

Sample invitation to schools to participate

Letterhead

Dear Principal,

Your school has been selected to participate in an assessment of the oral health of middle school students during the 2023– 2024 school year. Specifically, the assessment will assess the dental caries, dental sealant, and fluorosis status of each student via human visual examination and with digital photos of the front surface of the six upper front teeth and the chewing surface of all eight permanent molars. The assessment is funded by the Colorado Department of Public Health & Environment and the US Centers for Disease Control and Prevention in cooperation with *the Office of State Superintendent of Public Instruction*.

The findings of this assessment will be used to assure that our preventive oral health programs are effective. Children need good oral health in order to speak with confidence, express themselves openly, and to be healthy and ready to learn. Studies have shown that children without untreated dental disease miss less school and make higher grades. Data from this assessment will also be used to develop a smart-phone application that would enable non-dental professionals to determine the prevalence of these three dental conditions by simply taking digital photos of the child's teeth for Colorado, counties, and individual schools. This information will enable the Colorado Department of Public Health & Environment to more effectively prioritize those schools with the highest need for caries prevention programs.

Schools throughout the state have been selected for participation in the assessment. Selected students between the ages of 13 to 15 years with a signed consent from a parent or caregiver, will be given a free dental screening. The screening will take about five minutes per child. No x-rays will be taken and no dental treatment will be provided.

We understand that minimal class disruption is essential in the operation of your school. For this reason, each school will only be asked to participate for {one} day. Each participating child will receive a toothbrush and a letter to the parent or caregiver noting the results of the screening. Your school will incur no cost for participating.

We would like to ask for your support and the support of your staff to carry out this important assessment of our children's oral health needs. Attached are sample consent and results forms.

The Colorado coordinator is *Jane Doe, RDH*. She will be contacting you to answer your questions and to receive your support for conducting the assessment. Her telephone number is (555) 555-5555 and her email is *jdoe@utopia.us*.

As you know, poor oral health has been related to decreased school performance, poor social relationships, and less success later in life. For this reason, we thank you in advance for making this contribution to the health and well-being of our children in Colorado.

Sincerely,

Colorado Department of Health & Environment
Name, title
Contact info

Colorado Department of Education

Enclosure

CC: state or local Department of Education