



REPLY TO  
ATTENTION OF

**DEPARTMENT OF THE ARMY**  
**HEADQUARTERS, UNITED STATES ARMY DENTAL COMMAND**  
**2050 WORTH ROAD**  
**FORT SAM HOUSTON, TEXAS 78234-6000**

MCDS

17 June 2003

MEMORANDUM FOR ALL U.S. Dental Command Personnel

SUBJECT: U.S. Army Dental Command (DENCOM) Policy Letter 03-26,  
Periodic Oral Evaluation Requirements

1. Periodic dental examinations are vital as good oral health is essential to the readiness posture of our forces. The Code on Dental Procedures and Nomenclatures 4 lists the following description for code D0120, Periodic Oral Evaluation - An evaluation performed on a patient of record to determine any changes in the patient's dental and medical health status.

2. Deployed soldiers are exempt from the requirement to have a Periodic Oral Evaluation on an annual basis. Dental clinic personnel must utilize the 'Deployed Function' within the Corporate Dental Application in order to freeze the dental classification of a deploying soldier. Once the deployed box is checked for a soldier, the soldier's dental classification will remain unchanged for 18 months or until dental clinic personnel remove the soldier from that status, whichever comes first.

3. Periodic Oral Evaluations should assess the current state of oral health, risk for future dental disease as well as assessing general health factors that relate to the treatment of our patients. The following measures are required for each Periodic Oral Evaluation:

a. Blood pressure assessment - Screen soldiers for hypertension, appropriately refer hypertensive patients, and utilize the information to prevent potential adverse events during dental treatment. (Hypertensive screening required by AR 600-63, Army Health Promotion, paragraph 2-12, subparagraph a-4)

b. Caries risk assessment - Classify soldiers as low, moderate or high risk for caries as described by the American Dental Association's 1995 Special Supplement. This assessment will allow the ADCS to identify those at high risk for future disease and appropriately manage their care.

c. Periodontal assessment - Periodontal diseases are the leading cause of tooth loss in adults. Periodontal Screening and Recording™ (PSR), a screening procedure endorsed by the American

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Dental Association and The American Academy of Periodontology, should be utilized to determine need for periodontal treatment.  
<http://www.ada.org/prof/prac/issues/pubs/psr/>

d. **Tobacco risk assessment** - Classify soldiers as a smoker, user of smokeless tobacco, user of multiple forms of tobacco, or not a user of tobacco. The oral cavity is the route of entry for tobacco and dental providers need to assess the impact of tobacco and inform their patients.

e. **Oral cancer screening** - Oral and pharyngeal cancer is a devastating disease that kills more than one American each hour of the year. Perform a thorough oral cancer screening on all beneficiaries as a part of all annual examinations.

4. Radiographs should be taken only for clinical reasons according to FDA guidelines as determined by the patient's dentist. [http://www.db.uth.tmc.edu/clinic-pat/News\\_Announcements/guidelines.pdf](http://www.db.uth.tmc.edu/clinic-pat/News_Announcements/guidelines.pdf) Radiographs should be of diagnostic quality, properly identified and dated. A panoramic radiograph is required to be present in the dental record and that it is of adequate quality for diagnostic/identification purposes. There is no time requirement on updating panoramic radiographs. However, the panoramic radiograph will adequately represent the current oral condition of the soldier.

5. All measures will be annotated in the Dental Health Record. Caries and tobacco risk assessment will be entered into the Corporate Data Application as well.

6. Point of contact is MAJ Jeffrey Chaffin at DSN 471-8865/6528.

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Commanding