

# The OHNEP Interprofessional Oral Health Faculty Tool Kit

## Nurse Midwifery Program

### CURRICULUM INTEGRATION OF INTERPROFESSIONAL ORAL HEALTH CORE COMPETENCIES:

- Midwifery Health Assessment of Women & Gynecology
- Midwifery Care During Pregnancy
- Midwifery Care of Women During Labor, Birth, Postpartum & Care of Newborns
- Resources



# INTRODUCTION

The **Oral Health Nursing Education and Practice Program (OHNEP)** is pleased to launch a new edition of the **Interprofessional Oral Health Faculty Tool Kit** to provide you with user-friendly curriculum templates and teaching-learning resources to use when integrating oral health and its links to overall health in your Nurse Midwifery (CNM) Program.

Oral health and its links to overall health has been identified as an important population health issue in [Oral Health in America: Advances and Challenges](#) (2021), [Healthy People 2030](#) (2020). The [HRSA Interprofessional Oral Health Core Competencies](#) (2014), [ACNM Core Competencies for Basic Midwifery Practice](#) (2020), [The Essentials: Core Competencies for Professional Nursing Education](#) (AACN, 2021) and the [IPEC Core Competencies for Interprofessional Collaborative Practice](#) (2016) provide a framework for the innovative oral health curriculum templates and exciting resources that illustrate how oral health and its links to overall health provide strategies that expose students to interprofessional experiences by integrating oral health “bytes” into courses across the Midwifery curriculum.

Exciting teaching-learning strategies that take students from **Exposure to Immersion to Competence** can begin in or out of the classroom, link to simulated or live clinical experiences and involve interprofessional community-based service learning, advocacy and policy initiatives as venues you can easily use to integrate oral health into your existing Midwifery curriculum. The curriculum templates illustrate how oral health can be integrated into health promotion, health assessment and clinical management courses.

The new edition of the [Smiles for Life](#) (2020) interprofessional oral health curriculum provides a robust web-based resource for you to use along with the oral health curriculum templates for each course. A good place to begin oral health integration is by transitioning the **HEENT** component of the history and physical exam to the **HEENOT** approach. In that way, you and your students will **NOT** forget about including oral health in patient encounters.

Research evidence continues to reveal an integral relationship between oral and overall health. Pregnancy, Gestational Diabetes, Intimate Partner Violence, STIs, and eating disorders are but a few of the health issues and/or problems that have oral manifestations that can be treated by Midwives or referred to our dental colleagues. It is important for Midwives on the frontlines of women’s health care to have the oral health competencies necessary to recognize both normal and abnormal oral conditions and provide gender-affirming care to patients with education, prevention, diagnosis, treatment and referral as needed.

We encourage you and your students to explore the resources in the templates as you “weave” oral health and its links to overall health into your Nurse Midwifery Program. If you need additional technical assistance, please feel free to contact us at [OHNEP@nyu.edu](mailto:OHNEP@nyu.edu).

# Midwifery Curriculum Integration of Interprofessional Oral Health Competencies in Health Assessment of Women and Gynecology

MIDWIFERY HEALTH ASSESSMENT OF WOMEN & GYNECOLOGY	1) EXPOSURE: INTRODUCTION	2) IMMERSION: DEVELOPMENT	3) COMPETENCE: ENTRY-TO-PRACTICE
<p>HRSA Oral Health Competencies: Oral Health Risk Assessment, Oral Health Evaluation, Oral Health Preventive Intervention, Communication and Education</p>	<p><b>KNOWLEDGE: RISK FACTORS FOR ORAL DISEASES</b>  <i>Goal:</i> Describe oral disease risk factors for adolescent and adult patients</p> <p>Read:</p> <ul style="list-style-type: none"> <li>• <a href="#">Oral Health is A Women’s Health Issue</a> (NWHN, 2018)</li> <li>• <a href="#">Improving oral health during pregnancy: a call to action</a> (Haber et al., 2022)</li> <li>• <a href="#">Pregnancy and Oral Health</a> (CDC)</li> <li>• <a href="#">Predictors of self-reported oral health in the Black Women’s Health Study</a> (Cozier et al., 2019)</li> </ul>	<p><b>SKILL/BEHAVIOR</b>  <i>Goal:</i> Include oral health in history, physical exam and risk assessment (HEENOT) in simulation lab for adolescent and adult patients</p> <ul style="list-style-type: none"> <li>• Read and discuss <a href="#">ADA Caries Risk Assessment Form (Age &gt;6)</a> (Appendix 1)</li> <li>• Read <a href="#">Oral Health in Women with a History of High Gestational Diabetes Risk</a> (Poulsen et al., 2019)</li> <li>• Practice integrating oral health in the history, physical exam, risk assessment and management plan of adolescent and adult patients in clinical settings</li> </ul>	<p><b>SKILL/BEHAVIOR</b>  <i>Goal:</i> Demonstrate competency in oral health history, physical exam and risk assessment in gynecological, wellness, preconception and pregnancy visits in clinical setting</p> <p>Read:</p> <ul style="list-style-type: none"> <li>• <a href="#">Prescribing Opioids for Women of Reproductive Age: Information for Dentists</a> (OHRC)</li> <li>• Collaborate with DDS/DH students on a case presentation for pregnant patients experiencing acute dental pain, including plan for patient education, prevention, anticipatory guidance, referral and follow-up care</li> </ul>
<p>AACN Essentials: Person-centered care, Population health, Inter-professional partnerships, Knowledge for nursing practice, Scholarship for nursing discipline</p>	<p><b>KNOWLEDGE: ORAL CARE IN GYN, WELLNESS, &amp; PRECONCEPTION VISITS</b>  <i>Goal:</i> Describe oral exam of adolescent and adult patients</p> <ul style="list-style-type: none"> <li>• Complete <a href="#">Smiles for Life (SFL)</a> Modules #1, 3, 7, including Clinical Cases, and submit SFL certificates of completion</li> <li>• Read <a href="#">My preferred pronoun is she: Understanding transgender identity and oral health care needs</a> (Macri &amp; Wolfe, 2019)</li> <li>• Review <a href="#">Sexually Transmitted Diseases and Your Mouth</a> (Mouth Healthy)</li> <li>• Review <a href="#">Cancer (Head and Neck)</a> (ADA)</li> </ul>	<p><b>SKILL/BEHAVIOR</b>  <i>Goal:</i> Include oral health in physical exam (HEENOT) in simulation lab</p> <p>Read:</p> <ul style="list-style-type: none"> <li>• <a href="#">Improving HPV Vaccine Confidence: An Interprofessional Challenge</a> (Cipollina, 2022)</li> <li>• <a href="#">Making the case for interprofessional education and practice collaboration to address rising rates of HPV-associated oropharyngeal cancers</a> (Haber et al., 2022)</li> <li>• Develop talking points to use with adolescents and adults to decrease HPV vaccine hesitancy</li> </ul>	<p><b>SKILL/BEHAVIOR</b>  <i>Goal:</i> Demonstrate collaborative approaches to decreasing barriers to oral health care access for vulnerable adolescent and adult patients</p> <ul style="list-style-type: none"> <li>• Read <a href="#">Putting the Mouth Back in the Head: HEENT to HEENOT</a> (Haber et al, 2015)</li> <li>• Collaborate with DDS/DH students to develop a community dental resource network and have a list of accessible dental providers, including those who accept Medicaid, to offer to your patients</li> </ul>
<p>ACNM Competencies: Provides age-appropriate physical, mental, genetic, environmental sexual, &amp; social health assessment; Utilizes advanced health assessment skills; Demonstrates the knowledge, skills, &amp; abilities to provide comprehensive gynecologic/reproductive/sexual health care</p>	<p><b>KNOWLEDGE: COMMON ORAL-SYSTEMIC HEALTH ISSUES</b>  <i>Goal:</i> Describe oral manifestations of common health problems</p> <p>Read:</p> <ul style="list-style-type: none"> <li>• <a href="#">Adverse Pregnancy Outcomes and Cardiovascular Disease Risk</a> (Parikh et al., 2021)</li> <li>• <a href="#">Association between oral health and cardiovascular outcomes in patients with hypertension</a> (Kim et al., 2022)</li> <li>• <a href="#">Severe Periodontitis Is Associated with Myocardial Infarction in Females</a> (Nordendahl et al., 2018)</li> <li>• <a href="#">Oral health–related quality of life and unmet dental needs among women living with HIV</a> (Parish et al., 2020)</li> </ul>	<p><b>SKILL/BEHAVIOR</b>  <i>Goal:</i> Demonstrate understanding of health literacy and strategies to improve oral-systemic health behaviors</p> <p>Read:</p> <ul style="list-style-type: none"> <li>• <a href="#">Screening for intimate partner violence in healthcare settings: An implementation-oriented systematic review</a> (Miller et al., 2021)</li> <li>• <a href="#">Intimate Partner Violence Shocks the Head and Mind</a> (Cipollina, 2020)</li> <li>• Identify and discuss screening questions and trauma-informed practices to addressing IPV with patients in clinical settings</li> </ul>	<p><b>COLLABORATIVE CASE PRESENTATION</b>  <i>Goal:</i> Identify a collaborative management plan for a pregnant patient with cardiovascular disease</p> <ul style="list-style-type: none"> <li>• Following health literacy principles, collaborate with dental and nutrition colleagues on a patient brochure demonstrating how practicing good oral hygiene is essential to maintaining cardiovascular health during pregnancy</li> <li>• Role play an interaction with a woman living with HIV about the importance of their oral health to overall quality of life and well-being</li> </ul>

ENTRY LEVEL ASSESSMENT

SUMMATIVE ASSESSMENT

INTERPROFESSIONAL PARTNERSHIP & COLLABORATIVE PRACTICE FOR OPTIMIZATION OF PATIENT HEALTH OUTCOMES

# Smiles for Life: A National Oral Health Curriculum

<https://smilesforlifeoralhealth.org>

[Click here](#) to download materials for implementing modules in a classroom setting.

The screenshot shows the Smiles for Life website interface. At the top is a green navigation bar with the logo and menu items: Continuing Education, Resources, About Us, SFL Media, Contact Us, My Account, Login, and a search icon. Below the navigation bar is a white section with the heading "Click a Course Below to Get Started". Three course cards are displayed in a row. The first card features a Venn diagram with two overlapping circles, one green labeled "ORAL" and one purple labeled "SYSTEMIC". The second card shows a close-up of a child's mouth being examined by a dental professional wearing blue gloves. The third card shows a dental professional in a white coat talking to a patient in a dental chair. Each card includes a "See more..." button and a progress bar at the bottom indicating "0% COMPLETE".

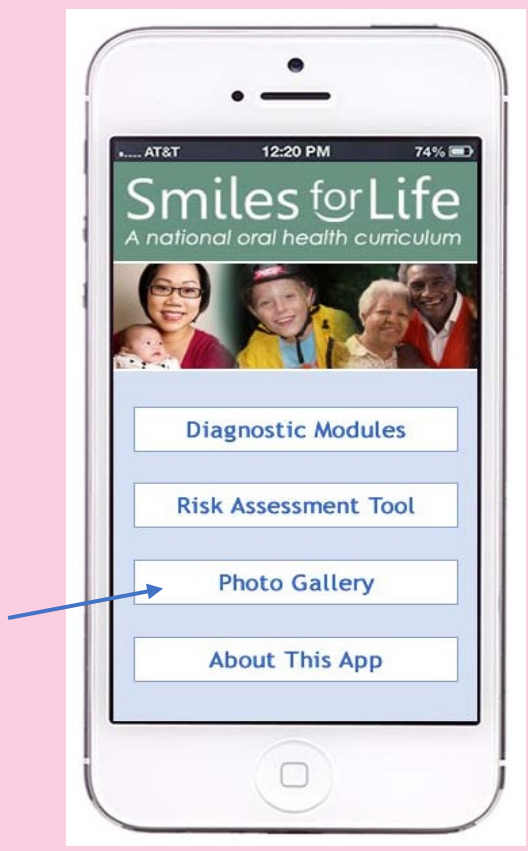
# Smiles for Life: A National Oral Health Curriculum

## Recognizing Oral Abnormalities

Download the Smiles for Life mobile app to access the Photo Gallery.

Midwifery Students should find and review the following oral abnormalities:

- Enamel erosion
- Gingivitis
- Periodontitis
- Aphthous ulcers
- Oral papilloma from HPV
- Candidiasis
- Herpes
- Dental caries
- GERD
- Gingival Recession
- Gingivitis
- Periodontitis
- Graanuloma



# APPENDIX 1

## Midwifery Health Assessment of Women & Gynecology

### American Dental Association Caries Risk Assessment Form (Age >6)

ADA American Dental Association® America's leading advocate for oral health			
Caries Risk Assessment Form (Age >6)			
Patient Name: _____			
Birth Date: _____		Date: _____	
Age: _____		Initials: _____	
	Low Risk	Moderate Risk	High Risk
Contributing Conditions		Check or Circle the conditions that apply	
I.	Fluoride Exposure (through drinking water, supplements, professional applications, toothpaste)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
II.	Sugary Foods or Drinks (including juice, carbonated or non-carbonated soft drinks, energy drinks, medicinal syrups)	Primarily at mealtimes <input type="checkbox"/>	Frequent or prolonged between meal exposures/day <input type="checkbox"/>
III.	Caries Experience of Mother, Caregiver and/or other Siblings (for patients ages 6-14)	No carious lesions in last 24 months <input type="checkbox"/>	Carious lesions in last 7-23 months <input type="checkbox"/>
IV.	Dental Home: established patient of record, receiving regular dental care in a dental office	<input type="checkbox"/> Yes	<input type="checkbox"/> No
General Health Conditions		Check or Circle the conditions that apply	
I.	Special Health Care Needs (developmental, physical, medical or mental disabilities that prevent or limit performance of adequate oral health care by themselves or caregivers)	<input type="checkbox"/> No	Yes (over age 14) <input type="checkbox"/>
II.	Chemo/Radiation Therapy	<input type="checkbox"/> No	Yes (ages 6-14) <input type="checkbox"/>
III.	Eating Disorders	<input type="checkbox"/> No	<input type="checkbox"/> Yes
IV.	Medications that Reduce Salivary Flow	<input type="checkbox"/> No	<input type="checkbox"/> Yes
V.	Drug/Alcohol Abuse	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Clinical Conditions		Check or Circle the conditions that apply	
I.	Cavitated or Non-Cavitated (incipient) Carious Lesions or Restorations (visually or radiographically evident)	No new carious lesions or restorations in last 36 months <input type="checkbox"/>	1 or 2 new carious lesions or restorations in last 36 months <input type="checkbox"/>
II.	Teeth Missing Due to Caries in past 36 months	<input type="checkbox"/> No	<input type="checkbox"/> Yes
III.	Visible Plaque	<input type="checkbox"/> No	<input type="checkbox"/> Yes
IV.	Unusual Tooth Morphology that compromises oral hygiene	<input type="checkbox"/> No	<input type="checkbox"/> Yes
V.	Interproximal Restorations - 1 or more	<input type="checkbox"/> No	<input type="checkbox"/> Yes
VI.	Exposed Root Surfaces Present	<input type="checkbox"/> No	<input type="checkbox"/> Yes
VII.	Restorations with Overhangs and/or Open Margins: Open Contacts with Food Impaction	<input type="checkbox"/> No	<input type="checkbox"/> Yes
VIII.	Dental/Orthodontic Appliances (fixed or removable)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
IX.	Severe Dry Mouth (Xerostomia)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Overall assessment of dental caries risk:		<input type="checkbox"/> Low	<input type="checkbox"/> Moderate
Patient Instructions:		<input type="checkbox"/> High	

# Midwifery Curriculum Integration of Interprofessional Oral Health Competencies in Care During Pregnancy

MIDWIFERY CARE DURING PREGNANCY	1) EXPOSURE: INTRODUCTION	2) IMMERSION: DEVELOPMENT	3) COMPETENCE: ENTRY-TO-PRACTICE
<p>HRSA Oral Health Competencies: Oral Health Risk Assessment, Oral Health Evaluation, Oral Health Preventive Intervention, Communication and Education</p>	<p><b>KNOWLEDGE: ORAL HEALTH IN PREGNANCY MYTHS</b>  <i>Goal:</i> Identify common myths about oral health during pregnancy            Read:  <ul style="list-style-type: none"> <li>• <a href="#">Improving Access to Dental Care for Pregnant Women</a> (APHA, 2020)</li> <li>• <a href="#">"I Didn't Know": Pregnant Women's Oral Health Literacy Experiences and Future Intervention Preferences</a> (Vamos et al., 2019)</li> <li>• <a href="#">Promoting oral health for mothers and children</a> (Haber et al., 2020)</li> </ul> </p>	<p><b>SKILL/BEHAVIOR</b>  <i>Goal:</i> Demonstrate ability to dispel common myths about oral health during pregnancy</p> <ul style="list-style-type: none"> <li>• Students choose one of the myths listed in <a href="#">Pregnancy and Oral Health: Truth or Fiction</a> (AAP, 2017) or <a href="#">Myths and Facts: The Pregnant Women's Guide to Dental Health</a> (Delta Dental, 2022) and write an evidence-based argument to dispel one of the common myths about oral health during pregnancy</li> </ul>	<p><b>SKILL/BEHAVIOR</b>  <i>Goal:</i> Demonstrate ability to analyze contemporary issues, policies, and health care system(s) factors that influence oral-systemic health outcomes for parent and baby</p> <ul style="list-style-type: none"> <li>• Identify a policy that would help pregnant parents in your catchment area overcome barriers to accessing oral health care. Prepare a 2-minute evidence-based speech to present this policy to your local representative.</li> </ul>
<p>AACN Essentials: Person-centered care, Population health, Inter-professional partnerships, Knowledge for nursing practice, Scholarship for nursing discipline</p>	<p><b>KNOWLEDGE: PRENATAL ORAL HEALTH CARE</b>  <i>Goal:</i> Describe oral exam of the pregnant patient</p> <ul style="list-style-type: none"> <li>• Complete <a href="#">Smiles for Life (SFL)</a> Module #5, including Clinical Cases, and submit Certificate of Completion</li> </ul> <p>Read:  <ul style="list-style-type: none"> <li>• <a href="#">Improving oral health during pregnancy: a call to action</a> (Haber et al., 2022)</li> <li>• <a href="#">Oral Health Knowledge, Practices, and Awareness of Oral Health Guidelines and Dental Coverage Policies among Midwives</a> (Naavaal &amp; Claiborne, 2020)</li> </ul> </p>	<p><b>SKILL/BEHAVIOR</b>  <i>Goal:</i> Include oral health history, risk assessment and HEENOT in prenatal care in simulation lab</p> <ul style="list-style-type: none"> <li>• Read <a href="#">Providing Gender Affirming and Inclusive Care to Transgender Men Experiencing Pregnancy</a> (Chu et al., 2022)</li> <li>• Review <a href="#">Pharmacological Considerations for Pregnant Women</a> (Appendix 1)</li> <li>• Discuss risk factors for periodontal disease in pregnancy</li> <li>• Discuss safe antibiotic choices for pregnant patients</li> </ul>	<p><b>SKILL/BEHAVIOR</b>  <i>Goal:</i> Demonstrate competency in oral health history, risk assessment and HEENOT in prenatal visit in clinical setting</p> <ul style="list-style-type: none"> <li>• Read <a href="#">Putting the Mouth Back in the Head: HEENT to HEENOT</a> (Haber et al, 2015)</li> <li>• Document HEENOT findings in electronic health record</li> <li>• Collaborate with DDS/DH students to identify 5 of the most important social determinants of health that impact oral health access to pregnancy and well-child care in your community</li> </ul>
<p>ACNM Competencies: Demonstrates the knowledge, skills and abilities to provide care in the antepartum period; Demonstrates the knowledge, skills, and abilities to provide preconception care</p>	<p><b>KNOWLEDGE: COMMON DISCOMFORTS OF PREGNANCY</b>  <i>Goal:</i> Describe common oral problems in pregnancy and how they can influence oral-systemic health outcomes for parent and baby</p> <p>Read:  <ul style="list-style-type: none"> <li>• <a href="#">Racial and oral health disparity associated with perinatal oral health care utilization among underserved US pregnant women</a> (Al Jallad et al., 2022)</li> <li>• <a href="#">Periodontal management of changes in gingiva during pregnancy: A nonsurgical approach</a> (Ayachi et al., 2021)</li> <li>• <a href="#">Periodontology and pregnancy: An overview of biomedical and epidemiological evidence</a> (Raju &amp; Berens, 2021)</li> </ul> </p>	<p><b>SKILL/BEHAVIOR</b>  <i>Goal:</i> Demonstrate understanding of health literacy and strategies to improve oral health behaviors</p> <ul style="list-style-type: none"> <li>• Read <a href="#">The Impact of Oral Health on Low-Income Pregnant Women Living in the United States</a> (Diss &amp; Ward, 2022)</li> <li>• Choose brochures from <a href="#">Oral Health Care During Pregnancy</a> (MCOH, 2020) and prepare a FAQ sheet about safe dental care during pregnancy</li> </ul>	<p><b>COLLABORATIVE CASE PRESENTATION</b>  <i>Goal:</i> Identify a collaborative care plan for pregnant patient with periodontal disease</p> <ul style="list-style-type: none"> <li>• Read <a href="#">Psychologically informed oral health interventions in pregnancy and type 2 diabetes: a scoping review protocol</a> (Böhme Kristensen et al., 2022)</li> <li>• Collaborate with DDS/DH student on a case presentation, including comprehensive antepartum management plan of care for a pregnant patient with type 2 diabetes</li> <li>• Refer at risk, first-time pregnant patients to the local NFP and WIC programs</li> </ul>

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CONSTRUCTS

# APPENDIX 1

## Midwifery Health Assessment of Women & Gynecology

### Pharmacological Considerations for Pregnant Women

#### Pharmacological Considerations for Pregnant Women

The pharmacological agents listed below are to be used only for indicated medical conditions and with appropriate supervision.

Pharmaceutical Agent	Indications, Contraindications, and Special Considerations
<b>Analgesics</b>	
Acetaminophen	May be used during pregnancy. Oral pain can often be managed with non-opioid medication. If opioids are used, prescribe the lowest dose for the shortest duration (usually less than 3 days), and avoid issuing refills to reduce risk for dependency.
Acetaminophen with Codeine, Hydrocodone, or Oxycodone	
Codeine	
Meperidine	
Morphine	
Aspirin	May be used in short duration during pregnancy; 48 to 72 hours. Avoid in 1st and 3rd trimesters.
Ibuprofen	
Naproxen	
<b>Antibiotics</b>	
Amoxicillin	May be used during pregnancy.
Cephalosporins	
Clindamycin	
Metronidazole	
Penicillin	
Ciprofloxacin	Avoid during pregnancy.
Clarithromycin	
Levofloxacin	
Moxifloxacin	
Tetracycline	
<b>Anesthetics</b>	
	Consult with a prenatal care health professional before using intravenous sedation or general anesthesia. Limit duration of exposure to less than 3 hours in pregnant women in the third trimester.
Local anesthetics with epinephrine (e.g., Bupivacaine, Lidocaine, Mepivacaine)	May be used during pregnancy.
Nitrous oxide (30%)	May be used during pregnancy when topical or local anesthetics are inadequate. Pregnant women require lower levels of nitrous oxide to achieve sedation; consult with prenatal care health professional.
<b>Antimicrobials</b>	
	Use alcohol-free products during pregnancy.
Cetylpyridinium chloride mouth rinse	May be used during pregnancy.
Chlorhexidine mouth rinse	
Xylitol	



# Midwifery Curriculum Integration of Interprofessional Oral Health Competencies in Care of Women During Labor, Birth, Postpartum and Care of Newborns

MIDWIFERY CARE OF WOMEN DURING LABOR, BIRTH, POSTPARTUM & CARE OF NEWBORNS	1) EXPOSURE: INTRODUCTION	2) IMMERSION: DEVELOPMENT	3) COMPETENCE: ENTRY-TO-PRACTICE
<p>HRSA Oral Health Competencies: Oral Health Risk Assessment, Oral Health Evaluation, Oral Health Preventive Intervention, Communication and Education</p>	<p><b>KNOWLEDGE: INFANT ORAL HEALTH EDUCATION FOR NEW PARENTS</b>  <i>Goal:</i> Describe importance of oral health for parent and baby</p> <ul style="list-style-type: none"> <li>• Watch Infant Oral Health &amp; ECC in Care of the Babies <a href="#">Teeth for Two Online Educational Presentation</a> (Password: nyu2014)</li> <li>• <a href="#">Perinatal and Infant Oral Health Care</a> (AAPD, 2021)</li> <li>• <a href="#">Effect of Frenotomy on Maternal Breastfeeding Symptoms</a> (Hill et al., 2022)</li> </ul>	<p><b>SKILL/BEHAVIOR</b>  <i>Goal:</i> Identify strategies for educating new parents about infant oral health care</p> <ul style="list-style-type: none"> <li>• Read <a href="#">The Interprofessional Role in Dental Caries Management: Impact of the Nursing Profession in Early Childhood Caries</a> (Haber &amp; Hartnett, 2019)</li> <li>• Review <a href="#">National Center on Health and Cavity Free Kids (CFK) Tools</a> (Appendices 1-8)</li> <li>• Watch <a href="#">A Healthy Mouth for Your Baby</a> (NIDCR, 2013)</li> </ul>	<p><b>SKILL/BEHAVIOR</b>  <i>Goal:</i> Develop a collaborative infant oral health education plan for postpartum parent</p> <p>Read:</p> <ul style="list-style-type: none"> <li>• <a href="#">Interventions supporting community nurses in the provision of oral healthcare to people living at home: a scoping review</a> (Stark et al., 2022)</li> <li>• <a href="#">Promoting oral health for mothers and children</a> (Haber et al., 2020)</li> <li>• Collaborate with PNP student to provide oral health education and anticipatory guidance for parent of newborn at pediatric clinic</li> </ul>
<p>AACN Essentials: Person-centered care, Population health, Inter-professional partnerships, Knowledge for nursing practice, Scholarship for nursing discipline</p>	<p><b>KNOWLEDGE: ORAL HEALTH CARE OF INFANT</b>  <i>Goal:</i> Describe oral exam and oral care of newborn</p> <p>Read:</p> <ul style="list-style-type: none"> <li>• <a href="#">Guideline on Caries-risk Assessment and Management for Infants, Children, and Adolescents</a> (AAPD, 2022)</li> <li>• <a href="#">Perinatal and Infant Oral Health Care</a> (AAPD, 2021)</li> <li>• <a href="#">MICHC Oral Health Manual and Toolkit: Section II</a> (NYS DOH)</li> </ul>	<p><b>SKILL/BEHAVIOR</b>  <i>Goal:</i> Include oral health history, physical exam and risk assessment (HEENOT) when caring for newborn in simulation lab</p> <ul style="list-style-type: none"> <li>• Following health literacy principles, develop an oral health FAQ sheet for new mothers about oral care of their newborn</li> <li>• Role-play an interaction with an at-risk first-time mother about a referral to a WIC program or a community-based home visitor program</li> </ul>	<p><b>SKILL/BEHAVIOR</b>  <i>Goal:</i> Demonstrate competency in oral health history, physical exam and risk assessment (HEENOT) in postpartum and neonatal periods in clinical setting</p> <ul style="list-style-type: none"> <li>• Review <a href="#">Putting the Mouth Back in the Head: HEENT to HEENOT</a> (Haber et al, 2015)</li> <li>• Document HEENOT findings in electronic health record</li> <li>• Analyze the importance of frontline health workers (CHW, Promotores, patient navigators, etc.) as members of maternal-child health teams</li> <li>• Implement an oral health anticipatory guidance session with a new parent during the postpartum visit</li> </ul>
<p>ACNM Competencies: Demonstrates knowledge, skills and abilities to provide care in the period following pregnancy; Demonstrates the knowledge, skills and abilities to manage the care of the well neonate (newborn immediately after birth and up to 28 days of life)</p>	<p><b>KNOWLEDGE: INFANT FEEDING</b>  <i>Goal:</i> Describe relationship between infant feeding decisions and oral health</p> <p>Read:</p> <ul style="list-style-type: none"> <li>• <a href="#">American Academy of Pediatrics Policy Statement: Breastfeeding and the Use of Human Milk</a> (Meek &amp; Noble, 2022)</li> <li>• <a href="#">Effect of Frenotomy on Maternal Breastfeeding Symptoms</a> (Hill et al., 2022)</li> <li>• <a href="#">Speech and Feeding Improvements in Children After Posterior Tongue-Tie Release</a> (Baxter &amp; Hughes, 2018)</li> </ul>	<p><b>SKILL/BEHAVIOR</b>  <i>Goal:</i> Include oral assessment in infant breastfeeding assessment</p> <ul style="list-style-type: none"> <li>• Following health literacy principles, develop a brochure about breastfeeding and infant oral health for new parents</li> <li>• Role play an oral-health teaching-learning session with a postpartum parent demonstrating how to care for her baby's gums and teeth</li> </ul>	<p><b>SKILL/BEHAVIOR</b>  <i>Goal:</i> Identify a collaborative care plan for infant with ankyloglossia</p> <ul style="list-style-type: none"> <li>• Collaborate with DDS/DH students on case presentation, including parent education on benefits of frenotomy and comprehensive care plan, for infant with tongue-tie</li> <li>• Identify a list of pediatric dentists and/or oral surgeons in the community who perform frenotomies</li> </ul>

ENTRY LEVEL ASSESSMENT

SUMMATIVE ASSESSMENT

INTERPROFESSIONAL PARTNERSHIP & COLLABORATIVE PRACTICE FOR OPTIMIZATION OF PATIENT HEALTH OUTCOMES

# APPENDIX 1

## Midwifery Care of Women During Labor, Birth, Postpartum & Care of Newborns

### Cavity Free Kids: [Lift the Lip](#)

#### Lift the Lip

##### Did You Know?

- Lift the Lip is one way for you to check your child's teeth for early signs of tooth decay.
- It's quick and easy to do—take a minute to Lift the Lip while you're reading or playing with your child, before bed, or during toothbrushing.
- By checking your child's teeth once a month, you can help identify early tooth decay and prevent cavities.



Ignoring early signs of decay can lead to cavities.

##### How to Lift the Lip

1. Lift or gently push the upper lip so the teeth and gums are visible.
2. Look at the upper teeth—the front and back of the teeth for plaque on the gum line, white, brown, or black spots.
3. Repeat the process with the lower teeth.
4. If you see spots or anything unusual, have your child's teeth checked by a dentist or medical provider as soon as possible.

*Your child may fuss, cry or wiggle while you check his teeth. As you both get more comfortable with the process it will get easier.*

##### Take the Healthy Mouth Challenge!

I will:

- Lift my child's lip at least once a month to check for early signs of tooth decay.
- Make an appointment with dentist or medical provider if I see white, brown or black spots or have other concerns.



BABY TEETH ARE IMPORTANT

Cavity Free Kids™ Oral Health Education for Children Birth through Age Five, and their Families - Copyright © 2015 WDSF

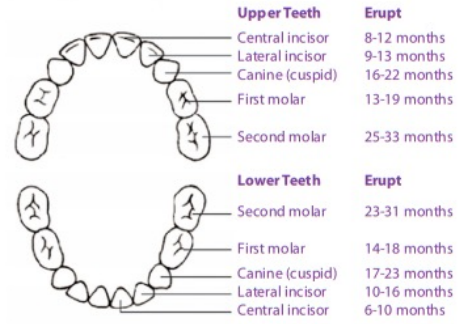
### Cavity Free Kids: [Teething](#)

## Teething

### Did You Know?

- Babies will usually begin to get their teeth around 6 months of age.
- While teething, babies may chew on their fingers, hands, or anything that they can get into their mouths.
- Comfort a teething baby by offering a cold, firm, safe and clean teething object, like a teething ring or slightly frozen damp washcloth.
- Drooling and fussiness are normal signs of teething.

Teething biscuits and crackers are often sticky and sugary and can cause cavities. **Do not offer them for teething.**



### Take the Healthy Mouth Challenge!

I will:

- Get a teething ring or put a washcloth in the freezer to comfort my teething baby.



# APPENDIX 3

## Midwifery Care of Women During Labor, Birth, Postpartum & Care of Newborns

### Healthy Habits for Happy Smiles: [Helping Your Baby with Teething Pain](#)

#### Healthy Habits for Happy Smiles



#### Helping Your Baby with Teething Pain

**I**t is exciting to see your baby's first tooth! Baby (primary) teeth begin to come in when your child is about 6 to 10 months old. For some babies, teething hurts. As teeth come in, babies might be cranky or drool more. They might have sore or swollen gums. And they may chew on things.



*School readiness begins with health!*



Tips for helping your baby with teething pain:

- Check your child's teeth and mouth.
- Rub your baby's gums with a clean finger. The rubbing may make your baby's gums feel better.
- Find teething toys that have solid pieces. Loose pieces can break off and make your baby choke.
- It is best not to use teething toys that have liquid in them. Your baby could chew a hole into them.
- Don't put any teething toys or necklaces around your baby's neck. And don't pin or clip them to your baby's clothes. The toy could get tangled around your baby's neck and make her choke.
- Give your baby something cool to chew on. Clean, refrigerated spoons, pacifiers, teething rings, and wet washcloths are good choices. Don't put teething rings in the freezer. That makes them too cold for your baby's mouth.
- With your baby seated in a high chair, offer a chunk of frozen banana or plain bagel to chew on. Give your baby the whole piece of food. Don't cut it into small pieces. Keep an eye on your baby when she eats in case she chokes.
- Don't use teething gels or liquids on your baby's gums. They are not safe.



This handout was prepared by the National Center on Early Childhood Health and Wellness under cooperative agreement #90HC0013 for the U.S. Department of Health and Human Services, Administration for Children and Families, Office of Head Start.  
National Center on Early Childhood Health and Wellness. 2016. *Healthy Habits for Happy Smiles: Helping Your Baby with Teething Pain*. Elk Grove Village, IL: National Center on Early Childhood Health and Wellness.  
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ADMINISTRATION FOR  
CHILDREN & FAMILIES



NATIONAL CENTER ON  
Early Childhood  
Health and Wellness

# APPENDIX 4

## Midwifery Care of Women During Labor, Birth, Postpartum & Care of Newborns

### Healthy Habits for Happy Smiles: [Getting Fluoride for Your Child](#)



### Healthy Habits for Happy Smiles

## Getting Fluoride for Your Child

Fluoride is found in nature in soil, plants, and water. Fluoride is safe. Drinking tap (faucet) water with fluoride, brushing with fluoride toothpaste, and having a health professional apply fluoride varnish to the teeth are important ways to make teeth strong and prevent tooth decay.



*School readiness begins with health!*

### Fluoride in Water


- Since most water doesn't have enough natural fluoride to prevent tooth decay, many communities add fluoride to their water supply (tap water) used for drinking and cooking.
- Give your child tap water with fluoride. If you are not sure if your water has enough fluoride, ask your child's dental clinic for help in finding out.
- Some bottled waters contain fluoride, and some do not. Check with the bottled water's manufacturer to ask about the fluoride content of a particular brand.
- If your tap water does not have enough fluoride, ask your dental or medical clinic if your child needs fluoride drops or tablets.

### Fluoride Toothpaste

- Brush your child's teeth after breakfast and before bed once the first tooth begins to show.
- Use a child-sized toothbrush with soft bristles and fluoride toothpaste.
- See *Healthy Habits for Happy Smiles: Brushing Your Child's Teeth* for more information.

### Fluoride Varnish



- Fluoride varnish is painted on a child's teeth to prevent or reduce cavities.
- It is not permanent but keeps fluoride on the teeth for several hours.
- Fluoride varnish has a pleasant taste and is well tolerated by children.



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This handout was prepared by the National Center on Early Childhood Health and Wellness under cooperative agreement #90HC0013 for the U.S. Department of Health and Human Services, Administration for Children and Families, Office of Head Start. National Center on Early Childhood Health and Wellness, 2016. Healthy Habits for Happy Smiles: Getting Fluoride for Your Child. Elk Grove Village, IL: National Center on Early Childhood Health and Wellness.

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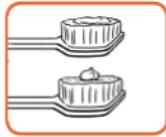



# APPENDIX 5

## Midwifery Care of Women During Labor, Birth, Postpartum & Care of Newborns

### Cavity Free Kids: [How to Brush](#) & [How to Floss](#)

#### How To Brush



Use a soft bristle toothbrush and fluoridated toothpaste.

Use a smear of toothpaste from the first tooth up to age 3, a pea-sized amount after that.



Hold your brush at an angle where the gum meets the tooth.

Food and germs like to stick there.



Move the toothbrush in small circles.

Count to 5 before moving the brush to another spot.



Remember the biting surfaces.

That is where the food gets stuck and germs hide.



Brush the tongue.

Germs hide there.

Brush your child's teeth (and yours!) twice a day—after breakfast and before bed.



#### How To Floss



Wrap the floss around your middle or index fingers to get a firm grip.

Hold between your thumbs and fingers.



Gently slide the floss between two teeth. Then wrap the floss toward one tooth, hugging it as you gently slide it up, back, forth, and down.



Repeat this process on all teeth. Remember to hug that back tooth even though it is the last one in line.

#### Remember...

- ✓ Always use a clean piece of floss between teeth.
- ✓ Never snap or force floss as this may cut or bruise gum tissue.
- ✓ Children cannot floss by themselves, they need your help.
- ✓ Start flossing your child's teeth as soon as teeth touch.
- ✓ It will help your child learn good habits if they see you floss.



### Cavity Free Kids: [FAQ](#)

#### Family Engagement FAQ

Cavity Free Kids > Family Engagement > Family Engagement FAQ

**Q: When should I start brushing baby's teeth?**

A: Clean baby's mouth like you clean the rest of her/him—even before teeth come in. Wipe baby's gums and tongue with a clean, moist cloth. When the first teeth come in, brush gently with a soft baby toothbrush, with a smear (rice-sized) amount of fluoride toothpaste.

**Q: My baby is teething and is so fussy. What can I do?**

A: Teething biscuits or cookies are not good for teeth. Try a cold teething ring or a clean moist cloth.

**Q: My grandma told me to dip the baby's pacifier in honey to help him sleep. Honey is a natural sugar, so it won't hurt his/her teeth, will it?**

A: Any kind of sugar or sticky food can cause tooth decay. Besides creating a problem for your child's teeth, honey is not recommended for infants because it may contain certain bacteria that could make your child sick.

**Q: I only brush my baby's teeth 3 or 4 days each week. The last time I brushed I saw some very white spots on the front of her teeth. Does this mean that her teeth are really healthy?**

A: Those white spots may be the beginning stages of tooth decay. When the teeth aren't brushed every day, the cavity-causing germs stay on teeth and can start to destroy the teeth. Check with the dentist right away in order to keep the white spots from developing into cavities.

**Q: My mother watches my 18-month-old while I work. She lets my daughter walk around with a bottle of apple juice because it's less messy than a cup. What do I say to my mom?**

A: You could use 3 different approaches:

- The "natural" sugar in juice can cause tooth decay. Sipping on sweet drinks covers your child's teeth in cavity-causing acids again and again each time she takes a sip. Those repeated "acid attacks" can weaken and destroy her teeth.
- Juice has no nutritional value. Try to serve whole fruits and vegetables since they have more nutrients and are higher in fiber which is good for everyone! Between meals, "water is first for thirst." This helps establish a healthy, water-drinking habit.

**Q: My two-year-old likes to eat toothpaste out of the tube. Will this help strengthen his teeth?**

A: No. Children should not swallow toothpaste. Toothpaste is for teeth, not tummies. Remember—just a pea-sized amount! Putting the toothpaste on is a grown-up job. Keep toothpaste out of a child's reach.

**Q: My two year-old brushes all by himself! We don't need to help him, do we?**

A: It is wonderful that your child is showing independence, but two-year-olds do not have the coordination to brush well enough. After your child brushes, you can finish the job. Children need to be supervised and helped with brushing until they are between 6 and 8 years old or can tie their shoes.

**Q: Why should I worry about baby teeth?**

A: Baby teeth are important! They help children eat foods, form words, and hold space for adult teeth. Healthy baby teeth mean a healthy mouth for the adult teeth.

**Q: We use a water filter at our house. Does this take out the fluoride?**

A: The faucet or pitcher type filters do not remove fluoride from the water. Whole-house filtration or distilling systems usually remove fluoride. If your system removes the fluoride, check with your dentist or medical provider about giving your child fluoride drops or pills. Bottled water seldom has fluoride. It is better than a soft drink, but does not help strengthen the teeth like water with fluoride does.

**Q: I don't know if we have fluoride in our water. How can I find out?**

A: Call your water supplier—water company or city utility—to see if there is fluoride in the water.

# APPENDIX 7

## Midwifery Care of Women During Labor, Birth, Postpartum & Care of Newborns

### Cavity Free Kids: [Let's Talk Teeth](#) & [Let's Set Goals](#)

#### Let's Talk Teeth!

Parent's Name: \_\_\_\_\_ Child's Name: \_\_\_\_\_ Child's Age: \_\_\_\_\_

Answer the following questions about your child: (note: some questions may not apply based on the age and developmental stage of your child.)

- |  | Yes                      | No                       | NA                       |
|--|--------------------------|--------------------------|--------------------------|
| 1. If your child has teeth, do you brush them?<br>IF YES: Times per day _____ Times of day _____ Days per week _____             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Does your child drink anything besides water between meals and snacks?<br>IF YES: What does she drink? _____ How often? _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Does your child go to bed with a bottle filled with anything besides water?<br>IF YES: What type of drink? _____              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Does your child eat between meals?<br>IF YES: What does he/she eat? _____ When? (times of day) _____ How often? _____         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Does your child have a dentist?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Have you had your child's teeth checked by a dentist or medical provider?<br>IF YES: When? _____ By whom? _____               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Does your child have cavities or pain in his/her mouth?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Do you have concerns about his/her teeth or mouth?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

If you are pregnant, answer the following questions:

- |   |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|
| 1. Do you brush your teeth?<br>IF YES: Times per day _____ Times of day _____ Days per week _____                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Do you drink anything but water between meals and snacks?<br>IF YES: What do you drink? _____ How often? _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Do you eat between meals?<br>IF YES: What? _____ When? (times of day) _____ How often? _____                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Do you have a dentist?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Have you seen the dentist during your pregnancy?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Do you have cavities or pain in your mouth?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Do you have concerns about your teeth or mouth?<br>IF YES: What? _____   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |



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#### Let's Set Goals

Select the oral health goals you would like to accomplish. Goals should be set based on your child's oral health needs or your needs if you are pregnant.

- Brush twice a day with fluoride toothpaste.



- Drink only water between meals.



- If baby goes to sleep with a bottle, fill it only with water.



- Eat tooth healthy foods for snacks and meals.



- Eat during meals and snacks only rather than "grazing" during the day.



- Find a dentist.



- Make a dental appointment.



- Follow-up with treatment appointments.



The client may choose to set another goal that is not listed.

- Other: \_\_\_\_\_



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# APPENDIX 8

## Midwifery Care of Women During Labor, Birth, Postpartum & Care of Newborns

### Cavity Free Kids: [More Home Visiting Resources](#)

#### Tooth Healthy Foods

##### Did You Know?

- Tooth healthy foods include fresh fruit, vegetables and protein rich foods like nuts, cheese and meats.
- Tooth unhealthy foods include crackers, chips, dried fruit, fruit leathers, fruit snacks, and cookies.



Teeth need breaks between meals and snacks to prevent cavities.

Schedule regular meals and snack times for your child.

#### Take the Healthy Mouth Challenge!

##### I will:

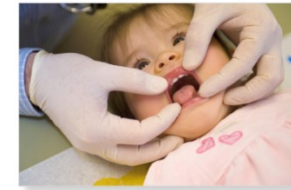
- Make a healthy snack with my child (for example, cheese and apple slices).
- Serve my family tooth healthy foods for snacks and meals.
- Hang up the tooth healthy and tooth unhealthy foods list to remind me what to serve.



#### Dental Visits Are Important

##### Did you know?

- It is important for your child to get his first dental visit when his first teeth come in or by his first birthday. **After a child's first visit it is important for him to get regular checkups.**
- During a dental visit, a provider may:
  - Count your child's teeth.
  - Check your child's teeth for cavities and if any are found, treat them.
  - Paint fluoride varnish to your child's teeth.



#### Take the Healthy Mouth Challenge!

##### I will:

- Make an appointment for my child's dental checkup!

My child's first dental visit is scheduled with

\_\_\_\_\_ (Dentist or Medical Provider Name)

on \_\_\_\_\_ at \_\_\_\_\_ (insert date) (insert time)

- Remember to bring my insurance card, photo ID and money for co-payment (if needed) to my child's dentist appointment.
- Arrive 15 minutes early to complete paperwork.
- Bring some small toys or a book for my child to play with during the waiting time.



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[OHNEP.org](https://www.ohnep.org)

[SmilesforLifeOralHealth.org](https://www.smilesforlife.org)

National Oral Health Curriculum

[MCHOralHealth.org](https://www.mchoralhealth.org)

National Maternal & Child Oral Health Resource Center

[IPECollaborative.org](https://www.ipecollaborative.org)

Interprofessional Educational Collaborative

[APTRweb.org/?PHLM\\_15](https://www.aptrweb.org/?PHLM_15)

Oral Health Across Lifespan Module

[HealthyPeople.gov](https://www.healthypeople.gov)

10-year national health goals for Americans

[AAP.org](https://www.aap.org)

American Academy of Pediatrics

[AAPD.org](https://www.aapd.org)

American Academy of Pediatric Dentistry

[ECLKC.OHS.ACF.HHS.gov](https://www.eclkc.org)

Head Start Healthy Habits for Happy Smiles

[CavityFreeKids.org](https://www.cavityfreekids.org)

Cavity Free Kids Resources

[Layout: IPE.UToronto.ca](https://www.utoronto.ca)

University of Toronto's Centre for Interprofessional Education

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