Dental Hygiene

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For more information on ways to lead a healthier lifestyle visit our website GetHealthyCT.org

Find us on Facebook and Twitter!

October 2021
Get Dental Care for Your Child

- Check your child’s teeth and gums once a month. Look for white spots. If you see white spots, take your child to a dentist right away.
- If your child has not been to the dentist, make an appointment.
- Continue to visit the dentist to have your child’s teeth and gums checked. The dentist will tell you when you need to come back.

Keep Your Own Mouth Healthy

- Brush your teeth with a soft toothbrush and toothpaste with fluoride, twice a day, after breakfast and before bed.
- Floss once a day before bedtime.
- Eat healthy foods, like whole-grain products, dairy products, fruits, vegetables, meat, fish, chicken, eggs, beans, and nuts.
- Eat fewer sweets like candy, cookies, or cake. Drink fewer sugary drinks like fruit-flavored drinks or pop (soda). Eat sweets or drink sugary drinks at mealtimes only.
- Get dental care.

Resources

Finding a Dentist
- http://www.aapd.org/finddentist
- http://www.knowyourteeth.com/findadentist

Finding Low-Cost Dental Care
- http://www.nidcr.nih.gov/FindingDentalCare/ReducedCost/FLCDC.htm

Finding Health Insurance Coverage
- http://www.coverageforall.org

A Healthy Smile for Your Young Child
Tips to Keep Your Child Healthy

Taking care of your young child’s teeth and gums is important. Brush your child’s teeth, give your child healthy foods, and take your child to the dentist. If you take care of your teeth, it will help your child’s teeth stay healthy, too.
Children need healthy teeth. Healthy teeth help them to chew and to speak clearly. Baby teeth also make space for adult teeth. Young children want to brush their own teeth, but they need help. Until your child is about 7 or 8, you should brush her teeth.

Give your child a healthy start! Here are tips to keep your child’s teeth and gums healthy.

### Take Care of Your Child’s Mouth

- Brush your child’s teeth with toothpaste with fluoride (floor-ide) twice a day, after breakfast and before bed. Use a soft toothbrush made for young children.
- For children under age 2, use a small smear of toothpaste. For children ages 2–5, use toothpaste the size of a pea.
- Brush the front and back of your child’s teeth. Lift his lips to brush at the gum line of his front teeth.
- Make sure your child spits out the toothpaste after brushing. Do not have your child rinse with water. The toothpaste that stays in your child’s mouth is good for his teeth.
- Floss your child’s teeth if they touch each other. Ask dental office staff for help.
- If your child has sore gums from a tooth coming in, give him a cold teething ring, cool spoon, or cold wet washcloth. Or you can rub your child’s gums with a clean finger.
- Germs can pass from your mouth to your child’s mouth. Use a different spoon to taste your child’s food. If your child’s pacifier falls on the floor, clean it with water.
- Do not dip pacifiers in sweet foods like sugar, honey, or syrup.

### Give Your Child Healthy Foods

- Give your child healthy foods. Give her foods like fruits, vegetables, whole-grain products like bread or crackers, and dairy products like milk, yogurt, or cheese. Lean meats, fish, chicken, eggs, and beans are also good for your child.
- Wean your child from a bottle to a cup by age 12 to 14 months.
- Do not put your child to sleep with a bottle filled with milk, juice, or sugary drinks like fruit-flavored drinks or pop (soda).
- Serve juice in a cup with no lid, not a bottle. Do not give your child more than 4 to 6 ounces of juice each day. Give your child 100-percent fruit juice only. It is even better to give your child fruit instead of juice.
- Give your child water several times a day. The water should have fluoride.
- Give your child fewer sweets like candy, cookies, or cake. And give your child fewer sugary drinks. If you give your child sweets or sugary drinks, give them at mealtimes only.
- Reward your child with a big smile or a hug, not with food.
After Your Baby Is Born

After your baby is born, it is important for you to keep brushing with toothpaste. You also need to floss, eat healthy foods, and get dental care. When your mouth is healthy, your baby is more likely to have a healthy mouth, too.

Care for Your Baby’s Gums and Teeth

- Breast milk is best! Breastfeed your baby for 6 months or longer if you can.
- Germs can pass from your mouth to your baby’s mouth. Use a different spoon to taste your baby’s food. Clean your baby’s pacifier with water. Do not use your mouth to clean it.
- Clean your baby’s gums after every feeding even before her first teeth come in. Use a clean, damp washcloth or a toothbrush with soft bristles and a small head made for babies.
- When your baby gets his first tooth (usually around 6 to 10 months), begin brushing his teeth with toothpaste with fluoride twice a day. Use a small smear of toothpaste.
- Do not put your baby to sleep with a bottle filled with breast milk, formula, juice, or sugary drinks like fruit-flavored drinks or pop (soda).
- Take your baby to the dentist by the time she is 1 year old to have her teeth and gums checked.

Resources

Finding a Dentist
- http://www.aapd.org/finddentist
- http://www.knowyourteeth.com/findadentist

Finding Low-Cost Dental Care
- http://www.nidcr.nih.gov/FindingDentalCare/ReducedCost/FLCDC.htm

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National Maternal and Child Oral Health Resource Center
Georgetown University
Phone: (202) 784-9771
E-mail: OHRCinfo@georgetown.edu
Website: http://www.mchoralhealth.org

Taking care of your mouth while you are pregnant is important for you and your baby. Brushing, flossing, eating healthy foods, and getting dental checkups and treatment will help keep you and your baby healthy.
While You Are Pregnant

**Brush and Floss**
- To prevent or control tooth decay, brush your teeth with a soft toothbrush and toothpaste with fluoride (floor-id-e) twice a day.
- Floss once a day before bedtime.
- If you cannot brush your teeth because you feel sick, rinse your mouth with water or a mouth rinse that has fluoride.
- If you vomit, rinse your mouth with water.

**Eat Healthy Foods**
- Eat fruits, vegetables, whole-grain products like bread or crackers, and dairy products like milk, yogurt, or cheese. Lean meats, fish, chicken, eggs, beans, and nuts are also good choices. Eat foods that have sugar at mealtimes only.
- Drink water or low-fat milk instead of juice, fruit-flavored drinks, or pop (soda).
- Drink water at least a few times a day, especially between meals and snacks.
- Eat fewer sweets like candy, cookies, or cake. Drink fewer sugary drinks like fruit-flavored drinks or pop (soda). Eat sweets or drink sugary drinks at mealtimes only.
- Look for products, like chewing gum or mints, that contain xylitol (zy-lih-tohl).

**Get Dental Care**
- Get a dental checkup. It is safe to have dental care when you are pregnant. Do not put it off until after you have the baby.
- Tell the dental office staff that you are pregnant and your due date. This will help the dental team keep you comfortable.
- The dental team may recommend rinses with fluoride or chewing gum with xylitol, which can help reduce bacteria that can cause tooth decay and gingivitis.
- Talk to your doctor if you need help getting dental care or making an appointment.

Changes to your body when you are pregnant can make your gums sore, puffy, and red if you do not brush and floss every day. This problem is called gingivitis (gin-gih-vi-tis). If gingivitis is not treated, it may lead to periodontal (pear-ee-oh-don-tuhl) disease. This disease can cause tooth loss.

After your baby is born, take care of your baby’s gums and teeth too.

Give your baby a healthy start! Here are tips to keep you and your baby’s teeth and gums healthy.
Keeping your Mouth Healthy during Pregnancy is important to the Health of your Baby.

Remember to schedule a dental exam during your pregnancy. Make daily oral hygiene a priority during your pregnancy.

Follow the simple steps on how to brush your teeth properly, printed on the other side of this paper.

- Swollen, red, or bleeding gums are not normal.
- Call your dentist if your teeth bleed when brushed or floss.
- Ask your doctor or dentist for more tips to protect the health of your teeth during your pregnancy.

Care for your baby’s mouth from the start with the following dental tips:

- Caring for baby’s mouth every day is important to prevent cavities.
- Baby teeth get cavities just like adult teeth.
- Cavities are painful and can lead to more serious health problems if not treated early.
- Find your child a dental home by Age One and take them two times/year to keep their mouth healthy.

Tips to Keep your Child Healthy & Cavity Free

- Give your child less or no candy, junk food or sweetened beverages
- Only put your child to bed with a bottle of water
- Begin brushing your child’s teeth when you see their first tooth appear
- Brush your child’s teeth two times every day: morning and always before bedtime.

Make visiting the dentist a good experience.

Be sure to take your child to the dentist by their 1st birthday.

Keeping your scheduled appointment is important.

If you need help finding a dentist in your area please call:

855-CT-DENTAL (855-283-3682)

Monday-Friday, 8 am – 5 pm

Hearing impaired clients, please dial 711 for Relay Connecticut assistance

A friendly, live person will be happy to help you! We will help you locate a dentist near you, help with transportation and appointment scheduling.

Connecticut Dental Health Partnership is the program that provides dental care for Connecticut residents on state HUSKY Health/Medicaid.

For more information, visit www.ctdhp.com
Plaque likes to grow between your teeth and under your gums. Plaque causes dental problems.

**How to Hold Dental Floss**

1. Wrap about two feet of floss around the middle fingers of each hand, or...
2. ...make a loop by tying the ends together.
3. Use your thumb and index finger to guide the floss between your upper teeth.
4. To clean the lower teeth, slip the floss down with your index fingers.

**How to Floss Your Teeth**

1. Work the floss gently between your teeth.
2. Bend the floss around the tooth in a U-shape.
3. Pull the floss against the tooth. Move the floss gently under the gum until you feel the pressure.
4. Hold the floss firmly against your tooth and scrape the plaque from the side of your tooth in one pull.

Be sure to floss both sides of each tooth. Move to a clean area of floss after every 2 or 3 teeth.

**How to Brush Your Teeth**

1. Place the bristles at a 45 degree angle to the teeth. Slide the tips of the brush bristles under the gums.
2. Jiggle the bristles gently in small circles so that any plaque under the gum will be removed.
3. Be sure to brush both the outside and the tongue side of your teeth.
4. Brush the chewing surfaces of your teeth with a back and forth motion.
5. Brush the tongue side of your front teeth with the end of the brush, cleaning one tooth at a time.
6. Brush your tongue to remove germs and to make your breath fresh.

A smear of toothpaste is all you need to keep your teeth and gums clean and healthy.

A smear of toothpaste is all you need to keep your teeth and gums clean and healthy.
Pregnant?
- You Should Visit Your Dentist –
- Ask Your OB/GYN Why –

Is Your Child Age One?
- Then Make Their first Dental Visit –

Are You on HUSKY Health?
Call
855-CT-DENTAL
Hearing impaired clients, please dial 711 for Relay Connecticut assistance
M-F 8AM-5PM
to find a dentist near you!
¿Embarazada?
- Usted debe visitar a su dentista –
- Pregunte a su Gineco-Obstetra porque –

¿Tiene su niño un año de edad?
- Entonces haga la primera cita dental para su 1° cumpleaños -

¿Tiene usted HUSKY Health?
Llame a
855-CT-DENTAL
Para clientes con problemas auditivos, por favor llame al 711 para asistencia de Relay Connecticut
L-V 8AM-5PM
¡para encontrar un dentista cerca de usted!
Good Oral Health Starts Early

Tooth decay (dental caries or cavities) is one of the most common chronic childhood diseases in the United States. The good news is there are ways to prevent it.

Even the tiniest teeth can decay. There are habits you can start now to keep your baby’s teeth healthy. And when that first tooth shows up, there are ways your pediatrician can keep it healthy, too. Here is what you need to know.

Who can get tooth decay?
Everyone, even babies, can get tooth decay. Some things put children are at more risk, such as living in poverty, being in an ethnic or racial minority group, or having special health care needs. There are other reasons a child could be high risk.

- The child’s mother or main caregiver had tooth decay in the past 12 months or does not have a regular source of dental care.
- There are white spots on the child’s teeth. These spots are a sign that the tooth is losing calcium and minerals that keep it strong.
- There are tan, brown or black spots or you see holes (pits) on the teeth. This is a sign that the tooth is decaying.

How water helps
Fortunately, your family’s tap water probably has fluoride added to it. Fluoride is a safe and useful cavity-fighting ingredient that has been added to drinking water since 1945.

Fluoride is a natural mineral that can slow down or stop cavities from forming. When you drink water every day, the fluoride makes it hard for bacteria in your mouth to make acid. Fluoride also rebuilds tooth enamel (the outer layer of the tooth) and it even makes teeth stronger.

Check with your local water utility agency to find out if your water has fluoride. The health benefits work when the drinking water has 0.7 mg/L of fluoride. If your community water supply
does not have fluoride or you live on a private well, ask your doctor if you should get a prescription for fluoride drops or chewable tablets for your child.

**Fluoride toothpaste**

As soon as your baby's first tooth erupts, it's time to start using fluoride toothpaste. Here's how to do it:

- Use a tiny smear --- the size of a grain of rice --- until age 3. Clean the teeth at least twice a day. It's best to clean them right after breakfast and before bedtime.
- Use a pea-sized amount of fluoride toothpaste when your child is 3 years old. Teach your child to spit without rinsing.
- It is best if you put the toothpaste on the toothbrush until your child is about age 6.
- As your child gets older let her use her own toothbrush. Until children are 7 or 8 years old, you will need to help them brush twice a day for at least 2 minutes. Try brushing their teeth first and then letting them finish.

A toothbrush should be the last thing to touch your child's teeth every night....

Do not put your baby to bed with a bottle at night or at naptime. It is also not a good idea to let your baby use a bottle filled with a sweet drink or dip your baby's pacifier in anything sweet like sugar or honey. If you do put your baby to bed with a bottle, fill it only with water. You can give your baby about 4-8 ounces of water per day starting at around 6 months. (Remember, the American Academy of Pediatrics (AAP) recommends breastfeeding as the sole source of nutrition for your baby for about 6 months.)

**Special steps stop tooth decay**

When your baby is 6 months, your pediatrician will start to do oral health checkups and apply fluoride varnish. Pediatricians are trained to apply fluoride varnish because many young children do not see or have access to a dentist until they are older. All infants and children should have fluoride varnish every 6 months until age 5. Children might need it every 3 months if they have a higher risk of dental decay.

Varnish is used to help prevent or slow down tooth decay. It is painted on the top and sides of each tooth and hardens quickly. The process is safe and does not hurt.

**It's in your plan**

Fluoride varnish is a "preventive care service" for children. This means that all public and private health insurance plans should cover fluoride varnish. No part of the cost should be shared by patients or families.
Remember

Oral health starts early. Be ready to discuss your family's plan for a "dental home." All children need access to a dentist for regular care. See your child's dentist by his first birthday or within six months of their first tooth. At this first visit, your dentist can easily check your child's teeth and determine the frequency of future dental checkups.

Source: https://www.healthychildren.org/English/healthy-living/oral-health/Pages/Brushing-Up-on-Oral-Health-Never-Too-Early-to-Start.aspx
La buena salud bucal comienza temprano

La caries dental (cavidades dentales) es una de las enfermedades crónicas más comunes de la infancia en los Estados Unidos. La buena noticia es que existen formas de prevenirlas.

Incluso el diente más pequeño puede tener caries. Hay hábitos que usted puede incorporar de inmediato para preservar la salud de los dientes de su bebé. Y, cuando aparezca ese primer diente, hay formas en las que su pediatra también puede mantenerlo sano. Esto es lo que usted debe saber.

¿Quién puede tener caries?

Todos, incluso los bebés, pueden tener caries. Algunas cosas hacen que los niños tengan un riesgo mayor, tal como vivir en la pobreza, pertenecer a una minoría étnica o racial o tener necesidades de atención médica especiales. Existen otras razones por las cuales un niño podría ser de alto riesgo.

- La madre o el cuidador principal del niño tuvo caries en los 12 meses previos o no tiene acceso a una fuente habitual de cuidado dental.

- Los dientes del niño tienen manchas blancas. Estas manchas son un signo de que el diente está perdiendo calcio y minerales que lo mantienen fuerte.

- Los dientes tienen manchas color café, marrones o negras o puede observar huecos (agujeros) en ellos. Esto es un signo de que en el diente están apareciendo caries.
Cómo ayuda el agua

Afortunadamente, el agua potable que su familia consume probablemente tenga floruro agregado. El floruro es un ingrediente seguro y útil para combatir las caries que se agrega al agua potable desde 1945.

El floruro es un mineral natural que puede ralentizar la aparición de caries o evitarlas. Cuando usted bebe agua todos los días, el floruro hace que sea difícil para las bacterias que se encuentran en su boca producir ácido. El floruro también reconstruye el esmalte dental (la capa exterior del diente) e incluso fortalece los dientes.

Consulte con su agencia de suministro de agua local para averiguar si su agua tiene floruro. Los beneficios para la salud funcionan cuando el agua potable tiene 0,7 mg/L de floruro. Si el suministro de agua de su comunidad no tiene floruro o si usted se abastece de un pozo privado, pregúntele a su médico si debe obtener una receta para gotas o comprimidos masticables de floruro para su hijo.

Pasta dental con floruro

Apenas salga el primer diente de su hijo, es hora de empezar a utilizar pasta dental con floruro. Debe hacerlo de la siguiente manera:

- Use una cantidad muy pequeña —del tamaño de un grano de arroz— hasta los 3 años. Limpie sus dientes al menos dos veces al día. Es mejor limpiarlos inmediatamente después del desayuno y antes de la hora de dormir.
- Cuando su hijo tenga 3 años, utilice una cantidad de pasta dental con floruro del tamaño de un guisante. Enséñele a su hijo a escupir sin enjuagarse.
- Es mejor que usted coloque la pasta dental en el cepillo de dientes hasta que su hijo tenga aproximadamente 6 años.
- A medida que su hijo crezca, déjele usar su propio cepillo de dientes. Hasta que los niños tengan 7 u 8 años, tendrá que ayudarlos a cepillarse dos veces al día durante al menos 2 minutos. Pruebe cepillarles los dientes primero y luego dejar que ellos terminen.

Lo último que debería tocar los dientes de su hijo todas las noches es un cepillo de dientes...

No duerma a su bebé con un biberón a la noche o a la hora de la siesta. Tampoco es buena idea dejar que su bebé tome un biberón lleno de una bebida dulce o sumergir el chupete de su bebé en algo dulce, como azúcar o miel. Si duerme a su bebé con un biberón, llénelo solamente con agua. Puede darle a su bebé aproximadamente de 4 a 8
onzas de agua por día desde los 6 meses de edad aproximadamente. (Recuerde que la American Academy of Pediatrics [AAP] recomienda la leche materna como única fuente de alimentación para su bebé durante aproximadamente 6 meses).

Pasos especiales para detener la aparición de caries

Cuando su bebé tenga 6 meses, su pediatra comenzará a realizarle controles de salud bucal y aplicar barniz de fluoruro. Los pediatras están entrenados para aplicar barniz de fluoruro porque muchos niños pequeños no visitan al dentista o no tienen acceso a uno hasta que son más grandes. A todos los bebés y los niños se les debe aplicar barniz de fluoruro cada 6 meses hasta que tengan 5 años. Los niños podrían necesitar una aplicación cada 3 meses si tienen un riesgo mayor de tener caries.

El barniz se utiliza para ayudar a prevenir o ralentizar la aparición de caries. Se pinta con él la parte superior y los costados de cada diente y se endurece rápidamente. El proceso es seguro y no provoca dolor.

 Está incluido en su plan

El barniz de fluoruro (flúor) es un “servicio de cuidado preventivo” para los niños. Esto significa que todos los planes de seguro de salud tanto públicos como privados deben cubrir el barniz de fluoruro. Los pacientes o las familias no deben compartir ninguna parte del costo.

Recuerde

La salud bucal empieza temprano. Esté preparado para hablar de su plan familiar para un “hogar dental”. Todos los niños necesitan tener acceso a un dentista para una atención habitual. Visite al dentista de su hijo cuando este cumpla un año o dentro de los seis meses posteriores a la salida de su primer diente. En esta primera visita, su dentista puede revisar fácilmente los dientes de su hijo y determinar la frecuencia de los controles dentales futuros.

Let the Brushing Games Begin

By: Laura A. Jana, MD, FAAP & Jennifer Shu, MD, FAAP

It usually takes quite a while before children can master tooth brushing for themselves. Here are some practical suggestions to help you make brushing more fun for them and a matter of routine.

- **Start early.** No teeth? No problem. Simply going through the motions by regularly brushing and cleaning gums still serves a very useful purpose.

- **Brush often.** While we focus a lot on **bedtime** brushing, technically speaking, your goal of brushing teeth is to clean food off of them, and the sooner the better. Yet few adults we know make a regular habit of brushing their teeth throughout the day. Start having your child brush after meals early in life and you stand a fighting chance of creating a lasting habit.

- **Sing, sing a song.** Or set a timer. Or come up with some other creative way to keep your child engaged in the act of brushing her teeth for the recommended 2 minutes, or for at least as long as it takes to make sure that your combined efforts leave them clean. Some toothbrushes even light up or play music for the amount of time a child should keep brushing, preventing kids from being fooled into thinking that they’ve brushed long enough.

- **Check it out.** If your child is showing signs of independence and insists on brushing on their own, then by all means let her. Just don’t forget to get in the habit of proudly “checking out” their work at the end of each session while casually doing some touch-ups of your own.

- **Appeal to taste.** If Cinderella, the Cat in the Hat, a race car, or an electric toothbrush similar to yours has better prospects of winning your child over than you do, then by all means oblige. Feel free to indulge their tastes by letting them choose toothbrushes and toothpaste that they can really get excited about. There are also many flavored toothpastes that taste great and make it fun to brush.
• **Hands off.** Right around the age when you're likely to start brushing, your child is likely to start grabbing. By giving them a soft-bristled brush (or 2) of their own to have and to hold, you will be able to avoid a fight over yours—leaving you well equipped to get the job done. Sure, it may take 3 toothbrushes instead of 1, but it's a small price to pay for a routine that really works.

• **Go where no child has gone before.** We suggest you pay particular heed (and direct your child's attention) to those teeth that are most likely to be neglected. While you're helping them brush, describe what you're doing in terms they can relate to by pointing out their "biting" teeth (the chewing surfaces), their "smile teeth" (you guessed it—right in the front), and the tricky teeth in the back. Your goal— to teach your child to leave no plaque unturned.

**Toothpaste temptations**
All children can benefit from fluoride, but it's important to use the right amount of toothpaste. Current recommendations advise using a smear of fluoride toothpaste (or an amount about the size of a grain of rice) for children younger than 3 and a pea-sized amount for children 3 to 6. Since the fluoride found in toothpaste is clearly meant to be swished but not swallowed, make sure to help or watch your child while brushing. When they are old enough, tell them to spit out the toothpaste after brushing.

Source: [https://www.healthychildren.org/English/healthy-living/oral-health/Pages/let-the-brushing-games-begin.aspx](https://www.healthychildren.org/English/healthy-living/oral-health/Pages/let-the-brushing-games-begin.aspx)
Hora de empezar el cepillado dental

Debido a que tomará bastante tiempo para que su hijo pueda lavarse los dientes solo, nos gustaría dejarle algunas sugerencias prácticas para ayudarle a que sea más divertido y para hacerlo de forma rutinaria.

- **Empiece pronto.** ¿No tiene dientes? No hay problema. Simplemente repasar los movimientos de cepillar y lavar las encías regularmente cumple con un propósito muy útil.

- **Cepille con frecuencia.** A pesar de que nos hemos enfocado hasta ahora en el cepillado a la hora de dormir, hablando técnicamente, su objetivo de cepillar los dientes es limpiar los alimentos que quedan en ellos, y mientras más pronto mejor. Sin embargo, conocemos pocos adultos que tienen el hábito regular de cepillarse los dientes durante el día. Empiece por hacer que su hijo se cepille los dientes después de la comida desde muy pequeños y tendrá una alta probabilidad de crear un hábito duradero.

- **Cante, cante una canción.** O coloque un temporizador. O invente alguna otra manera creativa de mantener a su hijo atento en el acto de cepillarse los dientes durante los 2 minutos recomendados o por lo menos tanto tiempo como dure asegurarse que sus esfuerzos combinados los dejarán limpios. Algunos cepillos de dientes incluso tienen luces o reproducen música durante el tiempo que un niño debe seguir cepillándose, evitando que los niños piensen que ya se lavaron por suficiente tiempo.

- **Compruébelo.** Si su hijo da señales de independencia e insiste en cepillarse por su cuenta, entonces por supuesto, déjelo. Solamente no olvide el hábito de “comprobar” orgullosamente su trabajo al final de cada sesión mientras que casualmente hace unos retoques por su cuenta.

- **Apele a sus gustos.** Si la Cenicienta, el Gato con botas, un auto de carreras o un cepillo de dientes eléctrico parecido al suyo tiene mejores posibilidades de atraer a su hijo que usted, entonces por supuesto, no dude en hacerlo. Apele a sus gustos y déjelo elegir los cepillos de dientes y la pasta dental que realmente le guste. Existen muchas pastas dentales con sabores que pueden hacer del cepillado una experiencia divertida.
- **No tocar.** Aproximadamente a la edad en la que usted probablemente puede empezar a cepillarle los dientes, su hijo empezará a agarrar las cosas. Si le da un cepillo de hebras suaves (o 2) que él pueda sujetar y sostener, podrá evitar una pelea por tener el que usted usa, dejándolo bien equipado para hacer su trabajo. Por supuesto, tal vez le tome 3 cepillos en lugar de 1, pero es un pequeño precio a pagar por una rutina que realmente funciona.

- **Vaya a las áreas remotas.** Le sugerimos que preste especial atención (y dirija la atención de su hijo) a aquellos dientes que es más probable que se ignoren. Mientras lo ayuda a cepillarse, describa lo que está haciendo en términos con los que se pueda relacionar al señalar sus dientes, “para morder” (las superficies para masticar), los “dientes de la sonrisa” (usted lo adivinó, justo enfrente) y los dientes difíciles en la parte trasera. Su objetivo: enseñar a su hijo a no dejar placa sin remover.

**Tentaciones de la pasta de dientes**

Todos los niños se pueden beneficiar del fluoruro, pero es importante usar la cantidad correcta de pasta dental. Las recomendaciones actuales aconsejan usar un frotis (untar una pequeña muestra del tamaño de un grano de arroz) para los niños menores de 3 años y una muestra del tamaño de una arveja (chicharro) para los niños de 3 a 6 años. Debido a que el fluoruro de la pasta dental es para enjuagar y escupir pero no tragar, cerciórese de ayudar u observar al niño mientras se cepilla. Cuando tenga la edad apropiada, dígale que escupa la pasta dental después de cepillarse los dientes.

Dental Summary of Benefits HUSKY Health

Children Ages 0-20

Welcome to the HUSKY Dental Plan. Here is a comprehensive summary of the benefits for Children Ages 0-20

Important to note:

- HUSKY Health covers certain MEDICALLY necessary dental services. Children are considered all individuals under the age of 21.
- Not all dental procedures are covered benefits, and certain covered dental services require prior authorization by your dentist.
- Covered services are provided at dental providers in the CTDHP network which is part of the HUSKY Health network. You may have to pay for services if the service is provided by a dentist that does not participate in the CTDHP network.
- Covered services are provided at no cost to you. You will have to pay for services if you choose to have a service that is not included in the HUSKY Health plan.
- If you wish to speak to a member services representative, please call the Connecticut Dental Health Partnership (CTDHP) toll free 1-855-CT DENTAL (1-855-283-3682). We are available Monday through Friday, from 8:00 a.m. to 5:00 p.m.
## Your Benefits:

<table>
<thead>
<tr>
<th>Care Category</th>
<th>Description</th>
<th>Benefits and Limitations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diagnostic</td>
<td>Oral examination or screening.</td>
<td>• Periodic Exam: 2 times per year&lt;br&gt;• Problem Focused Exam: 4 times per year&lt;br&gt;• Comprehensive Exam: once every 3 years</td>
</tr>
<tr>
<td>X-Rays</td>
<td>Complete mouth X-rays, Periapical X-rays, Bitewing X-rays, Occlusal X-rays, Panoramic X-rays.</td>
<td>1. Bitewing X-ray: 1 per year&lt;br&gt;2. Periapical X-rays: 4 per year&lt;br&gt;3. Complete Mouth Series or Panoramic X-ray: 1 every 3 years</td>
</tr>
<tr>
<td>Preventive</td>
<td>Cleaning, fluoride application.</td>
<td>1 every 6 months per member</td>
</tr>
<tr>
<td>Restorative-Fillings</td>
<td>The treatment of tooth decay by the use of silver and/or white fillings.</td>
<td>Fillings are covered once per two years for the same tooth surface. <strong>HUSKY B Copay-20%</strong></td>
</tr>
<tr>
<td>Restorative-Crowns</td>
<td>The use of gold, semiprecious, or nonprecious metals and/or porcelain to restore a tooth or teeth which cannot be restored with silver or white restorations.</td>
<td>Covered once per five years. Prior authorization required. <strong>HUSKY B Copay-33%</strong></td>
</tr>
<tr>
<td>Endodontics</td>
<td>The treatment of the diseases of the blood vessels and the nerve of the tooth. Endodontic treatment often involves root canal procedures.</td>
<td>Initial and re-treatment root canal procedures covered up to age 21. Prior authorization required. <strong>HUSKY B Copay 20%</strong></td>
</tr>
<tr>
<td>Care Category</td>
<td>Description</td>
<td>Limitations</td>
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</tr>
<tr>
<td>Periodontics</td>
<td>The treatment of the supporting tissues of the teeth, gums, and underlying bone, with either surgical or non-surgical procedures (where applicable).</td>
<td>Prior authorization required.</td>
</tr>
<tr>
<td>Prosthetics – Removable</td>
<td>The replacement of missing teeth by the use of a removable appliance.</td>
<td>Prior authorization required.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Husky B Copay 50%</td>
</tr>
<tr>
<td>Prosthetics – Adjustments &amp; Relines</td>
<td>The repair or modification of existing removable appliances so that they can continue to be serviceable.</td>
<td>Is allowed after 6 months after the initial placement of the denture(s).</td>
</tr>
<tr>
<td></td>
<td></td>
<td>HUSKY B Copay 20%</td>
</tr>
<tr>
<td>Prosthetics – Fixed</td>
<td>The use of gold, semiprecious, or precious metal to replace a missing tooth or teeth. Fixed prosthetics may include bridgework, implants and implant retained crowns and dentures.</td>
<td>Not covered but may be covered in special circumstances with medical necessity</td>
</tr>
<tr>
<td>Extractions</td>
<td>The extraction, either simple or surgical, of either a single tooth or multiple teeth.</td>
<td>Covered for all permanent, baby and extra teeth. Biopsies, bone grafting, alveoloplasty, facial surgery for trauma and inherited facial conditions. Prior authorization is required.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Husky B Copay 20% simple extraction or 33% surgical.</td>
</tr>
<tr>
<td>Wisdom Tooth Removal and Impactions</td>
<td>The surgical removal of fully erupted teeth when medically necessary or teeth partially or fully covered by gum tissue or bone.</td>
<td>Prior authorization required.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>HUSKY B Copay 33%</td>
</tr>
<tr>
<td>Oral Surgery</td>
<td>The shaping of bone ridges, the treatment of an abscess, biopsies of soft and hard tissues, reconstructive surgeries etc.</td>
<td>Requires prior authorization.</td>
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<td></td>
<td></td>
<td>HUSKY B Copay 33%</td>
</tr>
<tr>
<td>Care Category</td>
<td>Description</td>
<td>Limitations</td>
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</tbody>
</table>
| Orthodontics             | The straightening of teeth for significant dental health reasons. Must meet or exceed qualifying score on the Salzmann Scoring Scale.                                                                     | Covered once per member per lifetime HUSKY A, HUSKY C, HUSKY D  
  • Prior Authorization required  
  HUSKY B  
  • Limited to recipients under age 19  
  • No Prior Authorization required  
  • Benefit - $725.00  
  Member is responsible for balance up to $3,198.21 |
| Athletic Mouth Guard     | Mouthguards are worn over the top row of teeth during sports to help prevent an oral injury. They protect against broken teeth, cut lips, and other damage to the mouth.                                            | Covered one per member, per lifetime for members under 21 who are enrolled in a contact sport.                                                                                                                |
| Occlusal “Night” Guards  | A removable acrylic appliance intended to relieve temporomandibular joint pain and other effects of grinding the teeth (bruxism). Usually worn at night to prevent grinding during sleep.                           | Prior Authorization required for members with severe clenching or tooth grinding habits. May be used to treat temporomandibular joint (TMJ) problems.                                                     |
| Deep Sedation/General Anesthesia | Covered for general dental procedures and tooth extractions in children under the age of 9 OR for children under the age of 21 with behavioral related conditions such as autism, cerebral palsy, intellectual delays. | Prior Authorization required.                                                                                       |
| Inhalation Sedation      | Nitrous oxide. Covered for children up to the age of 9 without prior authorization OR for children under the age of 21 with behavioral related conditions such as autism, cerebral palsy, intellectual delays. | Prior Authorization required.                                                                                       |
Dental Summary of Benefits HUSKY Health
Adults Ages 21 and Over

Welcome to the HUSKY Dental Plan. Here is a comprehensive summary of the benefits for Adults Ages 21 and over.

Important to note:

- HUSKY Health covers certain MEDICALLY necessary dental services. Adults are ages 21 and older.
- Not all dental procedures are covered benefits, and certain covered dental services require prior authorization by your dentist.
- Covered services are provided at dental providers in the CTDHP network which is part of the HUSKY Health network. You may have to pay for services if the service is provided by a dentist that does not participate in the CTDHP network.
- Covered services are provided at no cost to you. You will have to pay for services if you choose to have a service that is not included in the HUSKY Health plan.
- If you wish to speak to a member services representative, please call the Connecticut Dental Health Partnership (CTDHP) toll free 1-855-CT DENTAL (1-855-283-3682). We are available Monday through Friday, from 8:00 a.m. to 5:00 p.m.
## Your Benefits:

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</tr>
</thead>
<tbody>
<tr>
<td><strong>Diagnostic</strong></td>
<td>Oral examination or screening every calendar year.</td>
<td>• Periodic Exam: 1 per year&lt;br&gt;• Problem Focused Exam: 4 times per year&lt;br&gt;• Comprehensive Exam: limited to once per lifetime</td>
</tr>
<tr>
<td><strong>X-Rays</strong></td>
<td>Complete mouth X-rays, periapical X-rays, bitewing X-rays, Occlusal X-rays and panoramic X-rays.</td>
<td>1. Bitewing X-ray: 1 per year&lt;br&gt;2. Periapical X-rays: 4 per year&lt;br&gt;3. Complete Mouth Series or Panoramic X-ray: 1 every 3 years</td>
</tr>
<tr>
<td><strong>Preventive</strong></td>
<td>Cleanings and Fluoride.</td>
<td>1 every calendar year per member Fluoride treatment requires prior authorization.</td>
</tr>
<tr>
<td><strong>Restorative-Fillings</strong></td>
<td>The treatment of tooth decay by the use of silver and/or white fillings.</td>
<td>Fillings are covered once per two years for the same tooth surface.</td>
</tr>
<tr>
<td><strong>Restorative-Crowns</strong></td>
<td>The use of gold, semiprecious, or nonprecious metals and/or porcelain to restore a tooth or teeth which cannot be restored with silver or white restorations.</td>
<td>Covered once per five year. Prior authorization required.</td>
</tr>
<tr>
<td><strong>Endodontics</strong></td>
<td>The treatment of the diseases of the blood vessels and the nerve of the tooth. Endodontic treatment often involves root canal procedures.</td>
<td>Once per tooth per Client per lifetime limitation. Certain conditions must be met. Prior authorization is required.</td>
</tr>
<tr>
<td>Care Category</td>
<td>Description</td>
<td>Limitations</td>
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</tr>
<tr>
<td>Periodontics</td>
<td>The treatment of the supporting tissues of the teeth, gums, and underlying bone, with either surgical or non-surgical procedures (where applicable).</td>
<td>Not covered.</td>
</tr>
<tr>
<td>Prosthetics – Removable</td>
<td>The replacement of missing teeth by the use of a removable appliance.</td>
<td>Denture prosthesis construction is limited to one time per each 7-year period.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Prior authorization required.</td>
</tr>
<tr>
<td>Prosthetics – Adjustments &amp; Relines</td>
<td>The repair or modification of existing dentures so that they can continue to be serviceable.</td>
<td>Limited to once every 2 years, and only 6 months after the initial placement of the denture(s).</td>
</tr>
<tr>
<td>Prosthetics – Fixed</td>
<td>The use of gold, semiprecious, or precious metal to replace a missing tooth or teeth. Fixed prosthetics may include bridgework, implants and implant retained crowns and dentures.</td>
<td>Not covered.</td>
</tr>
<tr>
<td>Extractions</td>
<td>The extraction, either simple or surgical, of either a single tooth or multiple teeth.</td>
<td>Covered for all permanent, baby and extra teeth. Biopsies, bone grafting, alveoloplasty, facial surgery for trauma and inherited facial conditions. Prior authorization is required.</td>
</tr>
<tr>
<td>Wisdom Tooth Removal and Impactions</td>
<td>The surgical removal of fully erupted teeth when medically necessary or teeth partially or fully covered by gum tissue or bone.</td>
<td>Prior authorization required.</td>
</tr>
<tr>
<td>Oral Surgery</td>
<td>The shaping of bone ridges, the treatment of an abscess, biopsies of soft and hard tissues, reconstructive surgeries etc.</td>
<td>Requires prior authorization.</td>
</tr>
<tr>
<td>Orthodontics</td>
<td>The straightening of teeth for <strong>significant</strong> dental health reasons.</td>
<td>Not covered for adults.</td>
</tr>
<tr>
<td>Care Category</td>
<td>Description</td>
<td>Limitations</td>
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</tr>
<tr>
<td>Athletic Mouth Guard</td>
<td>Mouthguards are worn over the top row of teeth during sports to help prevent an oral injury. They protect against broken teeth, cut lips, and other damage to the mouth.</td>
<td>Not covered for adults.</td>
</tr>
<tr>
<td>Occlusal “Night” Guards</td>
<td>A removable acrylic appliance intended to relieve temporomandibular joint pain and other effects of grinding the teeth (bruxism). Usually worn at night to prevent grinding during sleep.</td>
<td>Prior Authorization required for members with severe clenching or tooth grinding habits. May be used to treat temporomandibular joint (TMJ) problems.</td>
</tr>
<tr>
<td>Deep Sedation/General Anesthesia</td>
<td>Covered for general dental procedures and tooth extractions in children under the age of 9 OR for children under the age of 21 with behavioral related conditions such as autism, cerebral palsy, intellectual delays.</td>
<td>Covered in certain situations.</td>
</tr>
<tr>
<td>Inhalation Sedation</td>
<td>Nitrous oxide. Covered for adults over the age of 21 with behavioral related conditions such as autism, cerebral palsy, intellectual delays and have a diagnosis of 318.0 or greater.</td>
<td>Not covered for adults without a severe or profound developmental delay.</td>
</tr>
</tbody>
</table>
Fluoride a Powerful Tool to Prevent Tooth Decay

Long before a baby’s first tooth erupts, the pediatrician can start guiding families on how to develop healthy oral health habits, including optimal use of fluoride to prevent decay.

The most common chronic disease of early childhood is responsible for millions of school hours lost each year due to illness—and it is largely preventable.

Dental caries, or tooth decay, disproportionately affects poor, young, Black and Hispanic populations, and children with special healthcare needs. The impact of the COVID-19 pandemic has intensified health inequities, as dental visits and well child care visits declined significantly.

The American Academy of Pediatrics recognizes that pediatricians are uniquely positioned to provide oral health guidance to families and apply fluoride varnish to prevent disease in an updated clinical report, “Fluoride Use in Caries Prevention in the Primary Care Setting.” The report, from the AAP Section on Oral Health, marks the first update in recommendations since 2014 and is published in the December 2020 Pediatrics.

“Fluoride has consistently been proven effective at preventing tooth decay, which, when left untreated, can lead to pain, loss of teeth and serious infections,” said Melinda B. Clark, MD, FAAP, lead author of the report. “Pediatricians can prevent dental disease by applying fluoride varnish, counseling families on nutrition and how to care for their children’s teeth and referring to a dentist.”

The clinical report helps pediatricians maximize the use of fluoride for caries prevention while minimizing the risk of enamel fluorosis, a largely cosmetic condition that can cause discoloration of the teeth. The AAP recommends that pediatricians:
• Perform oral health risk assessments on all children at every routine well-child visit beginning at 6 months of age.

• Recommend use of fluoridated toothpaste starting at eruption of the first tooth. A smear or grain of rice sized amount is recommended for children younger than 3 years, and a pea-sized amount of toothpaste is appropriate for most children starting at 3 years of age.

• Apply fluoride varnish according to the recommended periodicity schedule. Fluoride varnish is a proven tool in early childhood caries prevention.

• Know how to determine the concentration of fluoride in a child’s primary drinking water and determine the need for systemic supplements.

• Advocate for water fluoridation in the local community.

• Understand indications for silver diamine fluoride and be able to recognize the clinical appearance of teeth treated with silver diamine fluoride, which is a minimally invasive, low-cost liquid solution that is painted on cavity lesions.

“Families can help children adopt healthy habits from a very young age with simple routines, including the appropriate use of fluoride to prevent dental disease,” Dr. Clark said. “We encourage parents to talk to their pediatricians about getting fluoride varnish at their well child visit and how much fluoride toothpaste to use for their children.”

Source: https://www.healthychildren.org/English/news/Pages/Fluoride.aspx
Fluoruro: una herramienta poderosa para prevenir las caries

Mucho antes de que salga el primer diente de un bebé, el pediatra puede comenzar a orientar a las familias acerca de cómo fomentar hábitos saludables para la salud bucal, incluyendo el uso óptimo del fluoruro para prevenir las caries.

La enfermedad crónica más común en la primera infancia es responsable de que se pierdan millones de horas escolares por año por enfermedad, y es muy prevenible.

La caries dental, o el deterioro de los dientes, afecta de manera desproporcionada a las poblaciones pobres, jóvenes, afro-estadounidenses e hispanas, y a los niños con necesidades de atención médica especiales. El impacto de la pandemia de COVID-19 ha intensificado las desigualdades en cuanto a la salud, ya que las visitas al odontólogo y los controles pediátricos disminuyeron significativamente.

En un informe clínico actualizado titulado, Uso de fluoruro en la prevención de las caries en el contexto de la atención primaria (en inglés), la American Academy of Pediatrics reconoce que los pediatras tienen una posición única para brindar orientación sobre la salud bucal a las familias y aplicar barniz de fluoruro para prevenir la enfermedad. El informe, de la División de Salud Bucal de la AAP, marca la primera actualización de las recomendaciones desde 2014 y se encuentra publicado en el ejemplar de diciembre del 2020 de Pediatrics.

“Se ha probado de manera consistente que el fluoruro es eficaz para prevenir las caries, las cuales, cuando no se tratan, pueden provocar dolor, pérdida de los dientes e infecciones graves”, dijo Melinda B. Clark, MD, FAAP, autora principal del informe. “Los pediatras pueden prevenir la enfermedad dental mediante la aplicación de barniz de
fluoruro, la orientación a las familias sobre la nutrición y cómo cuidar de los dientes de sus hijos y la derivación a un dentista”.

El informe clínico ayuda a los pediatras a maximizar el uso del fluoruro para la prevención de las caries y a minimizar, a su vez, el riesgo de padecer fluorosis del esmalte, una afección mayormente cosmética que puede provocar la decoloración de los dientes. La AAP recomienda lo siguiente a los pediatras:

- Deben realizar evaluaciones de los riesgos para la salud bucal a todos los niños en cada **visita de control** de rutina a partir de los 6 meses de edad.

- Deben recomendar el uso de pasta dental fluorada desde la aparición del **primer diente**. Se recomienda utilizar una cantidad de pasta equivalente a una manchita (pisca) o un grano de arroz para los niños de menos de 3 años y, para la mayoría de los niños a partir de los 3 años, lo adecuado es aplicar una cantidad del tamaño de un guisante.

- Deben aplicar barniz de fluoruro de acuerdo con el programa de periodicidad recomendado. El barniz de fluoruro es una herramienta comprobada para la prevención de las caries en la primera infancia.

- Deben saber cómo determinar la concentración de fluoruro en el agua potable que el niño bebe principalmente y determinar si son necesarios los suplementos sistémicos.

- Deben abogar por la **fluoración del agua** en la comunidad local.

- Deben comprender las indicaciones para el fluoruro de plata diamina y tener la capacidad de reconocer la apariencia clínica de los dientes tratados con fluoruro de diamino de plata, que es una solución líquida de bajo costo y mínimamente invasiva con la que se pintan las lesiones provocadas por las caries.

“Las familias pueden ayudar a los niños a adoptar hábitos saludables desde muy pequeños mediante rutinas simples, lo que incluye el uso apropiado del fluoruro para prevenir las enfermedades dentales”, dijo la Dra. Clark. “Alentamos a los padres a que hablen con sus pediatras sobre obtener barniz de fluoruro en la visita de control del niño y sobre la cantidad de pasta con fluoruro que deben utilizar para sus hijos”.

ORAL

Your Health Can't Wait

In a recent survey, 46.7% of adults reported delaying going to the dentist due to the COVID-19 pandemic. JDR CLIN TRANS RES 9/27/20

Don't let Covid-19 affect your oral health. Ask your dental office these questions when you make your next appointment:

- Do they offer teledentistry (visits by phone)?
- What safety protocols have they added?
- Will cleanings or other services be different?
- Will there be a fee for Personal Protective Equipment (PPE)?

More information, visit www.cdc.gov

hia-ct.org
Follow Us on Facebook @healthimprovementalliance
What to Expect at the Dentist During COVID-19

Maintaining your oral health, including routine visits to the dentist are important for your overall wellbeing. If you are due for a routine visit or need an emergent issue treated, here are some questions you can ask your dentist’s office or clinic to make sure you feel safe and understand any changes due to COVID-19.

Are there tele-dentistry options available?
Depending on the service you need, your dentist might be able to help you, or plan next steps over the phone or video. If you think this might be a good option for you, call your provider and ask them about it.

What safety protocols have you added or modified to mitigate the risk of COVID-19 transmission?
Ask your provider about: mask requirements, disinfecting, how many patients are allowed in the office/waiting room at a time, pre-appointment symptom screening, provider personal protection equipment, and physical social distancing requirements.

Will cleanings or other services be different than usual?
Cleanings might be different than you are used to in order to limit aerosols and droplets in the air. Ask your provider in advance if there are changes you should expect to the dental services you will receive.

Will I be charged a Personal Protective Equipment (PPE) fee?
Some providers are charging a PPE fee, or fee for the extra PPE they need to use in order to protect against the spread of COVID-19. Ask your provider if you will be charged a PPE fee or any additional fees.

If I am seeking non-urgent care should I postpone my visit?
The safety precautions that your dental office has put in place are meant to reduce the risk to staff and patients of the spread of COVID-19 in the dental setting. However, any activity outside of your home where you interact in close contact with other people does carry some risk. This decision is ultimately up to the patient. If you do not feel satisfied with the measures taken by your provider to reduce risk, then continue the discussion with your provider and consider postponing your appointment until you feel comfortable.

Additional Informational Resources:
- For General Information about COVID-19, visit portal.ct.gov/coronavirus or call 2-1-1
- If you have specific questions about COVID-19, email the CT Department of Public Health at COVID19.DPH@ct.gov
¿Qué esperar en el dentista durante el COVID-19

Mantener la salud bucal, incluidas las visitas rutinarias al dentista, es importante para su bienestar general. Si le corresponde una visita de rutina o necesita que se trate un problema emergente, aquí tiene algunas preguntas que puede hacer en el consultorio o la clínica de su dentista para asegurarse de que se siente seguro y entiende cualquier cambio debido al COVID-19.

¿Existen opciones de teleodontología disponibles?
Dependiendo del servicio que necesite, su dentista podría ayudarle, o puede planificar los próximos pasos por teléfono o video. Si cree que ésta podría ser una buena opción para usted, llame a su proveedor y pregúntele al respecto.

¿Qué protocolos de seguridad ha añadido o modificado para mitigar el riesgo de transmisión del COVID-19?
Pregunte a su proveedor sobre: requisitos de mascarilla, desinfección, cuántos pacientes se permiten en el consultorio/sala de espera a la vez, detección de síntomas antes de la cita, equipo de protección personal del proveedor y requisitos de distanciamiento social físico.

¿Serán las limpiezas u otros servicios diferentes a los habituales?
Las limpiezas pueden ser diferentes a las habituales para limitar los aerosoles y las gotitas en el aire. Pregunte a su proveedor con anticipación si hay cambios que debe esperar en los servicios dentales que recibirá.

¿Me cobrarán una tarifa por el equipo de protección personal (EPP)?
Algunos proveedores cobran una tarifa por el EPP, o por el EPP extra que necesitan usar para protegerse contra la propagación del COVID-19. Pregunte a su proveedor si se le cobrará una tarifa por el EPP o cualquier otra tarifa adicional.

Si busco atención no urgente, ¿debería posponer mi visita?
Las precauciones de seguridad que su consultorio dental ha puesto en práctica tienen como objetivo reducir el riesgo de propagación del COVID-19 en el entorno dental para el personal y los pacientes. Sin embargo, cualquier actividad fuera de su casa en la que interactúe en estrecho contacto con otras personas conlleva cierto riesgo. Esta decisión depende en última instancia del paciente. Si no se siente satisfecho con las medidas tomadas por su proveedor para reducir el riesgo, entonces continúe la discusión con su proveedor y considere la posibilidad de posponer su cita hasta que se sienta cómodo.

Recursos informativos adicionales:
- Para obtener información general sobre el COVID-19, visite portal.ct.gov/coronavirus o llame al 2-1-1
- Si tiene preguntas específicas sobre el COVID-19, envíe un correo electrónico al Departamento de Salud Pública de CT a COVID19.DPH@ct.gov