

Department: Dental **Policy Number:** HHS- 5141-D

Attachments: _____

Policy Title: Topical Fluoride Varnish Application Orders

Date: 7/14/14 **Revised:** _____

Health Director Approval: Jennifer Notch **Date:** 7/14/14

Executive Director Approval: [Signature] **Date:** 7/14/14

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Commissioner Approval: [Signature] **Date:** 7/16/14

Policy Statement:

Application of Fluoride Varnish Standing Orders

Purpose:

To establish standing orders that allow the application of Fluoride Varnish in the Ne-Ia-Shing Dental clinic outpatient care setting by trained licensed nursing staff

Procedure:

Application of fluoride varnish may be performed following the current recommended application protocol in the outpatient ambulatory care setting by trained licensed nursing staff for children 6 months to 18 years of age up to four times per calendar year.

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[Signature]