



**HealthyMouth**  
**HealthyBody**

**ORAL HEALTH FLORIDA**  
STATE ORAL HEALTH COALITION

## Basic Screening Survey (BSS) Calibration Training

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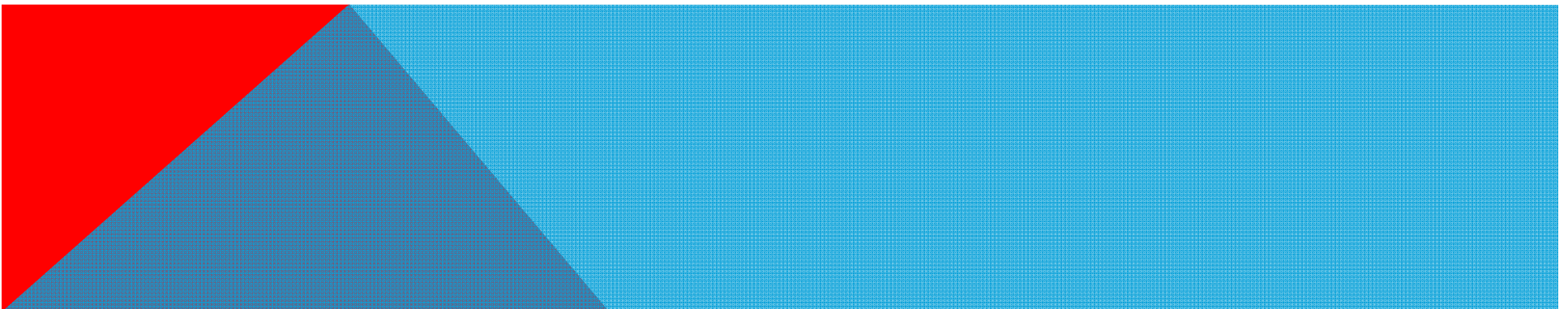
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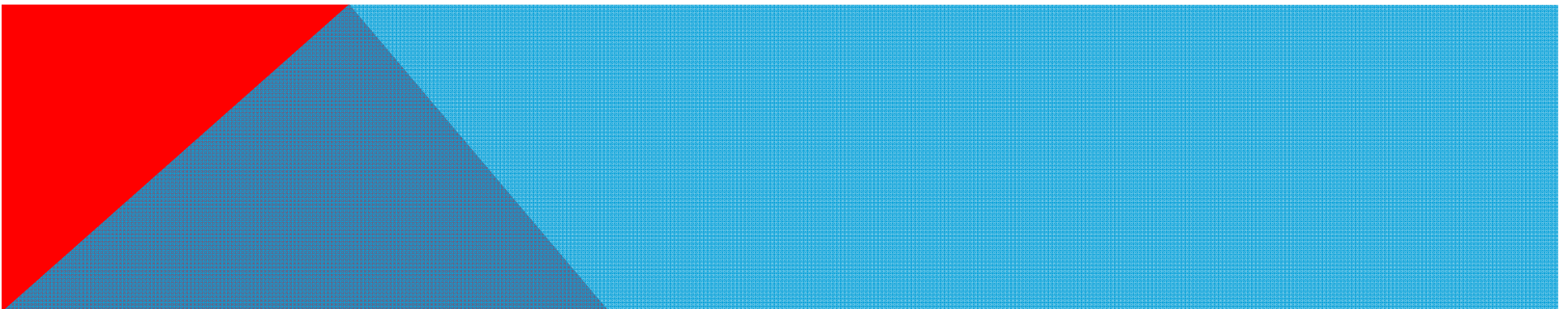
# What is the BSS?

- The Basic Screening Survey is a standardized method developed and maintained by the Association of State and Territorial Dental Directors (ASTDD) to collect oral health indicators. It provides a framework for obtaining oral health data that is inexpensive and easy to implement, yet always consistent.
- Data can then be compared across programs, agencies, and states.



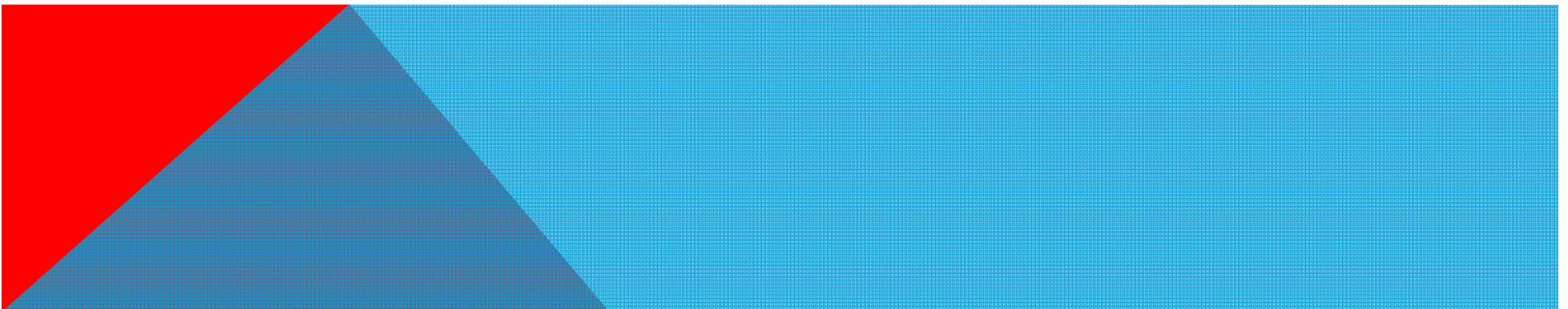
# What is the BSS?

- The BSS has two parts:
  1. Direct observation of a child's mouth, screening (*not an exam*)
  2. Questions asked of, or about, the child being screened
- ASTDD's BSS Children's Manual was last updated in June 2015. *This revision removed the Early Childhood Caries indicator from the BSS methodology.*



# Who should use the BSS?

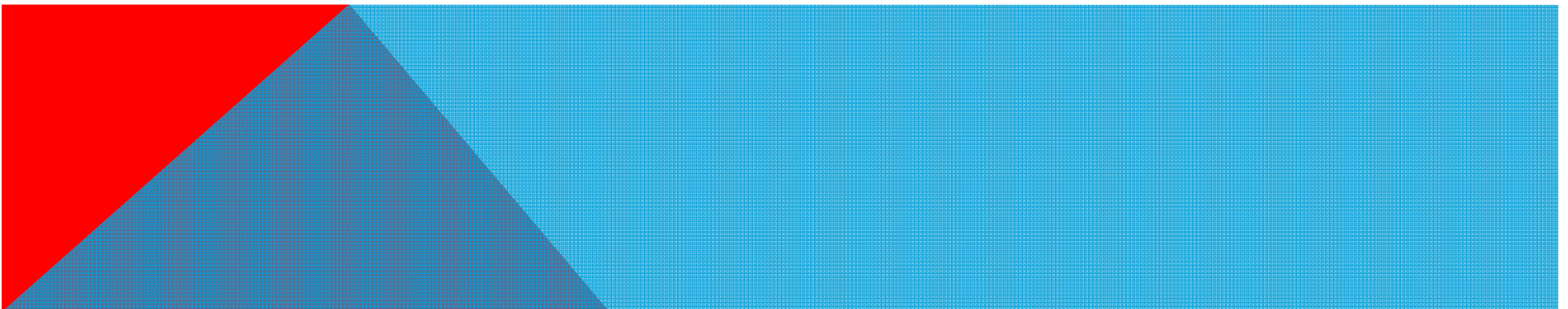
- All Florida School-Based Sealant Programs (S-BSPs) should use the BSS and record indicators in a standardized way (i.e. SEALS).
  - Sealant Action Team SEALS Training:  
<https://media.news.health.ufl.edu/misc/cod-oralhealth/docs/actionteams/sealant/2015-10-19%2009.270HFSEALSTraining.wmv>
- This will allow for data to be compared across:
  - Programs
  - Florida's state-level surveillance projects
  - National estimates





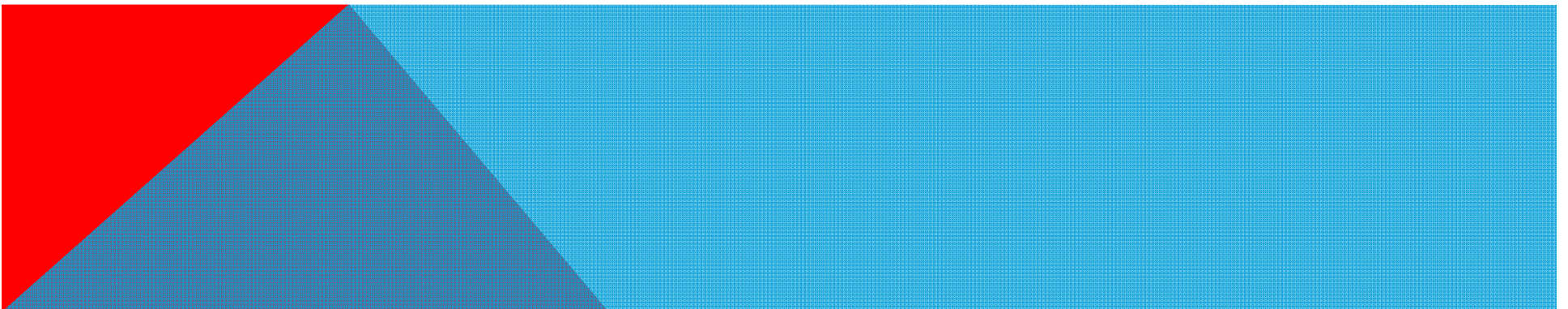
# Who does use the BSS?

- All of Florida's statewide active oral health surveillance activities follow the BSS methodology.
  - [www.flhealth.gov/dental/reports](http://www.flhealth.gov/dental/reports)
- All states submitting oral health surveillance data to the National Oral Health Surveillance System (NOHSS) utilize the BSS methodology.
  - <http://www.cdc.gov/oralhealthdata/overview/nohss.html>



# What indicators are collected?

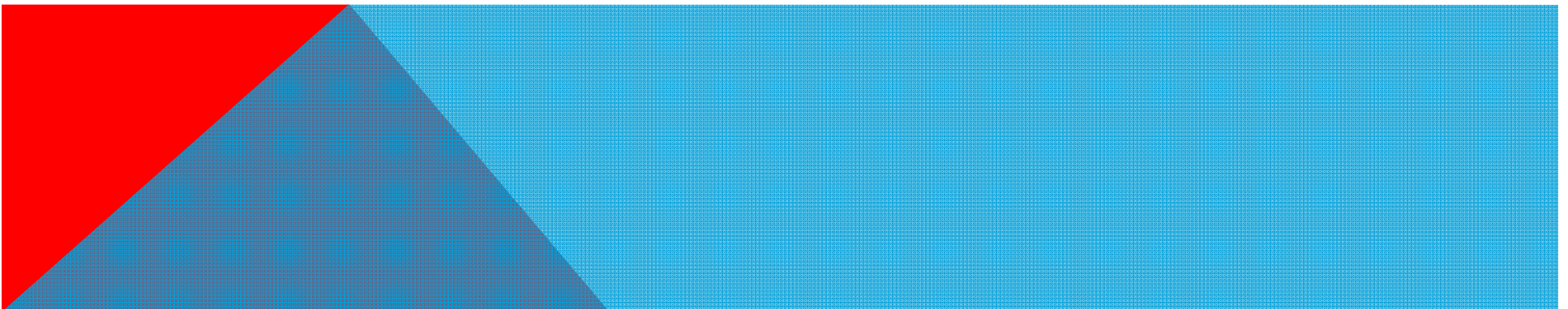
- Depending on the population receiving direct observation (screenings) oral health indicators collected as part of the BSS are:
  1. Untreated Decay (Yes, No)
  2. Treated Decay (Yes, No)
  3. Dental Sealants on Permanent Molars (Yes, No)
  4. Treatment Urgency (None, Early, and Urgent)



# Are all indicators collected for all populations?

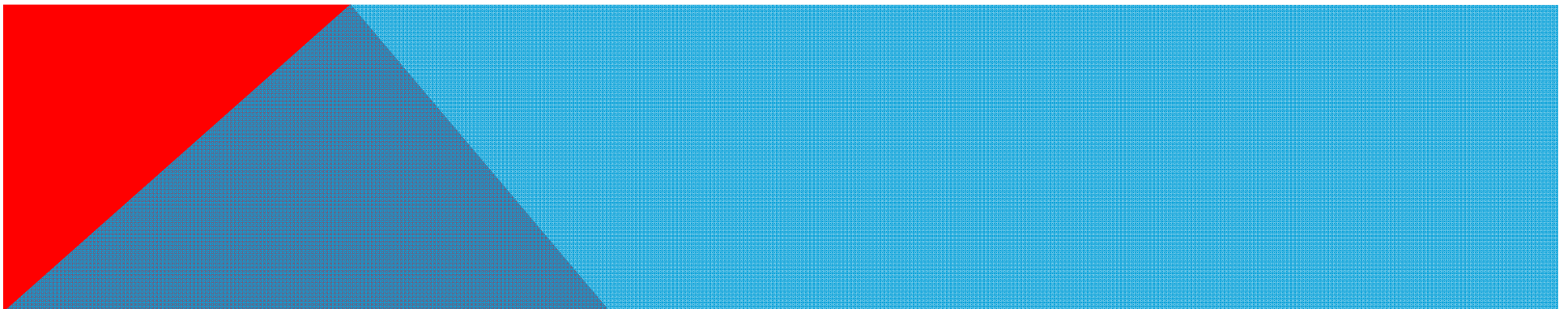
- No, indicators vary for the population served
  - Preschool Aged Children (including Early Head Start and Head Start): Untreated Decay, Treated Decay, and Treatment Urgency\*
  - School Aged Children (Kindergarten to 12<sup>th</sup> Grade): Untreated Decay, Treated Decay, Sealants on Permanent First and Second Molars, and Treatment Urgency

\*ECC was removed with the 2015 update



# Diagnostic Criteria 1: Untreated Decay

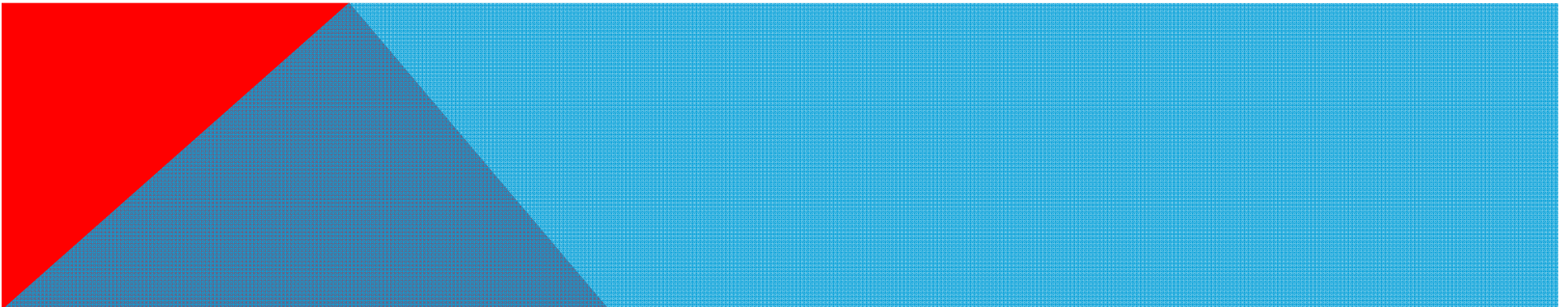
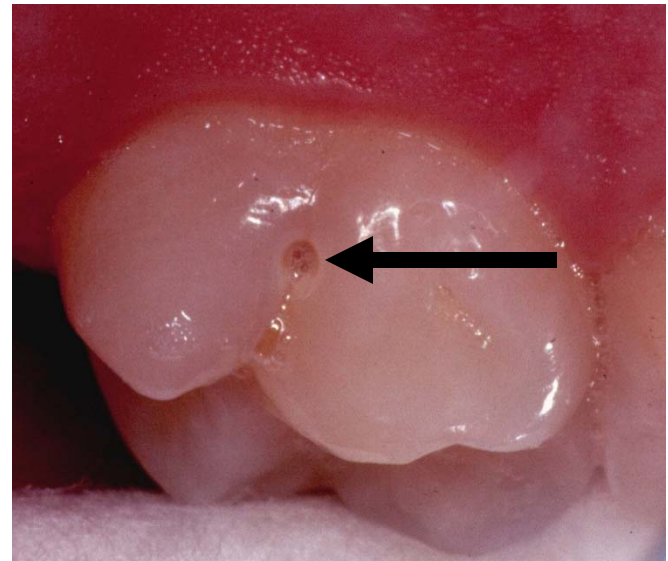
- A measure of untreated disease.
  - Does this child have any cavities that have not been treated?
- Can include both primary & permanent teeth



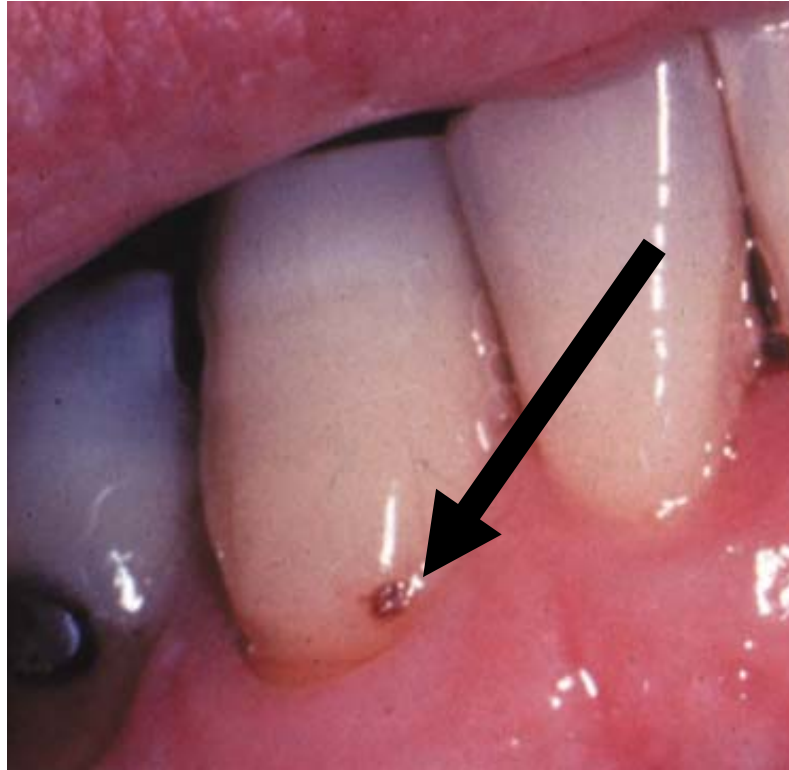


# Definition of Untreated Decay

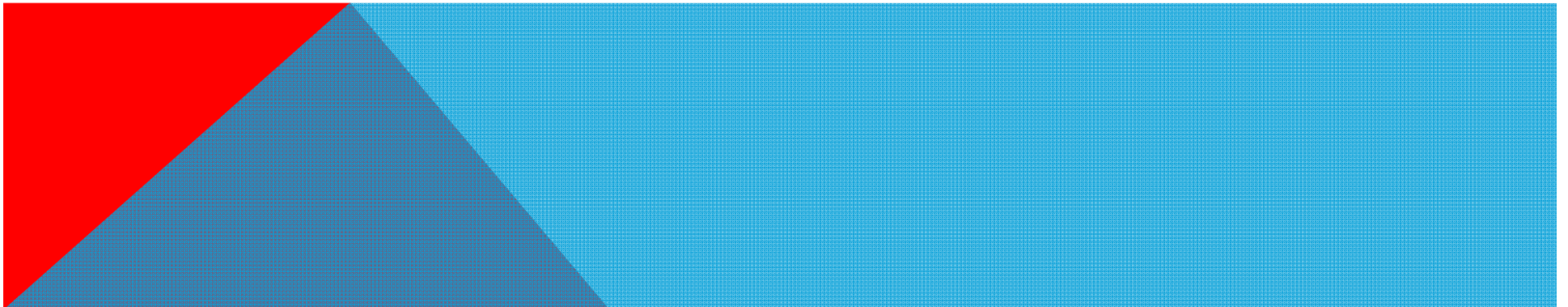
- A tooth is considered to have untreated decay when the screener can readily observe breakdown of the enamel surface.
- In other words, only cavitated lesions are considered to be untreated decay



# Untreated Decay = Yes

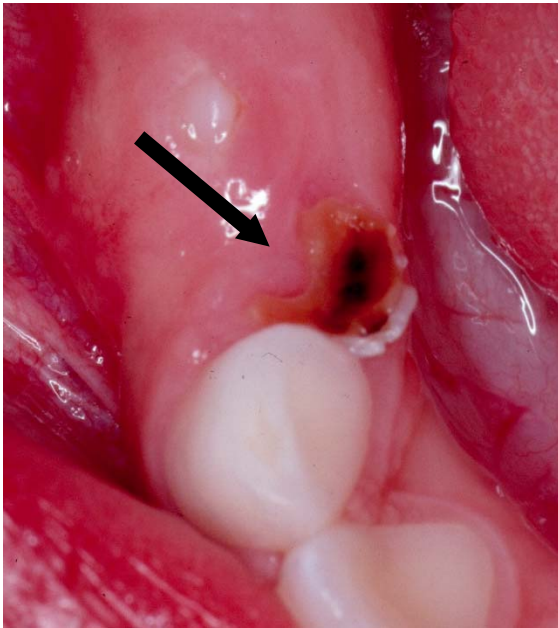


Smooth Surface



# Untreated Decay = Yes

- Retained roots = decay



This child would be classified as having untreated decay.

# Untreated Decay = Yes



Pits & Fissures



# Untreated Decay = No

- Teeth with stained pits & fissures and NO enamel break are considered sound



This tooth has stain but NO enamel break so it is SOUND.

# Untreated Decay = No

- Broken or chipped teeth are considered sound unless a cavity is also present



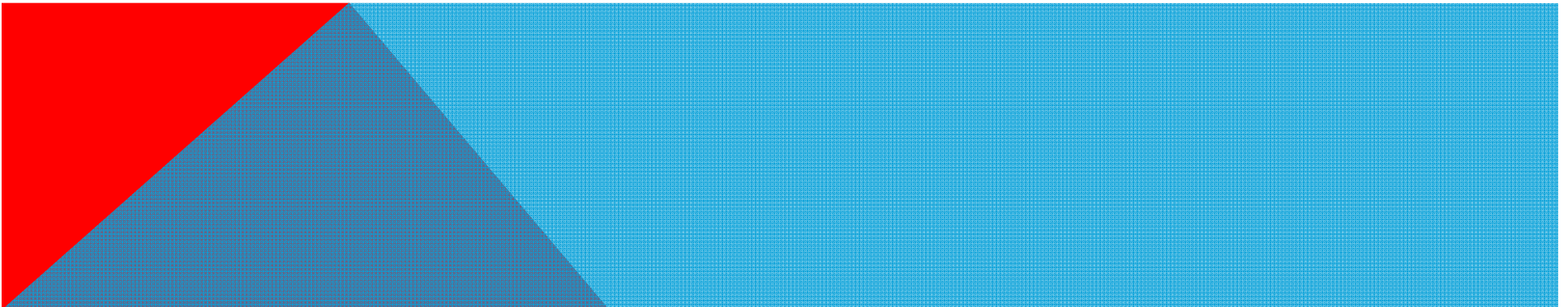
NOT  
Untreated Decay

# Untreated Decay = No

- “White spot” lesions are not untreated decay

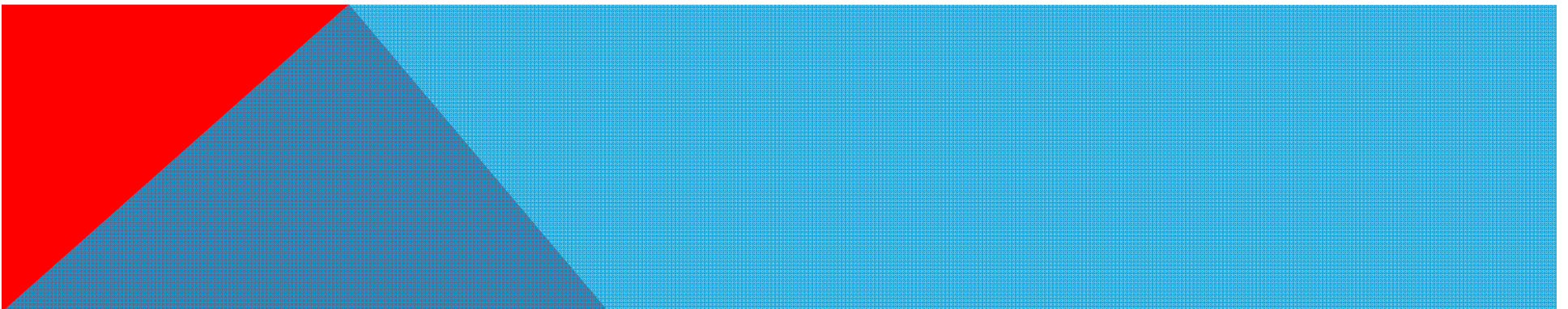


This tooth has “white spots” but no break in the enamel surface.



# Rule of Thumb

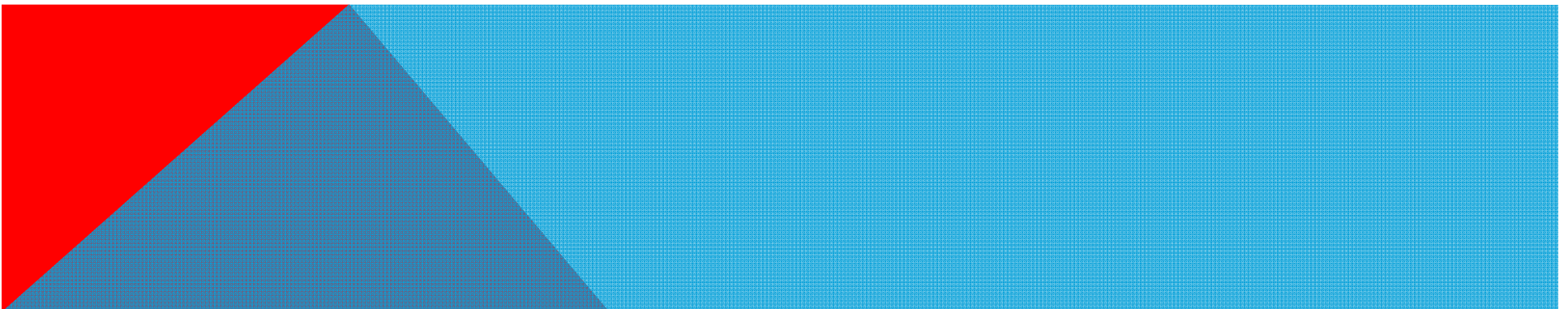
- When in doubt, be conservative.
- That means that if you are not sure if a cavity is present, assume it is not.





# Coding for Untreated Decay

- No untreated decay = 0 (no)
  - Untreated decay = 1 (yes)
  - Missing = 99
- 
- Please note, these codes correspond with CDC's SEALS Excel-based software application.



# Coding for Untreated Decay: SEALS



## SEALS Child-Level Data Collection Form

1. Program Name: \_\_\_\_\_ 2. Event/Site Name: \_\_\_\_\_
3. Patient Name: First \_\_\_\_\_ Last \_\_\_\_\_
4. ID #: \_\_\_\_\_ \*Each child's ID # must be unique for that event; do not use duplicate ID #'s at any one event.
5. Sex: \_\_\_\_\_ (0 = Male, 1 = Female) 6. Grade: \_\_\_\_\_ (0 = Kindergarten) 7. DOB \_\_\_\_\_ 8. Age: \_\_\_\_\_
9. Race/ethnicity (Check all that apply): \_\_\_\_\_ White \_\_\_\_\_ Black/African American \_\_\_\_\_ Asian \_\_\_\_\_ Hispanic  
 \_\_\_\_\_ American Indian/Alaska Native \_\_\_\_\_ Native Hawaiian/Pacific Islander \_\_\_\_\_ Other
10. Special health care needs: \_\_\_\_\_ (0 = No, 1 = Yes) 11. Medicaid/SCHIP status \_\_\_\_\_ (0=Medicaid, 1=SCHIP, 2=neither, 99=unknown)

### I. Screening — D = decay, F = filled, M = missing, S = sealant present, PS = prescribe sealant,

RS = recommend reseat, no mark = no treatment recommended

1	2	3	4	5	12	13	14	15	16	Sealant Prescriber's Signature _____ Date
32	31	30	29	28	21	20	19	18	17	Fluoride Prescriber's Signature _____ Date

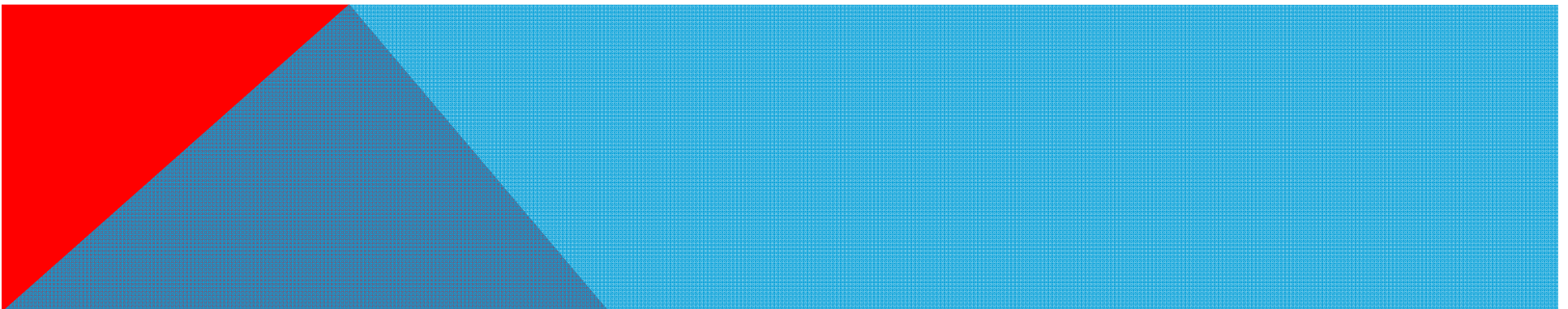
Comments:

12. Untreated Cavities: 0 = No untreated cavities 1 = Untreated cavities present		13. Caries Experience: 0 = No caries experience 1 = Caries experience		14. Sealants Present: 0 = No sealants 1 = Sealants present	
15. Treatment Urgency: 0 = No obvious problem 1 = Early dental care 2 = Urgent care		16. Referred for treatment: 0 = No 1 = Yes		17. Decayed or filled teeth: a. 1 <sup>st</sup> molars b. 2 <sup>nd</sup> molars	

# Diagnostic Criteria 2:

## Treated Decay

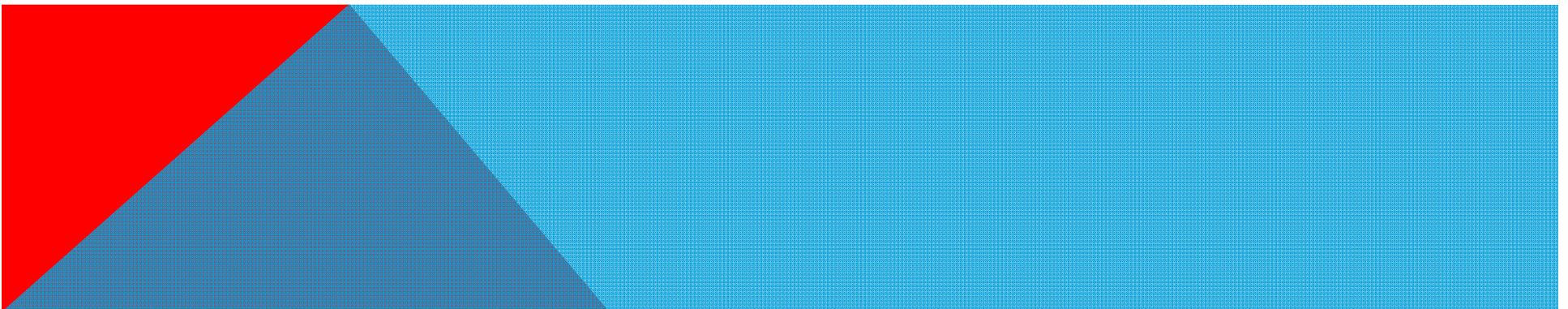
- Does this child have any treated decay?
- Includes:
  - amalgam and/or composite restorations because of decay
  - temporary restorations because of decay
  - crowns because of decay
  - teeth missing because of decay



# Be Aware of Composites!

## Preventive Resin Restoration or Sealant?

It can be difficult to differentiate between a preventive resin restoration (PRR) and a dental sealant. If you can see a preparation under a sealant, code it as treated decay rather than a dental sealant. In other words, preventive resin restorations are considered to be the equivalent of a filling.\*





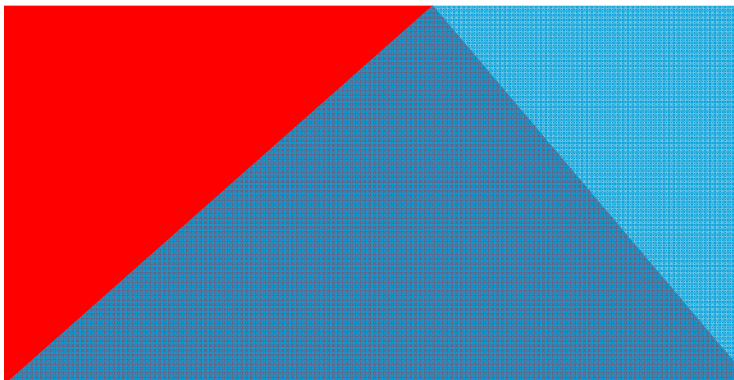
Amalgam  
Fillings



**Treated  
Decay = Yes**

**SAME INDIVIDUAL**

Composite  
Fillings

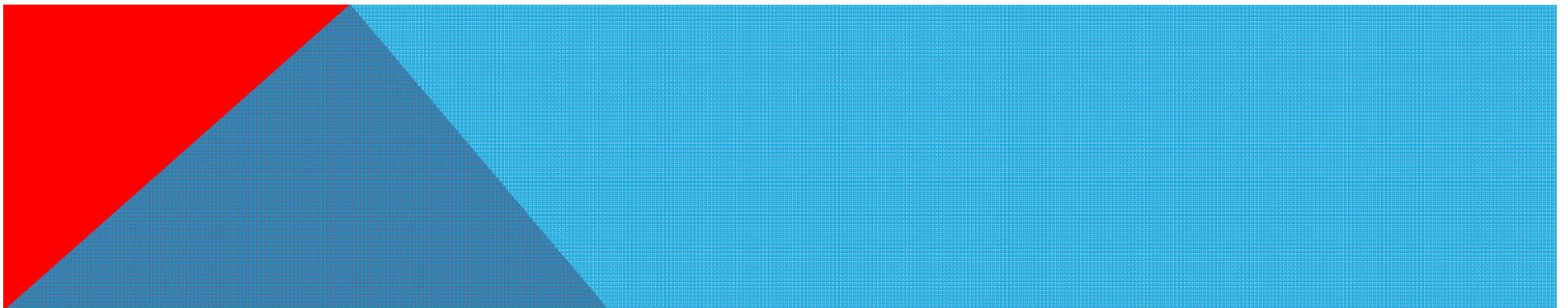


# Treated Decay = No

- Teeth extracted for orthodontics are not treated decay

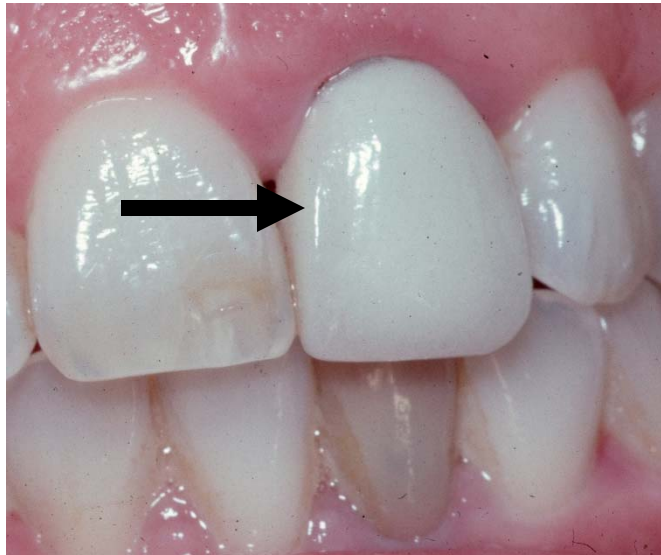


This person has missing premolars because of orthodontics so they do NOT have treated decay.



# Treated Decay = No

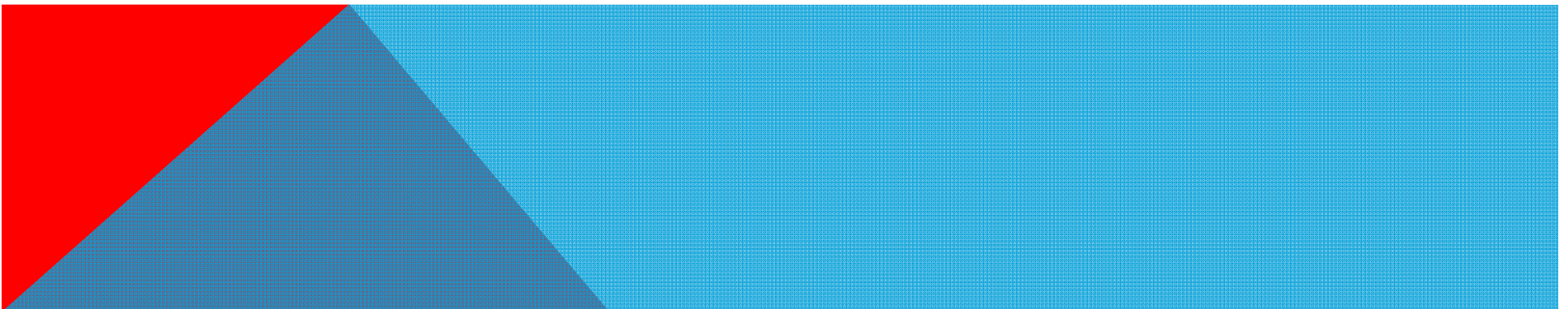
- Crowns placed because of trauma are not treated decay



This person has a crown because of trauma so they do NOT have treated decay.

# Coding for Treated Decay

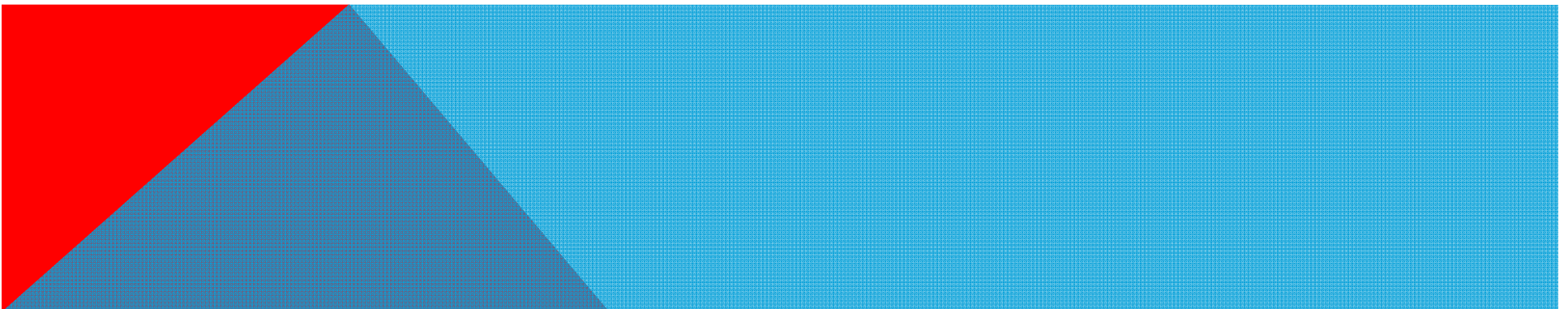
- No treated decay = 0 (no)
- Treated decay = 1 (yes)
- Missing = 99
- Please note, these codes correspond with CDC's SEALS Excel-based software application with a *minor caveat: caries experience*.





# Coding for Caries Experience: SEALS

- What is caries experience?
- Caries experience is defined as the presence of either **untreated or treated** (restored or filled) tooth decay.
- If you marked Yes (1) for Untreated Decay for Question 12, you **will also mark** Yes (1) for Caries Experience for Question 13 in SEALS.
- If you marked No (0) for Untreated Decay for Question 12, you **may also need to mark** Yes (1) for Caries Experience for Question 13 in SEALS if treated decay (filling) is present.



# Caries Experience\*

- Caries experience isn't a separate BSS indicator in and of itself. It is a combination of two BSS indicators: Untreated and Treated Decay.
- If you are using SEALS,
  - Q13: Caries experience means treated or untreated decay in any teeth, not just those charted.
  - Calculation from SEALS data:
    - Caries Experience = Untreated Decay + Treated Decay
    - Treated Decay = Caries Experience – Untreated Decay

*\*For more information, refer to the SEALS Users Manual and Technical Notes*



# Coding for Caries Experience: SEALS



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9. Race/ethnicity (Check all that apply): \_\_\_\_\_ White \_\_\_\_\_ Black/African American \_\_\_\_\_ Asian \_\_\_\_\_ Hispanic  
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10. Special health care needs: \_\_\_\_\_ (0 = No, 1 = Yes) 11. Medicaid/SCHIP status \_\_\_\_\_ (0=Medicaid, 1=SCHIP, 2=neither, 99=unknown)

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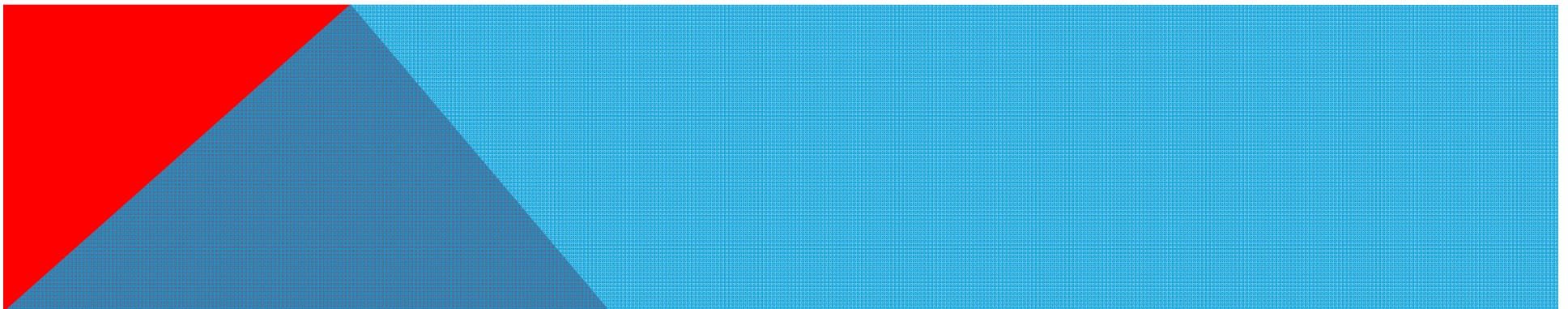
Comments:

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15. Treatment Urgency: 0 = No obvious problem 1 = Early dental care 2 = Urgent care		16. Referred for treatment: 0 = No 1 = Yes		17. Decayed or filled teeth: a. 1 <sup>st</sup> molars      b. 2 <sup>nd</sup> molars <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; width: 40px; height: 20px;"></div> <div style="border: 1px solid black; width: 40px; height: 20px;"></div> </div>	

# Diagnostic Criteria 3:

## Sealants

- The presence of dental sealants is an oral health indicator for children in elementary, middle and high school. *If you are only screening preschool children, do not collect this indicator.*
- *Children will be coded as having sealants if they have at least one sealant on a **permanent molar tooth**, whether or not the sealant covers all or part of the pits or fissures or is partially lost. Do not record sealants on primary teeth.*

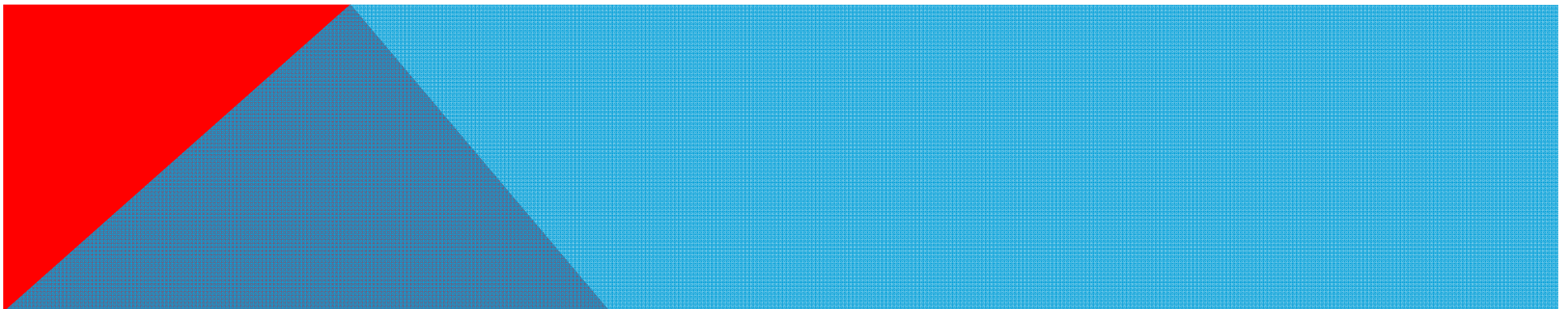




# Diagnostic Criteria 3:

## Sealants

- *Preventive Resin Restoration or Sealant: It can be difficult to differentiate between a preventive resin restoration (PRR) and a dental sealant. If you can see a preparation under a sealant, code it as treated decay rather than a dental sealant. In other words, preventive resin restorations are considered to be the equivalent of a filling.\**



# Dental Sealants = Yes

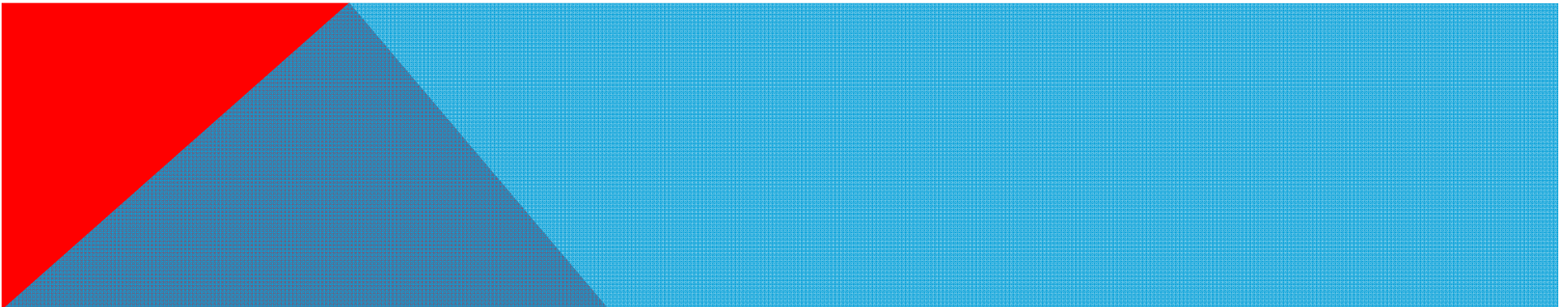
- *Permanent molars only*
- Can lightly “feel” occlusal surface for transparent sealants



Transparent Sealant



Opaque Sealant

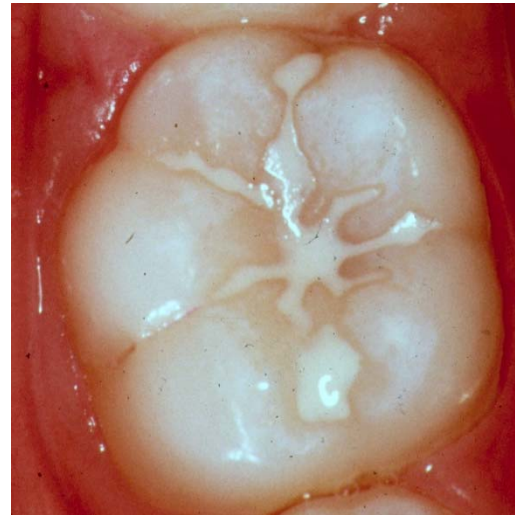


# Dental Sealants = Yes

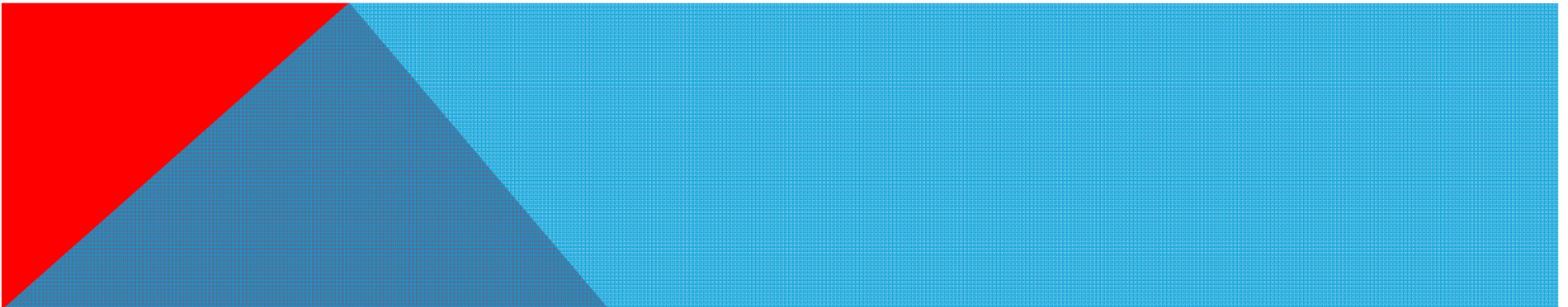
- Include both partially and fully retained sealants



Partially Retained  
Sealant

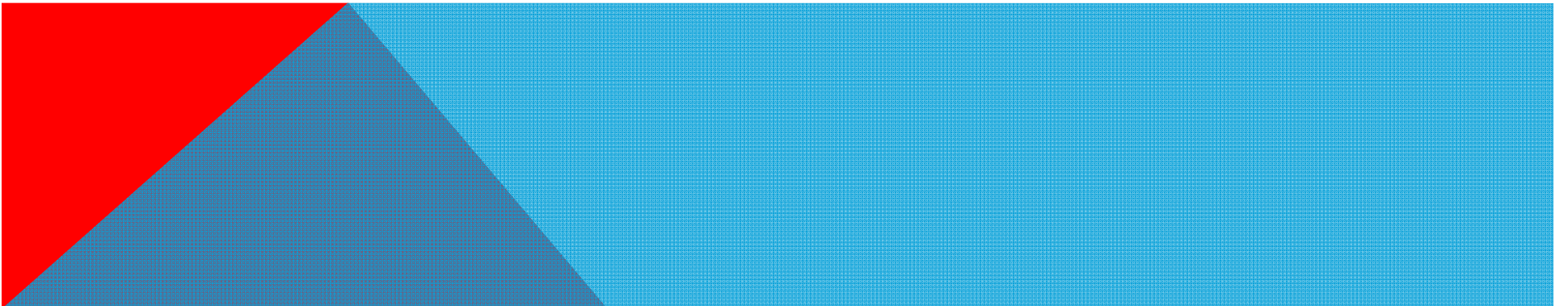


Fully Retained  
Sealant



# Dental Sealants = No

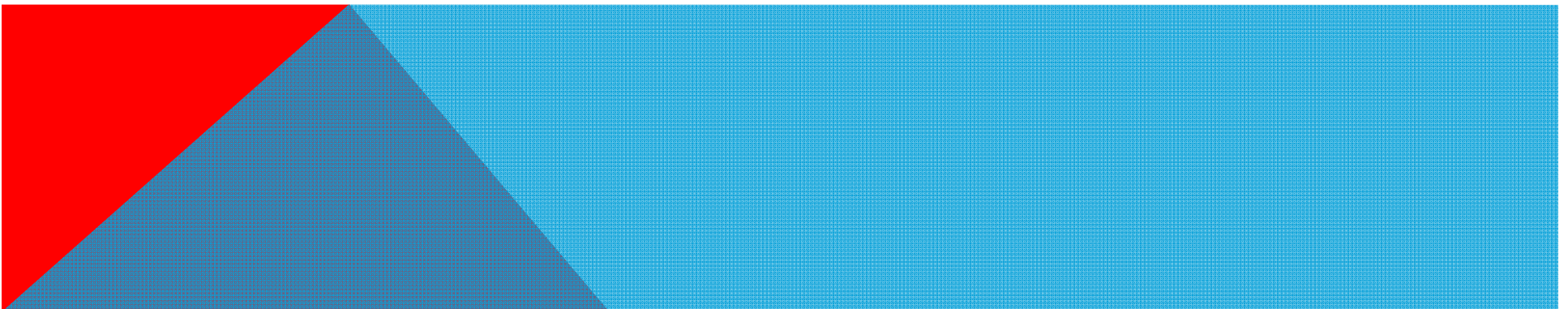
- Composite fillings are not sealants:





# Coding for Dental Sealants

- No sealants = 0 (no)
- Sealants = 1 (yes)
- Missing (unknown) = 99
- Please note, these codes correspond with CDC's SEALS Excel-based software application.



# Coding for Dental Sealants: SEALS



## SEALS Child-Level Data Collection Form

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3. Patient Name: First \_\_\_\_\_ Last \_\_\_\_\_
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9. Race/ethnicity (Check all that apply): \_\_\_\_\_ White \_\_\_\_\_ Black/African American \_\_\_\_\_ Asian \_\_\_\_\_ Hispanic  
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10. Special health care needs: \_\_\_\_\_ (0 = No, 1 = Yes) 11. Medicaid/SCHIP status \_\_\_\_\_ (0=Medicaid, 1=SCHIP, 2=neither, 99=unknown)

### I. Screening – D = decay, F = filled, M = missing, S = sealant present, PS = prescribe sealant, RS = recommend reseal, no mark = no treatment recommended

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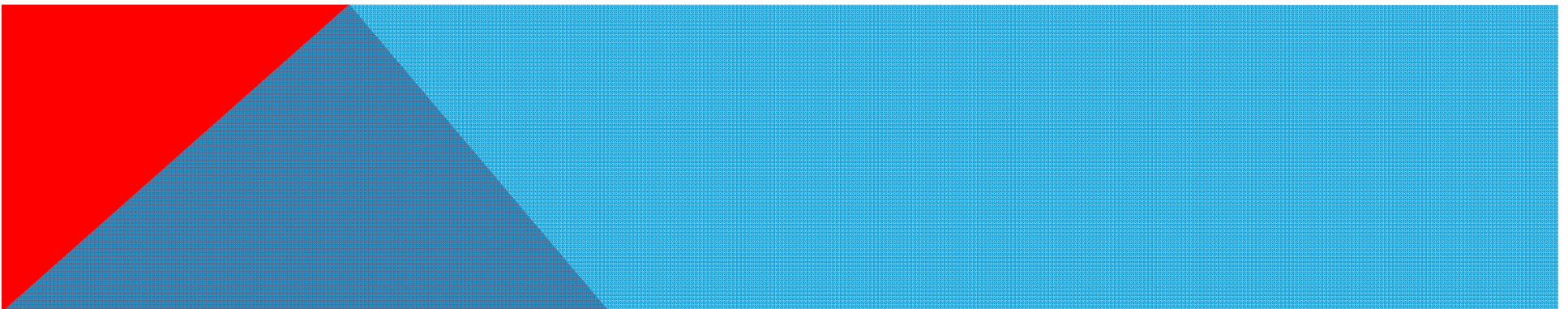
Comments:



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15. Treatment Urgency: 0 = No obvious problem 1 = Early dental care 2 = Urgent care		16. Referred for treatment: 0 = No 1 = Yes		17. Decayed or filled teeth: a. 1 <sup>st</sup> molars b. 2 <sup>nd</sup> molars	

# Diagnostic Criteria 4: Treatment Urgency

- Urgent Dental Care
- Early Dental Care
- No Obvious Problems



# Diagnostic Criteria 4:

## Treatment Urgency

Category	Recommendation for next dental visit	Criteria
Urgent need for dental care	As soon as possible (within 24-48 hours)	Signs or symptoms that include pain, infection, or swelling.
Early dental care needed	Within several weeks or before next regularly scheduled appointment	Caries without accompanying signs or symptoms or children with other oral health problems requiring care before their next routine dental visit
No obvious problems	Next regular checkup	Any patient without below issues/problems



# Diagnostic Criteria 4:

## Treatment Urgency

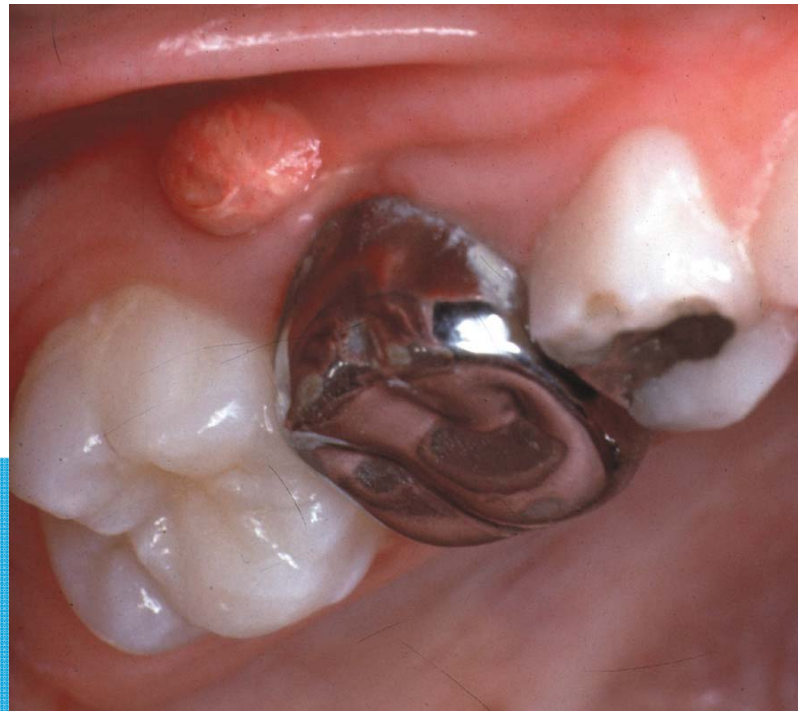
- Urgent Dental Care
  - Urgent need for dental care is used for those who need dental care within 24 to 48 hours because of signs or symptoms that include pain, infection or swelling. In children, the most common reason for being classified as needing urgent care is an abscess.



# Treatment Urgency: Urgent

- Urgent need
  - Needs dental care within 24 to 48 hours because of signs or symptoms that include *pain, infection, or swelling*

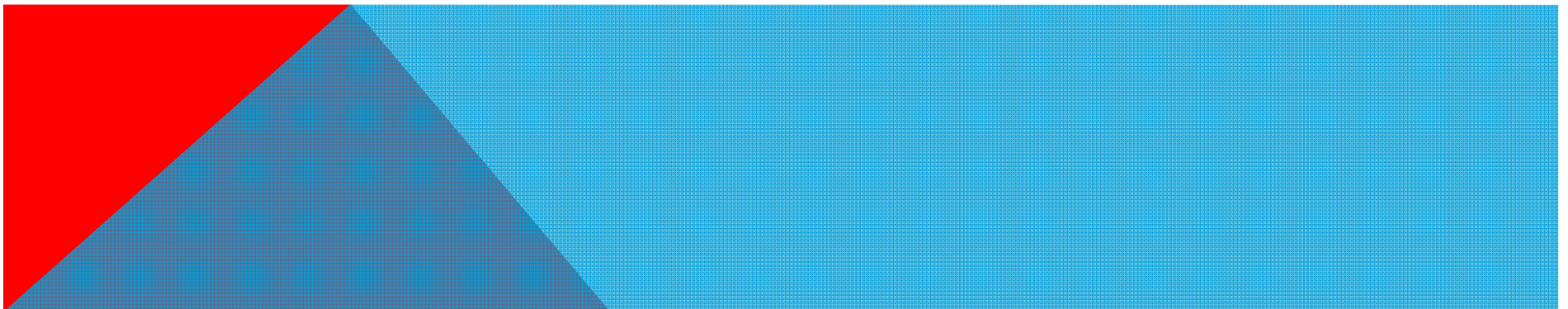
This person has an abscess so they need URGENT care



# Diagnostic Criteria 4:

## Treatment Urgency

- Early Dental Care
  - If someone needs to see a dentist because of untreated decay or a broken filling, but they do not have pain or an infection, they are classified as needing early dental care. For our purposes, early treatment means that they should see a dentist within the next several weeks or before their next regularly scheduled dental appointment. An individual with a broken or missing filling, but no other untreated decay, would be classified as needing early dental care.



# Treatment Urgency: Early

Early dental care : Needs to see a dentist because of untreated decay or broken restorations but they do not have pain or an infection

- Should see a dentist within the next several weeks or before their next regularly scheduled dental appointment



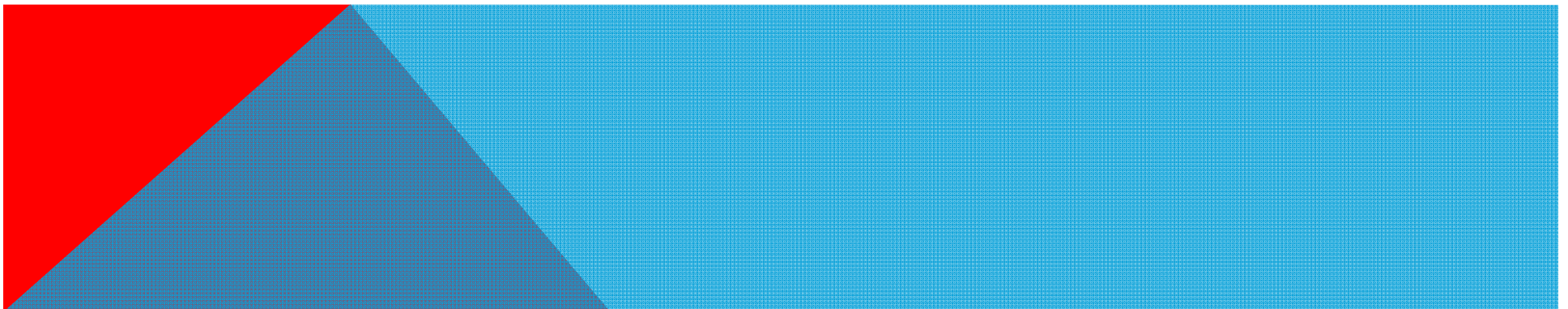
This child needs early dental care



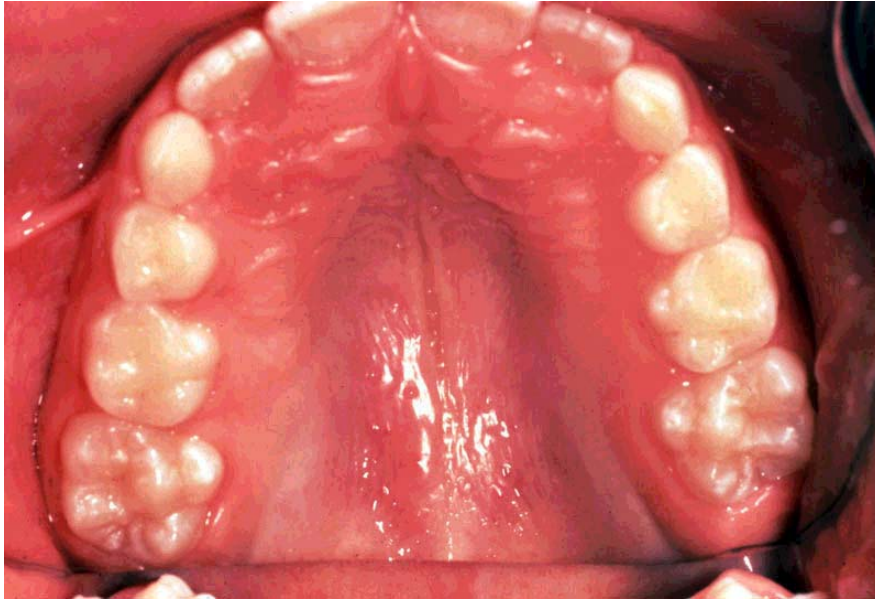
# Diagnostic Criteria 4:

## Treatment Urgency

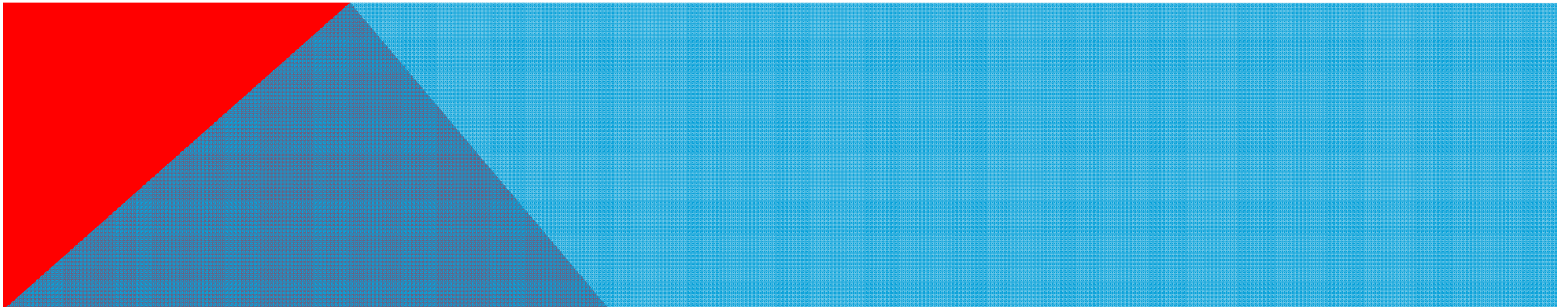
- No Obvious Problems
  - Children with no untreated decay or other dental problems requiring regular preventive dental services or early attention are considered to have no obvious problem, which means that they should receive routine dental checkups.
  - Decay only on primary teeth about to be exfoliated
    - child can have decayed teeth but not need treatment



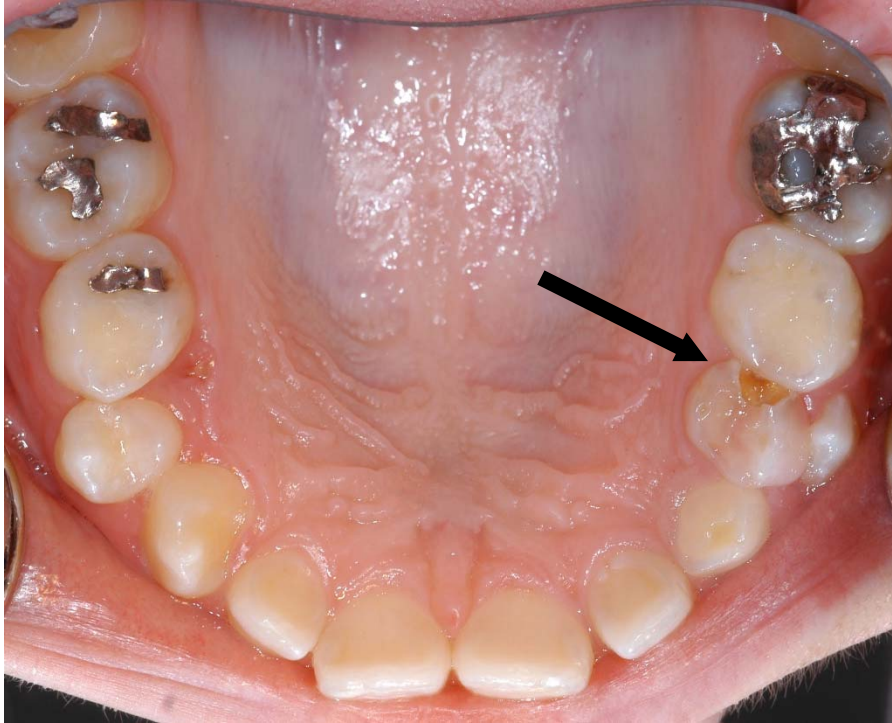
# Treatment Urgency: None



This child has no obvious need for dental care



# Treatment Urgency: None

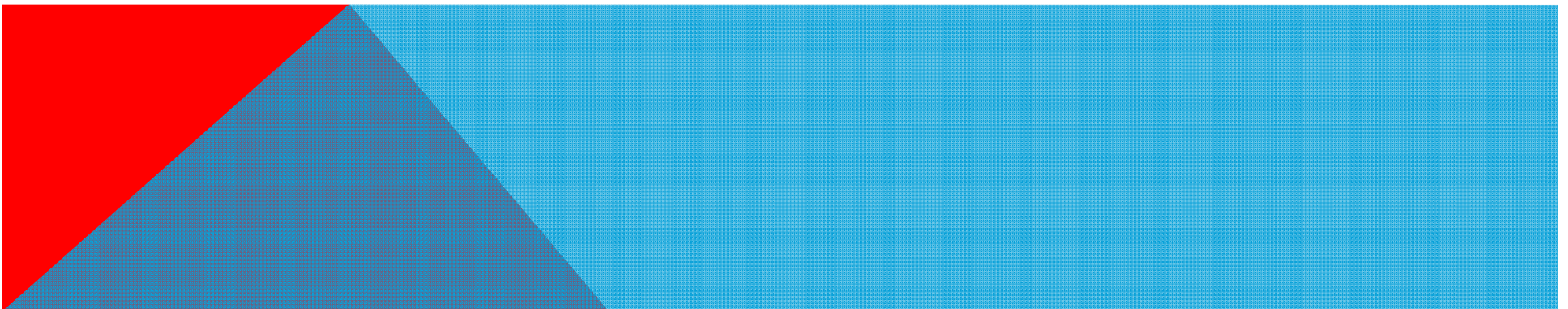


This child has untreated decay but no obvious need for dental care because the decayed tooth is about to exfoliate.

# Coding for Treatment Urgency

- 3 levels based on how soon a child should visit the dentist for a clinical diagnosis and any necessary treatment
  - No obvious problem = 0
  - Early care needed = 1
  - Urgent need = 2
  - Missing = 99

Please note, these codes correspond with CDC's SEALS Excel-based software application.





# Coding for Treatment Urgency: SEALS



## SEALS Child-Level Data Collection Form

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4. ID #\*: \_\_\_\_\_ \*Each child's ID # must be unique for that event; do not use duplicate ID #'s at any one event.
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9. Race/ethnicity (Check all that apply): ☐ White ☐ Black/African American ☐ Asian ☐ Hispanic  
☐ American Indian/Alaska Native ☐ Native Hawaiian/Pacific Islander ☐ Other
10. Special health care needs: \_\_\_\_\_ (0 = No, 1 = Yes) 11. Medicaid/SCHIP status \_\_\_\_\_ (0=Medicaid, 1=SCHIP, 2=neither, 99=unknown)

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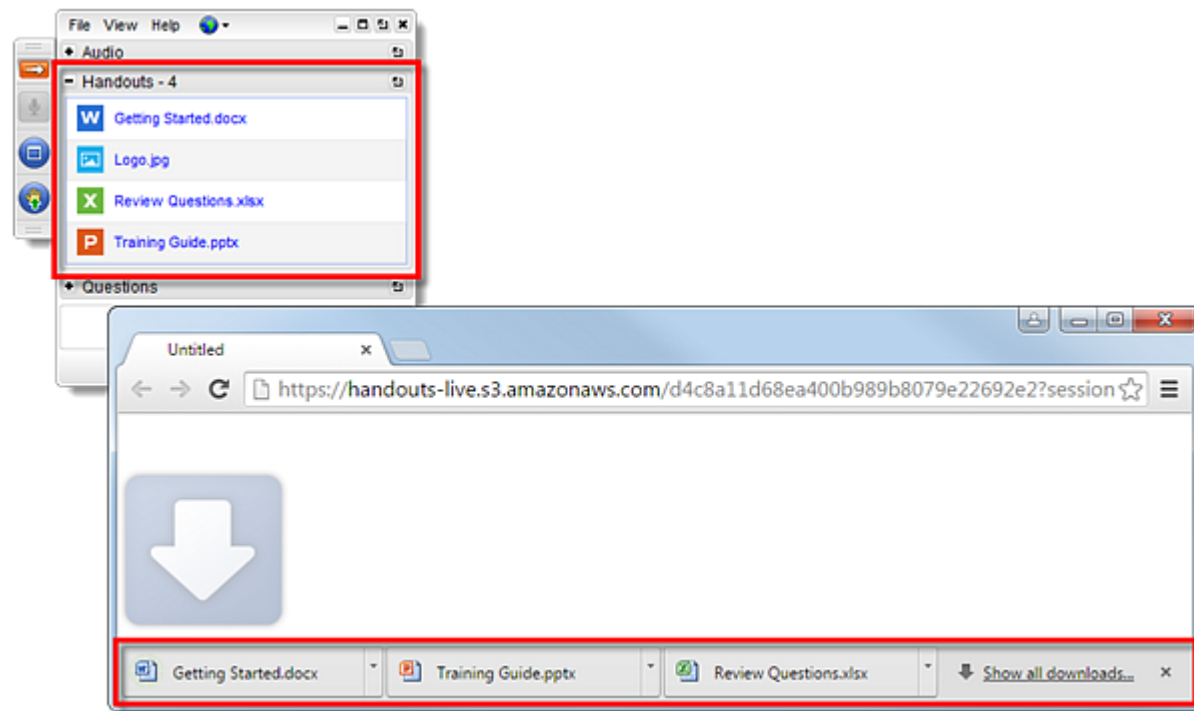
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Comments:

12. Untreated Cavities: 0 = No untreated cavities 1 = Untreated cavities present		13. Caries Experience: 0 = No caries experience 1 = Caries experience		14. Sealants Present: 0 = No sealants 1 = Sealants present	
15. Treatment Urgency: 0 = No obvious problem 1 = Early dental care 2 = Urgent care		16. Referred for treatment: 0 = No 1 = Yes		17. Decayed or filled teeth: a. 1 <sup>st</sup> molars      b. 2 <sup>nd</sup> molars <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; width: 40px; height: 30px;"></div> <div style="border: 1px solid black; width: 40px; height: 30px;"></div> </div>	

# BSS Coding Examples: All Indicators

- Utilize the BSS Coding Example handout included with this Citrix webinar to record your responses to each of the following examples and indicators.
- If you have not done so already, download the BSS Coding Example handout from the Citrix control panel.



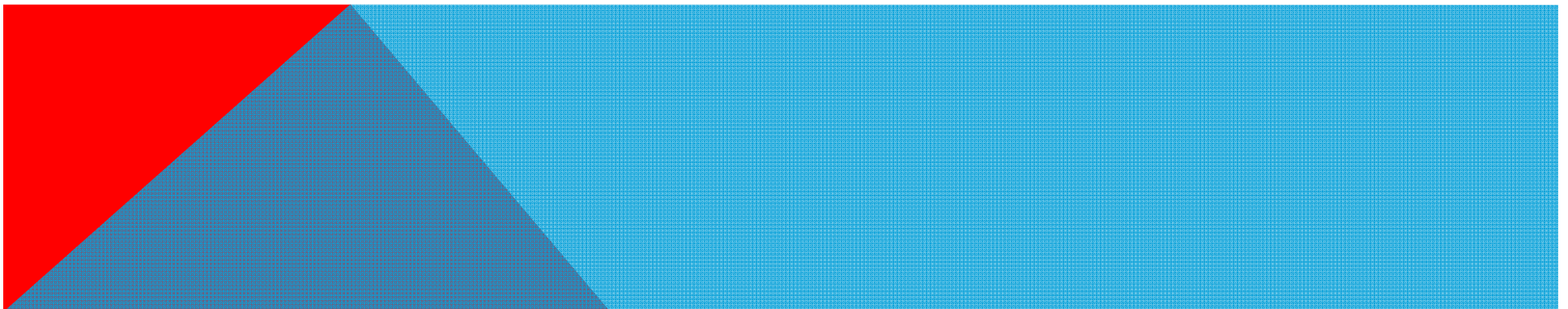
# Coding Example 1

Untreated Decay =

Treated Decay =

Sealants =

Treatment Urgency =



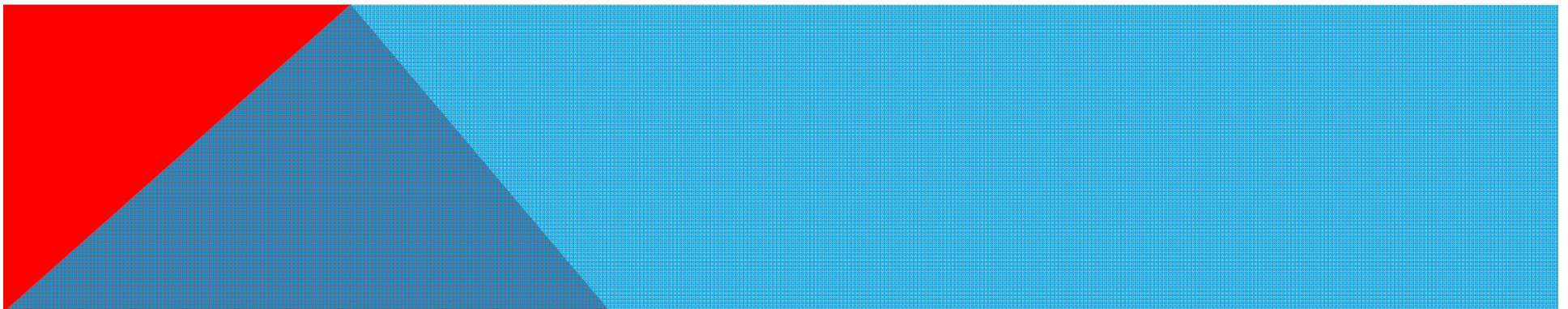
# Coding Example 1

Untreated Decay = 1 (decay on distal of canine)

Treated Decay = 0

Sealants = 0

Treatment Urgency = 1





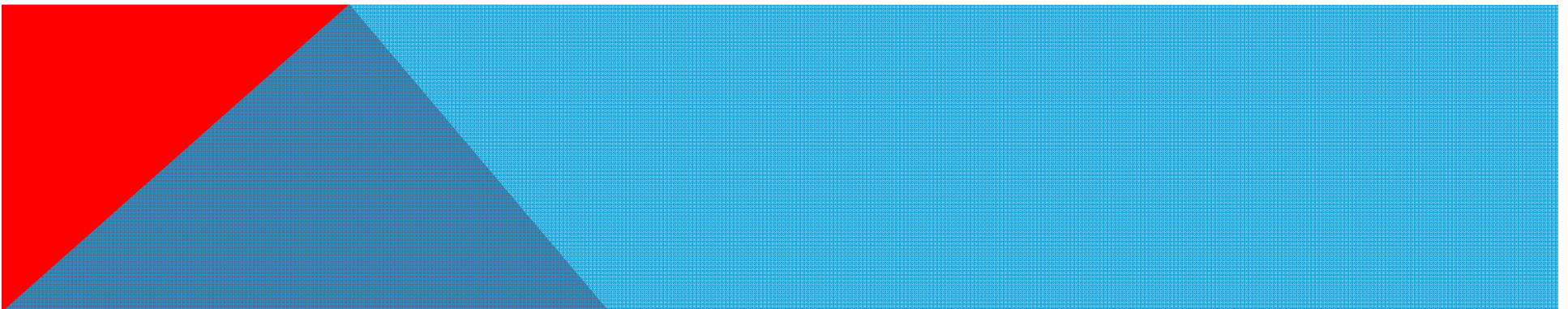
## Coding Example 2

Untreated Decay =

Treated Decay =

Sealants =

Treatment Urgency =



# Coding Example 2

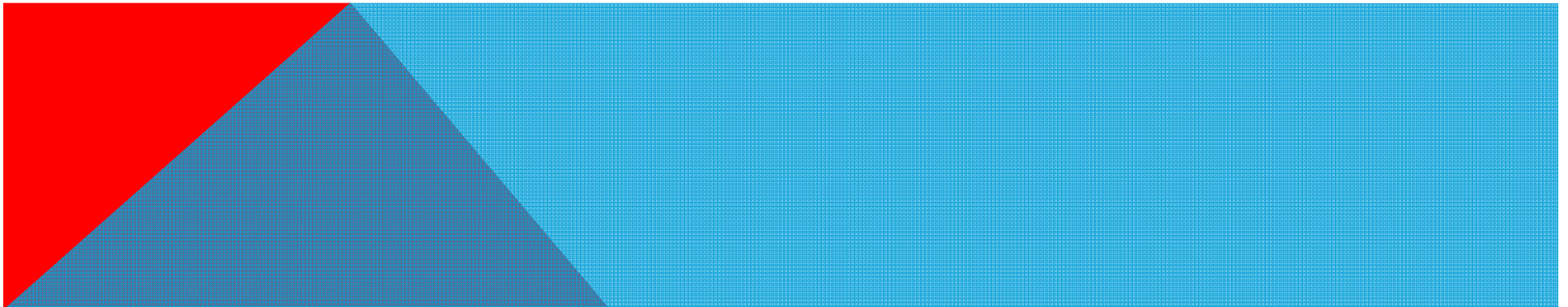
Untreated Decay = 0 (no break in the enamel)

\*Dr. Zapert's Incipient Caries Presentation:  
[http://media.news.health.ufl.edu/misc/cond-oralhealth/docs/conferences/2016OHF/Present/TreatmentIncipientCaries\\_EZapert.pdf](http://media.news.health.ufl.edu/misc/cond-oralhealth/docs/conferences/2016OHF/Present/TreatmentIncipientCaries_EZapert.pdf)

Treated Decay = 0

Sealants = 0

Treatment Urgency = 0



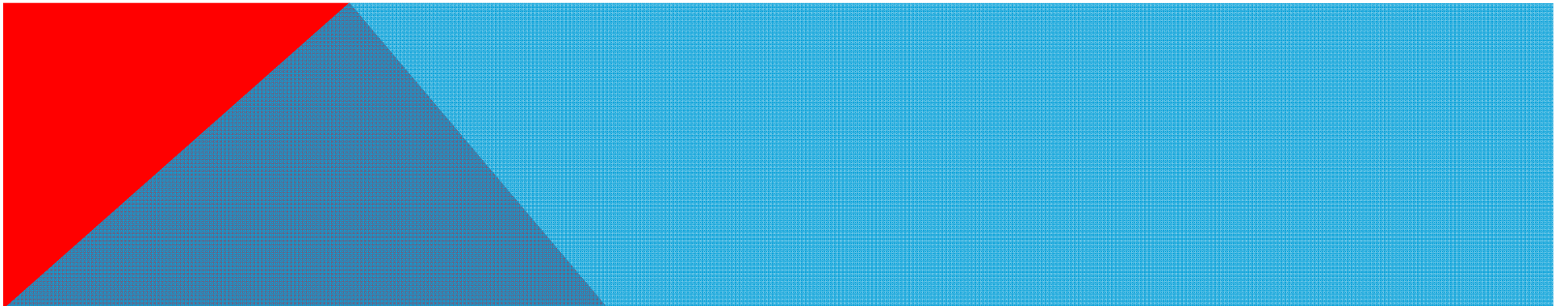
# Coding Example 3

Untreated Decay =

Treated Decay =

Sealants =

Treatment Urgency =





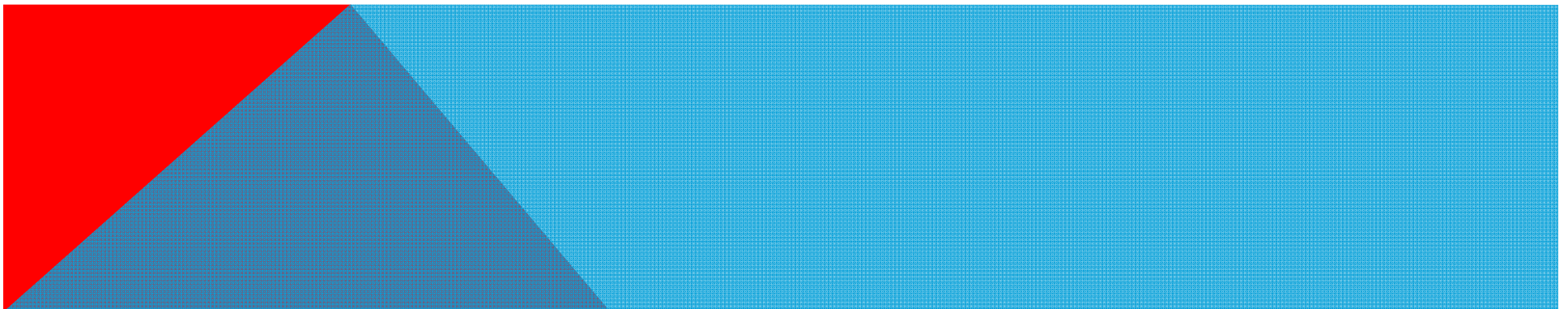
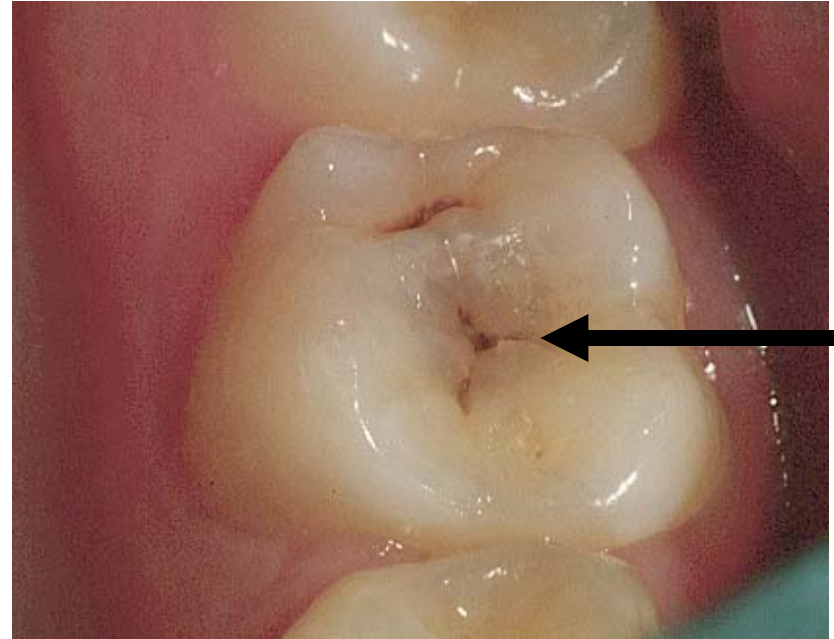
# Coding Example 3

Untreated Decay = 1 (there is a break in the enamel)

Treated Decay = 0

Sealants = 0

Treatment Urgency = 1





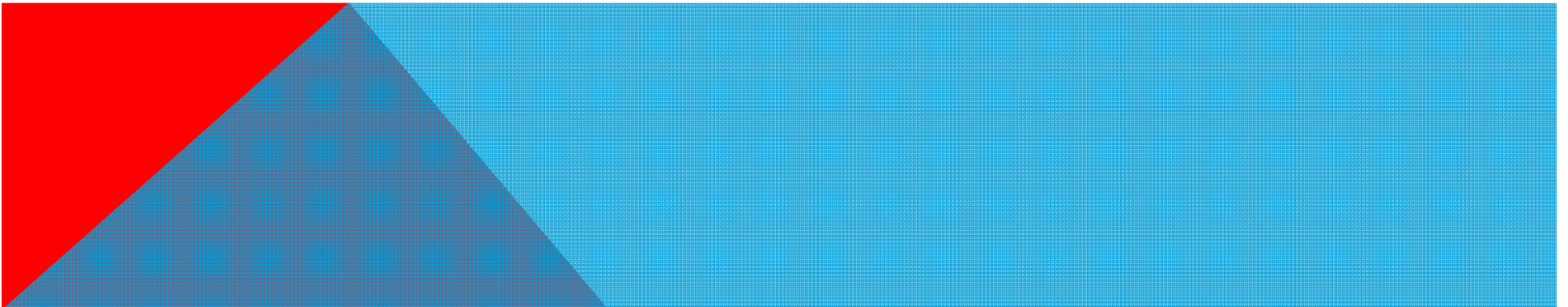
## Coding Example 4



Untreated Decay =

Treated Decay =

Treatment Urgency =



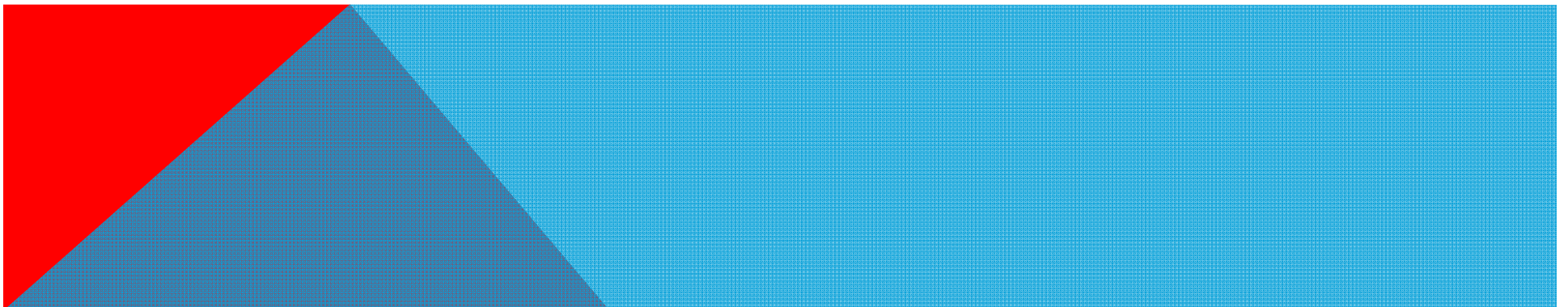
## Coding Example 4



Untreated Decay = 1

Treated Decay = 0

Treatment Urgency = 1 (no pain, swelling or infection)

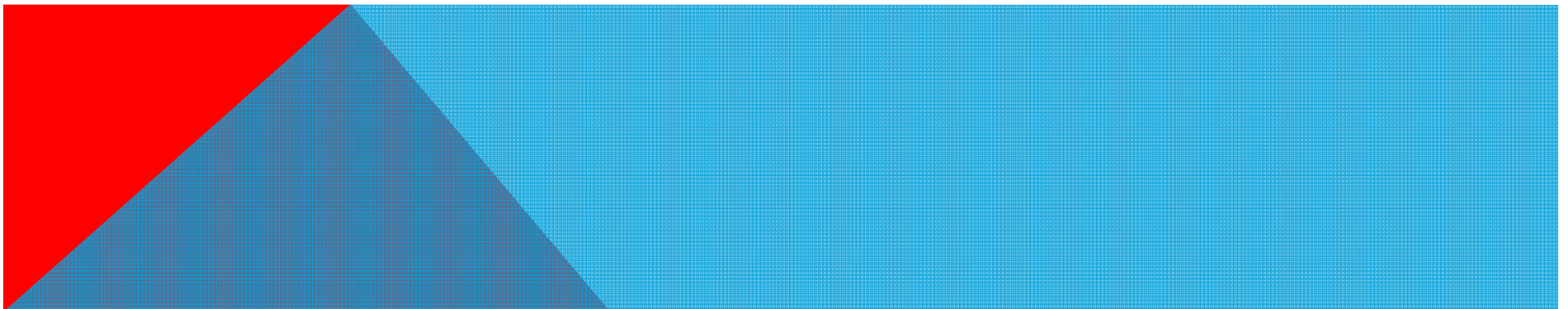


# Coding Example 5

Untreated Decay =

Treated Decay =

Treatment Urgency =



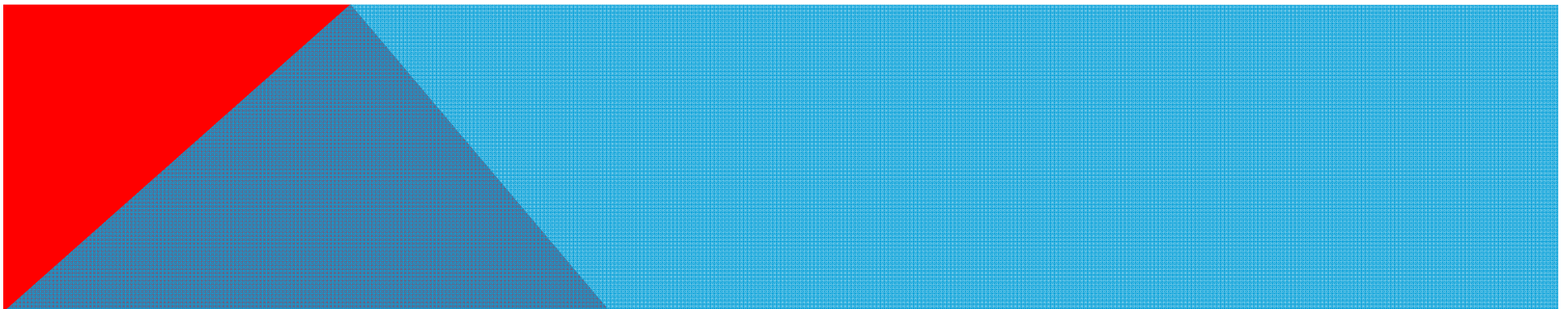


# Coding Example 5

Untreated Decay = 1

Treated Decay = 0

Treatment Urgency = 2  
(abscess)





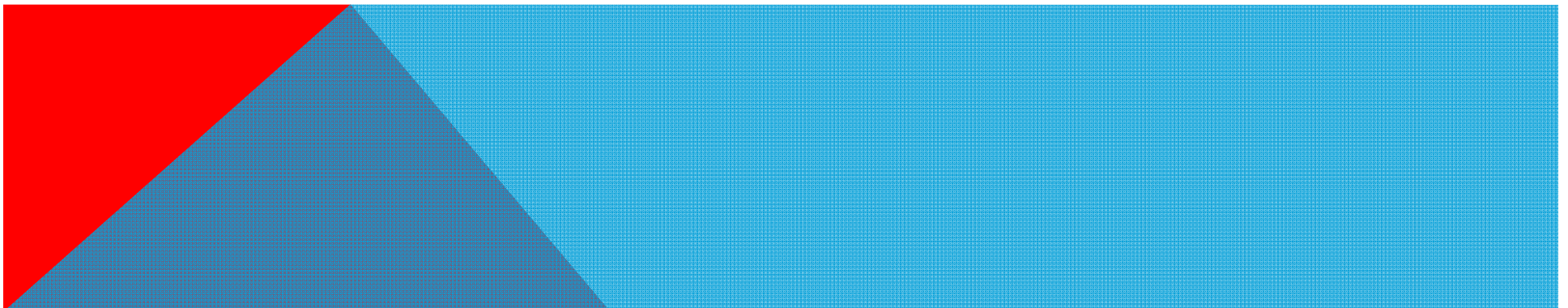
## Coding Example 6



Untreated Decay =

Treated Decay =

Treatment Urgency =



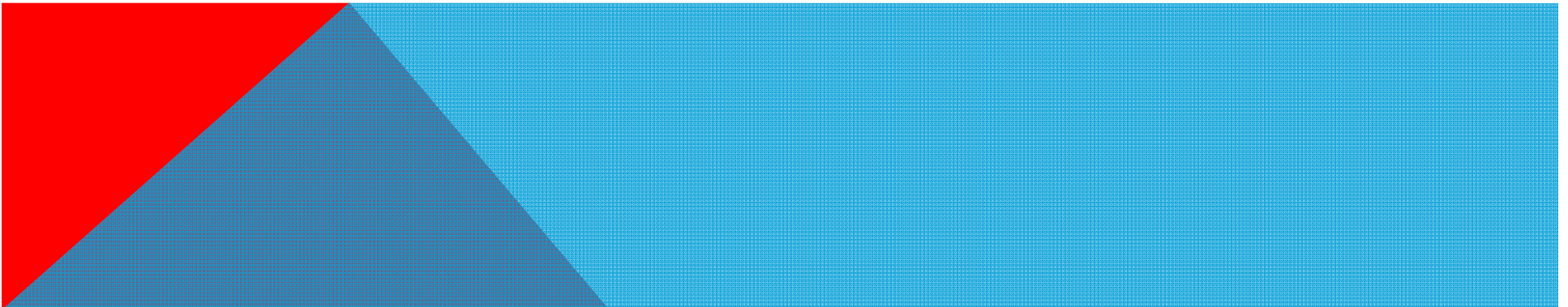
## Coding Example 6



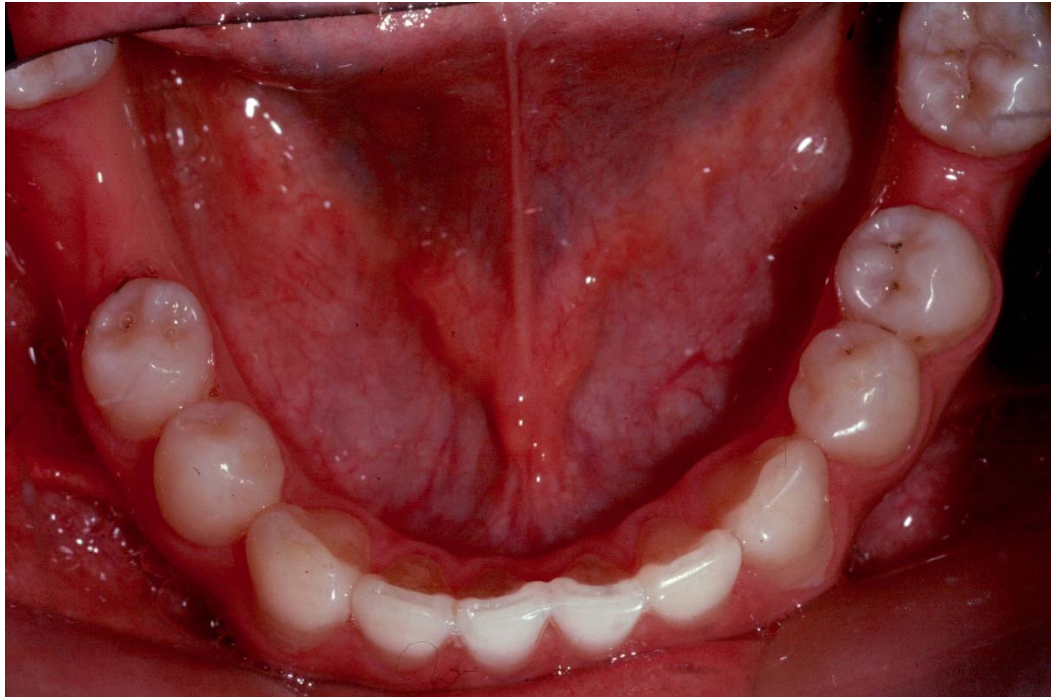
Untreated Decay = 0

Treated Decay = 1 (composite restorations on primary molars)

Treatment Urgency = 0



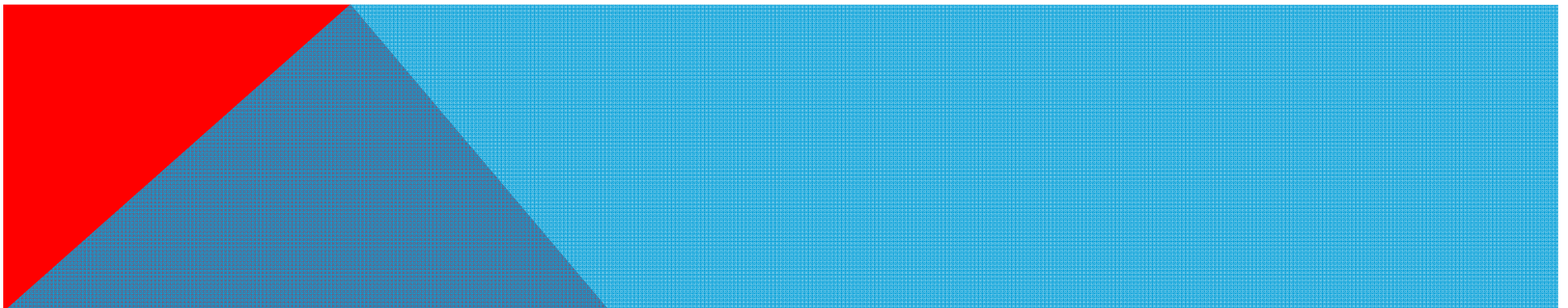
## Coding Example 7



Untreated Decay =

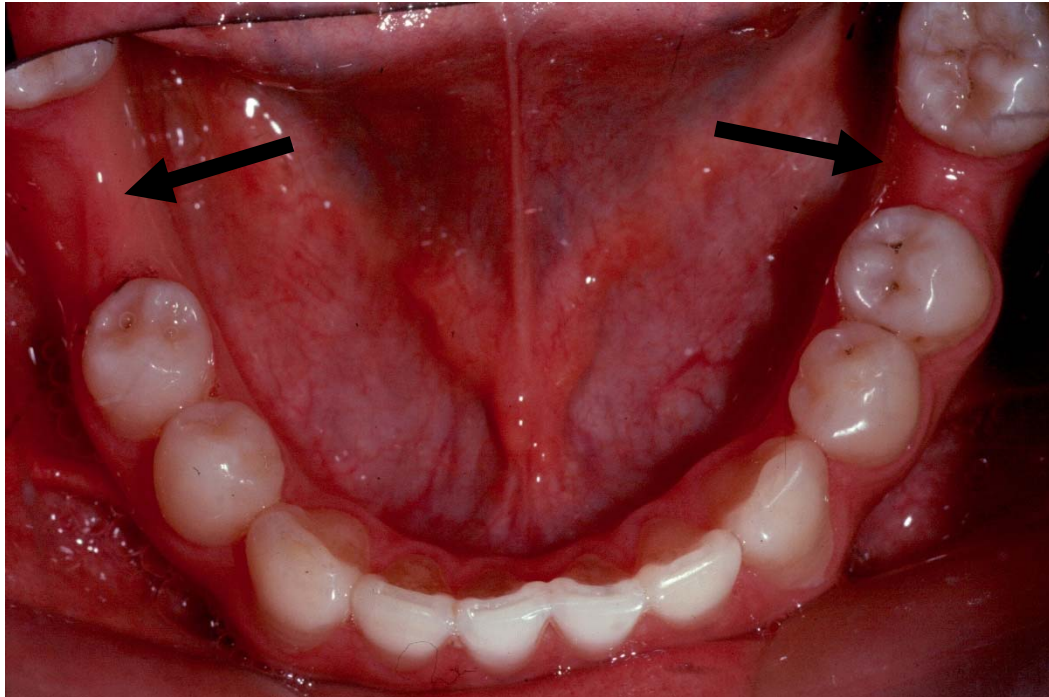
Treated Decay =

Treatment Urgency =





## Coding Example 7



Untreated Decay = 1

Treated Decay = 1 (molars are missing because of decay)

Treatment Urgency = 1



## Coding Example 8

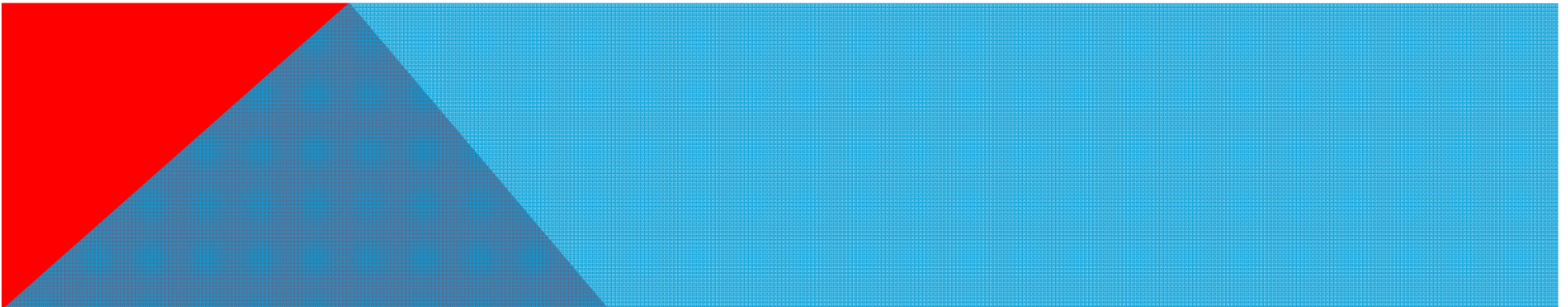


*History: Child fractured tooth in a gymnastics accident. She is in no pain and has no infection.*

Untreated Decay =

Treated Decay =

Treatment Urgency =



## Coding Example 8



*History: Child fractured tooth in a gymnastics accident. She is in no pain and has no infection.*

Untreated Decay = 0 (the tooth is fractured not decayed)

Treated Decay = 0

Treatment Urgency = 1 (no pain or infection)

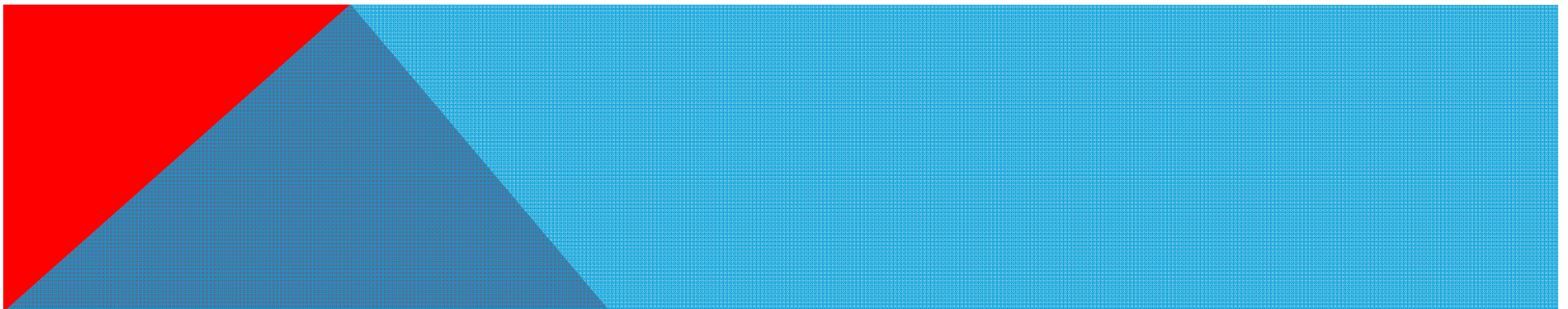
# Coding Example 9

Untreated Decay =

Treated Decay =

Sealants =

Treatment Urgency =





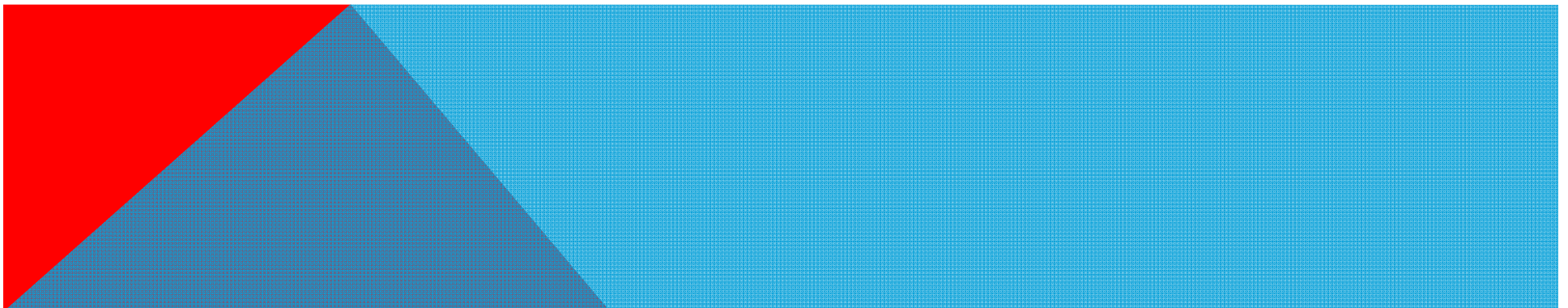
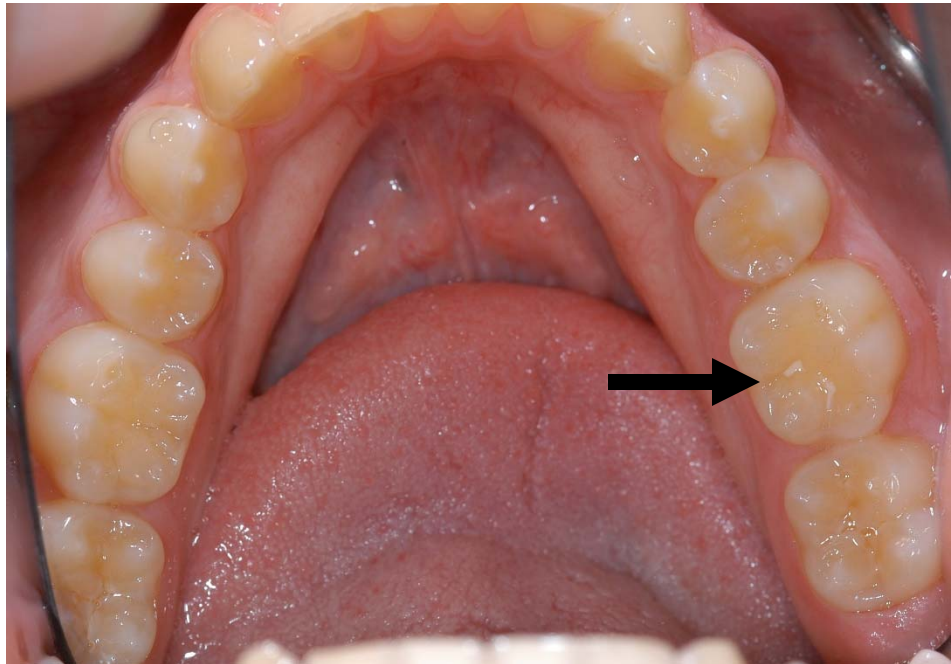
# Coding Example 9

Untreated Decay = 0

Treated Decay = 0

Sealants = 1 (partially retained sealant on 1<sup>st</sup> molar)

Treatment Urgency = 0





# Coding Example 10

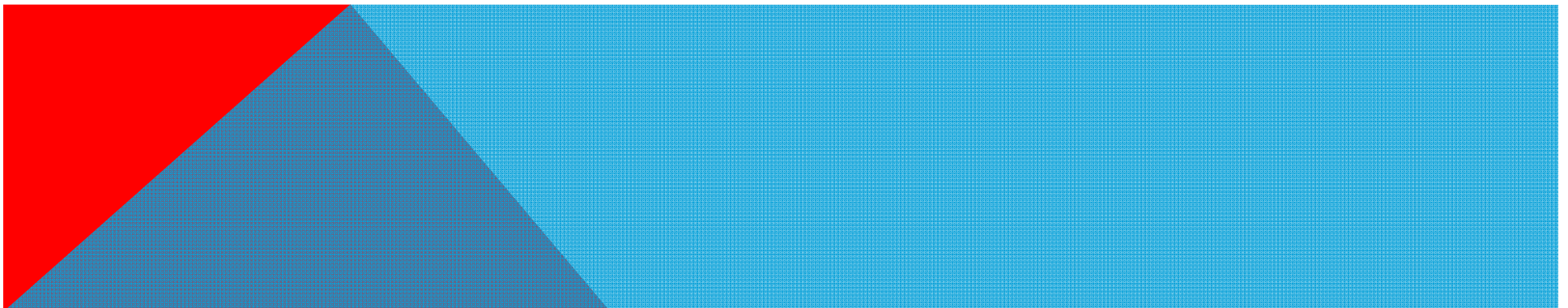


Untreated Decay =

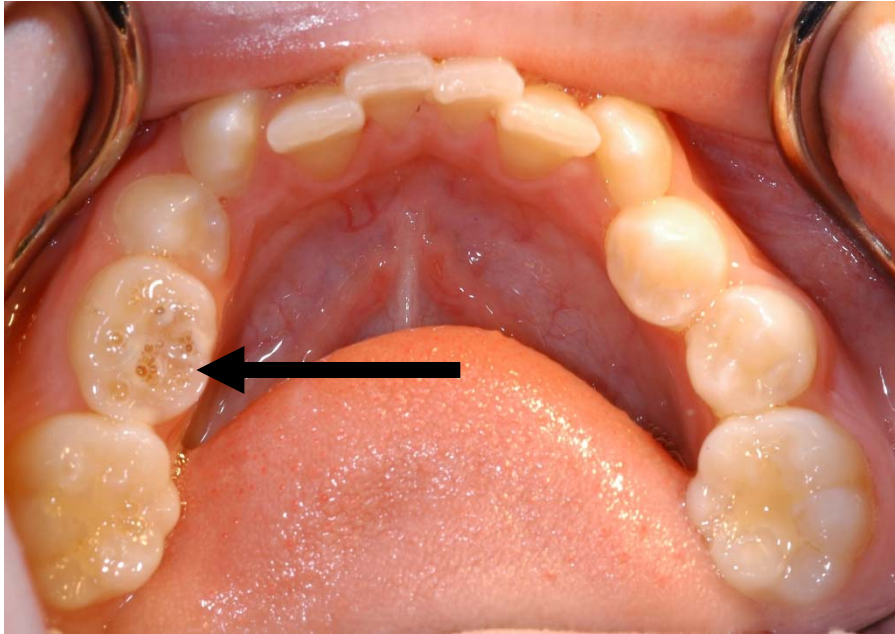
Treated Decay =

Sealants =

Treatment Urgency =



# Coding Example 10



Untreated Decay = 1 (break in enamel on primary molar)

Treated Decay = 0

Sealants = 0

Treatment Urgency = 0 (decayed tooth about to exfoliate)

# Coding Example 11

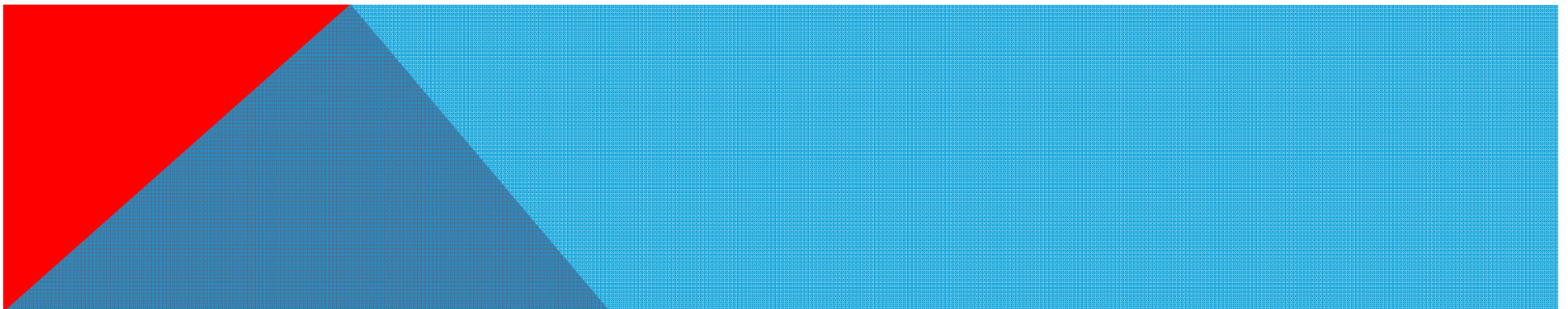


Untreated Decay =

Treated Decay =

Sealants =

Treatment Urgency =





# Coding Example 11



Untreated Decay = 0

Treated Decay = 1

Sealants = 0

Treatment Urgency = 1 (broken filling)



## Coding Example 12

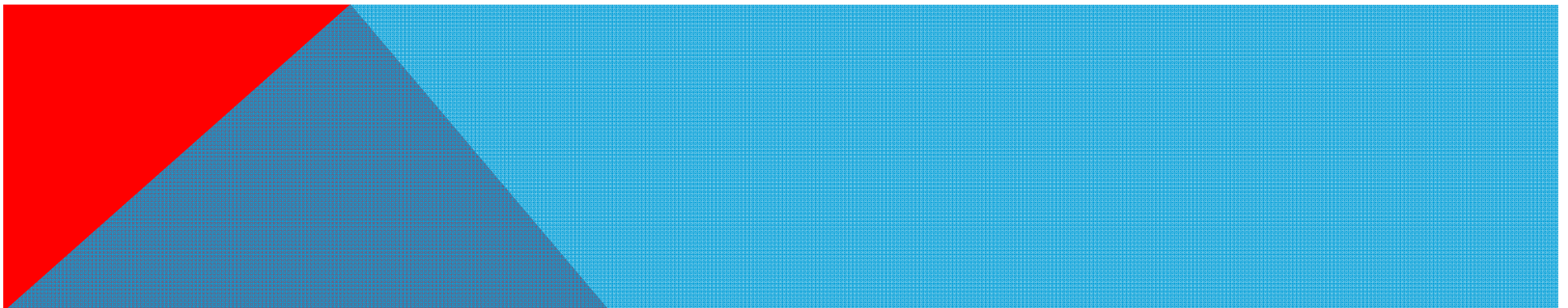


Untreated Decay =

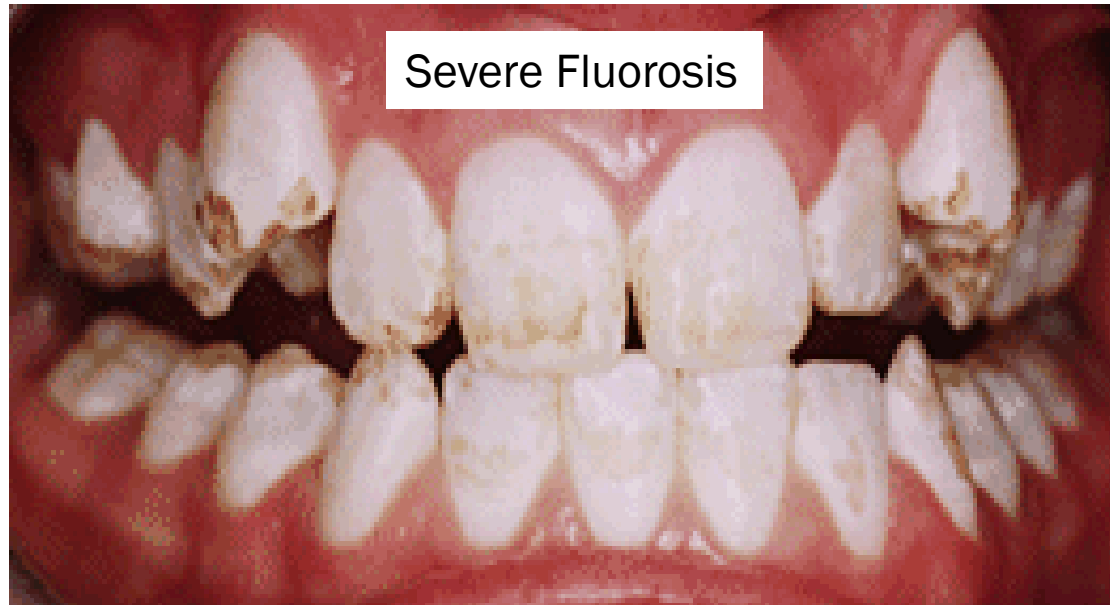
Treated Decay =

Sealants =

Treatment Urgency =



# Coding Example 12



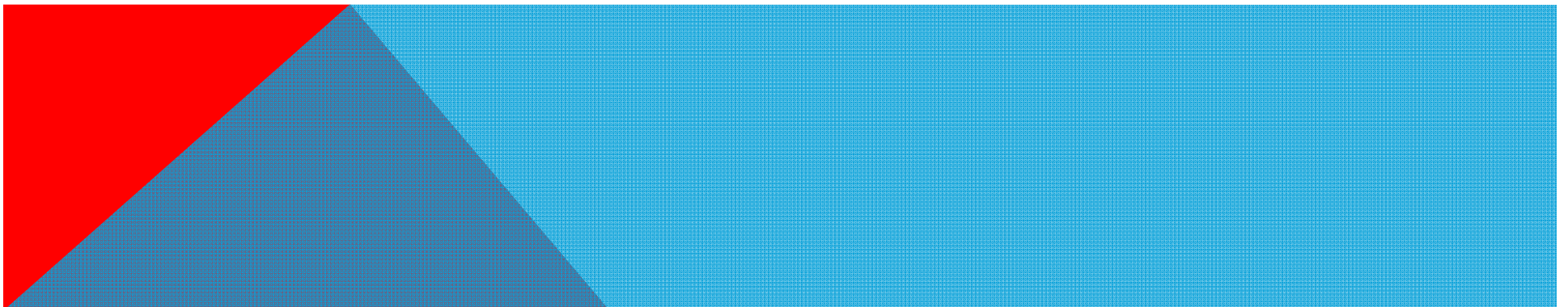
Untreated Decay = 0

Treated Decay = 0

Sealants = 0

Treatment Urgency = 0

*\*Severe fluorosis is not from Community Water Fluoridation*



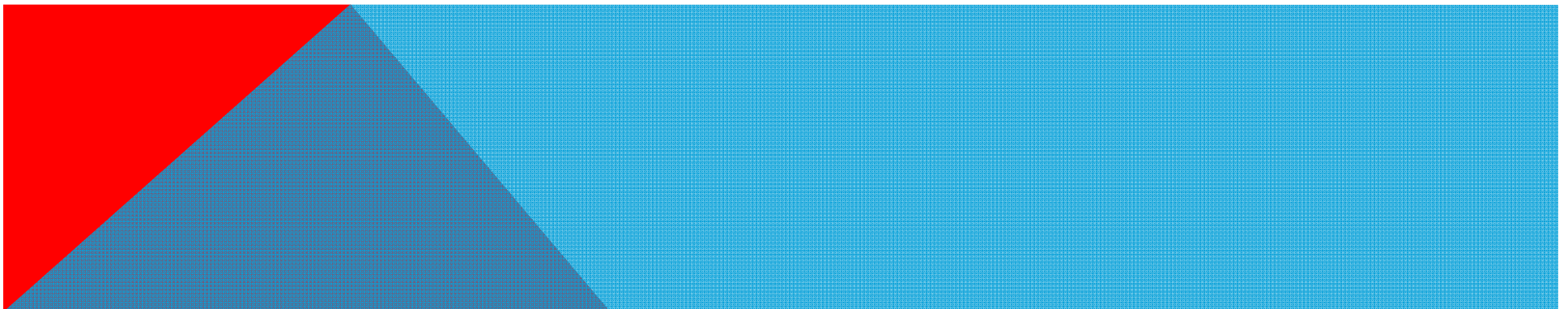
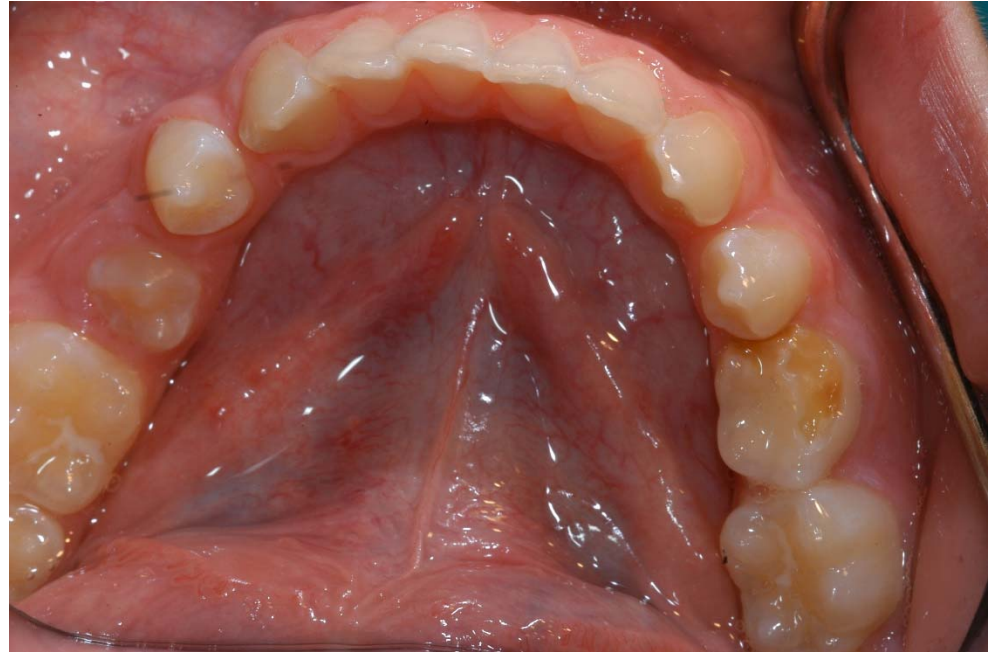
# Coding Example 13

Untreated Decay =

Treated Decay =

Sealants =

Treatment Urgency =



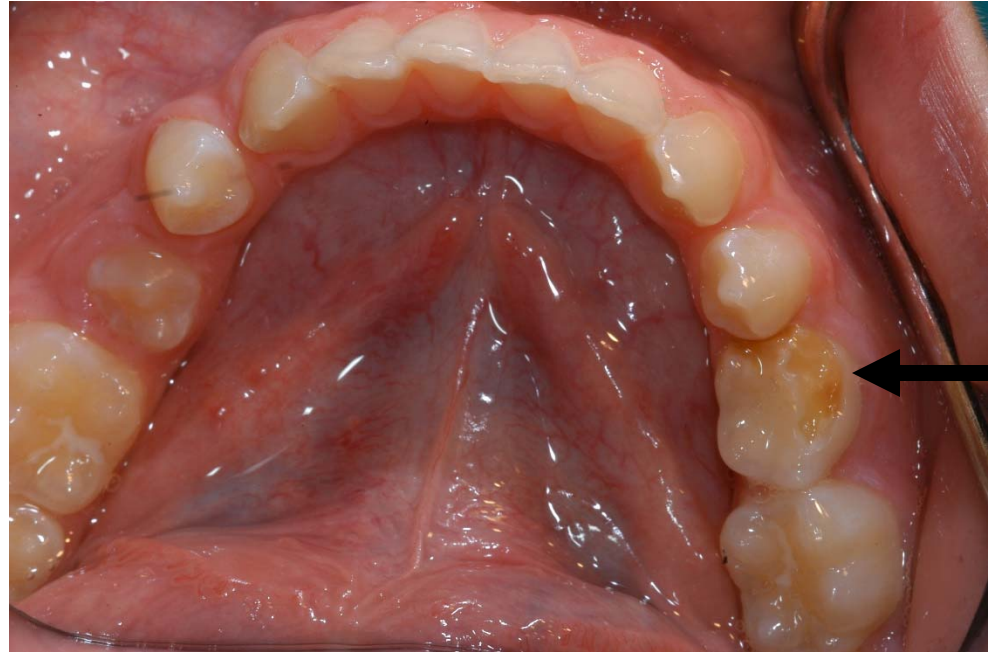
# Coding Example 13

Untreated Decay = 0 (primary molar has enamel hypoplasia)

Treated Decay = 0

Sealants = 1

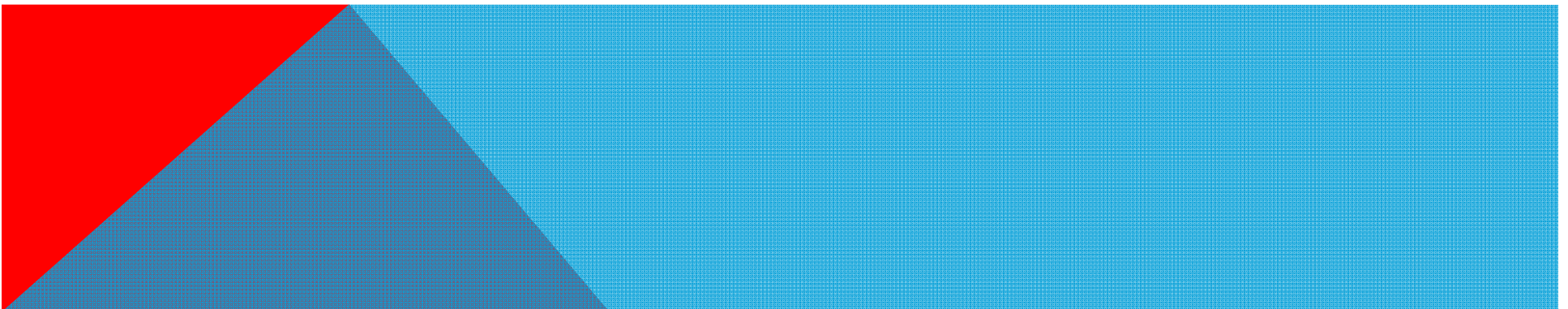
Treatment Urgency = 0





# Logistic Questions

- What lighting is required?
  - The BSS assumes that natural and/or overhead lighting will be available but requires an additional light source that can be focused on the teeth. Lighting options include: Flashlight/Penlight, portable dental light, non-dental exam light, or head lamp.
- Can screeners use loupes?
  - BSS screeners should not use loupes unless the screener's eyesight is such that they cannot see the tooth without loupes.
- How can I get a 'good look' in the mouth?
  - Tongue blades or disposable mirrors can be used.



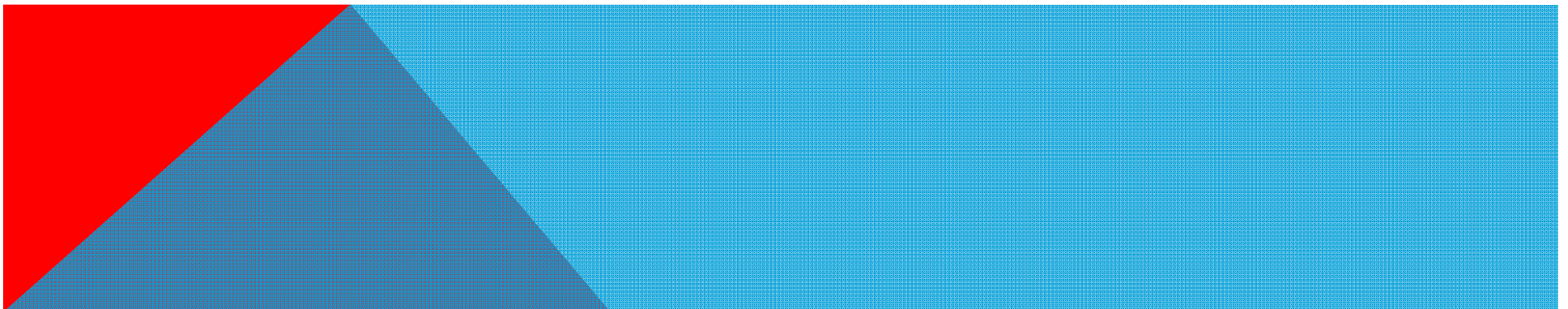
# Logistic Questions Continued

- How do I find cavities or sealants when teeth are covered by food?
  - If tooth surfaces cannot be visualized because debris obscures the view, a toothbrush is most effective for cleaning away the food. Alternatively, a toothpick or the wooden end of a cotton-tipped applicator may be used to dislodge debris. For teeth that are too wet to see the tooth surfaces, screeners can use a cotton-tipped applicator, cotton roll or gauze square to soak up saliva.
- Do I need to use a dental explorer for the screening?
  - No, dental explorers are not standard equipment for this screening model and their use for determining the presence of caries, especially newly erupted teeth with pits and fissures is discouraged. *If you use explorers, they should NEVER be used to determine a “stick” or “tugback” in a suspected carious lesion.*
  - ***S-BSPs should NEVER use an explorer to determine untreated caries.***



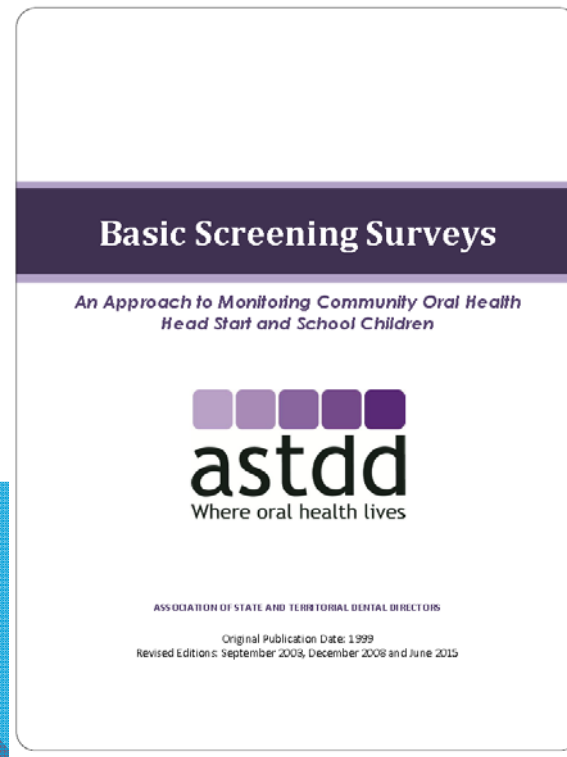
# Logistic Questions Continued

- Do I need to wear gloves?
  - In general, the basic screening survey procedures assume that you will not touch the child directly with your hands during the screening. Based on this assumption, the use of examination gloves may not be necessary; however **ASTDD does recommend that all screeners wear gloves** in the event you inadvertently come in contact with saliva or oral soft tissues.
  - **Florida S-BSPs are encouraged to always wear latex free gloves.**



# Additional Information

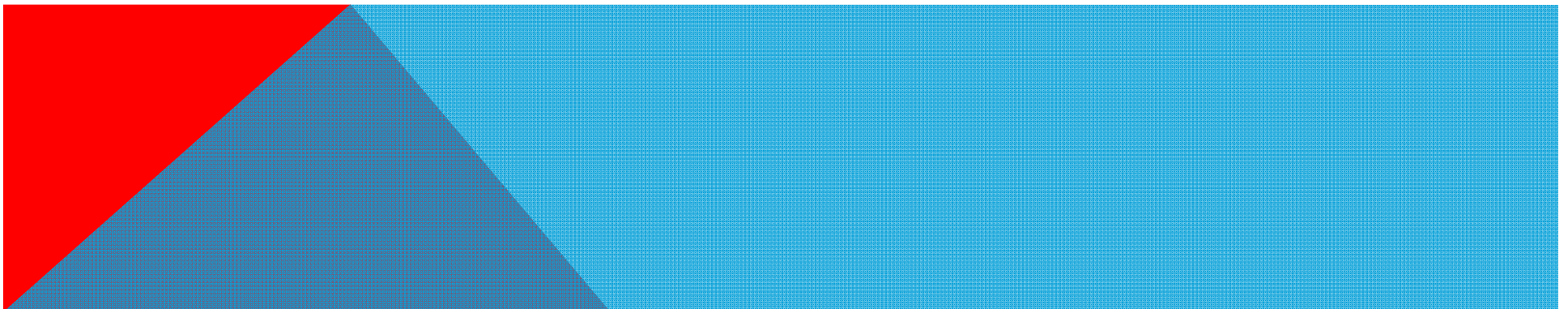
- Additional information and expanded explanations can be located in ASTDD's BSS Manual:
- <http://www.astdd.org/basic-screening-survey-tool/>





# Acknowledgements

- Association of State and Territorial Dental Directors for developing the BSS methodology, manual, and training materials.
- Drs. John Warren, Amid Ismail and Eugenio Beltran for providing the clinical photos.
- Florida Department of Health Public Health Dental Program for providing the Citrix webinar and support.



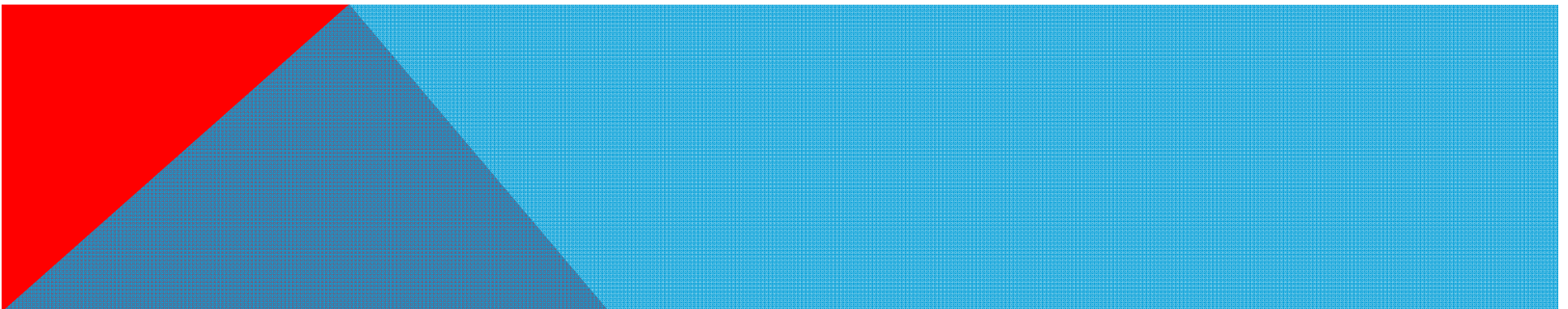
# Contact Information

## Oral Health Florida Sealant Action Team:

- <http://oralhealthflorida.org/action-teams/sealant-action-team/>

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