

Dear Parent or Guardian,

SEARHC is providing a fluoride varnish program for your child this year at Craig School.

Fluoride varnish placed on the teeth every three months can strengthen tooth enamel and is an effective preventive measure against dental decay.

If you choose to have your child participate in the program your dental insurance or Medicaid/Denali Kid Care will be billed. If you do not have insurance or Medicaid/DKC you will NOT receive a bill.

If you have any questions about this program please contact the ARMC Dental Clinic at (907) 755-4918.

Fluoride Varnish

Procedure: A high concentration fluoride varnish is painted directly on the teeth by a skilled dental professional.

Benefits: Fluoride varnish coats the outside of the tooth and provides cavity fighting power for up to three months. It can also stop very early tooth decay.

Because your child is a minor, your consent is needed to allow your child to receive this preventive service.

Parental Permission	5867 - Super - 5000 - 7 A Fig. 198 Care
No, I do NOT give permission for my child,SEARHC fluoride varnish program.	to participate in the
Yes, I DO give permission for my child,	to participate in the
 I understand that fluoride varnish will be applied on his/ her teeth 3-4 trained dental staff with prescription standing orders. I understand the figram is safe and effective for cavity prevention. 	times in a year by a luoride varnish pro-
 This service does not replace a comprehensive dental exam. We recorded receive a dental exam annually. 	ommend your child
 Please list any physical condition, illness, or allergy that the dental staff should be aware of (asthma, allergies, recurring illnesses, disabilities, chronic illness, etc.): 	
Parent or Guardian Name (print)	
SignatureDate	
Telephone Number	- "