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DENTAL GUIDELINES IN PREGNANCY

Our OB patients are encouraged to continue their routine preventive dental care. It is recommended to defer care that is considered strictly cosmetic until after delivery.

1) Local anesthetic agents are satisfactory, preferably without Epinephrine. Epinephrine would be acceptable if bleeding is a significant concern.
2) It is recommended to avoid inhalation agents or heavy sedation during procedures unless anesthesiology monitoring is utilized. We would consider procedures under general anesthesia safe when administered by an anesthesiologist in an appropriate setting.
3) X-rays can be performed as indicated with the use of abdominal shielding.
4) Left lateral decubitus positioning may help avoid syncopate episodes.
5) Approved Antibiotics: Erythromycins, Penicillin, Cephalosporins, Augmentin, and Zithromax.
   Contraindicated Antibiotics: Tetracyclines and Quinolones
6) Approved Pain medicine: Acetaminophen
   **Contraindicated Pain Medicine: Ibuprofen products and other NSAIDs
   After 13 weeks gestation, these can be used for less than 5 days' duration**

These are our general guidelines for medications and antibiotics; however, we will be glad to assist in reviewing any proposed medication use from pregnancy perspective. Please call our office with any questions or concerns.