

CRA Form

First name: _____ Last name: _____ Date: _____

Adults and Children 6+

Risk Factors *Circle one:*

PATIENT USE

Saliva		
Do you take medications daily? If so, how many?	NO	YES (_____)
Do you feel as though you have a dry mouth at any time of the day or night?	NO	YES
Diet		
Do you drink liquids other than water more than 2 times daily between meals?	NO	YES
Do you snack daily between meals?	NO	YES
Biofilm		
Do you notice plaque build-up on your teeth between brushings?	NO	YES

Disease Indicators *Circle one:*

CLINICIAN USE ONLY

New/Progressing visible cavitations?	NO	YES
New/Progressing approximal radiographic radiolucencies?	NO	YES
New/Active white spot lesions?	NO	YES
Is decay history a concern?	NO	YES

Risk Identification *Transfer information above to boxes below to determine risk.*

Healthy	+Risk Factors	+Disease Indicators
1 - Low Risk	2 - Moderate Risk	3 - High Risk
CDT Code D0601	CDT Code D0602	CDT Code D0603

Product Recommendation Guide

1 - Low Risk	2 - Moderate Risk	3 - High Risk
 <p data-bbox="215 835 516 894">CTx12 Kit or CTx4 Gel 1100 (optional)</p>	 <p data-bbox="755 856 865 884">CTx21 Kit</p>	 <p data-bbox="1195 856 1308 884">CTx36 Kit</p>
<p data-bbox="175 968 267 999">Brush</p> <p data-bbox="175 1005 563 1037">CTx4 Gel 5000 or CTx4 Gel 1100</p> <ul data-bbox="175 1068 548 1241" style="list-style-type: none"> • Replaces current toothpaste • Brush twice daily with a pea-sized amount until product is gone • Avoid eating or drinking for 30 minutes after use 	<p data-bbox="620 968 755 999">Rinse 1st</p> <p data-bbox="620 1005 758 1037">CTx3 Rinse</p> <ul data-bbox="620 1068 976 1142" style="list-style-type: none"> • Use daily until product is gone • Swish for 60 seconds with 10 mL <p data-bbox="620 1213 768 1245">Brush 2nd</p> <p data-bbox="620 1251 800 1283">CTx4 Gel 5000</p> <ul data-bbox="620 1314 992 1493" style="list-style-type: none"> • Replaces current toothpaste • Brush twice daily with a pea-sized amount until product is gone • Avoid eating or drinking for 30 minutes after use 	<p data-bbox="1066 968 1201 999">Rinse 1st</p> <p data-bbox="1066 1005 1338 1037">CTx4 Treatment Rinse</p> <ul data-bbox="1066 1068 1427 1241" style="list-style-type: none"> • Use daily until product is gone • Mix 5 mL of Solution A with 5 mL of Solution B in the provided mixing cup • Swish for 60 seconds <p data-bbox="1066 1314 1214 1346">Brush 2nd</p> <p data-bbox="1066 1352 1247 1383">CTx4 Gel 5000</p> <ul data-bbox="1066 1415 1440 1593" style="list-style-type: none"> • Replaces current toothpaste • Brush twice daily with a pea-sized amount until product is gone • Avoid eating or drinking for 30 minutes after use