NATO STANDARD

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DENTAL FITNESS STANDARDS FOR MILITARY PERSONNEL AND THE NATO DENTAL FITNESS CLASSIFICATION SYSTEM

Edition A Version 2

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NATO LETTER OF PROMULGATION

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1. The enclosed Allied Medical Publication AMedP-4.4, Edition A, Version 2 DENTAL FITNESS STANDARDS FOR MILITARY PERSONNEL AND THE NATO DENTAL FITNESS CLASSIFICATION SYSTEM, which has been approved by the nations in the Medical Standardization Board, is promulgated herewith. The agreement of nations to use this publication is recorded in STANAG 2466.

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Edvardas MAŽEIKIS Major General, LTUAF Director, NATO Standardization Office

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RECORD OF RESERVATIONS

CHAPTER	RECORD OF RESERVATION BY NATIONS
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Database for the complete list of existing reservations.

RECORD OF SPECIFIC RESERVATIONS

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CHAPTER 1 INTRODUCTION

1.1. AIM

The aim of this Allied Medical Publication (AMedP) is to create standards for dental fitness among military personnel of NATO countries and a corresponding dental fitness classification system such that the number of dental emergencies in the field can be reduced to the lowest level possible. This sets the basis for interoperability.

1.2. GENERAL

Experience confirms that dental disorders reduce the operational capability and effectiveness of those affected. Routine dental examinations, preventative measures and treatment programmes can reduce the risk of personnel experiencing dental disorders on deployments.-Such programmes have been successful in reducing the incidence of dental problems requiring analgesic or antibiotic therapy and absence from duty and evacuation to field dental facilities. With an increase in allied and combined operations there is the potential for dentally unfit individuals to become a burden to allied dental facilities. A standardized approach to dental fitness will significantly reduce this problem.

CHAPTER 2 DETAILS OF THE AGREEMENT

2.1. AGREEMENT

Participating nations agree to:

a. Adopt the definitions of dental fitness and the system of classification of dental fitness outlined in this AMedP.

2.2. DEFINITIONS

The lay definition of dental fitness is given at Annex A.

2.3. IMPLEMENTATION

This AMedP is considered implemented when a nation has issued the necessary orders or instructions to the forces concerned, putting the principles and protocols of this agreement into effect

ANNEX A LAY DEFINITION AND DEFINITION FOR THE POLICY OF NATO COUNTRIES MILITARY DENTAL SERVICES

A.1. LAY DEFINITION

1. The term "DENTALLY FIT" (Dental Fitness Class 1 and 2) describes a state of oral health which, once attained and maintained, ensures that Service personnel are fit to carry out all military duties with minimal risk of lost time or effectiveness attributable to dental causes.

DEFINITION FOR THE POLICY OF NATO COUNTRIES MILITARY DENTAL SERVICES

2. The award of a "DENTALLY FIT" categorisation for uniformed personnel is appropriate where:

a. There is no evidence of the progression of monitored carious lesions, or of active caries extending into dentine. Care is to be exercised when interpreting radiographic data involving lesions extending to the amelo-dentinal junction.

b. There are no teeth present with signs or symptoms of irreversible pulpal damage. Pulp capping or inadequate endodontic treatment should not necessarily negate dental fitness provided there is good evidence of clinical and radiographic stability. Direct pulp capping is usually unacceptable in personnel subject to barometric pressure changes.

c. There is no evidence of active periodontal disease that is beyond control by self care.

d. There are no periodontally involved teeth with associated apical involvement which are untreated, and when treated do not show both clinical and radiographic signs of resolution.

e. There is no significant tooth mobility. In particular, pathology which interferes with speech or occupational function such as wearing of oxygen masks or diving mouthpieces.

f. There are no permanent restorations which are cracked, loose or leaking and which require operative intervention. There are no temporary restorations present.

g. The occlusion should be stable with speech and function uncompromised. Excessive parafunctional activity should be considered in the light of potential long term damage and may preclude an award.

h. There should be no history of recent unresolved problems diagnosed as of probable dental origin.

i. Dental prostheses, including implants, should be retentive and stable in function commensurate with the occupational commitment of the individual.

j. The presence of third molars in communication with the oral cavity which are unlikely to erupt into functional occlusion and with a history of repeated periocoronal infection may preclude the award of the dentally fit category. Where the prognosis is unclear, individual occupational and operational commitments must be taken into consideration. In such cases the advice of a consultant oral surgeon can be sought.

k. There are no functionless roots in communication with the oral cavity. Buried roots with no associated pathology may be left in situ and frequency of review established.

I. The soft tissues are free from abnormality. Where potentially damaging habits exist, counselling is to be given, and a revised frequency of review considered.

3. Subject to any change in clinical status, the award of the "DENTALLY FIT" category is normally valid for a period of twelve months, but may be set at any period between 3 and 24 months depending on the previous dental history of the individual patient and National Guidelines on dental recall. Only patients categorized as Class 1 may be given a recall date in excess of 12 months. Unless considered necessary by the examining dental officer, screening radiographic examinations should comply with the criteria laid down in the policies of individual NATO countries.

ANNEX B DENTAL FITNESS CLASSIFICATION SYSTEM

DENTAL FITNESS CLASS 1

1. Military personnel who require no dental treatment. (On examination, no further dental appointments are given or recommended, for example if there are missing teeth and no replacement is recommended, the patient is in Class 1). The risk of a dental emergency within the dental recall period is considered to be low.

DENTAL FITNESS CLASS 2

2. Military personnel who may require dental treatment but whose existing dental condition is unlikely to result in a dental emergency within 12 months.

DENTAL FITNESS CLASS 3

3. Military personnel who require dental treatment to correct a dental condition that is likely to cause a dental emergency within 12 months.

Class 3 includes patients currently under care for a dental condition that, if the treatment is not completed, the patient would likely experience a dental emergency. ("Potential emergency patients")

DENTAL FITNESS CLASS 4

4. Military personnel who require a periodic dental examination, have an undetermined dental status, or whose dental records are missing or incomplete. Class 4 patients are not considered deployable.

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