

Name : _____

STEP 1 (Teeth)

Instructions or comments:

- Remove partials and rinse
- Check mouth for abnormalities
- Brush teeth and tongue
- Floss or alternative (if possible)*
- Rinse mouth with mouth rinse**/salt water
- Rinse toothbrush and air dry
- Record success on flow sheet

**Alternatives to flossing include a proxabrush, floss handle, or flossers
 **Avoid alcohol-based mouth rinse (tends to dry out the mouth)*

STEP 2 (Partial)

- Brush partial with liquid soap (NOT toothpaste)* and rinse
- Check partial for problems
- Air dry partial or soak in water with denture cleaning product (NOT bleach) overnight
- Rinse partial before placing back in mouth



**Toothpaste is abrasive and will scratch partial allowing bacteria to build-up*

Required supplies: toothbrush, toothpaste, mouth rinse (non-alcohol), denture brush, liquid soap, storage container

Additional supplies (if necessary): floss (OR proxabrush, floss handle, flossers), facecloth, towel, tongue cleaner, lip lubrication, mouth props, denture cleaning solutions, gloves, gauze, kidney basin

Further details about personal oral care

STEP 1 (Teeth)

- Record any abnormalities on the 'Resident Oral Health Assessment' sheet
- Lubricate lips with lip lubricant (not just water or saliva)
- Brush teeth minimum once daily (thoroughly)
- Gently massage gums with toothbrush at 45 degrees to the gums
- For those who cannot reach the sink, have kidney basin available to spit
- For those who have trouble swallowing, dry the mouth and teeth with gauze

STEP 2 (Partial)

- Get resident to remove partial if able
- Look for plaque and tartar buildup on partial
- If plaque and tartar buildup present, place partial in container with denture cleaner for 30 to 60 minutes

DATE

When toothbrush was last changed: _____

Of last visit to dentist: _____