



Referred by:	Patient Name:
Phone Number:	DOB:
Fax Number:	Phone Number:

**This patient is cleared for routine evaluation and dental care, which may include but is not limited to:**

- Dental X-rays as needed for diagnosis (with abdominal and neck lead shield)
- Oral health examination
- Scaling and root planing
- Restoration of untreated caries
- Root Canal
- Extraction
- Standard local anesthetic (lidocaine with or without epinephrine)

**\*\*See reverse side for additional pharmaceutical recommendations\*\***

**Provider Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Referred to: \_\_\_\_\_

**Reason for referral:**  **Routine**  **Bleeding gums**  **Pain**  **Other:** \_\_\_\_\_

Week's gestation (at time of referral) \_\_\_\_\_ Estimated delivery date: \_\_\_\_\_ Primary language spoken: \_\_\_\_\_

**Known Allergies:** **NONE**  **YES**  **(Drug(s)/Reactions):** \_\_\_\_\_

Significant Medical Conditions: **NONE**  **YES**  \_\_\_\_\_

**Current Medications:**  **NONE**  **Prenatal Vitamins**  
 **Iron**  **Calcium**  **OTHERS (Attach List)**

**Additional Precautions:**  **NONE**  **YES** (please list additional comments or instructions)

**Dental Provider: Please fax information back to prenatal care provider (number above) after initial visit.**

Exam date: \_\_\_\_\_  **Normal Exam/Recall**  **Missed Appt.**

Additional visits needed for  **Caries**  **Periodontitis**  **Referral for Oral surgery**  **Other** \_\_\_\_\_

Comments:

**Dentist Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Phone:



\*Adapted with permission from "Oral Health During Pregnancy and Early Childhood: Evidence-Based Guidelines for Health Professionals. California Dental Association. 2010."

# Pharmacological Considerations for Pregnant Women

The pharmacological agents listed below are to be used only for indicated medical conditions and with appropriate supervision.

Pharmaceutical Agent	Indications, Contraindications, and Special Considerations
<b>Analgesics</b>	
Acetaminophen	May be used during pregnancy.
Acetaminophen with Codeine, Hydrocodone, or Oxycodone	
Codeine	
Meperidine	
Morphine	
Aspirin	May be used in short duration during pregnancy; 48 to 72 hours. Avoid in 1st and 3rd trimesters.
Ibuprofen	
Naproxen	
<b>Antibiotics</b>	
Amoxicillin	May be used during pregnancy.
Cephalosporins	
Clindamycin	
Metronidazole	
Penicillin	
Ciprofloxacin	Avoid during pregnancy.
Clarithromycin	
Levofloxacin	
Moxifloxacin	
Tetracycline	Never use during pregnancy.
<b>Anesthetics</b>	Consult with a prenatal care health professional prior to using intravenous sedation or general anesthesia.
Local anesthetics with epinephrine (e.g., Bupivacaine, Lidocaine, Mepivacaine)	May be used during pregnancy.
Nitrous oxide (30%)	May be used during pregnancy when topical or local anesthetics are inadequate. Pregnant women require lower levels of nitrous oxide to achieve sedation; consult with prenatal care health professional.
<b>Antimicrobials</b>	Use alcohol-free products during pregnancy.
Cetylpyridinium chloride mouth rinse	May be used during pregnancy.
Chlorhexidine mouth rinse	
Xylitol	

Source: Reproduced, with permission, from Oral Health Care During Pregnancy Expert Workgroup. 2012. *Oral Health Care During Pregnancy: A National Consensus Statement*. Washington, DC: National Maternal and Child Oral Health Resource Center.