

Republic of the Philippines

Department of Education

REGION IV-A CALABARZON
SCHOOLS DIVISION OF BATANGAS

20 May 2025

DIVISION MEMORANDUM No. <u>260</u>, s. 2025

IMPLEMENTATION OF FLUORIDE APPLICATION PROGRAM TO NON-TEACHING PERSONNEL OF SDO BATANGAS PROVINCE

TO: Assistant Schools Division Superintendents
Chief-Curriculum Implementation Division (CID)
Chief-School Governance and Operations Division (SGOD)
Education Program Supervisors
Public Schools District Supervisors
Public Elementary School Heads
All Others Concerned

- 1. This memorandum outlines the guidelines and procedures for the implementation of a fluoride application program for all non-teaching personnel of Schools Division Office of Batangas Province. The fluoride application will be conducted in the Medical Clinic during this week from May 22 to May 23, 2025 from 9:00 AM to 4:00 PM.
- 2. This initiative aims to promote oral health and prevent dental caries among our valued staff. Maintaining good oral health is crucial for overall well-being and productivity. Fluoride application is a proven and effective preventive measure against tooth decay. By extending this program to our non-teaching personnel, we aim to contribute to their long-term health and reduce potential healthcare costs associated with dental issues.
- 3. Participation is voluntary, and all personnel will be required to provide informed consent prior to the application (Attachment A)
- 4. Attached to this memorandum is the copy of the proper preparation of personnel before fluoride application and post-op instructions (Attachment B)
- 5. For your concerns, please contact Dr. Ma. Carina M. Guevarra, SDHCP Coordinator through their email at sdobatangas.health@deped.gov.ph and macarinaguevarra@deped.gov.ph

6. Immediate dissemination of this memorandum is desired

MARITES A. IBAÑEZ, CESO V Schools Division Superintenden

SHN, DM- IMPLEMENTATION OF FLUORIDE APPLICATION PROGRAM TO NON-TEACHING PERSONNEL OF SDC BATANGAS PROVINCE, R2-143258, 20052025







Address: Provincial Sports Complex, Bolbok, 4200 Batangas City

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Attachment A

INFORMED CONSENT

Purpose: The purpose of this program is to help prevent tooth decay (dental caries) by applying fluoride to the surfaces of your teeth. Fluoride strengthens tooth enamel, making it more resistant to acid attacks from plaque bacteria and sugars in the mouth.

Procedure: The fluoride application involves the application of a fluoride varnish to your teeth by SDO Dentists. This process is generally quick and painless.

Benefits: Fluoride application is a safe and effective way to strengthen tooth enamel, make teeth more resistant to decay, help prevent the formation of new cavities, and potentially slow down or reverse early stages of tooth decay.

Risks and Discomforts: Fluoride application is generally safe. However, some individuals may experience minor and temporary discomforts such as: a temporary sticky feeling on the teeth. Rarely, mild irritation of the gums or soft tissues in the mouth. In very rare cases, allergic reactions to fluoride may occur. Please inform the healthcare personnel if you have any known allergies.

Alternatives: The alternative to participating in this fluoride application program is to maintain your regular oral hygiene practices, including brushing twice a day with fluoride toothpaste and flossing daily.

Voluntary Participation: Your participation in this fluoride application program is entirely voluntary. You have the right to refuse to participate, and your decision will not affect your employment or access to other benefits.

Confidentiality: Any information collected during this program will be kept confidential in accordance with relevant data privacy laws and regulations.

Questions: You have the right to ask any questions you may have about this program before deciding whether or not to participate. Please feel free to ask the Dentist administering the fluoride application,





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Consent:

I have read and understood the information provided above regarding the Fluoride Application Program for Non-Teaching Personnel of SDO Batangas Province.

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to my satisfaction.
\square I voluntarily consent to participate in the Fluoride Application Program.
\Box I do not consent to participate in the Fluoride Application Program.
Signature Over Printed Name of Personnel
Attending Dentist

We believe that this fluoride application program will be a valuable contribution to the overall health and well-being of our non-teaching personnel. We appreciate your cooperation in ensuring the successful implementation of this initiative. Sincerely the Dental Team









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Attachment B

PRE-OP AND POST-OP INSTRUCTION

Proper Preparation Before Application:

To ensure the effectiveness and safety of the fluoride application, personnel are requested to adhere to the following guidelines:

- 1. Brush and Floss Thoroughly: On the day of the application, personnel should brush and floss their teeth meticulously to remove any plaque and food debris.
- **2.** Avoid Eating, Drinking, or Rinsing: For at least 30 minutes prior to the **sche**duled application time, personnel should refrain from eating, drinking, or rinsing their mouths. This allows the teeth to be clean and receptive to the fluoride treatment.
- 3. Inform the Dentist/s: Individuals with known allergies or sensitivities to fluoride or any oral health conditions should inform the designated healthcare personnel administering the application beforehand.

Proper Care After Application:

Following the fluoride application, it is crucial to observe the following instructions for optimal benefit:

- 1. Do Not Rinse, Eat, or Drink: For at least 30 minutes after the application, personnel should avoid rinsing their mouths, eating, or drinking. This allows the fluoride to effectively penetrate the tooth enamel.
- 2. Avoid Hot Beverages and Hard/Sticky Foods: For at least 4-6 hours after the application, it is advisable to avoid consuming hot beverages, as well as hard or sticky foods that may dislodge the fluoride.







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