

# PRENATAL

## Family Preparation for Health Supervision

Be prepared to discuss at your first visit:

Your dental history

Questions about oral health aspects of pregnancy

Dental history of baby's family

Any other questions about oral health

## Periodicity and Services

### *Health or Dental Professional*

Oral health supervision can be reinforced at the prenatal visit (usually with the health professional):

- Education of parents concerning fluoride supplementation, first-year oral development, nonnutritive sucking habits (sucking on thumb, finger, or pacifier), breastfeeding, bottle use, teething/tooth eruption, oral hygiene after tooth eruption
- Scheduling and provision of dental education and treatment for parents before infant's birth

## Interview

### *Trigger Questions*

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

What questions do you have for me today?

Do you have any problems with your teeth?

Does your family have any inherited problems/diseases affecting the teeth?

Do you know the fluoride status of your drinking water?

Are you brushing and flossing regularly?

When is the last time you saw a dentist?

Are you taking prenatal vitamins?

How do you plan to feed your baby? Breastfeeding? Formula? Why?

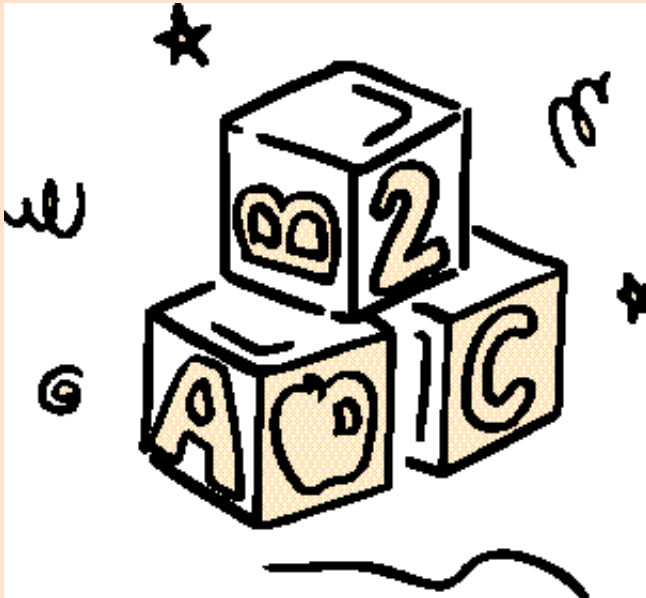
As your child grows up, do you think you can help your child prevent dental caries (the disease process that leads to "cavities")? What kinds of things do you want to do to protect your child's teeth?

## Anticipatory Guidance

Obtain a dental checkup and treatment for yourself before the birth of the baby .

Do not use baby walkers at any age. Tell family members not to give one as a gift.

If you plan to bottlefeed: To avoid developing a habit that will harm the child's teeth, do not put the baby to bed with a bottle, prop it in the baby's mouth, or allow the baby to feed "at will."



## Review

Mother's prenatal record

Attendance

Appropriate screening/referral

Follow-up

Utilization review (appropriateness/quality of care)

Policies of health professional and dental professional regarding quality of care

## Outcomes

- Parents are informed of issues relating to preventive dentistry and oral development
- Parents understand they should not put infant to bed with a bottle
- Parents obtain dental information and individual treatment at appropriate intervals before the baby's birth

## Seeking Oral Health Care *Before* the Baby is Born

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t first, the Jacksons were surprised when Sandra Dubkowski, a dental hygienist, spoke at their prenatal class. They wondered what oral health had to do with pregnancy and baby care. Soon after her presentation began, however, it all started to make some sense.

“Not only is it important for the baby’s developing teeth to get enough calcium and other important minerals and nutrients,” Sandra explained, “but it is also important that the mother take care of her own oral health needs. This includes getting treatment for any cavities, and brushing and flossing regularly. Studies show that reducing the mother’s or caregiver’s cavity-causing bacteria will limit the amount of this kind of bacteria passing to the baby.”

Once Sandra had finished presenting, the Jacksons realized that their own health care would impact their baby’s teeth. The Jacksons promised one another that they would call the following day to schedule appointments for their own dental checkups. 