not need to match information on screening form.
- You may add a written note to the parents – never critical, but helpful suggestions. (e.g. “There are signs of early problems. Johnnie needs some help brushing at the gum line.”)

# Oregon Board of Dentistry (direct quote)

- “The OBD adopted specific language that must be on any Oral Health Screening Form that would be given to individuals or parents or guardians of minors who would be screened.”

“The following is the language and would need to be on any Oral Health Screening Form that would be used by **any Oregon Dental Hygienist or Dental Assistant in compliance with Oregon Law.**”

# Oregon Board of Dentistry (direct quote)

This is an oral health screening for \_\_\_\_\_.

A screening is just a quick look and does not take the place of a thorough examination by a dentist. Serious oral health problems may be missed in a screening. The person doing the screening may or may not have any dental training. [*Dental Hygienists or Dental Assistants may omit the previous sentence.*]

- No visible signs of oral problems. See your dentist at least yearly.
- Visible signs of oral problems were found. A visit to a dentist is recommended to prevent serious or more costly problems.
- Visible signs or symptoms of serious dental needs were found. An immediate visit to a dentist is recommended.

<https://www.oregon.gov/dentistry/pages/faq-licensees.aspx>

**Questions?**