



The First Dental Visit and Establishment of a Dental Home

In the “Good Old Days” dentists and physicians did not suggest children visit the dentist until they were five or six years old. Gradually these recommendations have become more evidence based and currently all major dental and medical organizations recommend the age one dental visit. In the past few years, more dental practices have embraced the concept of infant oral health examinations and the American Academy of Pediatric Dentistry would like to encourage all general dentists to get on board.

As dentists, we certainly understand the importance of disease prevention. One of the most important aspects of an early first dental visit is to focus on prevention of Early Childhood Caries (ECC). Yet, there is much more involved and for good reason. Let’s look at the two phases of the infant oral health exam.

When the parent/caregiver brings the infant to our office we review the child’s medical history and also the family’s dental and social history. We understand that there is a very high correlation between parent’s oral health and past caries history and bacterial transmission to their child. This information is part of our caries risk assessment because if parents or siblings are at high risk,

the infant should also be considered as such. We then review the causes of caries and prevention that partially includes breast/bottle feeding, diet counseling with emphasis on frequency (especially juices), toothpaste/fluoride, and any other questions the parent may have on this topic. The discussion continues with anticipatory guidance on growth and development issues such as teething and oral habits such as thumb/finger sucking or pacifier use. Then we make sure to touch on trauma prevention and what to do if the child has a dental emergency. Finally we welcome the parent to their new “dental home” and encourage them to call us with their questions and make sure they understand we are available for their child 24/7 for emergency care.

We are not done yet! We still need to examine the infant. Years of experience have taught us that parents don’t listen to anything if their child is screaming. So you do the exam last! We tell the parent their child is going to cry just like at the pediatrician. We then ask the parent to face us (knee to knee) with the child facing them and lay the child’s head in the doctor’s lap. Now we demonstrate how to brush their teeth, do our examination (with clean teeth) and decide if we want to place fluoride varnish on the teeth depending on

the caries risk evaluation we have just performed. We sit the infant up and place him or her in the parent’s loving hands for a hug and ask if there are any further questions.

The infant’s first visit may not sound like a big deal but think about what we have accomplished. We have educated the parent about dental disease, prevention, oral habits, and trauma. We have examined the child to make sure there are no signs of disease. We have established the child’s new dental home where his/her oral health care is managed in a comprehensive, continuously accessible, coordinated, and family-centered way by a licensed dentist.



So, hopefully more dentists will offer this valuable service in their practices. If you are still not sure, think about how parents feel about the dentist and staff who show true concern for their young child's oral health. I am sure you would agree that this special care will benefit your relationship and build trust and confidence in you and your practice as well as benefit the child you serve.

Dr. Richard Chaet practices Pediatric Dentistry in Scottsdale. He is a Diplomate of the American Board of Pediatric Dentistry, an examiner for that organization, and a member of the Council on Clinical Affairs of the American Academy of Pediatric Dentistry.



Turn to page 58 to read the full text of the "Dental Home for Children" Resolution passed by the AzDA House of Delegates on September 12, 2009

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