Kindergarten Oral Health Assessment

Forms Received

Stanislaus County
Oral Health Program

2025

STEP 3 – Forms Received

Forms Completed Through On-Site School Screenings

Completed forms from the screening day are given to school staff by the dental screening provider/organization and are reviewed for "**Treatment Urgency**." For forms with "urgent care needed" see "**Forms With Urgent Dental Care Needs"** section below.

Completed KOHA Forms (Assessments and Waivers)

Each school is required to track, tally, and report **specific data** from the KOHA forms (assessments and waivers) for each child eligible for KOHA. The forms are collected and tracked continuously throughout the school year. This student-level data must then be aggregated and entered in the **System for California Oral Health Reporting (SCOHR)**by **July 1st**. (see **"Report Data into SCHOR"** section below for more details about entering data into SCOHR.)

Tools for data collection:

- **KOHA Data Input Form Excel Worksheet**—Allows for organized data tracking throughout the school year highlighting students requiring follow-up. This worksheet includes key fields aligned with SCOHR reporting requirements and can be used to efficiently compile, aggregate, and review data for errors before submission.

- **KOHA Data Input Form Excel Worksheet Training Video—**Walks you through how to utilize the "KOHA Data Input Form Excel Worksheet."

Forms With Urgent Dental Care Needs

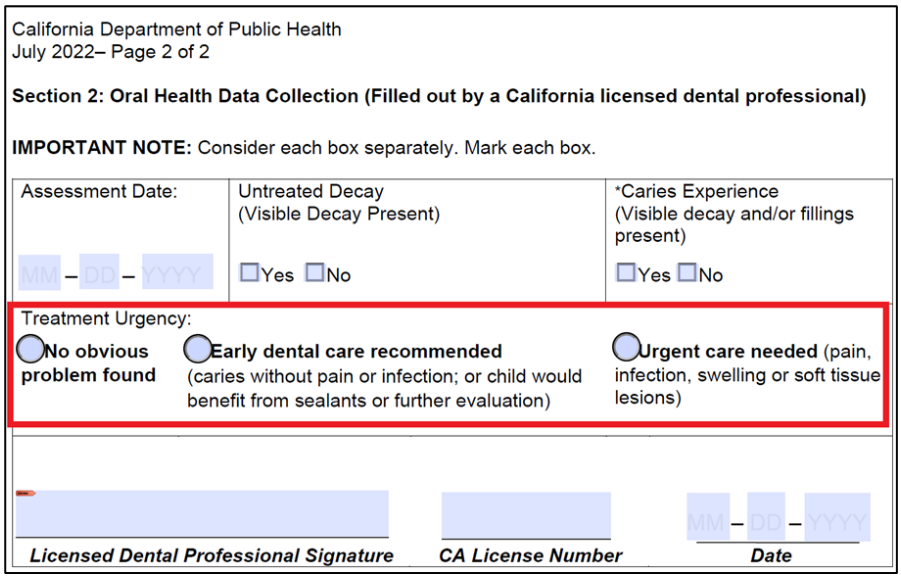
On the completed KOHA screening form **(Section 2),** there are three "treatment urgency" levels:

1. **No obvious problem found**
   The child has no obvious dental problems and should continue to have routine examinations by their dentist every six months.

2. **Early dental care recommended**
   The child has a tooth or teeth that have decay and should be checked by their dentist. They may benefit from sealants. The child's parent/guardian should contact the child's dentist, who will determine whether treatment is needed.

3. **Urgent care needed**

   The child has a tooth or teeth that appear to need immediate care, as there is pain, infection, or swelling. The child's parent/guardian should contact the child's dentist as soon as possible for a complete evaluation.



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Section 2: Oral Health Data Collection (Filled out by a California licensed dental professional)

IMPORTANT NOTE: Consider each box separately. Mark each box.

Assessment Date:	Untreated Decay (Visible Decay Present)	*Caries Experience (Visible decay and/or fillings present)
MM – DD – YYYY	☐Yes ☐No	☐Yes ☐No

Treatment Urgency:

◯ **No obvious problem found**

◯ **Early dental care recommended** (caries without pain or infection; or child would benefit from sealants or further evaluation)

◯ **Urgent care needed** (pain, infection, swelling or soft tissue lesions)

Licensed Dental Professional Signature | *CA License Number* | MM – DD – YYYY *Date*

The KOHA process requires follow-up for students with the highest level of treatment urgency - **urgent dental care needs**. This information is recorded on **Section 3** of the KOHA form:

Section 3: Follow-up to Urgent Care (Filled out by entity responsible for follow up)

Parent notified that child has urgent dental care need on:	MM – DD – YYYY
A follow-up appointment for this child has been scheduled for:	MM – DD – YYYY
Did child receive needed treatment?	◯ **Yes** ◯ **No** (If no, entity responsible for follow-up will be encouraged to check back in with parent) ◯ **I don't know**

For children receiving the screening at their dental office:

1. The dental office should address the urgent care need, and inform the parent/caregiver of next steps, including scheduling a follow-up appointment.
2. They may provide the needed treatment that same day. *If the child didn't receive needed treatment the same day as their screening, school staff—if able—should follow-up with parents/caregivers to see if the child received needed treatment. School staff will then complete this part of Section 3 of the KOHA form.*
3. The dental office should complete these parts of Section 3 of the KOHA form.

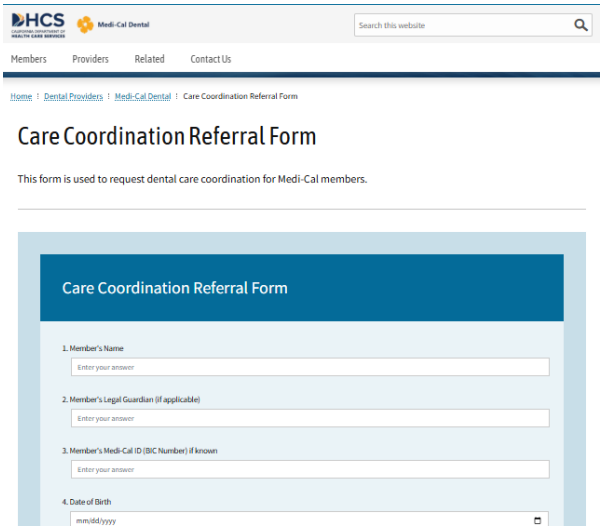
For children receiving the screening at their school:

1. Parents/caregivers of children screened should complete the "notified parent" part of Section 3 on the KOHA form—date when they received the "screening results letter" (See *KOHA Screening Results Letter for Parents/Caregivers* in **Step 1: KOHA Forms**).
2. School staff shall follow-up with parents/caregivers to see if a follow-up appointment was made for the child, and if the child received needed treatment.
3. School staff will then complete these parts of Section 3 on the KOHA form.

For children who do not have a dentist *OR* are unable to be seen *AND* need treatment:

Complete a **Medi-Cal Dental Care Coordination Referral Form**.

*For assistance, please reach out to **Stanislaus County Oral Health Program**.*



Contact Us

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