

ARKANSAS REGISTER

Transmittal Sheet

* Use only for **FINAL** and **EMERGENCY RULES**



Secretary of State
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For Office

Use Only:

Effective Date _____ Code Number _____

Name of Agency Board of Health

Department Department of Health/Office of Oral Health

Contact Bryan Whitaker, D.D.S. E-mail Bryan.Whitaker@arkansas.gov Phone 501-280-4111

Statutory Authority for Promulgating Rules Ark. Code Ann. § 17-82-110

Rule Title: Rules and Regulations Pertaining to Fluoride Varnish

Intended Effective Date
(Check One)

- Emergency (ACA 25-15-204)
- 30 Days After Filing (ACA 25-15-204)
- Other _____
(Must be more than 30 days after filing date.)

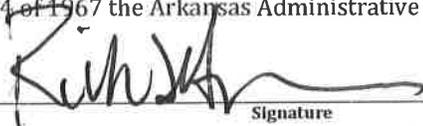
	Date
Legal Notice Published	<u>05/13/12</u>
Final Date for Public Comment	<u>06/15/12</u>
Reviewed by Legislative Council	<u>07/13/2012</u>
Adopted by State Agency	<u>07/26/2012</u>

Electronic Copy of Rule submitted under ACA 25-15-218 by:

<u>Robert Brech</u>	<u>robert.brech@arkansas.gov</u>	<u>09/28/2012</u>
<small>Contact Person</small>	<small>E-mail Address</small>	<small>Date</small>

CERTIFICATION OF AUTHORIZED OFFICER

I Hereby Certify That The Attached Rules Were Adopted
In Compliance with Act 434 of 1967 the Arkansas Administrative Procedures Act. (ACA 25-15-201 et. seq.)



Signature

501-661-2252 rick.hogan@arkansas.gov

Phone Number E-mail Address

General Counsel

Title

09/27/2012

Date

ARKANSAS STATE BOARD OF HEALTH

RULES AND REGULATIONS PERTAINING TO FLUORIDE VARNISH



Promulgated Under Authority of Ark. Code Ann. § 17-82-110

Effective October 29, 2012

**Arkansas Department of Health
Paul K. Halverson, DrPH, FACHE, Director**

RULES AND REGULATIONS PERTAINING TO FLUORIDE VARNISH

SECTION I. AUTHORITY

The following Rules and Regulations Pertaining to Fluoride Varnish are duly adopted and promulgated by the Arkansas Board of Health pursuant to the authority expressly conferred by the laws of the State of Arkansas including Ark. Code Ann. § 17-82-110.

SECTION II. PURPOSE

To enhance the dental health of the children of Arkansas by promulgating rules providing for the application of fluoride varnish by physicians, nurses, and other health care professionals who have completed training on dental caries risk assessment and fluoride varnish application.

SECTION III. DEFINITIONS

For the purposes of these Rules, the following words and phrases when used herein shall be construed as follows:

1. “Child” means an individual under the age of 19.
2. “Department” means the Arkansas Department of Health.
3. “Fluoride Varnish” means a topical resin containing fluoride that is thinly applied to the tooth surface and used as a preventive treatment for caries.
4. “Office of Oral Health” means the Office of Oral Health of the Arkansas Department of Health.
5. “Physician Supervision” means overseeing the activities of and accepting responsibility for the medical services rendered by the nurse or other licensed health care professional.

SECTION IV. SPECIFIC REQUIREMENTS

1. The application of fluoride varnish by the physicians, nurses, and other health care professionals is appropriate for patients with significant risk of dental caries who are unable to establish a dental home.
2. Physicians should encourage that every child have a dental home established by one year of age.
3. Collaborative relationships with local dentists should be established to optimize the availability of a dental home.
4. The Office of Oral Health shall approve training courses on dental caries risk assessment and fluoride varnish application. It shall maintain a list of approved programs and publish the list on the Department website.

5. Courses approved by the Office of Oral Health will contain, at a minimum, information relating to:

- a. The etiology of early childhood caries (ECC);
- b. How to assess a child's risk of developing ECC;
- c. How to perform an appropriate oral examination on small children;
- d. How to recognize the various stages of ECC;
- e. The effects, sources, benefits, and safe use of fluoride; the benefits and indications for fluoride varnish;
- f. How to apply fluoride varnish;
- g. Strategies for a successful office-based fluoride varnish program;
- h. How to advise parents on caries prevention; and
- i. Describe when to arrange a dental referral.

6. A minimum of one hour of continuing medical education shall be completed for any professional applying fluoride varnish.

7. The physician will keep a certificate of completion on file.

8. The Office of Oral Health will keep appropriate records.

SECTION V. SEVERABILITY

If any provision of these rules or the application thereof to any person or circumstance is held invalid, such invalidity shall not affect other provisions or applications of these rules which can give effect without the invalid provisions or applications, and to this end the provisions hereto are declared severable.

SECTION VI. REPEAL

All rules and parts of rules in conflict herewith are hereby repealed.

CERTIFICATION

This will certify that the foregoing Rules and Regulations Pertaining to Fluoride Varnish were adopted by the Arkansas Board of Health at a regular session of the Board held in Little Rock, Arkansas on the 26th day of July, 2012.



Paul K. Halverson, DrPH, FACHE
Secretary, State Board of Health

FINANCIAL IMPACT STATEMENT

PLEASE ANSWER ALL QUESTIONS COMPLETELY

DEPARTMENT Arkansas Department of Health
DIVISION Office of Oral Health
PERSON COMPLETING THIS STATEMENT Robert Brech
TELEPHONE NO. 501.661.2297 **FAX NO.** 501.661.2357 **EMAIL:** robert.brech@arkansas.gov

To comply with Act 1104 of 1995, please complete the following Financial Impact Statement and file two copies with the questionnaire and proposed rules.

SHORT TITLE OF THIS RULE Fluoride Varnish

1. Does this proposed, amended, or repealed rule have a financial impact? Yes No
2. Does this proposed, amended, or repealed rule affect small businesses? Yes No
If yes, please attach a copy of the economic impact statement required to be filed with the Arkansas Economic Development Commission under Arkansas Code § 25-15-301 et seq.

3. If you believe that the development of a financial impact statement is so speculative as to be cost prohibited, please explain.

4. If the purpose of this rule is to implement a federal rule or regulation, please give the incremental cost for implementing the rule. Please indicate if the cost provided is the cost of the program.

Current Fiscal Year

General Revenue _____
Federal Funds _____
Cash Funds _____
Special Revenue _____
Other (Identify) _____
Total _____

Next Fiscal Year

General Revenue _____
Federal Funds _____
Cash Funds _____
Special Revenue _____
Other (Identify) _____
Total _____

5. What is the total estimated cost by fiscal year to any party subject to the proposed, amended, or repealed rule? Identify the party subject to the proposed rule and explain how they are affected.

Current Fiscal Year

\$ 0

Next Fiscal Year

\$ 0

6. What is the total estimated cost by fiscal year to the agency to implement this rule? Is this the cost of the program or grant? Please explain.

Current Fiscal Year

no additional
\$ cost

Next Fiscal Year

no additional
\$ cost