

### Tooth Brushing and Flossing

Brush teeth at least twice a day—after breakfast and before bed. Use a soft bristled head. Replace the brush every 3-4 months. Place the brush at a 45° angle and brush in a circular motion.



Once the spaces between the teeth close, it is time to start flossing. Many parents have success with using floss on a handle.

We recommend using fluoride toothpaste twice a day:

- Encourage spitting.
- Minimal to no rinsing.
- Thin smear < 3 years old.
- Pea size > 3 years old.



### Fluoride Exposure

There are numerous sources of fluoride exposure. Topical exposure includes toothpaste, rinses, and gels. Systemic exposure includes fluoride from community water, food, beverages, and fluoride supplements. If you have a water filtration system: filters like Brita do not remove fluoride. Reverse osmosis and distillation do remove fluoride from water. Bottled water contains variable amounts of fluoride—this can range from no fluoride to low levels. Many food and beverages made with water, including infant formula, can contain varying levels of fluoride. If you have well water, you should test fluoride levels every three years. Water test kits are available through your health or water department. The doctors will work with you to determine the appropriate fluoride exposure for your child.



### Thumb, Finger and Pacifier Habits

Non-nutritive sucking is very common in children. It is an early step in an infant's ability to self-regulate emotions, helps the child to relax, focus his or her attention, and can provide comfort and security. Stopping the habit prior to permanent tooth eruption is ideal but not possible for all children.



### Trauma

Chestnut Dental has 24-hour emergency coverage. If a tooth has been fractured, knocked out, displaced or loosened after an injury, please call us right away.

Mouths bleed a lot! Always try to calm your child first and clean up his or her face and mouth and then assess the injury. Toddlers are especially susceptible to falls and injuries when learning to move and walk. If you are ever unsure about an injury, never hesitate to call us!



### For More Information:

- [www.chestnutdental.com](http://www.chestnutdental.com)
- [www.aapd.org](http://www.aapd.org) (American Academy of Pediatric Dentists)
- [www.aap.org/oralhealth](http://www.aap.org/oralhealth)

## CARING FOR YOUR CHILD'S TEETH



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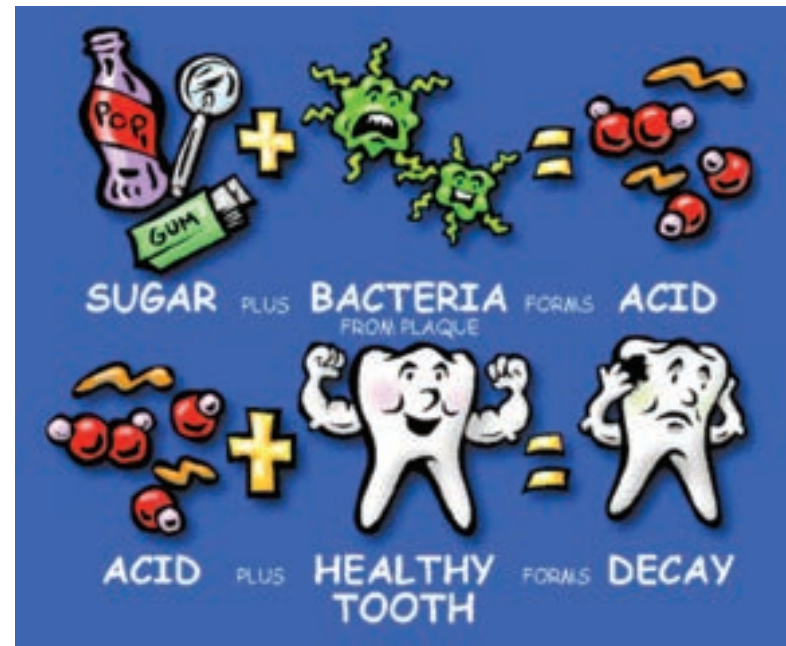
### PRIMARY TOOTH ERUPTION

	ERUPT (MONTHS)	SHED (YEARS)
UPPER TEETH		
Central Incisor	6-10	7-8
Lateral Incisor	8-12	8-9
Canine (Cuspid)	16-20	11-12
First Molar	11-18	9-11
Second Molar	20-30	9-12
LOWER TEETH		
Second Molar	20-30	11-13
First Molar	11-18	10-12
Canine (Cuspid)	16-20	9-11
Lateral Incisor	7-10	7-8
Central Incisor	5-8	6-7

### PERMANENT TOOTH ERUPTION

	ERUPT (YEARS)
UPPER TEETH	
Central Incisor	7-8
Lateral Incisor	8-9
Canine (Cuspid)	11-12
First Premolar (First Bicuspid)	10-11
Second Premolar (Second Bicuspid)	10-12
First Molar	6-7
Second Molar	12-13
Third Molar (Wisdom Tooth)	17-21
LOWER TEETH	
Third Molar (Wisdom Tooth)	17-21
Second Molar	11-13
First Molar	6-7
Second Premolar (Second Bicuspid)	11-12
First Premolar (First Bicuspid)	10-12
Canine (Cuspid)	9-10
Lateral Incisor	7-8
Central Incisor	6-7

## HOW CAVITIES HAPPEN



## HOW TO PREVENT CAVITIES



Regular dental visits for child and family



Healthy snacks



Brush with fluoride toothpaste at least 2 times daily



Drink tap water



Less or no juice



Only water or milk in sippy cups (no bottles for sleeping)



No soda



Less or no junk food and candy

## CARING FOR YOUR CHILD'S TEETH



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### Tooth Eruption

Throughout life, your child will have two sets of teeth: primary (baby) teeth and secondary (permanent) teeth. The primary teeth begin to erupt around ages 6-8 months, and all 20 have usually erupted by age 3.

Permanent teeth will begin to erupt into the mouth around age 6. With the exception of wisdom teeth, all adult teeth are present by ages 12-14. The first adult teeth to erupt are the permanent molars (behind the existing baby molars) and the lower central incisors.

### Risk Factors for Cavities

Cavities are the most common chronic disease of childhood—5 times more prevalent than asthma! Cavities are a disease process mediated by oral bacteria. Cavities are caused by bacteria in the mouth that digest sugars and produce acids. The bacteria, acid, food debris, and saliva combine to form plaque, which clings to the teeth. The acids in plaque dissolve the enamel surface of the teeth, creating holes in the teeth called cavities. The sugars responsible for cavities are the fermentable carbohydrates—sucrose, fructose, and glucose. Limit exposure to sugars by having your child eat three meals a day and two healthy snacks. Try to eliminate between-meal snacks containing fermentable carbohydrates.



**BAD FOODS:** Gummy vitamins, fruit snacks, fruit roll-ups, dried fruits, and fermentable carbohydrates such as chips, pretzels, crackers and cookies. Try to limit these snacks as much as possible.

**GOOD FOODS:** Natural cheeses (string cheese, mozzarella), plain yogurt, veggie sticks and real fruit.



There are many factors that can place your child at risk for cavities:

- Special health care needs.
- Medications—may contain sugar, can decrease salivary flow.
- Reflux (GERD), asthma.
- Grazers—frequent snacking and drinking.
- Breastfeeding—brush teeth after feeds.
- Juice and sweetened drinks—all contain sugars.
- Mom/primary caregiver's cavity history.



There are many things you can do to help prevent cavities:

- Do not place juice or flavored milk in sippy cup or bottle.
- Never take any liquids to bed except plain water.
- Limit frequency of exposure to juice—1 cup a day at meal time only. Cutting juice with water only decreases the calories, it does not decrease cavity risk.
- Caregivers can transfer cavity-causing bacteria to children—thus, minimize saliva-sharing behavior and schedule routine dental visits for caregivers.
- Diet—limit frequency of exposure to fermentable carbohydrates.