

## **Wisconsin Oral Health Program Fluoride Supplement Program Boundary Statement**

The Wisconsin Oral Health Program funding for fluoride supplement programs in the consolidated contracts is supported by state statute and GPR (general purpose revenue). The funding is targeted to specific local health departments. The funds can only be used to cover the cost of fluoride supplements and the materials needed to dispense fluoride supplements directly to families. The program will identify children at high risk for dental caries and ensure they have access to dietary fluoride supplements.

Fluoride supplement programs are an evidence-based strategy that prevents dental caries. Local health departments have the ability to dispense fluoride supplements directly to families under the standing order of the medical officer. Daily use of fluoride supplements, over an extended period of time, will result in the optimal caries prevention benefit. Local health departments should provide an avenue for families to receive refills of the fluoride supplements.

### **Target Population**

The target population for fluoride supplements is children 6 months to 16 years of age who are at high risk for dental caries. Before dispensing fluoride supplements, providers should evaluate all potential fluoride sources and conduct a caries risk assessment. Caries risk status can change over time; therefore, children should be reassessed at regular intervals. The American Academy of Pediatrics and the American Dental Association have created caries risk assessment tools that can be used to conduct the risk assessment.

In addition, the fluoride content of the primary source of drinking water should be known prior to dispensing fluoride supplements. If water is tested at the health department for fluoride content, the equipment must be calibrated at the frequency recommended by the manufacturer. A log should be kept of all water tests performed including the date tested, location of the water source, and the results of the test.

The supplements should be prescribed in adherence to the [ADA Dietary Fluoride Supplements: Evidence-based Clinical Recommendations](#).

### **Unacceptable Use of Funds**

This funding cannot be used for any other purpose other than the specifically identified program. The funds are not intended to be used for oral health education, well water testing, fluoride testing equipment and supplies, other types of fluoride such as fluoride varnish applications or school-based fluoride mouthrinse programs, and other oral health services.

### **Data Collection**

The Wisconsin Oral Health Program (OHP) [Fluoride Supplement Program Annual Report](#) must be completed and submitted to the OHP. The report will document the total number of fluoride prescriptions dispensed, fluoride prescriptions written, initial fluoride prescriptions, children receiving multiple prescriptions, and unduplicated children receiving fluoride supplements.

**Relationship to [Wisconsin' Roadmap To Improving Oral Health 2013-2018](#)**

Strategic Area 1: Infrastructure

Goal 1.2: Expand the role of communities and local health departments in the education, prevention, and treatment of dental disease

Strategic Area 2: Prevention and Health Promotion

Goal 2.3: Increase the use of evidence-based preventive measures, such as oral cancer screenings, sealants, tobacco cessation education, and fluoride

**Relationship to [Wisconsin State Health Plan: Healthiest Wisconsin 2020](#)**

[Oral Health Focus Area Profile](#)