

FLUORIDE SUPPLEMENT PROGRAM GUIDELINES

1. The program is primarily for pre-school children (6 months–6 years), but may be provided up to age 16 (targeting children who do not attend a school with fluoridated water), who are not presently receiving fluoridated drinking water, other fluoride supplements, or vitamins with fluoride.
2. Whether or not a child is receiving fluoride can be determined by the answers to questions on the questionnaire and consent form (OH-9). A copy of the form is included in this section.
3. When bottled water is being used as the primary source of drinking water, the fluoride content of the water should be determined. If the child's legal representative is unaware of the fluoride content of the bottled water, there are several sources of information, which can be helpful in learning the fluoride content of different brands of bottled water. Generally, bottled water has a toll-free phone number printed on the label, or a product web site, which can be accessed to learn the fluoride content of the bottled water. Additional sources for learning the fluoride content of bottled water can be found at International Bottled Water Association (IBWA) Information Hotline: 1-800-WATER-11 or the International Bottled Water Association Website, <https://bottledwater.org/>. **Do not submit** a sample of bottled water for testing, without first attempting to determine the fluoride content of the bottled water.
4. If the child is not receiving fluoride in the water supply, an analysis of the natural fluoride content of the home water supply must be performed prior to prescribing fluoride supplementation. Instructions for taking and submitting a water sample are provided on the reverse side of "Information for Parents or Guardians".
5. The maximum amount of fluoride a child under six should receive is 0.5 mg. fluoride ion per day.
6. Fluoride drops (8 drops–1 mg. fluoride ion) are packaged in plastic bottles containing one ounce liquid with about 500 drops (62.5 mg. fluoride ion) per bottle.
7. Fluoride chewable tablets (0.5 mg. fluoride ion) are packaged in plastic bottles containing 120 tablets (60 mg. fluoride ion) per bottle.
8. Dosage levels of fluoride drops or tablets depend on the age of the child and the amount of fluoride in the drinking water (from fluoride water sample tests). The dosage schedule for fluoride drops or tablets is included in the fluoride supplement protocols. For patients with abnormal fluoride test results of water samples submitted to the State Lab, issuing of fluoride supplements (drops or tablets) and follow-up should be followed per protocol.

9. If the test results from the water sample are:
- Equal to or greater than 2.00 ppm fluoride concentration, submit another sample of the water source to the State Lab for confirmation testing.
 - If both water samples are equal to or greater than 2.00 ppm up to 4.00 ppm fluoride concentration, recommend to the parent or guardian that children equal to or less than 8 years of age should consume another source of water.
 - Equal to or greater than 4.00 ppm fluoride concentration, recommend that both children and adults should consume another source of water.
 - The Environmental Protection Agency classifies water with equal to or greater than 2.00 ppm fluoride concentration as the Secondary Containment Level and water with equal to or greater than 4.00 ppm fluoride concentration as the Maximum Containment Level for fluoride in water.
 - When both water samples are equal to or greater than 4.00 ppm fluoride concentration, the nurse working with the Fluoride Supplement Program in the local health department should contact the local health department environmentalists and request an investigation of the water source.
 - If the second water samples, comes back less than 2.00 ppm, submit a third water sample to the State Lab for testing.
 - If fluoride concentration in two of the three samples is less than 2.00 ppm, follow the Fluoride Supplements Protocols for water samples with fluoride concentrations less than 2.00 ppm. If the fluoride concentration in two of the three samples is equal to or greater than 2.00 ppm, follow Fluoride Supplement Protocols for water samples with fluoride concentrations equal to or greater than 2.00 ppm.
 - For further clarifications and directions, call the Oral Health Program at 502-564-3246, extension 4421.
10. Orders for fluoride supplement drops or tablets must be signed by the health officer, another physician, a dentist, or another health professional with prescriptive authority. Protocols may be used—one copy will cover all children in the program. A sample copy is included in this section. If prescription blanks are used, a signed prescription for fluoride must be in each child's folder.
11. Parents or guardians must be advised concerning the importance of giving their child no more than the prescribed amounts of fluoride. It should be called to the attention of the parent or guardian that excessive amounts (i.e., more than 2 mg. per day) over an extended period of time (two or three months) may cause tooth discoloration during their development; with white spots appearing on the child's permanent teeth. In addition, they need to be told of the potentially toxic nature of fluoride when ingested in large doses at a single time.

If, for example, a 22 pound child takes 264 mg. of sodium fluoride (120 mg. fluoride ion) at any single time, symptoms of acute toxicity can occur (stomach upset, vomiting). The minimum lethal dose for a 22-pound child is 480 mg. of sodium fluoride.

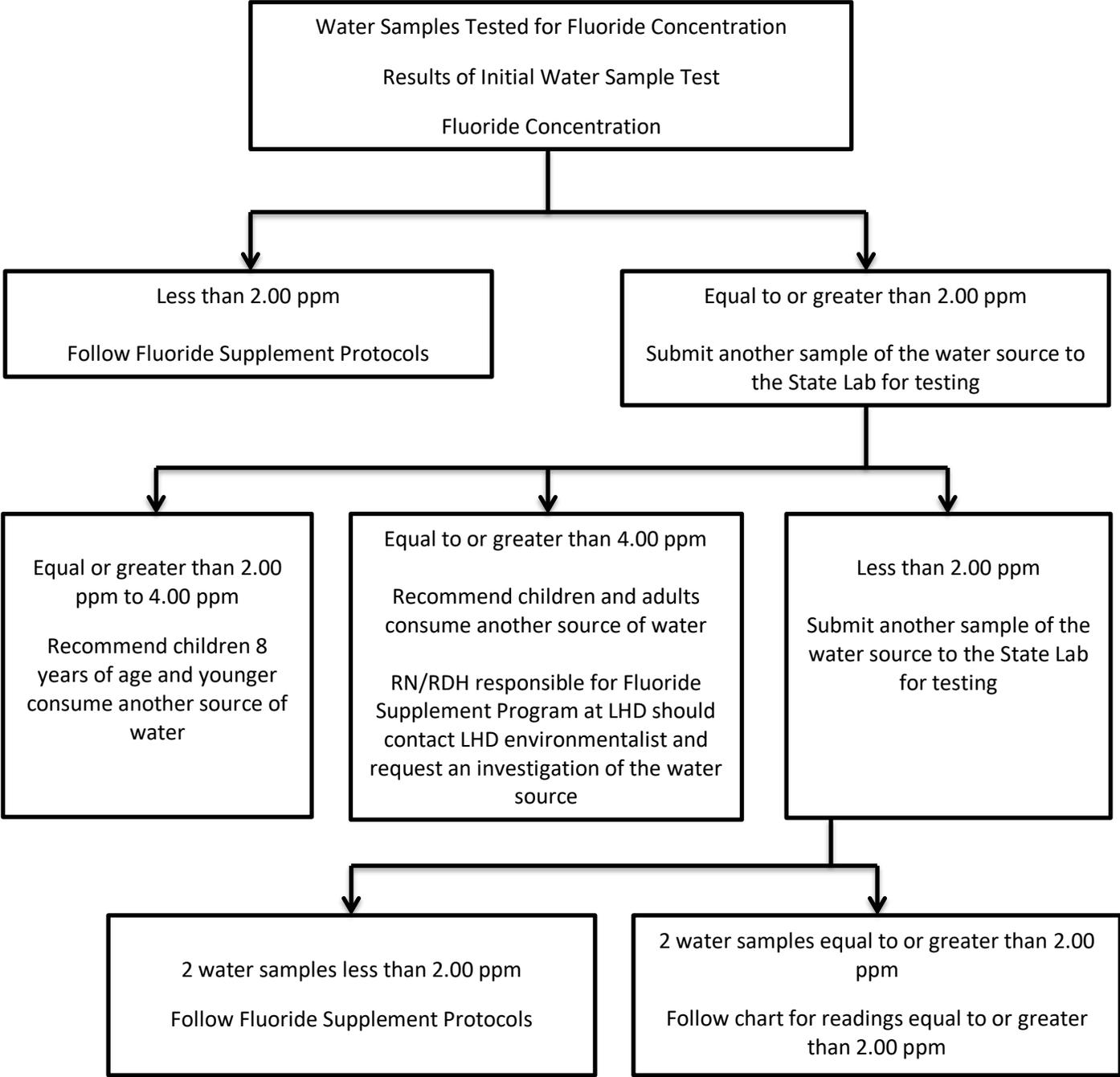
12. If it is determined that a child will participate in a preventive dental program, a questionnaire and consent form, the fluoride analysis of home water supply report, and a record of the amount of fluoride to be provided, if needed, shall be made a part of the child's permanent health record. (Each participating child in the family must have a signed questionnaire and consent form and a record of the amount of fluoride to be taken.)
13. If more than one child in a family is to receive the fluoride supplement, written instructions for each child must be given to the parent.
14. A 3-month supply of supplements may be provided for each child in a family. Empty containers should be returned before providing a replacement. At this time, a determination should be made whether circumstances affecting the amount of fluoride supplement to be provided have changed, such as change in address, change in water source or the 'aging out' of the impacted children.

Questions to Ask Parents

- a. Have you moved?
- b. Have you changed your water supply? (Hint: even redrilling a well may impact the fluoride intake of the family.)
- c. Has the child been placed on a vitamin supplement with fluoride?

Fluoride Supplementation Recommendations are based on the current guidelines of the American Dental Association, <https://www.ada.org/en/member-center/oral-health-topics/fluoride-topical-and-systemic-supplements> ,
[https://www.ada.org/en/~media/EBD/Files/ADA Evidence-based Fluoride Supplement Chairside Guide](https://www.ada.org/en/~media/EBD/Files/ADA_Evidence-based_Fluoride_Supplement_Chairside_Guide).

For additional information, please call the Oral Health Administrator at 502-564-3246, ext 4421.



For further information or directions, contact
the Oral Health Program
502-564-3246 x 4421

FLUORIDE SUPPLEMENT PROTOCOL

Infants and preschool children who are not drinking fluoridated water or who are not taking vitamins with fluoride should be given this essential nutrient. A laboratory test done on a sample of the drinking water supply will tell how much fluoride is in the water and the amount of the supplement that may be needed.

Call the Oral Health Program at 502-564-3246 to order forms, fluoride supplements, water sample, and collection kits or if further information is needed.

HEALTH RISK OR CONDITION	TREATMENT/ INTERVENTION	EDUCATION/ COUNSELING	FOLLOW-UP
Unfluoridated drinking water source may be: <ul style="list-style-type: none"> • Well • Cistern • Bottled • Spring 	Distribute one (1) bottle of fluoride drops and/or one (1) bottle of fluoride tablets to each child with individualized doses as follows:	NaFrinse Drops – 1 bottle has about 500 drops fluoride. NaFrinse Tablets – 1 bottle contains 120 tablets. Children under 3 are not issued tablets. Dosage depends on age of child and amount of fluoride in drinking water.	At each preventive visit ask: <ol style="list-style-type: none"> 1. Have you moved? 2. Has the source of your child's drinking water changed? 3. Is child taking vitamin with fluoride supplement? Yes response to #1 and 2— assess new water supply, if indicated Yes response to #3— discontinue fluoride supplement
DOSAGE			
Age of child	Fluoride in water 0 to 0.3 ppm	Fluoride in water 0.3 to 0.6 ppm	Fluoride in water 0.6 ppm and above
Age birth – 6 months	None	None	None
Age 6 months – 3 yrs	2 drops – .25 mg 1 time per day (8 month supply)	None	None
Age 3 – 6 yrs	4 drops – .50 mg 1 time per day (4 month supply) or 1 tablet – .50 mg 1 time per day (About a 4 month supply)	2 drops – .25 mg 1 time per day (8 month supply) Must give drops. There are no .25 mg tablets.	None
Age 6 – 16 yrs * *Children who do not attend school with a fluoridated water supply may continue in the program.	8 drops – 1.0 mg 1 time per day (2 month supply) or 2 tablets – .50 mg 1 time per day (2 month supply)	4 drops – .50 mg 1 time per day (4 month supply) or 1 tablet – .50 mg 1 time per day (4 month supply)	None
		Dispose of unused drops or tablets by: <ul style="list-style-type: none"> • Returning any unused liquid or tablets to LHD • Flushing unused liquid or tablet down toilet • Placing unused liquid or tablets in disposable trash container 	

Source: American Dental Association's Council on Scientific Affairs: Fluoride Supplement Dosage Schedule: 2010

Physician, Dentist, Other

Date

