• The American Academy of Pediatric Dentistry recommends that infant oral health care begin with prenatal counseling for parents, and that a postnatal initial oral evaluation by a dentist should be performed within six months of the eruption of the first primary tooth in an infant, but no later than 12 months of age.

• Dental Caries is an infectious, transmissible, diet-dependent disease with infants acquiring the bacteria mutans streptococci from their parents/caregivers. Early acquisition and high dental plaque levels of this bacteria predispose infants and toddlers to Early Childhood Caries.

• Mutans is transmitted by direct salivary contact, especially from mothers or caregivers with high caries experience and high mutans levels in their own mouths. Transmission can be reduced or delayed—for example, by not sharing eating utensils, not cleaning pacifiers in mothers'/caregivers' mouths, and suppressing maternal cariogenic flora with fluorides.

• Early Childhood Caries (ECC) is a rapidly developing form of tooth decay that can be severe enough to cause pain, oro-facial infection, difficulty eating and poor nutrition, and subsequent health problems.

• Frequent and prolonged ingestion of sugar-rich liquids promotes ECC whether the source is pacification with breast, bottle, sippy-cup, honey-coated pacifier, or extremely frequent ingestion of sugar-based medications. Although ECC occurs across the population, limited access to dental care by the underserved often delays identification and treatment and results in more severe clinical presentations.

The Infant Oral Evaluation (step by step)

1. Ask the parent/caregiver to seat the child on their lap facing themselves.
2. Sit with your knees touching the knees of the parent/caregiver.
3. Lower the infant so that its head rests high in your lap.
4. The child’s mouth will automatically open or can be gently opened with downward finger pressure inside the lower lip.
5. Look for presence of obvious plaque on the teeth and abnormalities in oral development, mucosa, and tooth color and form ranging from opaque white spots along the gum line (decalcifications) to brown spots and cavities.

Tip: Good infant/toddler oral health education begins during prenatal counseling, especially for women who have experienced problems with tooth decay, and continues at every well baby visit.
What to Look for:

Check for normal healthy teeth
Check for signs of ECC: white spots, brown areas
Check for advanced, severe ECC: dental abscess

References and Resources

- Association of Clinicians for the Underserved—Oral Health Initiative. [www.clinicians.org](http://www.clinicians.org)
- OPENWIDE Integrated Training Program for Non-Dental Providers. Connecticut Dept. of Public Health. [www.dph.state.ct.us](http://www.dph.state.ct.us); Ph: (860) 509-7809; Fx: (860) 509-7720.

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**Children’s Dental Health Project**

Children’s Dental Health Project (CDHP) is dedicated to assisting policymakers, healthcare providers, advocates, and parents improve the oral health and dental care of children and other vulnerable populations. CDHP combines the services of a policy think-tank, advocacy organization, and strategic consultant.