

The OHNEP Interprofessional Oral Health Faculty Tool Kit

Women's Health Nurse Practitioner Program

CURRICULUM INTEGRATION OF INTERPROFESSIONAL ORAL HEALTH CORE COMPETENCIES:

- Introduction to Reproductive Healthcare of Women
- Ambulatory Care of Women
- Integrated Care of Women
- Resources



INTRODUCTION

The **Oral Health Nursing Education and Practice Program (OHNEP)** has developed an **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 Women's Health Nurse Practitioner (WHNP) 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), [NONPF Nurse Practitioner Role Core Competencies](#) (2022), [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 WHNP 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 WHNP 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 template 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. Diabetes, Depression, HPV, and eating disorders, are but a few of the health problems that have oral manifestations that can be treated by WHNPs or referred to our dental colleagues. It is important for WHNPs on the frontlines of primary 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 Women's Health Nurse Practitioner Program. If you need additional technical assistance, please feel free to contact us at **OHNEP@nyu.edu**.

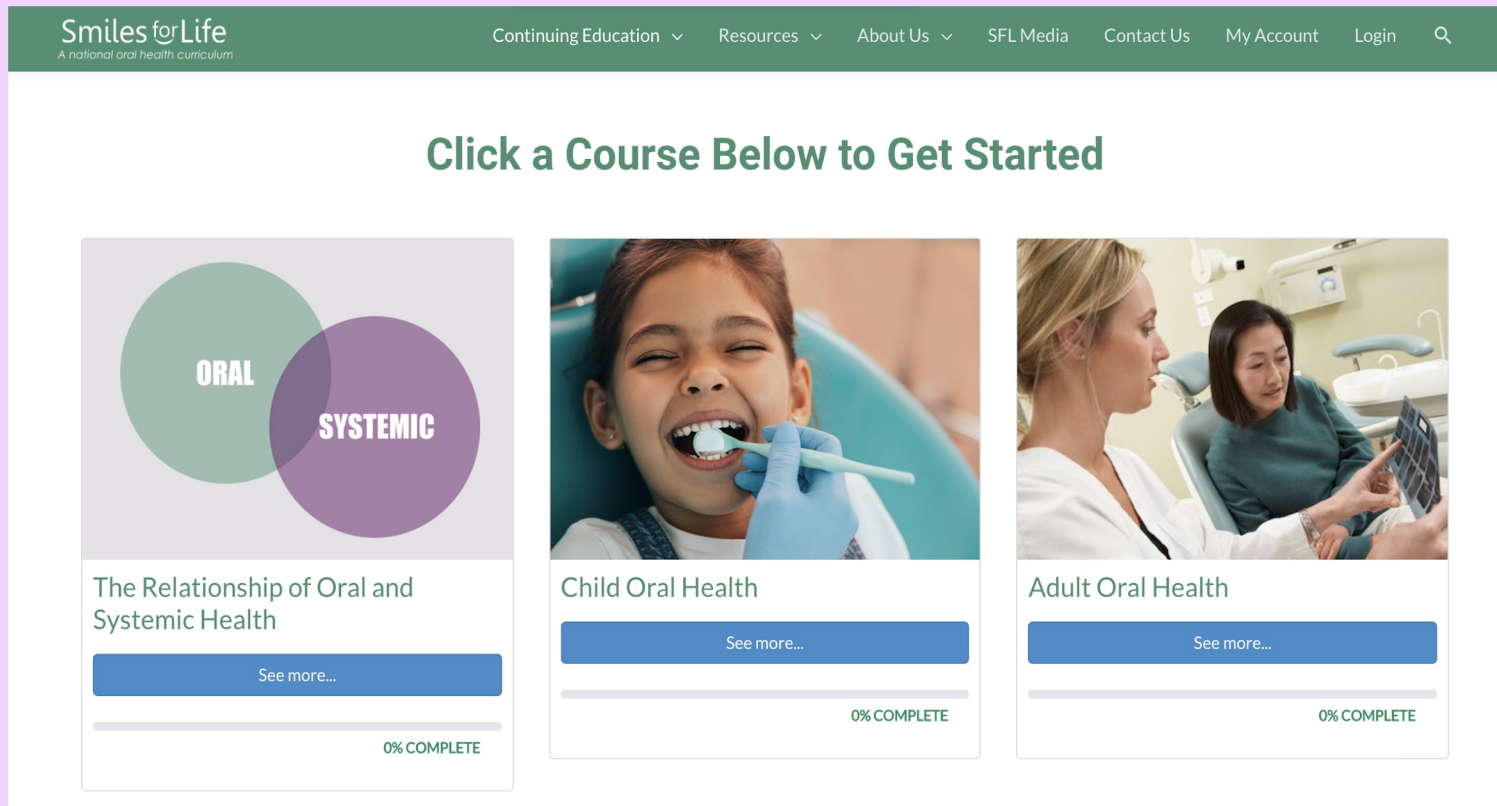
WHNP Curriculum Integration of Interprofessional Oral Health Competencies

INTRODUCTION TO REPRODUCTIVE HEALTHCARE OF WOMEN	1) EXPOSURE: INTRODUCTION	2) IMMERSION: DEVELOPMENT	3) COMPETENCE: ENTRY-TO-PRACTICE	INTERPROFESSIONAL PARTNERSHIP & COLLABORATIVE PRACTICE FOR OPTIMIZATION OF PATIENT HEALTH OUTCOMES
<p>HRSA Oral Health Competencies: Oral Health Risk Assessment, Oral Health Evaluation, Oral Health Preventive Intervention, Communication and Education</p>	<p>KNOWLEDGE: RISK FACTORS FOR ORAL DISEASES <i>Goal:</i> Describe oral disease risk factors for adolescent and adult patients</p> <ul style="list-style-type: none"> Complete Smiles for Life (SFL) Modules #1, 3, 7, including Clinical Cases, and submit Certificates of Completion <p>Read:</p> <ul style="list-style-type: none"> Oral Health is A Women's Health Issue (NWHN, 2018) Improving oral health during pregnancy: a call to action (Haber et al., 2022) Pregnancy and Oral Health (CDC) Predictors of self-reported oral health in the Black Women's Health Study (Cozier et al., 2019) 	<p>SKILL/BEHAVIOR <i>Goal:</i> Include oral health in history, physical exam and risk assessment (HEENOT) in clinical settings for adolescent or adult patients</p> <ul style="list-style-type: none"> Read and discuss ADA Caries Risk Assessment Form (Age >6) (Appendix 1) Read Oral Health in Women with a History of High Gestational Diabetes Risk (Poulsen et al., 2019) <p>Practice integrating oral health in the history, physical exam, risk assessment and management plan of adolescent and adult patients in clinical settings</p>	<p>SKILL/BEHAVIOR <i>Goal:</i> Demonstrate competency in oral health history and risk assessment in gynecological, wellness, and preconception visits in clinical setting</p> <p>Read:</p> <ul style="list-style-type: none"> Protect Tiny Teeth Toolkit (Brailer et al., 2019) Prescribing Opioids for Women of Reproductive Age: Information for Dentists (OHRC) <p>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</p>	
<p>AACN Essentials: Person-centered care, Population health, Inter-professional partnerships, Knowledge for nursing practice, Scholarship for nursing discipline</p>	<p>KNOWLEDGE: ORAL CARE IN GYN, WELLNESS, & PRECONCEPTION VISITS <i>Goal:</i> Describe the importance of integrating oral health in primary care</p> <ul style="list-style-type: none"> Complete Smiles for Life (SFL) Modules #1, 3, 7, including Clinical Cases, and submit Certificates of Completion <p>Read:</p> <ul style="list-style-type: none"> My preferred pronoun is she: Understanding transgender identity and oral health care needs (Macri & Wolfe, 2019) Sexually Transmitted Diseases and Your Mouth (Mouth Healthy) Cancer (Head and Neck) (ADA) 	<p>SKILL/BEHAVIOR <i>Goal:</i> Include oral health in promoting oral health literacy for adolescent and adult patients</p> <p>Read:</p> <ul style="list-style-type: none"> Improving HPV Vaccine Confidence: An Interprofessional Challenge (Cipollina, 2022) Making the case for interprofessional education and practice collaboration to address rising rates of HPV-associated oropharyngeal cancers (Haber et al., 2022) <p>Develop talking points to use with adolescents or adults to decrease HPV vaccine hesitancy</p>	<p>SKILL/BEHAVIOR <i>Goal:</i> Demonstrate collaborative approaches to decreasing barriers to oral health care access for vulnerable adolescent and adult patients</p> <p>Read:</p> <ul style="list-style-type: none"> Putting the Mouth Back in the Head: HEENT to HEENOT (Haber et al, 2015) <p>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</p>	
<p>NONPF Competencies: Knowledge of Practice, Person-centered care, Population health, Interprofessional collaboration and practice, Technology and information literacy</p>	<p>KNOWLEDGE: COMMON ORAL HEALTH ISSUES <i>Goal:</i> Describe oral manifestations of common health problems in patients</p> <ul style="list-style-type: none"> Complete Smiles for Life (SFL) Modules #1, 3, 7, including Clinical Cases, and submit Certificates of Completion <p>Read:</p> <ul style="list-style-type: none"> Prevalence and Risk of Dental Erosion in Patients with Gastroesophageal Reflux Disease: A Meta-Analysis (Yanushevich et al., 2022) Oral health-related quality of life and unmet dental needs among women living with HIV (Parish et al., 2020) 	<p>SKILL/BEHAVIOR <i>Goal:</i> Demonstrate understanding of health literacy and strategies to improve oral health behaviors in patients</p> <p>Read:</p> <ul style="list-style-type: none"> Screening for intimate partner violence in healthcare settings: An implementation-oriented systematic review (Miller et al., 2021) Intimate Partner Violence Shocks the Head and Mind (Cipollina, 2020) <p>Identify and discuss screening questions and trauma-informed practices to address IPV with patients in clinical settings</p>	<p>COLLABORATIVE CASE PRESENTATION <i>Goal:</i> Identify a collaborative care plan for patient with an eating disorder and dental erosion</p> <p>Read:</p> <ul style="list-style-type: none"> Orofacial manifestations in outpatients with anorexia nervosa and bulimia nervosa focusing on the vomiting behavior (Lourenço et al., 2017) Eating disorders through the periodontal lens (Rangé et al., 2021) <p>Collaborate with DDS/DH students on case presentation for patients with eating disorders, including plan for patient education, prevention, anticipatory guidance, referral and follow-up care</p>	

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, there is a green navigation bar with the logo "Smiles for Life" and the tagline "A national oral health curriculum". To the right of the logo are several menu items: "Continuing Education", "Resources", "About Us", "SFL Media", "Contact Us", "My Account", and "Login", each followed by a dropdown arrow. A search icon is also present. Below the navigation bar is a white section with the heading "Click a Course Below to Get Started". There are three course cards displayed in a row. The first card features a Venn diagram with two overlapping circles, one green labeled "ORAL" and one purple labeled "SYSTEMIC". Below the diagram is the title "The Relationship of Oral and Systemic Health", a blue "See more..." button, and a progress bar at the bottom showing "0% COMPLETE". The second card has a photograph of a young girl smiling while a dental professional in blue gloves examines her teeth. Below the photo is the title "Child Oral Health", a blue "See more..." button, and a progress bar at the bottom showing "0% COMPLETE". The third card has a photograph of a dental professional showing a patient's X-rays. Below the photo is the title "Adult Oral Health", a blue "See more..." button, and a progress bar at the bottom showing "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.

WHNP 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

Introduction to Reproductive Healthcare of Women

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	

WHNP Curriculum Integration of Interprofessional Oral Health Competencies

AMBULATORY CARE OF WOMEN	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>KNOWLEDGE: ORAL HEALTH IN PREGNANCY MYTHS <i>Goal:</i> Identify common myths about oral health during pregnancy <i>Read:</i></p> <ul style="list-style-type: none"> • Improving Access to Dental Care for Pregnant Women (APHA, 2020) • "I Didn't Know": Pregnant Women's Oral Health Literacy Experiences and Future Intervention Preferences (Vamos et al., 2019) • Promoting oral health for mothers and children (Haber et al., 2020) 	<p>SKILL/BEHAVIOR <i>Goal:</i> Demonstrate ability to dispel a common myth about oral health during pregnancy</p> <ul style="list-style-type: none"> • Students choose one of the myths listed in Pregnancy and Oral Health: Truth or Fiction (AAP, 2017) or Myths and Facts: The Pregnant Women's Guide to Dental Health (Delta Dental, 2022) and write an evidence-based argument to dispel one of the common myths about oral health during pregnancy 	<p>SKILL/BEHAVIOR <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"> • Identify a policy that would help pregnant women in your catchment area overcome barriers to accessing oral health care. Prepare a brief evidence-based speech to present this policy to your local representative.
<p>AACN Essentials: Person-centered care, Population health, Inter-professional partnerships, Knowledge for nursing practice, Scholarship for nursing discipline</p>	<p>KNOWLEDGE: PRENATAL ORAL HEALTH CARE <i>Goal:</i> Describe oral exam of the pregnant patient</p> <ul style="list-style-type: none"> • Complete Smiles for Life (SFL) Module #5, including Clinical Cases, and submit Certificate of Completion <p><i>Read:</i></p> <ul style="list-style-type: none"> • Improving oral health during pregnancy: a call to action (Haber et al., 2022) • Oral Health Knowledge, Practices, and Awareness of Oral Health Guidelines (Naavaal & Claiborne, 2020) 	<p>SKILL/BEHAVIOR <i>Goal:</i> Include oral health history, risk assessment, and physical exam (HEENOT) in providing gender-affirming prenatal care</p> <ul style="list-style-type: none"> • Read Providing Gender Affirming and Inclusive Care to Transgender Men Experiencing Pregnancy (Chu et al., 2022) • Review Pharmacological Considerations for Pregnant Women (Appendix 1) • Discuss safe antibiotic choices for pregnant patients • Discuss risk factors for periodontal disease in pregnancy 	<p>SKILL/BEHAVIOR <i>Goal:</i> Demonstrate competency in oral health history, risk assessment and physical exam (HEENOT) in a gender-affirming prenatal visit in clinical setting</p> <ul style="list-style-type: none"> • Read Putting the Mouth Back in the Head: HEENT to HEENOT (Haber et al, 2015) • Document HEENOT findings in electronic health record • Develop a community dental resource network and have a list of accessible dental providers, including those who accept Medicaid, to offer to your pregnant patients
<p>NONPF Competencies: Knowledge of Practice, Person-centered care, Population health, Interprofessional collaboration and practice, Technology and information literacy</p>	<p>KNOWLEDGE: COMMON DISCOMFORTS OF PREGNANCY <i>Goal:</i> Describe common oral problems in pregnancy and how they can influence oral-systemic health outcomes for parent and baby <i>Read:</i></p> <ul style="list-style-type: none"> • Racial and oral health disparity associated with perinatal oral health care utilization among underserved US pregnant women (Al Jallad et al., 2022) • Periodontal management of changes in gingiva during pregnancy: A nonsurgical approach (Ayachi et al., 2021) • Periodontology and pregnancy: An overview of biomedical and epidemiological evidence (Raju & Berens, 2021) 	<p>SKILL/BEHAVIOR <i>Goal:</i> Demonstrate understanding of health literacy and strategies to improve oral health behaviors</p> <ul style="list-style-type: none"> • Read The Impact of Oral Health on Low-Income Pregnant Women Living in the United States (Diss & Ward, 2022) • Choose brochures from Oral Health Care During Pregnancy (MCOH, 2020) and prepare a FAQ sheet about the importance of oral hygiene and dental care during pregnancy 	<p>COLLABORATIVE CASE PRESENTATION <i>Goal:</i> Identify a collaborative care plan for pregnant patient with periodontal disease</p> <ul style="list-style-type: none"> • Read Psychologically informed oral health interventions in pregnancy and type 2 diabetes: a scoping review protocol (Böhme Kristensen et al., 2022) • Collaborate with DDS/DH student on a case presentation, including comprehensive gender-affirming antepartum management plan for pregnant patient with type 2 diabetes • Refer at-risk, first-time pregnant patient to the local NFP or WIC program

ENTRY LEVEL ASSESSMENT

SUMMATIVE ASSESSMENT

INTERPROFESSIONAL PARTNERSHIP & COLLABORATIVE PRACTICE FOR OPTIMIZATION OF PATIENT HEALTH OUTCOMES

CONSTRUCTS

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
Analgesics	
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	
Antibiotics	
Amoxicillin	May be used during pregnancy.
Cephalosporins	
Clindamycin	
Metronidazole	
Penicillin	
Ciprofloxacin	Avoid during pregnancy.
Clarithromycin	
Levofloxacin	
Moxifloxacin	
Tetracycline	
Anesthetics	
	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.
Antimicrobials	
	Use alcohol-free products during pregnancy.
Cetylpyridinium chloride mouth rinse	May be used during pregnancy.
Chlorhexidine mouth rinse	
Xylitol	

WHNP Curriculum Integration of Interprofessional Oral Health Competencies

INTEGRATED CARE OF WOMEN	1) EXPOSURE: INTRODUCTION	2) IMMERSION: DEVELOPMENT	3) COMPETENCE: ENTRY-TO-PRACTICE	INTERPROFESSIONAL PARTNERSHIP & COLLABORATIVE PRACTICE FOR OPTIMIZATION OF PATIENT HEALTH OUTCOMES
<p>HRSA Oral Health Competencies: Oral Health Risk Assessment, Oral Health Evaluation, Oral Health Preventive Intervention, Communication and Education</p>	<p>KNOWLEDGE: INFANT ORAL HEALTH EDUCATION FOR NEW PARENTS <i>Goal:</i> Describe importance of oral health for parent and baby</p> <ul style="list-style-type: none"> • Watch Infant Oral Health & ECC in Care of the Babies Teeth for Two Online Educational Presentation (Password: nyu2014) • Perinatal and Infant Oral Health Care (AAPD, 2021) <p>Read:</p> <ul style="list-style-type: none"> • Effect of Frenotomy on Maternal Breastfeeding Symptoms (Hill et al., 2022) • Speech and Feeding Improvements in Children After Posterior Tongue-Tie Release (Baxter & Hughes, 2018) 	<p>SKILL/BEHAVIOR <i>Goal:</i> Identify strategies for educating new parents about infant oral health care</p> <ul style="list-style-type: none"> • Read The Interprofessional Role in Dental Caries Management: Impact of the Nursing Profession in Early Childhood Caries (Haber & Hartnett, 2019) • Review National Center on Health and Cavity Free Kids (CFK) Tools (Appendices 1-8) • Watch A Healthy Mouth for Your Baby (NIDCR, 2013) 	<p>SKILL/BEHAVIOR <i>Goal:</i> Develop a comprehensive, collaborative infant oral health education plan for postpartum parent</p> <p>Read:</p> <ul style="list-style-type: none"> • Interventions supporting community nurses in the provision of oral healthcare to people living at home: a scoping review (Stark et al., 2022) • Promoting oral health for mothers and children (Haber et al., 2020) <ul style="list-style-type: none"> • Collaborate with PNP student to provide oral health education and anticipatory guidance for parent of newborn at pediatric clinic 	
<p>AACN Essentials: Person-centered care, Population health, Inter-professional partnerships, Knowledge for nursing practice, Scholarship for nursing discipline</p>	<p>KNOWLEDGE: ORAL HEALTH CARE DURING MENOPAUSE <i>Goal:</i> Understand oral health issues during menopause</p> <p>Read:</p> <ul style="list-style-type: none"> • Oral health and emotional well-being in premenopausal and postmenopausal women: a cross-sectional cohort study (Yakar et al., 2021) • Assessment of Effect of Menopause on Saliva and Oral Health Status (Mishra et al., 2021) 	<p>SKILL/BEHAVIOR <i>Goal:</i> Include oral health history, risk assessment and HEENOT when caring for patients in menopause</p> <ul style="list-style-type: none"> • Following health literacy principles, develop an oral health FAQ sheet of oral health-associated problems and solutions for patients in menopause 	<p>SKILL/BEHAVIOR <i>Goal:</i> Identify a collaborative care plan for patients with oral health problems related to menopause</p> <ul style="list-style-type: none"> • Collaborate with DDS/DH student on interprofessional case presentation including oral health education, prevention, treatment and referral for patients in menopause 	
<p>NONPF Competencies: Knowledge of Practice, Person-centered care, Population health, Interprofessional collaboration and practice, Technology and information literacy</p>	<p>KNOWLEDGE: OLDER ADULT PRIMARY CARE <i>Goal:</i> Recognize oral health needs of older adults</p> <p>Read:</p> <ul style="list-style-type: none"> • Severe Periodontitis Is Associated with Myocardial Infarction in Females (Nordendahl et al., 2018) • Association between oral health and cardiovascular outcomes in patients with hypertension: a nationwide cohort study (Kim et al., 2022) • Oral health status and reported oral health problems in people with intellectual disability: A literature review (Wilson et al., 2019) 	<p>SKILL/BEHAVIOR <i>Goal:</i> Provide comprehensive health maintenance services to older adults</p> <ul style="list-style-type: none"> • Poor Oral Health as a Determinant of Malnutrition and Sarcopenia (Azzolino et al., 2019) • Older Adults: Unique Challenges at the Interface Between Nutrition and Oral Health (GSA, 2020) <ul style="list-style-type: none"> • Collaborate on developing a heart- and mouth-healthy diet for an older adult patient following a myocardial infarction considering relevant social determinants of health and necessary community resources 	<p>COLLABORATIVE CASE STUDY <i>Goal:</i> Collaborate interprofessionally on geriatric case with cognitive and physical decline and oral health needs</p> <p>Read:</p> <ul style="list-style-type: none"> • Association between motor proficiency and oral health in people with intellectual disabilities (Baumgarten et al., 2021) • Oral health clinical training and dental referral program for nurses: An interprofessional collaborative project (Kohli et al., 2021) <p>Collaborate with an interprofessional student team on Discussion Board on:</p> <ul style="list-style-type: none"> • Cardiovascular case study (Appendix 9) • Diabetes case study (Appendix 10) 	

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

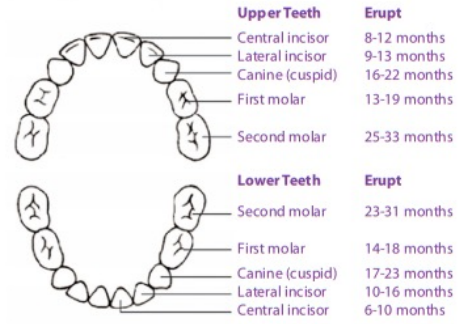
Cavity Free Kids: [Teething](#)

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

Integrated Care of Women

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

Healthy Habits for Happy Smiles



Helping Your Baby with Teething Pain

It 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. Photo credits: Glenn / Flickr / CC BY-NC-SA (front page, top); jadarm / Foter / CC BY-NC-SA (front page, bottom); JasonUnbound / Foter / CC BY-NC (back page)

APPENDIX 4

Integrated Care of Women

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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Photo requiring credit: makelissaiwa / Fotar / CC BY (back page)

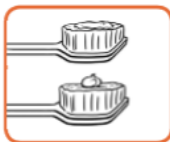


APPENDIX 5

Integrated Care of Women

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

Integrated Care of Women

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?
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?
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?
IF YES: What type of drink? _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Does your child eat between meals?
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?
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?
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?
IF YES: What do you drink? _____ How often? _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Do you eat between meals?
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?
IF YES: What? _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |



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: _____



APPENDIX 8

Integrated Care of Women

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:

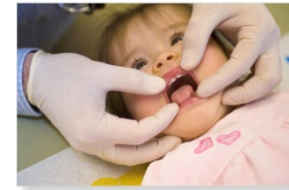
- Make a healthy snack with my child (for example, cheese and apple slices).
- Serve my family tooth healthy foods for snacks and meals.
- Hang up the tooth healthy and tooth unhealthy foods list to remind me what to serve.



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.



Cardiovascular Disease Case Study (Pt. 1)

HX: The patient, age 50, presents at an urgent care center complaining of a 6-month history of headaches, fatigue, blurry vision, pain when chewing, and sore bleeding gums associated with brushing. In the past week the patient also noticed that her front bottom teeth wiggle more than usual, causing anxiety about losing her teeth. The patient reports not having seen a primary care provider in 3 years and a dentist in 5 years because the family dentist retired and she does not have health insurance.

PMH: Patient reports being diagnosed with “high blood pressure” about 7 years ago, but denies any other past medical history. She stopped taking her blood pressure pills when she lost her insurance.

PSH: Tonsillectomy at age 5 for chronic URIs

ROS: Denies fevers, mouth sores, ear pain or throat discomfort. Denies chest pain or shortness of breath. Patient acknowledges being overweight and states that “it is part of getting older”

FH: Father and paternal grandfather were diagnosed with HTN in their 50s. Patient’s father has HTN and dyslipidemia and receives hemodialysis 3 times a week. Patient’s mother has HTN and Alzheimer’s disease. Both parents reside in a nursing home. Patient has two siblings who live in distant states. Pt. has 2 young adult children, age 23 and 21, who are healthy and do not live at home. Patient is divorced for 2 years; her ex-spouse lives locally and works as a Teacher Aide in an elementary school.

Social history: Lost health insurance when she lost her job as an auto mechanic three years ago during COVID. Pt. has not been able to find employment with health benefits. She has just about exhausted her savings. She has not been to a primary care provider since losing her job and health insurance and has not taken medication for her hypertension since losing her health insurance. Pt. denies smoking, alcohol consumption, or illicit drug use.

Cardiovascular Disease Case Study (Pt. 2)

Oral-Systemic Risk Assessment

- Identify the oral-systemic assessment findings (Hx and PE HEENOT)
- What does the history and physical tell us about this patient?
- What additional data do you need to collect (eg. labs, diet and exercise, etc)?
- Identify oral-systemic risk factors

Differential Diagnosis(es)

- Identify the tentative diagnoses for the oral health problems
- Identify the tentative diagnoses for the systemic health problems
- Discuss the important oral-systemic connections

Develop a management plan for the oral-systemic conditions affecting this patient, including:

- Preventive interventions that include screening and behavior change counseling that are fundamental to patient-centered care
- Anticipatory guidance
- Oral health maintenance
- Social determinants of health
- Collaboration and referral

Questions to Guide Your Interprofessional Collaboration

Roles and Responsibilities: What is the scope of the role and responsibilities of each of the providers on your team today?

Collaboration: How can the Nurse Practitioner, Dentist, Physician, Pharmacist, and Social Worker collaborate to promote this patient's health?

Team Building & Communication:

- What do you think are the most effective strategies to help a Nurse Practitioner, Physician, Dentist, Pharmacist, and Social Worker function as a community-based primary care team?
- What are the most effective ways for the IP team to communicate?

Referrals and Follow-up:

- How do the social determinants of health influence which referrals need to be made for this patient?
- What providers does this patient need to see? When? How often?
- What are the follow up actions for each team member to maximize coordinated care for this patient?

Diabetes Case Study (Pt. 1)

HX: The 70 y.o. patient presents to her primary care provider complaining of a 6-month history of fatigue, increased thirst, frequent urination, blurry vision, pain when chewing, and sore bleeding gums associated with brushing. The patient also noticed that her front bottom teeth wiggle more than usual, causing anxiety about losing her teeth. The patient reports not having seen a primary care provider in 3 years and a dentist in 5 years because the family dentist retired and she does not have health insurance.

PMH: Patient denies any past medical history

PSH: Appendectomy at age 12

ROS: Denies fevers, mouth sores, ear pain or throat discomfort. Denies chest pain or shortness of breath.

FH: Father and paternal grandfather were diagnosed with T2D in their 50s. Patient’s father has HTN and dyslipidemia and receives hemodialysis 3 times a week. Patient’s mother has HTN and Alzheimer’s disease. Both parents reside in a nursing home. Patient is an only child. Pt. has 2 adult children who are healthy and do not live at home. Patient is widowed, her spouse died of cancer 2 years ago.

Social history: Lost insurance when she changed job three years ago. Pt. was employed as a part-time office manager when she lost her job due to COVID shutdown. Pt. has not been to a primary care provider since losing her job and health insurance. Pt. has not enrolled in Medicare even though she is eligible. Pt. denies smoking, alcohol consumption, or illicit drug use and is an active member of her church congregation.

Diabetes Case Study (Pt. 2)

Oral-Systemic Risk Assessment

- Identify the oral-systemic assessment findings (Hx and PE HEENOT)
- What does the history and physical tell us about this patient?
- What additional data do you need to collect (eg. labs, diet and exercise, etc)?
- Identify oral-systemic risk factors

Differential Diagnosis(es)

- Identify the tentative diagnoses for the oral health problems
- Identify the tentative diagnoses for the systemic health problems
- Discuss the important oral-systemic connections

Develop a management plan for the oral-systemic conditions affecting this patient, including:

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- How do the social determinants of health influence which referrals need to be made for this patient?
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- What are the follow up actions for each team member to maximize coordinated care for this patient?

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ONLINE RESOURCES

[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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