

Dental Data Entry Worksheet	
List ALL Grades Served:	
<i>Counts by Grade</i>	
Grade: Kindergarten	# of Students
In compliance with complete dental examination	
A1. With dental sealants	
A2. Without dental sealants	
A3. Not known	
B1. With caries experience/restoration history	
B2. Without caries experience/restoration history	
B3. Not known	
C1. With untreated caries	
C2. Without untreated caries	
C3. Not known	
Needing urgent treatment	
No dental examination/no waiver/no religious objection/no approved appointment/no medical problem or disability	
Waiver--not covered by private/public insurance (Medicaid/All Kids)	
Waiver--ineligible for public insurance (Medicaid/All Kids)	
Waiver--unable to find dentist/dental clinic that will accept Medicaid/All Kids	
Waiver--no insurance, no low-cost clinics willing to see children	
Approved appointment scheduled--unprotected, but compliant	
Religious objection--unprotected, but compliant	
Medical reason--unprotected, but compliant	
Disability--unprotected, but compliant	
Enrolled in preceding school year and submitted approved appointment scheduled within 60 days after the May 15 deadline; subsequently submitted a completed Proof of School Dental Examination Form	