

641—51.9(82GA,ch146,SF2111) Dental screening documentation. A person performing a dental screening required by this chapter shall record the following student information on the certificate of dental screening provided or approved in writing by the department of public health in cooperation with the department of education:

1. Name (first and last);
2. Birth date;
3. Parent or guardian name;
4. Telephone numbers (home or mobile);
5. Address (street, city, and county);
6. School;
7. Grade level;
8. Gender;
9. Treatment needs (no obvious problems, requires dental care, requires urgent dental care);
10. Date of dental screening;
11. Provider type;
12. Provider name, business address, and telephone number; and
13. Provider signature.