

About this document: This is an installment of the Massachusetts Oral Health Series (MOHS), developed by the Massachusetts Department of Public Health (DPH). The series focuses on important issues in oral health in the state through topic-specific installments to be released over time. This issue outlines what healthcare providers can do to improve the oral health of pregnant women and infants. Please visit www.mass.gov/orgs/office-of-oral-health for more information.

THE GUIDELINES

In **March 2016**, the Massachusetts Department of Public Health in conjunction with a variety of state partners developed [The Massachusetts Oral Health Guidelines for Pregnancy and Early Childhood¹](#) (The Guidelines'). The Guidelines outline the evidence-based methods that providers should follow when caring for pregnant and early childhood patients.

Key points:

Is it safe for pregnant women to visit the dentist?

Yes! It is recommended, safe, and effective for pregnant women to receive all types of dental care to prevent, monitor, and treat pregnancy gingivitis, dental caries, and oral gingival lesions. Many patients and providers have concerns, including the safety of x-rays. It is important to reassure women that dental x-ray imaging is safe and recommended during pregnancy.¹⁻³

When should infants be seen by dental providers for the first time?

Assist parents to establish a dental home for their infant **by age 1** or by the **eruption of their first tooth, whichever comes first**. The infant should see an oral health professional regularly after that. Prior to eruption of the first tooth, medical providers may provide a brief oral health exam and counseling on oral health practices.^{1,4}

Should medical providers perform oral health screenings?

Yes! It is important for medical providers to provide basic oral health screening for pregnant women and children and referral to oral healthcare providers for treatment.¹⁻⁴

Who should follow them and how?

All members of the perinatal care team have a role to play in ensuring that infants and pregnant women have access to appropriate oral health care. The guidelines were designed by pediatric, prenatal, and dental providers and community health workers so that they are **applicable to all members of the clinical care team**. All those who have contact with patients have an opportunity to provide the education and support needed to help build healthy oral health habits. The guidelines are **adaptable**: they include materials and referral forms that any member of the care team in any practice may use.



The Perinatal Oral Health Care Team

Dental Students	Dental Hygienists
Administrative Staff	Dental Assistants
Dentists	Medical Students
Residents	OB/GYNs
Midwives	Pediatricians
Medical Assistants	Nurses

and many more...

What can prenatal and pediatric providers do?

All perinatal providers, medical and dental, are key players in collaborating to educate, screen, refer, and treat pregnant women and infants.¹⁻⁴ Medical providers can collect an oral health history, perform a brief oral health examination, identify those who do not have a dental home and provide referrals for dental treatment. Dental providers can take a medical history, perform a comprehensive oral examination, and provide treatment and management. All providers can work to educate and reassure pregnant women that dental care is safe and effective. There are several other overlapping responsibilities listed below:



*All pediatric providers can also apply fluoride varnish in the medical setting. See below for more information on fluoride varnish trainings available in Massachusetts for medical providers.

Training Opportunities

Smiles for Life is a nationally recognized, online oral health curriculum for non-oral health providers aimed at developing an inter-professional workforce equipped with the knowledge and skills to treat specific populations, including pregnant women and young children. This curriculum aligns with the recommendations included in the Guidelines and is now being incorporated into the training curriculum of many health professions including, medical students and residents, nursing students, dental students and residents, and dental hygiene students.

www.SmilesForLifeOralHealth.org



References

1. Massachusetts Oral Health Practice Guidelines for Pregnancy and Early Childhood: <https://www.mass.gov/files/documents/2016/10/ne/oral-health-guidelines.pdf>
2. American College of Obstetricians and Gynecologists Oral Health Guidelines: <http://www.acog.org/Resources-And-Publications/Committee-Opinions/Committee-on-Health-Care-for-Underserved-Women/Oral-Health-Care-During-Pregnancy-and-Through-the-Lifespan>
3. <https://www.mchoralhealth.org/PDFs/OralHealthPregnancyConsensus.pdf>
4. American Academy of Pediatric Dentistry Oral Health Guidelines: https://www.aapd.org/assets/1/7/g_perinataloralhealthcare.pdf