Practitioners are encouraged to evaluate all potential fluoride sources and conduct a caries risk assessment before prescribing fluoride supplements.

For children at low caries risk, dietary fluoride supplements are not recommended and other sources of fluoride should be considered as a caries preventive intervention. (D)
For children at high caries risk, dietary fluoride supplements are recommended according to the schedule presented in the following table. (D)
When fluoride supplements are prescribed, they should be taken daily to maximize the caries prevention benefit. (D)

### ADA dietary fluoride supplement schedule for children at high caries risk

<table>
<thead>
<tr>
<th>Age (Years)</th>
<th>Fluoride Concentration in Drinking Water (ppm)*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>&lt;0.3</td>
</tr>
<tr>
<td>Birth to 6 months</td>
<td>None (D)</td>
</tr>
<tr>
<td>6 months to 3 years</td>
<td>0.25 mg/day (B)</td>
</tr>
<tr>
<td>3 to 6 years</td>
<td>0.50 mg/day (B)</td>
</tr>
<tr>
<td>6 to 16 years</td>
<td>1.0 mg/day (B)</td>
</tr>
</tbody>
</table>

*1.0 ppm = 1 mg/liter

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Levels of evidence and strength of recommendations: Each recommendation is based on the best available evidence. Lower levels of evidence do not mean the recommendation should not be applied for patient treatment.

Recommendation based on higher levels of evidence

Recommendations based on lower levels of evidence or expert opinion

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1Rozier, et al. Evidence-based clinical recommendations on the prescription of dietary fluoride supplements for caries prevention: a report of the ADA Council on Scientific Affairs. Evidence-based clinical recommendations on the prescription of dietary fluoride supplements for caries prevention. JADA 2010; 141:1480–1489. Copyright © 2010 American Dental Association, All rights reserved. Adapted with permission. To see the full text of this article, please go to http://jada.ada.org/cgi/reprint/141/12/1480.

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**Making a shared decision**

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**The Clinician**

**&**

**The Patient**

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**Determine balance between need for caries prevention and risk of fluorosis**

**Fluoride Exposure**

Consider all sources of fluoride intake including bottled water. Contact local, county and/or state health departments about local water fluoride content or test water sample.

**Caries Prevention**

Repeat caries risk assessment at frequent intervals because risk status can change. Caries risk assessment tools are available for dentists* and physicians.**

**Comply with prescription**

Use dietary fluoride supplements as directed to maximize the caries prevention benefit. Chew tablets or suck lozenges for 1-2 minutes before swallowing to maximize topical effect. For infants, supplements are available as a liquid and used with a dropper.

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**Bright Futures in Practice: Oral Health Pocket Guide.** http://www.mchoralhealth.org/PocketGuide/tables1.html