

Faith C. Drennon, DMD
Board Certified Pediatric Dentist
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Welcome to our office!

My team and I have been trained to provide specialized dental care for infants, children, adolescents, and those with special healthcare needs. Our office is built upon prevention and the foundation of creating a dental home by age 1. Early tooth decay is on the rise. At the first visit we introduce our patients to a “child friendly” environment and conduct a “well baby visit”. I am committed to prevention and education and strive to make every experience a positive one. Please visit our website at www.newportpediatricdentistry.com to view our patient education information and videos.

I want you to be well-informed throughout your experience in our office. I encourage questions and am excited to offer explanations about my philosophy and procedures. The core of my philosophy is to prevent cavities and other dental problems by educating parents and patients with a proactive approach. Tooth decay is preventable!

I look forward to getting to know you and your family.

Dr. Faith C. Drennon, DMD
Board Certified Pediatric Dentist



Newport
Pediatric
Dentistry

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FINANCIAL POLICY

Thank you for choosing our office for your child's dental treatment. We are committed to their successful treatment! Please understand that *payment of your bill is considered a part of your child's treatment.*

- Please be aware that the parent bringing the child to Newport Pediatric Dentistry is *legally responsible for payment of all charges.* We cannot send statements to other persons.
- **Payment is expected in full for each appointment as services are rendered.** For the convenience of our patients, we accept cash, personal checks (which CANNOT be post-dated), MasterCard, and VISA.

DENTAL INSURANCE:

If we have received all of your insurance information on the day of the appointment, we will be happy to file your claim for you. You must be familiar with your insurance benefits, as we will collect from you the estimated amount insurance is not expected to pay. By law your insurance company is required to pay each claim within 30 days of receipt. We file insurance electronically, so your insurance company will receive each claim within days of the treatment. You are responsible for any balance on your account after 30 days, whether insurance has paid or not. If you have not paid your balance within 60 days your account will be turned over to a collection agency. We will be glad to send a refund to you if your insurance pays us.

PLEASE UNDERSTAND that we file dental insurance as a courtesy to our patients. We are not responsible for how your insurance company handles its claims or for what benefits they pay on a claim. We can only assist you in estimating your portion of the cost of treatment. We at no time guarantee what your insurance will or will not do with each claim. We also cannot be responsible for any errors in filing your insurance.

EMERGENCY TREATMENT:

All emergency treatment must be paid in full at the time the service is rendered.

We recognize that under unusual circumstances an account balance may be incurred. Newport Pediatric Dentistry required that all outstanding balances *be paid in full within thirty (30) days* unless other arrangements have been made. Also note, if we have not received payment or you have not contacted us within thirty (30) days, further action may be taken. Thank you in advance for your understanding of our financial policy!

APPOINTMENT POLICY

- *We strive to see all patients on time* for their scheduled appointment. There are times when our schedule is delayed in order to accommodate an injured child or an emergency. Please accept our apology in advance should this occur during your appointment. We will do the exact same if your child is in need of emergency treatment.
- *Broken or missed appointments affect many people.* If two (2) broken/missed appointments occur or two (2) cancellations without two (2) business day notice, our office reserves the right to NOT schedule any subsequent appointments and/or charge a \$50.00 broken appointment fee. If a new patient misses an appointment, unfortunately we cannot reschedule. If a patient misses an appointment at Newport Hospital a \$350.00 fee will be assessed. We require one week cancellation notice for appointments at Newport Hospital.

If at any time you have questions, please feel free to ask our staff or call our office. We are here to help in any way we can. We appreciate you entrusting your child's dental health to us. Thank you!

Tooth Snack Guide

Won't Cause Cavities*

 (Low Carb foods)

Raw, Crunchy Vegetables
Raw, Leafy Vegetables
Cheese
Nuts
100% Nut butters
All Meats
All Fats
Water
Eggs

If you are thirsty, drink water!

Remember to give your child age appropriate food. Nuts, hot dogs, grapes, and sausages are common choking hazards, especially in children three years old and under.

(Usually) Won't Cause Cavities

Whole Milk
Fresh Fruit
Whole grain bread
Popcorn
Smoothies
Dark Chocolate (>70% Cacao)
Yogurt
Ice Cream
Dips & Sauces
Oatmeal

Crunchy is best
Don't get carried away, but it rises away better than other desserts.

This list, including milk and fruit, has the potential to cause cavities quickly if you don't organize meal and snack times. The sugars won't stay in contact with teeth for long with organized eating habits.

Causes Cavities Easily



Candies
Soda
Juice
Chocolate milk
Cookies
Dried fruit
Fruit snacks/strips
Dried flour cereals
Pretzels
Crackers
Oranges & Bananas
Sports Drinks

please still eat them, just not all day long

Even some healthy foods can cause cavities quickly. Being processed and/or dried is not good for teeth. Fresh bread is better than dried flour for teeth.

This is a guide made specifically for teeth, and not overall nutrition.

Based on the book: *More Chocolate, No Cavities*

Talk with your doctor or registered dietitian before making any major dietary changes

Important Prevention Tips

- Always try to have a sip of water after every meal or snack!
- Give your child 4 to 6 organized "mini-meals" a day with only water in between.
- Disorganized eating or drinking will cause cavities even with healthy foods!
- Help your child brush their teeth daily until they are six or seven years old.
- Only have water after the night time brushing.
- Floss teeth if they are touching for additional protection.
- Schedule an infant screening exam with your dentist at age one.
- Fluoride application at your dentist every six months can also help reduce cavities by 20 to 30%.
- Never leave a bottle in bed with baby!
- Get enough Vitamin D!

Provided by:



Newport Pediatric Dentistry

6

STICKY CAVITY CAUSING FOODS

BY ARCTIC DENTAL, PLC

It is okay to indulge every now and then, but limit consumption of these sticky snacks to avoid cavities at your child's next dental check up.

1



COOKIES

Cookies contain both starch and sugar, which can lead to high acid production by plaque in our mouth and more cavities.

2



DRIED FRUIT

Dried fruit may sound like a healthy snack, but the stickiness makes it linger longer than a healthier choice such as fresh fruit.

3



CHIPS

Chips are really sticky, and while one wouldn't think they cause cavities, the starch eventually breaks down to sugar in our mouths.

4



CRACKERS

Dried flour products such as crackers are an easy, go to, no mess snack. Just like chips they also contain high levels of starch.

5



CEREAL

Most cereals that appeal to children contain high levels of sugar and starch. Try to limit snacking on this sticky food.

6

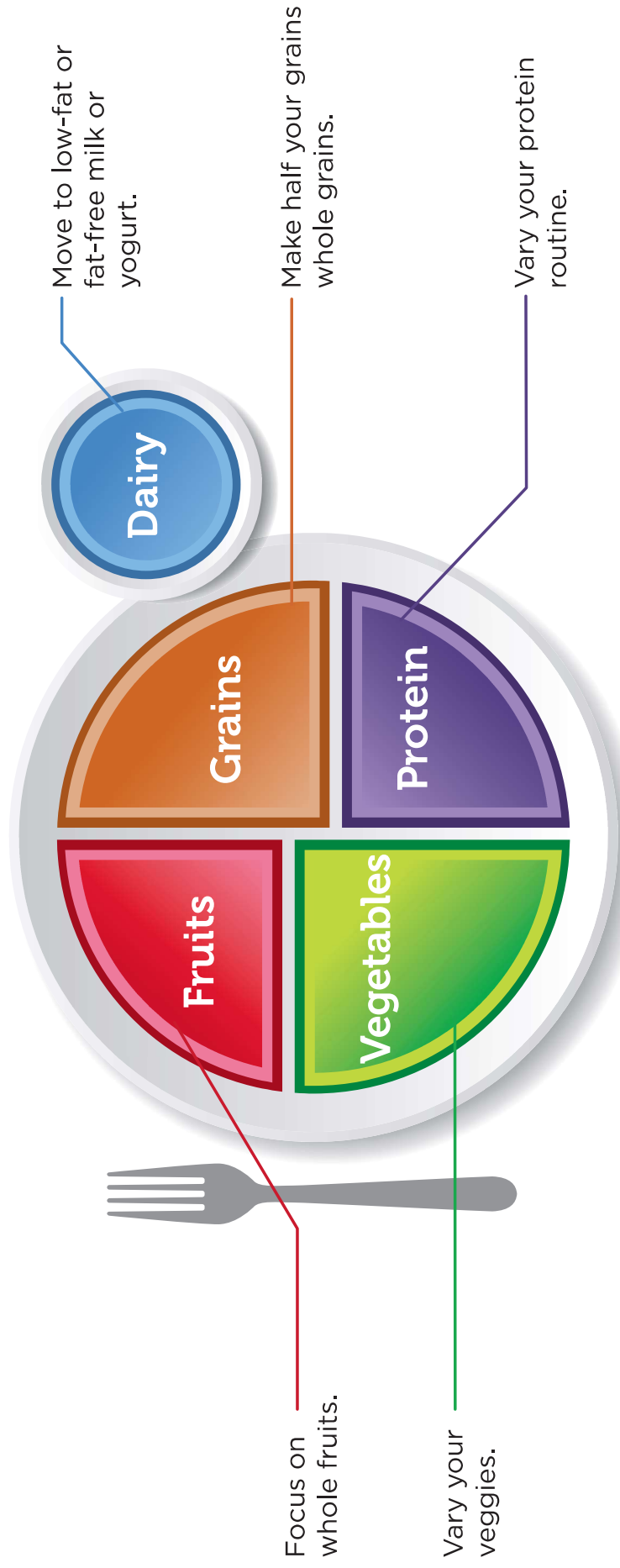


FRUIT SNACKS

Fruit snacks and gummy vitamins are loaded with sugar. They're also really sticky and more likely to remain in our mouth even with thorough brushing.

MyPlate, MyWins: Make it yours

Find your healthy eating style. Everything you eat and drink over time matters and can help you be healthier now and in the future.



Choose **MyPlate**.gov



Limit the extras.

Drink and eat beverages and food with less sodium, saturated fat, and added sugars.



Create 'MyWins' that fit your healthy eating style.

Start with small changes that you can enjoy, like having an extra piece of fruit today.



Fruits

Focus on whole fruits and select 100% fruit juice when choosing juices.

Buy fruits that are dried, frozen, canned, or fresh, so that you can always have a supply on hand.



Vegetables

Eat a variety of vegetables and add them to mixed dishes like casseroles, sandwiches, and wraps.

Fresh, frozen, and canned count, too. Look for “reduced sodium” or “no-salt-added” on the label.



Grains

Choose whole-grain versions of common foods such as bread, pasta, and tortillas.

Not sure if it's whole grain? Check the ingredients list for the words “whole” or “whole grain.”



Dairy

Choose low-fat (1%) or fat-free (skim) dairy. Get the same amount of calcium and other nutrients as whole milk, but with less saturated fat and calories.

Lactose intolerant? Try lactose-free milk or a fortified soy beverage.



Protein

Eat a variety of protein foods such as beans, soy, seafood, lean meats, poultry, and unsalted nuts and seeds.

Select seafood twice a week. Choose lean cuts of meat and ground beef that is at least 93% lean.

Daily Food Group Targets — Based on a 2,000 Calorie Plan

Visit SuperTracker.usda.gov for a personalized plan.

2 cups

1 cup counts as:

- 1 large banana
- 1 cup mandarin oranges
- ½ cup raisins
- 1 cup 100% grapefruit juice

2½ cups

1 cup counts as:

- 2 cups raw spinach
- 1 large bell pepper
- 1 cup baby carrots
- 1 cup green peas
- 1 cup mushrooms

6 ounces

1 ounce counts as:

- 1 slice of bread
- ½ cup cooked oatmeal
- 1 small tortilla
- ½ cup cooked brown rice
- ½ cup cooked grits

3 cups

1 cup counts as:

- 1 cup milk
- 1 cup yogurt
- 2 ounces processed cheese

5½ ounces

1 ounce counts as:

- 1 ounce tuna fish
- ¼ cup cooked beans
- 1 Tbsp peanut butter
- 1 egg



Water

Drink water instead of sugary drinks.

Regular soda, energy or sports drinks, and other sweet drinks usually contain a lot of added sugar, which provides more calories than needed.



Activity

Don't forget physical activity!

Being active can help you prevent disease and manage your weight.

Kids ≥ 60 min/day | Adults ≥ 150 min/week



MyPlate, MyWins

Healthy Eating Solutions for Everyday Life

Choose MyPlate.gov/MyWins

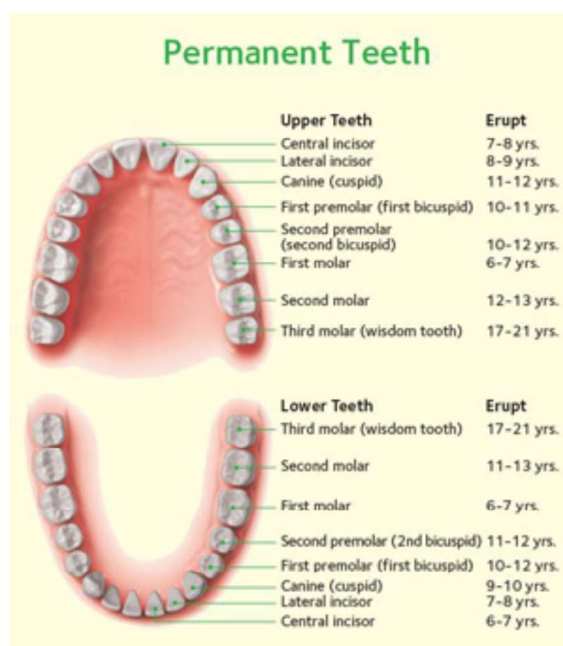
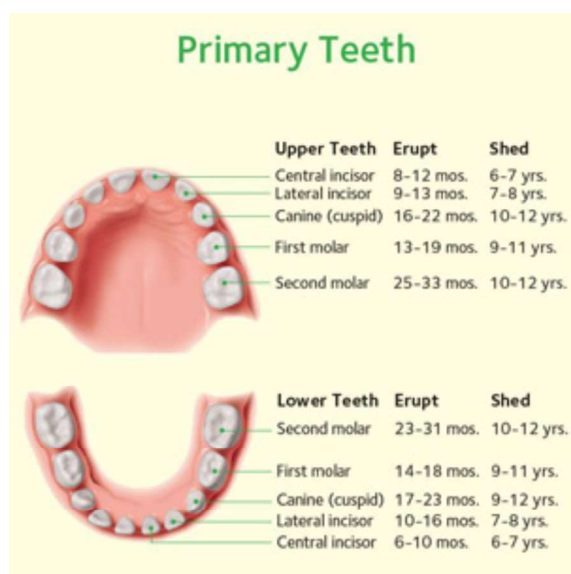
Baby Teeth: When They Come In, When They Fall Out

A healthy mouth is part of a child's overall health

Children need strong, healthy teeth to chew their food, speak and smile. Your child's teeth also help give his or her face its shape and keep space in the jaw for adult teeth.

A baby's teeth start to come in when the baby is about six months old. Baby teeth will later be lost one by one. This makes space for adult (permanent) teeth. By the time children are teenagers, they usually have all of their adult teeth. The last four teeth that come in are the wisdom teeth.

The charts below tell the names of the baby and adult teeth. The pictures show when each tooth usually comes in and is lost. But not all children get the same teeth at the same times. Your child's teeth may erupt earlier or later than the ages in these charts.



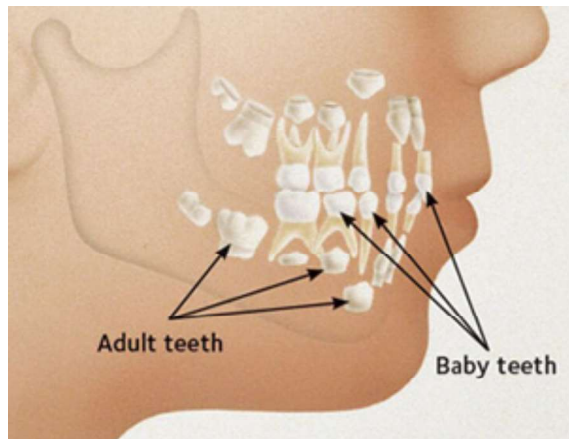


Healthy baby (primary) teeth



Healthy adult (permanent) teeth

The Transition



Adult teeth start to form under the baby teeth. After the baby teeth are lost, the adult teeth will come in through the gums.

Most children go through a stage when they have a mix of primary and permanent teeth. During this time the smile can look uneven, with some big teeth, some small teeth, some crowded teeth or maybe even some missing teeth. Try not to worry. Smiles often even out once all the permanent teeth are in place.



When your child is about age seven, the dentist will do a "bite check" to make sure your child's adult teeth are coming in properly and that the back teeth are working together the way they should. Your dentist may also take an x-ray of the teeth. If your child's teeth or bite need treatment, it's best to get an early start.

The Truth About Fruit Snacks

January 14, 2015 by [Sally](#) [14 Comments](#)



Fruit snacks are fixtures in lunch boxes and party goody bags. They show up on soccer sidelines and are beloved by kids (yes, including mine). But for something that calls itself “fruit” and a “snack”, they’re also highly overrated. Here are the three biggest misconceptions about fruit snacks—and what ALL parents should know about these ubiquitous little pouches:

Myth #1: Fruit snacks are healthy.

Here’s the ingredient list for a popular brand of fruit snacks that features superheroes on the front of the box:

Corn syrup, Sugar, Apple Puree Concentrate, Water, Modified Corn Starch, Gelatin, Contains 2% or less of Citric Acid, Vitamin C (Ascorbic Acid), Natural and Artificial Flavors, Yellow 5, Red 40, Sodium Citrate, Blue 1.

Here’s the ingredient list for Gummy Bears:

Corn Syrup, Sugar, Gelatin, Dextrose, Citric Acid, Corn Starch, Artificial and Natural Flavors, Fractionated Coconut Oil, Carnauba Wax, Beeswax Coating, Artificial Colors Yellow 5, Red 40, Blue 1.

See any similarities?

- Both have two forms of added sugar (corn syrup and sugar) as the first two ingredients—meaning, those are the ingredients in the largest quantities
- Both contain artificial flavors and preservatives
- Both contain three kinds of artificial food dyes

See any differences?

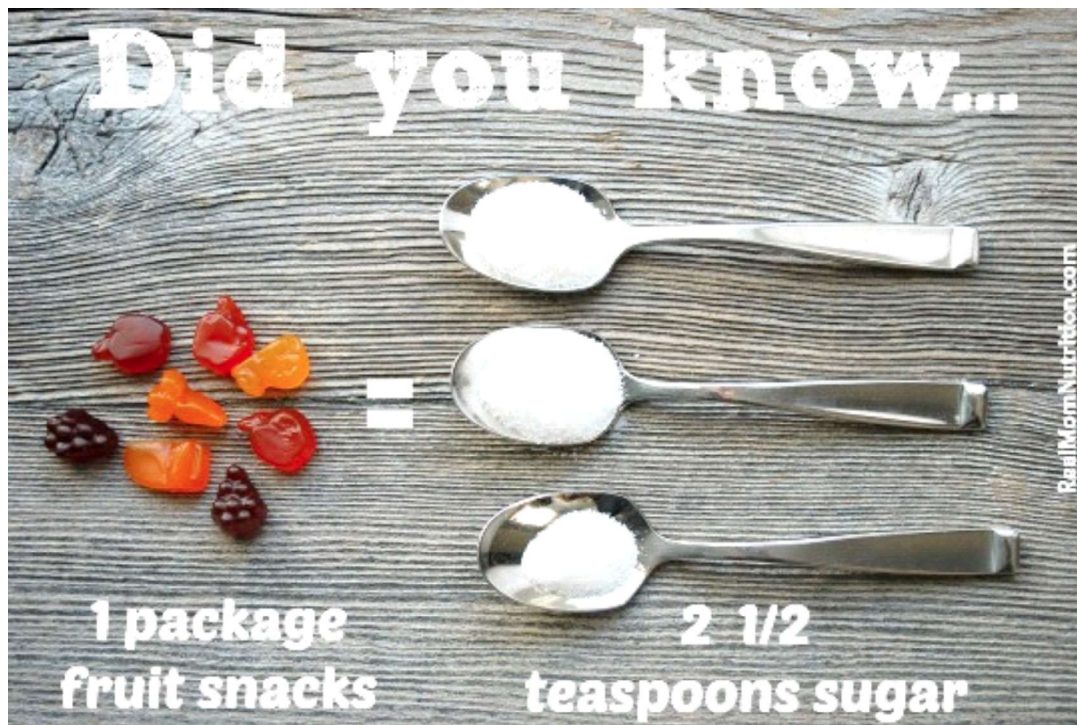
- Fruit snacks have added vitamin C. keep in mind: Children ages 4-8 need just 25 milligrams of vitamin C a day—that’s the amount in 3 medium strawberries OR about a quarter of an orange. In other words, C isn’t a vitamin that’s terribly difficult to get.
- Fruit snacks contain apple puree concentrate, which allows the box to claim “made with fruit”. But keep in mind: Fruit concentrate is actually more like a source of added sugar than actual fruit.

Myth #2: Fruit snacks are fruit.

Yes, some fruit snacks are made with fruit juice, but not in a meaningful amount. Some fruit snacks are made with fruit juice concentrate, which is more of a sweetener than actual fruit. Fruit snacks should not be considered a serving of fruit. They don't have the fiber of fruit. They also don't have the texture of fruit. So kids who gobble fruit snacks are not learning to like fruit. They are learning to like gummies.

Myth #3: Fruit snacks are harmless.

Fruit snacks, like other kinds of chewy candies, stick to the teeth. Bacteria in the mouth feed on these sugary residues, producing acids that can cause decay. Fruit snacks are also loaded with added sugar. Take a look at exactly how much is in one tiny pouch:



I know fruit snacks aren't going away anytime soon, and I know kids like them. So if you're going to buy them...

- Consider choosing one without artificial food dyes. There's growing evidence that some children's behavior may be affected by these dyes (read: [Are Artificial Food Dyes Safe For Kids?](#))—and besides, these dyes are simply not necessary. Several brands including [Annie's](#) and [Mott's](#) use fruit or vegetable juices to color their fruit snacks.
- Treat them as you would a dessert. Packing fruit snacks in your child's lunch? Skip the cookie. Giving your child a choice of a sweet treat after dinner? Fruit snacks should be on par with candy or ice cream.
- Have your child drink or swish water after eating them to get rid of the sticky residue on their teeth.
- Be sure you're offering actual fruit at snack time a lot more often than fruit snacks.

HOW TO PROTECT YOUR BABY'S TEETH FROM CAVITIES

Did you know that cavities are caused by germs that are passed from adult to child?

Babies are born without the bacteria that causes caries- the disease that leads to cavities. They get it from spit that is passed from their caregiver's mouth to their own. Caregivers pass on these germs by sharing saliva- by sharing spoons, by testing foods before feeding it to babies, by cleaning off a pacifier in their mouth instead of with water, and through other activities where saliva is shared.

These germs can start the process that causes cavities even before babies have teeth, so it's important to avoid sharing saliva with your baby right from the start. See below for more tips on how to keep your baby- and your baby's teeth- healthy and happy.

For you:

- Eat healthy foods to reduce the cavity-causing germs in your mouth.
- Brush your teeth with a toothpaste that contains fluoride.
- Do not put anything in your baby's mouth that has been in your mouth including spoons or a toothbrush, do not blow on your baby's food
- Do not use your spit to clean your baby's pacifier - use water instead.
- If you have bleeding gums or cavities, you should visit your dentist as soon as possible.

For your baby:

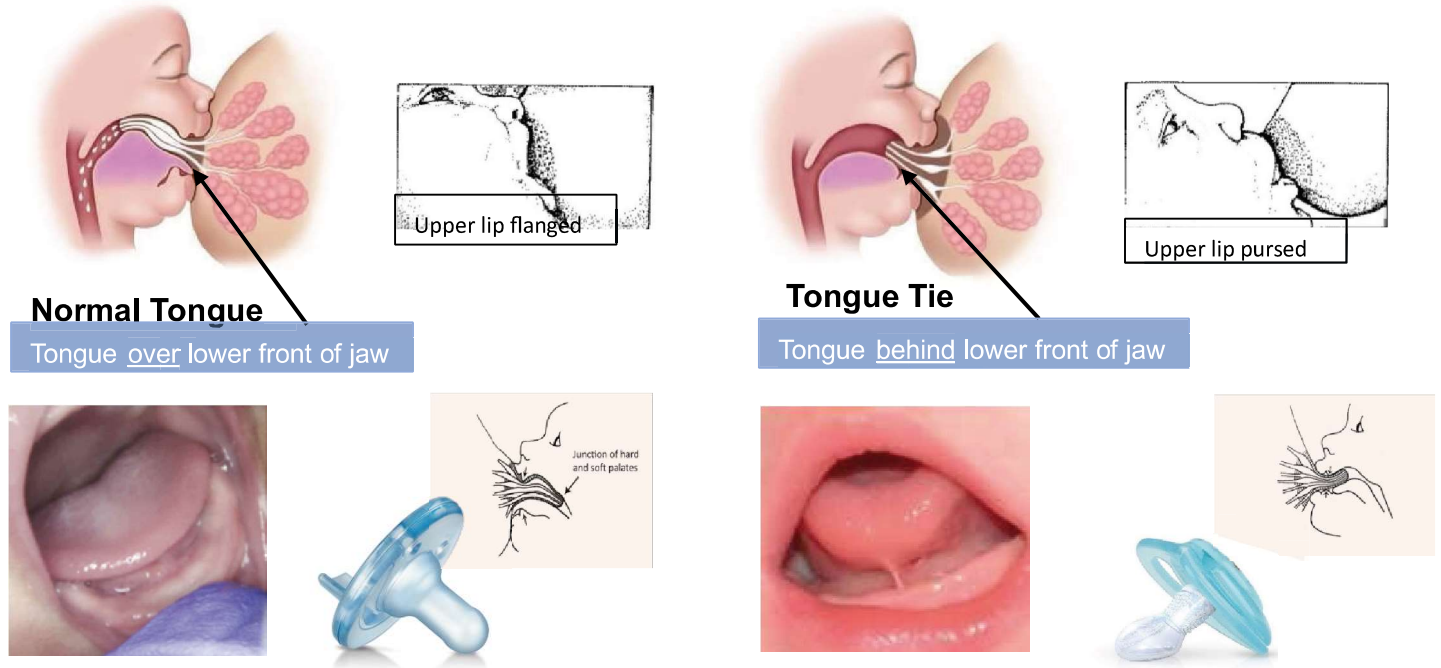
- Before your baby's first tooth becomes visible in the mouth, you should wipe the mouth every day with a soft, moist washcloth. As soon as teeth become visible in the mouth, brush the teeth with a small soft bristle toothbrush that contains a pea-sized smear of fluoride-containing toothpaste.
- Encourage your baby to spit out the toothpaste.
- You should brush your child's teeth at least twice each day - once in the morning and once at night. Remember, the most important time to brush your baby's teeth is right before bedtime.
- Talk to your baby's pediatrician or pediatric dentist about the right amount of fluoride for your baby. Ask if your child should be brushing with toothpaste that contains fluoride.
- Avoid giving your baby sticky foods and unhealthy snacks like candy, soda or juice in between meals. Instead, give your baby healthy snacks like cheese, yogurt or fruit. Only give your baby treats or juice at meal times.
- Establish bedtime routines that do not involve using the bottle filled with milk or juice to soothe the baby to sleep. Also avoid having the baby sleep with a bottle filled with milk or juice as the natural sugars in these liquids will get changed to acid, which will rot or decay the teeth and lead to dental infection and pain. Avoid having your baby drink from a sippy cup filled with juice between meals.
- Do not give your baby juice until he is 6 months old. Do not give your baby more than 4-6 ounces of juice per day.
- If you see white spots developing on your baby's teeth, then take your baby to a pediatric dentist right away. A white spot is often the first sign of a dental cavity.
- Schedule your baby's first dental visit with a pediatric dentist when she is one year old. Pediatric dentists have additional training beyond dental school working with babies and young children. Remember - first tooth, first birthday, first dental visit!



Pacifier Use can be a difficult decision for mothers. Fit and comfort are critical BUT not always the best reason for use.

There are many times when a parent must hold a pacifier in place for their baby even after they have tried the many different types that are available.

The shapes available are varied and there really is a type that is best for normal growth and facial development for most babies.



Round
Best



Rectangle
Fair



Misshaped/Dental:
Poor

If you must use a pacifier, select a better one. Fit is NOT the best reason. See your provider for advice.

The following reflects the **3 types available** and their **effect** on ability to coordinate how to have an easy suck-swallow-breath rhythm.

Round and soft is **best**. **Rectangular** is a **compromise**. The **Dental** and **Lipstick** shaped one is **poor**.

The tongue does shape the proper growth and development of the mouth, cheeks, palate, and face. So yes, the shape of the mouth is affected by the pacifier shape and how the cheeks, tongue, and palate work in the mouth while using it.

Find out WHY there is an issue with your baby's issues retaining a pacifier.

It may be as simple as a breast or bottle-feeding adjustment which your lactation support **IBCLC** team can help with.

It may be because there is a need for some type of chiropractic or physical therapy evaluation to evaluate for **body posture** or even torticollis.

There may be tongue, lip, and or cheek ties that influence the coordination of the baby to suck, swallow, and breathe.

It is the parent's obligation to find out why the fit is the problem. Your baby is trying to tell you something. Ideally, after 6 months, a pacifier should be discontinued.

Faith Drennon D.M.D. Pediatric Dentist

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Sippy Cup Tips

To reduce the risk of cavities, please read the following:

- The sippy cup is designed to be a training tool to help children transition from a bottle to a cup. It should not be used for a long period of time. The sippy cup is not a bottle and it is not a pacifier.
- Unless being used at mealtime, the sippy cup should be filled **ONLY** with **WATER**. Remember, frequent drinking of any liquid, even if diluted, from a bottle or no-spill training cup should be avoided.
- Sippy cups should not be used at naptime or bedtime unless they have only water in them. Always remember to clean your child's teeth before placing him or her in bed.
- Schedule regular visits with your pediatric dentist to help keep your child cavity-free.



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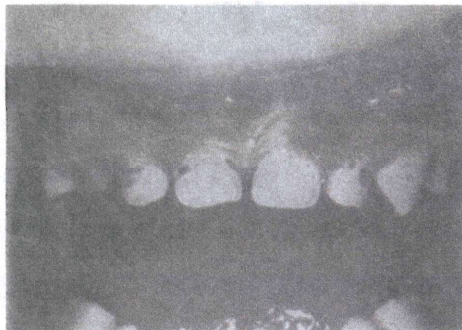
caries

causadas por el uso inadecuado del biberón

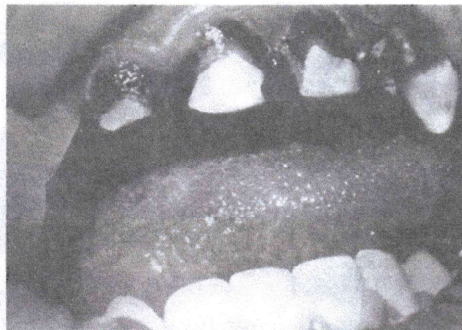
¿Qué son las caries causadas por el uso inadecuado del biberón?

La caries causada por el uso inadecuado del biberón es la desintegración que ocurre en la dentadura de los niños. Los dientes con caries parecen que están despedazándose o desapareciéndose.

Etapas de caries por el uso inadecuado del biberón



Los primeros dientes que se carian son los dientes superiores de enfrente.



A medida que las caries se empeoran se verán anillos oscuros alrededor de los dientes.



Si no se tratan, los dientes se deteriorarán hasta llegar a las encías.

¿Qué causa las caries por el uso inadecuado del biberón?

Este tipo de carie ocurre más frecuentemente en los niños que llevan un biberón a la cama durante la siesta o al acostarse por la noche. Cuando el bebé se duerme con el biberón en la boca, el líquido baña los dientes durante el sueño. Los gérmenes que viven en la boca comen el azúcar que se encuentra en los líquidos y crean ácidos fuertes. Estos ácidos carian los dientes. Cualquier líquido que no sea agua clara provocan este tipo de carie. Esto incluye la leche, las formulas, los jugos de fruta, y los refrescos.

¿Cómo afectan a su niño las caries causadas por el uso inadecuado del biberón?

Cuando se ha permitido que las caries avancen hasta la línea de la encía, los siguientes síntomas pueden ocurrir:

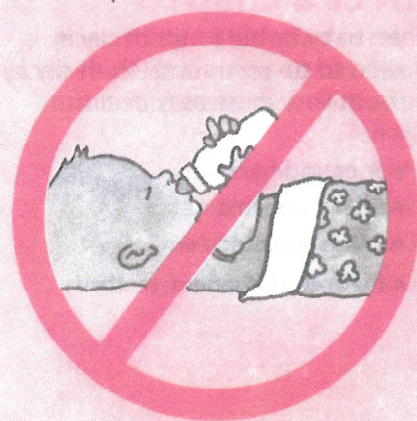
- Dolor
- No podrá comer adecuadamente
- Problemas para hablar
- Problemas emocionales
- Dientes permanentemente dañados

¿Cómo puede usted prevenir las caries por el uso inadecuado del biberón?

1. No debe acostar a su bebé con el biberón en la boca. Cargar a su bebé mientras le da el biberón es una manera de mostrar amor. Cargar a su bebé mientras le da el biberón también evita que su bebé se ahogue.
2. Enseñe a su niño cómo tomar usando un vaso tan pronto como sus primeros dientes aparezcan. Trate de quitarle el biberón a su hijo cuando tenga 12 meses de edad.
3. Cambie el biberón que el bebé toma al dormirse con un chupete. No cubra el chupete con nada dulce (como azúcar o miel).
4. Lo más importante es no dejar de cepillar o limpiar los dientes de su bebé diariamente.

¿Qué hago si mi niño ya está acostumbrado a acostarse con el biberón en la boca?

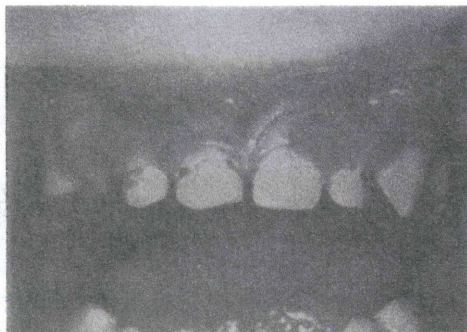
Lo mejor es no darle el biberón al bebé a la hora de la siesta o cuando se acuesta por la noche. Si su niño ya tiene el hábito de llevar el biberón a la cama, quite el biberón de la boca de su bebé después de que se haya dormido, o trate de usar agua en el biberón en vez de otros líquidos.



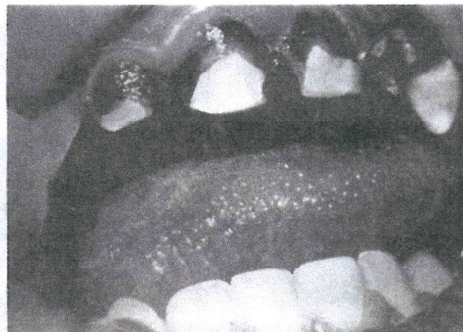
Instrucciones de su Proveedor de Cuidados:

baby bottle tooth decay

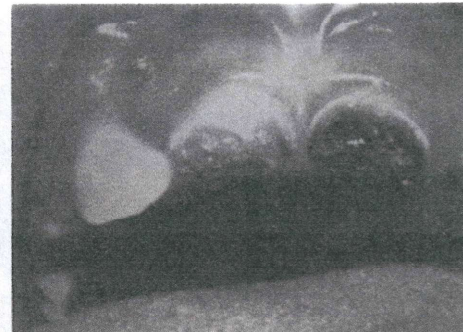
Which teeth have baby bottle tooth decay?



The first teeth to decay are the upper front teeth.



As the decay gets worse, you will see dark brown bands around the teeth.



If this is not treated, the teeth will decay to the gum line.

What causes baby bottle tooth decay?

Tooth decay occurs more frequently with children who take a bottle to bed at nap and night time. When the baby falls asleep with the bottle in the mouth, liquid bathes the teeth all through sleep. The germs that live in the mouth eat sugar in the liquid and make strong acids. These acids decay teeth. Any drink other than plain water will cause baby bottle tooth decay. This includes milk, formula, fruit juices, and sodas.

How does baby bottle tooth decay affect a child?

When baby bottle tooth decay is allowed to go on until teeth decay to the gum line, these may occur:

- Pain
- Poor eating habits
- Speech problems
- Emotional problems
- Damaged permanent teeth

How can I prevent baby bottle tooth decay?

1. DO NOT put your baby to bed with a bottle. Holding your baby while feeding is a way of showing love. Feeding while holding also helps keep your baby from choking.
2. Teach your child to drink from a cup as soon as the primary teeth start to come in. Try to wean your baby from the bottle by 12 months of age.
3. Replace the bedtime bottle with a pacifier. Do not dip the pacifier in anything sweet (such as sugar or honey).
4. Most of all, don't forget to brush or wipe your baby's teeth daily.

What if my child already goes to bed with a bottle?

It is best to stop giving a bottle to your child at nap and night time. If your child is already in the habit of taking a bottle to bed, remove the bottle from the mouth after the child falls asleep, or try using water in the bottle in place of other liquids.



Healthcare Provider's Instructions:

This information is not meant to replace advice given by your healthcare provider. If you have any questions, please contact your healthcare provider.

Sealants

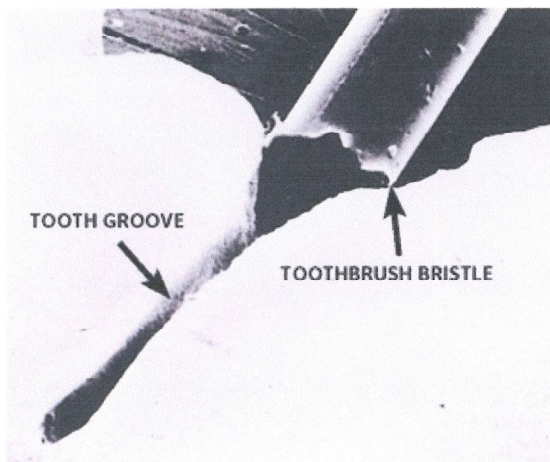
A sealant is a coating that protects a tooth from decay. When teeth are treated with sealants, they are less likely to get cavities. Sealants can be applied quickly and painlessly. These are the reasons why so many dentists recommend sealants for patients.

What causes tooth decay?

Teeth are covered with a sticky film of bacteria called plaque (rhymes with "back"). The bacteria change sugar into harmful acids that attack the hard layer on teeth called enamel (ee-NAM-el). Repeated attacks may break down the enamel and cause cavities.

Tooth decay often occurs on the chewing surfaces of the back teeth. These surfaces have pits and grooves that trap plaque and bits of food. The pits and grooves are hard to keep clean, because toothbrush bristles cannot reach into them. That is how decay starts in the grooves and a cavity forms.

How do sealants work?



Even a toothbrush bristle is too big to reach inside a groove in the tooth.

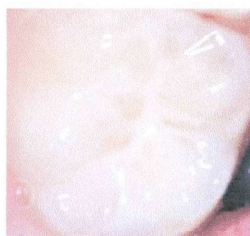
The sealant is a plastic material (resin) applied to the chewing surfaces of the back teeth. The resin flows into the pits and grooves in the teeth. Once the pits and grooves are covered, food and plaque cannot get in. The sealant forms a barrier against acid attacks.

How are sealants applied?

It takes only a few minutes to seal each tooth. The teeth are cleaned and chewing surfaces are prepared to help the sealant stick to the tooth. The sealant is "painted" onto the chewing surface, where it bonds to the tooth. A special light may be used to help the sealant harden.



Tooth surface before a sealant is applied



Tooth surface protected by a sealant

How long do sealants last?

Sealants may last several years before they need to be replaced. Over time, sealants can become loose or worn. Then they may not protect the tooth as well. The dentist looks at the sealants during a checkup to make sure they are still intact.

How else can I protect teeth from decay?

Sealants protect the chewing surfaces of teeth, but not all surfaces. Good care of the teeth at home along with regular exams and cleanings at your dentist's office are important. These good habits stop decay from forming in between the teeth - spots that sealants cannot cover. To prevent cavities, be sure to floss or use another between-the-teeth cleaner once a day and brush twice a day. Look for products that display the ADA Seal of Acceptance, which tells you that the product meets ADA standards for safety and effectiveness.



Who should get sealants?

Though sealants are most often placed in children and teenagers, adults can benefit from sealants too. Prevention is always better than treatment. Sealants are very useful in stopping tooth decay on the back teeth and can save patients money in the long run. Your dentist can make sealants part of your plan for a healthy mouth.

Sealant photos courtesy of Dr. Adam A. Francois.

DENTAL EMERGENCY POLICY/PROCEDURES

TYPES OF INJURY

FIRST AID TREATMENT

Toothache

Rinse mouth out vigorously with warm salt water to clean out debris, use dental floss if available to remove any food that might be trapped within the cavity (especially between teeth). Guide the floss in carefully so as not to cut the gums. Notify the parent/guardian immediately. Instruct parent to see a dentist immediately.

Knocked out tooth

Baby teeth should not be replaced or saved.
If a permanent tooth is knocked out, rinse with water gently if dirty, then put tooth back into the socket and hold with fingers in place. If it is not possible to “replant” the tooth, it should be placed in milk **immediately** for transport to the dentist. If the child is old enough and calm, the tooth should be stored in the cheek until a dentist is seen. Need to see dentist within 60 minutes. **Notify the Dentist and the parent/guardian immediately.**

Broken Tooth

Try to clean dirt or debris from injured area with warm salt water. Place cold compresses on face next to injured tooth to minimize swelling. Notify the parent/guardian immediately. See a dentist immediately.

Bitten tongue or lip

Apply direct pressure to bleeding area with a sterile or clean cloth. If swelling is present, apply cold compresses. **If bleeding doesn't stop readily or the bite is severe, call 911 and notify the parent/guardian, and/or if necessary an emergency contact person. Complete the Staff/Non Staff Accident Form and submit to Human Resources within 24 hours. Make a copy of the report for the child's file.**

Objects wedged between

Remove the object with dental floss if available. Guide the teeth floss in carefully so as not to cut the gums. If unsuccessful, contact the parent/guardian. DO NOT try to remove with sharp or pointed objects. Instruct parent to see a dentist.

Possible fractured jaw

If suspected, immobilize the jaw by any means (handkerchief, piece of cloth, towel) **call 911 and notify the parent/guardian and/or if necessary an emergency contact person. Complete the Staff/Non Staff Accident Report and submit to Human Resources within 24 hours. Make a copy of the report for the child's file.** See a dentist immediately.



ACTIVE KIDS, HEALTHY TEETH

The American Academy of Pediatric Dentistry has developed this brief guide to help parents and caregivers be prepared for the most common types of childhood tooth injuries.

WHAT TO DO IF...

A BABY TOOTH IS KNOCKED OUT



Contact your pediatric dentist as soon as possible. **QUICK ACTION** can lessen a child's discomfort and **PREVENT INFECTION**.



Rinse the mouth with water and apply **COLD COMPRESSES** to reduce swelling.



Spend time **COMFORTING THE CHILD** rather than looking for the tooth. Remember, baby teeth should not be replanted because of potential damage to developing permanent teeth.

A PERMANENT TOOTH IS KNOCKED OUT



Find the tooth. Rinse it gently in cool water. **DO NOT** scrub it or use soap.



REPLACE THE TOOTH in the socket and hold it there with clean gauze or a wash cloth. If you cannot put the tooth back in the socket, place the tooth in a clean container, preferably with cold milk. If milk is not available, put it in a container with the child's saliva, but **NOT IN WATER**.



Take the child and the tooth to your pediatric dental office **IMMEDIATELY** or call the emergency number if it is after hours.

A TOOTH IS CHIPPED OR BROKEN



Contact your pediatric dentist **IMMEDIATELY**. Fast action can save the tooth, prevent infection and reduce the need for extensive dental treatment.



Rinse the mouth with **WATER AND APPLY COLD COMPRESSES** to reduce swelling.



If a parent can find the broken tooth fragment, it is important to **TAKE IT TO THE DENTIST**.

AN ACTIVITY INVOLVES RISK OF FALLS OR COLLISIONS



Wear a **MOUTH GUARD** when activity involves a risk of falls, collisions or contact with hard surfaces or equipment.



Pre-formed mouth guards can be purchased in sporting goods stores, or **CUSTOMIZED MOUTH GUARDS** can be made by a pediatric dentist.

OUR PEDIATRIC DENTIST

DR. FAITH DRENNON

401-849-4790

Visit MYCHILDRENSTEETH.ORG to locate a pediatric dentist near your home and to join AAPD's Monster-Free Mouths Movement.



TOOTH
D.K.



GINGER
BITE-US



TARTAR THE
TERRIBLE



AMERICA'S PEDIATRIC DENTISTS
THE BIG AUTHORITY on little teeth



DID YOU KNOW...

TOOTH DECAY IS THE NUMBER ONE CHRONIC INFECTIOUS DISEASE AMONG CHILDREN IN THE U.S.?

Many parents are surprised to learn that tooth decay can begin as early as age 1. Children with tooth decay are far more likely to develop immediate and long term oral health issues, including pain, infections, difficulty speaking, problems eating food, tooth discoloration and even tooth loss.

But with the help of the American Academy of Pediatric Dentistry, you can join the Monster-Free Mouths Movement and keep your child's mouth free of creatures like Tartar the Terrible, Ginger Bite-Us and Tooth D.K. Below are important tips to help kids have monster-free mouths—at all ages!



BIRTH-2 YEARS OLD:

- 🦷 Before teeth erupt, **CLEAN YOUR BABY'S MOUTH AND GUMS** with a soft cloth or infant toothbrush at bath time. This helps prepare your baby for the teeth cleaning to come.
- 🦷 If your baby is given a bottle when going to sleep, use **NOTHING BUT WATER**. Bottles containing any sugary liquids or carbohydrates such as milk, formula or fruit juice, put teeth under attack from bacterial acid all night long.
- 🦷 **NEVER DIP A PACIFIER IN ANYTHING SWEET**; that pesky Tooth D.K. can show up.
- 🦷 Take your child to see a **PEDIATRIC DENTIST** by his or her **FIRST BIRTHDAY**. Your dentist can help you establish a daily regime, provide recommendations and determine your next visit.
- 🦷 Talk to your child's pediatric dentist about the **RIGHT AMOUNT OF FLUORIDE** for your child. Ask if your child should be brushing with toothpaste that contains fluoride and/or if your child needs a fluoride supplement.
- 🦷 Take your child to see a pediatric dentist by his or her first birthday to establish a **DENTAL HOME**. Your dentist can help you establish a daily regimen, provide recommendations and determine your next visit.



2-5 YEARS OLD:

- 🦷 Remember to brush your child's teeth at least **TWICE A DAY**, once in the morning and once at night. The most important time to brush your child's teeth is **RIGHT BEFORE BEDTIME**.
- 🦷 Schedule dental visits **EVERY SIX MONTHS** to keep away Mouth Monsters, especially the dreaded Tooth D.K. The routine teeth cleanings at regular check-ups help remove pests like Tartar the Terrible and Ginger Bite-Us.
- 🦷 Sucking on a thumb, finger and pacifier can affect your child's teeth the same way: sucking for prolonged periods of time may cause the upper front teeth to tip outward or not come in properly. Most children stop this habit on their own; if not, try to **DISCOURAGE IT BY AGE 3** or ask your dentist for other creative ideas.
- 🦷 Keep an **EYE ON SNACKING**—ideally children should have no more than three snacks a day.
- 🦷 Parents can begin **FLOSSING** for their children when any two teeth are touching.
- 🦷 **AVOID JUICES** which literally bathe teeth in sugar. Try to limit the amount of juice you give to your child to less than 6 oz. per day.
- 🦷 Talk to your child's pediatric dentist about the **RIGHT AMOUNT OF FLUORIDE** for your child. Ask if your child should be brushing with toothpaste that contains fluoride and/or if your child needs a fluoride supplement.



SCHOOL-AGE CHILDREN:

- 🦷 Parents should supervise the brushing of teeth for school-aged children until they are **SEVEN OR EIGHT YEARS OLD**.
- 🦷 When teeth are touching, it is time to **BEGIN FLOSSING**. Ask the pediatric dentist for tips on flossing your child's teeth.
- 🦷 In addition to brushing and flossing your child can **CHEW GUM WITH XYLITOL**, a non-sugar naturally occurring substance, to stimulate saliva flow which helps to clean the mouth (just make sure to ask the teacher!)
- 🦷 Remember to **PROTECT YOUR CHILD'S TEETH WITH A MOUTHGUARD** when they participate in physical activities, including sports and leisure activities. Consult your child's pediatric dentist to determine which type of mouthguard is most appropriate for your child.
- 🦷 **AVOID CARBONATED BEVERAGES** which can erode enamel on teeth; sport drinks and juice pouches are also bad for teeth as they keep acid levels high—which the Mouth Monsters like!

Join the Monster-Free Mouths Movement today! Visit MYCHILDRENSTEETH.ORG for tips and resources, including a pediatric dentist finder and a fun Mouth Monsters toolkit to help encourage healthy dental habits for your child.



AMERICA'S PEDIATRIC DENTISTS
THE BIG AUTHORITY on little teeth

Information on Xylitol

- Enjoying four servings of sugar free gum a day maximizes the benefits of xylitol for dental health.
- Over 25 years of testing suggests that xylitol can help benefit dental health, fight cavities, reduce plaque, reduces tooth decay rates and even clear nasal passages. It works by keeping PH of the saliva in your mouth alkaline, where it should be.
- Sugar lowers the PH in your mouth to an acidic level, thus breaking down the enamel on your teeth.
- Xylitol contained in chewing gum has been proven to prevent ear infections in children. The study also showed that xylitol in chewing gum can reduce the pain and make it heal faster.
- Xylitol contains about 40% fewer calories than sugar, but with the same sweetening power as table sugars!
- Xylitol can be found naturally in the fibers of fruits and veggies like corn, raspberries and plums. It's also a naturally occurring carbohydrate found in a variety of plants.
- Most commonly, xylitol is extracted from corn or from the bark of birch and beech trees, xylitol harvested from birch and beech trees is more environmentally friendly, and in the case of xylitol used in gum, it is produced right here in the USA.
- Xylitol is a great alternative to sugar for people who have dietary restrictions. Sugar has a glycemic index (scale ranking how fast humans convert carbs to glucose) of 68. Xylitol has a glycemic index of 7. Which means that its effects on blood sugar levels are significantly less than sugar, making xylitol a great substitute for sugar for diabetics.