

# Risk Assessment

## Dental Caries

RISK FACTORS	PROTECTIVE FACTORS
<b>All Ages: Examples</b>	<b>All Ages: Examples</b>
Inadequate fluoride	Optimal systemic and/or topical fluoride
Inadequate oral hygiene	Good oral hygiene
Poor family oral health	Access to care and good oral hygiene
Poverty	Access to care
Frequent snacking	Reduction in snacking frequency
Special carbohydrate diet	Preventive intervention to minimize effects
Frequent intake of sugared medications	Alternate medications or preventive intervention to minimize effects
Reduced saliva flow from medication or irradiation	Saliva substitutes
Variations in tooth enamel; deep pits and fissures; anatomically susceptible areas	Sealants (if possible) or observation
Special health needs	Preventive intervention to minimize effects
Previous caries experience	Increased frequency of supervision visits
Gastric reflux	Management of condition
High mutans streptococci count	Reduction of mutans streptococci
<b>Early Childhood: Examples</b>	<b>Early Childhood: Examples</b>
Bottle used at night while sleeping or while awake "at will"	Prevention of bottle habit and weaning from bottle by 12 months
High parental levels of bacteria (mutans streptococci)	Good parental oral health and hygiene
History of baby bottle tooth decay	Increased frequency of supervision visits

## Periodontal Disease

RISK FACTORS	PROTECTIVE FACTORS
<b>All Ages: Examples</b>	<b>All Ages: Examples</b>
Inadequate oral hygiene	Good oral hygiene
Unrestored caries	Restoration of carious lesions
Poor family oral health	Access to care and good oral hygiene
Poverty	Access to care
Special health needs	Preventive intervention to minimize effects
Nutritional deficiency (e.g., vitamin C)	Healthy eating habits
Infectious disease (e.g., HIV/AIDS)	Treatment of disease or preventive intervention to minimize effects
Medications (e.g., Dilantin)	Preventive intervention to minimize effects
Metabolic disease (e.g., diabetes, hypophosphatasia)	Treatment of disease
Neoplastic disease (e.g., leukemia and its treatment)	Treatment of disease and preventive intervention to minimize effects
Genetic predisposition (e.g., Down or Papillon Lefevre syndrome)	Preventive intervention to minimize effects
Poor-quality restorations	Properly contoured and finished restorations
Mouthbreathing	Management of mouthbreathing
Injury	Use of age-appropriate safety measures and treatment of injury
<b>Early Childhood: Examples</b>	<b>Early Childhood: Examples</b>
Malpositioned and crowded teeth	Good oral hygiene



## Risk Assessment *(continued)*

### *Malocclusion*

RISK FACTORS	PROTECTIVE FACTORS
<i>All Ages: Examples</i>	<i>All Ages: Examples</i>
Congenital absence of teeth	Early intervention
Variations in development (e.g., tooth eruption delays and malpositioned teeth)	Early intervention
Conditions associated with malocclusion (e.g., cleft lip/palate)	Early intervention
Injury	Use of age-appropriate safety measures and treatment of injury
Acquired problem from systemic condition or its therapy	Dental intervention as a part of medical care
Family tendency toward malocclusion	Early intervention
Musculoskeletal conditions (e.g., cerebral palsy)	Dental intervention as a part of medical care
Skeletal growth disorders (e.g., renal disease)	Dental intervention as a part of medical care
<i>Early Childhood: Examples</i>	<i>Early Childhood: Examples</i>
Nonnutritive sucking habits	Elimination of habit
Muscular imbalances	Early therapy
Loss of space due to caries	Early intervention for caries

## Injury

RISK FACTORS	PROTECTIVE FACTORS
<i>All Ages: Examples</i>	
Substance abuse in family	Referral for counseling
Child abuse or neglect	Referral for counseling
Multiple family problems	Referral for counseling
Lack of protective reflexes	Referral for appropriate therapy
<i>Early Childhood: Examples</i>	
Failure to use safety measures appropriate for child (e.g., car safety seats, stair gates, safety belts)	Use of early childhood-appropriate safety measures
Protruding front teeth	Orthodontic care
Poor coordination	Referral for appropriate therapy
Overmedication	Adjustment of medications
Hyperactivity	Management of condition

