Fluoride Varnish

Description

Fluoride varnish is a protective coating applied to teeth to help prevent cavities.¹ Cavities are the most prevalent chronic childhood disease in the United States. Children of color between ages 2 and 17 experience more dental cavities than their White counterparts.² Fluoride varnish takes about one to two minutes to apply.³ This service can be performed in the pediatric office or in a community setting.

Evidence

- Fluoride varnish is easy to apply and can prevent, stop and even reverse early cavity formation.^{4,5}
- Fluoride varnish strengthens teeth, renews fluoride levels in superficial enamel and helps slow or reverse demineralization.⁶
- Fluoride varnish is well tolerated by infants and young children, has a prolonged therapeutic effect and can be applied by both dental and non-dental health professionals in various settings.⁷

Implementation

Fluoride varnish may be applied two to four times a year for children up to age 7, depending on the child's risk for cavities.⁸

For infants and children under age 3:

• Establish a knee-to-knee position with the caregiver. The child's head should be in your lap and the child's legs should be around the caregiver's waist. The caregiver can help by holding the child's hands on top of the navel.

For children ages 3 and older:

• Have the child either lie on an examination table or sit in front of the caregiver, while both face you, so that the caregiver can help position and steady the child.

Lift the lip to inspect soft tissue and teeth for:

- Inadequate oral hygiene, such as plaque and debris on the teeth
- On-time tooth eruption and loss
- Dental crowding
- Tooth decay signs, including white or brown spots, holes or cavitation
- Swelling, redness and irregularities, such as lesions, bumps or ulcers

After inspection:

- Remove excess saliva and plaque from the teeth with a sterile gauze sponge.
- Apply fluoride with disposable applicator on all tooth surfaces. The varnish will harden immediately once it comes in contact with saliva.



Billing and Reimbursement

Medicaid fee-for-service: Providers will be reimbursed up to \$30 per application. You do not need prior approval under Medicaid fee-for-service.⁹

- CPT code 99188 Application of topical fluoride varnish by a physician or other qualified health care professional
- ICD-10 code z29.3

Resources

Many companies supply fluoride varnish, including:

- Cavity Shield, in single-dose units with built-in applicators (Omni Products at 800-634-2249)
- Duraphat (Colgate Oral Pharmaceuticals at 800-225-3756, 800-226-5428 or 800-2-COLGATE)
- VarnishAmerica (Medical Products Laboratories at 800-523-0191, or <u>mplusa.com/public-health/</u><u>varnishamerica.html</u>)

Additional lists of fluoride varnish products and dental supply companies can be found on the American Academy of Pediatrics website. Go to <u>aap.org</u> and search for **fluoride varnish manufacturers**.

Fluoride Varnish Information:

- American Dental Association Evidence-Based Dentistry: Go to <u>ada.org</u> and search for **clinical practice** guidelines.
- New York State Department of Health, Oral Health: Go to <u>health.ny.gov</u> and search for **oral health**.

Training in Oral Health Assessment:

- A Health Professional's Guide to Pediatric Oral Health Management: Go to <u>mchoralhealth.org</u> and search for **pediatric oral health guide**.
- American Academy of Pediatrics (AAP) Oral Health: Go to <u>aap.org</u> and search for **oral health advocacy**.



^{1.} New York City Department of Health and Mental Hygiene. Fluoride Varnish: Frequently Asked Questions.

^{2.} Fisher-Owens SA, Isong IA, Soobader M-J, et al. An examination of racial/ethnic disparities in children's oral health in the United States. J Public Health Dent. 2013; 73(2):166-174.

^{3.} New York State Local Health Department Training Initiative 2016-2017: Fluoride Varnishing Integration into the Pediatric Primary Care Setting FAO.

^{4.} American Dental Association Council on Scientific Affairs. Professionally Applied Topical Fluoride. Evidence-based clinical recommendations. Journal of the American Dental Association. 2006; 137(8):1151-1159.

^{5.} Weintraub JA, Ramos-Gomez F, Jue B, Shain S, Hoover CI, Featherstone JDB, Gansky SA. Fluoride Varnish Efficacy In Preventing Early Childhood Caries. J Dent Res. 2006; 85 (2):172-176.

^{6.} American Academy of Pediatrics. Oral Health Initiative. Oral health risk assessment: training for pediatricians and other child health professionals. www2.aap.org/ORALHEALTH/EducationAndTraining.html.

^{7.} Clark MB, Slayton RL. American Academy of Pediatrics Clinical Report: Fluoride Use in Caries Prevention in the Primary Care Setting. *Pediatrics*. 2014; 134:626-633 Retrieved from: http://pediatrics.aappublications.org/content/pediatrics/134/3/626.full.pdf.

^{8.} New York City Department of Health and Mental Hygiene. (2017). Fluoride Varnish Brochure Oral Health Booklet.

^{9.} The American Academy of Pediatrics (January, 2016). Oral Health Coding Fact Sheet for Primary Care Physicians. Retrieved from: https://www.aap.org/en-us/ Documents/coding_factsheet_oral_health.pdf.