**Cost-Benefit Analysis of Providing Fluoride Varnish in a Pediatric Primary Care Office**

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**Purpose**: Early childhood caries is a serious health problem in children around the world. In the United States it has surpassed asthma as the most chronic disease of childhood. National recommendations from the American Academy of Pediatrics (AAP) and the United States Preventive Services Task Force (USPSTF), among others, call for the provision of fluoride varnish in the pediatric primary care setting but many barriers exist to the implementation of such a service in this setting. Knowledge of costs and benefits is one such barrier.

**Methods**: A cost-benefit analysis of the implementation of a fluoride varnish program in a pediatric primary care office located in Volusia County, Florida was conducted with the assistance of the office manager and a nurse practitioner using data retrieved from the electronic health record (EHR) program.

**Findings**: Using Microsoft® ExCel to calculate estimated mean reimbursement data from the top insurers in this office for this service, the data demonstrates a positive annual net income of $4,498 to $26,775 with an average potential annual net income of $15,637.

**Discussion**: Early childhood caries is a costly disease that has now surpassed asthma as the most prevalent chronic disease of childhood. Evidence has shown the efficacy of fluoride in the prevention and treatment of early childhood caries. As nurse practitioners, we are focused on a holistic approach to the care and well-being of our patients as well as the reduction in health disparities due to race, ethnicity, and socioeconomic status. With the scarce availability of pediatric dentists in the U.S. and the prevalence of early childhood caries, it is our duty to follow nationally recommended guidelines for the provision of fluoride varnish treatments during well-child check-ups in the pediatric primary care setting. The data from this cost-benefit analysis shows a positive financial benefit as an incentive to implementation of a fluoride varnish program in this primary care pediatric office. The adoption of this standard of care would likely be well received by parents due to the convenience of receiving a fluoride varnish treatment during an already scheduled well-child check-up. This project analyzed the financial costs and benefits of a fluoride varnish program in the pediatric primary care setting to both the patient and the provider. The data presented serves as a solid foundation for a future quality improvement project to implement such a program.