

Table 4: Example of a Caries Management Protocol for 1-2 Year Olds

Risk Category	Diagnostics	Interventions		Restorative
		Fluoride	Diet	
Low Risk	--Recall every 6-12 months --Baseline MS α	--Twice daily brushing with F toothpaste β	Counseling	Surveillance χ
Moderate Risk parent engaged	--Recall every six months --Baseline MS	--Twice daily brushing with F toothpaste --Fluoride supplements δ --Professional topical treatment every 6 mo.	Counseling	Active surveillance ϵ
Moderate Risk parent not engaged	--Recall every six months --Baseline MS	--Twice daily brushing with F toothpaste --Professional topical treatment every 6 mo.	Counseling, with limited expectations	Active surveillance
High Risk parent engaged	--Recall every three months --Baseline and follow up MS	--Twice daily brushing with F toothpaste --Fluoride supplements --Professional topical treatment every 3 mo.	Counseling	--Active surveillance --Restore cavitated lesions with ITR ϕ or definitive restorations
High Risk parent not engaged	--Recall every three months --Baseline and follow up MS	--Twice daily brushing with F toothpaste --Professional topical treatment every 3 mo.	Counseling, with limited expectations	--Active surveillance of incipient lesions --Restore cavitated lesions with ITR or definitive restorations

Table 5: Example of a Caries Management Protocol for 3-5 Year Olds

Risk Category	Diagnostics	Interventions			Restorative
		Fluoride	Sealants	Diet	
Low Risk	--Recall every 6-12 months --Radiographs 12-24 months --Baseline MS	--Twice daily brushing with F toothpaste γ	(Yes) λ	No	Surveillance
Moderate Risk parent engaged	--Recall every six months --Radiographs 6-12 months -- Baseline MS	--Twice daily brushing with F toothpaste --Fluoride supplements --Professional topical treatment every 6 mo.	Yes	Counseling	--Active surveillance of incipient smooth surface lesions --Restoration of cavitated or enlarging lesions
Moderate Risk parent not engaged	--Recall every six months --Radiographs 6-12 months --Baseline MS	--Twice daily brushing with F toothpaste --Professional topical treatment every 6 mo.	Yes	Counseling, with limited expectations	--Active surveillance of incipient smooth surface lesions --Restoration of cavitated or enlarging lesions
High Risk parent engaged	--Recall every three months --Radiographs, six months --Baseline and follow up MS	--Brushing with .5% F (with caution) --Fluoride supplements --Professional topical treatment every 3 mo.	Yes	Counseling	--Active surveillance of incipient smooth surface lesions --Restoration of cavitated or enlarging lesions
High Risk parent not engaged	--Recall every three months --Radiographs, six months --Baseline and follow up MS	--Professional topical treatment every 3 mo.	Yes	Counseling, with limited expectations	Restore incipient, cavitated or enlarging lesions

Table 6: Example of a Caries Management Protocol for >6 Year-Olds

Risk Category	Diagnostics	Interventions			Restorative
		Fluoride	Sealants	Diet	
Low Risk	--Recall every 6-12 months --Radiographs 12-24 months	--Twice daily brushing with F toothpaste μ	(Yes) λ	No	Surveillance
Moderate Risk patient engaged	--Recall every six months --Radiographs 6-12 months	--Twice daily brushing with F toothpaste --Fluoride supplements --Professional topical treatment every 6 mo.	Yes	Counseling	--Active surveillance of incipient smooth surface lesions --Restoration of cavitated or enlarging lesions
Moderate Risk patient not engaged	--Recall every six months --Radiographs 6-12 months	--Twice daily brushing with F toothpaste --Professional topical treatment every 6 mo.	Yes	Counseling, with limited expectations	--Active surveillance of incipient smooth surface lesions --Restoration of cavitated or enlarging lesions
High Risk patient engaged	--Recall every three months --Radiographs, six months	--Brushing with .5% F --Fluoride supplements --Professional topical treatment every 3 mo.	Yes	Counseling Xylitol	--Active surveillance of incipient smooth surface lesions --Restoration of cavitated or enlarging lesions
High Risk patient not engaged	--Recall every three months --Radiographs, six months	--Brushing with .5% F --Professional topical treatment every 3 mo.	Yes	Counseling, with limited expectations Xylitol	Restore incipient, cavitated or enlarging lesions

- α Salivary mutans streptococci bacterial levels
- β Parental supervision of a “smear” amount of tooth paste
- χ Surveillance = periodic monitoring for signs of caries progression
- δ Need to consider fluoride levels in drinking water
- ϵ Active Surveillance = careful monitoring of caries progression and prevention program
- ϕ ITR – Interim Therapeutic Restoration (AAPD Reference Manual, 2008)
- γ Parental supervision of a “pea sized” amount of tooth paste
- λ indicated for teeth with deep fissure anatomy or developmental defects
- μ Less concern about the quantity of tooth paste