

GETTYSBURG AREA SCHOOL DISTRICT
SCHOOL HEALTH SERVICES
Dental Program

Dear Parent,

Tooth decay is a disease that begins in early childhood and can continue throughout adulthood. Few children escape the destruction this disease produces. Tooth decay is the leading cause of tooth loss before the age of 35. An effective preventive measure to reduce the incidence of tooth decay is the use of fluoride tablets. This year we will be using fluoride tablets instead of the fluoride rinse which was previously used. Fluoride tablets have been proven to be very effective in strengthening permanent teeth as they develop as well as having a topical effect like the rinse.

We are offering this program to all elementary school children. The participating students will chew and swallow a 1 mg tablet of sodium fluoride everyday. The teachers will distribute these tablets each morning to the participating students.

It is very important that parents remind their children to thoroughly brush and floss their teeth after breakfast every day. This is especially important so that the fluoride can achieve its full effect on your child's teeth.

According to the Department of Health, this program will not interfere with fluoride treatments given by your family dentist or with fluoride toothpaste or fluoride rinses used at home. This program is accepted by the American Dental Association, The Pennsylvania Department of Health, and by our school dental advisors. If you have any questions about this program, please contact the Health Services Department of your child's school.

PLEASE SIGN THE ATTACHED FORM, CHECK A BOX AND RETURN TO SCHOOL

[] **Yes**, I want my child to participate in the fluoride program. I understand this is not a substitute for regular dental care by our family dentist.

[] **No**, I do not want my child to participate in the fluoride program.

Child's Name: _____ . **Grade/Teacher** _____

Signature of Parent or Guardian: _____

**** Must be signed and returned whether participating or not**