



Appendix A: Decision Support Matrix
Topical Fluoride Recommendations

Topical Fluoride Recommendations For High-Risk Children Under Age 6 Years

Decision Support Matrix

Population-Based Risk Factors

- Low-income children (e.g., enrolled in Head Start, WIC, free/reduced lunch program, Medicaid or SCHIP eligible, or other programs serving low-income children)
- Children with special health care needs

Fluoride Modality

Age

Children Under 2 Years

Children 2-6 Years

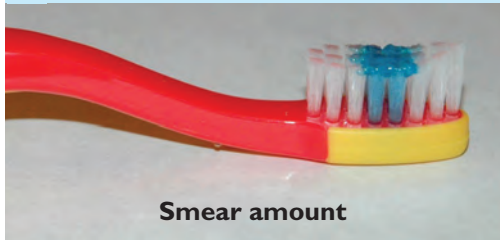
Toothpaste



- Encourage parents and caregivers to take an active role in brushing their children's teeth once the first tooth erupts
- Educate parents and caregivers on proper fluoride toothpaste use
- Brush children's teeth with fluoride toothpaste twice daily
- Use a smear of fluoride toothpaste

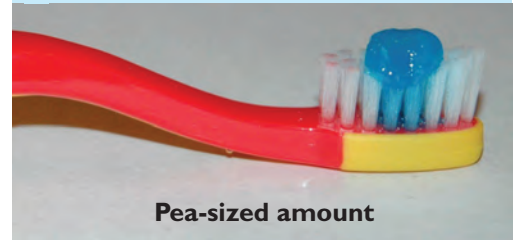


- Encourage parents and caregivers to take an active role in brushing their children's teeth
- Educate parents and caregivers on proper fluoride toothpaste use
- Brush children's teeth with fluoride toothpaste, or assist children with toothbrushing, twice a day
- Use no more than a pea-sized amount of fluoride toothpaste



Smear amount

- Do not rinse after brushing



Pea-sized amount

- Children should spit out excess toothpaste
- Do not rinse after brushing

Varnish

- Apply every 3-6 months

- Apply every 3-6 months

Mouth rinses, gel, or foam

- Not recommended

- Not recommended

The expert panel acknowledged that some CSHCN experience higher rates of disease due to specific conditions that can significantly compromise their oral health and increase the likelihood of developing oral disease.

Description of Fluoride Recommendations By Modality

Members of the expert panel reviewed existing professional dental guidelines on fluoride issued by the Centers for Disease Control and Prevention (CDC),²⁷ the American Academy of Pediatric Dentistry (AAPD),²⁸ and American Dental Association (ADA)^{29,30} to develop the recommendations that follow.

2. Toothpaste. Unless otherwise instructed by a health professional, the expert panel recommended that all children at high risk should use fluoride toothpaste and provided specific guidance to accompany this recommendation. The panel recommended that children under 2 years of age use a “smear” of toothpaste while children aged 2–6 years use a slightly larger “pea-sized” amount of toothpaste. The recommendation differed by age because children under 2 years are not able to spit out excess toothpaste and are more likely to inadvertently swallow toothpaste. Children should not rinse after brushing. The panel also emphasized the role of adults and parents because tooth brushing is more effective when young children are supervised or assisted by an adult.

3. Fluoride Varnish. The expert panel was in agreement that fluoride varnish is an effective preventive measure with higher risk populations. The consensus among panel members was that fluoride varnish should be applied *at least* every 6 months, but some members preferred to specify at 3- to 4-month intervals. After some debate, the group decided to adopt the recommendation that fluoride varnish be applied every 3–6 months.

4. Mouth Rinses, Gel, or Foam. The group reached quick consensus that rinses, gels, or foams not be recommended for children under 6 years, because the ability to control the swallowing reflex is not fully developed in preschool-aged children, increasing the likelihood that children under 6 years of age inadvertently ingest excess fluoride.