



EXHIBIT 431-1, AHCCCS DENTAL PERIODICITY SCHEDULE

RECOMMENDATIONS FOR PREVENTIVE PEDIATRIC ORAL HEALTH CARE*				
These recommendations are designed for the care of children who have no contributing medical conditions and are developing normally. These recommendations may require modification for children with special health care needs.				
AGE	12-24 months	2-6 years	6-12 years	12 years and older
Clinical oral examination including but not limited to the following: ¹	X	X	X	X
➤ Assess oral growth and development	X	X	X	X
➤ Caries-risk Assessment	X	X	X	X
➤ Assessment for need for fluoride supplementation	X	X	X	X
➤ Anticipatory Guidance/Counseling	X	X	X	X
➤ Oral hygiene counseling	X	X	X	X
➤ Dietary counseling	X	X	X	X
➤ Injury prevention counseling	X	X	X	X
➤ Counseling for nonnutritive habits	X	X	X	X
➤ Substance abuse counseling			X	X
➤ Counseling for intraoral/perioral piercing			X	X
➤ Assessment for pit and fissure sealants		X	X	X
Radiographic Assessment	X	X	X	X
Prophylaxis and topical fluoride	X	X	X	X

¹ First examination is encouraged to begin by age 1. Repeat every 6 months or as indicated by child's risk status/susceptibility to disease.

NOTE: Parents or caregivers should be included in all consultations and counseling of members regarding preventive oral health care and the clinical findings.

NOTE: As in all medical care, dental care must be based on the individual needs of the member and the professional judgment of the oral health provider.

* Adaptation from the American Academy of Pediatric Dentistry Schedule