

teleORALhealth Procedure Manual

Completed by Community Health Services Inc.
Supported by Delta Dental of Colorado Foundation Grant 2023

Table of Contents:

teleORALhealth Workflow	2
Before Visit	5
Permission Slip Example	5
TeleORALhealth Appointment Scheduling Guidelines	6
Patient Preparation for the TeleORALhealth video chat	7
Text Message Reminders through Teledentix (EHR)	7
During Visit	9
Motivational Interviewing script for Preventive teleORALhealth	10
TeleORALhealth Fluoride Varnish Implementation	11
TOH Progress Note Template (for use with EHR)	13
After Visit	15
Parent/Guardian Report Example	15
Referral Form Example	16
Dental Diagnosis and Treatment Codes	17
Marketing/Resources Examples	18

teleORALhealth Workflow

Teledentix (TDX), or another electronic health record (EHR) to ensure patient confidentiality and HIPAA compliant video chat, is used to manage TOH appointments, progress notes, coding, text and email communication with patients, patient information, images, etc.

SCHEDULING APPOINTMENTS

1. Recruiting patients through various community organizations/partners, clinics and preschool, elementary and middle school screenings, etc.
2. Patients are scheduled through the front desk of the organization or a determined individual(s). All information collected at this time: name, DOB's child/adults, email address, physical address, cell phone number, insurance if any, chief concern.
3. Teledentix sends reminder text message the day before and day of the scheduled TOH visit.
 - a. Patient can also be confirmed the day prior to appointment via phone call and instructed on how to log on and start the appointment.
 - b. TDX does not require patients to download an app to their electronic device. They will be sent a website based link to access the video chat with their provider.
4. Day of appointment the login link can be sent through TDX if the patient is not able to locate the automatically sent text reminder that has the link attached.

BEGIN TOH APPT

1. Log into video 3-5 minutes before the appointment
 - a. Often, provider and interpreter can have brief conversations before the appt begins
2. Verify patient info is correct (may have multiple patients in one appt from the same family)
 - a. DOB(s)
 - b. How many people are in the household? (Adults, children and ages for OH kit)
 - c. Mailing address
 - d. Phone number
 - e. Email address
 - f. Insurance(s) status (can vary w/in a family)
 - g. Chief concern
3. Use motivational interviewing to answer risk assessment questions, gather details and determine referral status and caries risk. This also helps assess where to refer and if in-person dental care would be beneficial.
 - a. Risk questions are located in Teledentix under General Progress tab.
 - i. There are child and adult versions (see During Visit section for details)
 - b. Make sure to get
 - i. Referral level (0,1,2)
 - ii. Caries risk level (high, med, low)
 - iii. Have they seen a DDS? And how long ago?
 - iv. Do they have an established dental home?

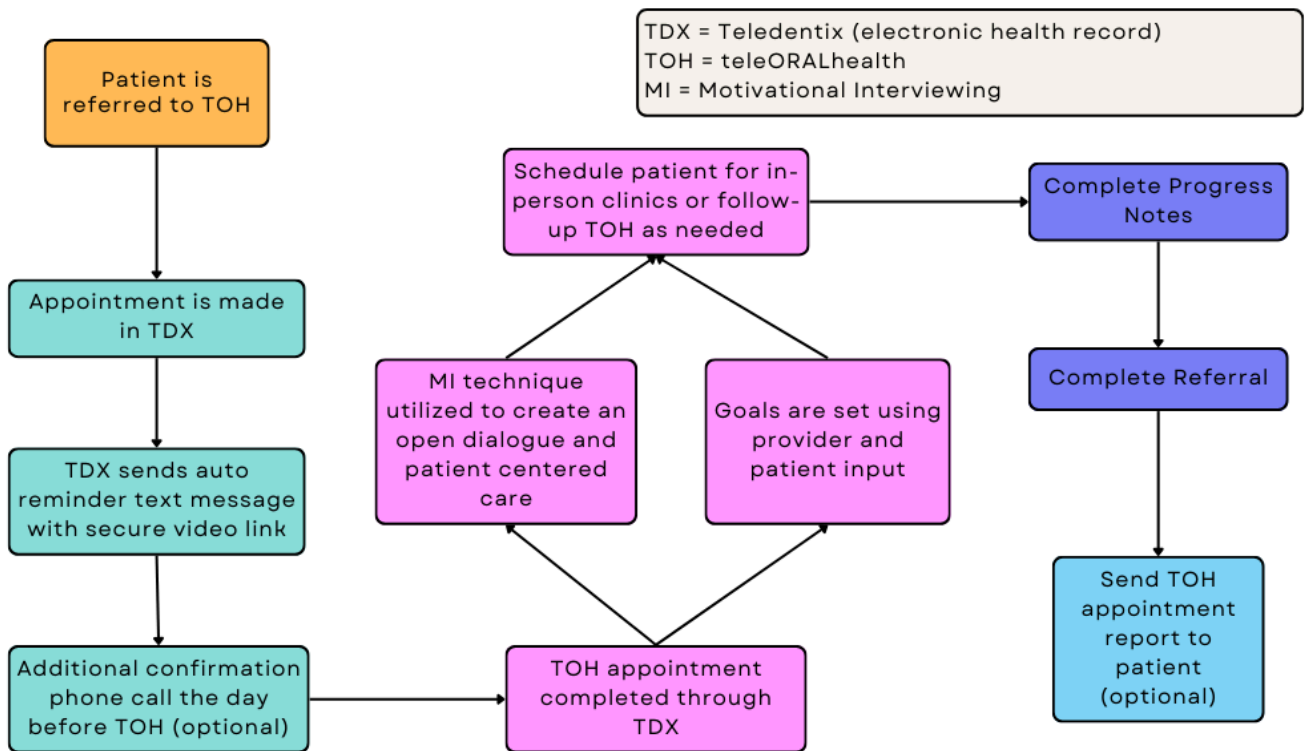
AFTER TOH APPT IS COMPLETE

4. Stay on video chat w/ interpreter - review appointment as needed
 - a. Then get off video to give yourself a break before the next appt begins
5. Complete General Progress notes in TDX
6. Complete appropriate forms in TDX

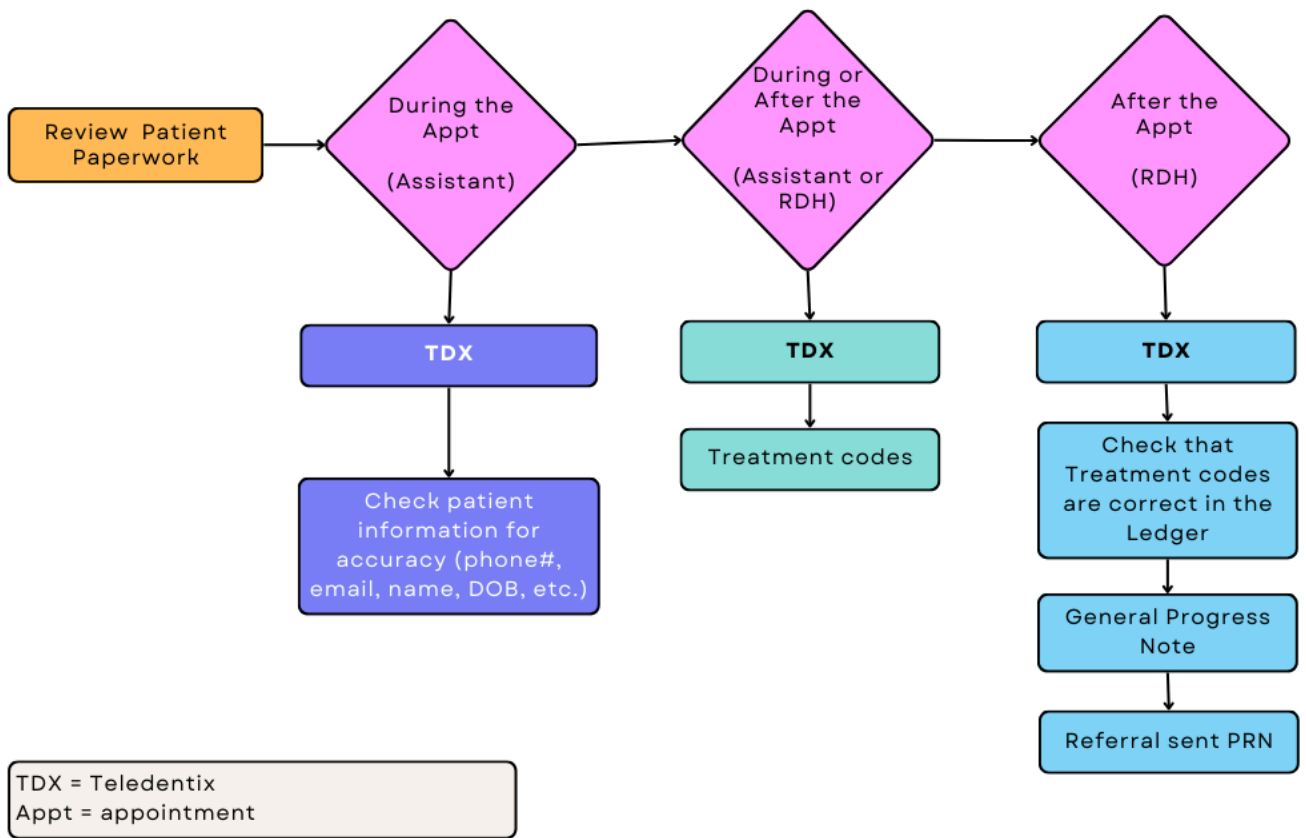
END OF DAY

7. Send TOH END OF DAY REPORT email (via Virtru secure email) to the oral health team: program administrator, Interpreter, and front desk/scheduler, appropriate providers, etc.
 - a. Include
 - i. Referrals
 - ii. Internal appointments to be scheduled
 - iii. Any other important information PRN

Always use Virtru secure email when sharing this sensitive information



teleORALhealth Appointment Flow



Teledentix and Data Entry Flow

Before Visit

Permission Slip Example



Bright Start Smiles

CHS Fax #: 970-920-5419
Email: Kelly.keeffe@aspencommunityhealth.org

TeleORALhealth Enrollment

TeleORALhealth is a new and exciting way to have a specialized conversation with an oral healthcare specialist and it can take place anywhere and anytime. Due to the pandemic on-site preventive dental services have been suspended until further notice.

What is TeleORALhealth?

TeleORALhealth is a type of remote telecommunications used to deliver oral healthcare in a comfortable and safe way. Basically, it means that we will conduct an oral healthcare visit using audio and video over the Internet, or by phone rather than in person. This allows you and your child to talk with a dental hygienist, an oral healthcare specialist, about your child's needs. We will discuss brushing habits, bottle and sippy cup habits, and nutrition. All of these things can help prevent your child from developing cavities. What you and your child do every day has the biggest impact on their health. We are here to help!

Why do we recommend a TeleORALhealth visit for your child?

Your child's dental screening results indicate you and your child will benefit from a TeleORALhealth visit.

Your child was not able to have an in person oral screening at school. During the live TeleORALhealth visit, we will help you show us your child's teeth and any problem areas. Or we can help you take photos or videos of the problem areas and send them to us in just a few clicks on your smartphone, tablet or computer.

How do I schedule a teleORALhealth visit?

Complete the following and return it to your childcare provider. Our dental team will contact you to arrange a time for your visit.

Child's name: _____ Childcare/Preschool: _____
Date of Birth: _____
Address: _____ City: _____ Zip Code: _____
 Yes I would like to participate along with my child in a TeleORALhealth visit
Parent's signature: _____
Phone#: _____

OR contact Community Health Services:
English 970-309-2064
Español 970-920-5420



Bright Start Smiles

CHS Fax #: 970-920-5419
Email: Kelly.keeffe@aspencommunityhealth.org

(TeleORALhealth enrollment: 2.3.2021 Kkeeffe)

TeleORALhealth Enrollment

TeleORALhealth is a new and exciting way to have a specialized conversation with an oral healthcare specialist and it can take place anywhere and anytime. Due to the pandemic on-site preventive dental services have been suspended until further notice.

What is TeleORALhealth?

TeleORALhealth is a type of remote telecommunications used to deliver oral healthcare in a comfortable and safe way. Basically, it means that we will conduct an oral healthcare visit using audio and video over the Internet, or by phone rather than in person. This allows you and your child to talk with a dental hygienist, an oral healthcare specialist, about your child's needs. We will discuss brushing habits, bottle and sippy cup habits, and nutrition. All of these things can help prevent your child from developing cavities. What you and your child do every day has the biggest impact on their health. We are here to help!

Why do we recommend a TeleORALhealth visit for your child?

Your child's dental screening results indicate you and your child will benefit from a TeleORALhealth visit.

Your child was not able to have an in person oral screening at school. During the live TeleORALhealth visit, we will help you show us your child's teeth and any problem areas. Or we can help you take photos or videos of the problem areas and send them to us in just a few clicks on your smartphone, tablet or computer.

How do I schedule a teleORALhealth visit?

Complete the following and return it to your childcare provider. Our dental team will contact you to arrange a time for your visit.

Child's name: _____ Childcare/Preschool: _____
Date of Birth: _____
Address: _____ City: _____ Zip Code: _____
 Yes I would like to participate along with my child in a TeleORALhealth visit
Parent's signature: _____
Phone#: _____

OR contact Community Health Services:
English 970-309-2064
Español 970-920-5420

(TeleORALhealth enrollment: 2.3.2021 Kkeeffe)

TeleORALhealth Appointment Scheduling Guidelines

Scheduling the Initial TOH appointment:

- First and foremost is to receive verbal consent for sending text messages for appointment details, confirmations, and resource information.
 - Initial appointments are scheduled for 30- 45 minutes. The actual appointment may only take 20-40 minutes depending on need and family size.
 - The remaining time is utilized by the provider to document details of appointment and, when interpreter is utilized, to review the appointment with the interpreter for clarifications and discuss any follow-up needs.
1. ___ Verbal Consent received for text messages to send appointment details, confirmations and dental resources.
 2. Interpretation needs:
 3. Parents/Adults Name:
 - a. Adults DOB:
 4. Child/Children Name:
 - a. DOB of child/children:
 5. Cell phone #:
 6. Address:
 7. Insurance if any:
 8. Members in household:
 9. NOTES or Pt Chief Concerns:

Scheduling follow-up or Fluoride Varnish (FLV) appointments:

1. FLV or follow up appointments are scheduled for 15 minutes unless otherwise indicated by the provider. The following information should be included:
 - a. interpreter needed
 - b. Verify Cell phone:
 - c. Insurance changes, if any:
 - d. NOTES:

Patient Preparation for the TeleORALhealth video chat

1. How does the video visit work?
 - a. You will receive the meeting link via text; click on the link.
 - b. You will need to enable the microphone and camera. Enter the patient's name when prompted. Once in the virtual waiting room you will be checked in by the dental hygienist.
2. How about photos of teeth?
 - a. Please submit/send patient photos ahead of time via text. This helps the dental hygienist complete a thorough dental screening.
 - b. Tips for good photos: use the flash and try to capture the same images as the ones shared with you. If there are any areas with concerns take individual photos of the problem.
3. What helps me have a successful visit?
 - a. Be in a part of the house that has the best Wi-Fi or cellphone connection. Plan on sitting in one spot and make yourself comfortable.
 - b. If you are using your cell phone for the visit: prop the phone vertically and make sure the camera is in selfie mode.
 - c. Make sure there is adequate lightening facing the patient/parent. No glaring light behind the patient/parent.
 - d. Have patient's toothbrush, toothpaste, and floss ready to demonstrate brushing and flossing at home.
 - e. If possible, have someone else help with holding the phone when the parent is demonstrating homecare on the child or make sure it is propped up and the dental hygienist can see the parent and patient in the camera.
4. What about the home care package?
 - a. If you received a home care package in the mail, please do not open it before the visit. The dental hygienist will go over the contents with you and will explain how to use them during the appointment.

Text Message Reminders through Teledentix (EHR)

Video appointment reminder sms for patient:

Hola {patientFirstName},
Tiene {appointmentType} con {providerName} el {apptDate} a las {apptTime}.
{videoConfURL}

Hello {patientFirstName},
You have {appointmentType} with {providerName} on {apptDate} at {apptTime}.
{videoConfURL}

Video Call Instant Patient Invite: (if an additional link is needed before the appointment starts)

Hola {receiverName},
Tienes una videollamada con {senderName}.
Haga clic a continuación para unirse:
{videoConfUrl}
¡Gracias!

Hello {receiverName},
You have a Video Call with {senderName}.
Click below to join:
{videoConfUrl}
Thank you!

During Visit

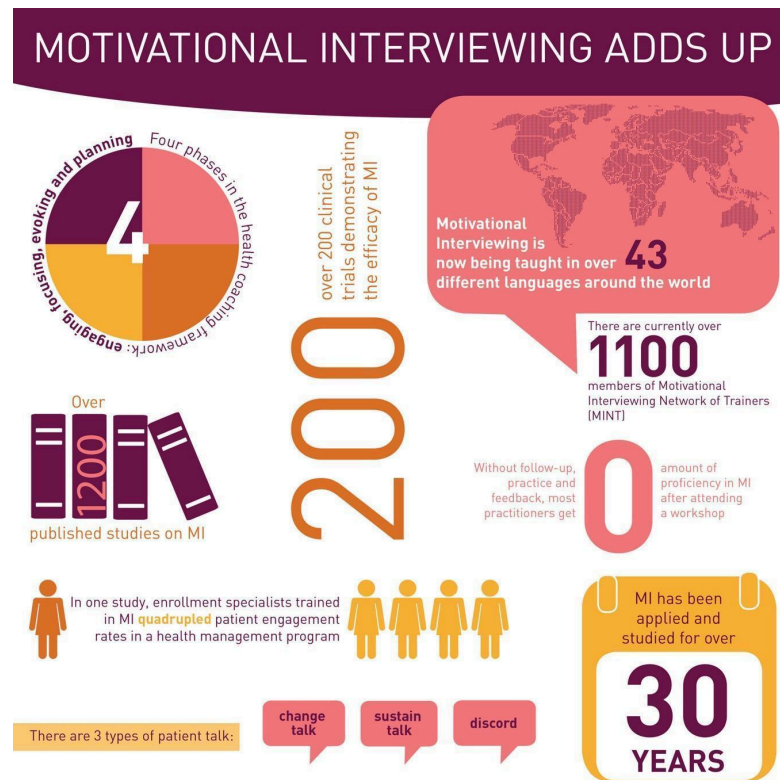


TABLE 1. Motivational Interviewing Principles¹⁰

Express empathy	Show an active interest in the individual's perception of his or her challenges.
Develop discrepancy	Evoke the individual's positive and negative aspects for or against change.
Roll with resistance	Listen to the individual's ambivalence without pushing him or her to discuss a behavior change.
Support self-efficacy	Build an individual's confidence that he or she is capable of changing.

Dental hygienist	What would you like to change about your teeth?	Open-ended question
Patient	What can I do about this stain on my teeth? I work with the public and I hate that my teeth are so dark.	
Dental hygienist	What do you think is causing the stain?	Open-ended question
Patient	I don't know. It could be a lot of things. I drink coffee, tea, and red wine.	
Dental hygienist	Can we talk a bit more about these?	Asking permission
Patient	OK.	
Dental hygienist	So you're telling me you drink a lot of things that stain your teeth. How often do you drink coffee, tea, and red wine?	Summarizing; open-ended question
Patient	I have two cups of coffee in the morning. I drink coffee all day at work. I like to drink tea when I go out to eat on the weekends. I drink a glass of red wine as a nightcap on the weekends, too.	
Dental Hygienist	It sounds like the coffee drinking all day may be the main reason for the stain. What do you think?	Affirmation; summarizing; open-ended question
Patient	Yes, but I cannot function without coffee.	
Dental hygienist	May we chat about your self-care today? I could share with you some other ways to reduce stain without giving up coffee.	Asking permission
Patient	Sure.	

Dental hygienist	Tell me how smoking fits into your life.	Open-ended question
Patient	I smoke about half a pack a day. I tend to smoke on my breaks and while I'm driving to and from work. I don't really smoke at home.	
Dental hygienist	Why do you think you smoke when driving and at work, but not at home?	Open-ended question
Patient	I have children and I don't want to smoke in front of them.	
Dental hygienist	It is great that you feel you should not smoke in front of your children. Your kids' health must be important to you.	Affirmation; reflective listening
Patient	My children tell me I should quit, but I don't know if it is worth it.	Change talk; ambivalence
Dental hygienist	Can you explain what you mean by "worth it?"	Open-ended question
Patient	I don't know if there are any reasons why I should. My kids want me to quit, but I am too stressed to even think about quitting.	Ambivalence
Dental hygienist	I am hearing you say it is important to your kids that you quit smoking. So, how important is it to you on a scale of 0-10—0 being not important at all and 10 being very important—that you quit smoking?	Reflective listening; importance ruler
Patient	I would say about a 7. I know I should try.	Change talk
Dental hygienist	What are some strategies besides smoking that might help you reduce stress?	Open-ended question
Patient	Maybe I could exercise.	
Dental hygienist	Anything else you can think of that may reduce your stress?	Ask for elaboration: "What else?"
Patient	I could ask my spouse for help with the kids.	
Dental hygienist	It sounds like you already have two ideas to reduce your stress that may be helpful if you decide to quit smoking.	Summarizing
Patient	Yes, I know what I need to do if I decide to quit.	Change talk
Dental hygienist	From what you tell me, it is important to you and your children that you quit smoking. I am confident you can do it if you decide to try! You already identified the fact that stress makes you smoke and you have two great ideas to reduce stress.	Summarizing; support self-efficacy
Patient	I know I can quit if I really want to.	Change talk

Motivational Interviewing script for Preventive teleORALhealth

☺ THE APPOINTMENT ☺

USE MOTIVATIONAL INTERVIEWING to encourage behavior modification

1. Upon initiating the teledental appointment via Doxy or Webex
 - a. Obtain verbal consent. The provider informs the patient that
 - i. TeleORALhealth is limited in scope and is not a substitute for longterm, in-clinic or definitive care. We can provide preventive care, education, and screening through TeleORALhealth, do you consent to the visit today? (mark on screening form)
 - ii. After the patient verbally consents, the appointment begins.
2. Verify patient info is correct (may have multiple patients in one appt from the same family)
 - a. DOB(s)
 - b. How many people are in the household? (Adults, children and ages for OH k it)
 - c. Mailing address
 - d. Phone number
 - e. Email address
 - f. Insurance(s) status (can vary w/in a family)
3. General health screening
 - a. "Tell me how your body has been feeling."
 - b. "It sounds like ."
 - c. does your child take any medications?
 - d. Does your child receive any services for developmental concerns/early intervention services?
 - e. does your child see any medical specialists?
 - f. if the parent asks why you are inquiring: "Good question, I'm glad you asked. These things can increase a child's risk for dental decay or pose other challenges for their oral health."
4. Oral health screening
 - a. "Tell me how your mouth has been feeling."
 - b. "It sounds like....."
5. Oral health screening for family members
 - a. "What about mom/dad/guardian or brothers and sisters? How is their mouth feeling? Any cavities that haven't gotten treated?"
6. Discuss and determine bottle/sippy cup habits
 - a. "Tell me about when you go to bed or take a nap."
 - b. "What do you like to have with you when you go to sleep?"
 - c. "Ahhh so it sounds like you like to have something comforting to help you go to sleep."
 - d. "What do you like to have in the bottle/sippy cup?"
 - e. "What's something else we could put in there?"
7. Nutritional counseling –

- a. "Tell me what you ate and drank today." "What do you like to eat and drink the most?"
 - b. "It sounds like you really like _____ can we talk a bit more about them?"
 - c. "I'm hearing you say you like to eat and drink sweet things. Sweet foods and drink can be tasty. What are some reasons we shouldn't have them?"
 - d. "What are some other things you can eat and drink?"
 - e. "So from what you said, sweet foods and drinks can cause cavities and they can also cause us to gain weight. But you know other foods and drinks that are healthy and I'm confident you can eat and drink those more than the sugary ones if you decide to try!"
8. Oral health routine/habits
- a. "Tell me about your dental routine."
 - b. "Show me where you keep your toothbrush." "Show me how you use your toothbrush/floss/toothpaste/etc."
 - c. "Let's get the little pink tablet out of your goodie bag, have mom/dad/grandma/grandpa/etc. break it in half." "Now take the little half and chew it, don't swallow it, rub it around with your tongue on your teeth, and then spit it in the sink." "Now smile in the camera, let me see your teeth, now you look at them." "What do you see?" "What does mom/dad/etc. see?"
 - d. "Oh ya, lots of pink!" "What if I told you that little tablet dyed the germs on your teeth pink?"
 - e. "Now that we can see the germs, how can we get them off our teeth?"
 - f. "How long should we brush our teeth aaaand our gums to get the germs off?"
 - g. "Yep! 2 minutes! How many times a day should we do it?"
 - h. "You're right! 2 times! When is a good time to do it?"
 - i. "Right again, in the morning and then before we go to sleep!"
 - j. "What do you think about mom/dad/etc. helping a little bit when you brush?"
 - k. "Oh yes, they are good helpers, it sounds like it's good to ask for help."
 - l. "Alright! You and mom/dad/etc. show me how you brush those germs off, I'll set a timer for 2 minutes to help us, because it's good to have help."
9. More motivational interviewing prompts
- a. "Can you explain what you mean by _____."
 - b. "I am hearing you say it is important _____."
 - c. "So, how important is it to you on a scale of 0-10; 0 being not important and 10 being very important that you _____."
 - d. "What are some strategies/things that might help you _____."
10. Develop SMART goals with the patient and parent(s)—specific, measurable, attainable, relevant, and timely.
- a. Give an overview about what you talked about with child and guardian. "So you talked about xyz today and decided to....."

TeleORALhealth Fluoride Varnish Implementation

Fluoride varnish is recommended for patients at high risk for caries.

Options to implement Fluoride varnish (FLV):

1. The FLV can be mailed or given to the guardian/patient at the school or in-person dental visit after the initial TOH appointment.

1. This will allow the provider to perform a caries risk assessment and decide if FLV is recommended as well as gauge the patient's interest in the program.
2. Mailing FLV can be costly and time consuming. If this is the most viable option to increase FLV application for a high caries risk patient it is worthwhile. However, if it is possible to hand deliver the FLV at a dental visit or at a school location and schedule a follow up TOH visit for FLV application, this is a more cost effective method.
2. A follow-up TOH appointment will be scheduled when the patient receives the varnish. A link to a 3-minute video (links listed below) on how to apply a fluoride application is provided.
3. Fluoride varnish application guidance and post-operative instructions will be given at the scheduled appointment.

Inquire/confirm regarding the patient's insurance status for billing. Ex. Medicaid, CHP+, private insurance etc.

General Steps to instruct patient on application of FLV:

1. Depending on brand of FI Varnish-Dry teeth with 2x2 gauze
2. Open Fluoride packet
3. Mix the fluoride with supplied brush
4. Apply FLV to teeth, provider verbally guide the guardians in this step
5. Give post op instructions (based on brand of FI Vanish)

Detailed FLV application script:

1. "Before we are all done, there's one more important thing we'll do today." "We have yummy vitamins just for your teeth." "You can help Mom/dad/etc. put them on and I'm going to help too, because helping is good."
2. "Mom/dad/etc. are going to wash their hands first and then carefully open the package."
 1. (Direct them to the tab.) "The vitamins are sticky so just be cautious."
 2. "Take the brush and stir the vitamins up a little bit."
3. "swallow for mom/dad/etc. and open so they can see your nice strong teeth."
4. "Just take the brush with the vitamins on it and paint it on the bottom teeth first."
5. "Then dip the brush back in the vitamins and paint the top teeth with vitamins."
6. "Now you can close and swallow! You can get a drink of water (only offer if the child grimaces)."

General Post-operative instructions:

- refrain from eating hard foods for 4-6 hrs after application
- no mouth rinses containing alcohol for 4-6 hrs
- no alcohol for 4-6 hrs
- no brushing for 4-6 hrs

[Provider Training Fluoride Varnish HD](#)

Parent Fluoride Varnish 2-3 minute videos (Minnesota Oral Health Coalition):

English: <https://www.youtube.com/watch?v=XOSzqfdWbVI>

Spanish: https://www.youtube.com/watch?v=9K_5CDDNG0g&t=2s

TOH Progress Note Template (for use with EHR)

Y=yes, blank=no

Main concern/focus of appt:

Caries Risk Indicators:

- a) tooth or mouth pain/sensitivity that has not been treated -
- b) sugary drinks during the day (between meals) -
- c) eat candy, carbohydrate snacks, soda, sugared beverages, and /or fruit juice (3 times or more a day) -
- d) Mother/ caregiver have active/untreated dental decay -
- e) other children have tooth decay or fillings -
- f) bottle or sippy cup with milk, juice, or sugary drinks during the day (between meals) -
- g) sleep with a bottle or sippy cup at night/naps -
- h) Bleeding gums -
- i) take any Medications -

If so, please list:

- j) receive any services for developmental concerns/early intervention services -
- k) see any medical specialists -
- l) Pregnant -

Protective factors:

- a) Drink tap water daily -
- b) Brush teeth with fluoridated toothpaste 2 times a day -
- c) Seen a dentist -

If yes, last dental check within last 12 mos -

Oral Examination:

- a) Obvious white spots (demineralization). Non-cavitated -
- b) Obvious decay present. Cavitated -
- c) Plaque is obvious on teeth and/or gums bleed easily -
- d) Lives in fluoridated community -

https://nccd.cdc.gov/DOH_MWF/Default/WaterSystemList.aspx

Assessment: REFERRAL status:

- 0-No visible decay/issues
- 1-Minor/obvious decay/other
- 2-Emergency needs

Assessment: CARIES Risk status

- D0601 - Low risk
- D0602 - Moderate risk
- D0603 - High risk

Plan/Goals:

- 1.
- 2.
- 3.

Needs Follow-up:

Routine dental referral -

fluoride varnish -

SDF -

Urgent oral health referral (high risk, needs tracking) -

TOH -

CHS clinic -

General vaccines up to date-

Appt notes:

I/O photos received from guardian -

Technical difficulties -

Translator -

Duration of appt -

Survey Sent -

email parent letter -

After Visit

Parent/Guardian Report Example



Bright Start Smiles

Oral screening and teleORALhealth report Programa Dental: Informe del Estudiante

Student's Name:
Nombre del Estudiante:

Today's Date:
Fecha de Hoy:

Your child received an oral evaluation and a fluoride varnish to help prevent tooth decay. We recommend all students make an appointment with a dentist for routine dental examinations by the age of one. If there was any tooth decay found in our screening, please make an appointment with a dentist as soon as possible. Dental problems only get worse over time.

Su hijo recibió una examen dental y un barniz de flúor dental para prevenir caries. Recomendamos a que cada estudiantes haga una cita con un dentista para los exámenes dentales de rutina a la edad de un año. Si encontramos alguna carie le recomendamos hacer cita con un dentista tan pronto sea posible. Los problemas dentales empeoran con el tiempo.

Your child has _____ visible cavities and needs attention immediately

Su niño(a) _____ caries visibles. Necesita atención inmediata

Needs complete oral examination, routine dental exams are recommended by the age of one.

Necesita un examen completo. Se recomiendan exámenes dentales de rutina a la edad de un año.

Oral Screening /education / behavior modification provided

Evaluación oral /educación sobre higiene bucal / modificación de comportamiento

Fluoride varnish applied/recommended

Barniz de fluoruro recomendado /aplicado

Silver Diamine Fluoride recommended

Barniz de fluoruro recomendado

Dental sealants recommended

Selladores dentales recomendados

Needs teeth cleaning.

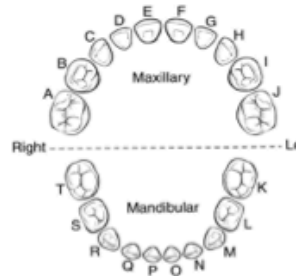
Necesita una limpieza dental (Please contact your dentist/dental hygienist to schedule your child's appointment. Por favor, haga una cita con un dentista para programar la cita de su hijo(a).)

Your child's plaque levels are high. Please assist your child in brushing both morning and night.

Sus niños(as) niveles de placa son altos. Por favor asista a sus niños en cepillary los dientes cada mañana y noche

Unable to examine, student uncooperative

No se pudo examinar, alumno no coopera



It is also important to include a resource with local dentist, dental hygienist providers, and dental care programs that provide further in-person clinical care.

If a guardian/parent is present during a TOH visit, which is common, a report is not always necessary; the provider can use their professional judgement to determine the value.

Referral Form Example

Online referral systems can also be utilized. Community Resource Network (CRN) has been a successful referral system for our TOH program.

11/23/22, 12:18 PM

Referral Form Default 2022

0405 Castle Rd. Suite 201, Aspen, CO 81611 Phone: (970) 920-5420 Fax: (970) 920-5419

REFERRAL FORM

Date

REFERRAL TO

CLIENT FIRST NAME

CLIENT LAST NAME

GUARDIAN NAME (if applicable)

PHONE NUMBER

CLIENT DOB

BEST TIME TO REACH CLIENT

morning afternoon evening unknown anytime

PREFERRED LANGUAGE

English Espanol Other

URGENCY CLASSIFICATION

EMERGENT (f/u in 12-48 hours) URGENT (f/u in 2-4 weeks) ESSENTIAL (f/u in 1-2 months or sooner)

DETAILS

CARE PROVIDED AT CHS

NAME OF PROVIDER

Dental Diagnosis and Treatment Codes

CDT Code	Description	Estimated Average Fee
D9990	Certified translation or sign-language services - per visit	\$20
D9995	Teledentistry - Synchronous, real time encounter	\$69
D1206	Topical application of fluoride varnish	\$36
D0140	Limited oral evaluation, problem focused	\$76
D0601	Caries risk assessment, low risk	n/a
D0602	Caries risk assessment, moderate risk	n/a
D0603	Caries risk assessment, high risk	n/a
0 treatment urgency	Routine dental examination.	n/a
1 treatment urgency	Dental treatment needed, non emergent	n/a
2 treatment urgency	Emergency dental treatment needed	n/a

Marketing/Resources Examples

TELEORALHEALTH
PUEDE PREVENIR
CARIES DENTALES,
ENFERMEDAD DE LAS ENCÍAS
Y OTROS PROBLEMAS DE SALUD

Conveniente. Completamos un chequeo por su teléfono, tableta, o computadora a través de video llamada y recomendamos atención en ese momento.

Ahorre dinero. Sin costo para usted y su familia.

Cuidado experto. Una especialista de salud bucal/higienista dental hablará con usted sobre cualquier preocupación que tenga, como cepillarse, hilo dental, pastas dentales, biberones, tazas de sippy, alimentos saludables, cómo prevenir, detener y arreglar caries dentales y enfermedad de las encías.

AGENDAR UNA CITA DE TRABAJO

ENGLISH - 970-309-2064
ESPAÑOL - 970-920-5420
kelly.keeffe@aspencommunityhealth.org



WE ARE HERE FOR YOU

TELEORALHEALTH
CAN PREVENT
DENTAL CAVITIES,
GUM DISEASE,
& OTHER HEALTH PROBLEMS.

Convenient. We complete a screening over your smart phone, tablet, or computer through video. We recommend care right then and there.

Save Money. No cost to you or your family.

Expert Care. An oral health specialist/dental hygienist will talk with you about: any concerns you have, brushing & flossing, toothpastes, dry mouth, healthy foods, and how to prevent, stop, & fix dental cavities and gum disease.

SCHEDULE AN APPOINTMENT

ENGLISH - 970-309-2064
ESPAÑOL - 970-920-5420
kelly.keeffe@aspencommunityhealth.org



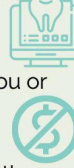
TELEORALHEALTH
CAN PREVENT
DENTAL CAVITIES,
GUM DISEASE,
& OTHER HEALTH PROBLEMS.

SCHEDULE AN APPOINTMENT



ENGLISH - 970-309-2064
 ESPAÑOL - 970-920-5420
 kelly.keeffe@aspencommunityhealth.org

Convenient. We complete a screening over your phone, tablet, or computer through video and recommend care right then and there.



Save Money. No cost to you or your family.

Expert Care. An oral health specialist/dental hygienist will talk with you about any concerns you have, brushing & flossing, toothpastes, bottles & sippy cups, healthy foods, and how to prevent, stop, & fix dental cavities and gum disease.



teleORALhealth



TeleORALhealth

A painless appointment with a dental professional

+ Tooth decay or cavities are 100% preventable!

It's true! We will provide you with the information on how to prevent, stop, & fix dental cavities, gum disease and other health problems.



+ In the comfort of your own home

Talk with a dental professional over your smart phone, tablet or computer through video.



+ Save Money

This service is free to you and your family.



+ Expert Care

We will show you how to take photos of your teeth so the dental professional can complete a screening and recommend care.



+ Schedule an appointment

English: 970-920-5434
 Español: 970-920-6126
 lisa.westhoff@aspencommunityhealth.org



TeleORALhealth is made possible by funding from Delta Dental of Colorado Foundation and Colorado Department of Public Health and Environment - Oral Health Unit



TeleORALhealth

Una cita sin dolor con un profesional dental

+ ¡Las caries o el desgaste dental son 100% prevenibles!

Es cierto! Le proporcionaremos la información sobre cómo prevenir, detener y corregir las caries dentales, la enfermedad de las encías y otros problemas de salud.



+ En la comodidad de su hogar

Hable con un profesional dental a través de su teléfono celular, tableta o computadora de forma virtual.



+ Ahorre dinero

Este servicio es gratuito para usted y su familia.



+ Cuidado experto

Le mostraremos cómo tomar fotos de sus dientes para que un profesional dental pueda completar una evaluación y hacerle recomendaciones.



+ Agende su cita

Inglés: 970-920-5434
 Español: 970-920-6126
 kelly.keeffe@aspencommunityhealth.org



TeleORALhealth es posible gracias a los fondos de la Delta Dental of Colorado Foundation y al Colorado Department of Public Health and Environment - Unidad de Salud Oral

