

ADOLESCENCE

Family Preparation for Health Supervision

Be prepared to give updates on the following at the visits during adolescence:

Supplemental fluoride and vitamins

Changes in the source of the water used for drinking or cooking (bottled water, etc.)

Current sports and activities

Injuries to the mouth and teeth

Eating habits

Infections in the mouth

Medications, illnesses

Oral hygiene procedures (frequency, problems)

Changes in teeth present in the mouth

Use of substances (tobacco, other drugs)

Periodicity and Services

Dental Professional

Every 6 months, or as indicated by the adolescent's needs and/or susceptibility to disease, as determined by a primary care dentist:

- Examination
- Oral health risk assessment
- Recognition and reporting of suspected child abuse/neglect
- Education and anticipatory guidance for adolescent concerning fluoride supplementation, appropriate use of dental sealants, oral development, tooth cleaning, injury prevention, dietary habits, use of tobacco and other drugs
- Periodontal health assessment
- Preventive dental procedures
- Treatment of injury/dental disease
- Guidance of developing occlusion
- Referral, as needed, to other health professionals

Health Professional

Health professionals can reinforce oral health supervision within the context of other visits—suggested annually from 11 to 21 years:

- Screening
- Oral health risk assessment
- Recognition and reporting of suspected child abuse/neglect
- Education and anticipatory guidance for adolescent concerning fluoride supplementation, appropriate use of dental sealants, oral development, tooth cleaning, injury prevention, dietary habits, use of tobacco and other drugs
- Referral, as needed, to dental professional

Interview

Trigger Questions

To be used selectively by the dental professional. Discuss any issues or concerns of the family.

When do you eat ... at home? At school?

When was the last time you went to the dentist?

How often do you brush your teeth?

How often do you floss your teeth?

Do you think brushing and flossing are helping your teeth?

How do you feel your teeth look?

Do you wear protective mouth gear when you participate in contact sports or in-line skating?

What have you learned about smoking or spit tobacco?

Did you smoke any cigarettes in the last month? Use spit tobacco? How often? What do you think about smoking? Spit tobacco?

Do you wear a safety belt while driving or riding in motor vehicles?

Do you wear a helmet when riding on a motorcycle? On a bicycle?

Observation of Parent-Child Interaction

- Does the parent allow the adolescent to question?
- Does the adolescent seem interested in oral health?
- Does the adolescent display skills/knowledge concerning oral health?
- Does the adolescent act differently when alone?
- Is the adolescent assertive in separating and being seen alone by the dental professional?

Oral Exam and Diagnostic Procedures

As part of the complete oral exam, the following should be noted:

- Caries
- Developmental dental anomalies
- Malocclusion
- Gingivitis
- Pathologic conditions
- Dental injuries
- Risk factors



Risk Assessment

Dental Caries

RISK FACTORS	PROTECTIVE FACTORS
All Ages: Examples	All Ages: Examples
Inadequate fluoride	Optimal systemic and/or topical fluoride
Inadequate oral hygiene	Good oral hygiene
Poor family oral health	Access to care and good oral hygiene
Poverty	Access to care
Frequent snacking	Reduction in snacking frequency
Special carbohydrate diet	Preventive intervention to minimize effects
Frequent intake of sugared medications	Alternate medications or preventive intervention to minimize effects
Reduced saliva flow from medication or irradiation	Saliva substitutes
Variations in tooth enamel; deep pits and fissures; anatomically susceptible areas	Sealants (if possible) or observation
Special health needs	Preventive intervention to minimize effects
Previous caries experience	Increased frequency of supervision visits
Gastric reflux	Management of condition
High mutans streptococci count	Reduction of mutans streptococci
Adolescence: Examples	Adolescence: Examples
Eating disorders, including self-induced vomiting (bulimia)	Referral for counseling
Orthodontic appliances	Good oral hygiene for appliances

Periodontal Disease

RISK FACTORS	PROTECTIVE FACTORS
All Ages: Examples	All Ages: Examples
Inadequate oral hygiene	Good oral hygiene
Unrestored caries	Restoration of carious lesions
Poor family oral health	Access to care and good oral hygiene
Poverty	Access to care
Special health needs	Preventive intervention to minimize effects
Nutritional deficiency (e.g., vitamin C)	Healthy eating habits
Infectious disease (e.g., HIV/AIDS)	Treatment of disease or preventive intervention to minimize effects
Medications (e.g., Dilantin)	Preventive intervention to minimize effects
Metabolic disease (e.g., diabetes, hypophosphatasia)	Treatment of disease
Neoplastic disease (e.g., leukemia and its treatment)	Treatment of disease and preventive intervention to minimize effects
Genetic predisposition (e.g., Down or Papillon Lefevre syndrome)	Preventive intervention to minimize effects
Poor-quality restorations	Properly contoured and finished restorations
Mouthbreathing	Management of mouthbreathing
Injury	Use of age-appropriate safety measures and treatment of injury
Adolescence: Examples	Adolescence: Examples
Malpositioned and crowded teeth	Orthodontic care
Puberty	Preventive measures to address oral effects
Tobacco use	Tobacco cessation
Pregnancy	Preventive measures to address oral effects
Birth control pills	Preventive measures to minimize effects
Anatomical variations (e.g., frenum)	Surgical correction
Gingivitis	Treatment of disease



Risk Assessment (*continued*)

Malocclusion

RISK FACTORS	PROTECTIVE FACTORS
<i>All Ages: Examples</i>	<i>All Ages: Examples</i>
Congenital absence of teeth	Early intervention
Variations in development (e.g., tooth eruption delays and malpositioned teeth)	Early intervention
Conditions associated with malocclusion (e.g., cleft lip/palate)	Early intervention
Injury	Use of age-appropriate safety measures and treatment of injury
Acquired problem from systemic condition or its therapy	Dental intervention as a part of medical care
Family tendency toward malocclusion	Early intervention
Musculoskeletal conditions (e.g., cerebral palsy)	Dental intervention as a part of medical care
Skeletal growth disorders (e.g., renal disease)	Dental intervention as a part of medical care
<i>Adolescence: Examples</i>	<i>Adolescence: Examples</i>
Muscular imbalances	Early therapy
Mouthbreathing	Management of mouthbreathing

Injury

RISK FACTORS

All Ages: Examples

Substance abuse in family

Child abuse or neglect

Multiple family problems

Lack of protective reflexes

PROTECTIVE FACTORS

All Ages: Examples

Referral for counseling

Referral for counseling

Referral for counseling

Referral for appropriate therapy

Adolescence: Examples

Failure to use safety measures appropriate for adolescent (e.g., mouth guards, safety belts)

Protruding front teeth

Poor coordination

Overmedication

Hyperactivity

Participation in contact sports

Substance use by adolescent

Adolescence: Examples

Use of adolescent-appropriate safety measures

Orthodontic care

Referral for appropriate therapy

Adjustment of medications

Management of condition

Use of protective gear

Referral for counseling

