



9 Carey Road, Queensbury, NY 12804 • www.hhhn.org

Dental Program

Dear Parent/Guardian,

The Hudson Headwaters School Based Dental Program provided preventative dental services to many children in your school this past fall. We will be returning for 6-month recall services this spring to see all children that were registered in the fall. A 6-month re-care schedule is recommended by the American Dental Association.

Children that **did not** enroll in the School Based Dental Program in the fall can receive dental care this spring by completing a consent form prior to our arrival. Consent forms will be available in the main office or the nurse's office. We have Dental Hygienists clean teeth, screen for problems, strengthen teeth with fluoride and place dental sealants (if necessary), reducing cavities by 70%! *Families are not charged – just insurance companies if applicable.*

Children who are currently enrolled in the School Based Dental Program will be seen for 6-month recare services by a licensed Dental Hygienist in the next few weeks. They will receive preventative services as in the past. **You do not need to do anything more for your child to receive these services. The original consent form that you completed covers your child for the entire school year.**

Thank you! It is our pleasure to provide preventative services to your child and to be part of your child's dental team.

Piperlea Chico, RDH- (518) 764-3036

School Based Dental Program Coordinator, Dental Hygienist

Sign and return only if you do not want your child to receive recare services

If you are not interested in your child remaining enrolled in the HHHN School Based Dental Program, please fill in the message below so we can remove your child from the program.

I _____ **do not** want my child _____ to receive preventative dental services from the School Based Dental Program.

Parent/Guardian Signature _____ Date _____