MEMORANDUM FOR USAF Preventive Dentistry Officers

FROM: 59th DS, Consultant for Dental Public Health

SUBJECT: Preventive Dentistry Update # 20

1. **Oral Cancer Examination.** Current clinical practice guidelines for the USAF Dental Service recommend that an oral cancer examination be performed during the periodic dental examination. The November 2001 JADA, Vol 132, Special Supplement “Combating Oral Cancer” is an excellent resource that includes a step-by-step review of how to perform an oral cancer examination. I recommend that the preventive dentistry officer at each base coordinate with their Chief of Dental Services to provide a training session on this subject for all providers. We should inform our patients that we are performing an oral cancer examination and discuss the findings. This also provides an excellent opportunity to discuss risk factors for oral cancer especially alcohol and tobacco use.

2. **Documentation of Tobacco Use.** Dental care providers are required to ask individuals about tobacco use as described in Air Force Instruction 40-102, 30 June 2002, Tobacco Use In The Air Force. For all individuals who are currently using tobacco products the provider at a minimum should counsel them to stop using tobacco and document this in the dental health record. In the November 2001 JADA, Vol 132, Special Supplement “Combating Oral Cancer”, Dr. Tomar’s article on Dentistry’s role in tobacco control provides some excellent guidance on counseling patients who use tobacco. For those individuals desiring a cessation program providers will facilitate referral to health promotion personnel. We need to continue our efforts to decrease tobacco use in the Air Force, which will improve the overall health and readiness of our personnel.

3. **2003 Preventive Dentistry Course.** The Preventive Dentistry Course will be held at the Dunn Dental Clinic, Lackland AFB, Texas form 19-22 May 2003. Topics to be covered at the course include caries risk assessment, management of the high caries risk patient, periodontal risk factors, oral cancer screening exams, minimally invasive dentistry, responsibilities of the preventive dentistry officer, fluoride and new techniques for caries diagnosis, dentistry in a deployed environment, smokeless tobacco lesions, prophy technician training, and tobacco cessation. There are 15 funded quotas that have been distributed to the commands. There are a limited number of locally funded slots (10) available for this course which will be given on a first come first serve basis. Those individuals interested in attending using local funds should contact Maj Chamberlain, Dental Education Officer, HQ AFPC/DPAMD at DSN 665-3619 or by e-mail thaddeus.chamberlain@randolph.af.mil
4. **Management of Patients at High Risk for Dental Caries.** Many bases have developed excellent protocols for managing their high caries risk patients. These protocols include prevention-oriented procedures as presented in the Preventive Dentistry Update #19, section 4. Use of a checklist that is placed in the patient’s dental health record assists all providers in knowing quickly what procedures of the protocol have been provided to the patient. Many of the procedures can be completed by properly trained ancillary staff (dental assistants, hygienists) and the recall of these patients is an important part of the protocol. Remember that if a year has passed without progression of caries or new caries activity, the patient can be considered to be in the low risk category, regardless of previous classifications, unless new or other risk factors have been identified (Page 13 of JADA Special Supplement “Caries Diagnosis and Risk Assessment”, Vol. 126, June 1995). Also, be advised that there are new xylitol containing products (gums, mints) now available at many local grocery/convenience stores.

5. **Professionally Applied Fluoride.** There are new topical fluoride products that are being marketed highlighting their convenience and reduced time for application. A **four- minute** application by tray with a professional topical fluoride product (gel or foam) is recommended by the ADA. **When contact time is reduced to one minute, the enamel fluoride uptake is significantly less.** The application of topical fluoride varnish is also an acceptable method. Please make sure that all providers are informed of these recommendations.

6. **Population Health Metrics.** Currently, quarterly dental population health metrics reports are sent to each DTF on a password protected CD by Lt Col Bober-Moken. These reports are helpful in managing the high caries risk patients, PSR 4 patients and Class 4 individuals at each base. The report also provides prevalence of tobacco use by squadron to help target prevention efforts. Please contact her at DSN 240-6513 or by e-mail at irene.bober-moken@brooks.af.mil if you have any questions/comments on your reports. The raw numbers for these metrics are also available on each DTF’s monthly dental service report.

If you have any questions please contact me at gary.martin@lackland.af.mil or DSN 554-6390.

Preventive Dentistry Updates #17, 18, and 19 are available at the following website: [http://www.usuhs.mil/tscohs/usafnews3.htm](http://www.usuhs.mil/tscohs/usafnews3.htm).

Thanks for all your efforts to improve the health of our USAF population.

/Signed/

Gary C. Martin, Col, USAF, DC
Military Consultant to the USAF Surgeon General
For Dental Public Health