



All About Kids Pediatric Dentistry  
3285 Hacks Cross Rd, Ste 101, Memphis, TN 38125  
Phone 901-759-0970 Fax 901-759-0904  
[www.pediatricdentistmemphis.com](http://www.pediatricdentistmemphis.com)

## Fixed Appliances

- Your child has recently had a custom fitted appliance cemented in place by our office. We want to be sure you know how to take care of this dental device.
- First, watch what your child eats. Please no hard candies, ice cubes, chewing gum, taffy, caramel or similar items. Expect 24 – 48 hours of mild discomfort. Tylenol or Motrin and warm salt-water rinses every six hours as needed should provide relief.
- Second, keep up with regular dental check ups every 6 months to prevent damage to the banded tooth, which can occur if leakage under the band is left unchecked. Should you leave the area and our practice, we suggest you ask your child's new dentist to continue this precautionary procedure.
- Thirdly, at the nightly cleaning of your child's teeth, be sure to carefully clean around any wires, bands and other areas of this appliance, as it tends to trap food. Please inspect this devise for damage or looseness and if you see or feel anything unusual, call us the next day so we can correct the situation.
- This appliance has received the greatest care in design and fabrication. It will serve your child well, provided the preceding points are faithfully followed.



Brushing and flossing are the best ways to help prevent cavities, but it's not always easy to clean every nook and cranny of your teeth – especially those back teeth you use to chew (called molars). Molars are rough, uneven and a favorite place for leftover food and cavity-causing bacteria to hide.

Still, there's another safety net to help keep those teeth clean. It's called a sealant, and it is a thin, protective coating (made from plastic or other dental materials) that adheres to the chewing surface of your back teeth. They're no substitute for brushing and flossing, but they can keep cavities from forming and may even stop early stages of decay from becoming a full-blown cavity.

In fact, sealants have been shown to reduce the risk of decay by nearly 80% in molars. This is especially important when it comes to your child's dental health. In October 2016, the [Centers for Disease Control](#) released a report on the importance of sealants for school-aged children, of which only 43% of children ages 6-11 have. According to the CDC, "school-age children without sealants have almost three times more cavities than children with sealants."

You may have many questions about sealants, and we have answers for you below. Read on to learn more about sealing out tooth decay.

#### **How Do Sealants Work?**

Think of them as raincoats for your teeth. When the cavity-causing bacteria that live in everyone's mouth meet leftover food particles, they produce acids that can create holes in teeth. These holes are cavities. After sealant has been applied it keeps those bits of food out and stops bacteria and acid from settling on your teeth—just like a raincoat keeps you clean and dry during a storm.

#### **Who Can Get Sealants?**

Children and adults can benefit from sealants, but the earlier you get them, the better. Your first molars appear around age 6, and second molars break through around age 12. Sealing these teeth as soon as they come through can keep them cavity-free from the start, which helps save time and money in the long run. Ask your dentist if sealants are a good option for you and your family.

#### **How Are Sealants Applied?**

It's a quick and painless process. Your dentist will clean and dry your tooth before placing an acidic gel on your teeth. This gel roughs up your tooth surface so a strong bond will form between your tooth and the sealant. After a few seconds, your dentist will rinse off the gel and dry your tooth once again before applying the sealant onto the grooves of your tooth. Your dentist will then use a special blue light to harden the sealant.

#### **Can Sealants Be Placed Over Cavities?**

Sealants can be used over areas of early decay to prevent further damage to your tooth. Because some sealants are clear, your dentist can keep an eye on the tooth to make sure the sealant is doing its job.

#### **Are There Any Side Effects?**

With the exception of an allergy that may exist, there are no known side effects from sealants.



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## Fillings, Crowns, and other Operative Procedures

- Following a procedure in which the lip or cheek are numb, be careful not to chew or eat on the affected side. Avoid hard and crunchy foods at the next meal.
- A repair, new filling or crown makes a change, however small, in the way teeth fit together. The tongue and cheeks will notice a change in the mouth and adapt to the new addition.
- Thermal sensitivity is not uncommon if the decay or preparation was deep or close to the nerve. If the tooth is responding and healing, sensitivity only lasts for a short time after the cold is introduced. Gradually over time the thermal sensitivity decreases and the tooth develops a healed protective layer.
- If a filling, crown, or other restoration feels "high" and does not allow the other teeth to close together, it may adjust itself in a day or two. If it continues to touch prematurely, it may need an adjustment at the office. Please call if you need to be examined.
- Often times stainless steel crowns will feel tight and may cause some minor discomfort for a few days. You may also notice slight discoloration around the gums where the crown is placed. This is normal and should not last more than a few days. If any swelling, puffiness, or oozing occurs after this time please contact our office.
- Pain may be experienced due to muscle tightness or tenderness following operative procedures. Common remedies would be Children's Tylenol, Advil, Motrin or other over-the-counter pain medications. If the pain persists overnight and the doctor has not advised you to expect discomfort, please call the office for instructions.



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## Rellenos, coronas y otros procedimientos operativos

- Siguiendo un procedimiento en el cual el labio o la mejilla están entumecidos, tenga cuidado de no masticar o comer en el lado afectado. Evite los alimentos duros y crujientes en la próxima comida.
- Una reparación, un nuevo relleno o corona hacen un cambio por pequeño que sea, en la forma en que los dientes encajan. La lengua y las mejillas notaran un cambio en la boca y se adaptaran a la nueva adición.
- La sensibilidad térmica no es infrecuente si la caries o la preparación eran profundas o cercanas al nervio. Si el diente está respondiendo y cicatrizando, la sensibilidad solo dura un corto tiempo después de introducir el frio. Gradualmente con el tiempo la sensibilidad térmica disminuye y el diente desarrolla una capa protectora cicatrizada.
- Si un relleno, corona u otra restauración se siente “alto” y no permite que los otros dientes se cierren juntos puede ajustarse solo en uno o dos días. Si sigue tocando prematuramente, puede necesitar un ajuste en la oficina. Por favor llame si necesita ser examinado.
- Muchas veces las coronas de acero inoxidable se sentirán apretada y pueden causar algunas molestias menores por unos pocos días. También puede notar una ligera decoloración alrededor de las encías donde se coloca la corona. Esto es normal y no debe durar más de unos pocos días. Si alguna hinchazón, inflamación o exudad ocurre después de este tiempo póngase en contacto con nuestra oficina.
- El dolor puede experimentarse debido a la opresión muscular o a la sensibilidad después de los procedimientos operativos. Los remedios comunes serian Tylenol, Advil, Motrin u otros medicamentos para el dolor de venta libre. Si el dolor persiste durante la noche y el medico no le ha aconsejado que espere molestias, por favor llame a la oficina para obtener instrucciones.



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### Care of the Mouth after Local Anesthetic

Your child has had local anesthetic for their dental procedure:

- If the procedure was in the LOWER jaw... the tongue, teeth, lip and surrounding tissue will be numb or asleep.
- If the procedure was in the UPPER jaw... the teeth, lip and surrounding tissue will be numb or asleep.

Often, children do not understand the effects of local anesthesia, and may chew, scratch, suck, or play with the numb lip, tongue, or cheek. These actions can cause minor irritations or they can be severe enough to cause swelling and abrasions to the tissue. Please monitor your child closely for approximately two hours following the appointment. It is often wise to keep your child on a liquid or soft diet until the anesthetic has worn off.

### Extraction Post-Operative Instructions

- Your child has had 1 or more teeth "wiggled" out.
- The gauze needs to stay in place with biting pressure for 30 minutes. This will reduce the amount of bleeding.
- Give your child the appropriate dose of children's Tylenol, Motrin or Advil when you take the gauze out (NO aspirin). Your child should only need this for approximately 12 to 24 hours. If pain persists beyond 48 hours, please call our office.
- Your child should eat only soft, bland food for the first couple days- nothing sharp, crunchy or too hot or cold because the area may be sensitive. Encourage plenty of liquids (water, soups, juices, etc.). Let your child determine when a regular diet can be reintroduced.
- NO spitting or drinking through a straw or "sippy" cup. The force can start the bleeding again.
- A clean mouth heals faster. Gentle brushing around the extraction site can be started immediately along with warm salt water rinses (1/4 teaspoon to a glass of water) to aid with any discomfort.
- Activity may need to be limited. Sometimes a nap is a good idea.
- Swelling after an extraction is not uncommon and should not cause alarm. If this occurs, apply an ice pack for 15 minutes on and 15 minutes off as needed in the 24 hours following tooth removal.
- Your child's cheek, lip and tongue will be numb for approximately 1-2 hours. Please be very careful that your child does not bite at his/her cheek or pick at this area. As this area "wakes up" it may feel funny. A self-inflicted bite injury is the most common post-op complication. Please keep an eye on your child!

Please do not hesitate to call us at 901-759-0970, if there are any questions or concerns



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**Cuidado de la boca después de la anestesia**

Su hijo/a atendido anestesia local durante su tratamiento:

- La boca de su hijo/a está dormido por la anestesia, cuide que no se muerda el labio o la lengua.
- Muchas veces los niños no entiende los efectos de la anestesia y muchas veces se muerden el labio o la lengua. Estas acciones hacen que sus encías se irriten y también puede ocasionar inflamación.
- Por favor vigile a su hijo/a por lo menos 2 horas después del procedimiento. Manténgalo en una dieta de pura comida suave por el resto del día.

**Instrucciones después de la extracción o extracciones**

- La gaza tiene que quedarse en su boca por lo menos 30 minutos, cambie la gaza cada 30 minutos hasta que note que ya no este sangrado. Esto hará que el sangrado se detenga.
- De le la dosis apropiada de Tylenol para niños o Motrin para niños a su hijo/a. NO ASPIRINA!
- Si su hijo/a tiene dolor más de 48 horas por favor llámenos.
- No debe comer comida dura por lo menos dos días, Ni usar popotes Ni escupir!!
- Una boca limpia, sana más rápido! Puede cepillarse los dientes el día siguiente.
- Descansar es muy importante después del tratamiento
- Aplique hielo en la área donde note inflamación en el rostro, inflamación es normal por el procedimiento.
- Es muy importante que cuide que su hijo/a que no se muerda la boca, el labio, o la lengua.

Llámenos si tiene preguntas al (901) 759-0970 Gracias!