SAMPLE STANDING EPSDT MEDICAL PROVIDER ORDER FOR APPLICATION OF FLUORIDE VARNISH

Name of EPSDT Medical Provider (degree) authorizes the applications of fluoride varnish for a one-year period of time from month/date/year to month/date/year. This standing order will be reviewed on an annual basis.

Program Requirements
1. <The authorized EPSDT medical extender> will provide fluoride varnish to infants and children that present with the following:
   A. A signed informed consent has been secured from the parental/legal custodian/guardian of the child; and
   B. The child must be age 9 months to 3 years old who is enrolled in the Maryland Medical Assistance Program (Medicaid).

2. An oral health screening must be conducted and documented and fluoride varnish applied by an EPSDT medical extender who has successfully completed a fluoride varnish training program approved by the Department of Health and Mental Hygiene, Office of Oral Health.

Schedule and Dosages
1. <The authorized EPSDT medical extender> will apply the initial fluoride varnish application as a thin layer of 5% sodium fluoride varnish to all surfaces of erupted primary teeth.
2. Repeat the fluoride varnish application at all scheduled well child visits and at one non-well child visit at 30 months for infants and toddlers between the ages of 9 months to 3 years old.

Prescription
Fluoride varnishes to be used include: (You may choose to list any fluoride varnish agent approved by the Food and Drug Administration.)

1. If using fluoride varnish in tubes:
   ➢ Massage the fluoride tube to fully assure that the fluoride is evenly distributed within the varnish medium.
   ➢ 1 – 2 pea-sized drops (about 0.3 ml) of varnish is sufficient for children with 1 – 8 teeth and 2 – 3 drops (about 0.5 ml) for older children.
2. If using fluoride varnish in single unit dosage container:
   ➢ Stir the varnish thoroughly before applying to the teeth.
Contraindications
1. Gingival stomatitis
2. Ulcerative gingivitis
3. Intra-oral inflammation
4. Known sensitivity to colophony or colophonium or other product ingredients which include:
   A. Ethyl alcohol anhydrous USP 38.58%
   B. Shellac powder 16.92%
   C. Rosin USP 29.61%
   D. Copal
   E. Sodium Fluoride 4.23%
   F. Sodium Saccharin USP 0.04%
   G. Flavorings, Cetostearyl Alcohol

Precautions
Do not apply varnish on large open carious lesions. Referral to licensed dentist is indicated.

Pre-application Instructions
1. Remind the parent/legal custodian/guardian to provide the child something to eat or drink before receiving the fluoride varnish application;
2. Advise the parent/legal custodian/guardian that the child’s teeth may become temporarily discolored, as some fluoride varnish agents have an orange-brown tint;
3. Explain the discoloration will be brushed off the following day, yet the protective qualities of the fluoride varnish will remain.

Post-application Instructions
1. To keep the varnish on the teeth for as long as possible;
2. The teeth should not be brushed until the next morning;
3. The child should eat a soft, non-abrasive diet for the rest of the day;
4. Inform the caregiver that it is normal for the teeth to appear dull or yellow until they are brushed; the discoloration will wear off in 6-8 hours;
5. The child can leave immediately after the application;
6. Re-communicate referral status to a dentist, if necessary.

Side Effects
It is normal for the teeth to appear dull and yellow in appearance until the teeth are brushed.

Adverse Reactions
Edematous swellings have been reported in rare instances, especially after application of extensive surfaces. Dyspnea, although extremely rare, has occurred in asthmatic people. Nausea has been reported when extensive applications have been made. If indicated, varnish film can be removed with a thorough brushing.

Caution
Store varnish in a safe location at room temperature. Store out of the reach of children.