Here are some points that may be helpful to you in discussing the use of X-rays with your patients should they have questions:

**Dental X-rays**

- Many oral diseases can’t be detected on the basis of a visual and tactile examination alone. Dental X-ray exams are valuable in providing information about your oral health such as early stage cavities, gum diseases, abscesses or some types of tumors. X-rays can help dentists catch and treat oral health problems at an early stage.
- The American Dental Association (ADA) has reviewed the article and believes the story reinforces long-standing ADA positions supporting the judicious use of diagnostic imaging techniques and procedures that emit radiation.
- We believe in the ALARA principle (As Low as Reasonably Achievable) to reduce radiation exposure to their patients by: determining the need for and type of radiographs to take; using “best practices” during imaging, including the application of quality control procedures; and, interpreting the images completely and accurately.
- How often dental X-rays should be taken depends on your oral health condition, your age, your risk for disease and any signs and symptoms of oral disease you may be experiencing. Let’s talk about what is right for you.
- The ADA recommends that dentists use leaded aprons and leaded thyroid collars (or non-lead equivalents) whenever possible to ensure that radiation exposure is as low as reasonably possible. This practice is strongly recommended for children, women of childbearing age and pregnant women who are especially susceptible to radiation effects.
- While cone-beam computed tomography is a relatively new diagnostic imaging tool in the dental office, the ADA relies on its long-standing position that the ordering of diagnostic radiation procedures for patients should occur only if absolutely necessary for diagnosis and treatment.
- The American Dental Association has information about dental X-rays on its Web site at [ADA.org](http://ADA.org) if you would like more information.