

Oral Health Anticipatory Guidance

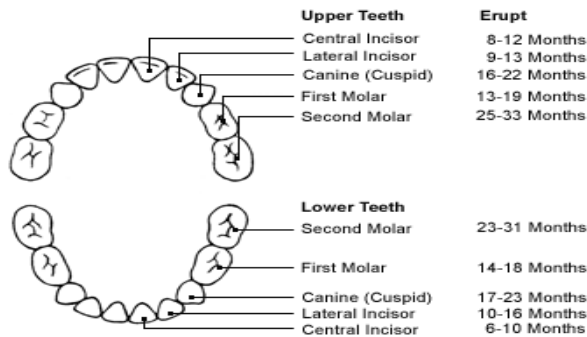
Newborn – 12 Months

The following topics should be discussed during routine well-child visits.

Tooth development:

1. Teething symptoms – irritable, drooling, diarrhea. Child can chew on clean, cold, wet washcloth to relieve symptoms.

Primary Teeth Eruption Chart



Fluoride status:

1. Systemic fluoride - Assess fluoride intake by 6 months by asking about water sources inside and outside the home. Well water should be tested prior to fluoride supplementation by the physician or dentist. Pre-paid water testing kits are available through some local health departments.
2. Topical fluoride – May use a rice-grain sized amount of fluoride toothpaste as soon as teeth have begun erupting.

Oral Hygiene:

1. Before tooth eruption, clean the infant's gums with a clean, damp cloth or very soft toothbrush and plain water after each feeding. Specially-designed brushes for infants are available in stores.
2. After the first tooth erupts, brush or wipe the teeth two times a day. Infants should have teeth brushed/wiped with a rice-grain sized amount of fluoride toothpaste, preferably in the morning and before bed. Lift the lip to brush at the gumline and to watch for signs of beginning decay.

Feeding Practices:

1. Breast-feeding reduces the risk of decay in infants.
2. Avoid testing the temperature of the bottle with the mouth, sharing spoons, or orally cleaning a pacifier or bottle nipple. These practices will transmit the decay-causing organisms from mother to child, via saliva.
3. DO NOT put the infant to sleep with a bottle with anything but water in it.
4. Avoid use of sippy cups with sugary beverages, when bottle to cup transition is made. Fruit juices are not to exceed 4 ounces per day. NO SODAS!!

Dental Care Services:

1. Make an appointment for the infant's first oral exam within 6 months of the eruption of the first primary tooth, and no later than age 12 months, thereby establishing a dental home. It is important to maintain healthy baby teeth to promote sound permanent dentition.

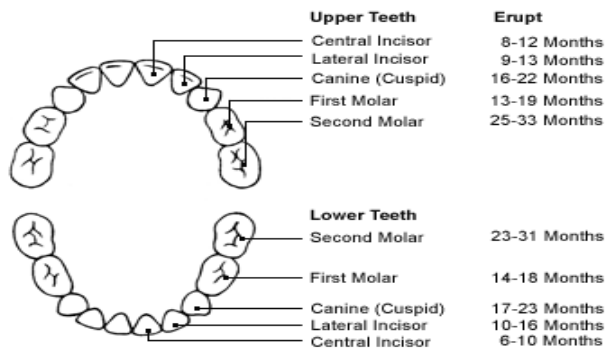
Oral Health Anticipatory Guidance 1 Year – 2 Years

The following topics should be discussed during routine well-child visits:

Tooth development:

1. Teething symptoms – irritability, drooling, diarrhea. Child can chew on clean, cold, wet washcloth to relieve symptoms.

Primary Teeth Eruption Chart



Fluoride Status:

1. Systemic fluoride - Ask parent about water sources. Always have well water tested prior to supplementation by physician or dentist.
2. Topical fluoride – May use a rice-grain sized amount of fluoride toothpaste, with parental supervision.

Oral Hygiene:

1. Parent should brush the child’s teeth twice daily, after breakfast and before bed. Brush with a rice-grain sized amount of fluoride toothpaste, only with parental supervision.
2. During brushing, parent should “lift the lip” to look for decay or other changes.

Feeding Practices:

1. Avoid sharing utensils to prevent transmission of bacteria.
2. DO NOT put the child to sleep with a bottle or sippy cup or allow frequent and prolonged bottle feedings with beverages containing sugar. This includes formula, breast milk, and fruit juices and other sugar-containing liquids.
3. Limit foods high in sugar. Sugary foods should be offered at mealtime only.
4. Drink fluoridated water to optimize systemic fluoride exposure.
5. Avoid frequent snacking. NO CANDY!! NO SODA!!

Dental Care Services:

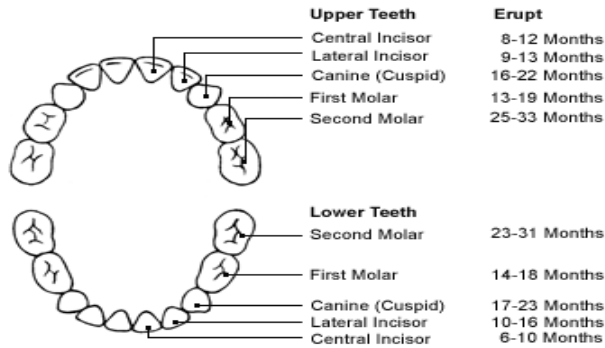
1. If the child has not been seen by a dentist, recommend the initial visit. Timely treatment of decayed primary teeth helps to promote healthy permanent teeth.

Oral Health Anticipatory Guidance 2 Years – 3 Years

The following topics should be discussed during routine well-child visits.

Tooth development:

Primary Teeth Eruption Chart



Fluoride status:

1. Systemic fluoride – Ask parent about water source. Always have well water tested prior to supplementation by physician or dentist.
2. Topical – May use a small pea sized amount of fluoride toothpaste, with parental supervision.
3. Fluoride helps prevent tooth decay.

Oral Hygiene:

1. For effective plaque removal, the parent should brush the child's teeth until they acquire fine motor skills – usually 7 - 8 years old. Child can 'help'. Use a pea-sized amount of fluoride toothpaste, making sure the child spits out excess.
2. Brush 2 times a day, after breakfast and before bed.

Feeding Practices:

1. Avoid sharing of utensils to prevent transmission of bacteria.
2. Avoid frequent snacking. Healthy snacks include cheese, fruit, vegetables, and yogurt. Every time the tooth is exposed to carbohydrates and simple sugars, there is an instant acid attack on the enamel, which initiates the demineralization of the enamel.
NO CANDY!! NO SODA!!
3. Milk and water are the best drink choices. Fruit juices are for mealtime only.
4. Drink fluoridated water to optimize fluoride exposure.

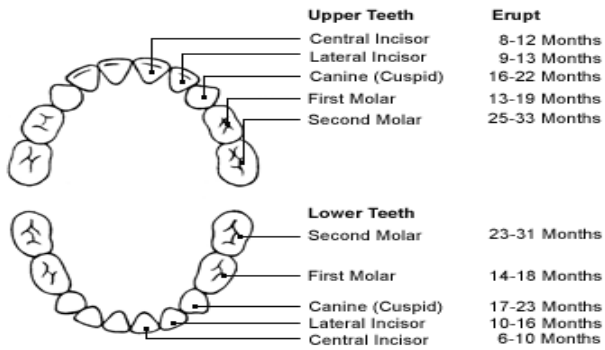
Dental Care Services:

1. Encourage dental visits at regular intervals, usually 6 months, as recommended by the dentist. Decayed baby teeth should be filled to promote sound permanent dentition. Some baby teeth are not exfoliated until age 11 – 12 years of age.

Oral Health Anticipatory Guidance Children with Special Health Care Needs (all ages)

Tooth development:

Primary Teeth Eruption Chart



Tooth eruption may be delayed in some children with special health care needs.

Fluoride status:

1. Systemic (ingested) fluoride – Ask parent about water source. Always have well water tested.
2. Topical (directly on teeth) – Under 2 years old use a rice grain-sized amount of toothpaste, with supervision. Over 2 years, use a pea-sized amount of toothpaste, with supervision.
3. Fluoride helps prevent tooth decay.

Oral Hygiene:

1. For effective plaque removal, the parent should brush the child's teeth until they acquire fine motor skills – usually 5-6 years old, but varies with children who have special health care needs. Child can 'help'. Use very small amount of toothpaste.
2. Brush 2 times a day, after breakfast and before bed.

Feeding Practices:

1. Avoid sharing of utensils (forks, spoons, straws, etc.) to prevent transmission of bacteria.
2. Avoid frequent snacking. Healthy snacks include cheese, fruit, vegetables, and yogurt. Every time the tooth is exposed to carbohydrates and simple sugars, there is an instant acid attack on the teeth, which leads to tooth decay.
3. Milk and water are the best drink choices. Fruit juices are for mealtime only.

Dental Care Services:

1. Encourage routine dental visits, usually every 6 months, as recommended by the dentist. Decayed baby teeth should be filled for a strong healthy mouth. Some baby teeth are not lost until age 11 – 12 years of age or longer. Baby teeth hold the space for permanent teeth.

Age

Children Under 2 Years

Children 2-6 Years

Toothpaste

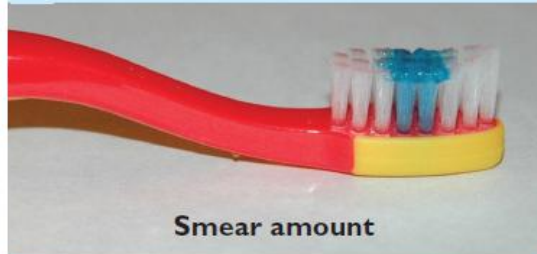


Photo courtesy of Jason Sewell/flickr

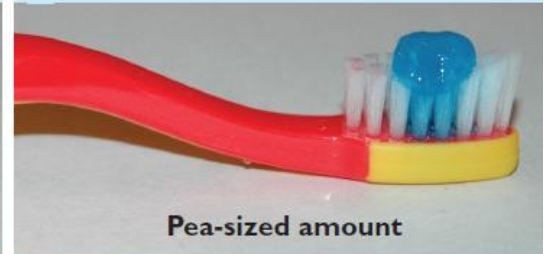


- Encourage parents and caregivers to take an active role in brushing their children's teeth once the first tooth erupts
- Educate parents and caregivers on proper fluoride toothpaste use
- Brush children's teeth with fluoride toothpaste twice daily
- Use a smear of fluoride toothpaste

- Encourage parents and caregivers to take an active role in brushing their children's teeth
- Educate parents and caregivers on proper fluoride toothpaste use
- Brush children's teeth with fluoride toothpaste, or assist children with toothbrushing, twice a day
- Use no more than a pea-sized amount of fluoride toothpaste



Smear amount



Pea-sized amount

- Do not rinse after brushing

- Children should spit out excess toothpaste
- Do not rinse after brushing

Varnish

- Apply every 3-6 months

- Apply every 3-6 months

Mouth rinses, gel, or foam

- Not recommended

- Not recommended