



Dear Colleagues:

Preventive screenings and cleanings can be scheduled throughout the pregnancy. However, most unscheduled dental procedures are optimally performed in the second trimester, weeks 13 through 28.

For specific pharmacologic considerations, we follow the guidance of the National Maternal and Child Oral Health Resource Center. The Oral Health Care During Pregnancy: A National Consensus Statement can be found at [www.mchoralhealth.org/materials/consensus\\_statement.php](http://www.mchoralhealth.org/materials/consensus_statement.php), and includes a reference table for antibiotics, analgesics, and anesthetics. The American Academy of Pediatric Dentistry also has useful clinical guidelines such as the Guideline on Perinatal and Infant Oral Health Care, found on their website [www.aapd.org/policies](http://www.aapd.org/policies).

In general, we support shielded imaging, local anesthetics with epinephrine, and narcotic pain relievers. Aspirin and NSAIDs should be avoided in the first and third trimesters. Nitrous oxide (scavenged) can be considered if other anesthetics are inadequate. Please contact us if the procedure is of significant duration, or if you have specific concerns.

We appreciate this opportunity to partner with you supporting excellent dental health. We emphasize to our patients that good dental wellbeing before and during pregnancy is essential for both the mother and her developing baby. Again, please don't hesitate to call if we can be of assistance.

Sincerely,

A handwritten signature in black ink, appearing to read "Charmaine Gibson", with a large, elegant loop at the end.

Dr. Charmaine Gibson