

City Tech Dental Hygiene Department

Prof. Susan Davide & Prof. Maggie Rivera

Ms. R. Torres, Ms. N. Akbarova, Ms. D. Santos & Ms. M. Damasco



complimentary prophylaxis. Call: 718-260-5074

Dental Screening

Stadenty racinty/stall Member's cast Name.	Studenty recutty/Stan Member's Pirst Na	Situation (month) batter (car).
Address:		Mobile Number:
City:	State:	Zip Code:
		nt may contact me to set-up an appointment for a dental phylaxis
Name of CUNY school; attending, working or st	taffed at:	
Do you currently have dental insurance? Chec	k ONE:	
O Dental Insurance	O No dental insurance	O Not sure if I have dental insurance
Date of last dental /dental hygiene visit:		
What type of toothbrush do you use?	Soft, medium or I	hard toothbrush bristle?
O Manual O Ele	ctric/Powered	
I authorize the dental hygiene student, dental hygienist or dentist to conduct an oral dental and cancer screening and provide recommendations based on findings today. This screening does not replace an exam by a dentist.		
Signature Date:		
Health Care Provider Section		
Treatment Needs (check ONE):		
 No Obvious Concerns — the individual's hard and soft tissues appear to be visually healthy and there is no apparent reason to be seen before the next routine dental checkup. 		
O Requires Dental Care — calculus visible, tooth decay* or a white spot lesion** is suspected in one or more teeth.		
O Requires Urgent Dental Caré — obvious tooth decay* is present in one or more teeth, individual is experiencing pain, or there is evidence of infection or injury.		
*Tooth decay: A visible cavity or hole with brown or black discoloration, or a retained root.		
"*White spot lesion: A demineralized area of tooth, usually appearing as a chalky white spot or white line near the gum line. A white spot lesions is considered an early indicator of tooth decay; especially in primary teeth.		
Date of Dental Screening:		
Provider Type: O Dental Hygiene	e Student O RDH O DD	S Provider Name:

Dental Hygiene Clinic at New York City College of Technology, 300 Jay Street, Brooklyn, NY 11201

Bring this completed form to City Tech's Dental Hygiene Clinic during the fall or spring semester to receive a one-time

Dental Screenings conducted by our Students









Our Freshman
Students
conducting
Head & Neck
Examinations



Our Freshman
Students
conducting
Intraoral
Examinations







Over 50 screenings conducted