



PUNONGHIMPILAN TANOD BAYBAYIN NG PILIPINAS  
(Headquarters Philippine Coast Guard)  
COAST GUARD DENTAL SERVICE  
139 25<sup>th</sup> Street, Port Area  
1018 Manila

06 December 2012

HPCG/ CGDS

STANDARD OPERATING PROCEDURE

NUMBER: 14-12

DENTAL QUALIFICATIONS STANDARD FOR PCG COMMISSIONSHIP, LATERAL  
ENTRY AND ENLISTMENT

I. PURPOSE: To stipulate policies and procedures governing the recruitment process of Philippine Coast Guard regarding Dental Health Fitness of the applicants.

II. SCOPE: This policy will be observed nationwide in every recruitment process of Uniformed Personnel of the Philippine Coast Guard.

III. OBJECTIVE: To provide guidelines for dental officers in conducting dental examination as part of the general physical fitness screening process for applicants seeking entry into the service of the Philippine Coast Guard.

IV. DEFINITION OF TERMS:

- (1) Dental Arch - is a curved structure formed by teeth and other surrounding structure.
- (2) Opposing Teeth\_– Upper and lower teeth that comes in contact with each other upon biting.
- (3) Anterior Teeth - The six (6) front teeth, the four (4) incisors and two (2) canines in every arch.
- (4) Posterior Teeth - The teeth which resides to the rear of the anterior teeth, the four (4) premolars and six (6) molars in every arch.
- (5) Dental Certificate - a written certification issued by the attending dentist after completion of the required dental treatment.
- (6) Serviceable teeth- healthy teeth, without cavities and mobility; properly treated or restored teeth.
- (7) Removable Partial Denture (RPD) – Type of dental prosthesis or a denture that can be readily inserted or removed by the patient.

(8) Fixed Partial Denture FPD/ Fixed Bridge Work – Type of dental prosthesis which is non-removable, retained by an attachment and is usually cemented and cannot be removed by the patient.

(9) Casted Clasp- the retentive part of a dental prosthesis, made of metal.

(10) Cleft palate / - non closure of the palatal sutures, thus forming an opening on the roof of the mouth connecting the sinuses usually affecting the speech and swallowing.

(11) Cleft Lip- a defect in lip formation or congenital cleft on the upper lip.

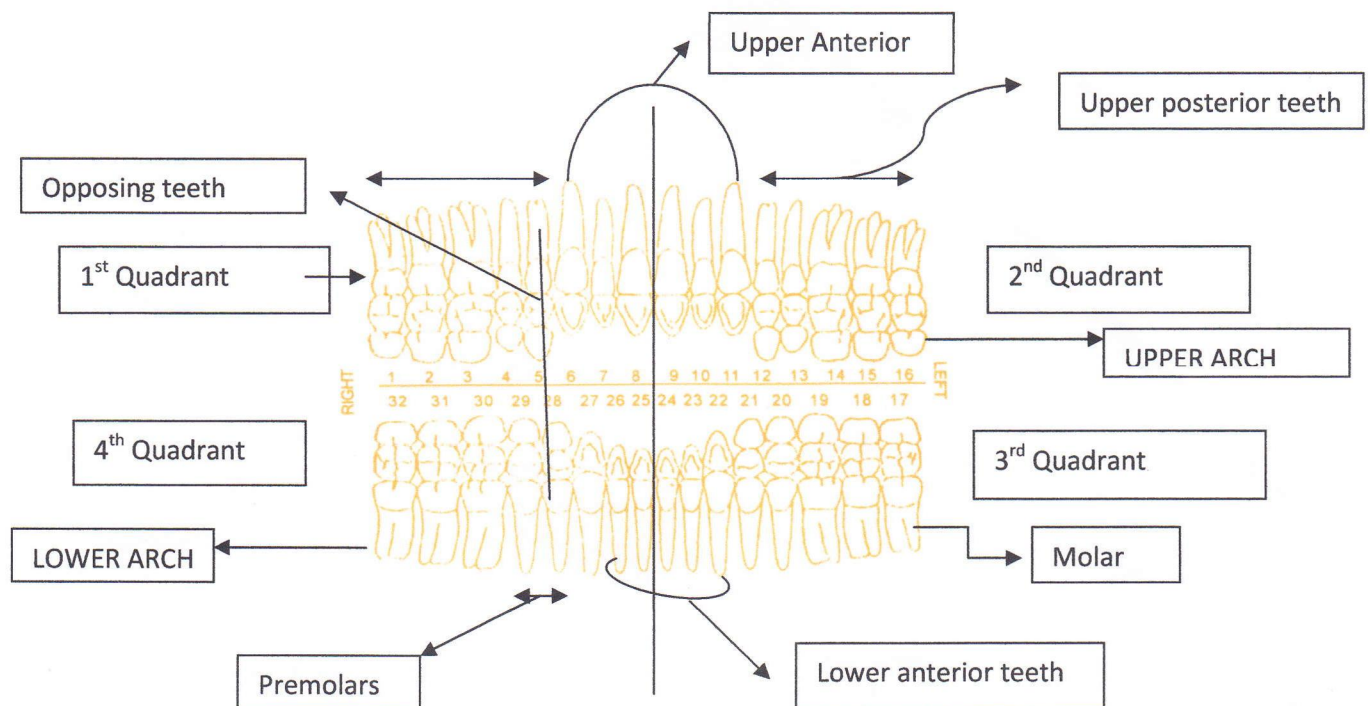
(12) Ankyloglossia (tongue-tied) – a congenital anomaly of the tongue in which the mucous membrane under the tongue is too short limiting the mobility of the tongue.

(13) Edentulous area- spaces created by single or multiple tooth extraction

(14) Temporary filling –non permanent filling for a carious tooth which is considered under observation

(15) Defective filling- a tooth filling with leaks, discoloration and usually with recurrent caries formation.

(16) Dental Caries – Tooth cavities



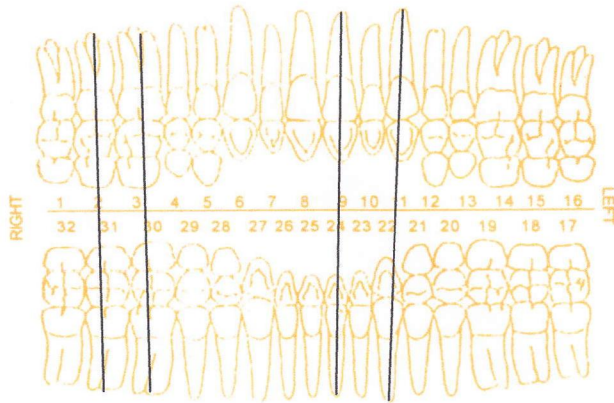


## V. POLICIES

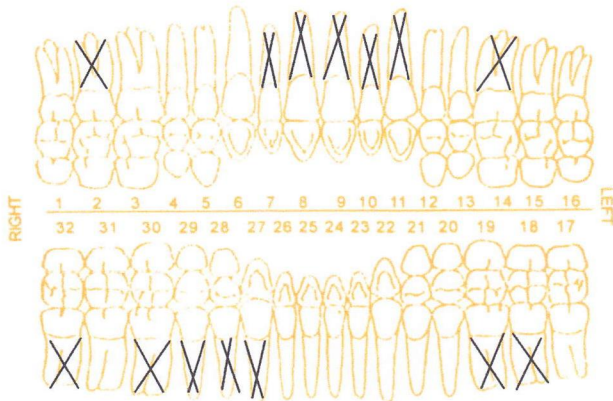
### 1. General Rule:

No applicant/candidate is qualified unless he has a minimum of *four (4) serviceably opposing posterior teeth* (molars and premolars) on each arches (Maxillary and Mandibular arch) and *two (2) serviceable incisor teeth* (Central, lateral and canines) on both arches *not necessarily opposing*.

Illustration:



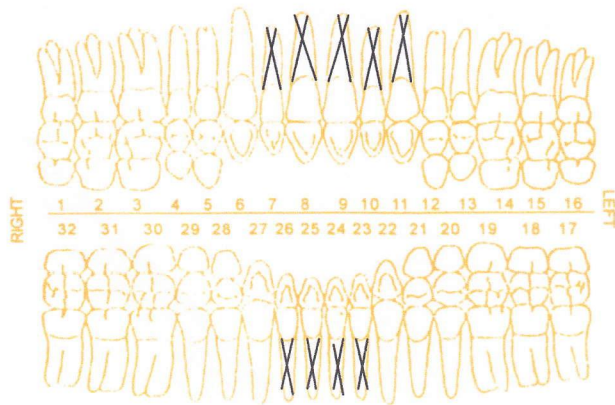
Opposing Teeth



Anterior and Posterior Disqualified



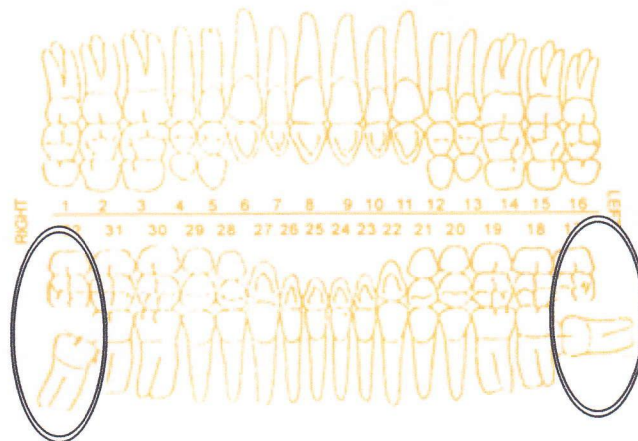
Posterior Disqualified



Anterior Disqualified

2. Considerations:

- a) In cases where an insufficiency of teeth noted on *posterior area*, it may be remedied by the *eruption of third molars*, a *radiograph (X-ray) of the third molar will be taken and forwarded with the Dental Radiographic Examination Report*. If a normal third molar properly positioned and developed is shown, it may be credited with possession of this tooth. In such cases, the report of the examination will carry an appropriate remark such as radiograph showing normally developed and erupting teeth.



- b) In cases of teeth insufficiencies affecting the *anterior area*, a *fixed bridgework* procedure will be acceptable as tooth/ teeth replacement, provided it is well designed and constructed.

3. Causes for Rejection/ Disqualification (DQ):

- a) Failure to meet the standard of minimum requirement as in the number of serviceable teeth present.
- b) Cleft palate- untreated or if treated but still affecting the speech.



- c.) Cleft Lip- untreated or if treated but still affecting the speech.
  - d) Ankyloglossia (tongue-tied) – untreated or if treated but still affecting the speech.
  - e) Diseases of the jaw with irregular structures such as cysts, tumors, chronic infections and malignances.
4. Dental Irregularities to Comply:
- a) Infected, Un-erupted tooth or Impacted Tooth – for extraction
  - b) Presence of noticeable anterior diastema. (spaces between anterior teeth)  
- to be closed by restoration or prosthesis
  - c) Edentulous area- can be remedied by a dental prosthesis – Removable Partial Denture (RPD) with casted clasp or Fixed Partial Denture (Fixed Bridge)
  - d) Caries formation, Temporary tooth filling – for permanent tooth filling
  - e) Defective filling- for permanent restoration

## VI. PROCEDURES

1. All applicant/candidate should secure a directive or the master list of authorized applicants from the O/ CG 1 or CG Medical Services before submitting themselves for dental examination.
2. The teeth and surrounding tissues will be examined by a Dental Officer. A Dental Health Record (PCG DS Form 2,) will be properly filled up. Sec I (1-5) of this form is the patients data, Sec II (6-15) are the details of the Dental Examination. On column #10 all missing teeth will be marked out with an "X" whether or not they are replaced by artificial dental prosthesis, all prosthetic dental appliances will be indicated on the opposite side of column 10 as remarks. All existing dental restoration / type of restoration will also be properly indicated.
3. All dental diseases and abnormalities will be indicated on column 11, if in case dental x-ray is deem necessary it will be indicated on column E. Column A will be use to indicate the status of calculus, periodontoclasia, stomatitis, gingivitis, dentures needed and the abnormalities of occlusion.
4. The applicant will be properly advised to comply on the treatment needed to correct all the dental findings that are indicated on column 11. A dental referral form will be given to the applicant and will be asked to submit a dental certificate from their attending dentist after the completion of the dental requirements indicated on the referral slip.

5. Upon submission of the dental certificate, the applicant will be post examined, his DS form will be updated with treatment done on column 12 as he/she will be considered Dentally Fit.

6. Admin personnel will consolidate all Cleared/ Approved DS form of Dentally Fit applicants and will post a list of applicants who passed the dental requirements.

7. All Cleared/Approved DS form of applicants will be forwarded to CG Medical Service and will be part of the final evaluation of applicants on their Physical exam. While DS form of applicants who were not able to satisfy the dental requirements will be marked as DQ (Disqualified) and will also be properly consolidated and forwarded to CG Medical Service for reference and final evaluation.

VII. RESPONSIBILITIES:

A. Commander, CG Dental Service shall be responsible for the dissemination and implementation of this policy in all CG Dental Service dental facilities.

B. CO/ OIC of CG Dental Service Operating Units shall ensure that:

1. This policy will be strictly observed in their respective units at all times.

2. Applicants or Candidates are considered Others (ref. SOP Nr 01-09) they are only authorized by the command to receive limited dental procedure such as dental check up and radiograph.

VIII. RECISSION:

All other policies consistent with this SOP are hereby rescinded.

IX. EFFECTIVITY:

This SOP shall take effect upon publication.

BY THE COMMAND OF REAR ADMIRAL TUASON JR PCG:

JOSELITO F DELA CRUZ  
CAPT PCG  
Chief of Coast Guard Staff, PCG

OFFICIAL:

  
ALGIER D BICAFRENTE  
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Coast Guard Adjutant