

**A program of the
American Academy of Pediatrics**

Implementation Guide

September 2015 (updated August 2017)

For more information email oralhealth@aap.org or visit
<https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/Oral-Health/Pages/Brush-Book-Bed.aspx>

Intended Audience:

Pediatricians, Physicians, Nurse Practitioners, Physician Assistants, Nurses, Medical Assistants, Office Managers, Dentists, Hygienists, Dental Assistants, Other Dental and Medical Staff (Head Start Staff, WIC Offices, and child care centers may also be interested in this content, but it was written with medical/office in mind – some adaptation may be necessary).

This guide is designed to help health care providers to link three important health messages in to one message about nighttime routines. The three messages to obtain a healthy nighttime routine are to **brush the child's teeth**, **read together**, and to **set a regular bed time**. It aims to educate both pediatric providers and families about the importance of nighttime routines and focuses on improving the implementation of oral health services in the medical home by linking them to messages about early literacy and sleep. The Brush, Book, Bed message and program are intended to be used for children ages 6 months – 6 years.



“Having the book be about tooth brushing and then having the actual physical materials to give out was key. It’s easy to talk about tooth brushing and talk about buying a tooth brush and toothpaste but for a number of our patients cash is an issue and they might not be realistically able to buy a tooth brush for their kid. Being able to give it to them was very empowering for our providers and families. It really helped us a lot.” Brush, Book, Bed Pilot Program Participant

Acknowledgements:

The Brush, Book, Bed Pilot Program was funded in part by the AAP Friends of Children Fund, Colgate Palmolive Company, and Young Innovations, Inc. The AAP greatly appreciates the participation of the pilot sites in developing this guide as well as the expertise of staff from Reach Out and Read in the area of early literacy promotion.

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Index of Acronyms and Terms

Acronyms

AAP: American Academy of Pediatrics

BBB: Brush, Book, Bed

ADA: American Dental Association

AAPD: American Academy of Pediatric Dentistry

Terms

Caries: Tooth decay, breakdown of tooth enamel, most common chronic disease in children.

Fluoride: A natural mineral that is found in water sources and has been scientifically proven to be effective in preventing tooth decay.

Fluoride Varnish: Highly concentrated form of fluoride applied to the surface of teeth that provides protection from dental caries.

Fluorosis: Change in appearance to tooth enamel due to too much fluoride consumption when teeth are developing, which results in mild white spots of teeth (most common) or severe browning of teeth (very rare).

Early Literacy: What children know about communication, verbal and nonverbal language, reading, and writing before they can actually read and write ([Zero to Three](#)). This information is acquired from parents and caregivers who read, sing, and talk to their children beginning in utero.

Background

Brush, Book, Bed Overview:

The purpose of the Brush, Book, Bed (BBB) Program is to link together three important nighttime routines in one health message. It aims to educate both pediatric providers and families about the importance of nighttime routines and focuses on improving the implementation of oral health services in the medical home by linking oral health information to messages about early literacy and sleep. BBB may be used during the 6 month – 6 year old well-child visit.

Relevant AAP Policies and Publications:

Oral Health

[Maintaining and Improving the Oral Health of Young Children](#)

[Fluoride Use in Caries Prevention in the Primary Care Setting](#)

[Bright Futures Guidelines for Health Supervision of Infants, Children, and Adolescents: Promoting Oral Health](#)

[A Pediatric Guide to Children’s Oral Health Flip Chart and Reference Guide](#)

[AAP Oral Health Risk Assessment Tool](#)

[Oral Health Care for Children with Developmental Disabilities](#)

Early Literacy

[Literacy Promotion: An Essential Component of Primary Care Pediatric Practice](#)

[AAP Books Build Connections Toolkit](#)

Sleep

[SIDS and other Sleep-Related Infant Deaths: Expansion of Recommendations for a Safe Infant Sleeping Environment](#)

[Bright Futures Guidelines for Health Supervision of Infants, Children, and Adolescents: Promoting Child Development](#)

[Sleep: What Every Parent Needs to Know](#)

Useful Websites and Tools:

General

AAP.org

- An organization of 66,000 pediatricians committed to the optimal physical, mental, and social health and well-being for all infants, children, adolescents, and young adults. This site includes the AAP's professional resources.

HealthyChildren.org

- Powered by pediatricians, trusted by parents, Healthychildren.org is the AAP consumer-facing web site. Check it out for great resources to share with families.

[Bright Futures Health Supervision Guidelines for Infants, Children, and Adolescents](#)

- Bright Futures recommendations, tools, and resources address current and emerging health promotion needs at the family, clinical practice, community, health system, public health, and policy levels.

[AAP Periodicity Schedule](#)

- Contains the AAP/Bright Futures recommendations for pediatric preventive care.

Oral Health

[AAP Section on Oral Health](#)

- The AAP Section on Oral Health and Chapter Oral Health Advocates provide education, training, and advocacy for pediatricians, dentists, other health professionals, and families.

[AAP Oral Health Initiatives](#)

- The Oral Health Initiative works to address children's oral health issues through collaboration between the medical and dental homes, and to ensure that pediatricians and other health professionals are an active part of the oral health team.

[HealthyChildren.org – Brush, Book, Bed](#)

- Information for families to help them structure a night time routine for their children which includes; brushing teeth, reading a book, and creating a regular bed time.

[Mouthhealthy.org \(ADA\)](#)

- MouthHealthy.org, from the ADA, helps patients learn more about the importance of their oral health

[Mychildrensteeth.org \(AAPD\)](#)

- The AAPD provides information for families about oral health from pediatric dentists.

Early Literacy

[AAP Books Build Connections Toolkit](#)

- Developed by the AAP, this online toolkit helps parents and providers to understand the need for early literacy and how to help families make it an important part of early childhood.

[Early Brain and Child Development – Building Brains, Forging Futures](#)

- The Early Brain and Child Development (EBCD) initiative aims to change how pediatricians and their communities view the early childhood developmental period, and how they care for and invest in young children.

[Reach Out and Read](#)

- Reach Out and Read is an evidence-based nonprofit organization of medical providers who promote early literacy and school readiness in pediatric exam rooms nationwide by integrating children's books and advice to parents about the importance of reading aloud into well-child visits (between 6 months and 5 years).

Sleep

[HealthyChildren.org – Sleep](#)

- This web site offers a plethora of information for families about sleep and young children.

[Zero to Three – Sleep](#)

- This web site contains some tips and tools on sleep as well as helpful resources.



Getting Started

The Brush, Book, Bed Program was piloted by a group of pediatric and family medicine practices in 2014/2015. This implementation guide was produced as a result of their experiences. This portion of the guide provides you with tools and resources that were created by the pilot sites and others to make it easier for you to implement the program.

Steps to Implementation

1. Get buy-in from your practice and co-workers.
2. Identify a Brush, Book, Bed Champion who will coordinate the program, and inspire the staff.
3. Get training for staff on oral health, early literacy, and sleep. This includes coding/billing information and where to order dental supplies.
4. Obtain supplies and set up the practice for easy implementation. This may take a few [PDSA cycles](#) to find out what works best in your particular office.
5. Reach out to dental referral sources and establish relationships/make them aware of your efforts around Brush, Book, Bed.
6. Consider if you will need to receive donations of books, tooth brushes, etc. It may be possible to partner with a community organization, dentist, or to host a book drive to reach your goals.
7. Develop a sustainability plan and/or evaluation plan using the survey tool included in the appendix or some other assessment.
8. Make small goals (such as varnishing 25% of your patients under age 3) and celebrate when they are achieved.

Sample Clinical Workflow

There are many ways that Brush, Book, Bed could be implemented in your practice. One suggestion for a sample clinical workflow that was used by one of the pilot sites (with some modification) is in the Appendix.

Provider Training/Resources

Ensure that all staff who participate in the BBB program are trained on the program and the individual topics of oral health and early literacy. All of these trainings are available online and are free of charge to the participants.

Oral Health

- [Smiles for Life: A National Oral Health Curriculum](#) covers the basics of child oral health, caries risk assessment, fluoride varnish application, and anticipatory guidance and counseling. Courses 2 and 6 are applicable to children and endorsed by the AAP. See also the App below (which includes the AAP Oral Health Risk Assessment Tool) as a way to help providers incorporate oral health.
- [Protecting All Children's Teeth Curriculum](#) is an AAP curriculum with 13 downloadable power points to educate pediatricians and others about children's oral health. The resource also includes faculty tools and a photo gallery.
- [Bright Futures Oral Health Pocket Guide](#) provides health professionals with an overview of preventive oral health supervision and includes information about risk assessment, a tooth eruption chart, a dietary fluoride supplementation schedule, a glossary, and a list of resources.



The **Smiles for Life (SFL) Oral Health App** is a reference tool for oral conditions designed to assist primary care providers in formulating diagnoses in real-time. Clinicians select an algorithm based on the presenting concern of the patient or physical exam finding, and the decision tool presents a series of questions to help formulate a diagnosis, triage, and treatment plan. Practical advice will aid clinicians in providing the best care for their patients. An extensive photo gallery of tooth and oral soft tissue findings is also included.

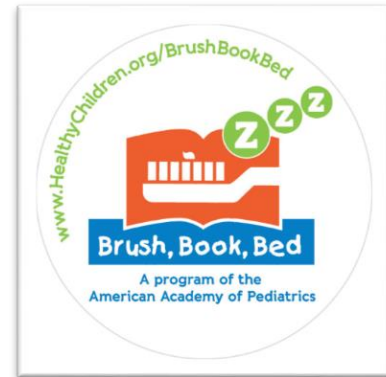
Early Literacy

- [AAP Books Build Connections Toolkit](#) has information for professionals and families about why early literacy is so important and how to promote it.
- Reach Out and Read sites can utilize the [Reach Out and Read Literacy](#) online training.

Talking Points for Providers:

BRUSH:

- Continue breastfeeding as foods are introduced for 1 year or longer.
- Discourage putting a child to bed with a bottle. Wean from a bottle by 1 year of age. If still using bottle at bedtime, only use water.
- Ok to offer a pacifier at naptime and bedtime because of a protective effect of pacifiers on the incidence of sudden infant death syndrome (pacifier use should be avoided until breastfeeding is established).
- Avoid sharing with their child items that have been in their own mouths.
- Infants without teeth should have their mouths cleaned after feedings with a wet soft washcloth.
- The child's teeth should be brushed twice a day as soon as the teeth erupt with a smear (grain-of-rice sized) amount of fluoride toothpaste.
- Help supervise a child brushing his or her teeth. Parents should dispense the appropriate amount of toothpaste and help children brush until age 6 – 8 (when the child is able to clean the teeth well without assistance.)
- Professionally applying fluoride varnish provides a child with highly concentrated fluoride to protect against caries.
- Limit sugary foods and drinks to mealtimes. Only 100% fruit juice and no more than 4 to 6 oz per day.
- Encourage children to drink only water between meals, preferably fluoridated tap water
- Recommend that a dental home be established by age 1.



BOOK:

What parents can do:

- Babies love your voice – sing, talk, and read aloud as often as possible.
- Babies enjoy sturdy picture books and books with rhymes.
- Name and point to pictures your baby is looking at touching or talking to.
- Act out the story or pictures using your face, hands and voice.
- Talk about how your baby is enjoying the book.

9 to 12-months may point with one finger to indicate interest in a picture; parents should see this as developmental progress

- Babies this age can copy some of the sounds you make, the looks on your face, and the gestures you make.

- You're teaching your baby that sitting on your lap and being read to feels good and that books are enjoyable.
- It's okay if your child mouths the book! This is how babies explore and learn about their world.

12 to 18 months may turn board book pages, and may insist on turning back again and again to a favorite picture

- Babies this age can copy your reactions to the book you are enjoying together.
- Ask your child questions she can answer by pointing. You can say: "*Where's the doggie?*" "*Where's the happy baby?*" or "*Who says meow?*" This helps your baby learn the names of things.
- Once babies start to walk, holding them on your lap can be a struggle. Some children will want to move around during a story. That's OK.
- Read stories every day, but let your child help decide how long you read.
- When your child grabs the book, she is showing a healthy drive for independence. This is OK!

BED:

- Make daytime playtime. Talking and playing with your baby during the day will help lengthen her awake times. This will help her sleep for longer periods during the night.
- The power of a bedtime routine is not in what you do, but **how you do it**. Start following a set pattern every night (e.g. bath, tooth brushing, quiet activity - story/song) for about 30 minutes starting at the same time.
- Start early enough in the evening so you have time to get through the sequence before bedtime.
- Keep your baby calm and quiet when you feed or change her during the night. Try not to stimulate or wake her too much.
- You can start your ritual in the bathroom or the living room; it should end in your baby's bedroom.
- Put your baby to bed when drowsy but still awake. This will help your baby learn to fall asleep on her own in her own bed.
- Wait a few minutes before responding to your child's fussing. See if she can fall back to sleep on her own. If she continues to cry, check on her, but don't turn on the light, play with her, or pick her up. If she gets frantic or is unable to settle herself, consider what else might be bothering her. She may be hungry, wet or soiled, feverish, or otherwise not feeling well.
- If night waking occurs, reassure briefly, give stuffed animal or blanket for self-consolation (before age one, stuffed animals and blankets should not be placed in the bed with the child for risk of suffocation) and bring back to bed.

Supplies and Tips

- **Children’s Books for a variety of ages**
 - You can either use the recommended Brush, Brush, Brush book by Alicia Padron (toddler book) or any other book you have available to give as gifts to families. An oral health focused book is preferable. See Appendix for more information on suitable titles.
 - Books can be obtained from Reach Out and Read if you are a site. You may also consider hosting a book drive or partnering with an early literacy group or foundation to purchase them.
- **Toothbrushes and Fluoride Toothpaste**
 - See the [Toothbrush and Toothpaste Manufacturers List](#) for ordering information.
 - If you can’t buy your own toothbrushes and toothpaste, consider talking with local dentists about donating them to your practice. Local dental societies may be interested in providing this kind of support as well.
 - Being able to give out toothbrushes and toothpaste was a major trigger to action for both the provider and the families in the BBB Pilot Study. Make it happen!
- **Fluoride Varnish**
 - See the [Fluoride Varnish Manufacturers List](#) for ordering information.
 - Fluoride varnish is sold in individual packets that include the product and the applicator. These seem to work best for a pediatric practice as there is no dispensing out of a tube in the appropriate amounts.
 - In each exam room or set up in a central location, pair together the fluoride varnish and applicator, gloves, a 2x2 gauze to dry the teeth, and after varnish instructions. It may work best to package these items together in inexpensive baggies to form a varnish kit that can quickly be grabbed by support staff or the provider.
 - Prior to the visit, place the varnish kit in the exam room for use by the provider. In practices where paper charts are used it may work to put the kit with the chart.
 - A bright light source is useful to have in each exam room. A pen light or a head lamp work well and are cost-effective. Head lamps are best if no assistance in applying the varnish is available (ie – two free hands!).
- **Oral Health Promotion Posters/Flip Chart**
 - Use the Brush, Book, Bed poster, the Campaign for Dental Health Posters, or any other oral health focused poster you may have available.

- [Flip charts](#) can be purchased from the AAP or downloaded as [PDFs](#). They are a great tool to help providers talk about oral health and for families to learn.

Don't forget about siblings! If your patient arrives with a troop of siblings be prepared to provide at least a toothbrush to the other children. Also try to vary the books received at each visit so families can begin to build a library of high quality books to read to their children.



Dental Referral Example

At the front desk or in each exam room, create a dental referral form like the one below and display it prominently so staff know where to refer children for dental care. A quantity of business cards of local providers is also helpful to have to pass out to patients and a good opportunity to introduce your practice to local dentists. A [template for the referral form](#) is available from the AAP.

Pediatric Dentists

Name	Telephone Number	Insurance Plans Accepted	Medicaid/CHIP Accepted (Y/N)	Accepts Children Ages	Other Info
Dr Joe Smile	847-422-6323	BC/BS, Cigna, United Healthcare	Y	0 and 21	Located conveniently in the local shopping center, friendly staff
ADD ROWS AS NEEDED					

Family Dentists

Name	Telephone Number	Insurance Plans Accepted	Medicaid/CHIP Accepted (Y/N)	Accepts Children Ages	Other Info
Dr Frank Family	847-422-5896	BC/BS	Y	0 and 21	Loves infants and toddlers!
ADD ROWS AS NEEDED					

Public Health Dental Clinics, Charity/Donated Time Programs, Other

Name (Contact Person)	Telephone Number	Insurance Plans Accepted	Medicaid/CHIP Accepted (Y/N)	Accepts Children Ages	Other Info
Kids Smiles (Linda Smith)	847-456-8695	N/A	N/A	0 and 21	Monthly clinic, accepts adults as well as kids

Coding for Oral Health Services

Pediatricians and other health care providers can bill for preventive oral health services including fluoride varnish, oral health risk assessment, and other services (oral screening, traumatic injury, etc). The majority of State Medicaid programs pay for these services to be completed in the primary care office. Many private insurers are also now paying pediatricians to provide these services to their patients. This is due to a United States Preventive Services Task Force Grade B Recommendation that all children from tooth eruption through age 5 receive fluoride varnish application in the primary care office. Most private insurers do not currently pay separately for risk assessment but it is often tied to fluoride varnish application payment. For more information about payment in your state visit https://www.aap.org/en-us/about-the-aap/Committees-Councils-Sections/Oral-Health/Map/_layouts/15/WopiFrame.aspx?sourcedoc=/en-us/about-the-aap/Committees-Councils-Sections/Oral-Health/Map/Documents/OralHealthReimbursementChart.xlsx&action=default.

The AAP also maintains a Coding Document for Pediatricians on Oral Health. It can be accessed at https://www.aap.org/en-us/Documents/coding_factsheet_oral_health.pdf.

“With the early visits already talking about night time routine linking it to the book and brush made it an easy way to get all of those topics in a quick manner” – BBB Pilot Project Participant

Patient Education

Fluoride Information

Campaign for Dental Health – Learn

- <http://ilikemyteeth.org/learn-share/>

HealthyChildren.org:

Fluoride Varnish: What Parents Need to Know

- <https://www.healthychildren.org/English/healthy-living/oral-health/Pages/Fluoride-Varnish-What-Parents-Need-to-Know.aspx>

How to Prevent Tooth Decay in Your Baby

- <https://www.healthychildren.org/English/ages-stages/baby/teething-tooth-care/Pages/How-to-Prevent-Tooth-Decay-in-Your-Baby.aspx>

Early Literacy

AAP Books Build Connections Toolkit – Resources for Families

- <https://littoolkit.aap.org/forfamilies/Pages/home.aspx>

Center for Early Literacy – Parent Resources

- <http://earlyliteracylearning.org/parentresource1.php>

PBS – Reading and Language

- <http://www.pbs.org/parents/education/reading-language/>

Reading Rockets – for Parents

- <http://www.readingrockets.org/audience/parents>

Parent Handouts

The AAP provides a parent handout to be printed and distributed to caregivers

- https://www.aap.org/en-us/Documents/BBB_Parent_Handout.pdf

Community Partnerships

AAP Chapters

- <https://www.aap.org/en-us/about-the-aap/chapters-and-districts/Pages/Chapters-and-Districts.aspx>

Reach Out and Read

- <http://www.reachoutandread.org/>

Reach Out and Read – State Coalitions

- <http://www.reachoutandread.org/about-us/our-organization/affiliates/>

Local Dental/Hygiene Associations

- <http://www.aapd.org/about/affiliated/>
- <http://www.ada.org/en/about-the-ada/national-state-local-dental-societies>
- <http://www.adha.org/>

Head Start/Early Head Start

- <http://www.acf.hhs.gov/programs/ohs>

Women, Infants, and Children Supplemental Nutrition Program

- <http://www.fns.usda.gov/wic/women-infants-and-children-wic>

Libraries – ALA Directories

- <http://www.ala.org/tools/libfactsheets/alalibraryfactsheet03>



“Having a tooth brush and toothpaste was a great prompt to talk about oral health.” – BBB Pilot Project Participant

Appendix

Available in English and Spanish at <https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/Oral-Health/Pages/Oral-Health-Practice-Tools.aspx>.

Brush, Book, Bed

Set a regular nighttime routine that includes brushing teeth, reading together, and then bed.



Learn more at www.HealthyChildren.org/BrushBookBed.

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The Brush, Book, Bed Pilot Program is supported in part by Young Innovations, Inc.



Oral Health Books for Children

Oral Health Care

Highly Recommended

Brush, Floss, and Rinse: Caring for Your Teeth and Gums*
Amanda Doering Tourville, Picture Window Books, 2009

Ready, Set, Brush

Sesame Street, Readers Digest Children's Books, 2008

Brushing Teeth

Mari Schuh, Capstone Press, 2008

Toothful Tales: Becoming Me Cavity Free

Jeanette Flannery Courtad, DDS
Mentors International Publications, 2015

Recommended

Brush, Brush, Brush!

Alicia Padron, Scholastic, 2010

Brush Your Teeth Please

Leslie Mcguire, Studio Fun, 2013

Flossing Teeth*

Mari Schuh, Capstone Press, 2008

Visiting the Dentist

Highly Recommended

At the Dentist*

Mari Schuh, Capstone Press, 2008

Going to the Dentist

Anne Civardi, Usborne, 2010

Dentists Help

Dee Ready, Capstone Press, 2013

Dentists

Kristin L. Nelson, Lerner Publishing Group, 2005

Recommended

Max Goes to the Dentist*

Adria F. Klein, Picture Window Books, 2006

My Dentist, My Friend

P. K. Hallinan, Ideals Children's Books, 2002

A Visit to The Dentist's Office

Patricia J. Murphy, Capstone Press, 2005

A Day in the Life of a Dentist

Heather Adamson, Capstone Press, 2004

The Berenstain Bears Visit the Dentist

Stan and Jan Berenstain, Random House, 1981

General Information About Teeth

Highly Recommended

Loose Tooth*

Mari Schuh, Capstone Press, 2008

Mouth*

Cynthia Klingel and Robert B. Noye, Gareth Stevens Publishing, 2010

I Know Why I Brush My Teeth

Kate Rowan, Scholastic, 2000

Recommended

All about Teeth*

Mari Schuh, Capstone Press, 2008

Snacks for Healthy Teeth*

Mari Schuh, Capstone Press, 2008

The Tooth Book

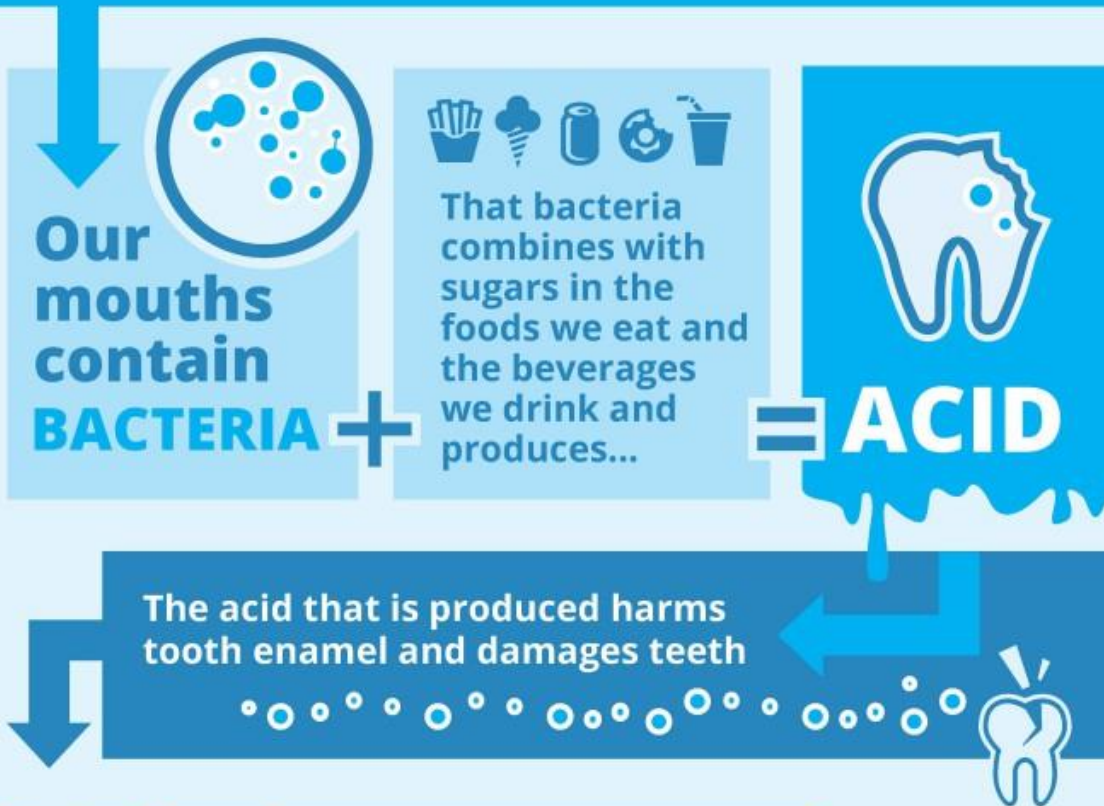
Dr. Seuss, Random House, 2003

The book list and additional information about each book
is available at [http://guides.hshsl.umaryland.edu/dentistry/
DentalBooksForChildren](http://guides.hshsl.umaryland.edu/dentistry/DentalBooksForChildren)

*Bilingual edition also available

4/15

WHY DO CHILDREN NEED FLUORIDE?



FLUORIDE PROTECTS TEETH BY MAKING THEM MORE RESISTANT TO ACID

Get Your Fluoride Here!

- Drink fluoridated water
- Brush with the right amount of fluoridated toothpaste
- Talk to your dentist or doctor about fluoride treatments

CAMPAIGN FOR
DENTAL HEALTH
Life is better **WITH TEETH**
ILikeMyTeeth.org

Fluoride is an important mineral for all children. Talk to your doctor or dentist to learn more.



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FLUORIDE: CAVITY FIGHTER

Children can maintain good oral health in 4 ways:



Drink water that has fluoride



Brush twice a day with the right amount of fluoridated toothpaste



Eat a healthy diet, limiting sweet drinks, sticky candies, and snacks



Talk to your dentist or doctor about fluoride treatments

CAMPAIGN FOR
DENTAL HEALTH
life is better **WITH TEETH**
ILikeMyTeeth.org

Fluoride is an important mineral for all children. Talk to your doctor or dentist to learn more.



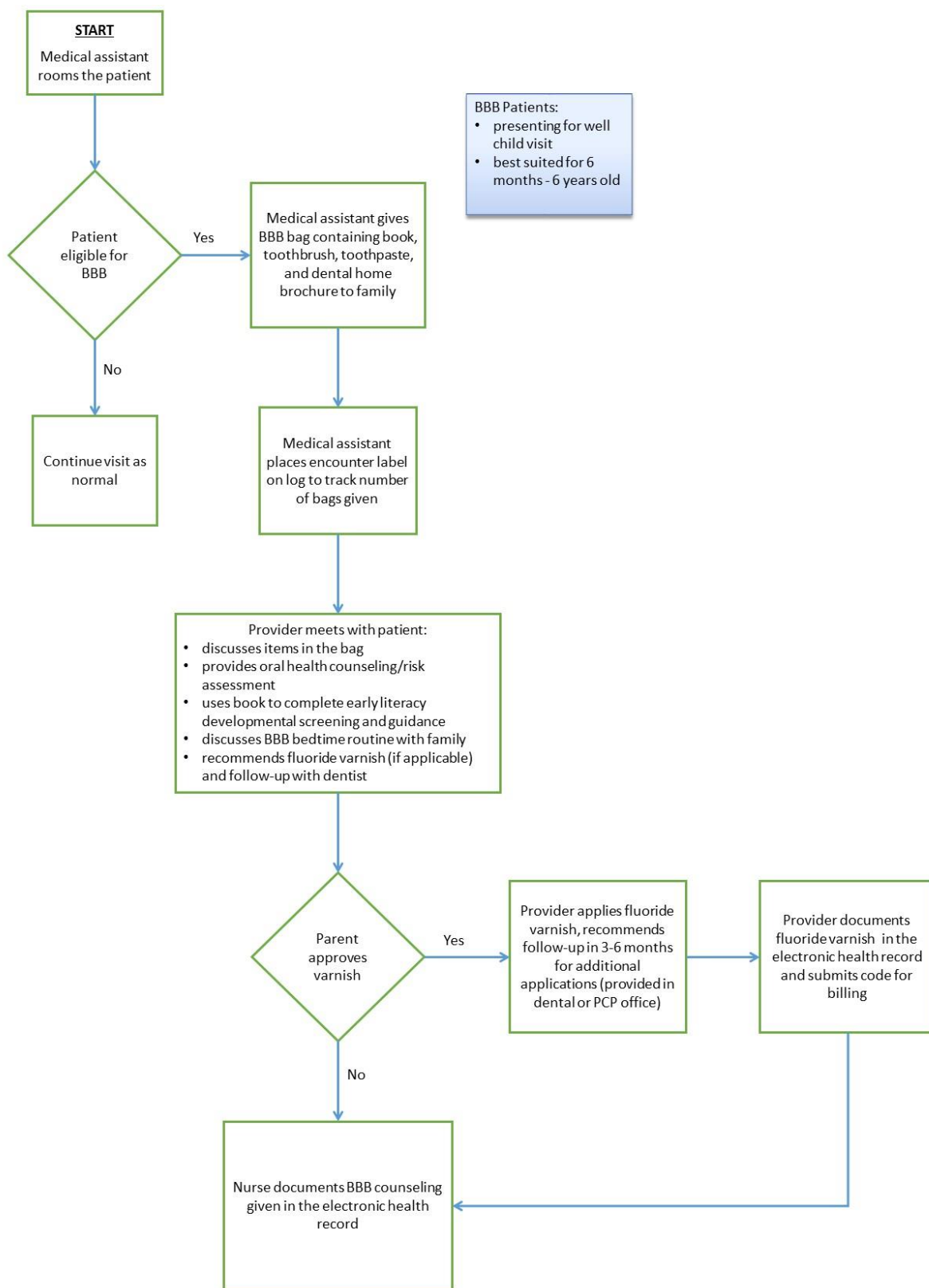
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Sample Clinical Workflow



SURVEYS FOR PARENTS

PLEASE DO NOT WRITE YOUR NAME OR ANY PERSONAL INFORMATION ON THIS SURVEY!

1. Did your doctor or a member of his/her team talk to you today about how to take care of your child's teeth? (Y/N)
2. Did your doctor or a member of his/her team provide you with:
 - a. A book (Y/N)
 - b. A toothbrush (Y/N)
 - c. Toothpaste? (Y/N)
3. Did your child receive a fluoride varnish application (a sticky substance that was painted on his teeth), either today or at a previous visit? (Y/N/DNK/NO TEETH)
4. In a typical day does someone brush or wipe your child's teeth or gums (if no teeth present)?
 - a. No (Skip to Q5)
 - b. If yes, how often?
 - i. Once per day
 - ii. Twice per day
 - iii. More than twice per day
 - c. Unsure
5. Did your doctor or a member of his/her team talk to you today about a regular bedtime routine for your child? (Y/N)
6. Does your child already have a typical bedtime routine?
 - a. No (skip to end)
 - b. If yes, does your child's typical bedtime routine include:
 1. Brushing teeth? (Y/N)
 2. Reading a story? (Y/N)

NO ESCRIBA SU NOMBRE NI NINGUNA INFORMACIÓN PERSONAL EN ESTA ENCUESTA.

1. ¿Su médico o un miembro de su equipo habló con usted hoy sobre cómo cuidar los dientes de su hijo? (S/N)
2. ¿Su hijo recibió una aplicación de barniz de flúor (una sustancia pegajosa que se pinta sobre sus dientes) hoy o en una visita anterior? (S/N/No lo sé/No dientes)
3. En un día típico, ¿alguna persona cepilla o limpia los dientes o las encías (si no tiene dientes) de su hijo?
 - a. No (vaya a la pregunta 4).
 - b. Si la respuesta es sí, ¿con qué frecuencia?
 - i. Una vez al día.
 - ii. Dos veces al día.
 - iii. Más de dos veces al día.
 - c. No estoy seguro.
4. ¿Su médico o un miembro de su equipo habló con usted hoy sobre una rutina habitual de su hijo para la hora de acostarse? (S/N)
5. ¿Su hijo ya tiene una rutina típica para la hora de acostarse?
 - a. No (vaya al final).
 - b. Si la respuesta es sí, ¿la rutina típica de su hijo para la hora de acostarse incluye:
 1. Cepillarse los dientes? (S/N).
 2. Leer un cuento? (S/N).

Gracias.

Please address questions about this guide to oralhealth@aap.org.

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