

Community Dental Care's School-Based Sealant Program

Dental Sealants at School

PLEASE RETURN FORM BY:

Nyob zoo niam thiab txiv,

Kev soj tsuam menyuam cov hniav dental sealant program yuav muaj nyob rau tom nej cov menyuam lub tsev kawm ntawv. Peb yuav soj tsuam rau nej cov menyuam hniav thiab pleev cov tshuaj yas dawb hu ua "sealant" rau cov hniav kom kab tsis txhob noj yog tsimnyog thiab peb kuj pleev tshuaj "fluoride". Tom qab peb soj tsuam rau koj tus menyuam cov hniav lawm, peb yuav xa ib tsab ntawv nrog tus menyuam los tsev. Hauv tsab ntawv, yuav qhia txog kev soj tsuam, nrog rau qhov peb ua rau tus menyuam cov hniav, thiab yuav muaj ib daim ntawv qhia ntxiv yog tias muaj lawm yam txawj xeeb. Yog peb pleev cov tshuaj yas dawb, tomqab 2 hlis mus rau 24 lub hlis, peb yuav rov soj tsuam seb cov tshuaj yas dawb puas tseem nyob. Yog tias tsis nyob lawm, peb yuav tau rov pleev dua.

Qhov peb ua no tsis yog ib qhov uas yuav los hloov/pauv nej cov menyuam qhov kev mus ntsib nej tus kws kho hniav. Peb xav kom ib xyoo twg nej cov menyuam yuav tsum mus ntsib nej tus kws khov hniav ib zaug.

☐ KAM, kuv xav kom kuv tus menyuam tau nej qhov kev pab soj tsuam cov hniav pleev yas dawb (Sealant)!

Daim ntawv tso cai no yuav tsum tau sau kom tas, tig sab nrauv es kos npe ces xa rov qab rau nej tus menyuam tus xib fwb.

☐ TSIS KAM, Kuv tsis xav kom kuv tus menyuam txais nej qhov kev soj tsuam hniav pleev yas dawb (Sealant)!

Yog koj tsis kam, tsis tas sau kom tas daim ntawv tso cai no. Thov sau koj tus menyuam lub npe xwb ces xa rov qab rau koj tus menyuam tus xib fwm.

Menyuam lub Npe: _____

QHIA TXOG TUS MENYUAM: Sau qhia txog koj tus menyuam thiab nws keeb kwm noj qab nyob zoo.

MENYUAM NPE: _____ HNUB YUG: ____/____/____ TUB _____ NTXHAI _____

TSEV KAWM NTAWV LUB NPE: _____ XIB FWB LUB NPE: _____ KAWM QIB DAB TSI: _____

MENYUAM CHAW NYOB: _____ XOV TOOJ: _____

HAIV/HOM NEEG TWG: _____ NEJ SIV LUS DABTSI SIB THAM TOM/HAUV TSEV: _____

KUV TUS MENYUAM CAIJ NPAV/TOS THAUM: _____ TAUG KEV MUS THIAB ROV QAB LOS TSEV: _____

NYOB TOS TOM TSEV KAWM NTAWV: _____

KEEB KWM NOJ QAB NYOB ZOO: (THOV KOS **MUAJ** lossi **TSIS MUAJ**)

Koj tus menyuam puas muaj mob dabtsi es kws kho mob tseem niaj hnuv saib xyuas? **MUAJ / TSIS MUAJ**

Yog **MUAJ**, thov sau seb muaj mob dabtsi _____

Koj tus menyuam puas tab tom muaj tshuaj noj? **MUAJ / TSIS MUAJ**

Yog **MUAJ**, thov sau npe tshuaj seb yog dabtsi _____

Koj tus menyuam puas muaj keeb kwm mob loj heev yav tas los? **MUAJ/ TSIS MUAJ**

Yog **MUAJ**, thov sau qhias seb yog thaum twg _____ thiab sau qhia seb yog dabtsi _____

Koj tus menyuam puas muaj kev phiv tshuaj los phiv khoom noj? **MUAJ /TSIS MUAJ**

Yog **MUAJ**, thov sau seb muaj phiv yam dabtsi _____

Koj tus menyuam puas muaj ib tus kws kho hniav uas nws niaj zaus mus ntsib? **MUAJ/TSIS MUAJ**

Zawm tag los no, nej mus ntsib yog thaum twg lawm? _____

Tig sab nrauv

NTAUB NTAWV PAB THEM KHO MOB: Nyiaj kev pab los ntawm tuam tsev Minnesota Health Care Program thiab lwm hom ntawv kho mob yuav pab them tau cov nqi tshuaj yas dawb.

Kuv tus menyuam muaj kev pab los ntawm Minnesota Health Care Programs. Thov qhia seb yog lub tuam tsev twg pab nej them li nram qab nov.



ID #/Member # _____ PMI#(Health Partners/DeltaDental/UCare) _____

Kuv tus menyuam kev pab tsis muaj nyob saum toj nov:

Sau qhia lub npe tuam tsev kev pab them nqi kho mob: _____

Policy Holder's Npe: _____ Policy Holder hnuv yug: _____

ID #/Member #: _____ Group # _____ Insurance Phone #: _____

Kuv tus menyuam tsis muaj kev pab/ntawv kho mob. Kuv xav tau kev pab pub dawb los them cov nqi plev tshuaj yas dawb.

Tus neeg peb yuav hu tau yog muaj kev kub ntxov: Yog muaj kev kub ntxov, hu rau leeg twg?

Npe: _____ Xov Tooj: _____

Nws kev sib txeeb ze tus menyuam li cas: _____

TSO CAI RAU KEV PAB THIAB KHO MOB

Daim ntawv tso cai no yuav muab los siv rau kev tso cai rau peb qhov kev pab cuam School-Based Sealant Program thiab lub tsev kho hniav (Community Dental Care) los pab soj tsuam, txhuan hniav, plev tshuaj "fluoride", plev yas dawb, xa cov nqi rau nej lub tuam tsev pab them nqi (insurance). Kuv tso cai rau tus school nurse thiab tus kws kho hniav paub txog kuv tus menyuam cov hniav seb yuav kho li cas. Thiab kuv kuj tso cai rau nej hu xov tooj rau kuv hais qhia txog kuv lub insurance, them nqi, lossi nug yam nej xav paub txog.

Kuv tso cai rau nej pab kuv tus menyuam, kuv thiaj li kos lub npe nyob daim ntawv no. Kuv tau txais nej daim Notice of Privacy Practices los ntawm Community Dental Care thiab kuv paub hais tias tus school nurse yeej muaj daim Notice of Privacy Practices ib yam yog kuv xav pom daim ntawv no kuv mam mus ntsib tus school nurse. Daim ntawv tso cai no muaj cai siv mus 24 lub hli lawm yav tom ntej.

Niam/Txiv Npe: _____

Niam/Txiv Kos Npe _____ Hnuv Tim: _____

Yog muaj lus nug, hu tau rau peb chaw kho hniav, CommunityDental Care's School-Based Sealant Program 651-774-2959 nrog tau cov tub ntxhais ua haujlwm rau kev pab Sealant lossi Npleev Yas Dawb.



DELTA DENTAL OF MINNESOTA FOUNDATION

Funding for this program was made possible by grants from National Children's Oral Health Foundation, Care, Minnesota Department of Health, Medica Foundation, and Delta Dental of Minnesota Foundation.

Yog teb tsis tas cov lus nug, ces peb saib tsis tau nej cov menyuam