

Dental Health Guidelines – Ages 0-18 Years

Recommendations for Preventive Pediatric Dental Care  
(AAPD Reference Manual 2002-2003)

**Periodicity and Anticipatory Guidance Recommendations**  
(AAPD/ADA/AAP guidelines)

Periodicity Recommendations					
Age (1)	Infancy 6-12 Months	Late infancy 12-24 Months	Preschool 2-6 Years	School Aged 6-12 years	Adolescence 12-18 Years
Oral Hygiene counseling (2)	Parents/guardians/caregivers	Parents/guardians/caregivers	Parents/guardians/caregivers	Parents/guardians/caregivers	Patient
Injury, Prevention Counseling (3)	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
Dietary counseling (4)	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
Counseling for non-nutritive habits (5)	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
Fluoride Supplementation (6,7)	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
Assess oral growth and development (8)	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
Clinical oral exam	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
Prophylaxis and topical fluoride treatment (9)		<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
Radiographic assessment (10)			<b>X</b>	<b>X</b>	<b>X</b>
Pit and Fissure Sealants			If indicated on primary molars	First permanent molars as soon as possible after eruption	Second permanent molars and appropriate premolars as soon as possible after eruption
Treatment of dental disease	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
Assessment and treatment of developing malocclusion			<b>X</b>	<b>X</b>	<b>X</b>
Substance abuse counseling				<b>X</b>	<b>X</b>
Assessment and/or removal of third molars					<b>X</b>
Referral for regular periodic dental care					<b>X</b>
Anticipatory guidance (11)	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>

1. First examination at the eruption of the first tooth and no later than 12 months.
2. Initially, responsibility of parent; as child develops jointly with parents, then when indicated, only by child.
3. Initially play objects, pacifiers, car seats; then when learning to walk; sports, routine playing and intraoral/perioral piercing.
4. At every appointment discuss role of refined carbohydrates; frequency of snacking.
5. At first discuss need for additional sucking; digits vs. pacifiers; then the need to wean from habit before eruption of a permanent incisor.
6. As per American Academy of Pediatrics/American Dental Association guidelines and the water source.
7. Up to at least 16 years.
8. By clinical examination.
9. Especially for children at high risk for caries and periodontal disease.
10. As per AAPD Guideline on Prescribing Dental Radiographs.
11. Appropriate discussion and counseling should be an integral part of each visit for care.

Note: Please refer to Smiles For Children Office Reference Manual for benefits and limitations.