



## Dental Screening

(Per the Ohio Department of Education – Early Learning Program Guidelines for incoming preschoolers)

If you need assistance in obtaining a dental screening, below are some agencies within the Central Ohio area:

- Nationwide Children’s Hospital Dental Clinic 722.5650
- Columbus Health Department Dental Clinic 645.7487
- The Ohio State University Dental 292.2027

Child’s Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender M / F  
Circle one

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Parent(s) / Guardian \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

### Dental Screening Results (to be completed by the Dental Staff)

Child was screened on \_\_\_\_\_  
Date

Referral was made Yes / No  
Circle one

Recommendations \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_ Dental Staff Signature \_\_\_\_\_

Dentist’s Printed Name / Stamp \_\_\_\_\_

Address and Phone Number \_\_\_\_\_