



TENNESSEE'S EPSDT PROGRAM

**Caries Risk Assessment Questionnaire
for Individuals 6 Months Old to 3 Years Old**

Patient Name: _____ DOB: _____

CLINICAL CONDITIONS, ENVIRONMENTAL CHARACTERISTICS, AND/ OR GENERAL HEALTH CONDITIONS	YES	NO
* If there are <u>no</u> teeth present in the child's mouth answer "No" to questions A through E.		
A. More than one tooth with unrestored caries (cavities)		
B. Rapid (within past 6 to 12 months) development of carious teeth (cavities) Answer "No" if child is younger than one "1" year old) Note: Typically, primary teeth begin erupting into the mouth at 6 months of age		
C. Visible plaque and/or debris on anterior (front) teeth		
D. Gingivitis (redness and/or bleeding gums). Typically, gingivitis is a result of poor or infrequent oral hygiene and has been associated with the progression of dental caries		
E. Enamel hypoplasia (poorly formed teeth with pits that have a chalky or discolored appearance)		
F. Suboptimal <u>systemic</u> fluoride exposure (family's drinking water source is a private well or the family's drinking water source is a public water supply that is not fluoridated and/or the child is not receiving fluoride supplements)		
G. Frequent (3 or more) between-meal exposures to snacks or foods containing simple sugars strongly associated with dental caries such as carbonated beverages, juices, cookies, cakes, candy, French fries, potato chips, pretzels (If infant or child is nursed with a bottle, does the caretaker allow the infant or child to sleep or nap with a bottle containing juice, milk, or carbonated beverages)?		
H. Low socioeconomic status (\leq 100% Federal Poverty Level)		
I. Family does not have a dentist or seldom visits a dentist		
J. Unrestored caries (cavities) present on mother's teeth		
K. Child has special health care needs because of a chronic physical, developmental, behavioral, or emotional condition		
L. Conditions (congenital or acquired: surgery, radiation, medication, or age-related changes in salivary function) that result in decreased flow of saliva		
Total Number of "Yes" Answers:		

❖ If the total number of "Yes" answers is \geq four (4), or the answer to question A or B is "Yes", the individual is at **high risk** for dental caries and **should be referred to a dentist for an oral evaluation and establishment of dental home** at the time the caries risk assessment is completed.