

# Children with Special Health Care Needs: Foundational Articles and Consensus Recommendations, 2021

**Bradshaw S, Bern D, Shaw K, Taylor B, et al.** Improving health, wellbeing and parenting skills in parents of children with special health care needs and medical complexity ~ a scoping review. *BMC Pediatr* 2019; 19:301. Available at: <https://bmcpediatr.biomedcentral.com/articles/10.1186/s12887-019-1648-7>. Accessed, May 22, 2020.

**National Center on Birth Defects and Developmental Disabilities, CDC.** Communicating with and about people with disabilities. Available at: [https://www.cdc.gov/ncbddd/disabilityandhealth/pdf/disabilityposter\\_photos.pdf](https://www.cdc.gov/ncbddd/disabilityandhealth/pdf/disabilityposter_photos.pdf). Accessed, March 2, 2020.

**Craig MH, Scott JM, Slayton RL, Walker A, Chi DL.** Preventive dental care use for children with special health care needs in Washington's Access to Baby and Child Dentistry Program. *J Am Dent Assoc* 2019; 150:42-8.

FDA Drug Safety Communication: FDA review results in new warnings about using general anesthetics and sedation drugs in young children and pregnant women. December 2016. Available at: <http://www.fda.gov/Drugs/DrugSafety/ucm532356.htm> Accessed, May 1, 2020.

**Frank M, Keels MA, Qui onez R, Roberts MW, Divaris K.** Dental caries risk varies among sub-groups of children with special health care needs. *Pediatr Dent* 2019; 41:378-83.

**Khalid I, Chandrupatla SG, Kaye E, Scott T, Sohn W.** Dental sealant prevalence among children with special health care needs: National Health and Nutrition Examination Survey (NHANES) 2013-2014. *Pediatr Dent* 2019; 41:186-90.

**Kovalesky MB, Unkel JH, Reinhartz J, Reinhartz.** Discrepancies between dental parent-derived health histories and medical electronic health records. *Pediatr Dent* 2019; 41:371-5.

**Lewis CW.** Dental care and children with special health care needs: A population-based perspective. *Acad Pediatr* 2009; 9:420-6.

**McPherson M, Arango P, Fox H, Lauver C, et al.** A New Definition of Children with Special Health Care Needs. *Pediatrics* 1988; 102:137-9.

**Norwood KW, Slayton RL,** Council on Children with Disabilities and Section on Oral Health. Oral health care for children with developmental disabilities. *Pediatrics* 2013; 131:614-9.

**World Report on Disability.** Geneva: World Health Organization; 2011. Available at: [https://www.who.int/disabilities/world\\_report/2011/en/](https://www.who.int/disabilities/world_report/2011/en/). Accessed, March 2, 2020.

# IAPD Consensus Recommendations

Treating children with special health care needs (SHCN) is an integral part of the practice of pediatric dentistry. Children with SHCN are defined as “those who have one or more chronic physical, developmental, behavioral, or emotional conditions, and who also require health and related services of a type or amount beyond that required by children generally.”

**1.** “People First Language” should be used to speak appropriately and respectfully about any patient with a disability. People first language emphasizes the person first not the special health care need. For example: “a child who ...”, “a child with ...” or, “a child who has...”

**2.** Pediatric dental offices should be mindful of accommodating children with SHCNs in the design of their offices (e.g., wheelchair accessibility). The pediatric dentist may want to consider having equipment to help the child with SHCNs cope with dental care (e.g., weighted blankets, sun glasses, noise cancellation head phones).

**3.** Providers of oral health should be aware that parent/ legal guardian derived medical histories may be incomplete and require validation with the child’s primary medical provider or electronic medical record if accessible. Medical history updates should be obtained at each appointment.

**4.** Children with SHCNs are a heterogenous group and the caries risk varies between different

disability diagnoses. Caries risk assessment in children with SHCNs should be individualized based on the underlying medical conditions and chronic medications.

**5.** Prevention strategies should be customized to the child’s special health care needs. Toothbrushes can be modified (e.g. double -sided, thicker grips) to accommodate the special needs and facilitate oral hygiene. Common prevention strategies such as the use of sealants and fluoride applications should be considered with children with SHCN.

**6.** Children with SHCNs should be offered the same standard of dental care as children without SHCNs whenever possible. Deviations from the standard of care need to be documented and the rationale therefore explained.

**7.** Children with SHCNs may require more surgical procedures than children without SHCNs. Consequently, dentists should consider, when possible, combining oral rehabilitation with other surgeries in order limit the exposure to general anesthesia in children with SHCN.

**8.** Children with SHCNs have been shown to have more unmet dental care needs than their peers without SHCNs. Partnership between the pediatric dental home, and the child’s medical home should be encouraged to improve their oral and overall health.