Caries Risk Assessment

Getting Started

- ☐ Choose a recognized CRA Form/Tool (i.e. ADA, AAPD, AAP, CDA) that works best for your office setting.
- ☐ Determine how you will document and gather important information from the CRA. Start with one of the following:
  - ☐ Paper form
  - ☐ Build CRA Form into into practice management software (i.e. Dentrix)
  - ☐ Integrate key knowledge gathered from CRA into clinical notes/other field in practice management software (i.e. Dentrix)
- ☐ Have a conversation with staff to gain buy-in on Disease Management and why we use CRAs. Explain what you want to track. Don't leave out staff from Information Technology.
- ☐ Consider starting with a small group (i.e. patients ages 0-5, 6-9, etc.).
- ☐ Start small—one provider tries CRA on one patient and builds learning and experience.
- ☐ Draft (and revisit) your office's workflow for completing CRA from start to finish. Determine whom, when, where for each step in the process.
- ☐ Measure your progress and set goals for your measures. Suggested measures include:
  - ☐ % of patients receiving CRA
  - ☐ % of patients with reduced caries risk status
- ☐ After pilot testing, train providers and calibrate how low, moderate and high risk patients are defined and addressed.

Dental Provider Workflow

Patient seated in exam room

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RDH/DA begins clinical assessment/exam

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RDH/DA uses CRA to guide conversation; draws out patient information on risk and protective factors

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Key information from CRA (i.e. risk factors, protective factors, clinical indicators) is confirmed by DDS/DMD and documented in practice management software (i.e. Dentrix)

Risk level is determined, explained and recorded:

D0603 – HIGH RISK
D0602 – MODERATE RISK
D0601 – LOW RISK

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Based on risk level, determine treatment, OHI, nutritional counseling, and recare interval. Engage with patient to help set their Self-Management Goal

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Make follow-up appointment with appropriate recare interval

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