Oral Health Care for Pregnant Women



Improving general health through oral health for all Oregonians

- Dental care is safe and essential during pregnancy.
- Pregnancy is not a reason to defer dental care.
- Evidence shows an association between poor maternal oral health and adverse pregnancy outcomes.
- Oral health services should be integrated with prenatal services for all pregnant women.

Oral Health Delivery Framework

- Assess Conduct an oral health assessment as part of the first prenatal visit. Interview the patient regarding problems in the mouth, previous dental visits, and the availability of a dental provider. (Table 1. Oral Health Assessment Questions) Prenatal providers may also perform visual exam. (Table 2. Common Oral Health Conditions during Pregnancy)
- 2. Educate- Explain the importance of maintaining good oral health and receiving dental care.

Advise the pregnant woman that dental care during pregnancy is safe and effective, and that delaying necessary treatment could result in significant risk to both mother and baby.

Incorporate oral health into prenatal classes and provide educational materials to all pregnant patients.

Encourage patients to maintain a healthy mouth during pregnancy. (Oral Health Messages for Pregnant Women)

3. Refer- Provide referrals to dental care as needed.

Reinforce the importance of making a dental appointment during pregnancy by providing written referral to an appropriate dental provider. (Oral Health Care Referral Form)

- 4. Support- Assist women in accessing dental care. Provide patients with the information needed to schedule dental appointment. (How to Find a Dentist)
- 5. Follow-Up- Ask about dental visit at next appointment. Document the oral health interview and exam findings in medical record.

Oral Health Messages for Pregnant Women

Practice good oral hygiene

- Brush teeth twice daily with fluoride toothpaste and floss daily.
- Rinse with cup of water and baking soda after vomiting to neutralize stomach acid.

Eat nutritious food

- Limit foods containing sugar to mealtime.
- Choose water or low-fat milk. Avoid carbonated beverages.
- Choose fruit rather than juice.

Make a dental appointment

- Do not delay treatment until after birth.
- Dental treatment is safe and necessary during pregnancy.

Table 1: Oral Health Assessment Questions

Ask	Recommended Action
When was your last dental visit and did they discover any issues?	Facilitate a dental referral.
Do you have swollen or bleeding gums, a toothache, problems eating or chewing food, or other problems in your mouth?	Facilitate a dental referral.
Since becoming pregnant, have you been vomiting? If so, how often?	Advise the patient to rinse with water and a baking soda solution after vomiting to reduce acid exposure.
Do you use products with fluoride or drink fluoridated water?	Recommend fluoridated water and dental products to help reduce the incidence of decay.
How often do you brush and floss?	Emphasize brushing and flossing twice a day.



Pregnancy Gingivitis	Increased inflammatory response to dental plaque during pregnancy causes gingivae to swell and bleed more easily. Thorough brushing and flossing should minimize the inflammation.	ANAL STREET
Pyogenic granuloma (pregnancy tumors)	A benign lesion may result from heightened inflammatory response to oral pathogens. Refer for dental evaluation. Professional cleaning may minimize the tumors.	
Tooth erosion	Erosion of tooth enamel may be more common because of increased exposure to gastric acid during pregnancy. Rinse mouth with baking soda and water to neutralize acid after vomiting. Minimize acid-rich foods like citrus and soda.	
Dental Caries	Pregnancy may result in dental caries due to the increased acidity in the mouth, greater intake of sugar, and decreased attention to prenatal oral health maintenance. Increase fluoride use and diligent oral hygiene.	REAK
Periodontitis	Untreated gingivitis can progress to periodontitis. The teeth may loosen, bone may be lost, and a bacteremia may result. Refer to periodontal treatment early in pregnancy.	

How to Find a Dentist:

Oregon Health Plan/ Medicaid

Patients with Oregon Health Plan (OHP) have dental coverage. Most patients will be enrolled in a Coordinated Care Organization (CCO), and assigned a Dental Care Organization (DCO) to managed dental needs. Some patients may have open card or fee-for-service (FFS) dental coverage.

- 1. Contact DCO for assigned dental provider or a list of dentists to choose from. Dental plan information can be found on CCO ID card or OHP Coverage Letter.
- 2. If patients do not know their DCO, they may contact their CCO for dental plan information. Providers can determine a patient's assigned CCO using the Medicaid Provider Web Portal.
- 3. Open Card or FFS members should contact OHP Client Services for help finding a dentist.

Private Insurance

Patients with private insurance should contact their dental insurance provider for a list of in-network dentists. If insurance is provided through their employer, patients should contact HR for information on their dental health plan benefits.

Uninsured

Provide uninsured patients with a list of local low-cost dental services. Patients should also contact OHP to see if they qualify for dental benefits during their pregnancy.

DCOs	CCOs
Access Dental 1-877-213-0357 Advantage Dental 1-866-268-9631 Capitol Dental 1-800-525-6800 CareOregon Dental 1-888-440-9912 Family Dental Care 1-866-875-1199 Kaiser 1-800-813-2000 Managed Dental 1-800-538-9604 ODS Community Health 1-800-342-0526 Willamette Dental 1-855-433-6825	AllCare CCO
Oregon Health Plan (OHP)	PrimaryHealth of Josephine County1-800-471-0304
OHP Client Services 1-800-273-0557 To apply for OHP 1-800-699-9075 OHP Providers 1-800-336-6016	Trillium Community Health Plan



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Oral Health Referral Form

Patient Information			
	Estimated Delivery Date:		
	Referral Information		
Reason for Referral: Routine This patient is cleared for routine of Oral health examination Dental prophylaxis Treatment of diseased gum Dental x-rays Known Allergies: Special Precautions: None 	Bleeding Gums Pain Other: dental evaluation and care, which may include but not be limited to: • Local anesthetic with epinephrine • Local anesthetic with epinephrine • Root canal • Restorations of untreated caries • Dental extraction		
	Provider Information		
Prenatal Care Provider:			
Phone/ Pager:	Fax:		
Signature:	Date:		
My Health Coverage:			
Coordinated Care Organization (CCO)	Phone		
Dental Care Organization (DCO)	Phone:		
Additional Notes:			