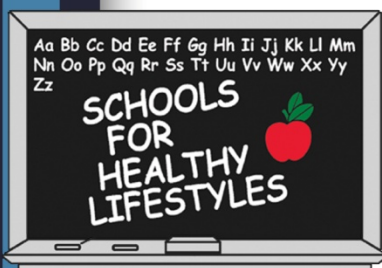


Adopt A Dentist

resource book



Content developed by Oklahoma State Department of Health - Dental Health Services.

TABLE OF CONTENTS

This resource book should be used as a guide to successfully implement the Adopt-a-Dentist program at your assigned school. You will find discussion starters, presentation needs, and suggested activities divided by grade appropriateness and content. Using this manual, SHL instructors will provide effective guidance for students to control behaviors such as personal oral hygiene, good nutrition choices, saying “no” to tobacco, and safety habits. A reference guide, glossary, and activity sheets are located in the back of the book. There are several websites that provide educational games, posters, fact sheets, and student activity sheets. As an instructor, you may want to browse these and other sites for additional tools. Most importantly, students will learn that oral health is essential to overall health.

Program Overview	3
Adopt-A-Dentist Roles and Responsibilities	4
Oral Health Resources	5
Glossary	6
Dental Specialties	11
Lesson Plans Grades K-2	13
• Keeping Our Teeth Strong and Healthy (Basic)	14
• Keeping Our Teeth Strong and Healthy (Advanced)	26
• Tooth Anatomy	42
• Healthy Food for a Healthy Mouth (Basic)	54
• Healthy Food for a Healthy Mouth (Advanced)	72
• Visiting the Dentist	93
• Protecting Our Teeth	100
Lesson Plans Grades 3-5	111
• Oral Hygiene and Dental Anatomy	112
• Dental Diseases	128
• Preventive Dentistry	147
• Healthy Food for a Healthy Mouth	169
• The Truth about Tobacco	196
• Tobacco Addiction	216
• Protecting your Teeth from Injury and Visiting the Dental Office . . .	235
References and Resources	255

PROGRAM OVERVIEW

Schools for Healthy Lifestyle’s Mission

Schools for Healthy Lifestyles (SHL) mission is to promote and maintain healthy lifestyle choices in Oklahoma through preventive, community based school health education programs for students, their families, and faculty. SHL provides funding, curricula, evaluation tools and support to selected elementary schools focusing on physical activity, nutrition, injury prevention, tobacco prevention and oral health education. SHL uses a highly collaborative private-public structure that multiplies and magnifies resources such as volunteers, information, funding and ongoing support services.

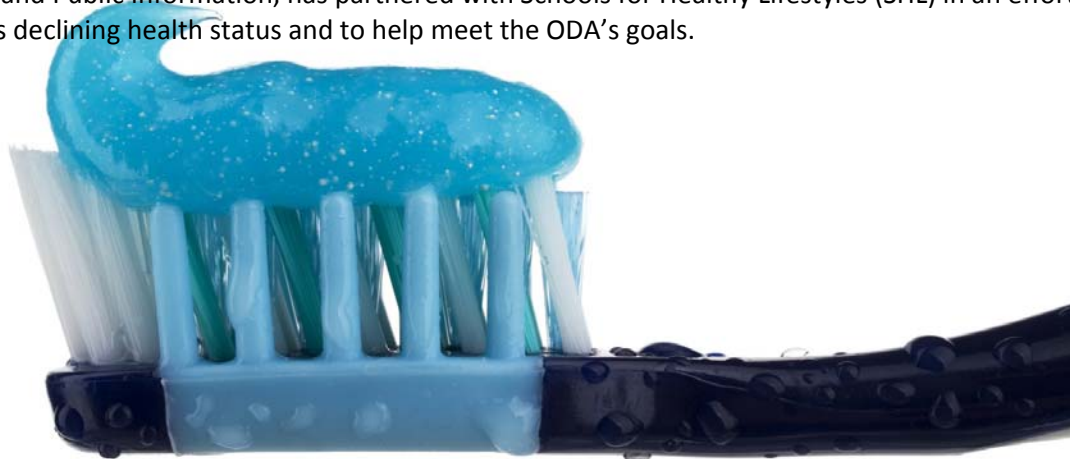
History

The United Health Foundation’s 2009 State Health Rankings show Oklahoma is ranked 49 out of 50 states in terms of good health and public health support. Oklahoma’s leading causes of death continue to be heart disease, cancer, chronic pulmonary disease, stroke, unintentional injuries, and diabetes. The American Medical Association attributes the biggest threats to our health as social morbidities, or threats to health “primarily the result of social environment and/or behavior.” Reflecting the truth of this statement, the key risk factors reported as contributing to Oklahoma’s leading causes of death are tobacco use, obesity and lack of exercise. Fortunately, the students, parents and staff involved with SHL have the opportunity to change unhealthy behaviors that lead to many of the health problems seen in today’s adult population. Making better choices will help build a better quality of life, increase students’ self esteem and create a more productive workforce for Oklahoma.

Schools for Healthy Lifestyles was initiated in 1997 under the auspices of the Oklahoma County Medical Society (OCMS) Community Foundation in collaboration with Oklahoma City Public Schools and the State Health Department; SHL operates as an independent 501(c)3 not-for-profit organization. The vision of SHL is to improve Oklahoma's public health by promoting primary prevention which will ultimately reduce healthcare expenses in our state.

Oklahoma Dental Association

An objective of the Oklahoma Dental Association’s (ODA) Strategic Plan states that the ODA should “enhance public awareness and education efforts for parents, school systems, and communities,” and one of the delineated initiatives to achieve that objective is to “Develop a Dentist Adopt-A-School Program.” The ODA, under the direction of the Council on Dental Education and Public Information, has partnered with Schools for Healthy Lifestyles (SHL) in an effort to combat Oklahoma youth’s declining health status and to help meet the ODA’s goals.



ADOPT-A-DENTIST ROLES & RESPONSIBILITIES

Any dentist affiliated with the Oklahoma Dental Association (ODA) may volunteer his/her time to become an Adopt-A-Dentist. One (and sometimes two) dentists are matched up with each SHL school. For convenience, school assignments will be made as close as possible to the dentist's practice or residence. Adopt-a-Dentists coordinate all planned activities for their adopted school through the SHL coordinator at their school, who serves as the primary liaison for this program.

The Adopt-A-Dentist role is twofold: First, the dentist may serve on the Healthy and Fit Advisory committee already established at the school. This committee meets once a month to guide the implementation of the SHL program. While most dentists will not have a great deal of time to devote on a monthly basis, the Adopt-A-Dentist should serve as a dental expert for the committee, providing information and guidance for the SHL program.

Second: the dentist is an educational resource for students, parents and school faculty. Adopt-A-Dentists may take part in the following activities:

- Make classroom presentations to students in five program areas:
 - Safety and Injury Prevention
 - Nutrition Education and Awareness
 - Tobacco Use Prevention
 - Promoting Physical Activity and Fitness
 - Oral Health Education
- Provide presentations to staff and parents according to assessed needs and interests;
- Assist the school in making arrangements for emergency dental care for low income students with no financial resources for treatment;
- Connect the school with available community health resources;
- Participate in existing school health activities and projects (Health Fairs, etc.); and
- Work with the ODA to try to schedule the Mobile Dental Care Program visit to as many SHL schools as possible.

The school health coordinator/committee will determine specific activities for Adopt-a-Dentists based on school community needs and interests. SHL believes it is important to allow flexibility and creativity in how schools implement their programs based on need; however, recommended curriculum and resources are provided. Although the Adopt-A-Dentist's activities and time commitment may vary from school to school, the dentist's role at every site will be advisor, consultant and educator.

Benefits to Adopt-A-Dentist

- All adopted dentists will be recognized with an ODA/SHL certificate and listed in the SHL newsletter, *Lifeline*.
- All adopted dentists will be recognized in the *ODA Journal*.
- All adopted dentists will be eligible for an annual SHL award for Outstanding Adopt-A-Dentist, as nominated by the schools and chosen by the SHL Board of Directors. This award will be presented at the Annual SHL Awards Reception each fall.

ORAL HEALTH RESOURCES

All SHL schools have the following materials which can be used for the Adopt-A-Dentist program. Please check with your adopted school for availability of these resources.

Foam Tooth Model



This detailed model illustrates the structure of the tooth. Made of resilient, non-toxic foam, the removable pieces stimulate problem-solving skills and help develop small motor skills. Comes with reproducible activity card with background information, extension ideas, and assessment tools.

Pearly Whites Dental Health Game



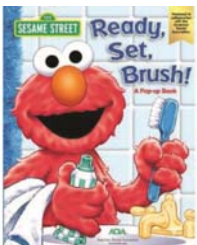
Teaching dental health and hygiene is fun with this board game. In one level of play, students learn types, parts, and locations of teeth. In a second level, students answer general dental health questions. This game includes 100 true/false question cards, a spinner, four pawns, a game board that measures 13" x 20", and guide.

The Gross, Disgusting and Totally Cool Mouth Book



Its 40 large, perfectly photographed and reproduced images of the mouth may be "gross, disgusting and totally cool," according to a young patient, but they are unforgettable examples of real life and will influence patients dramatically.

Ready, Set, Brush!



Elmo, Zoe, and their friends from Sesame Street show kids how easy it is to care for their teeth in Ready, Set, Brush! Flaps to open, wheels to turn, and fun pop-ups help illustrate elements of oral hygiene: applying toothpaste, brushing, rinsing, and regular visits to the dentist.

Teeth Model with Toothbrush



The essentials of correct brushing techniques can be demonstrated with this giant set of teeth. Flexible hinges connect the upper and lower jaw and make teaching good oral hygiene easy.

GLOSSARY

Abrasion: the loss of tooth structure by repetitive mechanical wear. Example: toothbrush abrasion.

Abscess: an acute infection in the gingival tissue that appears as a reddish/yellow swollen nodule containing purulent exudate (pus). May be periapical or periodontal.

Acute: having severe disease symptoms over a short period of time.

Anodontia: congenital absence of teeth, very rare condition where all teeth fail to develop.

Alveolar Bone: the bone in which teeth are embedded; spongy bone with blood vessels and marrow spaces.

Amalgam: an alloy filling material used to restore teeth; composed mainly of silver and mercury.

Amalgam Tattoo: A bluish/black discoloration in the oral mucosa caused by amalgam being implanted in the soft tissue. Usually involves unintentional entrapment of amalgam into an abraded or cut mucosal surface.

Angular Cheilitis: Painful inflammatory condition located at the labial commissures (corners of the mouth). Often this chronic condition is associated with a lip licking habit and/or denture wearers. Usually caused by the fungus *Candida albicans*. Maybe secondarily infected with bacteria.

Aphthous Ulcers: recurrent ulcers occurring on movable oral mucosa. They appear as shallow yellow-gray lesions that have symptoms of burning and intense pain. Commonly known as “canker sores.”

Bacteria: a large group of microorganisms, many of which cause diseases under certain conditions.

Bacterial Plaque: a collection of bacteria, growing on a tooth that can cause disease (see biofilm).

Benign: does not threaten life or health. A benign tumor is generally harmless unless the size becomes problematic.

Biofilm: a complex matrix of bacteria adhering to a solid surface. Dental plaque is a biofilm.

Biopsy: excision of living tissue to be sent to and examined by a pathologist.

Bruxism: a habit related to grinding one’s teeth. Often a sleeping issue or associated with stress.

Calculus: hard mineralized substance adhered to a tooth. Also referred to as “tarter.” Must be scaled off.

Buccal: refers to the cheek; the buccal surface is the area of the tooth next to the cheeks.

Candidiasis: an overgrowth of the fungus *Candida albicans*. Appears as curdy or velvety white patches that when wiped off reveal red burning mucosa. Also known as “thrush.”

Caries: a bacterial dental disease that can result in cavities. The demineralization / destruction of tooth structure as a result of plaque, sugars, and time. The primary bacterial pathogen is *Streptococcus mutans*.

Cementum: the bone-like connective tissue covering the root of a tooth.

Chronic: having disease symptoms over a long period of time with little change; slow progression.

Commissure: the junction of the upper and lower lips at the corner of the mouth (labial commissure).

Cleft Lip: a congenital clefting of the lip, most often occurring on the maxillary lip. Severity varies.

Cleft Palate: a congenital clefting of the palate that is often associated with a cleft lip. Severity varies.

Congenital: a condition present from the time of birth.

Deciduous: the primary (baby) dentition. The normal number is 20.

Dentin: The dense calcified tissue which forms the body of the tooth underneath the enamel and cementum and surrounds the pulp.

Diastema: a space between teeth. Usually refers to a space between the upper central incisors.

Distal: the tooth surface furthest from the midline of the patient.

Edema: abnormal visible swelling.

Enamel: the hard, translucent layer of calcified substance that envelops the tooth crown. This is the hardest substance in the body and is made up almost entirely of calcium salts.

Erosion: the loss of tooth structure by chemicals or acids. Examples: lemon sucking or bulimia (gastric acids)

Erythroplakia: persistent red patch. Red patches are generally worse than white patches (leukoplakia).

Extrinsic Stain: stains that are accumulated colored material on the tooth surface that can be removed with a dental cleaning. Examples: tobacco or coffee stains

Frenum: a fold of mucous membrane that limits movement. For example labial frena limit lip movement and the lingual frenum limit tongue movement.

Fluorosis: a condition where the developing teeth were affected by excessive amounts of fluoride. Varies from mild “snow capped” teeth to yellow/brown spots to severely mottled/pitted enamel.

Geographic Tongue: inflammation of the tongue which appears as patterns of denuded papillae bordered by white lines. This is a common anomaly and is usually asymptomatic.

Gingiva: The gingival tissue is the mucosal tissue in the mouth that surrounds the teeth. Often referred to as “gums.” Attached gingiva is bound to the periosteum, so it is not movable; free marginal gingiva is the collar around each tooth and is not attached to the periosteum, so it is movable.

Gingival recession: the shift of gingiva to expose root surfaces.

Gingivitis: inflammation of the gingival due to bacterial infection often occurring during adolescence. The disease is associated with hypersensitive bleeding gingiva.

Glossal: associated with the tongue. Example, macroglossia refers to an abnormally large tongue.

Lingual: also refers to the tongue.

Halitosis: unpleasant breath odor.

Hematoma: a bruise caused by escape of blood into tissue. In the mouth, hematomas appear red.

Hemorrhage: bleeding.

Herpes Simplex: a recurrent herpetic viral infection. Usually appears as clusters of vesicles that ulcerate and often occur on the border of the lip. May begin as a tingly, burning sensation known as prodromal symptoms. Commonly known as “cold sores.”

Hyperplasia: an increase in the size of tissue. Certain medications such as Dilantin, cause gingival hyperplasia (enlarged gums).

Hypersensitivity: abnormal heightened sensitivity, in dentistry referring to teeth or gingival tissue.

Hypocalcification: less than normal calcification of the tooth structure.

Hypodontia: congenitally missing teeth. Most commonly missing teeth are the upper lateral incisors.

Hyperdontia: same as supernumerary teeth. More than the normal number of teeth.

Intrinsic Stain: stains that are acquired during the development of a tooth, such as tetracycline antibiotics and excessive amounts of fluoride. These stains cannot be removed with a cleaning.

Keratotic: on the oral mucous membrane, looks white and thick and corrugated. May be caused by an irritant such as the aptly named “tobacco pouch.”

Labial: refers to the lips.

Leukoplakia: a white patch in the mouth that cannot be wiped off.

Macrodonia: larger than normal tooth or teeth.

Malignant: a cancerous growth that can grow quickly and readily metastasize.

Mandible: the lower jawbone.

Maxilla: the upper jawbone.

Mesial: the tooth surface closest to the midline of the patient.

Mesidens: the most common supernumerary tooth, located between the upper central incisors.

Metastasize: to spread from one part of the body to another; usually describing malignant tumors.

Microdonia: smaller than normal tooth or teeth. Common example is the “peg-lateral incisor.”

Mucocele: a result of a blocked salivary gland duct. This very common lesion appears as a soft bluish-gray swelling often located on the mucosa of the lower lip.

Necrosis: death of a cell(s).

Occlusal: tooth surface which contacts the corresponding surfaces of opposing teeth when mouth is closed. Usually refers to the chewing surfaces of the back teeth.

Oral mucosa: refers to the inner lining of the lips and cheeks.

Orthodontics: a specialty of dentistry concerned with the prevention and treatment of malocclusion and dentofacial structures. From the Greek: ortho (straight); dont (teeth).

Palate: refers to the area on the roof of the mouth. There is a hard (bony) palate and a soft palate toward the throat.

Periapical: located at the apex (root end) of a tooth, for example “periapical abscess.”

Periodontal disease: Inflammation of the periodontium associated with gingival recession and alveolar bone loss. From the Greek: peri (around); dont (tooth)

Periodontal ligament: the ligament that attaches the tooth root to the alveolar bone. Often referred to as the PDL.

Periodontium: tissue that supports the teeth, including the PDL, gingiva, cementum, and alveolar bone.

Plaque: a soft, thin biofilm which is deposited on the teeth providing for the growth of bacteria.

Prognathic: a developmental deformity of the mandible that causes it to protrude (underbite).

Prophylaxis: professional cleaning of the teeth by a dentist or hygienist. Includes the removal of plaque, stain, materia alba, and calculus by scaling or polishing the teeth. This preventive service helps control dental diseases. From the Greek: prophylassein (to guard).

Pulp: the soft connective tissue comprised of blood vessels and nerves located in the central cavity of each tooth. Pulpal tissue is found in the pulp chamber and in the root canals.

Purulent: containing pus.

Radiation: in dentistry, X-rays or oral radiographs.

Retrognathic: a developmental deformity of the mandible that causes it to retrude (overbite).

Saliva: the clear, alkaline secretion from the salivary glands which discharge into the mouth.

Sealant: a preventive coating that is bonded to a tooth surface, preventing bacteria from entering. Most often placed on the occlusal surfaces of permanent first molars and often called “pit and fissure” sealants.

Supernumerary: more than regular. In dentistry means having more than the normal number of teeth.

Squamous Cell Carcinoma: The most common type of oral cancer accounting for more than 90% of all malignant oral cancers. The most common sites are the lateral sides and underside of the tongue and the floor of the mouth.

Temporomandibular Joint: the hinged joint where the temporal bone and mandible connect allowing the mandible to swing. Often referred to as TMJ.

Tongue thrusting: abnormal forward thrusting of the tongue. A destructive habit.

Torus: a bony nodule on the hard palate or lingual area associated with the mandibular premolars. Approximately 30% of adults have a torus or tori (plural).

Uvula: the small fleshy lobe that “hangs” in the center of the back border of the soft palate.

Xerostomia: impaired salivary function or dry mouth. Can be caused by numerous medications and radiation therapy.

Xylitol: a natural sweetener; most often made industrially from birch tree wood fibers. Xylitol helps decrease tooth decay by stopping the “acid attack.” Since xylitol is not fermentable by bacteria, it is incorporated into saliva making it more alkaline (less acidic). Xylitol can be found in chewing gum and other products.

DENTAL SPECIALTIES

In addition to general dentistry, there are nine Dental Specialties recognized by the American Dental Association. These specialties require a dentist to complete additional graduate training, which may take one to six years post dental school, and are recognized in the United States, Canada, and Australia.

Dental Public Health: Dental public health is the science and art of preventing and controlling dental diseases and promoting dental health through organized community efforts. It is that form of dental practice which services the community as a patient rather than the individual. It is concerned with dental health education of the public, with applied dental research, and with the administration of group dental care programs as well as the prevention and control of dental diseases on a community basis. These dentists study dental epidemiology and social health policies.

Endodontics: Endodontics is that branch of dentistry which is concerned with the etiology, prevention, diagnosis, and treatment of the diseases that affect the pulp and periapical tissues. It has as its primary objective the maintenance of the oral and systemic health of the public. Endodontists perform root canal therapy and study diseases of the dental pulp, and may re-implant teeth which have been avulsed or luxated.

Oral and Maxillofacial Pathology: Oral pathologists deal with the nature of oral diseases, through study of its causes, its processes and its effects, together with the associated alterations of oral structure and function. They study and diagnosis oral diseases and perform biopsies of oral tissue. The oral pathologist need not treat the disease directly, but through knowledge of the disease guides other members of the health services team to more effective therapy.

Oral and Maxillofacial Radiology: This specialty focuses on the study and radiologic interpretation of oral and maxillofacial diseases. They may use many types of dental radiographs (X-rays) to diagnosis diseases of facial bones and jaws.

Oral and Maxillofacial Surgery: Oral surgery is that part of dental practice which deals with the surgery and treatment of diseases, injuries, and defects of the human jaws and associated structures. Oral surgeons perform dental extractions, implants, and facial surgery. They treat TMJ disorders and treat tumors of the jaw, head, and neck. They may practice as part of a health team concerned with the total health care of the patient, often in hospital settings.

Orthodontics and Dentofacial Orthopaedics: Orthodontists practice the management of tooth movement and guide facial development and growth. Braces and appliances are often utilized in this complex practice.

Pediatric Dentistry: This specialty is limited to children. Children possess a developing dentition (primary, mixed, and young permanent). Such practice includes the use of pedodontic appliances to prevent or intercept malocclusions. These dentists are equipped to practice on very young children, those with advanced needs, and children with special health care needs.

Periodontics: Periodontists study and treat diseases of the periodontium (gingiva and surrounding tissue), both surgical and nonsurgical cases. In addition, they place and maintain dental implants. Hygienists are often employed by periodontists for scaling and root planing treatment.

Prosthodontics: Prosthodontists work with patients who have artificial teeth. Fixed prosthodontics refers to crowns or bridges that are cemented into the dentition, and the maintenance of dental implants. Removable prosthodontics refers to complete or partial dentures that need to be removed from the mouth each day for cleaning. Some prosthodontists further their training in “oral and maxillofacial prosthodontics” where facial structures such as ears, noses, and eyes are constructed for replacement.



LESSON PLANS

K-2

Keeping Our Teeth Strong and Healthy (Basic)

Grade Level: K-2

Lesson One: Oral Health

Lesson Time: 20-30 minutes

Lesson Objectives: After completion of this lesson students should be able to: say why we need our teeth; learn about plaque and how it can cause cavities; learn the two most important times to brush their teeth; discuss the words PLAQUE, CAVITIES, TOOTH DECAY and BAD BREATH; demonstrate proper brushing technique and the correct way to carry a toothbrush.

Presentation Needs: Visuals: Eating, Talking, Smiling, Plaque, Cavities, Tooth Decay, Hippo With Bad Breath, Goofy Brushing Morning And Night, Mouth Model and Large Toothbrush, Brushing Instructions.

Suggested Activities: Foam Tooth Model; Geena's Tremendous Tooth Adventure DVD (7-min); The Gross, Disgusting and Totally Cool Mouth Book; Ready-Set-Brush Book;

<http://science.education.nih.gov/supplements/nih2/oral-health/default.htm> (Open Wide and Trek Inside – Student Activities); Activity Sheets.

Discussion Starters with Activities:

1. Teeth help us to eat, talk and smile. Ask students what teeth help us do. Explain that teeth help us eat. There are some foods we could not eat without teeth. It would be hard to bite into an apple, an ear of corn, or even a sandwich without teeth. Explain that teeth also help us do things better. One of the things they help us do better is talk. Try saying 'terrific teeth' without letting your tongue touch your teeth. Our teeth help our lips and tongue make sounds properly. We also need our teeth to help us smile. Everyone look at the person sitting next to you and smile. Our teeth make our smiles look good.
2. Tell students that there is something that gets on everyone's teeth every day even if we don't eat anything. It is called plaque. Let's say the word "plaque." It sounds like "quack." Plaque is made out of germs. You can't see those germs because they are so small (indicate so small with your thumb and forefinger). We cannot see plaque very well but we can feel it. Ask students to feel the plaque with their tongue. Remind them not to feel them with fingers but with their tongue instead. Ask if it feels sticky, bumpy or fuzzy like it would feel if our teeth were wearing sweaters. Show a Visual of Plaque.
3. Plaque can cause three problems in the mouth. State that this sticky goeey plaque is made out of germs. The germs in plaque may cause holes in our teeth and sore gums in our mouth if we don't keep it brushed away. Another problem is bad breath. Even though we can't see plaque very well we can smell it in someone else's mouth or our own mouth.
4. Show a picture of Tooth Decay. Explain to students that these teeth have holes in them. A hole in a tooth is called a cavity. Explain that if plaque is not removed from the teeth it mixes with sugar from the foods we eat and causes cavities.
5. Use a Mouth Model to indicate the gums. Explain to students that the soft area around the teeth is called the gums. Describe healthy gums as having a firm triangle shape between the teeth and usually

a shade of pink. They should not bleed easily. Gums should be brushed gently when brushing the teeth.

6. Remind students that plaque is made out of germs. Tell them these germs should be brushed off two times a day, in the morning and at night. Show visual of Morning and Night Brushing.
7. Demonstrate proper brushing technique using a Mouth Model and a Large Toothbrush. Introduce proper technique by telling students that one way to clean our teeth and gums is by brushing in round circles. Only a pea-sized amount of toothpaste is needed. Have children use actual toothbrushes or just pretend they have a toothbrush and make big circles in the air that become smaller and smaller circles.

Have students brush their teeth using proper brushing technique, or if students do not use brushes in the classroom have them pretend to brush. Remind them to brush two times a day, in the morning and at bedtime. Tell students taking care of their teeth makes them a healthier person.

8. Demonstrate the proper way to rinse and carry a toothbrush by explaining anything that goes into your mouth is supposed to be clean. We need to be careful not to touch the brush part of the toothbrush to anything or you will get germs on it. Explain when rinsing a toothbrush, either at school or at home, you should never put it under the water with anyone else's toothbrush.

Tell students that a toothbrush should always be carried in the hand by the handle. For safety reasons, it should never be carried in the mouth.

Eating



Sam eating.

Smiling



Dee Dee smiling into the mirror.

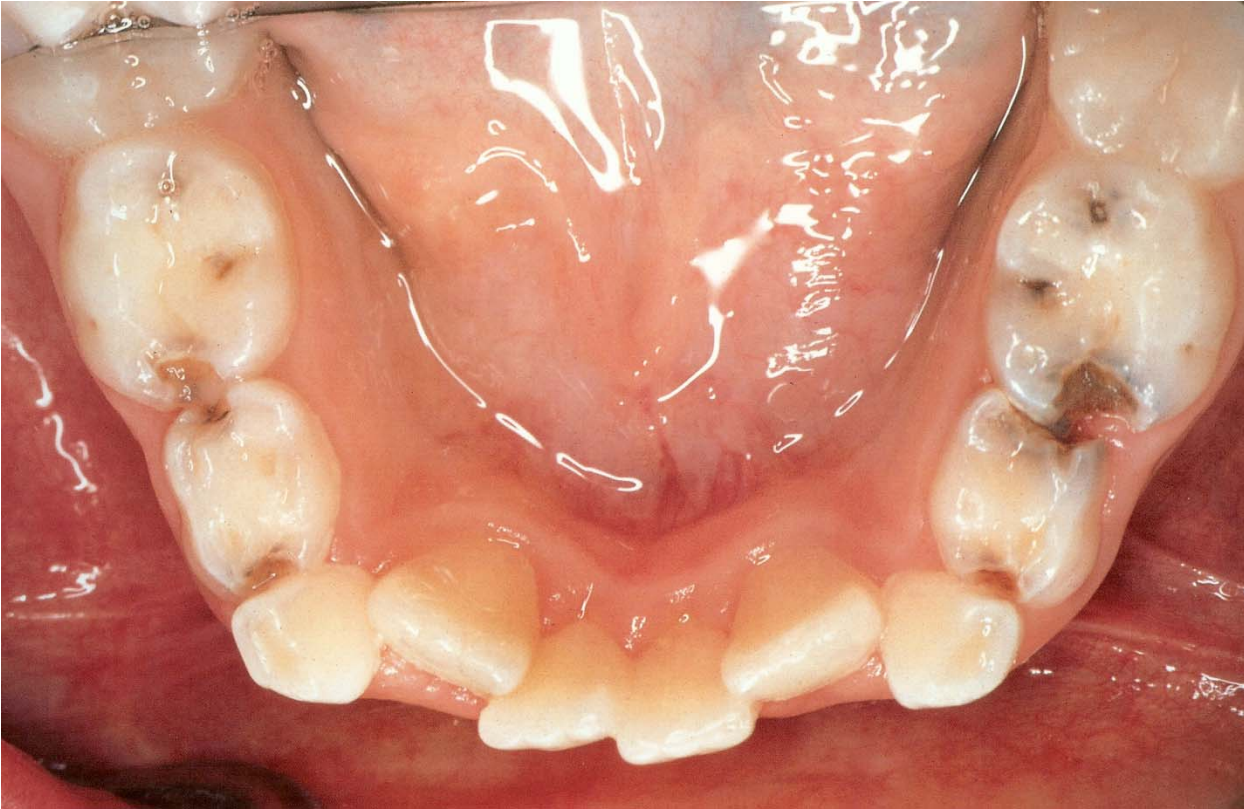
Talking



Dudley talking.

PLAQUE And BLEEDING GUMS





CAVITIES TOOTH DECAY



PLAQUE CAUSES BAD BREATH



AFTER BREAKFAST

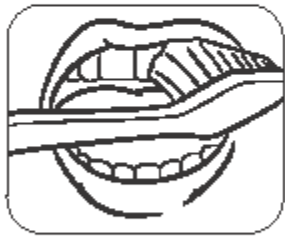




BEFORE GOING TO BED



How to Brush



- Place the toothbrush at a 45-degree angle to the gums.



- Move the brush back and forth gently in short strokes.



- Brush the outer surfaces, the inside surfaces and the chewing surfaces of all teeth.



- To clean the inside surface of the front teeth, tilt the brush vertically and make several up-and-down strokes.

- Brush your tongue to remove bacteria and keep your breath fresh.



© 2005 American Dental Association. All rights reserved. Educators and dental professionals are permitted to reproduce and use this activity sheet solely in printed form. Any other use, duplication or distribution of this activity sheet by any other party requires the prior written approval of the American Dental Association.

ORAL HYGIENE BASIC BRUSHING

Proper brushing is recommended twice a day to remove food particles, debris, and plaque. Children need caregivers to brush their teeth when they are very young. By age six or seven, children may be able to brush independently, but continue to supervise and encourage your child. Children learn behavior and habits from the adults in their lives, so parents should be good role models and take care of their own teeth. The following technique is suggested by the American Dental Association.

Proper Brushing Technique:

- Upper Teeth – Point the bristles up toward the gums at a 45° angle and move the brush in small circles or short strokes. Brush each area with 5 to 10 strokes.
- Lower Teeth – Point the bristles down toward the gums and wiggle the brush back and forth or in small circles. Brush each area with 5 to 10 strokes.
- For the inside surface of the teeth, use the “toe” of the brush with gentle motions.
- Chewing Surfaces – Brush the chewing surfaces back and forth with a scrubbing motion.
- Use only a pea-sized amount of fluoridated toothpaste. For children under age two, fluoridated toothpaste is not recommended because they may swallow significant amounts.
- Brush your tongue to freshen breath and remove bacteria.
- Toothbrushes need to be replaced every three to four months because the bristles wear out.

ALL BRUSHING IS DONE GENTLY!

BE SURE TO USE A TOOTHBRUSH THAT HAS SOFT BRISTLES AND IS THE PROPER SIZE TO FIT YOUR MOUTH.

Powered Toothbrushes:

There are many electric and mechanical toothbrushes on the market. These devices usually offer toothbrush heads with oscillating or rotating actions. Powered toothbrushes may be more effective for some people in reducing plaque.

The novelty of a powered brush may appeal to children. Many of these toothbrushes have two-minute timers that result in longer brushing times. Also, people with limited dexterity many find a powered brush is easier to use than a manual brush.

MOST IMPORTANTLY, WITH ALL BRUSHING, IS TO BRUSH FOR AT LEAST TWO MINUTES, TWICE A DAY, AND TO BRUSH ALL OF YOUR TEETH.

Keeping Our Teeth Strong and Healthy (Advanced)

Grade Level: K-2

Lesson Two: Oral Health

Lesson Time: 20-30 minutes

Lesson Objectives: After completion of this lesson the students should be able to: name the two most common dental diseases, identify plaque or biofilm as the leading cause of dental diseases, describe the three layers of a tooth, name ways fluoride is obtained, recognize the American Dental Association (ADA) Seal of Approval, describe how sealants are used to protect our teeth, understand the importance of brushing twice a day.

Presentation Needs: Visuals: Plaque + Sugar = Acid, Acid + Tooth = Decay, Decay Reaching the Pulp, Tooth Decay, Gingivitis, Three Layers of a Tooth, A Strong Tooth, Sources of Fluoride, ADA Seal of Approval, Toothbrush Bristle and Fissure, Tooth without Sealant and Tooth with Sealant, Tooth Decay, Gingivitis, Toothbrushes with Pea-Sized Amount of Toothpaste, Mouth Model and Large Toothbrush, Brushing Instructions.

Words: TOOTH DECAY, CAVITIES, GUM DISEASE, GINGIVITIS, PLAQUE, BIOFILM, SUGAR, ACID, FLUORIDE, SEALANT.

Suggested Activities: Foam Tooth Model, Pearly Whites Dental Health Game,

<http://www.colgate.com/app/BrightSmilesBrightFutures/US/EN/HomePage.cvsp> (Colgate Bright Smiles, Bright Futures); Activity Sheets

Discussion Starters with Activities:

1. Using display words to reveal the answers, ask students to name the two most common dental diseases. Tooth decay (CAVITIES) and Gum Disease (GINGIVITIS). Explain that the leading cause of both diseases is plaque or biofilm, a sticky film of bacteria that forms on teeth daily. Show visuals of Tooth Decay and Gingivitis.
2. Using the words PLAQUE, BIOFILM, SUGAR, and ACID, explain that when we eat a sugary food it combines with plaque. The plaque and sugar together cause a type of acid to form in the mouth. This acid attacks the outer layer of the tooth (enamel) and makes a hole in the tooth. We call this hole a cavity. Explain that another word for a cavity is tooth decay. Use visuals of PLAQUE + SUGAR = ACID and ACID + TOOTH = DECAY.

Explain the process of decay. The acid formed from plaque and sugar causes a cavity in the tooth enamel. If the cavity is left untreated it gets bigger and deeper. It then goes into the dentin. If still untreated, it goes into the pulp and can cause a toothache. The decay can eventually cause tooth loss.

3. Display a visual that shows the Three Layers of a Tooth. Name and describe those three layers in simple terms (Enamel, Dentin, Pulp). Enamel is the hardest substance in the body and is the outer layer of a tooth. Dentin is the softer middle layer underneath the enamel. The pulp, located in the center of the tooth, has nerves and blood vessels.

4. Display the word FLUORIDE and picture of A Strong Tooth. Explain fluoride is a mineral that makes the tooth enamel harder (stronger) and able to fight the acid that causes decay. Use pictures of Different Sources of Fluoride to explain the ways that fluoride may be obtained (applied at the dental office, some drinking water, mouth rinse, and toothpaste). Display a visual of the ADA Seal of Approval.
5. Display the word SEALANT. Explain that a dental sealant is a plastic material usually applied to the chewing surface of the back teeth, premolars and molars. The sealant acts as a barrier, protecting enamel from plaque and acids. Explain that our toothbrush bristles cannot reach the entire groove of the tooth to remove the bacteria. Sealants are used to protect our teeth from tooth decay (display a visual of Toothbrush Bristle and Fissure).
6. Explain that because sealants coat the pits, grooves and fissures of teeth, the teeth are less likely to collect plaque on the chewing surfaces. This is called preventive dentistry because it helps prevent tooth decay. Display a visual of TOOTH WITHOUT SEALANT and TOOTH WITH SEALANT.
7. Ask the students if they know what a molar is? The 6-year molars begin erupting (coming in) when we are about 6-8 years old. There are 4 molars, 2 on top and 2 on bottom which will erupt behind the baby teeth. Ask students to feel for the molars with their tongue. The 6-year molar, or 1st molar, is the most common tooth to get a sealant.
8. An adult should always help children when fluoride is being used. Only a pea-sized amount of toothpaste should be placed on the toothbrush. Fluoride is a great benefit in small amounts but can be harmful if too much is used.
9. Advise students to brush twice each day -- morning and night. Demonstrate proper brushing with a Mouth Model and Large Toothbrush.

TOOTH DECAY

CAVITIES

GUM DISEASE

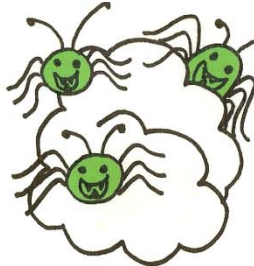

GINGIVITIS


PLAQUE

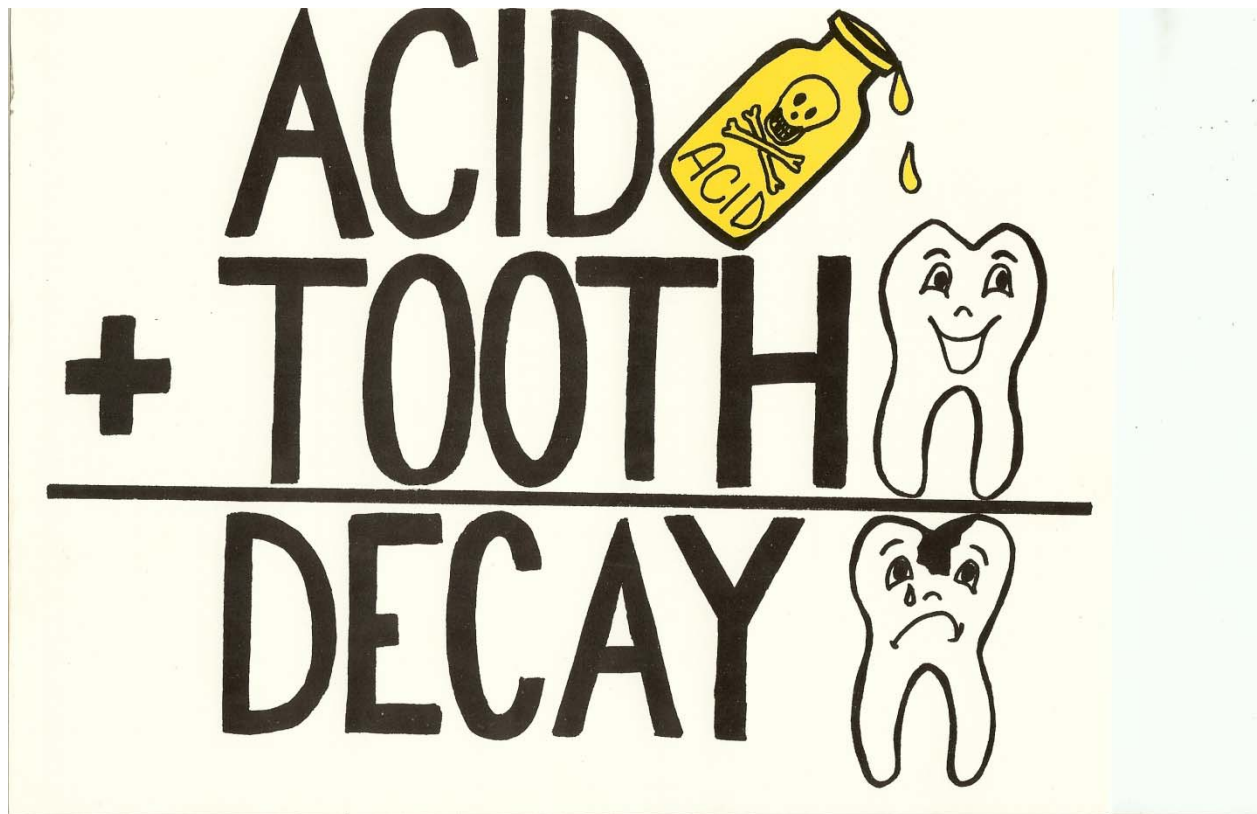
BIOFILM

SUGAR

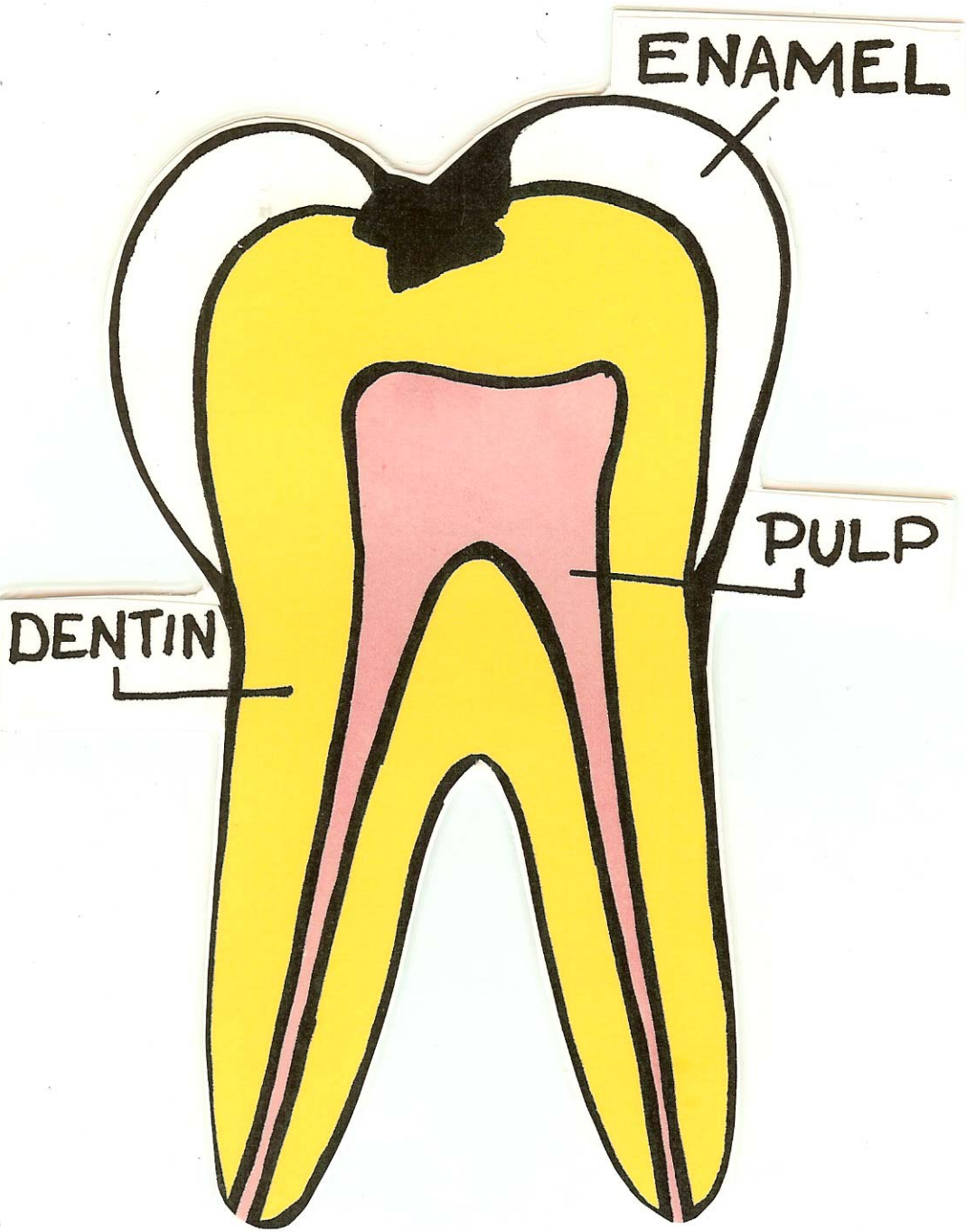
ACID

PLAQUE 
+ SUGAR 

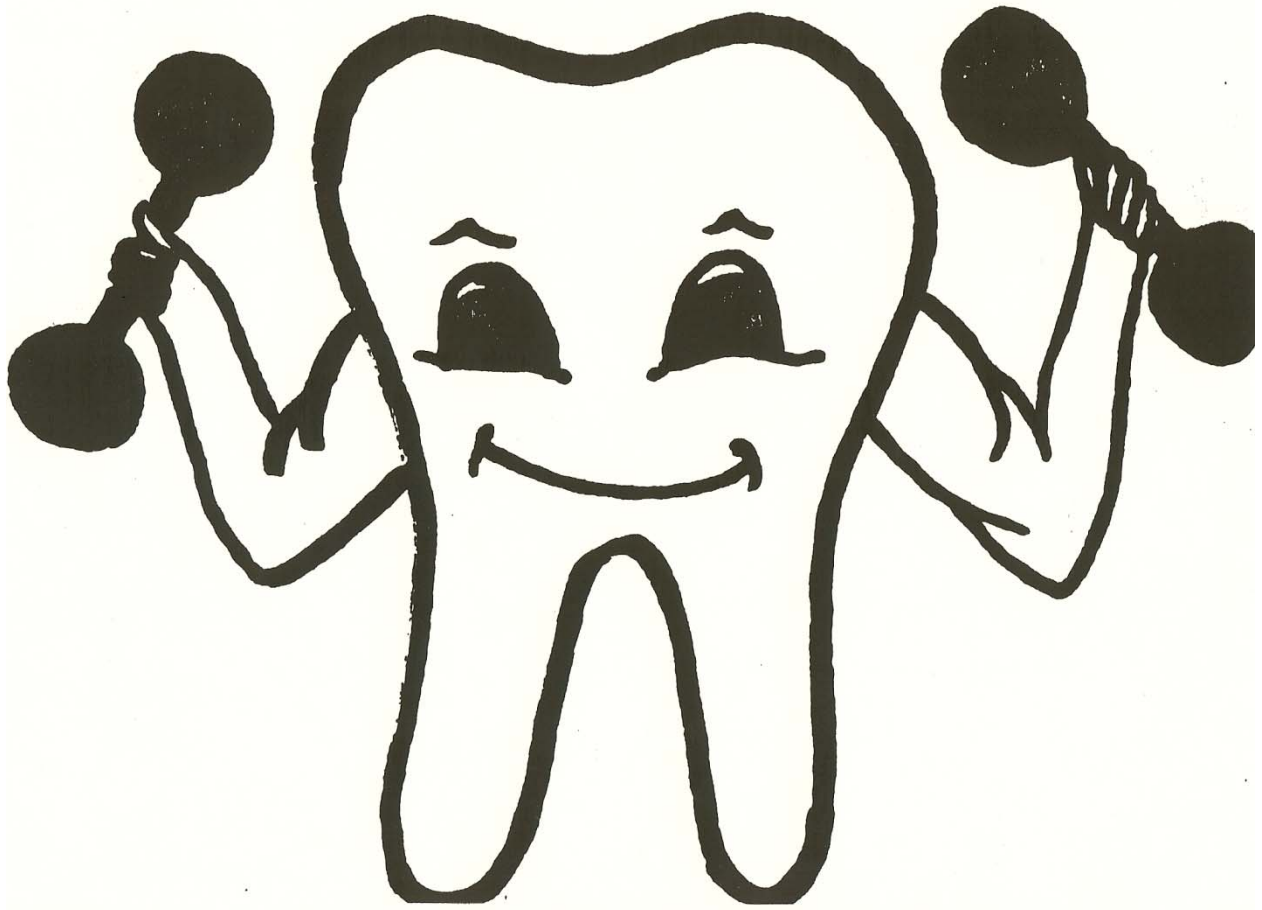
ACID 



**THREE LAYERS OF A
TOOTH
(WITH SMALL CAVITY)**



FLUORIDE



**PROTECTS OUR TEETH
AND MAKES THEM
STRONG**



Toothpastes

Mouth Rinses



Water

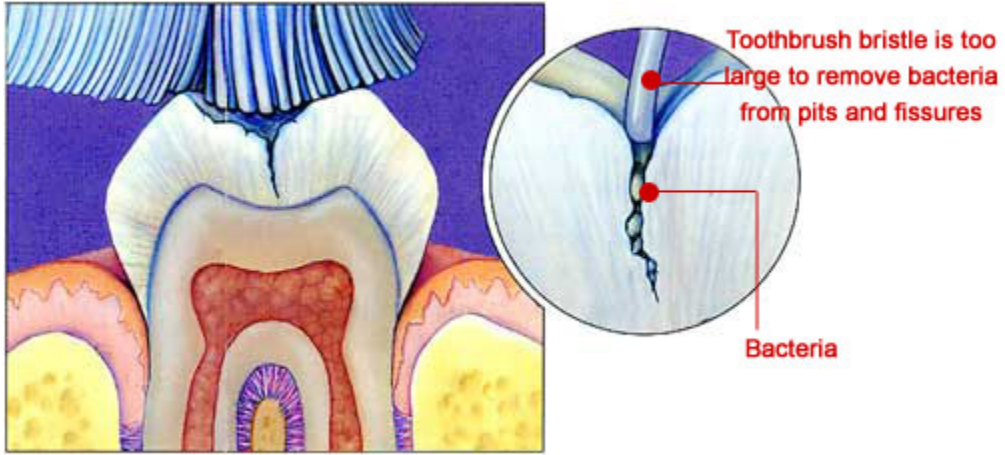


Applied at Dental Office
(Varnish and Gels)

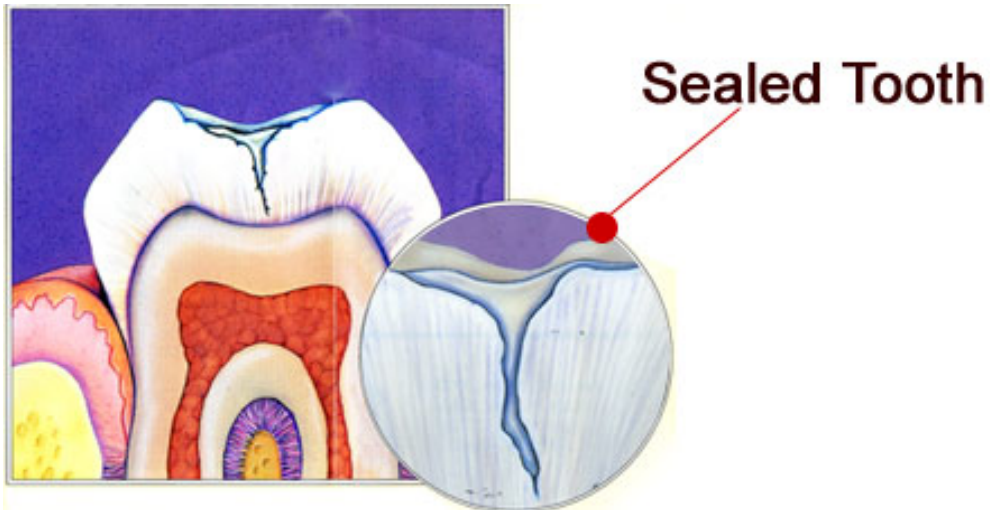
DIFFERENT SOURCES OF *FLUORIDE*

FLUORIDE VARNISH BEING APPLIED IN THE DENTAL OFFICE



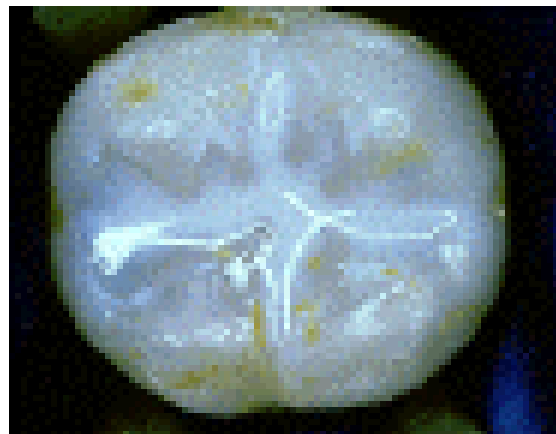


SEALANT

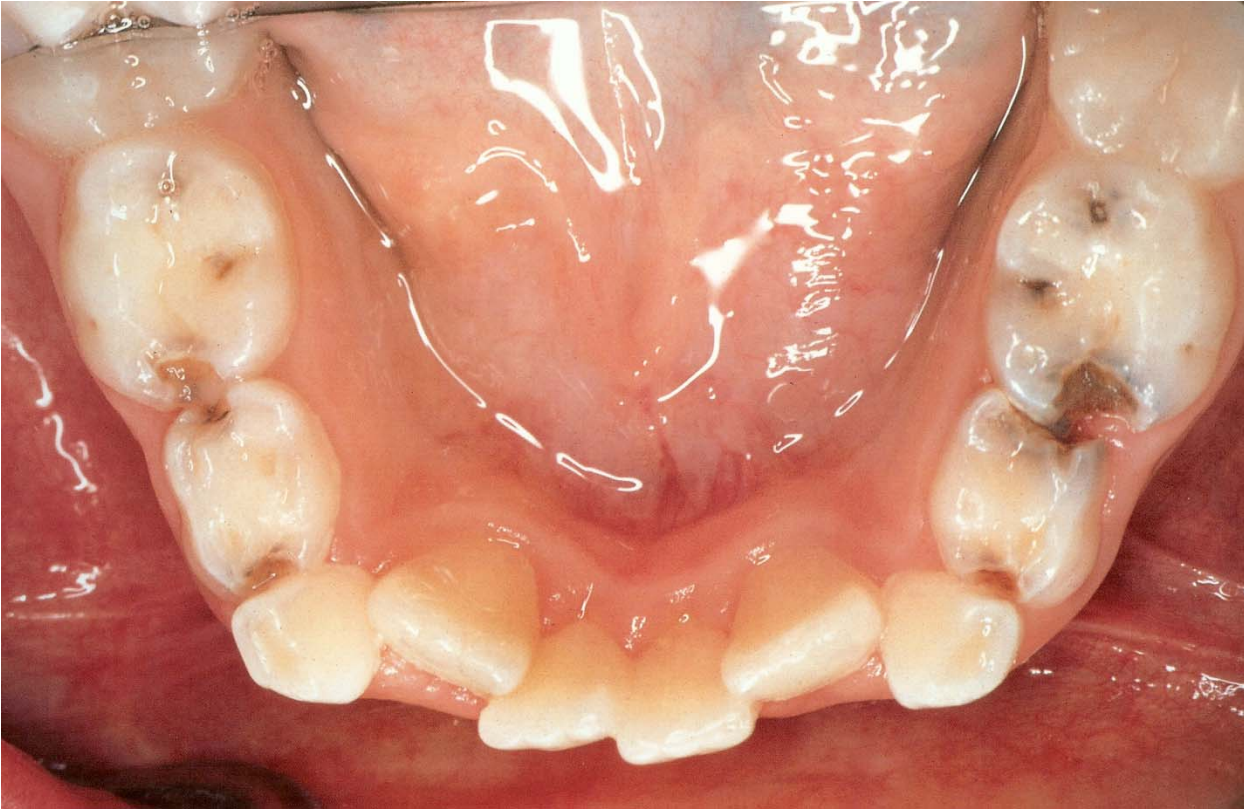




TOOTH WITHOUT SEALANT



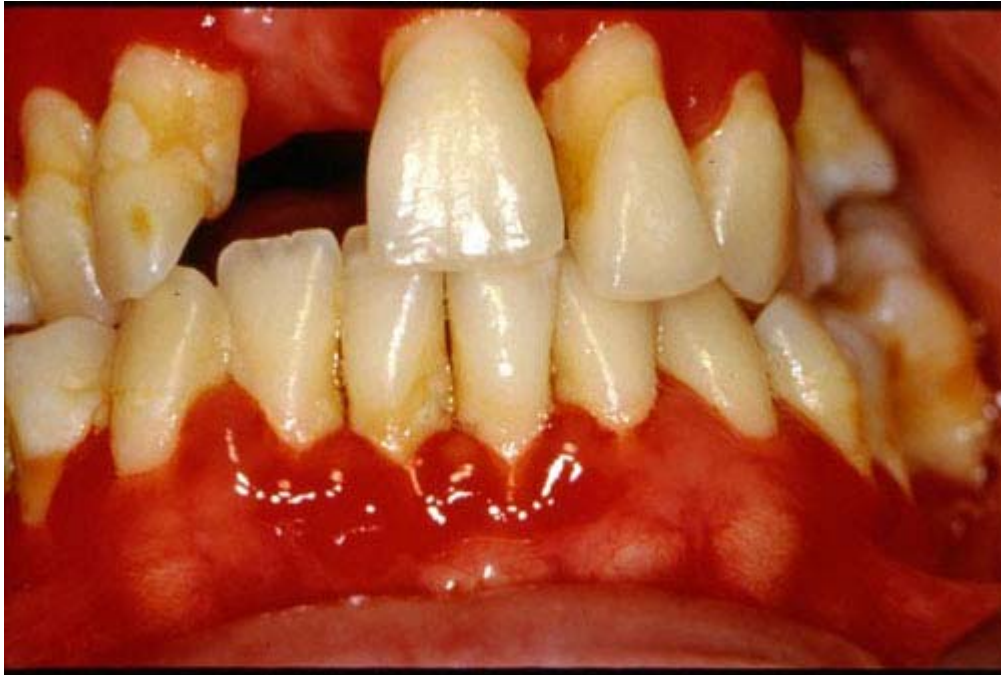
TOOTH WITH SEALANT



TOOTH DECAY

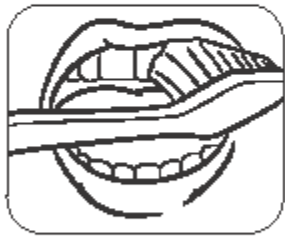


GINGIVITIS



A proper amount of toothpaste for a good brushing is shown on the toothbrushes to the left. There is much more than necessary on the other brush. Remember, toothbrush bristles clean dental plaque from the teeth. Toothpaste adds flavor, a sudsy action and a small amount of fluoride to help prevent tooth decay, but the real cleaning results from those bristles mechanically brushing away the sticky adherent plaque.

How to Brush



- Place the toothbrush at a 45-degree angle to the gums.



- Move the brush back and forth gently in short strokes.



- Brush the outer surfaces, the inside surfaces and the chewing surfaces of all teeth.



- To clean the inside surface of the front teeth, tilt the brush vertically and make several up-and-down strokes.

- Brush your tongue to remove bacteria and keep your breath fresh.



© 2005 American Dental Association. All rights reserved. Educators and dental professionals are permitted to reproduce and use this activity sheet solely in printed form. Any other use, duplication or distribution of this activity sheet by any other party requires the prior written approval of the American Dental Association.

ORAL HYGIENE BASIC BRUSHING

Proper brushing is recommended twice a day to remove food particles, debris, and plaque. Children need caregivers to brush their teeth when they are very young. By age six or seven, children may be able to brush independently, but continue to supervise and encourage your child. Children learn behavior and habits from the adults in their lives, so parents should be good role models and take care of their own teeth. The following technique is suggested by the American Dental Association.

Proper Brushing Technique:

- Upper Teeth – Point the bristles up toward the gums at a 45° angle and move the brush in small circles or short strokes. Brush each area with 5 to 10 strokes.
- Lower Teeth – Point the bristles down toward the gums and wiggle the brush back and forth or in small circles. Brush each area with 5 to 10 strokes.
- For the inside surface of the teeth, use the “toe” of the brush with gentle motions.
- Chewing Surfaces – Brush the chewing surfaces back and forth with a scrubbing motion.
- Use only a pea-sized amount of fluoridated toothpaste. For children under age two, fluoridated toothpaste is not recommended because they may swallow significant amounts.
- Brush your tongue to freshen breath and remove bacteria.
- Toothbrushes need to be replaced every three to four months because the bristles wear out.

ALL BRUSHING IS DONE GENTLY!

BE SURE TO USE A TOOTHBRUSH THAT HAS SOFT BRISTLES AND IS THE PROPER SIZE TO FIT YOUR MOUTH.

Powered Toothbrushes:

There are many electric and mechanical toothbrushes on the market. These devices usually offer toothbrush heads with oscillating or rotating actions. Powered toothbrushes may be more effective for some people in reducing plaque.

The novelty of a powered brush may appeal to children. Many of these toothbrushes have two-minute timers that result in longer brushing times. Also, people with limited dexterity many find a powered brush is easier to use than a manual brush.

MOST IMPORTANTLY, WITH ALL BRUSHING, IS TO BRUSH FOR AT LEAST TWO MINUTES, TWICE A DAY, AND TO BRUSH ALL OF YOUR TEETH.

Tooth Anatomy

Grade Level: K-2

Lesson Three: Oral Health

Lesson Time: 20-30 minutes

Lesson Objectives: After completion of this lesson the students should be able to: identify the crown and the root of a tooth, name the two sets of teeth people get during their lifetime, explain that baby teeth get loose and come out at different ages.

Presentation Needs: Visuals: Tooth that shows the CROWN and ROOT of the tooth, Tree with Roots, Primary (Baby) Teeth and Permanent (Adult) Teeth, Missing Teeth in Boy, Mouth Model and Large Toothbrush, Brushing Instructions.

Words: CROWN, ROOT.

Suggested Activities: Foam Tooth Model; Geena's Tremendous Tooth Adventure DVD (7-min); Pearly Whites Dental Health Game; Activity Sheets.

Discussion Starters with Activities:

1. Display words CROWN and ROOT and appropriate visuals to illustrate both the crown and root of a tooth. Explain our teeth have two main parts. The crown is the part we can see in our mouth above our gums. The root is the part we cannot see because it is hidden under the gums. The root holds the tooth into bone. Show the visual of the Tree with the Visible Roots. Explain the roots of a tooth hold it in place just like the roots of the tree hold it in the ground. Ask what would happen if the roots of a tree were gone (the tree would fall over). Ask what would happen if the roots of a tooth were gone (the tooth would fall out).
2. Tell students we get two sets of teeth during our lifetime. The first set is called the primary or baby teeth. These teeth come in when we are between the ages of six months and three years old. There are 20 primary teeth. The second set is called the permanent or adult teeth. This is the set of teeth you try to keep for the rest of your life. There are 32 permanent teeth.
3. Primary or baby teeth will get loose and be shed (come out) so the permanent teeth or adult teeth can erupt (come in) in their place. The permanent molars erupt behind the primary teeth. Ask students if they have lost a baby tooth or have a loose tooth.
4. Discuss with the class that the shedding of teeth and the eruption of permanent teeth will differ with each student. Some people lose their first tooth when they are five, some six and some seven or even eight years old. It really doesn't matter how old you are when you lose your first tooth because everyone loses their baby teeth and gets their adult teeth. When it happens is different for different people (use eruption charts for reference).
5. Instruct students that one of the first permanent teeth a person gets is called the six-year molar. There will be four permanent six-year molars erupt, with one on each side of the upper and lower arch. The permanent molars erupt behind the last baby teeth. Permanent teeth are your "forever teeth." These permanent teeth should be kept very clean because we need them to last a lifetime.

Instruct children to feel with their tongue for the last tooth in each corner of their mouth. The big tooth with mountains and valleys is the six-year molar. If six-year molars have not grown in yet, the gums where the teeth will erupt may be sore and swollen or it may just feel like a bump. There is no cause for concern, it just means the tooth is about to come in. For most children, the six-year molars erupt by the age of six or seven. Watch for the tooth to come in. Start keeping it clean as soon as it comes in by making sure the toothbrush gets all the way to the back of your mouth.

6. Demonstrate proper brushing technique using a Mouth Model and a Large Toothbrush. Introduce proper technique by telling students that one way to clean our teeth and gums is by brushing in round circles. Only a pea-sized amount of toothpaste is needed. Have children use actual toothbrushes or just pretend they have a toothbrush and make big circles in the air that become smaller and smaller circles.

Have students brush their teeth using proper brushing technique, or if students do not use brushes in the classroom have them pretend to brush. Remind them to brush two times a day, in the morning and at bedtime. Tell students that taking care of their teeth makes them a healthier person.

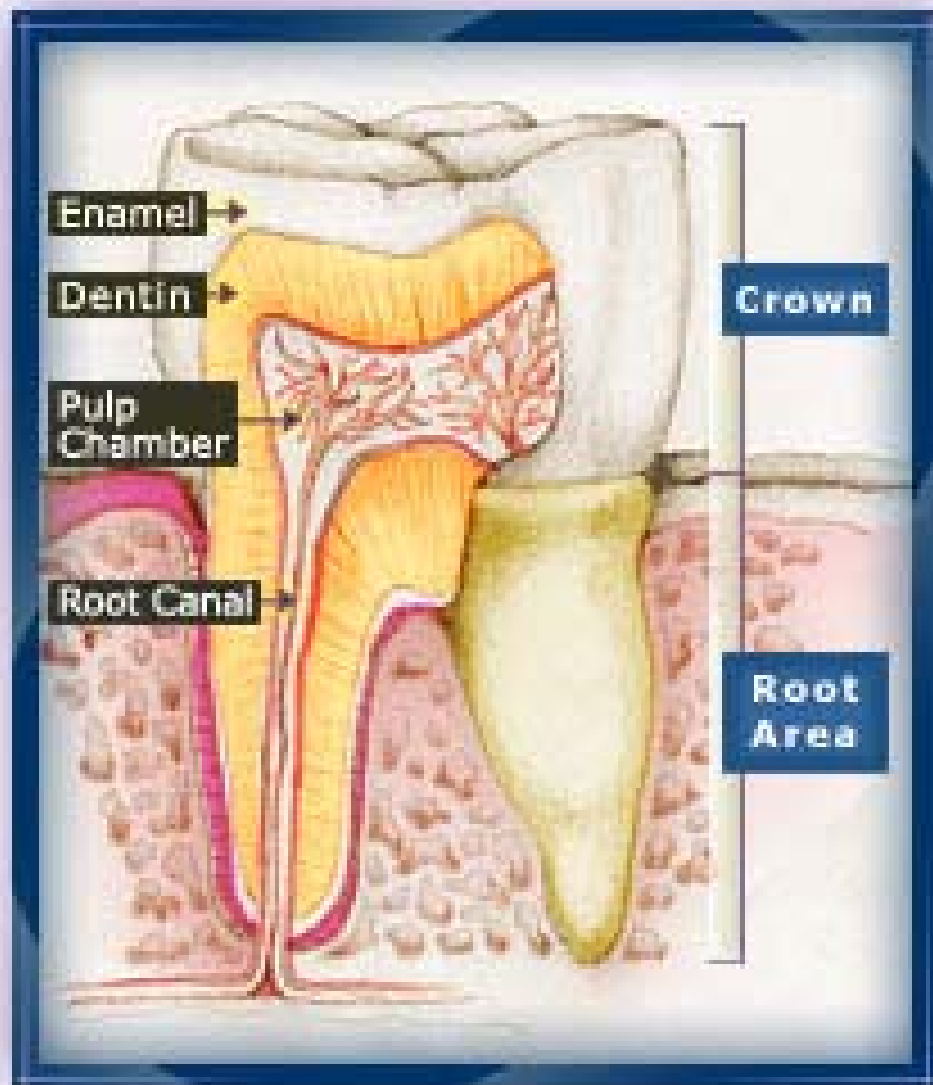
7. Demonstrate the proper way to rinse and carry a toothbrush by explaining anything that goes into your mouth is supposed to be clean. We need to be careful not to touch the brush part of the toothbrush to anything or you will get germs on it. Explain when rinsing a toothbrush, either at school or at home, you should never put it under the water with anyone else's toothbrush.

Tell students that a toothbrush should always be carried in the hand by the handle. For safety reasons, it should never be carried in the mouth.

CROWN

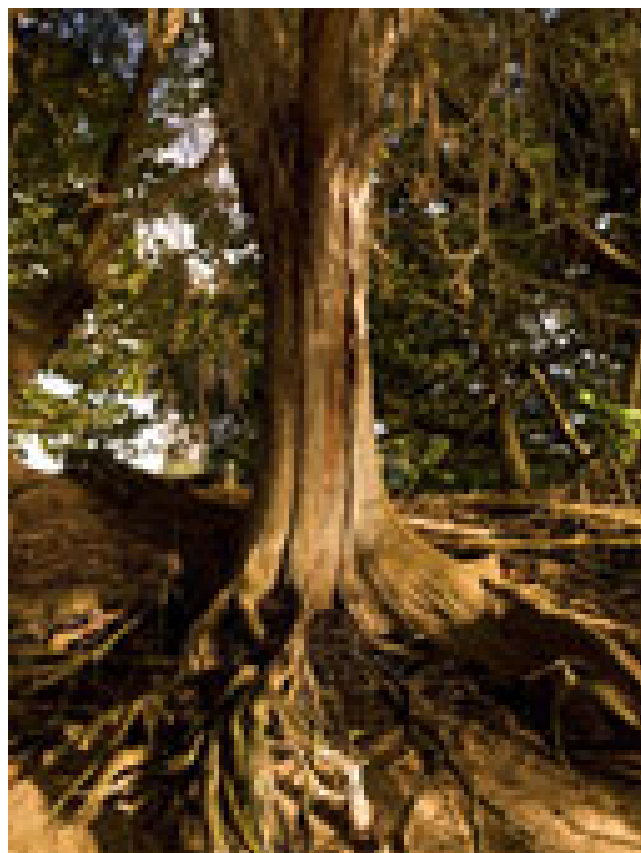
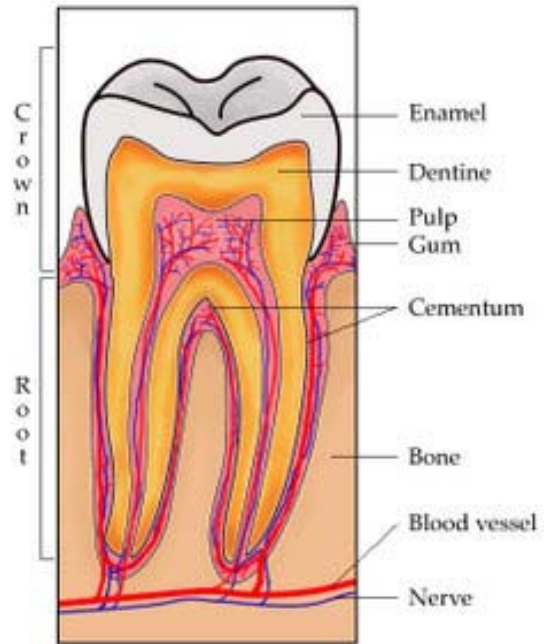
ROOT

The CROWN is the part of the tooth we can see in our mouth above our gums.



The ROOT is the part of our teeth we cannot see because it is hidden under the gums.

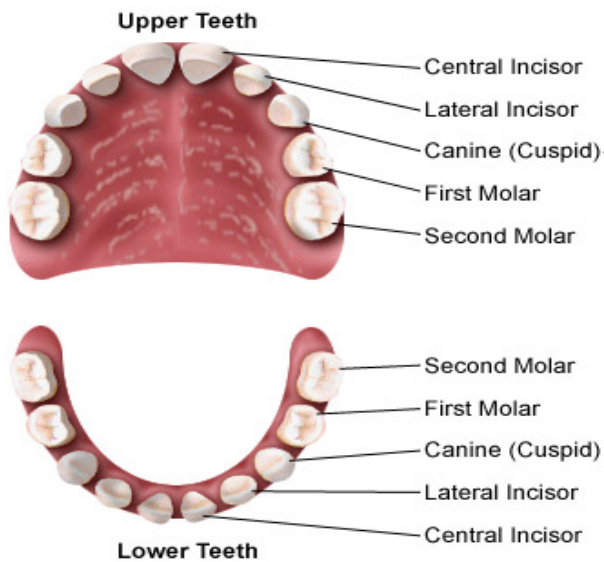




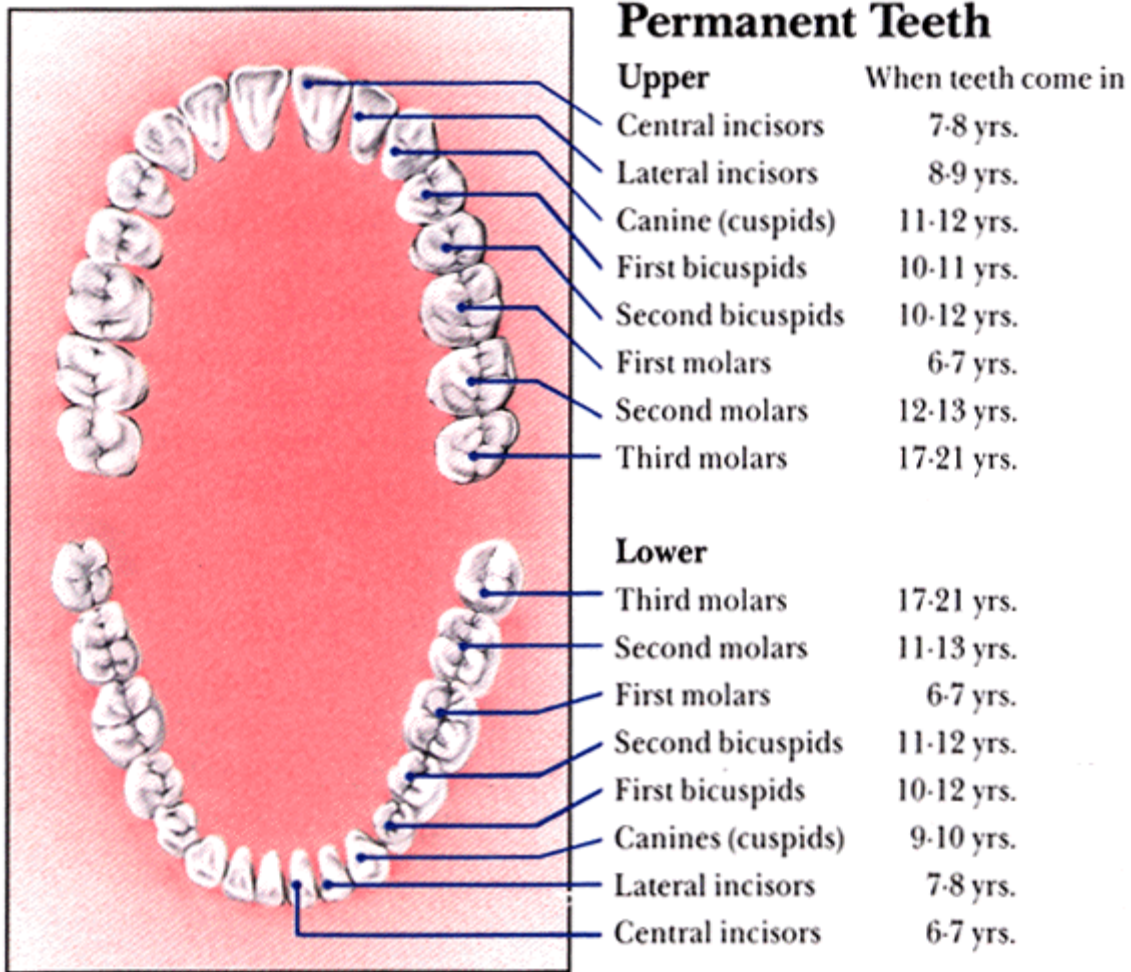
PRIMARY (BABY) TEETH

PRIMARY TOOTH DEVELOPMENT		
Upper Teeth	When tooth emerges	When tooth falls out
Central incisor	8 to 12 months	6 to 7 years
Lateral incisor	9 to 13 months	7 to 8 years
Canine (cuspid)	16 to 22 months	10 to 12 years
First molar	13 to 19 months	9 to 11 years
Second molar	25 to 33 months	10 to 12 years
Lower Teeth		
Second molar	23 to 31 months	10 to 12 years
First molar	14 to 18 months	9 to 11 years
Canine (cuspid)	17 to 23 months	9 to 12 years
Lateral incisor	10 to 16 months	7 to 8 years
Central incisor	6 to 10 months	6 to 7 years

Baby Teeth



PERMANENT (ADULT) TEETH





mifhing

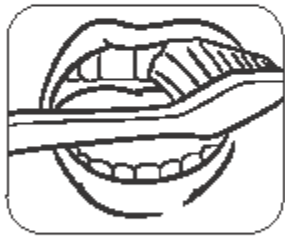
my

feeth

Toothless Grin

September 2005

How to Brush



- Place the toothbrush at a 45-degree angle to the gums.



- Move the brush back and forth gently in short strokes.



- Brush the outer surfaces, the inside surfaces and the chewing surfaces of all teeth.



- To clean the inside surface of the front teeth, tilt the brush vertically and make several up-and-down strokes.

- Brush your tongue to remove bacteria and keep your breath fresh.



© 2005 American Dental Association. All rights reserved. Educators and dental professionals are permitted to reproduce and use this activity sheet solely in printed form. Any other use, duplication or distribution of this activity sheet by any other party requires the prior written approval of the American Dental Association.

ORAL HYGIENE BASIC BRUSHING

Proper brushing is recommended twice a day to remove food particles, debris, and plaque. Children need caregivers to brush their teeth when they are very young. By age six or seven, children may be able to brush independently, but continue to supervise and encourage your child. Children learn behavior and habits from the adults in their lives, so parents should be good role models and take care of their own teeth. The following technique is suggested by the American Dental Association.

Proper Brushing Technique:

- Upper Teeth – Point the bristles up toward the gums at a 45° angle and move the brush in small circles or short strokes. Brush each area with 5 to 10 strokes.
- Lower Teeth – Point the bristles down toward the gums and wiggle the brush back and forth or in small circles. Brush each area with 5 to 10 strokes.
- For the inside surface of the teeth, use the “toe” of the brush with gentle motions.
- Chewing Surfaces – Brush the chewing surfaces back and forth with a scrubbing motion.
- Use only a pea-sized amount of fluoridated toothpaste. For children under age two, fluoridated toothpaste is not recommended because they may swallow significant amounts.
- Brush your tongue to freshen breath and remove bacteria.
- Toothbrushes need to be replaced every three to four months because the bristles wear out.

ALL BRUSHING IS DONE GENTLY!

BE SURE TO USE A TOOTHBRUSH THAT HAS SOFT BRISTLES AND IS THE PROPER SIZE TO FIT YOUR MOUTH.

Powered Toothbrushes:

There are many electric and mechanical toothbrushes on the market. These devices usually offer toothbrush heads with oscillating or rotating actions. Powered toothbrushes may be more effective for some people in reducing plaque.

The novelty of a powered brush may appeal to children. Many of these toothbrushes have two-minute timers that result in longer brushing times. Also, people with limited dexterity many find a powered brush is easier to use than a manual brush.

MOST IMPORTANTLY, WITH ALL BRUSHING, IS TO BRUSH FOR AT LEAST TWO MINUTES, TWICE A DAY, AND TO BRUSH ALL OF YOUR TEETH.

Healthy Foods for a Healthy Mouth (Basic)

Grade Level: K-2

Lesson One: Nutrition

Lesson Time: 20-30 minutes

Lesson Objectives: After completion of this lesson the students should be able to: explain the role of sugar in tooth decay, describe the difference between sugary and non-sugary foods, identify fluoride and how it helps teeth.

Presentation Needs: Visuals: Plaque + Sugar = Acid, Brushing Morning and Night, Happy Tooth and Sad Tooth, Assorted Food Pictures or Models, Sugary Drinks, Strong Tooth Protected by Fluoride, Different Sources of Fluoride, ADA Seal of Approval, Toothbrushes with Pea-Sized Amount of Toothpaste, Mouth Model and Large Toothbrush, Brushing Instructions.

Suggested Activities: The Gross, Disgusting and Totally Cool Mouth Book; Ready-Set-Brush Book; <http://www.mypyramid.gov> (United States Department of Agriculture); Activity Sheets.

Discussion Starters with Activities:

1. Using visual of PLAQUE + SUGAR = ACID, explain that when plaque and sugar mix together they make an acid. Sugar alone does not make a cavity in a tooth. But, when sugar gets together with plaque, the acid formed can make a hole in the tooth which is called a cavity. Although most of us eat sugar, it is best if we eat sugar with meals and not snack on sugary foods or drinks throughout the day. Remind students of the importance of brushing twice a day, in the morning and at bedtime. Show visuals of Brushing Morning and Night.
2. Using food models or visuals have students decide which foods might mix with plaque to promote cavities or tooth decay. Display Happy Tooth and Sad Tooth visuals on the board. Tell students we will put the non-sugary foods on the side of the board with the Happy Tooth and we will put the sugary foods on the side of the board with the Sad Tooth. Using appropriate food visuals, display each food and ask the class which side of the board it should go on. A variation of this activity is to let each child place the foods on the appropriate side of the board. Although all foods mix with plaque, children should be aware that sugary foods and drinks are more likely to cause cavities.
3. Display visual of a Tooth Protected by Fluoride. Describe fluoride as a mineral that helps make our teeth strong so that we are less likely to get cavities in them. Fluoride is like a vitamin for our teeth.
4. Inform students there are different ways to get fluoride such as in some drinking water, some toothpaste, at the dental office, and in a fluoride mouth rinse. Show a visual of Different Sources of Fluoride. Look for the ADA Seal of Approval on the box, tube, or bottle of toothpastes and mouth rinses. Show the visual of the ADA Seal of Approval. Emphasize we want to use fluoride because it makes our teeth harder and stronger.

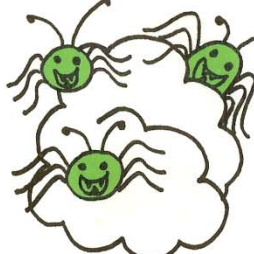

An adult should always help children when fluoride is being used. Only a pea-sized amount of toothpaste should be placed on the toothbrush. Fluoride is a great benefit in small amounts but can be harmful if too much is used.


5. Demonstrate proper brushing technique using a Mouth Model and a Large Toothbrush. Introduce proper technique by telling students that one way to clean our teeth and gums is by brushing in round circles. Only a pea-sized amount of toothpaste is needed. Have children use actual toothbrushes or just pretend they have a toothbrush and make big circles in the air that become smaller and smaller circles.

Have students brush their teeth using proper brushing technique, or if students do not use brushes in the classroom have them pretend to brush. Remind them to brush two times a day, in the morning and at bedtime. Tell students that taking care of their teeth makes them a healthier person.

6. Demonstrate the proper way to rinse and carry a toothbrush by explaining anything that goes into your mouth is supposed to be clean. We need to be careful not to touch the brush part of the toothbrush to anything or you will get germs on it. Explain when rinsing a toothbrush, either at school or at home, you should never put it under the water with anyone else's toothbrush.

Tell students that a toothbrush should always be carried in the hand by the handle. For safety reasons, it should never be carried in the mouth.

PLAQUE 
+ SUGAR 

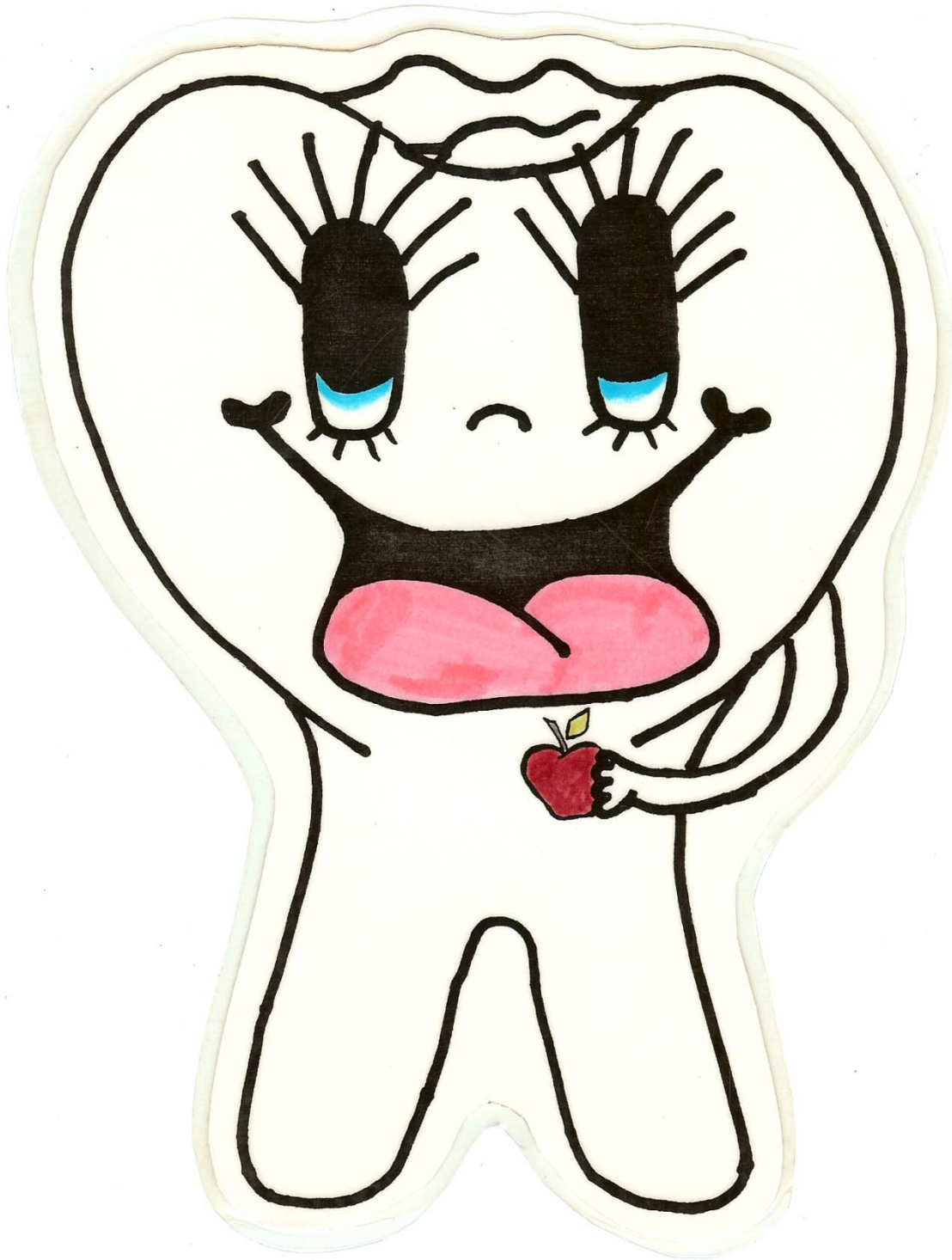
ACID 



Brush Your Teeth Every Morning



**BRUSH YOUR TEETH EVERY NIGHT
BEFORE BEDTIME**







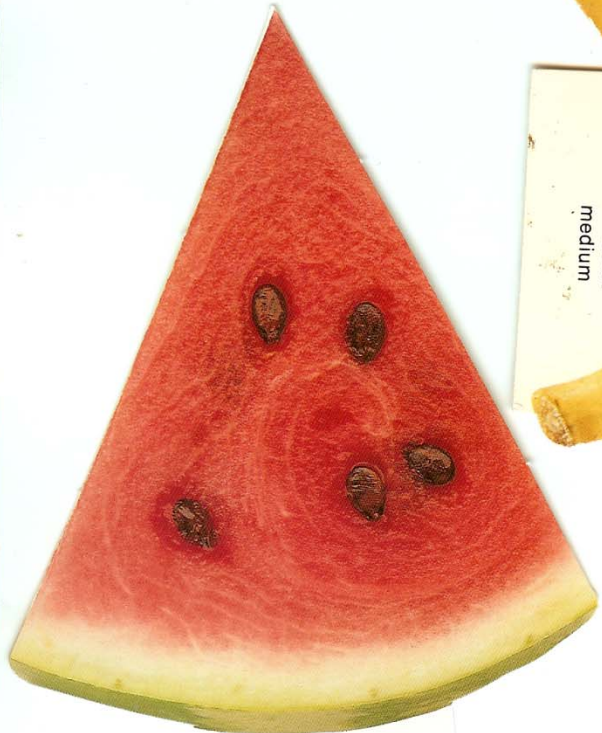
PEANUTS
¼ cup



SWISS CHEESE
1 ounce



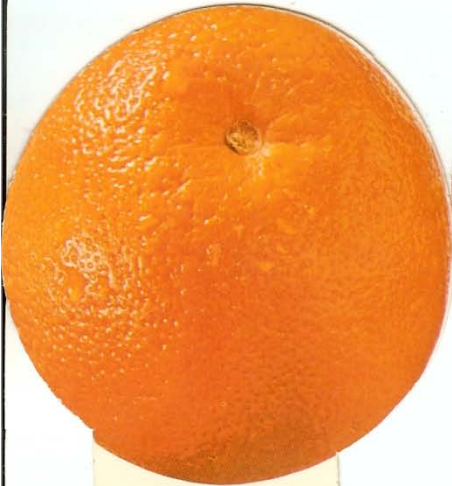
BANANA
medium



WATERMELON
½ cup



APPLE
1 medium



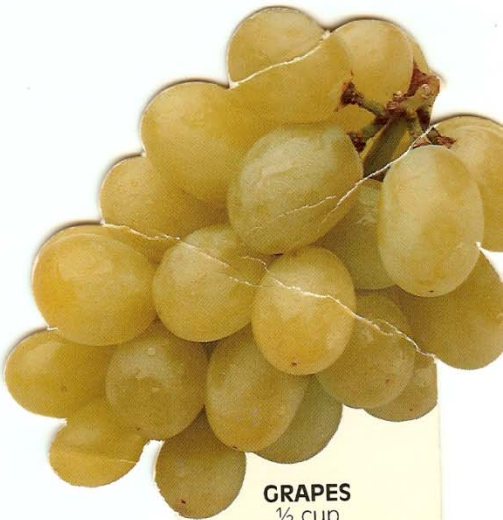
ORANGE



PRETZELS
1 ounce



POPCORN
1 cup



GRAPES
½ cup





BROWNIE
1 brownie



POTATO CHIPS
10 chips



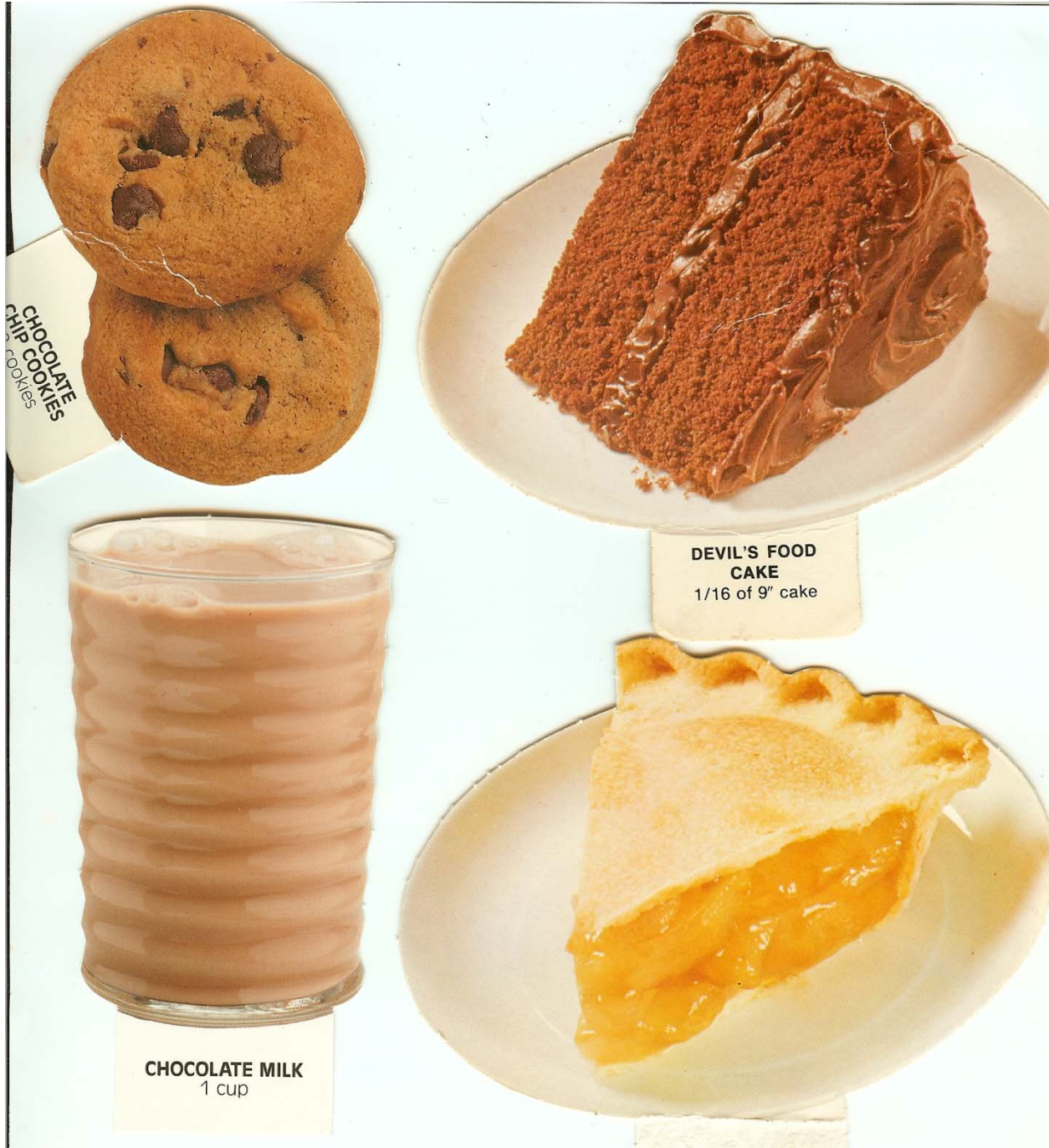
COOKIES
3 small, (with nuts, raisins, or both)

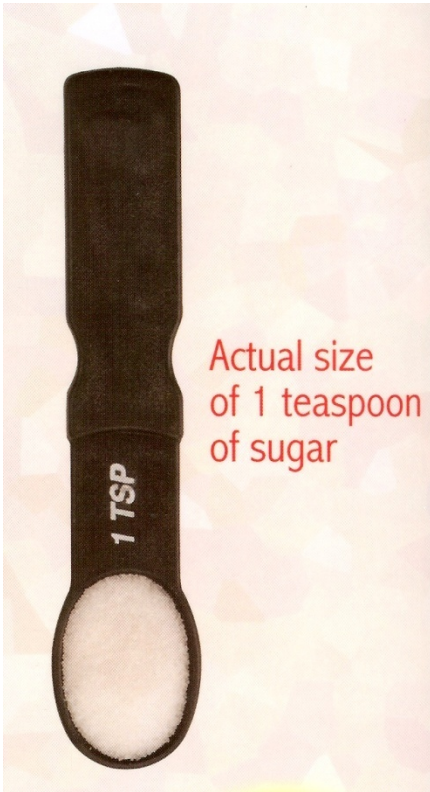


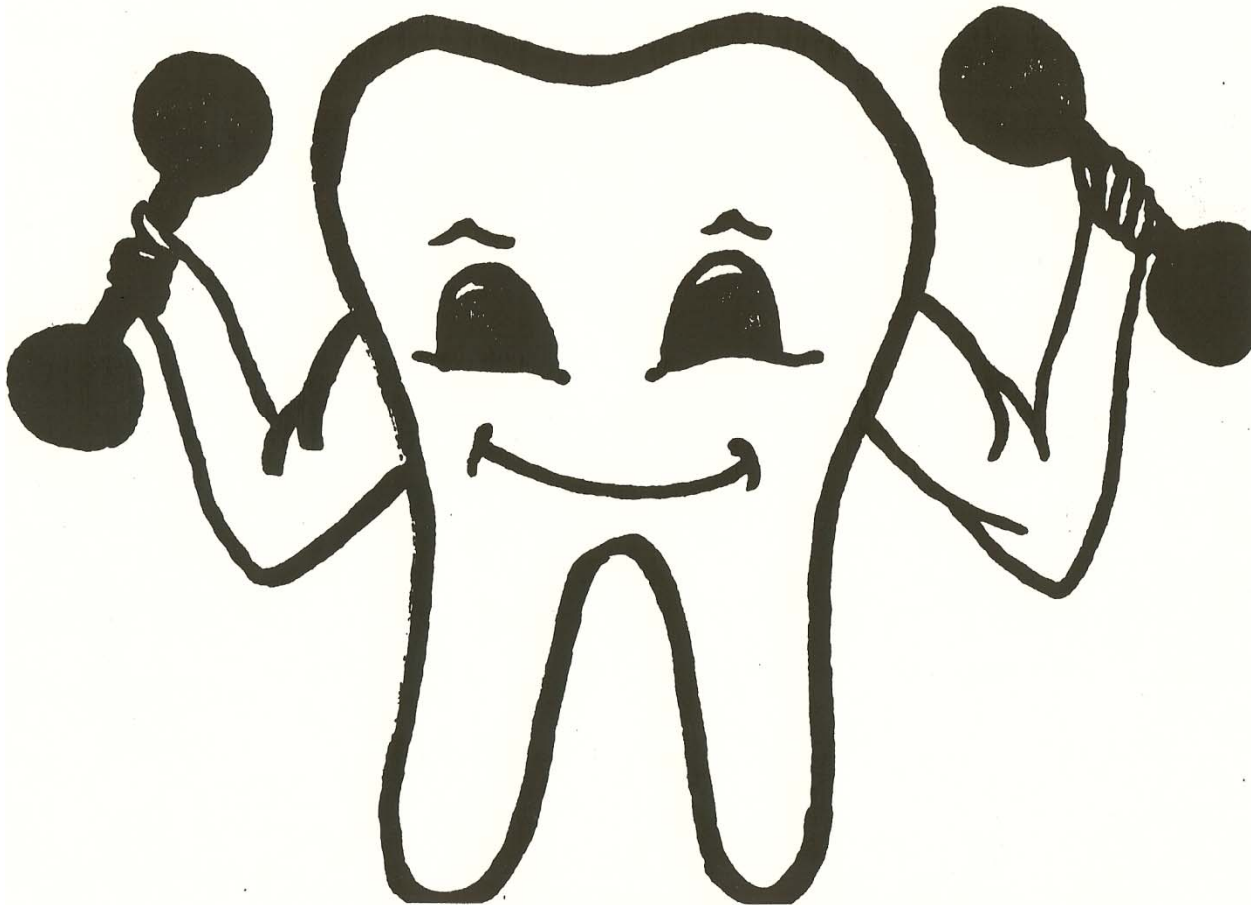
ICE CREAM
 $\frac{1}{2}$ cup



DOUGHNUT
1 doughnut







**FLUORIDE PROTECTS OUR TEETH
AND MAKES THEM STRONG**



Toothpastes



Mouth Rinses



Water



Applied at Dental Office
(Varnish and Gels)

DIFFERENT SOURCES OF *FLUORIDE*

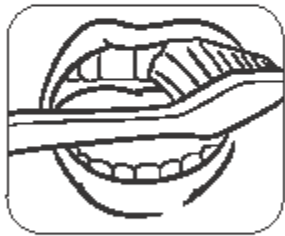




A proper amount of toothpaste for a good brushing is shown on the toothbrushes to the left. There is much more than necessary on the other brush. Remember, toothbrush bristles clean dental plaque from the teeth. Toothpaste adds flavor, a sudsy action and a small amount of fluoride to help prevent tooth decay, but the real cleaning results from those bristles mechanically brushing away the sticky adherent plaque.

A PEA-SIZED AMOUNT OF TOOTHPASTE IS JUST RIGHT

How to Brush



- Place the toothbrush at a 45-degree angle to the gums.



- Move the brush back and forth gently in short strokes.



- Brush the outer surfaces, the inside surfaces and the chewing surfaces of all teeth.



- To clean the inside surface of the front teeth, tilt the brush vertically and make several up-and-down strokes.

- Brush your tongue to remove bacteria and keep your breath fresh.



© 2005 American Dental Association. All rights reserved. Educators and dental professionals are permitted to reproduce and use this activity sheet solely in printed form. Any other use, duplication or distribution of this activity sheet by any other party requires the prior written approval of the American Dental Association.

ORAL HYGIENE BASIC BRUSHING

Proper brushing is recommended twice a day to remove food particles, debris, and plaque. Children need caregivers to brush their teeth when they are very young. By age six or seven, children may be able to brush independently, but continue to supervise and encourage your child. Children learn behavior and habits from the adults in their lives, so parents should be good role models and take care of their own teeth. The following technique is suggested by the American Dental Association.

Proper Brushing Technique:

- Upper Teeth – Point the bristles up toward the gums at a 45° angle and move the brush in small circles or short strokes. Brush each area with 5 to 10 strokes.
- Lower Teeth – Point the bristles down toward the gums and wiggle the brush back and forth or in small circles. Brush each area with 5 to 10 strokes.
- For the inside surface of the teeth, use the “toe” of the brush with gentle motions.
- Chewing Surfaces – Brush the chewing surfaces back and forth with a scrubbing motion.
- Use only a pea-sized amount of fluoridated toothpaste. For children under age two, fluoridated toothpaste is not recommended because they may swallow significant amounts.
- Brush your tongue to freshen breath and remove bacteria.
- Toothbrushes need to be replaced every three to four months because the bristles wear out.

ALL BRUSHING IS DONE GENTLY!

BE SURE TO USE A TOOTHBRUSH THAT HAS SOFT BRISTLES AND IS THE PROPER SIZE TO FIT YOUR MOUTH.

Powered Toothbrushes:

There are many electric and mechanical toothbrushes on the market. These devices usually offer toothbrush heads with oscillating or rotating actions. Powered toothbrushes may be more effective for some people in reducing plaque.

The novelty of a powered brush may appeal to children. Many of these toothbrushes have two-minute timers that result in longer brushing times. Also, people with limited dexterity many find a powered brush is easier to use than a manual brush.

MOST IMPORTANTLY, WITH ALL BRUSHING, IS TO BRUSH FOR AT LEAST TWO MINUTES, TWICE A DAY, AND TO BRUSH ALL OF YOUR TEETH.

Healthy Food for a Healthy Mouth (Advanced)

Grade Level: K-2

Lesson Two: Nutrition

Lesson Time: 20-30 minutes

Lesson Objectives: After completion of this lesson the student will be able to: identify food groups using the food guide pyramid, name foods from each of the food groups on the food guide pyramid, explain why some of the layers on the food guide pyramid are wider, explain the meaning of the figure walking up the side of the pyramid, identify the role of plaque and sugar in tooth decay, state the benefits of fluoride and name its sources.

Presentation Needs: Visuals: Food Guide Pyramid, Foods, Enjoy Moving, Children Exercising, Plaque + Sugar = Acid, Acid + Tooth = Decay, Sugary Drinks, Fluoride, ADA Seal of Approval, Toothbrushes with Pea-Sized Amount of Toothpaste, Mouth Model and Large Toothbrush, Brushing Instructions.

Suggested Activities: Pearly White Dental Health Game; <http://www.mypyramid.gov/> (United States Department of Agriculture); Activity Sheets.

Discussion Starters with Activities:

1. Display The Food Guide Pyramid. Identify the layers of the pyramid: Grains, Vegetables, Fruits, Oils, Milk, Meat & Beans.
2. Have students name foods that go in each respective food group. Place food visuals on the board under each group. Example: **Grains** (Bread, Cereal, Rice, Pasta); **Vegetables** (Potatoes, Carrots, Peas, Broccoli); **Fruits** (Apples, Oranges, Bananas, Pineapple); **Oils** (Margarine, Mayonnaise, Cooking Oil, Salad Dressing); **Milk** (Milk, Yogurt, Cheese, Cottage Cheese); **Meat & Beans** (Fish, Eggs, Peanuts, Chicken). Advise the students there are five major food groups, plus oil.
3. Explain the reason some layers of the pyramid are wider at the bottom than others. The wider layers represent food groups from which we should eat the most foods. Remind students it is healthy to eat from all of the food groups each day. Oils are not a food group, but you need some for good health. We shouldn't eat many foods from the Oils (5-6 teaspoons daily), but they do contain essential fatty acids and are a valuable source of Vitamin E.
4. Display the Enjoy Moving pyramid. Discuss the importance of daily exercise. The person climbing the stairs on the side of the pyramid reminds us to do something active every day like running, walking the dog, playing, swimming, biking, or climbing stairs. Your body counts on you to be active to strengthen your bones and heart, and build muscles.
5. Ask a student to define the word plaque as a sticky layer of germs that forms on everyone's teeth daily whether or not we eat anything. Remind them that plaque is a biofilm – a community of germs.

Explain when plaque and sugar combine, they make an acid on the teeth. Show a visual of PLAQUE + SUGAR = ACID. The acid formed from the combination of these two things can cause a hole in the tooth called a cavity. Show a visual of ACID + TOOTH = DECAY. Another word for a cavity is decay.

6. Display the visual FLUORIDE. A mineral that can be thought of as a vitamin for the teeth is called fluoride. Fluoride helps teeth become stronger so they do not get cavities as easily.

There are different ways to get fluoride such as in some drinking water, some toothpaste, at the dental office, and in fluoride mouth rinses. Show a visual of Different Sources of Fluoride. Look for the ADA Seal of Approval on the box, tube, or bottle of toothpastes and mouth rinses. Show the visual of the ADA Seal of Approval. Emphasize we want fluoride because it makes our teeth harder and stronger.

An adult should always help children when fluoride is being used. A pea-sized amount of toothpaste should be placed on the toothbrush. Fluoride is great in small amounts, but can be harmful if you swallow too much.

7. Demonstrate proper brushing technique using a Mouth Model and a Large Toothbrush. Introduce proper technique by telling students that one way to clean our teeth and gums is by brushing in round circles. Only a pea-sized amount of toothpaste is needed. Have children use actual toothbrushes or just pretend they have a toothbrush and make big circles in the air that become smaller and smaller circles.

Have students brush their teeth using proper brushing technique, or if students do not use brushes in the classroom have them pretend to brush. Remind them to brush two times a day, in the morning and at bedtime. Tell students that taking care of their teeth makes them a healthier person.

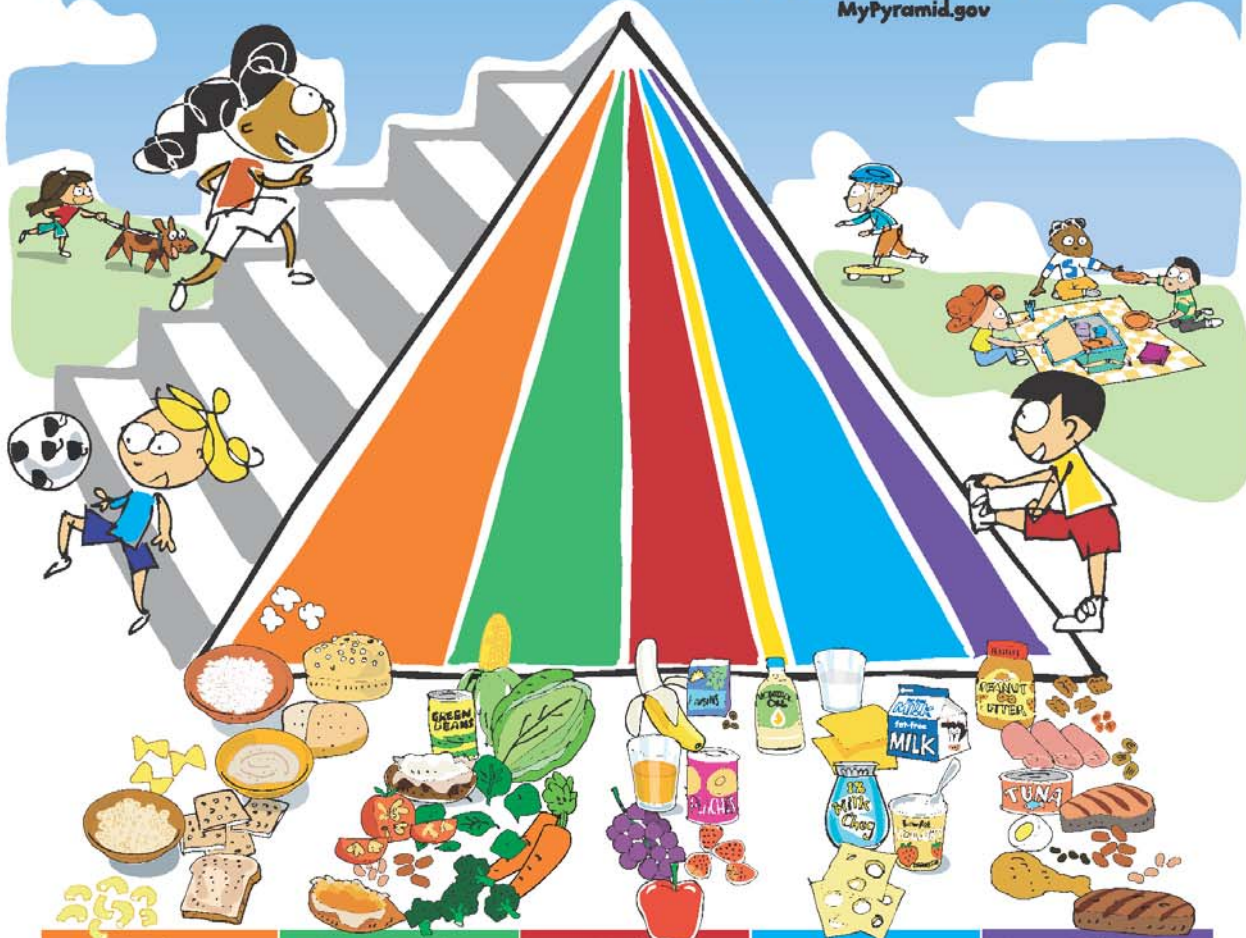
8. Demonstrate the proper way to rinse and carry a toothbrush by explaining anything that goes into your mouth is supposed to be clean. We need to be careful not to touch the brush part of the toothbrush to anything or you will get germs on it. Explain when rinsing a toothbrush, either at school or at home, you should never put it under the water with anyone else's toothbrush.

Tell students that a toothbrush should always be carried in the hand by the handle. For safety reasons, it should never be carried in the mouth.

MyPyramid For Kids

Eat Right. Exercise Have Fun.

MyPyramid.gov



Grains Make half your grains whole	Vegetables Vary your veggies	Fruits Focus on fruits	Milk Get your calcium-rich foods	Meat & Beans Go lean with protein
<p>Start smart with breakfast. Look for whole-grain cereals.</p> <p>Just because bread is brown doesn't mean it's whole-grain. Search the ingredients list to make sure the first word is "whole" (like "whole wheat").</p>	<p>Color your plate with all kinds of great-tasting veggies.</p> <p>What's green and orange and tastes good? Veggies! Go dark green with broccoli and spinach, or try orange ones like carrots and sweet potatoes.</p>	<p>Fruits are nature's treats – sweet and delicious.</p> <p>Go easy on juice and make sure it's 100%.</p>	<p>Move to the milk group to get your calcium. Calcium builds strong bones.</p> <p>Look at the carton or container to make sure your milk, yogurt, or cheese is lowfat or fat-free.</p>	<p>Eat lean or lowfat meat, chicken, turkey, and fish. Ask for it baked, broiled, or grilled – not fried.</p> <p>It's nutty, but true. Nuts, seeds, peas, and beans are all great sources of protein, too.</p>

For an 1,800-calorie diet, you need the amounts below from each food group. To find the amounts that are right for you, go to MyPyramid.gov.

Eat 6 oz. every day: at least half should be whole	Eat 2 1/2 cups every day	Eat 1 1/2 cups every day	Get 3 cups every day: for kids ages 2 to 8, it's 2 cups	Eat 5 oz. every day
---	--------------------------	--------------------------	--	---------------------

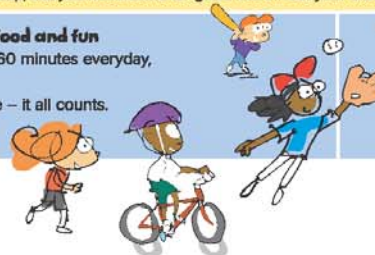
Oils Oils are not a food group, but you need some for good health. Get your oils from fish, nuts, and liquid oils such as corn oil, soybean oil, and canola oil.

Find your balance between food and fun

- Move more. Aim for at least 60 minutes everyday, or most days.
- Walk, dance, bike, rollerblade – it all counts. How great is that!

Fats and sugars – know your limits

- Get your fat facts and sugar smarts from the Nutrition Facts label.
- Limit solid fats as well as foods that contain them.
- Choose food and beverages low in added sugars and other caloric sweeteners.



USDA is an equal opportunity provider and employer.



The following information is from MyPyramid.gov. Visit this site for additional nutrition information and educational tools. There is nutritional advice for young and older children, for pregnant women, and for the general population. The site is interactive, with tools and printable educational materials.

The Food Groups consist of:

1. Grains:

Make half their grains whole!

Any food made from wheat, rice, oats, cornmeal, barley or another cereal grain is a grain product. Bread, pasta, oatmeal, breakfast cereals, tortillas, and rice are examples of grain products. **Choose whole grain or whole wheat products.**

2. Vegetables:

Vary the veggies!

Any vegetable or 100% vegetable juice counts as a member of the vegetable group. Vegetables may be raw or cooked; fresh, frozen, canned, or dried; and may be whole, cut-up, or mashed. **Eat more dark green and orange vegetables.**

3. Fruits:

Focus on fruits!

Any fruit or 100% fruit juice counts as part of the fruit group. Fruits may be fresh, canned, frozen, or dried, and may be whole, cut-up, or pureed. Enjoy a variety of fruit. **Limit juice to 6 ounces each day.**

4. Milk:

Serve calcium-rich foods!

All fluid milk products and many foods made from milk are considered part of this food group. Some commonly eaten choices are ice cream and pudding, cheese, and yogurt. **Choose reduced-fat, low-fat or fat-free products.**

5. Meat and Beans:

Go lean with protein!

All foods made from meat, poultry, fish, dry beans or peas, eggs, nuts, and seed are considered part of this group. Dry beans and peas are also part of the vegetable group. **Most meat choices should be lean.**

Note: Oils are not a food group, but you need some for good health. Get your oils from fish, nuts, and liquid oils such as corn oil, soybean oil, olive oil, and canola oil.

MyPyramid ^{For Kids}

Eat Right. Exercise Have Fun.
MyPyramid.gov

Grains
Make half your grains whole

Vegetables
Vary your veggies

Fruits
Focus on fruits

Milk
Get your calcium-rich foods

Meat & Beans
Go lean with protein

Oils Oils are not a food group, but you need some for good health. Get your oils from fish, nuts, and liquid oils such as corn oil, soybean oil, and canola oil.

★ Find your balance between food and fun ★ Fats and sugars — know your limits

MyPyramid.gov
EAT RIGHT. EXERCISE HAVE FUN.

USDA
U.S. Department of Agriculture
Food and Nutrition Service
September 2005
HHS-DAI

FEAM
Families Eat and Move Together
www.familieseatandmove.org

USDA is an equal opportunity provider and employer.

Importance of certain nutrients:

- Carbohydrate: Natural organic compounds including sugar, starch, and cellulose. Provides energy for all life processes and activities, especially the brain and nervous system.
- Dietary Fat: Dietary fats are essential for proper body function. They are important for brain development and blood clotting. Unsaturated fats are best, such as fish, olive oils and liquid vegetable oils. Fats have a lot of calories, almost twice as many as carbohydrates and proteins. Look at labels to avoid saturated fats, trans fats, and solid fats.
- Protein: An animal based nutrient found in meat, poultry, fish, eggs, and nuts. Soy is the only non-animal protein. Protein repairs cells needed for growth and development of children, adolescents, and pregnant women.
- Minerals: Inorganic substances that are necessary for vital chemical processes in the body. These substances are found in earth, soil, and water and are absorbed by plants. Humans and animals get minerals by eating plants. Examples of minerals are calcium, iron, iodine, and zinc.
- Vitamins: A nutrient that the body needs in small amounts to function and maintain health. Vitamins are found naturally in some foods or may be obtained by taking a dietary supplement. Also, vitamins can be added to food sources such as milk, juices, and cereals. These products are then referred to as “fortified.”

The following vitamins are especially good for oral health:

- Vitamin A: growth and development of teeth, gums, healthy skin and hair, and eyes. You can get Vitamin A by eating colorful fruits and vegetables, eggs, and milk. It can also be obtained by consuming fortified products or taking a vitamin supplement.
- Vitamin D: helps body utilize calcium and phosphorus necessary to build strong bones and teeth. Vitamin D is not found in many foods naturally. You can get Vitamin D with sunlight exposure, by consuming fortified products (often added to milk), or by taking a vitamin supplement.
- Vitamin C: promotes healthy teeth and gums and helps with wound healing. Vitamin C is found in many fruits and berries, such as oranges and strawberries. Vitamin C is often in orange juice. This vitamin should be ingested daily because it is water-soluble.

GRAINS



Bread



Rice



Pasta



Cereal



Oats



Pretzel



Tortilla



Cornbread

VEGETABLES AND FRUITS



Green Beans



Broccoli



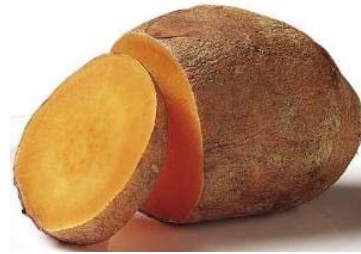
Peas



Carrots



Pumpkins



Sweet Potato



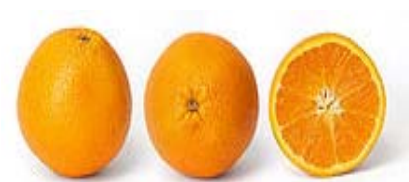
Apple



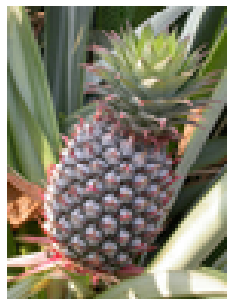
Blueberries



Bananas



Oranges



Pineapple



Grapes

MILK



Milk



Cheese



Ice Cream



COURTESY OF PHYSICIAN COMMITTEE FOR RESPONSIBLE MEDICINE / PHOTO BY JOHN KELLY

Pudding

MEAT and BEANS

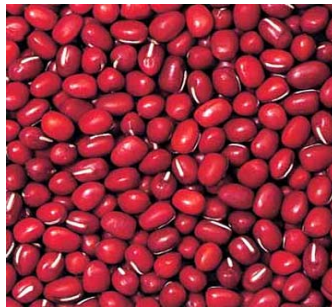
Steak



Hamburger



Eggs



Red Beans



Baked Beans



Fried Chicken



Nuts



Fish

Enjoy Moving

Be physically active every day*

Less

Sitting Around



Enough

Stretching and Building Your Muscles



More

Making Your Heart Work Harder



Plenty

Moving Whenever You Can



* Children and teens should be physically active for at least 60 minutes on most, preferably all, days of the week.




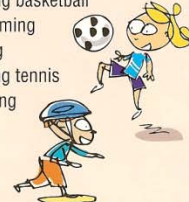
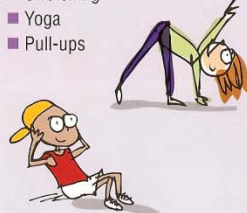

U.S. Department of Agriculture
Food and Nutrition Service
August 2009
FNS-403

USDA is an equal opportunity provider and employer.

Enjoy Moving

Be physically active every day

Children and teens should be physically active for at least 60 minutes on most, preferably all, days of the week.

Do Plenty	Do More	Do Enough	Do Less
<p>Moving Whenever You Can</p> <ul style="list-style-type: none"> ■ Walking the dog ■ Sweeping ■ Taking the stairs instead of the elevator ■ Playing outside ■ Vacuuming ■ Dusting ■ Riding a bike ■ Throwing a ball 	<p>Making Your Heart Work Harder</p> <ul style="list-style-type: none"> ■ Playing baseball or softball ■ Playing soccer ■ Jumping rope ■ Skateboarding ■ Gardening/Yard work ■ Running/Jogging ■ Playing basketball ■ Swimming ■ Hiking ■ Playing tennis ■ Dancing 	<p>Stretching and Building Your Muscles</p> <ul style="list-style-type: none"> ■ Sit-ups ■ Push-ups ■ Martial arts ■ Lifting free weights or strength training ■ Stretching ■ Yoga ■ Pull-ups 	<p>Sitting Around</p> <ul style="list-style-type: none"> ■ Playing on the computer ■ Watching television ■ Playing electronic games ■ Talking on the phone ■ Sitting still for hours 



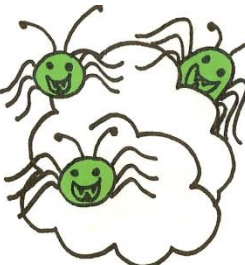

Find your balance between eating and physical activity.


Eating smart choices from every food group and being physically active work together for a healthier you!
For more information go to: MyPyramid.gov and teamnutrition.usda.gov.


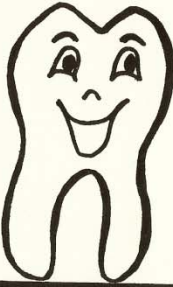


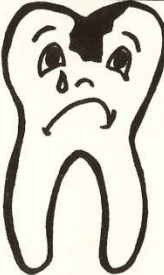
DAILY EXERCISE IS IMPORTANT FOR OUR HEALTH

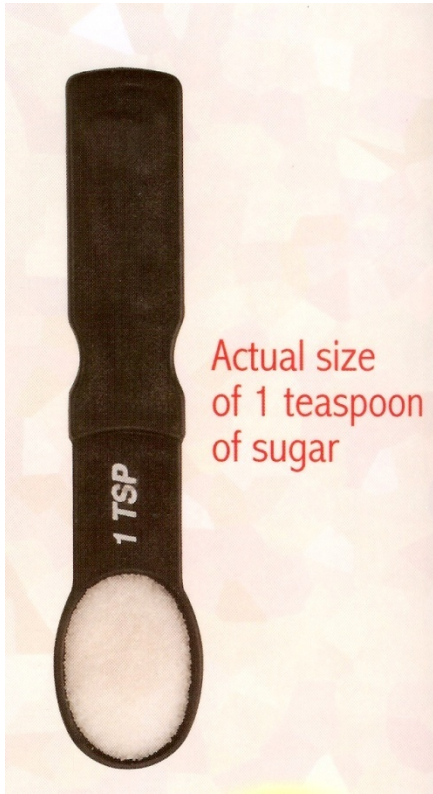


PLAQUE 
+ SUGAR 

ACID 

ACID 
+ TOOTH 

DECAY 



100% Orange Juice
16 oz
 Contains
12 teaspoons
 (48 grams) of sugar

Whole Chocolate Milk
16 oz
 Contains
12 teaspoons
 (48 grams) of sugar

Cola
12 oz
 Contains
9 1/2 teaspoons
 (39 grams) of sugar

Strawberry Fruit Smoothie
14 oz
 Contains
24 1/2 teaspoons
 (98 grams) of sugar

Slush
16 oz
 Contains
12 teaspoons
 (48 grams) of sugar

FLUORIDE

MAKES OUR

TEETH

STRONGER

DIFFERENT SOURCES OF *FLUORIDE*



Toothpastes



Mouth Rinses



Water



**Applied at Dental Office
(Varnish and Gels)**





A proper amount of toothpaste for a good brushing is shown on the toothbrushes to the left. There is much more than necessary on the other brush. Remember, toothbrush bristles clean dental plaque from the teeth. Toothpaste adds flavor, a sudsy action and a small amount of fluoride to help prevent tooth decay, but the real cleaning results from those bristles mechanically brushing away the sticky adherent plaque.

A PEA-SIZED AMOUNT OF TOOTHPASTE IS JUST RIGHT

How to Brush



- Place the toothbrush at a 45-degree angle to the gums.



- Move the brush back and forth gently in short strokes.



- Brush the outer surfaces, the inside surfaces and the chewing surfaces of all teeth.

- To clean the inside surface of the front teeth, tilt the brush vertically and make several up-and-down strokes.



- Brush your tongue to remove bacteria and keep your breath fresh.

ORAL HYGIENE BASIC BRUSHING

Proper brushing is recommended twice a day to remove food particles, debris, and plaque. Children need caregivers to brush their teeth when they are very young. By age six or seven, children may be able to brush independently, but continue to supervise and encourage your child. Children learn behavior and habits from the adults in their lives, so parents should be good role models and take care of their own teeth. The following technique is suggested by the American Dental Association.

Proper Brushing Technique:

- Upper Teeth – Point the bristles up toward the gums at a 45° angle and move the brush in small circles or short strokes. Brush each area with 5 to 10 strokes.
- Lower Teeth – Point the bristles down toward the gums and wiggle the brush back and forth or in small circles. Brush each area with 5 to 10 strokes.
- For the inside surface of the teeth, use the “toe” of the brush with gentle motions.
- Chewing Surfaces – Brush the chewing surfaces back and forth with a scrubbing motion.
- Use only a pea-sized amount of fluoridated toothpaste. For children under age two, fluoridated toothpaste is not recommended because they may swallow significant amounts.
- Brush your tongue to freshen breath and remove bacteria.
- Toothbrushes need to be replaced every three to four months because the bristles wear out.

ALL BRUSHING IS DONE GENTLY!

BE SURE TO USE A TOOTHBRUSH THAT HAS SOFT BRISTLES AND IS THE PROPER SIZE TO FIT YOUR MOUTH.

Powered Toothbrushes:

There are many electric and mechanical toothbrushes on the market. These devices usually offer toothbrush heads with oscillating or rotating actions. Powered toothbrushes may be more effective for some people in reducing plaque.

The novelty of a powered brush may appeal to children. Many of these toothbrushes have two-minute timers that result in longer brushing times. Also, people with limited dexterity may find a powered brush is easier to use than a manual brush.

MOST IMPORTANTLY, WITH ALL BRUSHING, IS TO BRUSH FOR AT LEAST TWO MINUTES, TWICE A DAY, AND TO BRUSH ALL OF YOUR TEETH.

Visiting The Dentist

Grade Level: K-2

Lesson One: Safety/Visit to the Dental Office

Lesson Time: 20-30 minutes

Lesson Objectives: After completion of this lesson the students should be able to: identify the role of the dentist and the dental helpers, explain why it is important to have a dental exam every year, demonstrate how to become a good dental patient.

Presentation Needs: Visuals: Dental office and staff, Primary Tooth Development, Mouth Model and Large Toothbrush, Brushing Instructions.

Suggested Activities: Geena's Tremendous Tooth Adventure DVD (7-min);

<http://science.education.nih.gov/supplements/nih2/oral-health/default.htm> (Open Wide and Trek Inside – Student Activities); <http://www.mouthpower.org/> (Mouthpower); Activity Sheets.

Optional: Items found in dental office, such as instruments, masks, gloves, patient napkin, x-rays, etc.

Discussion Starters with Activities:

1. Why do you think it is important to visit the dentist? A dentist will check inside your mouth and make sure your mouth and teeth are healthy and strong.
2. Who else do you think you might see at the dental office? Who works there? (Receptionist, dental assist, and dental hygienist)
The receptionist works at the desk and greets you when you come in. The dental assistant helps the dentist by getting the exam room ready and may take x-rays. The dental hygienist also helps the dentist and may clean your teeth with special cleaners (instruments).
3. If you have been to a dentist, what interesting things did you see? (Discuss the answers then show visual of dental office.) The special chair moves up and down so the dentist can reach you. The light helps your dentist see into your mouth. The dentist has little mirrors to look at the back of your teeth. A little hose sprays water and air into your mouth and a "super straw" helps suck the water from your mouth. The x-ray machine takes pictures of the insides of your teeth.
4. What do you think the dentist is looking for when looking into your mouth? Your dentist counts your teeth. Did you know that you should have 20 baby teeth in your mouth? Ten on top and ten on bottom. At about age 6 you start getting your adult (permanent) teeth. The dentist checks your teeth to make sure you are brushing properly. Eating and drinking healthy foods and brushing all of your teeth will protect your teeth from cavities. The dentist also checks your tongue and the inside of your mouth to make sure they are healthy.
5. Ask what a person can do to be a good dental patient (sit still, listen, be polite, be brave). Stress that it is their job at the dental office to be a good patient so that the

dentist can do his/her job. A dentist needs you to be a good patient and open wide in order to help you keep your teeth healthy.

6. Tell students that a dentist is a friendly doctor who wants you to have healthy, strong and shiny teeth. The dentist and staff will take care of broken teeth or teeth with cavities. Do any of you have dental fillings?
7. If possible, conduct a mock visit to the dentist. A student can volunteer to be a patient and the instructor can demonstrate what it's like to go to the dentist.
9. Demonstrate proper brushing technique using a Mouth Model and a Large Toothbrush. Introduce proper technique by telling students that one way to clean our teeth and gums is by brushing in round circles. Only a pea-sized amount of toothpaste is needed. Have children use actual toothbrushes or just pretend they have a toothbrush and make big circles in the air that become smaller and smaller circles.

Have students brush their teeth using proper brushing technique, or if students do not use brushes in the classroom have them pretend to brush. Remind them to brush two times a day, in the morning and at bedtime. Tell students that taking care of their teeth makes them a healthier person.

10. Demonstrate the proper way to rinse and carry a toothbrush by explaining anything that goes into your mouth is supposed to be clean. We need to be careful not to touch the brush part of the toothbrush to anything or you will get germs on it. Explain when rinsing a toothbrush, either at school or at home, you should never put it under the water with anyone else's toothbrush.

Tell students that a toothbrush should always be carried in the hand by the handle. For safety reasons, it should never be carried in the mouth.

THE DENTAL OFFICE



DENTAL EQUIPMENT AND INSTRUMENTS USED IN THE OFFICE



Dental Chairs and Light



Dental Apron



Mirror and Explorer

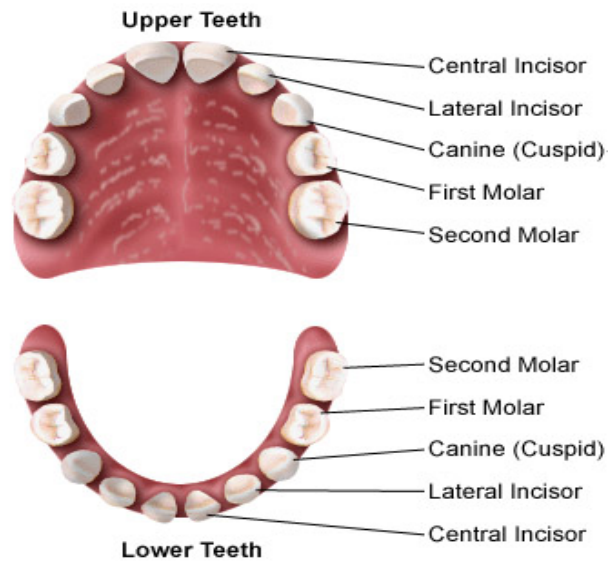


X-Ray Machine

PRIMARY (BABY) TEETH

PRIMARY TOOTH DEVELOPMENT		
Upper Teeth	When tooth emerges	When tooth falls out
Central incisor	8 to 12 months	6 to 7 years
Lateral incisor	9 to 13 months	7 to 8 years
Canine (cuspid)	16 to 22 months	10 to 12 years
First molar	13 to 19 months	9 to 11 years
Second molar	25 to 33 months	10 to 12 years
Lower Teeth		
Second molar	23 to 31 months	10 to 12 years
First molar	14 to 18 months	9 to 11 years
Canine (cuspid)	17 to 23 months	9 to 12 years
Lateral incisor	10 to 16 months	7 to 8 years
Central incisor	6 to 10 months	6 to 7 years

Baby Teeth



How to Brush



- Place the toothbrush at a 45-degree angle to the gums.



- Move the brush back and forth gently in short strokes.



- Brush the outer surfaces, the inside surfaces and the chewing surfaces of all teeth.



- To clean the inside surface of the front teeth, tilt the brush vertically and make several up-and-down strokes.



- Brush your tongue to remove bacteria and keep your breath fresh.

ORAL HYGIENE BASIC BRUSHING

Proper brushing is recommended twice a day to remove food particles, debris, and plaque. Children need caregivers to brush their teeth when they are very young. By age six or seven, children may be able to brush independently, but continue to supervise and encourage your child. Children learn behavior and habits from the adults in their lives, so parents should be good role models and take care of their own teeth. The following technique is suggested by the American Dental Association.

Proper Brushing Technique:

- Upper Teeth – Point the bristles up toward the gums at a 45° angle and move the brush in small circles or short strokes. Brush each area with 5 to 10 strokes.
- Lower Teeth – Point the bristles down toward the gums and wiggle the brush back and forth or in small circles. Brush each area with 5 to 10 strokes.
- For the inside surface of the teeth, use the “toe” of the brush with gentle motions.
- Chewing Surfaces – Brush the chewing surfaces back and forth with a scrubbing motion.
- Use only a pea-sized amount of fluoridated toothpaste. For children under age two, fluoridated toothpaste is not recommended because they may swallow significant amounts.
- Brush your tongue to freshen breath and remove bacteria.
- Toothbrushes need to be replaced every three to four months because the bristles wear out.

ALL BRUSHING IS DONE GENTLY!

BE SURE TO USE A TOOTHBRUSH THAT HAS SOFT BRISTLES AND IS THE PROPER SIZE TO FIT YOUR MOUTH.

Powered Toothbrushes:

There are many electric and mechanical toothbrushes on the market. These devices usually offer toothbrush heads with oscillating or rotating actions. Powered toothbrushes may be more effective for some people in reducing plaque.

The novelty of a powered brush may appeal to children. Many of these toothbrushes have two-minute timers that result in longer brushing times. Also, people with limited dexterity may find a powered brush is easier to use than a manual brush.

MOST IMPORTANTLY, WITH ALL BRUSHING, IS TO BRUSH FOR AT LEAST TWO MINUTES, TWICE A DAY, AND TO BRUSH ALL OF YOUR TEETH.

Protecting Our Teeth

Grade Level: K-2

Lesson Two: Safety/Visit to the Dental Office

Lesson Time: 20-30 minutes

Lesson Objectives: After completion of this lesson the student should be able to: name several behaviors which could be dangerous to the safety of our mouth, name several activities in which an oral injury could occur, explain the purpose of a mouth guard, name types of mouth guards and where they may be purchased, explain consequences of losing a permanent tooth, explain why space maintainers are used, advise what to do if a tooth is knocked out of the mouth, demonstrate proper brushing technique and the proper way to carry and to rinse a toothbrush.

Presentation Needs: Visuals: Examples How Oral Injury Can Occur, Harmful Habits, Tooth Injuries, Mouth guards and Space Maintainer, Mouth Model and Large Toothbrush, Brushing Instructions.

Suggested Activities: The Gross, Disgusting and Totally Cool Mouth Book; Pearly White Dental Health Game; <http://www.mouthpower.org/> (Mouthpower); Activity Sheets.

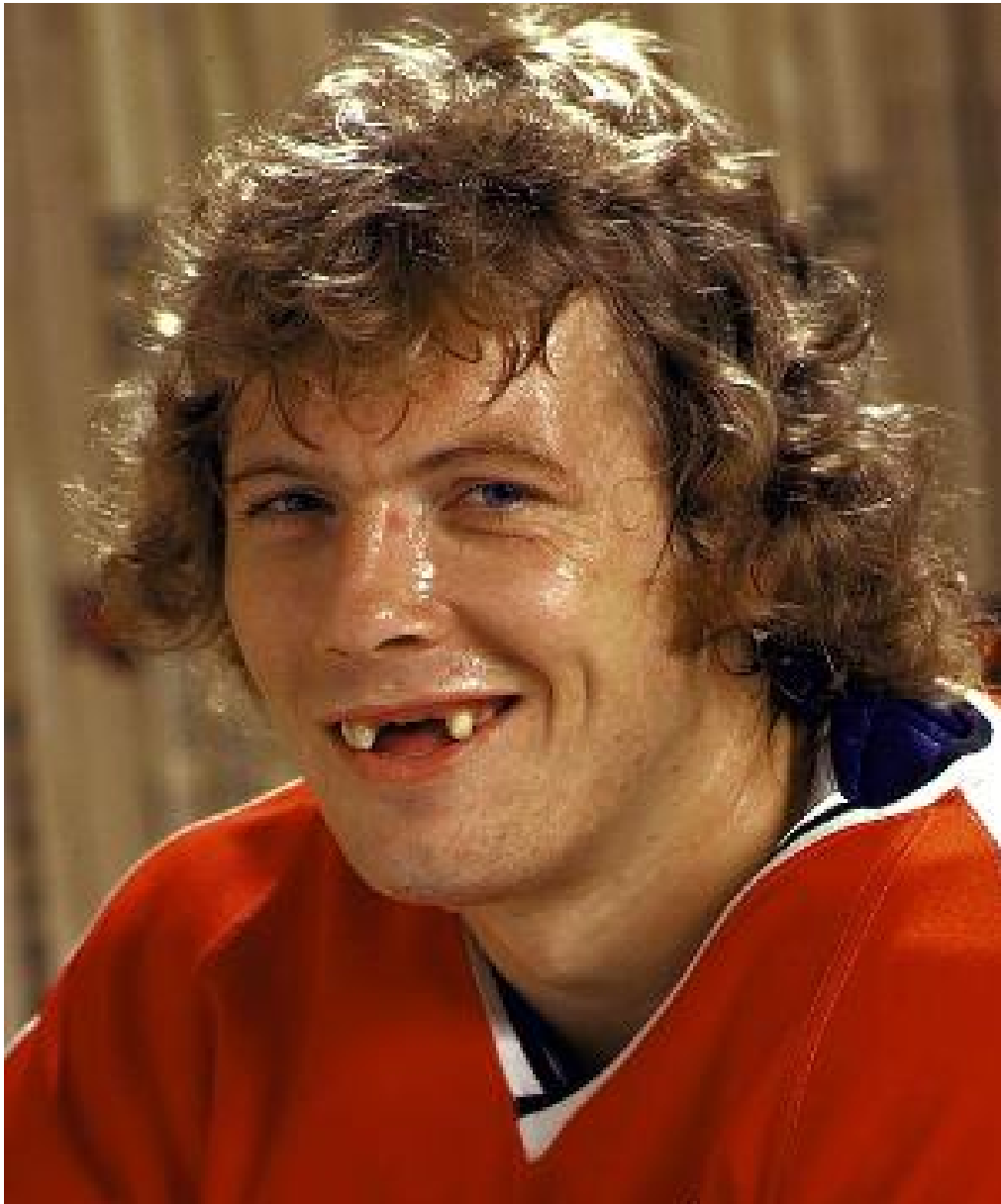
Discussion Starters with Activities:

1. Discuss ways to prevent an accident that might result in an oral injury. The word “oral” refers to all parts of a person’s mouth. A direct hit or a fall can cause oral injuries. For example, do not walk/run with any objects in the mouth, including a toothbrush. Explain how an accident can occur if a toothbrush is being carried in the mouth. Discuss pushing and shoving.
2. Show appropriate visuals and name sporting events and other activities in which an oral injury could occur (skateboarding, bicycling, and all terrain vehicles). Show a visual of an Oral Injury. Talk with students about other ways people are protected from accidents (Seat-belts, helmets, oven pads, mouth guards, knee and elbow pads).
3. Explain that a mouth guard provides a cushion for teeth when they are bumped. It also separates the biting surfaces of teeth to prevent oral injury while participating in a sporting event.
4. Show examples of Mouth guards. Explain that the three main types of mouth guards are boil and bite, pre-fabricated, and custom made (dental office). Show photos of the Different Types of Mouth guards being worn. Explain that mouth guards can usually be purchased where sporting equipment is sold.
5. Show visuals of the Loss of a Tooth. A tooth can be lost from an accident or from decay. When a permanent tooth is lost, the other teeth may shift positions to fill in the gap.

6. Show a photo of a Space Maintainer. If a primary (baby) tooth is lost too early, a space maintainer may be used to keep teeth from shifting until the permanent tooth erupts (comes in).
7. If a permanent tooth is lost in an accident, the person should attempt to find the tooth and place it in milk, water, or under the tongue to keep it moist. Do not rinse the tooth off. If possible, go directly to the dentist. The dentist may be able to save the tooth by putting it back in its place.
8. Assure students that if they knock or break a tooth, a dentist will take care of them. Some teeth can be fixed and others may be lost or replaced. Tell students that enamel, the outer white part of the tooth that we can see, is the strongest substance in our body.
9. Demonstrate proper brushing technique with the Mouth Model and the Large Toothbrush. Students may participate while brushing during the demonstration or afterwards. Remind students to brush two times a day, in the morning and before bedtime.
10. Demonstrate the proper way to carry and to rinse a toothbrush. Explain anything that goes into your mouth is supposed to be clean. Be careful not to touch the brush part of the toothbrush to anything outside your mouth or you will get germs on it. When rinsing a toothbrush, either at school or at home, never put it under the water with anyone else's toothbrush.

Tell students that a toothbrush should always be carried in the hand by the handle. For safety reasons, a toothbrush should never be carried in the mouth.



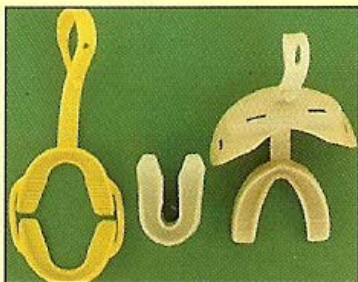


A Mouthguard May Have Protected His Teeth
From Being Knocked Out

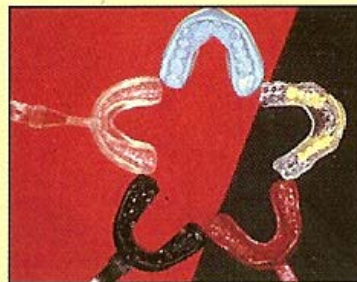


This 7-year-old is wearing a custom-fitted protective mouthguard made by her dentist. Such mouthguards can be made in many colors and are the best way to protect teeth during all sporting activities.

Three Types of Mouthguards



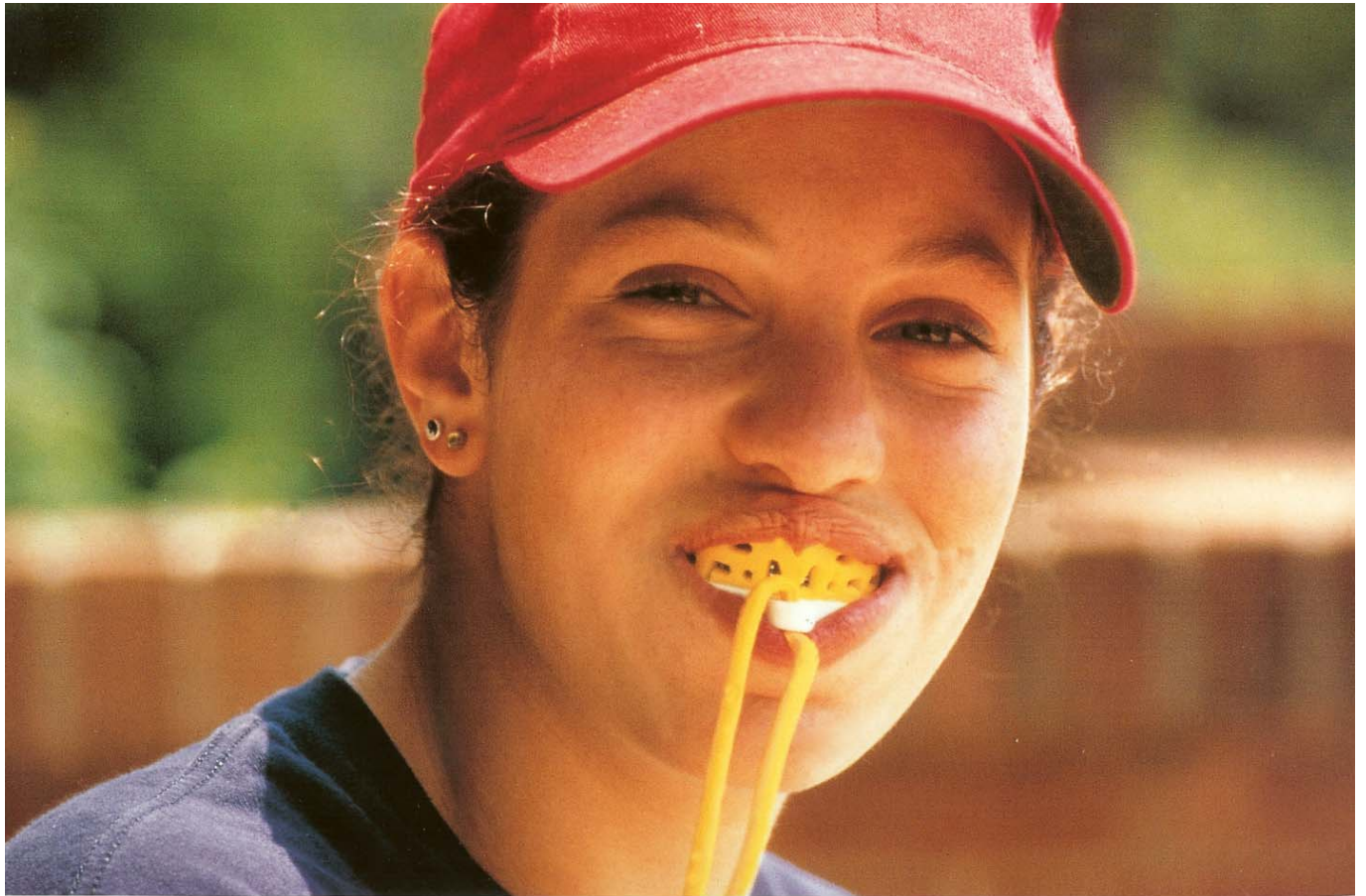
The ready-made, or stock, mouthguard



The mouth-formed 'boil and bite' mouthguard

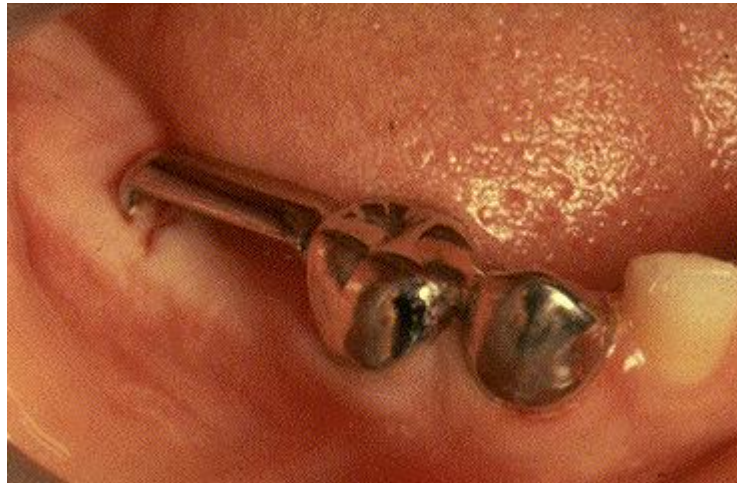


The custom-made mouthguard made by your dentist



This 13-year-old softball player is wearing a “store bought” protective mouthguard over her braces. Preformed mouthguards which can be purchased at sporting goods stores usually don’t fit as well as custom-formed mouthguards, but they are useful when a custom-fitted mouthguard is not available and mouth protection is needed.

SPACE MAINTAINERS



ORAL SAFETY, HARMFUL HABITS, AND TOOTH INJURIES

ORAL SAFETY

Accidents to teeth occur most often as a result of:

- Rough play at drinking fountains.
- Thrown baseball bats.
- Falls from bicycles.
- Carelessness around hard-seated swings, teeter-totter boards, and other equipment.
- Falls caused by objects lying on the floor or sidewalk.
- Failure to wear seat belts when riding in an automobile.
- Failure to wear an intraoral mouth protector in sports.



First Aid:

If a tooth is loosened or fractured, the pulp may have been injured. A splint may be needed to hold the tooth in place. The person should see a dentist as soon as possible.

If a tooth is knocked out, DO NOT CLEAN IT. Place it in milk or water or wrap it in a wet clean cloth, and take the tooth and individual to the dentist at once. The dentist may be able to replace the tooth in the jaw.



HARMFUL HABITS

- Prolonged finger or thumb sucking – (beyond 5-6 years) may contribute to development of an open bite and a deformed palate.



- Chewing object or pencils or holding them in the mouth – may injure teeth and gums.



How to Brush



- Place the toothbrush at a 45-degree angle to the gums.



- Move the brush back and forth gently in short strokes.



- Brush the outer surfaces, the inside surfaces and the chewing surfaces of all teeth.



- To clean the inside surface of the front teeth, tilt the brush vertically and make several up-and-down strokes.



- Brush your tongue to remove bacteria and keep your breath fresh.

ORAL HYGIENE BASIC BRUSHING

Proper brushing is recommended twice a day to remove food particles, debris, and plaque. Children need caregivers to brush their teeth when they are very young. By age six or seven, children may be able to brush independently, but continue to supervise and encourage your child. Children learn behavior and habits from the adults in their lives, so parents should be good role models and take care of their own teeth. The following technique is suggested by the American Dental Association.

Proper Brushing Technique:

- Upper Teeth – Point the bristles up toward the gums at a 45° angle and move the brush in small circles or short strokes. Brush each area with 5 to 10 strokes.
- Lower Teeth – Point the bristles down toward the gums and wiggle the brush back and forth or in small circles. Brush each area with 5 to 10 strokes.
- For the inside surface of the teeth, use the “toe” of the brush with gentle motions.
- Chewing Surfaces – Brush the chewing surfaces back and forth with a scrubbing motion.
- Use only a pea-sized amount of fluoridated toothpaste. For children under age two, fluoridated toothpaste is not recommended because they may swallow significant amounts.
- Brush your tongue to freshen breath and remove bacteria.
- Toothbrushes need to be replaced every three to four months because the bristles wear out.

ALL BRUSHING IS DONE GENTLY!

BE SURE TO USE A TOOTHBRUSH THAT HAS SOFT BRISTLES AND IS THE PROPER SIZE TO FIT YOUR MOUTH.

Powered Toothbrushes:

There are many electric and mechanical toothbrushes on the market. These devices usually offer toothbrush heads with oscillating or rotating actions. Powered toothbrushes may be more effective for some people in reducing plaque.

The novelty of a powered brush may appeal to children. Many of these toothbrushes have two-minute timers that result in longer brushing times. Also, people with limited dexterity may find a powered brush is easier to use than a manual brush.

MOST IMPORTANTLY, WITH ALL BRUSHING, IS TO BRUSH FOR AT LEAST TWO MINUTES, TWICE A DAY, AND TO BRUSH ALL OF YOUR TEETH.