An ADA-based curriculum including education on the importance of oral health, proper oral hygiene techniques, healthy food and beverage choices, and oral cancer prevention.
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Pre-Kindergarten & Kindergarten Lesson Plan

Theme: Healthy Teeth

Title: Keeping Our Teeth Healthy and Clean

Estimated Length: 20 minutes

General Objectives (teaching):
- Explain what a cavity is (a hole in the tooth), what causes a cavity (germs with sugar make acid).¹
- Explain why we want to avoid getting cavities with an emphasis on why we need our teeth/what we use them for.
- Communicate the importance of brushing twice a day (in the morning and at bedtime), flossing once a day,² and getting their teeth cleaned and checked twice a year or as frequently as the dentist recommends they go.³
- Demonstrate correct brushing and flossing techniques.
- Discuss healthy eating.

Behavioral Objectives (learning):
- Be able to talk about what a cavity is (a hole in the tooth; there can also be places where a cavity is just starting to form⁴) and what causes cavities (germs eat sugar and make an acid that attacks the tooth).
- Be able to talk about why we should avoid getting cavities.
- Go home and talk with an adult about what she/he (the student) learned about brushing and flossing.
- Ask an adult to take her/him to the dentist.
- Ask an adult to help with brushing and flossing.⁵
- Ask an adult to buy healthy foods.
- Eat fewer sugary foods and drink fewer sugar-sweetened beverages, and also do so less often.⁶
- Drink tap water instead of bottled water.⁷
- Stop using a bottle/Sippy cup if still doing this.⁸

Materials: Large model of set of teeth and oversized toothbrush. Floss.

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Lesson Plan Diagram:

<table>
<thead>
<tr>
<th>Why It's Important to have healthy teeth</th>
<th>How to have healthy teeth</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>We Could Get Cavities</strong></td>
<td><strong>We Need Our Teeth</strong></td>
</tr>
<tr>
<td>What are cavities? (a hole in tooth; there can also be places where cavities are just starting to form)</td>
<td>To be able to Smile/Eat/Talk.</td>
</tr>
<tr>
<td>What could happen if we get cavities? (Pain, tooth falls out) If in pain, go as soon as possible to a dentist</td>
<td>To hold space for permanent teeth and so permanent teeth will be healthy. (If our baby teeth have cavities, there is more of a chance our permanent teeth will get cavities.)</td>
</tr>
<tr>
<td>How cavities form: (Germs eat sugar, make acid)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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Endnotes


4 Loesche, p. 357.


8 Studies have shown that Sippy cups and bottles are unsafe, and use of them should be discontinued around age 1. See American Academy of Pediatrics. “AAP.org” > “About the AAP” > “AAP Press Room” > “Bottles, Binkies and Sippy Cups Not as Safe as You Think.” (2012.) Accessed 19 Sept. 2012. <Think.aspx?nfstatus=401&nftoken=00000000-0000-0000000000000000000000&nfstatusdescription=ERROR%3aNo+local+token>. In addition, drinking from Sippy cups or bottles containing juice or other beverages with sugar is known to cause cavities.

9 Loesche, Ibid.

10 Loesche, p. 368.


Partnership for Healthy Mouths, Healthy Lives, Ibid.

American Association of Pediatric Dentistry Clinical Affairs Committee, Ibid.


Moynihan and Petersen, p. 211.


In one study, chewing sugar-free gum was shown to reduce the amount of interdental debris but not the amount of plaque. See Kakodkar, Pranya and Soniya Mulay. “Effect of Sugar-free Gum in Addition to Tooth Brushing on Dental Plaque and Interdental Debris.” Dental Research Journal. 7.2 (2010): 64-69. Accessed 17 January 2013. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3177370/>. However, in a recent literature review of 594 unique titles and abstracts, it was determined that chewing sugar-free gum reduces plaque by a small but significant amount as long as it is an adjunct to tooth brushing. See Keukenmeester, R. S., D. E. Slott, M. S. Putt, and G. A. Van der Weijden. “The effect of sugar-free chewing gum on plaque and clinical parameters of gingival inflammation.” International Journal of Dental Hygiene. 11.1 (2013): 2-14. Accessed 17 January 2013. doi: 10.1111/j.1601-5037.2012.00562.x. In the prior study, there may have been other factors, such as the amount of gum chewed, that affected the results of the study, leading to the conclusion that chewing sugar-free gum does not significantly reduce plaque. The overwhelming evidence points to the conclusion that chewing sugar-free gum is effective not only in removing interdental debris but also in reducing plaque, as long as it is not used as a substitute for tooth brushing.
20 Cf. Endnote 8 on bottles and Sippy cups.


22 Centers for Disease Control and Prevention, Ibid.

23 Loesche, Ibid.

24 Skeie, et. al., Ibid.

25 Northway et. al., Ibid.

26 Partnership for Healthy Mouths, Healthy Lives, Ibid.

27 American Association of Pediatric Dentistry Clinical Affairs Committee, Ibid.

28 Partnership for Healthy Mouths, Healthy Lives, Ibid.


31 Mayo Clinic, Ibid.

32 Kakodkar and Mulay, Ibid. Also Keukenmeester et. al., Ibid.

33 Cf. Endnote 8 on bottles and Sippy cups.

34 United States Department of Agriculture, Ibid.

35 Johanson, Ibid.
Centers for Disease Control and Prevention, Ibid.

Partnership for Healthy Mouths, Healthy Lives, Ibid.


Kakodkar and Mulay, Ibid. Also Keukenmeester et. al., Ibid.

Studies have shown that the body does not cope as well with sugars consumed between meals, making them more cariogenic than sugars consumed at meal times. See Loesche, pp. 369-370.


American Association of Pediatric Dentistry Clinical Affairs Committee, Ibid.

Loesche, p. 368.

American Association of Pediatric Dentistry Clinical Affairs Committee, Ibid.

Moynihan and Petersen, p. 211.

See Endnote 8 on bottles and Sippy cups.

Loesche, p. 357

Loesche, p. 368.

Northway, et. al., Ibid.

Skeie, et. al., Ibid.


53 Partnership for Healthy Mouths, Healthy Lives, Ibid.

54 American Association of Pediatric Dentistry Clinical Affairs Committee, Ibid.

55 United States Department of Agriculture, Ibid.

56 Moynihan and Petersen, Ibid.

57 Mayo Clinic, Ibid.

58 Kakodkar and Mulay, Ibid. Also Keukenmeester et. al., Ibid.

59 Cf. Endnote 8 on bottles and Sippy cups.

60 Johanson, Ibid.

61 Centers for Disease Control and Prevention, Ibid.

62 Loesche, p. 368.

63 Partnership for Healthy Mouths, Healthy Lives, Ibid.

64 American Academy of Periodontology, Ibid.


67 American Association of Pediatric Dentistry Clinical Affairs Committee, Ibid.

68 Moynihan and Petersen, Ibid.
69 Kakodkar and Mulay, Ibid. Also Keukenmeester, et. al., Ibid.

70 Cf. Endnote 8 on bottles and Sippy cups.

71 United States Department of Agriculture, Ibid.

72 Johanson, Ibid.

73 Centers for Disease Control and Prevention, Ibid.

74 American Association of Pediatric Dentistry Clinical Affairs Committee, Ibid.

75 Partnership for Healthy Mouths, Healthy Lives, Ibid.

76 Cf. Endnote 38.

77 Loesche, pp. 369-370.

78 Kakodkar and Mulay, Ibid. Also Keukenmeester, et. al.

79 American Association of Pediatric Dentistry Clinical Affairs Committee, Ibid.

80 Loesche, p. 368.

81 American Association of Pediatric Dentistry Clinical Affairs Committee, Ibid.

82 Moynihan and Petersen, p. 211.

83 Loesche, p. 357.

84 Loesche, p. 368.


86 American Academy of Periodontology, Ibid.

87 American Association of Pediatric Dentistry Clinical Affairs Committee, Ibid.
88 United States Department of Agriculture, Ibid.

89 Kakodkar and Mulay, Ibid. Also Keukenmeester, et. al., Ibid.

90 Loesche, pp. 369-370.

91 Johanson, Ibid.

92 Centers for Disease Control and Prevention, Ibid.

93 American Academy of Periodontology, Ibid.

94 American Association of Pediatric Dentistry Clinical Affairs Committee, Ibid.

95 Moynihan and Petersen, Ibid.

96 Mayo Clinic, Ibid.

97 Kakodkar and Mulay, Ibid. Also Keukenmeester, et. al., Ibid.

98 United States Department of Agriculture, Ibid.

99 Johanson, Ibid.

100 Centers for Disease Control and Prevention, Ibid.

101 Cf. Endnote 38.

102 Kakodkar and Mulay, Ibid. Also Keukenmeester, et. al., Ibid.

103 Hayes and Van Meter, Ibid.

104 Moynihan and Petersen, Ibid.

105 American Association of Pediatric Dentistry Clinical Affairs Committee, Ibid.


110 Loesche, p. 368.

111 American Academy of Periodontology, Ibid.


114 Moynihan and Petersen, Ibid.

115 Kakodkar and Mulay, Ibid. Also Keukenmeester, Ibid.

116 Loesche, pp. 369-370.


118 Johanson, Ibid.

119 Centers for Disease Control and Prevention, Ibid.

120 National Cancer Institute, Ibid.

121 The Oral Cancer Foundation, Ibid.

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123 Ibid.


125 Ibid.

126 Loesche, p. 368.


129 American Association of Pediatric Dentistry Clinical Affairs Committee, Ibid.


131 Hayes and Van Meter, Ibid.

132 American Dental Association, Ibid.


135 American Association of Pediatric Dentistry Clinical Affairs Committee, Ibid.

136 Cf. Endnote 38.

137 United States Department of Agriculture, Ibid.

138 Johanson, Ibid.

139 Centers for Disease Control and Prevention, Ibid.
140 Academy of General Dentistry, Ibid.
141 Moynihan and Petersen, Ibid.
142 Loesche, pp. 369-370.
143 Mayo Clinic, Ibid.
144 Kakodkar and Mulay, Ibid. Also Keukenmeester, et. al., Ibid.
145 Academy of General Dentistry, Ibid.
146 Johanson, Ibid.
147 Centers for Disease Control and Prevention, Ibid.
148 Hayes and Van Meter, Ibid.
150 Ibid.
152 Ibid.
153 National Cancer Institute, Ibid.
154 The Oral Cancer Foundation, Ibid.
155 Hayes and Van Meter, Ibid.
156 Cf. Endnote 38.
157 Kakodkar and Mulay, Ibid. Also Keukenmeester, et. al., Ibid.
158 Centers for Disease Control and Prevention, Ibid.

159 Moynihan and Petersen, Ibid.

160 The Oral Cancer Foundation, Ibid.


163 Ibid.


165 American Academy of Pediatric Dentistry, Ibid.


167 Loesche, pp. 369-370.

168 Loesche, p. 368.


170 Ibid.


173 Moynihan and Petersen, Ibid.

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Kakodkar and Mulay, Ibid. Also Keukenmeester, et. al., Ibid.

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Ibid.


Ibid.


Ibid.

Loesche, p. 368.


American Dental Association. “Mouth Healthy” > “Preteens and Teens,” Ibid.
192 American Association of Pediatric Dentistry Clinical Affairs Committee, Ibid.


194 Hayes and Van Meter, Ibid.


197 American Association of Pediatric Dentistry Clinical Affairs Committee, Ibid.

198 United States Department of Agriculture, Ibid.

199 Academy of General Dentistry, Ibid.

200 Moynihan and Petersen, p. 211.

201 Mayo Clinic, Ibid.

202 Kakodkar and Mulay, Ibid. Also Keukenmeester, et. al., Ibid.

203 Loesche, pp. 369-370.

204 Academy of General Dentistry, Ibid.

205 Johanson, Ibid.

206 Centers for Disease Control and Prevention, Ibid.

207 Hayes and Van Meter, Ibid.


209 Ibid.

Ibid.

National Cancer Institute, “NCI Home” > “Cancer Topics” > “NCI Fact Sheets” > “Fact Sheets: Tobacco and Smoking Cessation” > “Harms of Smoking and Health Benefits of Quitting,” Ibid.

The Oral Cancer Foundation. “Facts” > “more about tobacco and alcohol, Ibid.


Ibid.

Ibid.

Ibid.

Loesche, p. 357.

Cf. endnote 38.

Kakodkar and Mulay, Ibid. Also Keukenmeester, Ibid.


National Cancer Institute, Ibid.


National Cancer Institute, Ibid.
226 Ibid.


