

### **Annex III: Dental Prerequisites Checklist**

Employees must bring copies of all dental documentation with them in a separate folder to the deployment center as part of their deployment packets.

\_\_\_ Completed [DD Form 2813](#), Report of Dental Exam, completed, signed by your dentist, to include their State License Number and dated within the last 12 months. Only employees whose Dental examination classifies them in Dental Fitness categories 1 or 2 (boxes 6(1) or 6(2) of DD Form 2813) are deployable. Employees classified in category 3 (box 6(3) a-f) are non-deployable and must have corrective dental action completed and the form completed indicating they are now Dental Fitness category 1 or 2.

\_\_\_ Copies of Panoramic radiograph used for dental fitness determinations. A copy of this x-ray should be maintained by your local health provided.

Orthodontic appliances do not preclude deployment eligibility provided they are evaluated for stability and inactivated through the use of passive holding arches and secured with stainless steel ties or other means prior to deployment.