**Email invitation and reminder to state dental directors requesting Basic Screening Survey**

**data for the National Oral Health Surveillance System**

**INITIAL EMAIL**

State Dental Directors:

**[For states with a previous BSS]** Has your state completed analysis of a Basic Screening Survey (BSS) for children since your program last submitted data to ASTDD? If so, please submit this new data to ASTDD for inclusion in the National Oral Health Surveillance System (NOHSS) and publication on the CDC Oral Health Data portal (https://www.cdc.gov/oralhealthdata/). Including your state’s data in NOHSS and the CDC Oral Health Data portal will enable your program, the public, and stakeholders to monitor oral health status trends within your state and compare with other states.

[**For states without a previous BSS]** Has your state completed analysis of a Basic Screening Survey (BSS)? If so, please submit this new data to ASTDD for inclusion in the National Oral Health Surveillance System (NOHSS) and publication on the CDC Oral Health Data portal (<https://www.cdc.gov/oralhealthdata/>). Including your state’s data in NOHSS and the CDC Oral Health Data portal will enable your program, the public, and stakeholders to monitor oral health status trends within your state and compare with other states.

**[Common to all states]** The process of submitting your BSS data is easy and should take less than 30 minutes. The information requested includes basic information about the survey methodology, the number of sites or schools invited to participate, the number of sites or schools that participated, the number of children invited to participate, and the number of children screened. It also includes statewide estimates and 95% confidence intervals for the age-appropriate NOHSS oral health indicators. Your state should only provide de-identified state-aggregated data.

To submit your state’s current BSS data, please complete the attached BSS Data Submission Form and return it to Kathy Phipps, kphipps@astdd.org. ASTDD will review the data for compliance with NOHSS standards and, if it meets those standards, will provide it to CDC. If it doesn’t meet the NOHSS standards, we will contact you and discuss next steps. If you have data from past BSS surveys that are not included in CDC’s Oral Health Data portal, you may also submit that information.

You may submit your state’s data at any time. If you are in the process of collecting or analyzing data, please let us know your schedule and we will send a follow-up email.

If you have questions or concerns, please contact ASTDD’s Data and Surveillance Coordinator, Kathy Phipps, kphipps@astdd.org, 805-776-3393.

Sincerely,

Christine Wood

ASTDD Executive Director

Address

Public reporting burden of this collection of information is estimated to average 1 minute per response, including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-1346).

**REMINDER EMAIL – DISTRIBUTED as needed**

State Dental Directors:

On {date of first email}, I sent you an email requesting that your program submit new Basic Screening Survey (BSS) for children data that are not currently on CDC’s Oral Health Data portal (<https://www.cdc.gov/oralhealthdata/>). You may submit data throughout the year as soon as new data are available.

The process of submitting your BSS data is easy and should take less than 30 minutes. The information requested includes basic information about the survey methodology, the number of sites or schools invited to participate, the number of sites or schools that participated, the number of children invited to participate, the number of children screened. It also includes statewide estimates and 95% confidence intervals for the age appropriate NOHSS oral health indicators. Your state should only provide de-identified state-aggregated data.

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