

STANDARDIZATION AND CALIBRATION ON GINGIVAL INDEX FOR SCHOOLCHILDREN

PROTOCOL FOR TRAINING OF TRAINERS



Oral Health Division
Ministry Of Health Malaysia

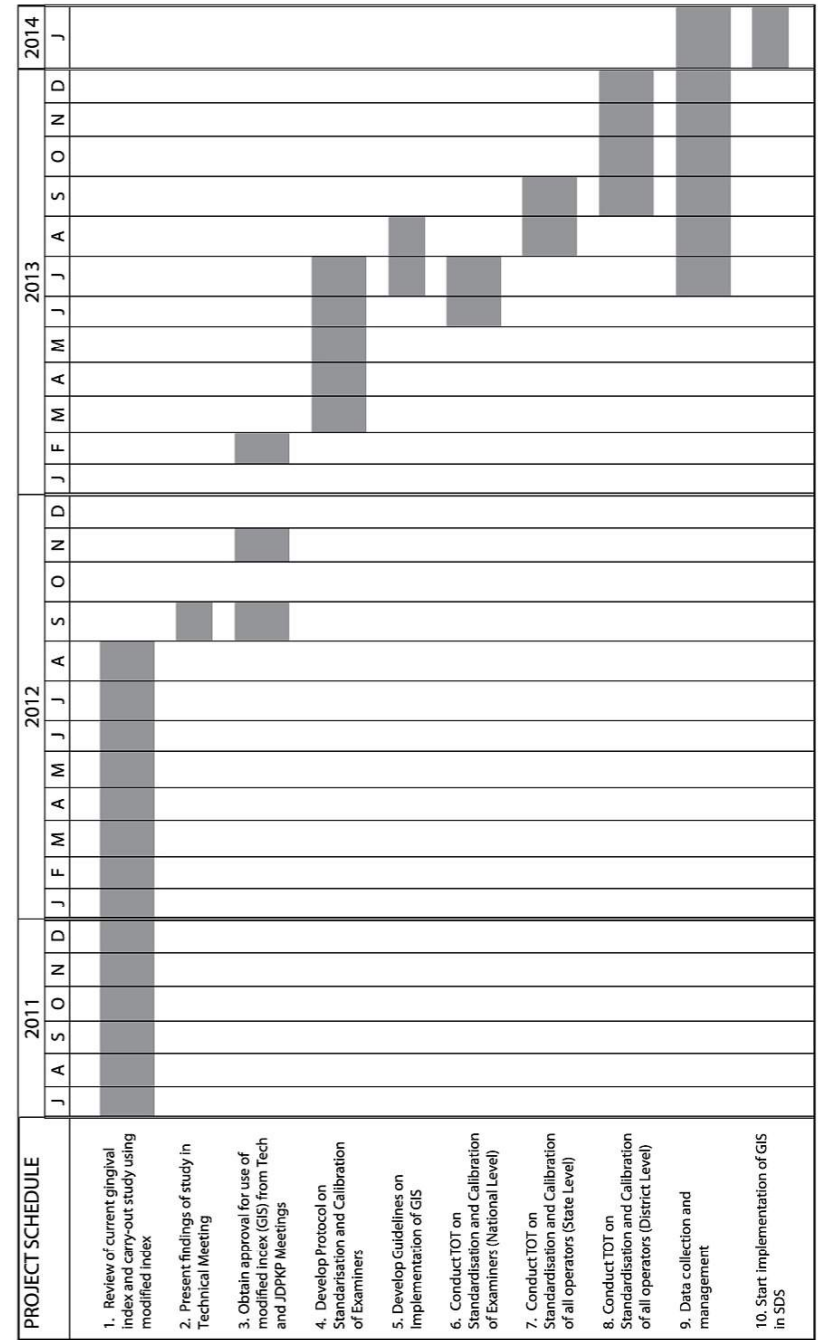
August 2013

Acknowledgement

The Oral Health Division, Ministry of Health Malaysia expresses its appreciation to the following:

- Members of the Protocol Working Group of NOHSA 2010 for their kind permission to adapt the Protocol for Standardisation and Calibration of Examiners National Oral Health Survey of Adults Year (NOHSA) 2010 for use in this Training of Trainers (TOT) document.
- State Deputy Directors of Health (Oral Health) Negeri Sembilan and Terengganu and their officers for cooperation and assistance in the conduct of the training of trainers at the National level.
- All personnel who were directly or indirectly involved in the conduct of the training sessions at National and State level.

Gantt Chart : Implementation of GIS



ITEMS FOR CALIBRATION EXERCISE

NO.	EXPENDITURE ITEMS
1.	Token (RM10) per student
2.	Disposables item : <ul style="list-style-type: none"> ● Examination set (RM2/set) ● Apron(RM20/packet) ● Gloves (RM19/box) ● Mask (RM19/box) ● Hand Rub (RM250/bottle) ● Bib, clip chain, cotton roll and gauze
3.	Pen and writing board
4.	Printing of calibration and consent forms
5.	Certificates
6.	Food and Beverages : <ul style="list-style-type: none"> ● Examiners ● Organizing Committee ● Recorders ● Subjects (Schoolchildren) inclusive reserves' subjects ● Drivers

Note: This does not include cost of travel/accommodation and other expenses

Working Committee

Advisors :

Dr Khairiyah binti Abd Muttalib
Principal Director
Oral Health Division
Ministry of Health Malaysia

Dr Noor Aliyah binti Ismail
Director of Oral Health Regulation and Practice Division
Oral Health Division
Ministry of Health Malaysia

Chairman :

Dr Savithri a/p Vengadasalam
Deputy Director
Oral Health Division
Ministry of Health Malaysia

Committee Members :

Dr Yaw Siew Lian
Deputy Director
Oral Health Division, MOH

Dr Doreyat bin Jemun
State Deputy Director of Health (Oral Health)
Negeri Sembilan

Dr Ahmad Sharifuddin bin Mohd Asari
Senior Consultant Periodontist
Cahaya Suria Dental Clinic
F.T Kuala Lumpur

Dr Uma a/p Subramaniam
Consultant Periodontist
Seremban Dental Clinic
Negeri Sembilan

Dr Izrawatie Mardiana binti Shapeen
Periodontist
Mentakab Dental Clinic
Pahang

Dr S Gunaseelan a/l Subramaniam
Dental Public Health Specialist
Bandar Taiping Dental Clinic
Perak

Dr Cheng Lai Choo
Senior Principal Assistant Director
Oral Health Division, MOH

Dr Natifah binti Che Salleh
Senior Principal Assistant Director
Oral Health Division, MOH

Dr Rauzi binti Ismail
Dental Public Health Specialist
Klang Dental Clinic
Selangor

Dr Nurkhurshiah binti Selamat
Dental Public Health Specialist
Batang Padang Dental Clinic
Perak

Dr Morni binti Abdul Rani
Dental Public Health Specialist
Kuala Kubu Baharu Dental Clinic
Selangor

Dr Nor Haslina binti Mohd Hashim
Dental Public Health Specialist
District Health Office
(Petaling District), Selangor

Dr Adibah binti Mohd Rahim
District Dental Officer
Dungun Dental Clinic
Terengganu

Cik Hayati binti Mohd Yasin
Dental Nurse U36
Oral Health Division, MOH

Dr Azizah binti Mat
Dental Public Health Specialist
Sepang Dental Clinic
Selangor

Dr Maryana binti Musa
Dental Public Health Specialist
Kuala Langat Dental Clinic
Selangor

Dr Nuryastri binti Md Mustafa
Principal Assistant Director
Oral Health Division, MOH

LIST OF EQUIPMENT AND INSTRUMENTS

No.	Item	Quantity (Recommended for 16 examiners)
1.	Portable Waldman Light	16 pcs
2.	Mouth Mirrors (disposable)	80 pcs
3.	Tweezers (disposable)	80 pcs
4.	Disposable polystyrene trays	80 pcs
5.	Hand Towels (disposable)	2 packs of 100
6.	Sterilised gauze	As required
7.	Cotton pellets	As required
8.	Disposable masks	6 boxes
9.	Disposable gloves	10 boxes
10.	Hand Rub	2 big bottles
11.	Disposable cups	80 pcs
12.	Ball pens (red & blue)	20 each
13.	Survey Formats	As required
14.	Notebook computers	2
15.	Gifts / Tokens	80 units
16.	Chairs for examination of subjects	16 units
17.	Clipboards	16 pieces
18.	LCD Projector	1
19.	Slides on Gingival Conditions	20 slides

**GINGIVAL STATUS USING 7 SURFACES
OF SIX INDEX TEETH AMONG SCHOOLCHILDREN
STANDARDISATION AND CALIBRATION OF EXAMINERS**

DATE :.....

EXAMINER CODE :.....

SESSION :.....

PATIENT CODE :.....

B. 7 SURFACES INDEX TEETH

1. Periodontal Conditions

0 =	No gingivitis No calculus
1 =	No gingivitis With calculus
2 =	With gingivitis No calculus
3 =	With gingivitis With calculus
X =	Excluded sextant

BENCHMARK/ EXAMINER(1st Exam)/ EXAMINER(2nd Exam)

TEETH (SURFACES)

16(buccal)	11(labial)	26(buccal)	36(lingual)	31(labial)	31(lingual)	46(ingual)

GIS Score

1 INTRODUCTION

Gingival status is one of the oral health parameters assessed in the Incremental Dental Care Programme in schools. Currently, the delivery of oral healthcare for schoolchildren is based on the *Guidelines on Oral Healthcare for Schoolchildren* where 'gingivitis-free mouth' is assessed using 6 surfaces of 6 index teeth¹. Marked differences were observed between the data on gingival status of schoolchildren obtained from national surveys^{2,3,4,5} and data from the Health Information Management System (HIMS)⁶. To address the issue of the sensitivity of the index currently used for schoolchildren, a study comparing gingivitis-free status using the 6 index teeth with 6 surfaces (as used in HIMS) and with a variable number of surfaces (between 7 and 12) was undertaken in July 2011.

The results when using 12 surfaces were found to be comparable to the survey results in the detection of gingivitis. However it is time consuming on a population level. As the biggest difference was found in the lower left incisor tooth, a 7-surface index was tested⁷. The modified 7-surface index was able to detect 99.14% of the gingivitis cases in the test population and was comparable to the results of the 12-surface index. The study concluded that the 7-surface index would be more practical in assessing the gingival status.

This 7-surface index was subsequently named 'The Gingival Index for School Children' (GIS) and was approved for use at the *Mesyuarat Jawatankuasa Dasar dan Perancangan Kesihatan Pergigian 1/2013* (4th & 5th February 2013). This document is the protocol to train trainers in the GIS system and to conduct echo training.

2 OBJECTIVES

General Objective

To train benchmark examiners to echo train field operators (Dental Officers and Dental Nurses) on the use of Gingival Index for Schoolchildren to assess the gingival status among schoolchildren

Specific Objectives

1. To ensure all operators have uniform interpretation, understanding and application of the recording instructions
2. To ensure reasonable consistency for intra - examiner and inter- examiner variability

¹ Oral Health Division, Ministry of Health Malaysia. Oral Healthcare for Schoolchildren in Malaysia, 2006

² Oral Health Division, Ministry of Health Malaysia. National Oral Health Survey for Schoolchildren 2007 (NOHSS 2007) - 12 year olds, 2010

³ Oral Health Division, Ministry of Health Malaysia. National Oral Health Survey for Schoolchildren 2007 (NOHSS 2007) - 16 year olds, 2010

⁴ Oral Health Division, Ministry of Health Malaysia. Preliminary Report of National Oral Health Survey of Adults 2010, 2013

⁵ Oral Health Division, Ministry of Health Malaysia. Protocol For Standardization and Calibration of Examiners National Oral Health Survey of Adults Year 2010, 2010

⁶ Health Informatics Centre, Ministry of Health Malaysia. Annual Report Health Information Management System (Oral Health Sub-system) 2007, 2012

⁷ Oral Health Division, Ministry of Health Malaysia. Study on Prevalence of Gingivitis Free Status Using 6 Surfaces and 12 Surfaces in 6 Index Teeth Among 16 year old Schoolchildren, 2013.

3 SCOPE

This protocol shall be used for the conduct of GIS standardization and calibration of trainers.

4 METHODOLOGY

Implementation of the GIS involves standardization and calibration of trainers to act as resource persons.

4.1 Standardisation and Calibration of Examiners

A two-tiered standardization and calibration process is recommended. Training shall be conducted at national and state levels.

National Level training

A National Working Committee shall be formed to look into protocol building of the standardization and calibration exercise, ensure conduct of training and monitor and evaluate the outcome of training on a national level. A National Gold Standard Benchmark examiner shall be selected based on his/her experience in previous calibration sessions on periodontal condition. Dental Officers preferably Dental Public Health Specialists shall be selected and calibrated against the National Gold Standard and Benchmark. Those who have been calibrated and reached satisfactory results at the National level training session shall be the State Benchmark Examiners.

Their role is to :

- Plan and conduct standardization and calibration of second tier of examiners at state level.
- Ensure all examiners meet the minimum requirements of Kappa scores (0.6) and Percentage Agreement (75%). Recalibration shall be done where necessary; and
- Monitor and evaluate training sessions and submit reports to the Oral Health Division.

State Level Training

The State Benchmark Examiners will conduct standardization and calibration sessions at state level. Each district team will involve 2 dental officers and 1 dental nurse per district. Those who have been calibrated at the State level training session shall be the District Benchmark Examiners.

Their role is to :

- Plan and conduct training of all clinical operators (dental officers and dental nurses) at the district
- Ensure all clinical operators meet the minimum requirements of percentage agreement (75%). Recalibration shall be done where necessary, and
- Carry out random checks on the use of the Gingival Index for Schoolchildren

**GINGIVAL STATUS USING 7 SURFACES
OF SIX INDEX TEETH AMONG SCHOOLCHILDREN
STANDARDISATION AND CALIBRATION OF EXAMINERS**

DATE :

SESSION :

EXAMINER CODE :

PATIENT CODE :

B. 7 SURFACES INDEX TEETH

**INTER-EXAMINER
BENCHMARK**

	0	1	2	3
0				
1				
2				
3				

KAPPA :

% AGREEMENT :

**INTRA-EXAMINER
1st EXAMINATION**

	0	1	2	3
0				
1				
2				
3				

2nd
EXAMINATION

KAPPA :

% AGREEMENT :

**GINGIVAL STATUS USING 7 SURFACES
OF SIX INDEX TEETH AMONG SCHOOLCHILDREN
STANDARDISATION AND CALIBRATION OF EXAMINERS**

DATE :
SESSION :
EXAMINER CODE :

B. 7 SURFACES INDEX TEETH

PATIENT CODE :
1st EXAM

0	0	1	2	3
1				
2				
3				

2 nd EXAM

PATIENT CODE :
1st EXAM

0	0	1	2	3
1				
2				
3				

2 nd EXAM

PATIENT CODE :
1st EXAM

0	0	1	2	3
1				
2				
3				

2 nd EXAM

PATIENT CODE :
1st EXAM

0	0	1	2	3
1				
2				
3				

2 nd EXAM

PATIENT CODE :
1st EXAM

0	0	1	2	3
1				
2				
3				

2 nd EXAM

PATIENT CODE :
1st EXAM

0	0	1	2	3
1				
2				
3				

2 nd EXAM

PATIENT CODE :
1st EXAM

0	0	1	2	3
1				
2				
3				

2 nd EXAM

PATIENT CODE :
1st EXAM

0	0	1	2	3
1				
2				
3				

2 nd EXAM

4.2 Planning of Training Sessions

State/District Coordinators may be the state/district examiners or other suitable dental officers or dental nurses. Their role is to :

- Liaise with National/State Level Education Department for permission to conduct calibration sessions in schools (example as in **Appendix 2**)
- Identify a suitable schools for calibration
- Select subjects for the calibration exercise and ensure consent obtained from parents (**Appendix 3**)
- Schedule subjects for the calibration exercise
- Identify Dental Surgery Assistants as recorders and train them on procedures and formats
- Arrange logistics (e.g transport of examiners) where necessary
- Provide support to the calibration team and examiners
- Supply portable equipment (e.g. Desks and chairs for the subjects)
- Arrange further dental appointments for subjects if necessary
- Ensure the availability of items other deemed necessary by the calibration teams for the smooth conduct of the calibration sessions.

4.3 Conduct of Standardisation and Calibration Sessions

- Examiners shall be exposed to the scoring criteria (Refer 4.5) with the aid of slides on gingival conditions. The scoring criteria is based on the present of gingivitis and calculus⁸.
- Before the start of the session, each subject shall be examined by the benchmark and/or the gold standard. There will then be a discussion to resolve differences in interpretation of the diagnostic criteria.
- For the National and State Level Training, 4 inter-examiner and 3 intra-examiner calibration sessions with 8 subjects in each session are recommended.
- Every examiner and subject shall be given a designated code
- The format for recording GIS is as in **Appendix 4 (Format A1-A5) for National and State Level and (Format A1_Dist-A3_Dist) for District Level**
- Portable dental chairs shall be used for the subjects to be examined. A small table shall be provided to place the examination kits. This table will be placed on the left of the patient.
- Other necessary supplies like gloves, face masks, gauze etc. will be placed at a central supply table in the room. The portable Waldman light shall be used for the examination. Cotton pellets may be used to remove food debris where necessary.

⁸ White D.J.: Dental calculus, recent insights into occurrence, formation, prevention, removal and oral health effects of supragingival and subgingival

4.4 Examination Procedures

1. Examine all index teeth 16, 11, 26, 36, 31 and 46 and their specified surfaces as below

Buccal 16	Labial 11	Buccal 26
46	31	36
Lingual	Labial, Lingual	Lingual

2. Examine only fully erupted teeth.
A tooth is deemed to be fully erupted only when the occlusal or incisal surfaces have reached the occlusal plane.
3. Do not examine teeth which have been indicated for extraction.
4. Examine Alternative teeth
If an index tooth is missing or not fully erupted. Examine the adjacent same tooth type.

Eg: If 6 (first molar) is not present, examine the adjacent 7 (second molar)
If 7 is not present, record the highest score of the adjacent 1st or 2nd premolar or the adjacent Es or Ds whichever is present.

Eg: If 11 or 51 is not present, examine the contralateral tooth i.e 21 or 61
If 11/51 and 21/61 are both missing, record the highest score of the remaining teeth within the same sextant.

Where there are no remaining teeth in the sextant or only one tooth is present, exclude the sextant (Record a code X)

5. Examine the index teeth for obvious presence of calculus and/or gingivitis by visual examination. A cotton pellet may be used to remove food debris.
6. Look for any signs of gingivitis (redness, ulceration, oedema, glazing and bleeding)
7. Look for the presence of calculus on the designated surfaces of the index teeth, or their substitutes, using a mirror.
8. When in doubt, record the lower score.

4.5 Scoring Criteria for Index teeth

0	=	No gingivitis, No calculus
1	=	No gingivitis, With calculus
2	=	With gingivitis, No calculus
3	=	With gingivitis, With calculus

GINGIVAL STATUS USING 7 SURFACES OF SIX INDEX TEETH AMONG SCHOOLCHILDREN STANDARDISATION AND CALIBRATION OF EXAMINERS

DATE :
SESSION :
EXAMINER CODE :

7 SURFACES INDEX TEETH

PATIENT CODE :
BENCHMARK

	0	1	2	3
EXAMINER	0			
	1			
	2			
	3			

PATIENT CODE :
BENCHMARK

	0	1	2	3
EXAMINER	0			
	1			
	2			
	3			

PATIENT CODE :
BENCHMARK

	0	1	2	3
EXAMINER	0			
	1			
	2			
	3			

PATIENT CODE :
BENCHMARK

	0	1	2	3
EXAMINER	0			
	1			
	2			
	3			

PATIENT CODE :
BENCHMARK

	0	1	2	3
EXAMINER	0			
	1			
	2			
	3			

PATIENT CODE :
BENCHMARK

	0	1	2	3
EXAMINER	0			
	1			
	2			
	3			

PATIENT CODE :
BENCHMARK

	0	1	2	3
EXAMINER	0			
	1			
	2			
	3			

PATIENT CODE :
BENCHMARK

	0	1	2	3
EXAMINER	0			
	1			
	2			
	3			

**GINGIVAL STATUS USING 7 SURFACES
OF SIX INDEX TEETH AMONG SCHOOLCHILDREN
STANDARDISATION AND CALIBRATION OF EXAMINERS**

DATE :
SESSION :

EXAMINER CODE :
PATIENT CODE :

B. 7 SURFACES INDEX TEETH

1. Periodontal Conditions

0 =	No gingivitis No Calculus
1 =	No gingivitis With Calculus
2 =	With gingivitis No Calculus
3 =	With gingivitis With Calculus
X =	Excluded Sextant

TEETH (SURFACES)

EXAMINER

	16(buccal)	11(labial)	26(buccal)	36(lingual)	31(labial)	31(lingual)	46(lingual)
1st Examination							

	16(buccal)	11(labial)	26(buccal)	36(lingual)	31(labial)	31(lingual)	46(lingual)
2nd Examination							

INTER-EXAMINER

1st Examination

	0	1	2	3
0				
1				
2				
3				

GIS Score

4.6 GIS Score

The highest score among all the scores for the index teeth will be the GIS Score for the subject

*However, if there is a combination of score 1 and 2 among index teeth , then the GIS score is 3 (gingivitis and calculus present)

Table 1 : Example of GIS Scores

	Index teeth						GIS Score
	16	11	26	36	31	46	
Index score	0	0	0	0	0	0	0
	1	0	0	1	1	1	1
	0	2	2	0	0	2	2
	0	3	3	0	0	0	3
	1	0	2	2	1	0	3*
	0	1	2	3	3	2	3

4.7 Data Management and Analysis

4.7.1 Recording Formats

The formats used for training at National and State levels are in **Formats A1-A5** and District levels are in **Formats A1_Dist – A3_Dist**

4.7.2 Results of Calibration

For the national and state level calibration exercise, the Kappa Score and Percentage Agreement for each examiner shall be calculated.

If the kappa score is less than 0.6 and percentage agreement is less than 75%, recalibration shall be done.

While for district level calibration exercise, only Percentage Agreement for each examiner shall be calculated. If the Percentage Agreement is less than 75%, recalibration shall be done.

5 RESOURCES

Equipment and instruments are as listed in **Appendix 5**. Budget estimates for the conduct of the exercise is as in **Appendix 6**. This does not include estimations for travel, accommodation and other expenses.

6 TIMELINE

All trainers need to be trained by end of September 2013 (**Appendix 7**).

7 MONITORING AND EVALUATION

All benchmark examiners (National and State) must calibrate themselves at least once yearly. Reports shall be submitted to the Oral Health Division using format as in Appendix A.

8 CONCLUSION

This Standardization and Calibration of trainers is necessary to ensure all field operators (Dental Officers and Dental Nurses) are trained so as to minimize variability to ensure valid and reliable data. It is hoped that this protocol will be a useful guide for all Training of Trainers for GIS in the future.

**GINGIVAL STATUS USING 7 SURFACES
OF SIX INDEX TEETH AMONG SCHOOLCHILDREN
STANDARDISATION AND CALIBRATION OF EXAMINERS**

DATE :
SESSION :

EXAMINER CODE :
PATIENT CODE :

B. 7 SURFACES INDEX TEETH

1. Periodontal Conditions

0 =	No gingivitis No Calculus
1 =	No gingivitis With Calculus
2 =	With gingivitis No Calculus
3 =	With gingivitis With Calculus
X =	Excluded Sextant

TEETH (SURFACES)

BENCHMARK

16(buccal)	11(labial)	26(buccal)	36(lingual)	31(labial)	31(lingual)	46(lingual)

EXAMINER

	16(buccal)	11(labial)	26(buccal)	36(lingual)	31(labial)	31(lingual)	46(lingual)
1st Examination							

INTER-EXAMINER

BENCHMARK

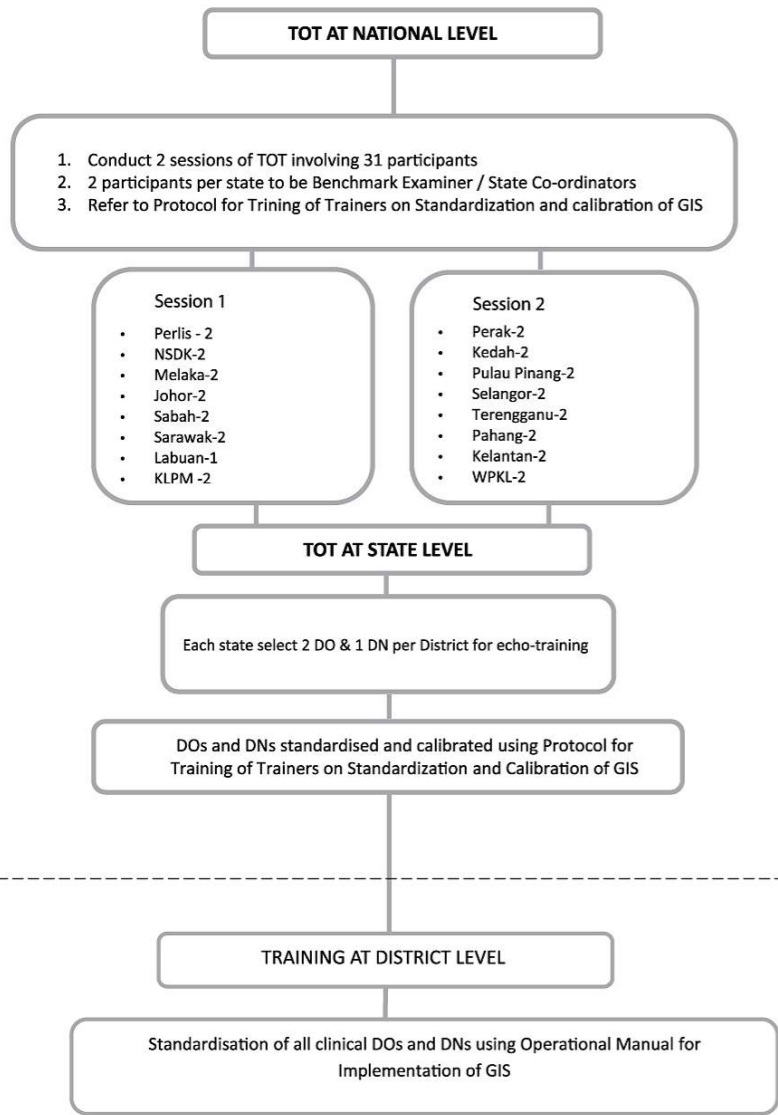
	0	1	2	3
0				
1				
2				
3				

GIS Score

APPENDIX 4
(FORMS FOR CALIBRATION)

APPENDICES

FLOW CHART FOR GISSTANDARDIZATION AND CALIBRATION



Dr: (untuk diisi oleh koordinator negeri)

Tempat bertugas :

Nombor telefon :

TERIMA KASIH ATAS KERJASAMA ANDA

*Bahagian Kesihatan Pergigian
Kementerian Kesihatan Malaysia
Jun 2013*

Saya telah membaca dan memahami kandungan maklumat berkenaan sesi kalibrasi status gingiva murid-murid sekolah yang akan diikuti oleh anak saya.

.....
(Tandatangan ibu/bapa/penjaga)

Tarikh :

.....
(Tandatangan Saksi)

Tarikh :

**MAKLUMAT BERKENAAN
SESI KALIBRASI STATUS GINGIVA MURID-MURID SEKOLAH**

Pengenalan

Dengan hormatnya dimaklumkan Bahagian Kesihatan Pergigian, Kementerian Kesihatan Malaysia sedang menjalankan satu sesi kalibrasi untuk mempertingkatkan kualiti perkhidmatan kesihatan pergigian kepada murid-murid sekolah. Sehubungan ini sila baca penerangan mengenai sesi kalibrasi ini dengan teliti dan diharapkan ianya dapat membantu tuan/puan membuat keputusan untuk membenarkan anak tuan/puan/jagaan menyertai sesi kalibrasi ini.

Soalan 1: Apakah yang anda perlu buat?

Sekiranya anda bersetuju untuk mengambil bahagian dalam sesi kalibrasi ini, anda perlu:

- a) memberi persetujuan anda secara bertulis dalam borang yang akan diberi kepada anda;
- b) memberi kerjasama untuk pemeriksaan mulut anak anda oleh Pegawai Pergigian. Anak anda akan diperiksa oleh lapan orang Pegawai Pergigian.

Soalan 2: Apakah doktor akan buat?

Sekiranya anda bersetuju untuk mengambil bahagian dalam sesi kalibrasi ini, Pegawai Pergigian akan

- a) memeriksa mulut dan gigi anak anda serta;
- b) memberi surat rujukan kepada anak anda untuk mendapat rawatan lanjutan di klinik pergigian kerajaan sekiranya anda memerlukan rawatan. Tiada rawatan pergigian diberi oleh Pegawai Pergigian semasa sesi ini.

Soalan 3: Apakah risiko saya dalam sesi kalibrasi ini?

Tiada risiko untuk anak anda dalam sesi kalibrasi ini. Sesi kalibrasi ini dijalankan dengan amalan higien yang terkawal dan hanya bahan serta peralatan pemeriksaan sekali guna sahaja yang akan digunakan untuk pemeriksaan.

Soalan 4: Apakah faedah sesi kalibrasi ini?

Kami berharap dengan penyertaan anak anda dalam sesi kalibrasi ini, keperluan anda dapat diambil kira dalam perancangan perkhidmatan pergigian yang lebih sempurna ke arah gigi sepanjang hayat.

Soalan 5: Adakah segala maklumat peribadi saya sulit dalam sesi kalibrasi ini?

Pegawai Pergigian yang memeriksa anak anda akan mencatat segala maklumat berkaitan dalam Borang Sesi Kalibrasi. Segala maklumat yang dicatat adalah dianggap sulit dan akan digunakan untuk tujuan sesi kalibrasi ini sahaja.

Soalan 6: Siapakah boleh saya hubungi sekiranya saya ingin tahu lebih lanjut tentang sesi kalibrasi ini ?

Sekiranya anda ingin tahu lebih lanjut tentang sesi kalibrasi ini, anda boleh menghubungi pegawai berikut:

Sesi Kalibrasi Status Gingiva



BAHAGIAN KESIHATAN PERGIGIAN
KEMENTERIAN KESIHATAN MALAYSIA
ARAS 5, BLOK E10, KOMPLEKS B
PUSAT PENTADBIRAN KERAJAAN PERSEKUTUAN
62590 W.P PUTRAJAYA

TEL 03 - 88838888 (OPERATOR)
03 - 88834215
03 - 88834216
FAX 03 - 88886133

(15) DKM.KKM-60(10/2)/
17 April 2013

Pengarah
Bahagian Pengurusan Sekolah Harian
Kementerian Pelajaran Malaysia
Aras 3 & 4, Blok E2, Kompleks E,
Pusat Pentadbiran Kerajaan Persekutuan,
62604 Putrajaya

Tuan/puan

**MEMOHON KEBENARAN MENJALANKAN SESSI KALIBRASI STATUS GINGIVA
MURID-MURID SEKOLAH DI NEGERI SEMBILAN DAN TERENGGANU**

Dengan hormatnya saya merujuk kepada perkara di atas.

2. Sukacitanya dimaklumkan bahawa Bahagian Kesihatan Pergigian, Kementerian Kesihatan Malaysia (KKM) akan menjalankan sesi latihan kalibrasi *Training of Trainers Assessment of Gingival Status For School Children*. Sesi latihan yang akan dijalankan hanya melibatkan pemeriksaan mulut sahaja, menggunakan cermin dan prob dimana tiada sebarang rawatan akan dilakukan.

3. Untuk makluman tuan, sesi latihan ini bertujuan untuk meningkatkan kualiti penyampaian perkhidmatan pergigian kepada murid-murid sekolah. Latihan ini dijangka dijalankan pada bulan Jun dan Julai 2013.

4. Bagi tujuan tersebut, Bahagian ini amat berbesar hati sekiranya mendapat kerjasama daripada tuan untuk memberi kebenaran menjalankan sesi latihan ini di **Sekolah Menengah Tengku Ampuan Durah, Seremban, Negeri Sembilan dan Sekolah Menengah Bukit Tunggal, Kuala Terengganu, Terengganu** melibatkan anggaran sejumlah 160 orang murid (80 orang setiap sekolah).

(Sila catatkan rujukan surat ini apabila menjawab)

5. Jika terdapat sebarang pertanyaan lanjut, sila hubungi Dr Cheng Lai Choo di talian 03-8883 4253 atau Dr Nuryastri bt Md Mustafa di talian 03-8883 4234 atau alamat emel ke drlccheng@moh.gov.my / dryastri@moh.gov.my kebenaran dan kerjasama tuan amatlah dihargai dan didahului dengan ucapan terima kasih.

Sekian, terima kasih,

“BERKHIDMAT UNTUK NEGARA”

Saya yang menurut perintah,



(DR. KHAIRIYAH BINTI ABD. MUTTALIB)
Pegarah Kanan Kesihatan Pergigian
Kementerian Kesihatan Malaysia

Tarikh : Mei 2013

Nama ibu/bapa/penjaga :

Alamat :

Pegarah Kanan
Bahagian Kesihatan Pergigian
Kementerian Kesihatan Malaysia
Aras 5 Blok E 10 Kompleks E
Pusat Pentadbiran Kerajaan Persekutuan
62590 Putrajaya

Tuan,

KEBENARAN MENJALANKAN PEMERIKSAAN MULUT UNTUK SESI KALIBRASI STATUS GINGIVA

Saya.....(nama) no.KP.....
adalah ibu/bapa/penjaga kepada(nama anak)
memberi/ tidak memberi kebenaran kepada pihak tuan untuk menjalankan pemeriksaan mulut
ke atas anak saya.

Sekian, terima kasih.

“BERKHIDMAT UNTUK NEGARA”

Yang benar,

.....