



This guide describes the **PreViser® Oral Health Information Suite (OHIS)** including browser requirements and element descriptions.

For further information, contact:
help@previser.com
P: 888.854.0007

Copyright © 2016 – 2019 PreViser. All rights reserved.

The information contained in this document is the exclusive property of PreViser and, except for use by the authorized persons, shall not be distributed, reproduced, or disclosed in whole or part without prior written permission from PreViser.

HIPAA / HITECH

Pursuant to the Health Insurance Portability and Accountability Act of 1996 (HIPAA), the Health Information Technology for Economic and Clinical Health Act of 2009 (HITECH), and all applicable regulations promulgated pursuant to HIPAA and HITECH, every reasonable effort has been made to ensure that no text or screen prints contain individually identifiable health information. Wherever possible, the information used is test data and fictitious in nature. If you have any concerns about the information contained herein please contact your PreViser Account Manager or Privacy Officer.

Version History

Revision Level	Date	Description
1.0	June 3, 2016	Original
1.1	June 4, 2016	
1.2	June 13, 2016	
1.2.1	March 2017	Reformat and added encryption key and timeout information.
1.2.2.	March 2017	Added patient validation and successful creation dialogs.
1.2.3	April 2017	Updated for function
1.2.4	May 2017	Updated Access Code graphic
1.2.5	June 2017	Updated Graphics for Left Bar Menu Options
1.2.6	November 2017	Updates to Patient Verification, Return of Benefits, User Pins and description of Periodontal Stability Score/graphic
1.3	February 2018	Updates to graphics, access to OHIS and chat function of website
1.3.1	February 2018	Updates to patient engagement graphic, Provider support, and Admin reports
1.3.2	June 2018	Addition of the Home Care Report, English/Spanish Language OHIS report translation
1.3.3	October 2018	Home Care Report update, PINs update; updated contact information
1.3.4	January 2019	Removed MyAccount information and updated OHIS screenshots
1.3.5	February 2019	Updated screenshots of MyAccount/Support

CONTENTS

Your PreViser License	5
Additional Resources.....	5
Getting Started with OHIS	5
To create a shortcut.....	6
Best Practices for Implementing PreViser in a Practice	7
Accessing the OHIS	7
Setting up an Encryption key for your practice	9
Lost Encryption Keys.....	10
Time Out Feature	11
Using the OHIS	12
Creating Patients	12
Patient Verification	13
Patient Details Page	15
Deactivate patient.....	15
Start New Assessment	15
Patient Engagement	16
Import Patient Records From Another Dentist.....	16
Recent Assessments.....	17
Assessing a patient	18
Caries Assessment.....	18
Report Options - Caries	20
The Caries/Restorative Patient Report	21
Report Header.....	22
Pre-loading values from prior assessment.....	26
Periodontal Disease Assessment	26
Report Options - Perio	28
The Perio Patient Report.....	30
Oral Cancer Risk Assessment	32
The Oral Cancer Risk Report	34
Comprehensive Assessment	36
Unfinished Assessments	37
Options / Settings	38
Changing or Adding Product Recommendations	40
Generating the Home Care Report	42
Admin / Practice Reports	45
Support	46
Special Data Fields by Insurer.....	46
Return of Benefits.....	47
Check Benefits.....	47
Retrieving Benefits.....	49
Benefit Return Display:	50
Additional Enhanced Benefits Information:.....	51
Appendix A - Reports.....	53
Caries/Restorative - page 1 Overview.....	53
Caries/Restorative - page 2 Treatment Options	54
Caries/Restorative - page 3 Clinical Inputs.....	55
Perio - page 1 Overview	56
Perio - page 2 Treatment Options.....	57
Perio - page 3 Clinical Inputs.....	58
Oral Cancer - page 1 Overview.....	59
Oral Cancer - page 2 Treatment Options	60
Oral Cancer - page 3 Clinical Options	61
Comprehensive - page 1 Overview	62

PreViser OHIS User Documentation

Comprehensive - page 2 & 3 Treatment Options63

Comprehensive - page 2 & 3 Treatment Options64

Comprehensive - page 4 Clinical Options.....65

Hint: When you see words in this documentation in blue and underlined, they are hyperlinks that if clicked, will take you to a section of this documentation providing more information about the underlined word(s), or to an external web resource. If you are reading this document from a paper copy, you will find the hyperlinked word(s) referenced in the Table of Contents.

YOUR PREVISER LICENSE

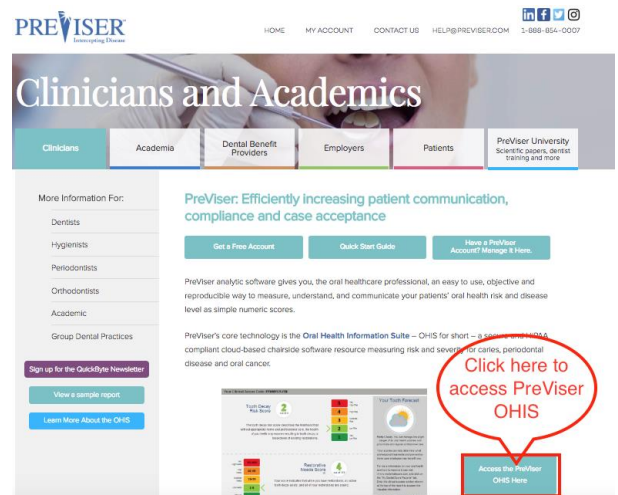
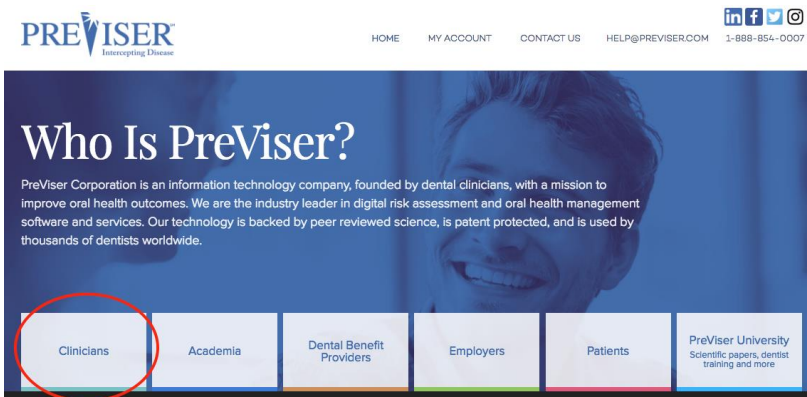
As an oral health professional, you have been granted an unlimited usage license to the PreViser Oral Health Information Suite (OHIS). This license can be used on as many patients as you wish and you will never be required to pay for access to the service. In the future, PreViser may offer additional services you may elect to subscribe to, but the basic service described in this documentation will always be free.

ADDITIONAL RESOURCES

In addition to this User Documentation there are resources available to you at PreViser University located at www.previser.com -> PreViser University. Here you will find instructional videos, as well as white papers on PreViser, scientific research and other downloadable resources.

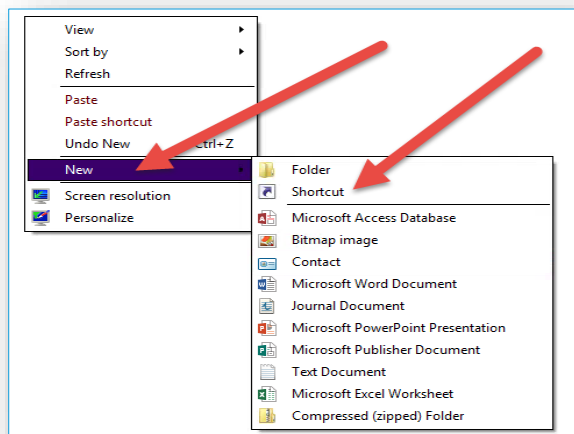
GETTING STARTED WITH OHIS

You can reach the OHIS URL from www.previser.com here and navigating to the “Clinicians” tab and clicking on “Access PreViser OHIS Here,” or directly by entering this URL into a browser: <https://secure.previser.com/ohis>.

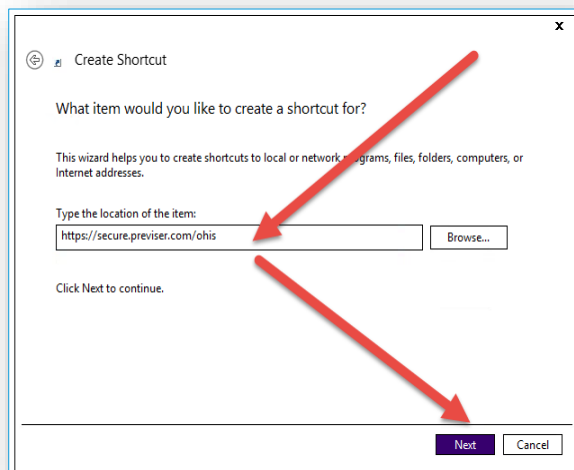


To create a shortcut

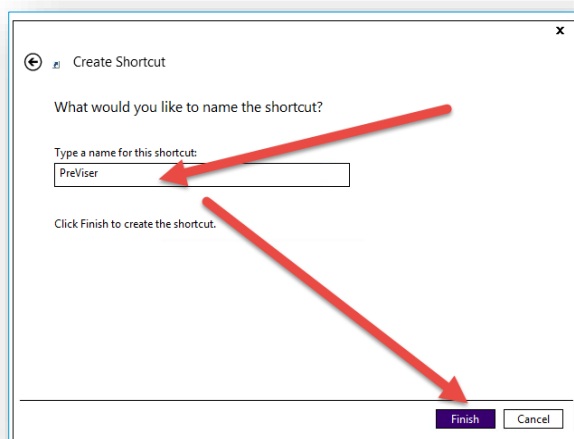
1. Right-click anywhere on your desktop.
2. Select **New** and then **Shortcut**.



3. Enter <https://secure.previser.com/ohis> into the Shortcut address box.
4. Click **Next**.



5. Enter the name of the Shortcut (PreViser) into the box.
6. Click **Finish**.



You will now have a shortcut displayed on your desktop labeled PreViser. The appearance of this shortcut depends on which browser you prefer to use.

Hint: Because PreViser employs sophisticated encryption to ensure that only you and the insurance company of the patient have access to Private Health Information (PHI), you may have difficulties with some browsers handling the encryption process under some circumstances. Unfortunately, these problems are hard to predict because they can crop up when the browser author (Microsoft, Google, etc.) makes changes to their computer code. While it has rarely happened, a quick way to find out if a problem in using the OHIS relates to one of these changes is simply to switch browsers. If the problem goes away, the problem is with the browser you were using and you will need to start using the different browser to access the OHIS.

Best Practices for Implementing PreViser in a Practice

When implemented correctly, using PreViser in the dental practice to help guide treatment planning and patient communication results in enhanced practice productivity, efficiency and patient satisfaction. From experience, we've found the following tips to be helpful to beginning users in determining how best to adopt a PreViser protocol:

1. A patient record must be created for each patient to be assessed, and this is best done by front office staff when the appointment is made. This ensures that if [patient verification services](#) for an insurer are available, any corrections to insurer identifiers needed to transmit PreViser scores to the insurer for enhanced benefit determination can be easily made without disrupting the examination work flow.
2. Where the morning huddle is part of the work day, patients to be PreViser assessed can have that assessment pre-populated from the patient record during the huddle and [saved](#) for recall later in the day when the patient presents. This can save a lot of time for initial assessments.
3. If at all possible, it is strongly recommended that all patients be routinely PreViser assessed even if the clinician doesn't think they have elevated risk or severity of oral disease. This is because the system is able to detect oral disease at its very earliest stages, before it becomes obvious to the patient or clinician. When detected early, oral disease can largely be prevented from further deterioration, and the [PreViser patient report](#) will help the patient understand why you are encouraging them to be compliant with your recommendations in order to maintain optimal oral health.
4. At recall appointments, always choose ["Load the Last Assessment Values"](#) from the prior assessment. This allows the clinician to reduce the time it takes to do a patient assessment from a couple of minutes to a few seconds, as only changed values since the last appointment need to be noted.

Accessing the OHIS

When you launch the OHIS for the first time from <https://secure.previser.com/ohis> you will be prompted for the username and password you created when you registered. Additionally, the individual user will be prompted for their individual pin number, or the PIN that was created when registering if no additional users have been set up yet.

PreViser Oral Health Information Suite (OHIS)

Powered by
PREVISER

Support

MyAccount

Log In to OHIS

Username

Password

PIN

☐ Remember me?

Log In

Enter those values, check the **Remember me?** box so your credentials will be saved in the browser memory, and click **Log In**.

PreViser Oral Health Information Suite (OHIS)

Powered by
PREVISER

Support

MyAccount

Log In to OHIS

Username

Password

PIN

☐ Remember me?

Log In

[Home](#) | [Privacy](#) | [End User License Agreement](#) | © copyright 2003 - 2019 PreViser Corp. All Rights Reserved.

Clicking on Support will reroute the user to the PreViser website with support links to documentation, and phone and email to contact for support at <https://www.previser.com/clinical-assessment-support/>

PREVISER
Intercepting Disease

HOME MY ACCOUNT CONTACT US HELP@PREVISER.COM 1-888-854-0007

in f t i

Clinical Assessment Support

Clinicians

Academia

Dental Benefit Providers

Employers

Patients

PreViser University
Scientific papers, dentist training and more

Customer Support
Email: help@previser.com
Phone: 888.854.0007

Clinical Assessment (Oral Health Information Suite) User Guide

MyAccount Registration User Guide

PreViser University

Clicking on MyAccount will redirect the user to the MyAccount application for account management.

PreViser Oral Health Information Suite (OHIS)

Powered by
PREVISER

Support

MyAccount

Log In to OHIS

Username

Password

PIN

☐ Remember me?

Log In

[Home](#) | [Privacy](#) | [End User License Agreement](#) | © copyright 2003 - 2019 PreViser Corp. All Rights Reserved.

SETTING UP AN ENCRYPTION KEY FOR YOUR PRACTICE

The first time you access PreViser from a computer, you will be asked to create an encryption key consisting of a minimum of 8 characters comprised of letters, numbers or special characters. The creation of your encryption key is needed, along with its combination of your username, in order to encrypt your patients' data before you transmit it over the Internet for analysis by PreViser. This is a requirement of HIPAA and is needed to protect your patients' privacy. Your data, once analyzed, is stored encrypted on PreViser servers and returned to your computer where it is decrypted using the same key.

- ① ***It is very important that you do not lose your encryption key***, because if you do, any patient records encrypted with the lost key will not be able to be accessed by you in the future. PreViser cannot tell you what your lost key is—we can only force our system to allow you to create a new key. But again, the new encryption key will not allow you the ability to retrieve records encrypted with the lost key, so keep the key in a safe place or written down.

More information on Encryption keys can be found here:

<https://free.previser.com/>

and at PreViser University located at the www.previser.com website.

Make up your encryption key, write it down in a safe place, and enter it when prompted here:

PreViser Oral Health Information Suite (OHIS) previserdental - Karen O'Connor (Log Off)

Powered by **PREVISER**

Setup Privacy Encryption for this computer

Important: The [Encryption Key](#) you enter below:

- Will encrypt your patient's private information.
- Must not be lost. We cannot retrieve it for you.
- Must be the same key used by all computers in the office.
- If you lose your encryption key, patient records encrypted with this key will also be lost and cannot be retrieved.

If your office has not made up an Encryption Key:

- Make up your own and enter it below.
- Choose at least 8 letters or numbers.

If your office has an Encryption Key:

- Enter the same [Encryption Key](#) in the text box below.

Enter your encryption key. Re-Enter your encryption key.

The first time you enter the value you have decided upon, this key is permanently associated with your username. You will enter exactly the same key into any other device or computer you wish to access PreViser. Once those devices or computers are registered with this key you will not be prompted for it again, UNLESS:

1. You change the Internet browser you are using. This is because this key is stored locally in browser memory, so if you change browsers, you will have to re-enter the key to use the new browser, or
2. You clear out all saved passwords and files from your browser memory. The 'look and feel' of this function differs by browser. But, if a computer that could access PreViser, but now no longer can, it may be due to clearing the browser memory and the computer no longer has the stored encryption key. When this happens, you will be prompted in OHIS to setup Privacy Encryption again for this computer, as seen in the graphic above.

3. You have clicked on Options/Settings on the left menu within OHIS and clicked “Unregister Computer.”

Lost Encryption Keys

As noted above, if you lose your key we cannot retrieve it for you. **However**, if you have any computer or device that can access PreViser and display patient records, that computer or device will have the key stored locally and you can view that value to find out what it is.

To access this function:

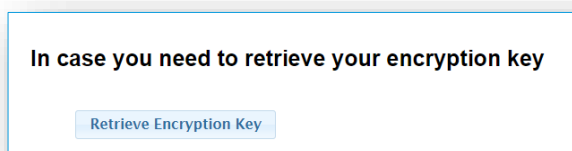
1. Go to the computer/device that can access PreViser and display patient records.
2. Select **Options / Settings** from the left hand navigation bar.



3. On the next page, select **Encryption Password**.



4. On the next page, click on the link to **Retrieve Encryption Key**, and the encryption key value will display.




Lost Username or Password

If you forget your username and password, you can retrieve or reset them from My Account at <https://my.previser.com>. Here you will see these options:

Log in

Username

Password

 Log in

[Retrieve Password](#)

[Retrieve Username](#)

You can reset your password by clicking on the above link, or retrieve your username by clicking on that link. You must have the email address you provided when you first registered for PreViser. Don't hesitate to call PreViser support at **1.888.854.0007 for help** with your account.

Time Out Feature

To ensure compliance with new HIPAA IT security requirements, users of the PreViser OHIS will see a new pop-up appear after 10 minutes of data entry inactivity, and 10 minutes after that you will be automatically logged off the system if you do not click the "Continue" button. If you are automatically logged off, any unsaved data will be lost and will need to be re-entered to complete the assessment. If you believe you are going to be longer than 10 minutes away from data entry, be sure to click "Save for Later" so you do not lose any unsaved clinical data entered.

PreViser Oral Health Information Suite (OHIS) previserdental - Karen O'Connor (Log Out)

Powered by **PREVISER** **Patient Details**

Browse Patients

Create Patient

Unfinished Assessments

Options / Settings

Admin / Practice Reports

Support

MyAccount

To deactivate patient, uncheck this box.

☒ Active

Select Patient Insurance Company

None / Other

Please select the insurance company of the patient you are evaluating.

Please enter the name as it appears on the dental insurance card.

Patient First Name *

Start New Assessment

Comprehensive →
Perio, Caries, and Oral Cancer

Perio →

Caries →

er →

Security Alert

Due to inactivity, your session will time out in 09:02.

An unfinished patient chart or risk assessment will not be saved. Click Continue below to return to PreViser before you are logged off. If you are completing a risk assessment for a patient and you are going to be away from PreViser for longer than 10 minutes, be sure to click "Save for Later" so patient information is not lost.

Log Off Continue

Notes

Clinical Access Code

Assessments

Date Submitted	Scores
	Continue →

ent Records From

ntist

USING THE OHIS

Once a computer is registered with your encryption key you will see the following Home Page:

Creating Patients

In order to assess a patient, a PreViser patient record must be created. Click on the **Create Patient** link or the **Create New Patient** button on the Home Page.

The following Patient Details page will display: **Select Insurance Company**. This field will associate the patient with a dental insurer. If you do not see the insurer of the patient listed, or if the patient is uninsured, select **None** from the drop down list.

Depending on the insurance company and the way in which they are using PreViser scores, selecting an insurer will change the appearance of the patient details page. Please see the information contained in the section on [Special data fields by insurer](#).

Patient First Name Required field.

Patient Last Name Required field.

Gender: Patient identifies as
Required field

Patient Date of Birth: Required field.

Phone Number Optional field, rarely collected.

Notes Optional field.

It is important to note that fields without an asterisk are not submitted to the insurance carrier, i.e., any notes added to the notes section are not viewable by the insurance carrier.



Browse Patients
Create Patient
Unfinished Assessments
Options / Settings
Admin / Practice Reports
Support
MyAccount

Create a New Patient

Select Patient Insurance Company	
None / Other	
Please select the insurance company of the patient you are evaluating.	
Please enter the name as it appears on the dental insurance card.	
Patient First Name *	
<input type="text"/>	
Patient Last Name *	
<input type="text"/>	
Gender: Patient identifies as *	
<input type="radio"/> Female <input type="radio"/> Male	
Patient Date of birth *	
ex. 7/25/1967	
Phone Number	
<input type="text"/>	
Notes	
<input type="text"/>	
Save	

Patient Verification

When an insurance company is selected, the OHIS can verify the data that you enter with the information the insurance company has on file, if the insurer has established the necessary connection to the OHIS. This can vary from one insurance company to another.

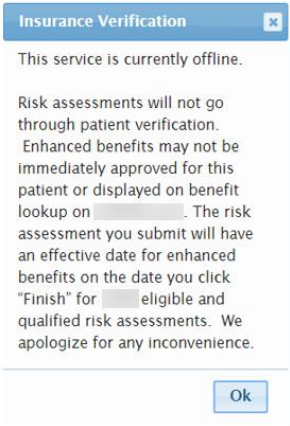
If you enter information that does not match what is in the insurance company's records, the graphic to the right will display:

Verifying Patient Information

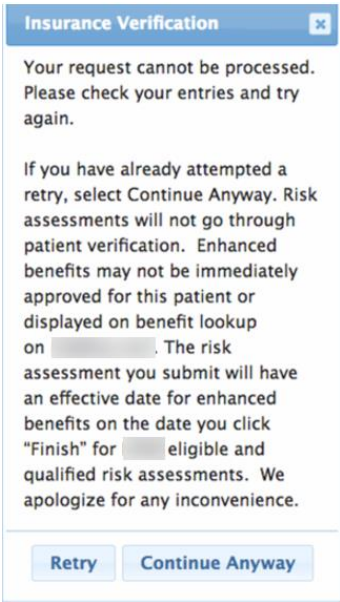
Please wait...

Patient not found. Please verify your entries and correct. Please see FAQ/Tips for assistance. If still not found, please call our Customer Service department at 1.800.
Ok

If the patient verification system of the insurance carrier is offline or unreachable, the insurance verification dialog displays, as seen in the graphic to the right here:



If the verification request did reach the verification service, but was not processed successfully and the verification service will send back an error message. Sometimes checking and clicking retry will send the request for verification again. However, if the user clicks "Continue Anyway," and the user enters the correct information about the patient, the enhanced benefits for the patient may not immediately be displayed or approved on the benefits lookup.



Patient Details Page

Once the patient details page has been populated, click **Save**. If you selected **None** for the insurance status of the patient, you will be prompted to verify the patient is uninsured:

Confirmation Required

No insurance selected, do you want to continue?

Cancel

Ok

Once you confirm this status, an alert message will confirm that your patient was created successfully:

Alert

Successfully Created Patient

Ok

Then the patient details page will display.

Patient details page:

The following functions can now be accessed from this page:

Deactivate patient

Uncheck the **Active** box and the patient record will not display on the list of active patients on the Home Page.

Start New Assessment

Click one of these choices to open a Caries, Periodontal, Oral Cancer, or Comprehensive Assessment.

PreViser Oral Health Information Suite (OHIS)

previserdental - Karen O'Connor (Log Off)

Powered by

PREVISER

Browse Patients

Create Patient

Unfinished Assessments

Options / Settings

Admin / Practice Reports

Support

MyAccount

Patient Details

To deactivate patient, uncheck this box.

☒ Active

Select Patient Insurance Company

None / Other

Please select the insurance company of the patient you are evaluating.

Please enter the name as it appears on the dental insurance card.

Patient First Name *

Brian

Patient Last Name *

Jones

Gender: Patient identifies as *

☐ Female

☒ Male

Patient Date of birth *

2/3/1990

Phone Number

Notes

Save

Start New Assessment

Comprehensive →
Perio, Caries, and Oral Cancer

Perio →

Caries →

Oral Cancer →

Recent Assessments

Exam	Exam Date	Date Submitted	Scores
Caries	2/26/2019		Continue →

Import Patient Records From Another Dentist

Clinical Access Code

Import →

Patient Engagement

If the provider selects an insurance company from the dropdown list, the provider has an opportunity to collect the patient's email address. This will allow the insurance company to send targeted messages to the patient based on the patient's risk and severity scores. To enable this feature, you must check the box to "confirm that the patient wishes to receive additional information about their oral health," and enter the patient's email address twice:

Patient Engagement (Optional)

Entering the patient's e-mail address and checking the authorization box will allow your patient to receive oral wellness messaging that will increase their compliance with your recommended treatment plan.

☐ I have confirmed that this patient wishes to receive additional information about their oral health.

Patient (or Parent's if under 18) Email Address

Confirm Email Address

Import Patient Records From Another Dentist

This function allows a patient who has been assessed at another office to have their PreViser assessments imported into your OHIS records.

For example, if a patient is assessed at a general dentist's office and then referred to a periodontist, the general dentist's assessment can be imported into the periodontist's OHIS records by entering the Clinical Access Code from the patient report generated by the general dentist into the periodontist's OHIS records. This report number can be found on the patient report here:

Home > Test Patient

Correct Report Print

Gum Disease Risk and Health Assessment

Liscannor Exam Date: 5/16/2017
 Dentistry Date Submitted: 5/16/2017
 Prepared for: Test Patient
 Prepared by: Karen, Liscannor Dentistry
 81 Kinelty Road Liscannor, NH 03110
 113-538-1237

Powered by **PREVISER**

Overview

Your Clinical Access Code: 7124E247-C61C-479C-8B3D-EE0230D207CE

Gum Disease Risk Score: **5** out of 5
 5 Very High Risk
 4 High Risk

Your Gum Forecast

The Clinical Access Code can be entered into the patient details of the new provider's PreViser account as seen here:



Patient Details

Browse Patients

Create Patient

Unfinished Assessments

Options / Settings

Admin / Practice Reports

Support

MyAccount

To deactivate patient, uncheck this box.

☒ Active

Select Patient Insurance Company

None / Other

Please select the insurance company of the patient you are evaluating.

Please enter the name as it appears on the dental insurance card.

Patient First Name *

Brian

Patient Last Name *

Jones

Gender: Patient identifies as *

☐ Female☒ Male

Patient Date of birth *

2/3/1990

Phone Number

Notes

Save

Start New Assessment

Comprehensive →
Perio, Caries, and Oral Cancer

Perio →

Caries →

Oral Cancer →

Recent Assessments

Exam	Exam Date	Date Submitted	Scores
Caries	2/26/2019		Continue →

Import Patient Records From Another Dentist

Clinical Access Code

Import →

Recent Assessments

Once a patient has been assessed and you return to the patient details page for that person, a new section will appear on this page that shows all prior assessments. Example:

Recent Assessments

Exam	Exam Date	Date Submitted	Scores
^C Caries	2/26/2019	2/26/2019	R:5 D:100
^C Perio	2/26/2019	2/26/2019	R:5 D:97 S:0
^C Oral Cancer	2/26/2019	2/26/2019	R:5
Oral Cancer	2/26/2019	2/26/2019	R:5
Perio	2/26/2019	2/26/2019	R:5 D:82 S:0
Caries	2/26/2019	2/26/2019	R:5 D:100

The type, date and scores for the assessment are shown, where

R = the risk of the patient for the disease type; and

D = the restorative needs or periodontal disease severity scores;

S = the periodontal disease stability score for the patient.

Where **Continue** -> appears instead of scores, this will be an assessment that was not completed but [saved to complete later](#). Clicking on a “Recent Assessment will return to the Oral Health Report corresponding to the assessment done at that date. **Note:** If you select to [Model This Patient](#), the assessment will not appear in this section because modeled assessments are not recorded in the PreViser database and disappear once you close the modeled patient report.

Assessing a patient

Once a patient record has been created, you can perform a clinical PreViser assessment on that patient by clicking on which assessment you wish to perform.

Caries Assessment

If the Caries link is clicked, the following page displays:

PreViser Oral Health Information Suite (OHIS) previserdental - Karen O'Connor (Log Off)

Powered by **PREVISER** Create Caries Exam For [Brian Jones](#)

Browse Patients	Caries Exam Date 02/20/2019
Create Patient	Prepared By MZ
Unfinished Assessments	Responsible Clinician Please select the dentist responsible for this patient's care from the list Karen O'Connor
Options / Settings	
Admin / Practice Reports	
Support	Next →
MyAccount	

Caries Exam Date

This is the date the assessment was performed. The current date is the default date for this field. Generally this is going to be within a day or so of when the assessment data is entered. However, clinicians may wish to create a record of the patient's PreViser scores by entering data from prior examinations. You can adjust the exam date to reflect the prior dates with corresponding clinical information for those dates.

Note that if the exam date is more than 90 days in the past for a finished assessment, the [Correct](#) function is disabled.

Prepared By

This is the person who is doing the assessment, which always should be the clinician logged in to OHIS with their PIN.

Once these fields are populated, click **Next**.

To calculate the risk of caries as well as a numeric value for the restorative needs of the patient, you must provide a number of clinical observations. The information that needs to be provided changes as the age of the patient changes. This is because juveniles with deciduous teeth will have different risk factors to those of older patients. You will only need to answer those questions that pertain to the age of the patient being assessed. A comprehensive list of these questions follows:

Which teeth have most recently been in the mouth for at least 12 months?

Target tooth for patients up to age 18. Possible choices include Primary incisors; Primary molars; Permanent first molars; Permanent second molars; or Premolars.

For the most recently erupted tooth described above, what is its status?

Possible choices include Sound or sealed or only occlusal restorations; Have interproximal restorations; Have pits, fissures or other defects; Show early decalcification or are carious.

How many months has the patient been without primary caries or an incipient caries lesion?

Possible answers include 36 or more months; 24 - 35 months; 12 - 23 months; or 1 or more teeth have had caries in the last 12 months. Primary caries is defined as the first carious lesion on a tooth surface, and not one beneath or at the margin of a restoration.

Liquids containing sugar are given in crib or bed by bottle or consumed during the day in a Sippy cup

Will appear for small children only. Possible responses include Yes; No.

Parent or caregiver is low socioeconomic status or health literacy

Will appear for small children only. Possible responses include Yes; No.

Mother or caregiver has been caries free for less than 12 months

Will appear for small children only. Possible responses include Yes; No.

1 or more teeth have an exposed root

Will appear for adults only. Possible answers include Yes; No.

Bacteria culture includes elevated MS and/or LB level

Possible answers include Yes; No; or No culture or test is available.

How many erupted teeth are present in the oral cavity?

The number of erupted teeth excludes third molars and is limited to a maximum of 28 teeth.

How many natural teeth have any type of restoration, including crowns and veneers?

The number of erupted teeth excludes third molars and is limited to a maximum of 28 teeth. Implants are excluded from this count.

How many natural teeth currently require treatment because of caries or a defective restoration?

The number of natural teeth that require treatment because of caries or a defective restoration excludes third molars and is limited to the number of erupted teeth answered previously.

How many natural teeth have primary caries or an incipient caries lesion?

Possible answers include 0 (none); 1 or 2; 3 or more.

Clinical Conditions

Indicate by checking a box if any of these conditions exist:

- Oral hygiene improvement is needed
- Dry mouth or inadequate saliva flow

Treatment History and Considerations

Indicate by checking a box if any of the following is true about the patient:

- Dental care frequency is NOT as regular as advised
- Developmental problems or special health care needs
- Teeth have been extracted due to caries in last 6 months
- Fluoride varnish applied in last 6 months
- Has orthodontic appliance, space maintainer, or obturator
- Snacks or beverages containing sugar are consumed between meals 4 or more times per day
- Patient drinks fluoridated water
- Nonprescription fluoride products other than water are used
- Chlorhexidine used for at least 1 week per month for last 6 months (appears only for age 8 and older)
- Xylitol products have been used 4 times daily for last 6 months (appears only for age 8 and older)

- Calcium & phosphate toothpaste has been used during last 6 months (appears only for age 8 and older)
- Recreational drug/alcohol use (appears only for age 8 and older)
- Has had a major change in health (heart attack, stroke, etc.) (appears only for age 19 and older)

Report Options - Caries

When the clinical data and observations have been indicated, you have a few options on how you would like the data handled and how the report, if submitted, will appear.

Report Settings

☐ Treatment Options



Model This Patient

Save For Later

Finish

Treatment Options

If this box is checked, possible treatment options that will address the clinical conditions indicated will be available for viewing or printing. These will appear on page two of the patient report, for example:

PREVENTION - ACTIVE INTERVENTION	
	Prevention is based on risk and risk factors. This is treatment before disease is observed. Repair of the effects of disease rarely results in a condition as good as the original state. Preventing disease eliminates tooth loss and reparative treatment.
COMMUNICATION	
	Dental treatment cannot keep you healthy. Your participation is very important. The most common patient behaviors that influence health and treatment success are oral hygiene, nutrition, and smoking. You may receive advice, including resources for you to change to health-promoting behaviors.
VISIT THE DENTIST	
	Symptoms are warning signs that frequently appear too late in the disease process for the simplest, most predictable, and least costly treatment. Regular visits to the dentist to detect disease in the early stages can prevent more complex and expensive treatment. Better still are regular visits for preventive care targeted to your risk factors.
ORAL HYGIENE	
	Oral Hygiene is of particular importance to you. You should learn improved methods of maintaining your teeth and gums.

Model This Patient

Selecting this option will submit the data you provided to the PreViser web service and return scores on a patient report. However, these scores will not be recorded anywhere, (i.e., saved for access at a future date). They will not be transmitted to an insurance company, nor will they appear in the patient record within the OHIS. The purpose of this function is to show the patient what their PreViser scores will be if they accept the treatment indicated and can be used to stimulate high levels of case acceptance.

Save For Later

This option will save the assessment data as you have entered it but will not submit the data to the PreViser web service. The saved assessment will be accessible in the [Unfinished Assessments](#) file available from the Home Page.

The saved assessment is also accessible within the Patient Details screen listed under “Recent Assessments,” as seen in the graphic below. It will display with the exam date, no date submitted, and the word “continue,” indicating the assessment has yet to be completed.

PreViser Oral Health Information Suite (OHIS) previserdental - Karen O'Connor (Log Off)

Powered by **PREVISER**

Patient Details

To deactivate patient, uncheck this box.

☒ Active

Select Patient Insurance Company

None / Other

Please select the insurance company of the patient you are evaluating.

Please enter the name as it appears on the dental insurance card.

Patient First Name *

Brian

Patient Last Name *

Jones

Gender: Patient identifies as *

☐ Female

☒ Male

Patient Date of birth *

2/3/1990

Phone Number

Notes

Save

Start New Assessment

Comprehensive →
Perio, Caries, and Oral Cancer

Perio →

Caries →

Oral Cancer →

Recent Assessments

Exam	Exam Date	Date Submitted	Scores
Caries	2/25/2019		Continue →

Import Patient Records From Another Dentist

Clinical Access Code

Import →

The “Save for Later” function can be used to prepare a patient assessment before the patient presents (see [Best Practices](#)). This can save time in a busy examination day as many of the data requested can be filled out in advance from the patient chart and saved to be completed during the examination.

Finish

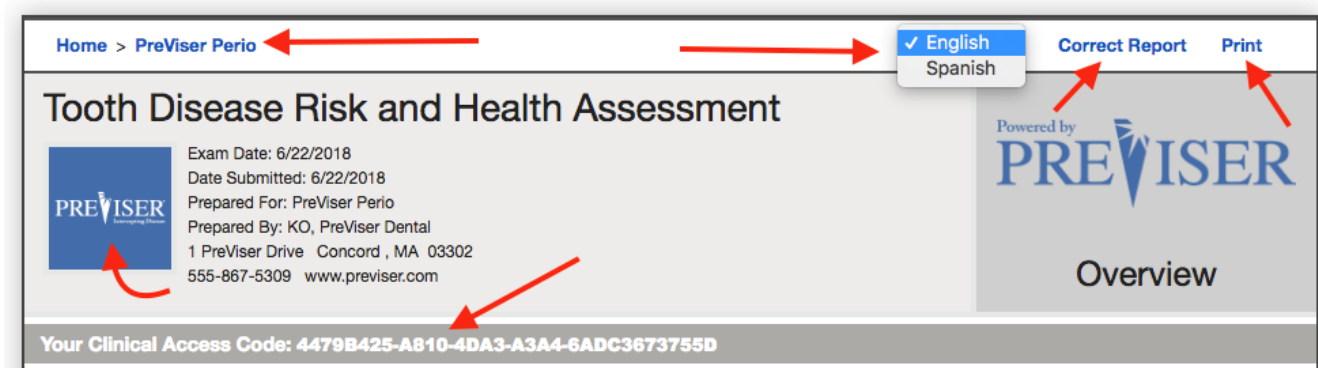
If this option is selected, the data you have recorded will be submitted to the PreViser web service and a patient report will be returned including the Report Settings you have indicated.

The Caries/Restorative Patient Report

An example of the full Caries Patient Report can be found in [Appendix A](#).

Report Header

The top of the report includes the name of the patient as well as other information and functionality:



Home

Clicking this link at the top of the report returns you to the PreViser Browse Patient List.

Patient Name

Clicking this link at the top of the report returns you to the patient details page for the patient being assessed.

English/Spanish translation toggle

Clicking on English will display the report in English. Clicking on Spanish will display the report in Spanish.

Correct Report

Clicking this choice returns you to the data collection form for the inputs that generated the report. You would use this if you think you made an error in entering the clinical observations. If you wish to correct a report, click this link and make whatever changes you need to, then click **Finish** to resubmit the assessment. A corrected report will replace the incorrect report when the data is being sent to an insurance company for oral health communication or benefit determination.

Print

Clicking this choice will direct the report to a printer.

Picture

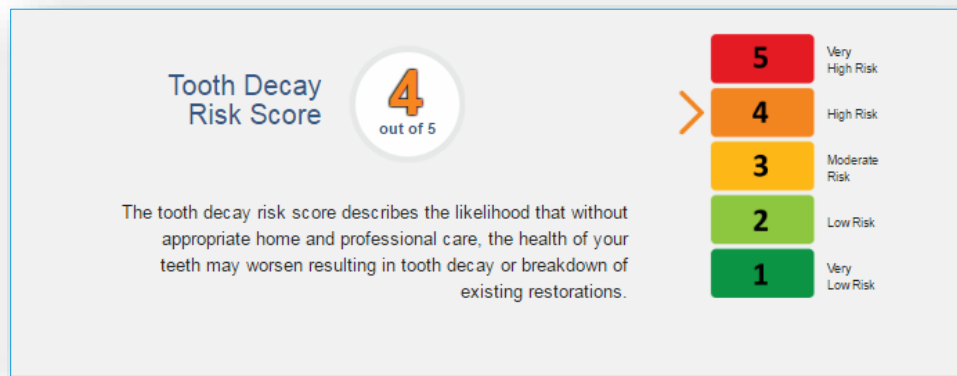
As described [above](#), whatever image meeting the specifications described will be displayed on the patient report. Generally, this will be an image of the dentist, staff, or the office.

Clinical Access Code

This [code](#) can be used to share the report with another PreViser provider office.

Caries Risk

The PreViser patient reports are designed to give the patient clear scores for oral disease risk and severity. For caries, the report delivers a 1 to 5 score for caries risk based on the Caries Management by Risk Assessment (CAMBRA) approach to risk determination. This score is a reflection of the likelihood that the patient will experience new caries, or that existing restorations will become defective. The OHIS caries risk method expands the concept of CAMBRA, which predicts primary caries, to include secondary caries. Example:

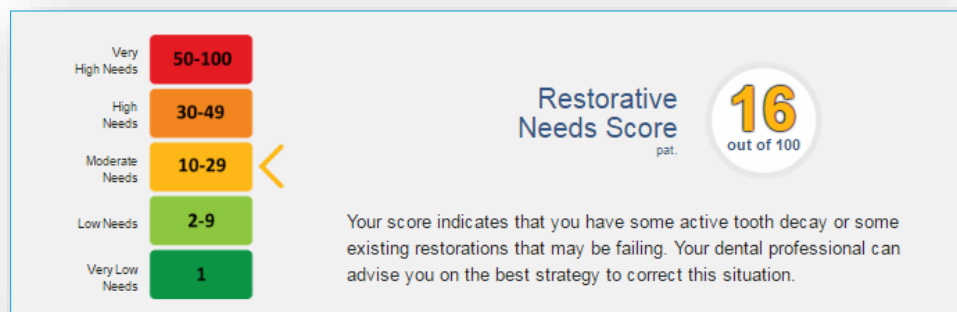


In this example, the patient presents with a High risk of new defects and would then be a prime candidate for adult sealants, fluoride treatments and regular dental care. This score can be used to help the patient understand why professional oral care is so important.

Restorative Needs Score

This score is a reflection of the current status of the dentition on a 1 to 100 scale where:

- A score of 1 is a pristine dentition without carious lesions or any restorations
- A score between 2 and 9 is a sound dentition with no current defects but with an increasing percentage of the total dentition in a restored state as the score increases from 2 to 9
- A score between 10 and 100 represents a dentition with current active treatment needs, either due to a new carious lesion or because an existing restoration is defective. As the score becomes greater, a greater percentage of the total dentition is affected by a defect. A score of 100 would indicate that all teeth in the dentition have a defect.
 - Example: If a patient has only one tooth remaining, and that tooth had a lesion, the restorative needs score would be 100. When restored, the score would drop to 9.
 - Example: If a patient has a full dentition, and one tooth had a lesion the restorative needs score would be 10. When restored, the score would drop to 2.
 - Example:

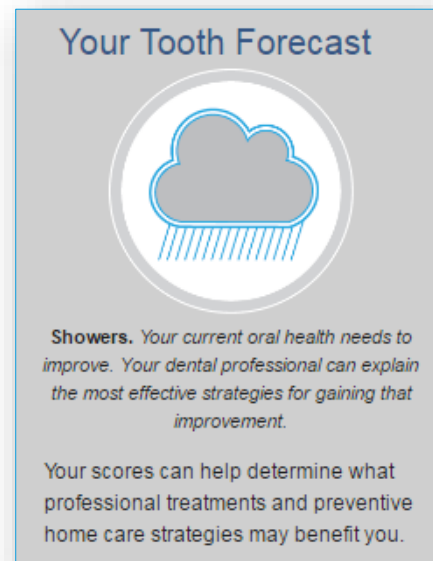


In this example, the patient presents with Moderate Needs as indicated by a restorative needs score of 16. This equates to up to three defects that require therapeutic intervention.

In addition to a risk and restorative needs score, the caries patient report includes other elements of interest.

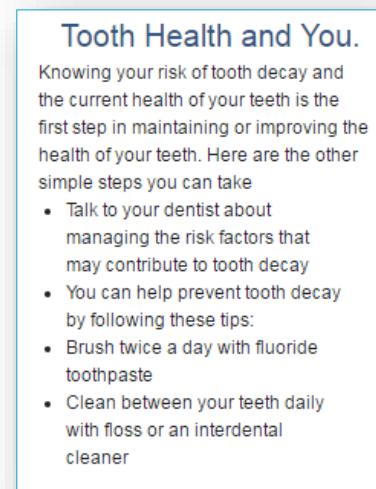
Tooth Forecast

This pictorial helps describe the overall prognosis for the patient **IF** they do not accept the preventive and therapeutic interventions recommended. For the patient with the risk and restorative needs scores shown above, the Tooth Forecast would display as:



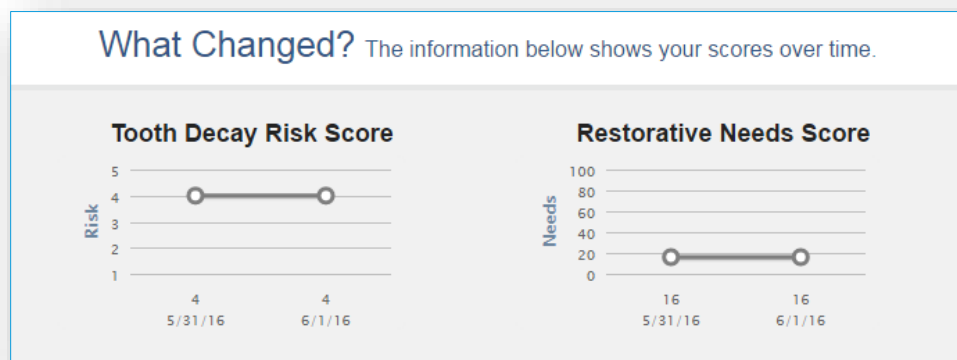
Tooth Health and You

This section gives the patient a quick summary of strategies that can help improve their oral health. Example:



What Changed

This section of the report shows the patient what has happened to their risk and restorative needs scores over time. It is a powerful motivator for patient compliance as it shows what the impact of your professional care has been, or if the patient has not been compliant, what the negative impacts of that non-compliance may be. Example:



Treatment Options

As discussed above, this section of the report describes the preventive activities that may be helpful to improving the patient's oral health. It can be optionally printed by checking the box in the [Report Settings](#) section.

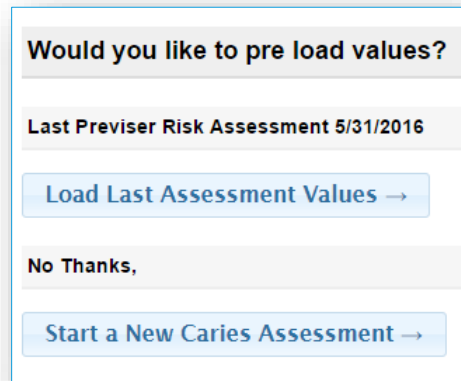
Clinical Inputs

This final section of the report lists the data you provided that were used to calculate the report scores. It is not intended to be shared with the patient, so generally is not printed for the patient to take home, but can be used to understand why scores are calculated as they are. Example:

Clinical Access Code: FFHBPPYJMM Patient ID: 0cb3b3e4-da86-48ae-ad0f-5e401110f2bd			
Caries Risk: 4		Restorative Needs: 16	
Visible Teeth: 26		Teeth with restorations: 14	
Teeth with Caries: 2		Primary Caries: 0 (None)	
1 or more teeth have an exposed root: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		How many months has the patient been without primary caries or an incipient caries lesion? Primary caries is the first carious lesion on a tooth surface, not one beneath or at the margin of a restoration.: <input type="checkbox"/> 36 or more <input checked="" type="checkbox"/> 24-35 <input type="checkbox"/> 12-23 <input type="checkbox"/> 1 or more teeth has had caries in the last 12 months	
Bacteria culture includes elevated MS and/or LB level?: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> No culture or test is available		Snacks or beverages containing sugar are consumed between meals 4 or more times per day: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Patient drinks fluoridated water: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Nonprescription or prescription fluoride products other than water are used: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Chlorhexidine used for at least 1 week per month for last 6 months: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Xylitol products have been used 4 times daily for last 6 months: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Calcium & phosphate toothpaste have been used during last 6 months: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Recreational drug/alcohol use: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Has had a major change in health (heart attack, stroke, etc.) during the past 12 months: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Oral hygiene improvement is needed: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Dry mouth or inadequate saliva flow: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Dental care frequency is NOT as regular as advised: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Development problems or special health care needs: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Teeth have been extracted due to caries in last 36 months: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Fluoride varnish applied in last 6 months: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Has orthodontic appliance, space maintainer, or obturator: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Pre-loading values from prior assessment

After the first caries risk/restorative needs assessment has been done, the OHIS allows you to pre-load prior entered values from a previous assessment. This saves a great deal of time, as it allows you to only address clinical conditions that have changed since the last assessment. On recall, selecting the Caries assessment from the patient details page will display this screen:

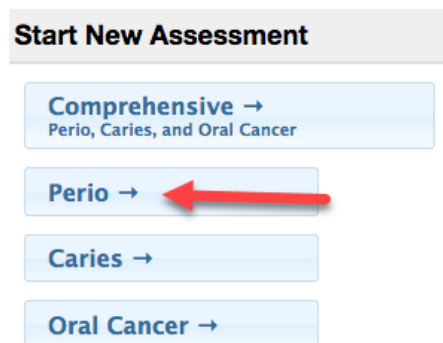


A screenshot of a web-based dialog box titled "Would you like to pre load values?". Below the title, it displays "Last Previser Risk Assessment 5/31/2016". There are two main buttons: "Load Last Assessment Values →" and "Start a New Caries Assessment →". A "No Thanks," label is positioned between the two buttons.

If you wish to pre-load prior examination values, just click the **Load Last Assessment Values** and then just update those observations that have changed. Alternately, you can begin an entirely new assessment by clicking "Start a New Caries Assessment."

Periodontal Disease Assessment

From the Patient Details page, you can perform a periodontal disease risk and severity assessment by clicking the **Perio** link:



A screenshot of a "Start New Assessment" menu. It contains four buttons: "Comprehensive →" (with subtext "Perio, Caries, and Oral Cancer"), "Perio →", "Caries →", and "Oral Cancer →". A red arrow points to the "Perio →" button.

The following information is required to perform a periodontal disease risk and severity assessment:

Perio Exam Date

This is the date the assessment was performed. The current date is the default date for this field. Generally this is going to be within a day or so of when the assessment data is entered. However, clinicians may wish to create a record of the patient's PreViser scores by entering data from prior examinations. You can adjust the exam date to reflect the prior dates with corresponding clinical information for those dates.

Note that if the exam date is more than 90 days in the past for a finished assessment, the [Correct](#) function is disabled.

Prepared By

This is the person who is doing the assessment, which always should be the clinician logged in to OHIS with their PIN.

Smoking Status (cigarettes only)

If the patient never smoked, leave the default box checked. However if the patient currently smokes or has smoked in the past, check the appropriate boxes.

Smoking	If the patient smokes or did smoke, indicate quantity here	If the patient smokes, or did smoke, indicate how long here	If the patient quit, indicate how long ago here
<input checked="" type="checkbox"/> Never Smoked	Smoke(d)	Smoke(d)	Quit
	<input type="radio"/> less than 10 cigs/day	<input type="radio"/> less than 10 years	<input type="radio"/> less than 10 years ago
	<input type="radio"/> 10 or more cigs/day	<input type="radio"/> 10 or more years	<input type="radio"/> 10 or more years ago

Question: Why aren't pipes, cigars, and smokeless tobacco included in this question?

Answer: PreViser only uses research data for weighting different risk factors. These other forms of tobacco have not yet been researched, so PreViser algorithms cannot properly weight them as risk factors.

Diabetic Status

If the patient is diabetic, and based on HbA1c %, indicate the current level of diabetic control.

Diabetic Status			
	Good Control	Fair Control	Poor Control
HbA1c (%)	less than 6.5	6.5 - 7.5	greater than 7.5
AM fasting plasma glucose (mg/dl)	90 - 104	105-130	greater than 130

☒ Not diabetic or unknown
 ☐ Good diabetic control
 ☐ Fair diabetic control
 ☐ Poor diabetic control

General Observations

Indicate by checking a box if any of the following is true about the patient:

- Oral hygiene improvement is needed
- Scaling and root planing for any tooth has been done
- Furcation involvements exist
- Vertical bone lesions exist
- Dental care frequency is NOT regular as advised
- Periodontal surgery for pockets has been done
- Subgingival restorations are present
- Subgingival calculus detected by x-ray or exam

Deepest Pocket Per Sextant from the Gingival Margin to the Base of the Sulcus

One of the advantages of the PreViser OHIS is that it can calculate a scientifically valid periodontal severity description with sextant measurements for the deepest pocket per sextant rather than a full mouth description. As a result, most hygienists will perform a periodontal assessment to discover the deepest pocket. Once this clinical assessment is completed, enter the deepest pocket per sextant encountered. Four responses per sextant are possible:

- All pocket depths within the sextant are less than 5 mm
- At least one pocket within the sextant is 5 - 7 mm
- At least one pocket within the sextant is greater than 7 mm
- There are no teeth in the sextant

In addition, if bleeding occurs in the sextant on probing, note this by checking the appropriate box.

X-ray Distance from CEJ to Bone Crest

As is the case with pocket depths, only the greatest distance between the CEJ and the bone crest needs to be recorded. These measurements are made simply by a visual inspection of the bite wing x-rays. Five responses per sextant are possible:

- All distances within the sextant are less than 2 mm. This would visually appear to be normal bone height.
- At least one distance within the sextant is 2 - 4 mm. This would visually appear to be between normal and excessive bone loss.
- At least one distance within the sextant is greater than 4 mm. This would visually appear to be excessive bone loss.
- There are no teeth in the sextant.

In addition, for the anterior sextants if no x-ray is available, check the appropriate box. Severity scores can still be calculated without anterior measurements, although with a slight decrease in accuracy.

Report Options - Perio

Once the data input form for the perio risk assessment is completed similar options to the Caries patient report can be made:

Report Settings

☐ Treatment Options

Include in report

☒ AAP, Surgical Emphasis
 ☒ Do you wish to indicate the use of laser therapy?

Model This Patient

Save For Later

Finish

Treatment Options

This is a selectable feature and if the box is checked suggested treatments will be included in the report. These options address specific clinical defects noted and are stack ranked as to effectiveness on a scale including **Generally Most Effective**; **May be Most Effective**; and **Less Likely to be Most Effective**. Example:

Active intervention you may need, unless stable and without inflammation:

Generally Most Effective
 May Be Most Effective
 Less Likely To Be Most Effective

POCKETS LESS THAN 5MM	CONSIDER
<p>Pockets that are less than 5mm deep can have the most thorough removal of bacteria and calculus. However, all deep pockets were at one time less than 5mm with the optimal probing depth being 3mm or less.</p>	<div> Prophy or Maintenance Chemo therapeutic </div>

As noted on the report, these possible therapeutic recommendations will apply unless the patient is “**stable and without inflammation.**” This exception is noted since a patient may have residual pocketing or bone loss but lack current inflammation, so active intervention is not needed in preference to maintenance procedures.

As in the case of the Caries assessment, [Home Care](#) is an enhancement.

AAP, Surgical Emphasis

If you are a periodontist, perform your own surgeries as a general dentist, or prefer to refer patients with periodontitis to a periodontist you may wish to check this box. The effect will be to elevate for consideration surgical options for therapy consistent with AAP guidelines.

Do you wish to indicate the use of laser therapy?

If lasers are part of your armamentarium, you can check this box and an additional message will appear in the Treatment Recommendations section. Example:

Our office uses the latest in laser technology to ensure the best outcome for our patients. The use of lasers may influence which therapy is the most suitable for you.

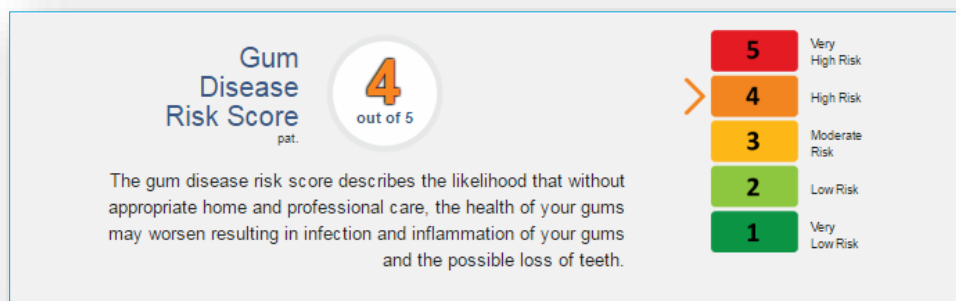
[Model This Patient](#), [Save for Later](#) and [Finish](#) all function the same as they do for the Caries assessment report.

The Perio Patient Report

Similar to the Caries Report, the Perio patient Report offers the same features for [English/Spanish report translation](#), [Correcting](#), [Printing](#), and [Image Insertion](#). An example of the full Perio Patient Report can be found in [Appendix A](#).

Periodontal Disease Risk

The PreViser patient reports are designed to give the patient clear scores for oral disease risk and severity. For periodontitis, the report delivers a [scientifically validated](#) 1 to 5 score for perio risk. This score is a reflection of the likelihood that the patient will develop periodontitis, or that existing perio severity will worsen. Example:



Periodontal Disease Severity

This score is a reflection of current perio severity on a 1 to 100 scale where:

- A score of 1 is perfectly healthy mouth without bleeding, pocketing or bone loss;
- A score between 2 and 3 indicates sextant bleeding on probing (gingivitis) but no pocketing or bone loss;
- A score between 4 - 10 indicates mild periodontitis;
- A score between 11 - 36 indicates moderate periodontitis;
- A score between 37 - 100 indicates severe periodontitis.

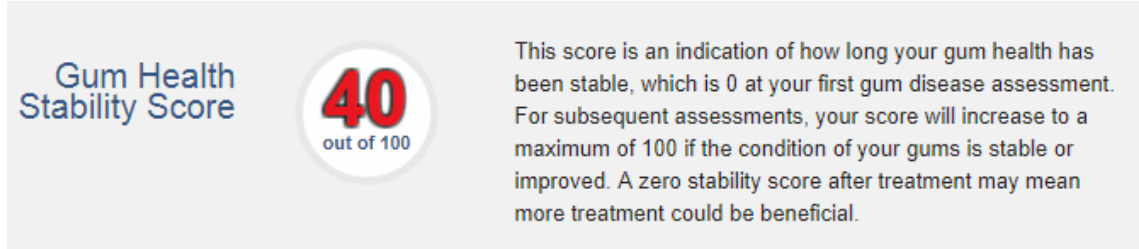
Within each of these ranges the condition varies between localized to generalized, and each increment in the score represents a measurable improvement or deterioration in periodontal status. Example:



Hint: A patient who has experienced periodontitis and bone loss won't grow back that bone, so their score can never return to a score of "1." However, without inflammation, the patient can be considered to be 'Stable' in the sense that they are not suffering from continuing deterioration or current inflammation.

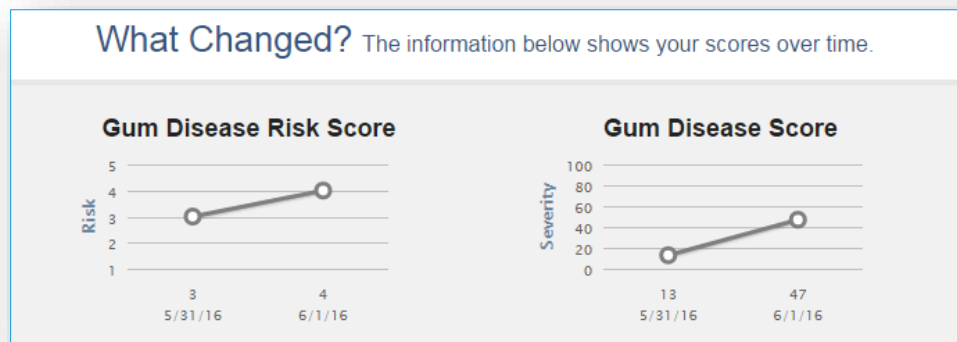
Periodontal Disease Stability

This score is a reflection of how long the patient has been stable with unchanged scores. The purpose of this score is to “reward” and motivate patients whose risk and severity scores are constant by having their stability continue to climb. The score will always start at a baseline of zero, and continue to rise at a maximum of 10 points per year, not exceeding 100 points which represents 10 full years of periodontal stability. The graphic below indicates that the patients’ periodontal status has remained stable for 4 years. If the patient was stable for 4.5 years, the patient’s score would be 45. If the patient’s periodontal status regresses, or the patient’s exhibits periodontal bone loss, the gum health stability score would reset to zero. Example:

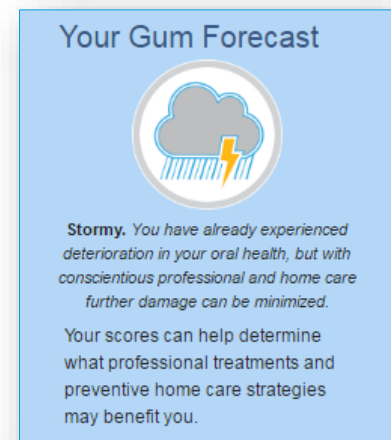


What changed?

As with the caries assessment report, this section shows how the patient’s periodontal disease risk and severity have changed over time, and illustrate the value of compliance with recommended treatments, or the consequences of a lack of compliance. Example:



Similar to the Caries assessment report, the Oral Health Forecast includes a pictorial description of a Gum Forecast:



As well as a brief guide to how to improve one's periodontal health:

Gum Disease and You.

Knowing your gum health scores is the first step in improving, or maintaining the health of your gums. Here are other simple steps you can take:

- Talk to your dentist about managing any factors that contribute to elevated risk of disease.
- Ask your dentist how gum disease may impact other serious health ailments such as heart disease, Alzheimer's, strokes and diabetes.
- Take advantage of new products and technologies that may help you optimize your health through improved home care. A customized home care report is available that can make recommendations based on your gum health scores.

If [Treatment Options](#) were indicated to be included in [Report Settings](#) before the data was submitted to PreViser, those print, followed by the Clinical Inputs you provided that generated the scores shown on the report.

Oral Cancer Risk Assessment

From the Patient Details page, you can perform oral cancer risk assessment by clicking **Oral Cancer**:

Start New Assessment

Comprehensive →
Perio, Caries, and Oral Cancer

Perio →

Caries →

Oral Cancer →

The following information is required to perform an oral cancer risk.

Oral Cancer Exam Date

This is the date the assessment was performed. The current date is the default date for this field. Generally this is going to be within a day or so of when the assessment data is entered. However, clinicians may wish to create a record of the patient's PreViser scores by entering data from prior examinations. You can adjust the exam date to reflect the prior dates with corresponding clinical information for those dates.

Note that if the exam date is more than 90 days in the past for a finished assessment, the [Correct](#) function is disabled.

Prepared By

This is the person who is doing the assessment. Usually this is a hygienist, but it can be any person responsible for the accuracy of the assessment data.

Has History of oral cancer

Check the box if this applies to the patient.

Cigarette Smoking

If the patient never smoked cigarettes, leave the default box checked. However if the patient currently smokes or has smoked in the past, check the appropriate boxes. If mistakenly you have selected that the patient is a smoker, or has quit when they have not yet quit, you can clear all fields by checking the “never smoked” box on the left.

Smoking	If the patient smokes or did smoke, indicate quantity here	If the patient smokes, or did smoke, indicate how long here	If the patient quit, indicate how long ago here
<input checked="" type="checkbox"/> Never Smoked	Smoke(d) <input type="radio"/> less than 10 cigs/day <input type="radio"/> 10 or more cigs/day	Smoke(d) <input type="radio"/> less than 10 years <input type="radio"/> 10 or more years	Quit <input type="radio"/> less than 10 years ago <input type="radio"/> 10 or more years ago

Pipes/Cigars

If the patient never smoked pipes or cigars, leave the default box checked. However if the patient currently smokes or has smoked pipes or cigars in the past, check the appropriate boxes, indicating how much they smoked, how long they smoked and if they have quit, how long ago they did quit.

<input checked="" type="checkbox"/> Never Smoked	Smoke(d) <input type="radio"/> less than 1 cigar or pipes/day <input type="radio"/> 1 or more cigar or pipes/day	Smoke(d) <input type="radio"/> less than 10 years <input type="radio"/> 10 or more years	Quit <input type="radio"/> less than 10 years ago <input type="radio"/> 10 or more years ago
--	---	---	---

Smokeless (Chewing) Tobacco

If the patient never used smokeless tobacco, leave the default box checked. However if the patient currently uses or has used smokeless tobacco in the past, check the appropriate boxes, indicating how much they used, how long they used and if they have quit, how long ago they did quit.

<input checked="" type="checkbox"/> Never Used	Use <input type="radio"/> Occasionally Use <input type="radio"/> Daily Use	Use <input type="radio"/> less than 10 years <input type="radio"/> 10 or more years	Quit <input type="radio"/> less than 10 years ago <input type="radio"/> 10 or more years ago
--	---	--	---

Alcohol Use (Average number of drinks consumed in the past year)

Using the definition of what constitutes a “drink” below, indicate whether the patient is a non-drinker or the number of drinks per day consumed.

Note: 1 drink equals		
Beer	16 ounces or 1 pint	5% alcohol
Wine	6 ounces or 175 milliliters	12% alcohol
Spirits	1.5 ounces or 45 milliliters	40% alcohol

☐ None
 ☐ Less than 1 drink per day
 ☐ 2 drinks per day
 ☒ 1 drink per day
 ☐ 3 or more drinks per day

Report Settings

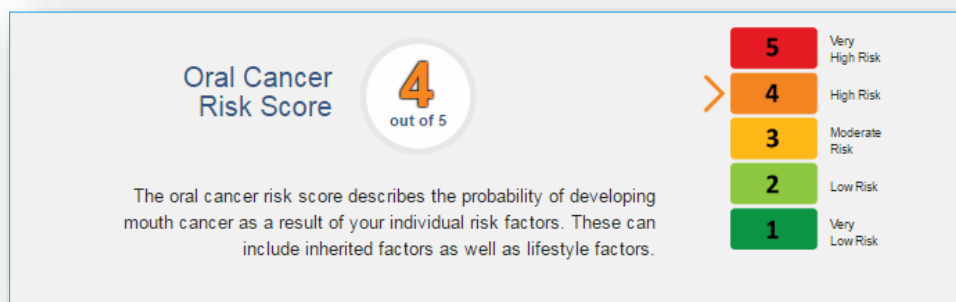
If you wish to have **Treatment Options** included in the report, check that box. [Model This Patient](#), [Save For Later](#) and [Finish](#) all function the same as with the caries or perio assessments.

The Oral Cancer Risk Report

Similar to the Caries and Perio Reports, the Oral Cancer patient Report offers the same features for [English/Spanish report translation](#), [Correcting](#), [Printing](#), and [Image Insertion](#). An example of the full Oral Cancer Patient Report can be found in [Appendix A](#).

Oral (Mouth) Cancer Disease Risk

The PreViser patient reports are designed to give the patient clear scores for oral disease risk and severity. For oral cancer, the report delivers a risk score from 1 to 5. This score is a reflection of the possibility that the patient will experience an oral cancer lesion. Example:



Note: Because a person has elevated risk for mouth cancer does not mean they are likely to experience this terrible, if infrequent disease. Rather it means that they have exhibited risk factors that increase the possibility of developing the disease. It is helpful to explain to a patient that just because your home is at elevated risk for catching on fire due to the proximity of flammable brush or trees surrounding the home it doesn't mean the house will catch on fire - just that the risk factors increase that possibility. The oral (mouth) cancer risk score is designed to encourage the patient to reduce the risk factors associated with the disease, like the use of smokeless tobacco or alcohol.

The oral (mouth) cancer report includes a clear explanation of what oral cancer is and how important your services can be in the early detection of the disease. Example:

What is oral cancer?

Oral cancer is a cancer that develops in any part of your mouth. This includes your tongue, under your tongue, your gums, your lips, the roof of your mouth, and inside your cheeks.

Finding oral cancer saves lives: Mouth cancer can be cured if detected early, when it has just started to develop. Treatment for the early stages may not require surgery, although if the disease spreads, surgery is likely to be necessary.

The early signs of oral cancer


- A red or white patch that lasts for more than three weeks
- An ulcer that lasts for more than three weeks
- A lump or swelling that lasts for more than three weeks

Many of these early signs might seem similar to normal problems in your mouth. However, normal problems will clear up by themselves in two or three weeks. Problems that last for three weeks or longer should be brought to the attention of your dentist.

Thanks to King College London and Dr. Crispian Scully for their contribution to the content of this report. Note: ALL types of "screening" can produce false negatives/positives and NO algorithms are 100% effective.

As is the case with Caries and Perio, this report also shows a pictorial representation of an Oral Forecast. Example:

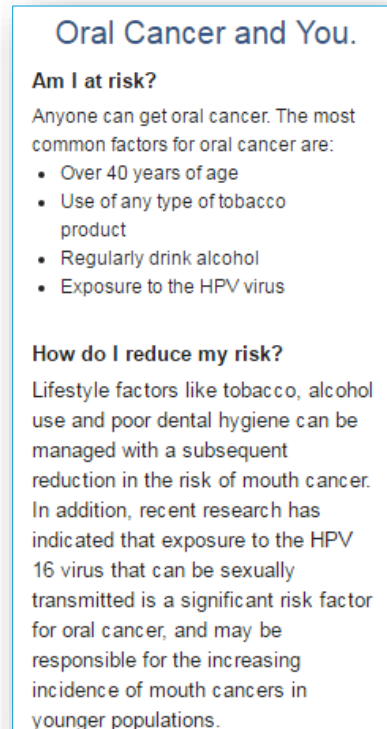
Your Oral Forecast



Showers. *Your current oral health needs to improve. Your dental professional can explain the most effective strategies for gaining that improvement.*

Your scores can help determine what professional treatments and preventive home care strategies may benefit you.

Finally, a brief discussion of Oral Cancer and You is provided. Example:

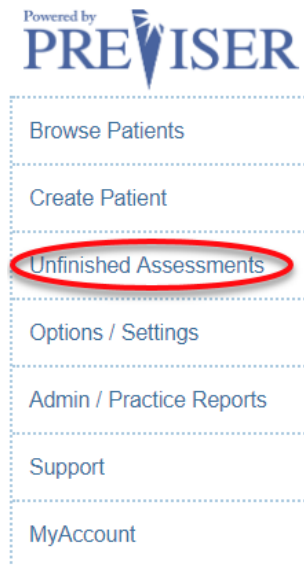


If you select **Treatment Options** in **Report Settings** before submitting the clinical data to generate the report, those recommendations will be included. **Clinical Inputs** will also display and can be printed optionally to help guide the patient on what risk factors may be elevating their risk scores.

Comprehensive Assessment

The comprehensive assessment includes the questions from all three assessments (caries, perio, and oral cancer). It would typically be done as the first PreViser assessment on a patient; or when a patient first presents for services; or on request from an insurer. It combines the caries, perio and oral cancer assessments into one document, and while it takes time to complete, provides a comprehensive guide to the complete treatment plan a new or existing patient will benefit from. On submittal, the comprehensive report is returned in the form shown in [Appendix A](#) of this document.

Unfinished Assessments



Accessed through the left hand navigation bar, the **Unfinished Assessments** link give access to all assessments you elected to [Save For Later](#) rather than [Modeling](#) or [Finishing](#) the assessment. Example:

Unfinished Assessments				
Exam Date	Patient	Prepared By	Type	
6/1/2016	Fred Test	theresa	Caries	<button>Delete</button>

By clicking on the assessment line, the data input page for the unfinished assessment will open and you can then provide the missing information prior to submitting the assessment by clicking **Finish**. Alternately, you can delete the assessment by clicking the **Delete** button.

Options / Settings

Option / Settings provides three functions: setting/retrieving your encryption password, unregistering this computer, and for Primary Users/Admins, editing recommendations within the Home Care Report.

Powered by
PREVISER

PreViser Oral Health Information Suite (OHIS)

Options / Settings

Browse Patients

Create Patient

Unfinished Assessments

Options / Settings

Admin / Practice Reports

Support

MyAccount

Browse Patients

Create Patient

Unfinished Assessments

Options / Settings

Admin / Practice Reports

Support

MyAccount

Set my encryption password

Encryption Password

Unregister this computer

Unregister Computer

Home Care Report

☒ Enable Home Care Report

Edit Recommendations

[Home](#) | [Privacy](#) | [End User License Agreement](#) © copyright 2003 - 2019 PreViser Corp. All Rights Reserved.

Set my encryption password

As described [above](#), this encryption key is central to PreViser's ability to protect your patient information. Clicking on this link displays the same screen that is launched automatically when you first try to access PreViser from a computer or device that does not yet have an encryption key entered. However, if the computer or device already has a key stored in local browser memory, an additional option to retrieve the encryption key from local memory is also available.

To retrieve the stored key, click the **Retrieve Encryption Key** link and the key will display.

Setup Privacy Encryption for this computer

Important: The [Encryption Key](#) you enter below:

- Will encrypt your patient's private information.
- Must not be lost. We cannot retrieve it for you.
- Must be the same key used by all computers in the office.

If your office has not made up an Encryption Key:

- Make up your own and enter it below.
- Choose at least 8 letters or numbers.

If your office has an Encryption Key:

- Enter the same [Encryption Key](#) in the text box below.

Enter your encryption key.

Re-Enter your encryption key.

Save

In case you need to retrieve your encryption key

Retrieve Encryption Key

Unregister Computer

This function allows you to remove the stored encryption key from local browser memory storage. This feature is rarely used, but may be useful when one wishes to access another username's PreViser account from a computer already registered with an encryption key associated with a different username.

If you wish to remove the store key, click the **Unregister Computer** link, then confirm by clicking the link below:

You are about to Unregister this computer

Caution: This will erase the encryption key associated with this browser and computer. This will mean that you will need to re-enter the encryption key before you can access any patient records created with that encryption key.

Unregister Computer

Warning: Do not unregister the computer unless you know what the key being removed is. You can access that key as described in the previous section.

Home Care Report

The professional recommendation for self-care and home care products is a critical component in optimizing patient oral health outcomes. To assist OHIS users systematize their home care recommendations for these products and instructions on how to use these products, a Home Care Report option is automatically enabled for all users. However, the Home Care Report options can be changed only by Admin OHIS users.

To view and edit the default recommendations, click on edit recommendations.

PreViser Oral Health Information Suite (OHIS)

Powered by **PREVISER**

Options / Settings

- Browse Patients
- Create Patient
- Unfinished Assessments
- Options / Settings**
- Admin / Practice Reports
- Support
- MyAccount

Set my encryption password

Encryption Password

Unregister this computer

Unregister Computer

Home Care Report

☒ Enable Home Care Report

Edit Recommendations

[Home](#) | [Privacy](#) | [End User License Agreement](#) | © copyright 2003 - 2019 PreViser Corp. All Rights Reserved.

You have the option of making product recommendations for six risk categories – caries risk 1 or 2 (very low and low), caries risk 3 (moderate), caries risk 4 or 5 (high and very high), perio risk 1 or 2 (very low and low), perio risk 3 (moderate), and perio risk 4 or 5 (high and very high). Within these risk categories there are seven different product categories that you can optionally suggest as beneficial for a given risk category – Toothpaste, Mouth Rinse, Manual Tooth Brush, Power Tooth Brush, Interdental Device, Prescription Toothpaste and Prescription Mouth Rinse.

For the initial launch of the Home Care Report, we collaborated with Colgate, who provided images and text to go along with the products that they believe you might consider for a given risk and product category. However, you are free to recommend any alternative product you think best for your patients.

When you click on Edit Recommendations, you will see this screen:

Home Care Report Recommendations


Choose which report and risk score combination to customize recommendations

Caries 1,2 Caries 3 Caries 4,5 Perio 1,2 Perio 3 Perio 4,5

Edit home care recommendations for Caries Risk 1,2

Toothpaste

Colgate Recommendation: YES




Name: COLGATE® TOTAL® CLEAN MINT TOOTHPASTE
Description: Fights germs for 12 hours. Helps prevent Plaque, Gingivitis, Tartar Build-Up, Cavities and Bad Breath.

Remove

Change Recommendation

Mouth Rinse

Colgate Recommendation: YES



Name: COLGATE® TOTAL®ADVANCED PRO-SHIELD™MOUTHWASH
Description: Colgate® Total® Pro-Shield™ is an alcohol free mouthwash that kills 99% of germs on contact and offers 12-hour germ protection with continued twice daily use, even after eating and drinking. It significantly reduces plaque, helps prevent gingivitis and freshens breath. Peppermint Blast® Flavor

Remove

Change Recommendation

Manual Toothbrush

Colgate Recommendation: YES

At the top of this page, you'll see the different risk categories arranged as tabs on the page. Within each risk category are the seven product categories that allow you to manage in one of four ways:

First, you can default to the recommendation Colgate has made for the products they believe are appropriate for the risk category.

Second, you can remove a recommendation for a product category altogether by clicking on "Remove".

Third, you can alter the recommendation for a risk and product category by clicking "Change Recommendation."

Fourth, if a product category has no default recommendation, you can add one by clicking "Add".

Changing or Adding Product Recommendations

If you prefer to recommend another or add a product for a risk category and click on Change Recommendation you will see this screen:

Home Care Report Recommendations

[Mouth Rinse >](#)

Caries 1,2	Caries 3	Caries 4,5	Perio 1,2	Perio 3	Perio 4,5
------------	----------	------------	-----------	---------	-----------

Toothpaste recommendation for Caries Risk 1,2

Provider Recommended Product

Product Name

Baking Soda

We prefer baking soda for our patients at low risk of tooth decay. It is inexpensive, and has just the right amount of abrasion for optimal cleaning.

[Return to List](#) [Update Product Recommendation](#)

Here you can enter the name of the product you prefer over the default recommendation, and provide whatever text you think appropriate. If you click on “Return to List,” your edits will not be saved and you will be returned to the prior screen. If you click “Update Product Recommendation,” your edits will be saved, and you will see this screen:

Home Care Report Recommendations

[Return to List](#)[Mouth Rinse >](#)

Caries 1,2	Caries 3	Caries 4,5	Perio 1,2	Perio 3	Perio 4,5
------------	----------	------------	-----------	---------	-----------

Toothpaste recommendation for Caries Risk 1,2

Provider Recommended Product

Product Name

Baking Soda

We prefer baking soda for our patients at low risk of tooth decay. It is inexpensive, and has just the right amount of abrasion for optimal cleaning.

[Return to List](#) [Update Product Recommendation](#)

Original Product Partner Recommendation

COLGATE® TOTAL® CLEAN MINT TOOTHPASTE

[Use Original Recommendation](#)

Fights germs for 12 hours. Helps prevent Plaque, Gingivitis, Tartar Build-Up, Cavities and Bad Breath.

If you change your mind on wording, or wish to revert to the original default product recommendation, you can either make changes to your recommendation, or click the “Use Original Recommendation” box.


You can set up your recommendations easily for a product category by clicking on the tabs to scroll through the different risk categories, or click on the highlighted category link in the upper right hand corner to scroll through the product categories for a given risk category.

Generating the Home Care Report

When you are finished setting up the products you wish to recommend for each risk category, you can proceed to generate Home Care Reports for your patients as part of their OHIS assessment. You will see a new button in the header of the report:

Home > TestFirst TestLast English Print

Comprehensive Risk and Oral Health Assessment



Exam Date: 8/22/2016
Date Submitted: 8/22/2016
Prepared For: TestFirst TestLast
Prepared By: Shane, Test Practice
123 Any St. USA Test City, WA 98273
360-123-9877

Home Care Report

Your Clinical Access Code: 78EB04A8-79F9-478F-8E5B-9B3732FF77A2

Your Oral Disease Risk and Health Assessment Scores:

Tooth Decay Risk Score

5
out of 5


The tooth decay risk score describes the likelihood that without appropriate home and professional care, the health of your teeth may worsen resulting in tooth decay or breakdown of existing restorations.

Restorative Needs Score
pat.

14
out of 100

Your score indicates that you have some active tooth decay or some existing restorations that may be failing. Your dental professional can advise you on the best strategy to correct this situation.

Your Comprehensive Forecast



Showers. Your current oral health needs to improve. Your dental professional can explain the most effective strategies for gaining that improvement.

Your scores can help determine what professional treatments and preventive home care strategies may benefit you.

When you click on this new link, the following screen will display:

Home > TestFirst TestLast > Comprehensive Report > Home Care Report

Home Care Report Recommendations

Exam Date: 8/22/2016
Date Submitted: 8/22/2016
Prepared for: TestFirst TestLast

Perio Risk: 3
Caries Risk: 5

Toothpaste

AM: COLGATE® TOTAL® CLEAN MINT TOOTHPASTE

Alternate Toothpaste

Mouth Rinse

No Recommendation

Recommend Mouth Rinse

Manual Brush

COLGATE® 360® TOOTHBRUSH

Alternate Manual Brush

Prescription Rinse

No Recommendation

Recommend Prescription Rinse

Prescription Toothpaste

PM: 5000 PPM RX TOOTHPASTE

Alternate Prescription Toothpaste

Additional Notes:

Please make sure to schedule your next examination within the next 3 months.

Generate Report

In this example, the patient presents with perio risk of 3 and caries risk of 5 as a result of a comprehensive assessment that generates scores for caries, periodontal disease and oral cancer. Recommendations that are automatically made when both perio and caries risk scores are present use the following logic:

Whatever the highest risk is, use the recommendations for that risk category. If both perio and caries risk scores are the same value, use the caries risk product recommendations.

On this “intermediary screen” you have a couple of options. First, you can change the product being recommended from the matrix you set up by selecting a different product from the drop down list:

Alternate Toothpaste

Alternate Toothpaste

Baking Soda - Caries Risk 1,2

COLGATE® TOTAL® CLEAN MINT TOOTHPASTE - Caries Risk 3

COLGATE® TOTAL® CLEAN MINT TOOTHPASTE - Perio Risk 1,2

COLGATE® TOTAL® CLEAN MINT TOOTHPASTE - Perio Risk 3

COLGATE® TOTAL® CLEAN MINT TOOTHPASTE - Perio Risk 4,5

Not Recommended

You can also add notes that will appear on the Home Care Report in the “Additional Notes” section. This page lets you adjust the recommendations based on individual patient characteristics that warrant changes from your standard set of recommendations.

Once you are satisfied with your recommendations, click “Generate Report”, and your report with any additional comments will be displayed and can be printed and given to the patient:

Home > TestFirst TestLast > Comprehensive Report > Home Care Report

Print

Our recommendations for appropriate home care products

Exam Date: 8/22/2016

Date Submitted: 8/22/2016

Prepared For: TestFirst TestLast

Prepared By: Shane, Test Practice

Test Practice




123 Any St. USA Test City, WA 98273

360-123-9877

Perio Risk: 3

Caries Risk: 5

Our home care product recommendations are generally based on the highest risk score calculated for you based on your examination. Our experience is that the following products will likely help you maintain the best oral health possible and avoid future disease.

Toothpaste AM: COLGATE® TOTAL® CLEAN MINT TOOTHPASTE	Fights germs for 12 hours. Helps prevent Plaque, Gingivitis, Tartar Build-Up, Cavities and Bad Breath.	
Manual Brush COLGATE® 360® TOOTHBRUSH	Revolutionizes oral care by cleaning the teeth, tongue, cheeks and gums and removes more Bacteria. Multi-level bristles to remove more plaque in between teeth. Raised cleaning tip cleans hard-to-reach places.	
Prescription Toothpaste PM: 5000 PPM RX TOOTHPASTE	Because of one or more risk factors your teeth are more vulnerable to tooth decay and cavities. To help protect against further decay, brushing with a prescription level fluoride toothpaste daily helps strengthen tooth enamel to protect against the effects of decay causing acids. Using a 5000ppm toothpaste as prescribed could benefit your oral health by: Fewer areas of decay, Stronger teeth, and Fewer cavities, reduced fillings.	

Please make sure to schedule your next examination within the next 3 months.

The products identified in this report have been selected or identified by your treating dentist and/or hygienist based on his or her clinical judgment, your PreViser scores, and your statements to your treating dentist or hygienist. These product recommendations are not prescriptions, nor are they intended to establish a standard of care. They are not a substitute for professional judgment, advice, diagnosis, or treatment. Neither PreViser Corporation nor the product manufacturer(s) make any warranty, express or implied, as to the suitability, availability, or clinical efficacy of the recommended products.

To disable the Home Care Report, select Options and Settings, and uncheck the “Enable Home Care Report” checkbox:

PreViser Oral Health Information Suite (OHIS)

Powered by

PREVISER

Browse Patients

Create Patient

Unfinished Assessments

Options / Settings

Admin / Practice Reports

Support

MyAccount

Options / Settings

Set my encryption password

Encryption Password

Unregister this computer

Unregister Computer

Home Care Report

☒ Enable Home Care Report

Edit Recommendations

[Home](#) | [Privacy](#) | [End User License Agreement](#) | © copyright 2003 - 2019 PreViser Corp. All Rights Reserved.

Admin / Practice Reports

The options of “Patient by Risk Report” will generate a list of patients by risk and disease severity scores from completed assessments of your patients within your Browse Patient list.

In compliance with HIPAA system logging requirements, the “Request Activity Log” is a means to request an activity log via email. For more information on HIPAA system logging requirements, please go to: <https://www.hhs.gov/hipaa/for-professionals/compliance-enforcement/audit/protocol/index.html>.

Note: Activity logs are extremely large, and should only be requested in response to a requirement from the Office of Civil Rights Enforcement.

PreViser Oral Health Information Suite (OHIS)

Powered by

PREVISER

Browse Patients

Create Patient

Unfinished Assessments

Options / Settings

Admin / Practice Reports

Support

MyAccount

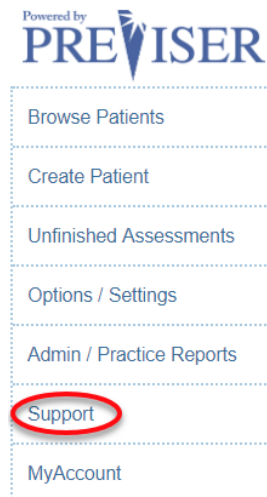
Practice Reports

[Patient By Risk Report - Perio](#)

[Patient By Risk Report - Caries](#)

[Patient By Risk Report - Oral Cancer](#)

[Request Activity Log. Allow 3 business days.](#)



Again, clicking on Support will reroute the user to the PreViser website with support links to documentation, and phone and email to contact for support at <https://www.previser.com/clinical-assessment-support/>



Special Data Fields by Insurer

A number of insurance carriers are using PreViser scores to power their oral wellness programs. For patients insured by these carriers, additional data fields are required:

- **Subscriber ID:** This is the number that identifies the patient. It can be found on the patient's dental insurance card.
- **Relationship of the Patient to the subscriber:** The subscriber is generally an employee of a company. The options for this field are:
 - **Self** - the patient is the subscriber
 - **Spouse/Partner** - the patient is the spouse or life partner of the subscriber
 - **Dependent** - the patient is a dependent of the patient

PreViser Oral Health Information Suite (OHIS)



Patient Details

Browse Patients	To deactivate patient, uncheck this box.
Create Patient	<input checked="" type="checkbox"/> Active
Unfinished Assessments	Select Patient Insurance Company
Options / Settings	<input type="text"/>
Admin / Practice Reports	<small>Please select the insurance company of the patient you are evaluating.</small>
Support	Subscriber Number
MyAccount	<input type="text"/>
	Group Number
	<input type="text"/>
	Relationship Code
	<input type="text"/>
	Patient Engagement
	Entering the patient's e-mail address <u>and</u> checking the authorization box will allow your patient to receive oral wellness messaging that will increase their compliance with your recommended treatment plan.
	<input type="checkbox"/> I have confirmed that this patient wishes to receive additional information about their oral health.
	Patient (or Parent's if under 18) Email Address *
	<input type="text"/>
	Confirm Email Address *
	<input type="text"/>

- **Patient engagement:** Confirmation the patient wishes to receive emailed oral health information from their insurance carrier. Examples of such information would be the availability of enhanced benefits that follow their PreViser scores; information on the importance of good oral health for the diabetic patient; etc. It is strongly recommended that the patient accept this information, as it is an important part of elevating their appreciation for the oral health services you provide.
- **Email address of the patient (or parent/guardian):** This is the email address that will receive oral health messaging.

Return of Benefits

Some insurance carriers offer a return of benefits after an assessment has been completed for a verified patient. This feature offers the dental office and clinician chair side return of benefits which includes maximum allowance, remaining allowance, limitations and enhanced benefits if a patient qualifies for additional benefits based on the patient's OHIS scores, to name a few.


Check Benefits

After the OHIS has been "finished," the OHIS report will display with a "Check Benefits" button for a verified patient. This button will not display for a patient with no insurance, or a patient who has an insurance carrier who does not support this feature. In order to access the benefits of the patient, the user must click the "Check Benefits" button at the time the report is generated. The "Check Benefits" button will not display on previous assessment reports.


[Home](#) >

[Correct Report](#) [Print](#)

Gum Disease Risk and Health Assessment



Exam Date: 9/19/2017
Date Submitted: 9/19/2017
Prepared for:
Prepared by: Dr. PreViser, PreViser CI Practice
2 Delta Dr Concord, NH 03301
603-715-8100



Powered by
PREVISER

[Check Benefits](#) Click "Check Benefits"

Overview

Your Clinical Access Code: B35FDF68-5468-4F43-A7B9-5D2C81E6B13F

Gum Disease Risk Score

pat.

1
out of 5

The gum disease risk score describes the likelihood that without appropriate home and professional care, the health of your gums may worsen resulting in infection and inflammation of your gums and the possible loss of teeth.

5 Very High Risk

4 High Risk

3 Moderate Risk

2 Low Risk

1 Very Low Risk

>

Severe Gum Disease	37-100
Moderate Gum Disease	11-36
Mild Gum Disease	4-10
Gingivitis	2-3
Healthy	1


Gum Disease Score

pat.

1
out of 100

< Congratulations! Your score indicates your gums are healthy.

Your Gum Forecast



Sunny. Congratulations! You should expect to maintain a sunny forecast if you keep on doing what you have been doing.

Your scores can help determine what professional treatments and preventive home care strategies may benefit you.

Gum Disease and You.

Knowing your gum health scores is the first step in improving, or maintaining the health of your gums. Here are other simple steps you can take:


- Talk to your dentist about managing any factors that contribute to elevated risk of

Retrieving Benefits


After the “check benefits” button has been clicked, the user will see that button changes to “retrieving benefits” as seen in the graphic below

[Home](#) > [John Smith](#)
Correct Report Print

Tooth Disease Risk and Health Assessment



Exam Date: 9/19/2017
 Date Submitted: 9/19/2017
 Prepared for: John Smith
 Prepared by: Dr. PreViser, PreViser CI Practice
 2 Delta Dr Concord, NH 03301
 603-715-8100



Overview

[Retrieving Benefits...](#)

Your Clinical Access Code: **BE7ED456-50D8-421C-9E7C-FF0B9FAEB09D**

Tooth Decay Risk Score

5

out of 5

The tooth decay risk score describes the likelihood that without appropriate home and professional care, the health of your teeth may worsen resulting in tooth decay or breakdown of existing restorations.

>

5

Very High Risk

4

High Risk

3

Moderate Risk


2

Low Risk

1

Very Low Risk

Your Tooth Forecast



Showers. Your current oral health needs to improve. Your dental professional can explain the most effective strategies for gaining that improvement.

Your scores can help determine what professional treatments and preventive home care strategies may benefit you.

Tooth Health and You.

Knowing your risk of tooth decay and the current health of your teeth is the first step in maintaining or improving the health of your teeth. Here are the other

Very High Needs

50-100

High Needs

30-49

Moderate Needs

10-29

Low Needs

0-9

Restorative Needs Score

10

out of 100

Your score indicates that you have some active tooth decay or some


Benefit Return Display:

When the user clicks on “Check Benefits” the current benefits of the verified patient will display, as seen in the following graphic:

Home >

Correct Report Print

Gum Disease Risk and Health Assessment



Exam Date: 9/19/2017
Date Submitted: 9/19/2017
Prepared for: [REDACTED]
Prepared by: Dr. PreViser, PreViser CI Practice
2 Delta Dr Concord, NH 03301
603-715-8100

Check Benefits

Overview

Information displayed on this website is based on current available benefits and patients' eligibility. It is possible this information may change, even retroactively, based on information provided by the account. Should changes occur in eligibility or benefits, there is no guarantee of payment.

Company Providing Coverage:

Today's Date:

9/19/2017 13:19:10

Coverage Level:

FAM

Dependent Age Maximum:

26

*This group participates in the [REDACTED] Oral Wellness program.

** This individual has additional benefits for CARIES through the [REDACTED] Oral Wellness program. For more information on what these additional preventive benefits are please click here. [Click Here](#)

Patient							
Name	Relationship	Birthday	Effective Date	Termination Date			
[REDACTED]	s	[REDACTED]	01/01/2017	Active			

Maximums (Benefit Period: 01/01/2017 - 12/31/2017)							
Service Type	Duration	Total	Remains	Total	Remains	Total	Remains
Dental Care (Individual)	Benefit Year	\$2,000.00	\$2,000.00	\$2,000.00	\$2,000.00	\$2,000.00	\$2,000.00
Orthodontics (Individual)	Benefit Year	\$2,500.00	\$2,500.00	\$2,500.00	\$2,500.00	\$2,500.00	\$2,500.00

Deductibles (Benefit Period: 01/01/2017 - 12/31/2017)							
No Deductibles							

Benefit Levels							
Service Type	Waiting Period	Patient Pays	Deductible Applies	Patient Pays	Deductible Applies	Patient Pays	Deductible Applies
Adjunctive Dental Services	NONE	0%	NO	0%	NO	0%	NO
Anesthesia	NONE	0%	NO	0%	NO	0%	NO


The return of benefits can only be accessed at the time the finished report has been completed and the OHIS report displays. In other words, you cannot access the return of benefits on any saved reports, because the benefits may not be current.

Additional Enhanced Benefits Information:

After the benefit return displays, the user also has the option to expand on the enhanced benefit plan design for the patient, by clicking on “click here,” as seen in the following graphic:

Home > John Smith

Correct Report Print



Exam Date: 9/19/2017
Date Submitted: 9/19/2017
Prepared for: John Smith
Prepared by: Dr. PreViser, PreViser CI Practice
2 Delta Dr. Concord, NH 03301
603-715-8100

Powered by

PREVISER

Overview

Check Benefits

Information displayed on this website is based on current available benefits and patients' eligibility. It is possible this information may change, even retroactively, based on information provided by the account. Should changes occur in eligibility or benefits, there is no guarantee of payment.

Company Providing Coverage:

Today's Date:

Coverage Level:

Dependent Age Maximum:

9/19/2017 13:35:44

FAM

26

*This group participates in the Oral Wellness program.

** This individual has additional benefits for CARIES through the Oral Wellness program. For more information on what these additional preventive benefits are please click here [Click Here](#)

Patient							
Name	Relationship	Birthday	Effective Date		Termination Date		
John Smith	s	4/13/1971	01/01/2017		Active		

Maximums (Benefit Period: 01/01/2017 - 12/31/2017)

Service Type	Duration					Out-of-Network	
		Total	Remains	Total	Remains	Total	Remains
Dental Care (Individual)	Benefit Year	\$2,000.00	\$2,000.00	\$2,000.00	\$2,000.00	\$2,000.00	\$2,000.00
Orthodontics (Individual)	Benefit Year	\$2,500.00	\$2,500.00	\$2,500.00	\$2,500.00	\$2,500.00	\$2,500.00

Deductibles (Benefit Period: 01/01/2017 - 12/31/2017)


No Deductibles

The graphic below displays after clicking on “click here” in the previous graphic. This gives the PreViser user more information about the Enhanced Benefit plan design tailored to that specific patient.

Home > John Smith

Correct Report
Print

Tooth Disease Risk and Health Assessment



Exam Date: 9/19/2017
Date Submitted: 9/19/2017
Prepared for: John Smith
Prepared by: Dr. PreViser, PreViser C1 Practice
2 Delta Dr Concord, NH 03301
603-715-8100

Check Benefits

Information displayed on this website is based on the information provided. Information may change, even retroactively, due to changes in eligibility or coverage.

Company Providing Coverage:
Today's Date:
Coverage Level:
Dependent Age Maximum:


*This group participates in the [redacted] plan.

** This individual has additional benefits for preventive benefits are please click here. [Click here](#)

Enhanced Benefit Details

This individual has additional benefits for CARIES through the [redacted] Oral Wellness program, which includes the caries susceptibility test (D0425) once per 12 month period; prophylaxis codes (D1120, D1110, D4346, D4910) combination up to 4 per 12 month period; and Full Mouth Debridement (D4355) once per [redacted]

Ok



Information on what these additional

Name	Relationship	Birth Date	Termination Date
John Smith	S	4/13/1971	01/01/2017

Active

Maximums (Benefit Period: 01/01/2017 - 12/31/2017)

Service Type	Duration	In-Network		Out-of-Network	
		Total	Remains	Total	Remains
Dental Care (Individual)	Benefit Year	\$2,000.00	\$2,000.00	\$2,000.00	\$2,000.00
Orthodontics (Individual)	Benefit Year	\$2,500.00	\$2,500.00	\$2,500.00	\$2,500.00

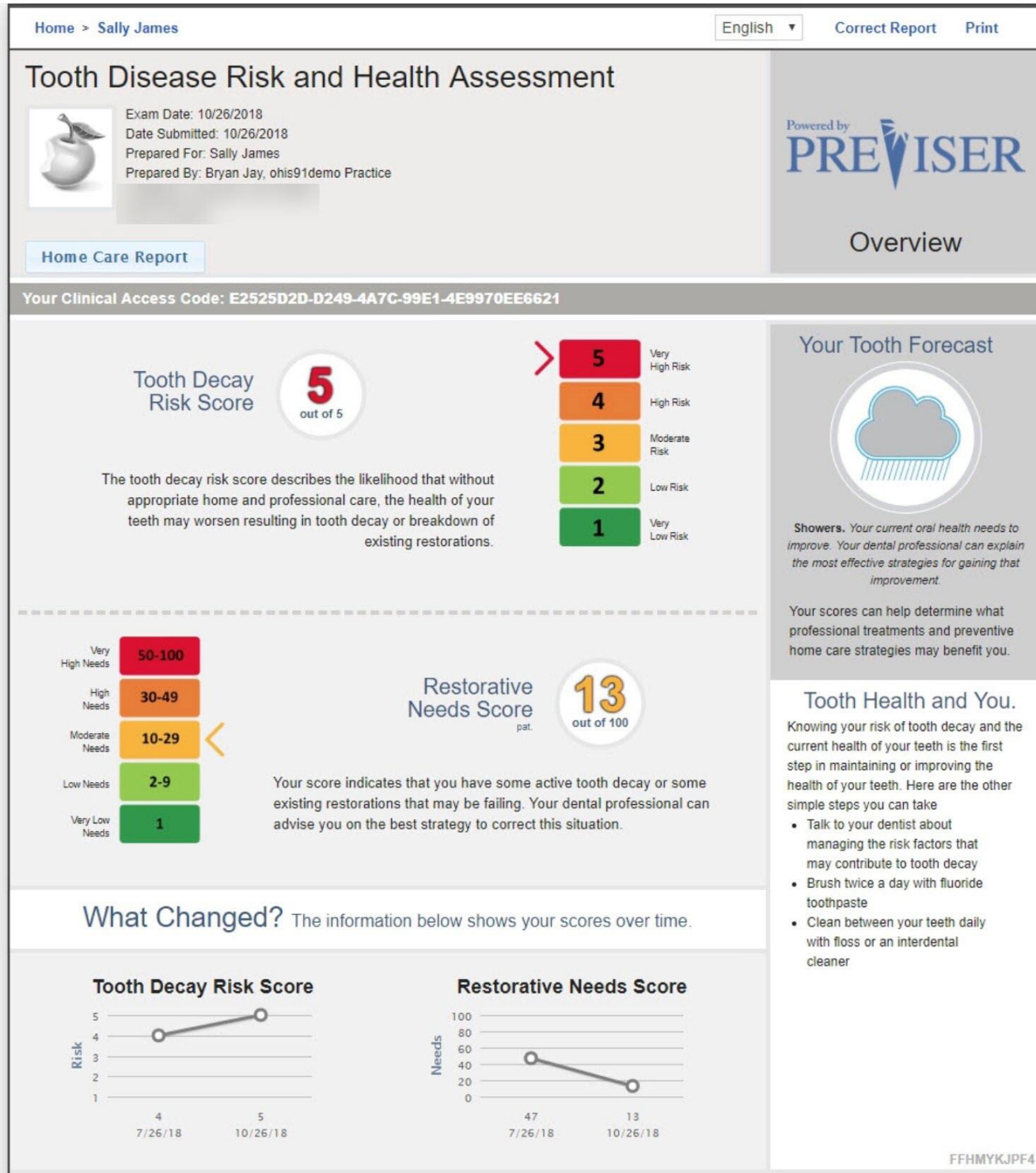
Deductibles (Benefit Period: 01/01/2017 - 12/31/2017)

No Deductibles

52 | Page

APPENDIX A - REPORTS

Caries/Restorative - page 1 Overview



To help maintain or improve the health of your teeth:

PREVENTION - ACTIVE INTERVENTION



Prevention is based on risk and risk factors. This is treatment before disease is observed. Repair of the effects of disease rarely results in a condition as good as the original state. Preventing disease eliminates tooth loss and reparative treatment.

COMMUNICATION



Dental treatment cannot keep you healthy. Your participation is very important. The most common patient behaviors that influence health and treatment success are oral hygiene, nutrition, and smoking. You may receive advice, including resources for you to change to health-promoting behaviors.

VISIT THE DENTIST




Symptoms are warning signs that frequently appear too late in the disease process for the simplest, most predictable, and least costly treatment. Regular visits to the dentist to detect disease in the early stages can prevent more complex and expensive treatment. Better still are regular visits for preventive care targeted to your risk factors.

Caries/Restorative - page 3 Clinical Inputs

Clinical Access Code: E2525D2D-D249-4A7C-99E1-4E9970EE6621			
Caries Risk: 5		Restorative Needs: 13	
Visible Teeth: 28		Teeth with restorations: 6	
Teeth with Caries: 3		Primary Caries: 1 or 2	
1 or more teeth have an exposed root: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		How many months has the patient been without primary caries or an incipient carious lesion? Primary caries is the first carious lesion on a tooth surface, not one beneath or at the margin of a restoration.: <input type="checkbox"/> 36 or more <input type="checkbox"/> 24-35 <input type="checkbox"/> 12-23 <input checked="" type="checkbox"/> 1 or more teeth has had caries in the last 12 months	
Bacteria culture includes elevated MS and/or LB level?: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> No culture or test is available		Snacks or beverages containing sugar are consumed between meals 4 or more times per day: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Patient drinks fluoridated water: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Nonprescription or prescription fluoride products other than water are used: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Chlorhexidine used for at least 1 week per month for last 6 months: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Xylitol products have been used 4 times daily for last 6 months: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Calcium & phosphate toothpaste have been used during last 6 months: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Recreational drug/alcohol use: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Has had a major change in health (heart attack, stroke, etc.) during the past 12 months: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Oral hygiene improvement is needed: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Dry mouth or inadequate saliva flow: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Dental care frequency is NOT as regular as advised: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Development problems or special health care needs: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Teeth have been extracted due to caries in last 36 months: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Fluoride varnish applied in last 6 months: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Has orthodontic appliance, space maintainer, or obturator: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

[Home](#) > [Sally James](#)EnglishPrint

Gum Disease Risk and Health Assessment



Exam Date: 7/26/2018
Date Submitted: 7/26/2018
Prepared For: Sally James
Prepared By: Mariya Zhalkovsky, ohis91demo Practice

Powered by
PREVISER

Overview

Home Care Report

Your Clinical Access Code: E2525D2D-D249-4A7C-99E1-4E9970EE6621

Gum Disease Risk Score

pat. **5** out of 5

The gum disease risk score describes the likelihood that without appropriate home and professional care, the health of your gums may worsen resulting in infection and inflammation of your gums and the possible loss of teeth.

> **5** Very High Risk
4 High Risk
3 Moderate Risk
2 Low Risk
1 Very Low Risk

Severe Gum Disease **37-100** <
Moderate Gum Disease **11-36**
Mild Gum Disease **4-10**
Gingivitis **2-3**
Healthy **1**

Gum Disease Score

pat. **96** out of 100


Your score indicates you have significant bone loss and/or gum tissue damage typically associated with severe periodontitis. This damage may be the result of current active disease or the results of damage you experienced in the past. Your likely treatment and on-going maintenance needs are very substantial.

Gum Health Stability Score

0 out of 100

This score is an indication of how long your gum health has been stable, which is 0 at your first gum disease assessment. For subsequent assessments, your score will increase to a maximum of 100 if the condition of your gums is stable or improved. A zero stability score after treatment may mean more treatment could be beneficial.

Your Gum Forecast



Stormy. You have already experienced deterioration in your oral health, but with conscientious professional and home care further damage can be minimized.

Your scores can help determine what professional treatments and preventive home care strategies may benefit you.

Gum Disease and You.

Knowing your gum health scores is the first step in improving, or maintaining the health of your gums. Here are other simple steps you can take:

- Talk to your dentist about managing any factors that contribute to elevated risk of disease.
- Ask your dentist how gum disease may impact other serious health ailments such as heart disease, Alzheimer's, strokes and diabetes.
- Take advantage of new products and technologies that may help you optimize your health through improved home care. A customized home care report is available that can make recommendations based on your gum health scores.

FFHMYKKJNA

56 | Page

Perio - page 2 Treatment Options

Active intervention you may need, unless stable and without inflammation:



Generally Most Effective



May Be Most Effective



Less Likely To Be Most Effective

POCKETS LESS THAN 5MM



Pockets that are less than 5mm deep can have the most thorough removal of bacteria and calculus. However, all deep pockets were at one time less than 5mm with the optimal probing depth being 3mm or less.

CONSIDER

- ⬆️ Prophylaxis or Maintenance
- ⬇️ Chemo therapeutic (special circumstances)

POCKETS 5-7MM



Pockets in the 5 to 7 depth range cannot be cleaned with a toothbrush and floss, and professional cleaning instruments don't always reach the bottom of the pocket. Incomplete removal of plaque and calculus results in deeper pockets and tooth loss.

CONSIDER

- ⬆️ SRP
- ⬇️ Surgery when SRP is not effective, which may include:
 - Osseous Surgery
 - Gingival Flap Surgery
 - Regenerative Therapy (Special Circumstances)
- ⬇️ Extraction
- ⬇️ Prophylaxis or Maintenance
- ⬇️ Chemo therapeutic (special circumstances)

POCKETS GREATER THAN 7MM



Pockets deeper than 7mm pose the greatest challenge to removing the bacteria and calculus. It's impossible to completely remove these disease causing entities with routine cleaning methods. Retained bacteria will cause the disease to progress and the pocket to become deeper, making for a more complex treatment situation and possible tooth loss.

CONSIDER

- ⬆️ Osseous Surgery
- ⬆️ Gingival Flap Surgery
- ⬆️ Extraction
- ⬆️ Regenerative Therapy (Special Circumstances)
- ⬇️ SRP
- ⬇️ Prophylaxis or Maintenance
- ⬇️ Chemo therapeutic (special circumstances)

FURCATION INVOLVEMENTS



Furcation is the junction of the roots in multi-rooted teeth (molars). The term "furcation involvement" describes loss of the bone filling these junctions. They are more challenging to clean than deep pockets, which means bacteria and calculus are not completely removed. Furcation lesions generally worsen until the tooth is lost.

CONSIDER

- ⬆️ Root Resection
- ⬆️ Regenerative Therapy
- ⬆️ Extraction
- ⬆️ Osseous Surgery
- ⬆️ Gingival Flap Surgery
- ⬇️ SRP
- ⬇️ Chemo therapeutic

DIABETES



Poorly managed diabetes can worsen gum disease while the presence of gum disease can reduce control of diabetes.

The best outcome is with good diabetic control and establishment and maintenance of periodontal health

CONSIDER

- ⬆️ Refer to and/or consult with the patient's doctor or endocrinologist
- ⬆️ Resolve the periodontal inflammation using one or more of the treatments listed for periodontal disease
- ⬆️ Diabetes can inhibit healing. All treatments for gum disease include healing. Therefore, it is important for a diabetic patient to have good control of their blood glucose (HbA1c) level.
- ⬆️ Antibiotics following scaling and root planing may be beneficial in severe cases

Perio - page 3 Clinical Inputs

Clinical Access Code: E2525D2D-D249-4A7C-99E1-4E9970EE6621

Patient History:

Oral hygiene improvement needed ☐
 Dental care frequency is NOT regular ☒
 Scaling and root planing for any tooth has been done ☒
 Periodontal Surgery for pockets has been done ☐
 Furcation involvements exist ☒
 Subgingival restorations are present ☐
 Vertical bone lesions ☐
 Subgingival calculus detected by x-ray or exam ☐

Cigarette Smoking:

Never/Unknown ☐
 Smoke(d) < 10/day ☒
 Smoke(d) 10+/day ☐
 Smoke(d) < 10 years ☒
 Smoke(d) 10+ years ☐
 Quit < 10 years ago ☒
 Quit 10+ years ago ☐

Pocket depths:

Bleeding Upper Right more than 7 mm
 Upper Anterior more than 7 mm
Bleeding Upper Left less than 5 mm
 Lower Right 5-7 mm
Bleeding Lower Anterior less than 5 mm
Bleeding Lower Left No Teeth

Diabetic Status:

Not Diabetic ☐
 Good Control ☒
 Fair Control ☐
 Poor Control ☐

Bone Height:

Upper Right more than 4 mm
 Upper Anterior 2-4 mm
 Upper Left more than 4 mm
 Lower Right more than 4 mm
 Lower Anterior No X-Ray
 Lower Left No Teeth

Bleeding:

Upper Right ☒
 Upper Anterior ☐
 Upper Left ☒
 Lower Right ☐
 Lower Anterior ☒
 Lower Left ☒

Oral Cancer - page 1 Overview

[Home](#) > [Fred Test](#)
[Correct Report](#)
[Print](#)

Oral (Mouth) Cancer Risk Assessment



Exam Date: 6/2/2016
 Prepared for: Fred Test
 Prepared by: theresa, PreViser
 20849 Cascade Ridge Dr Mount Vernon, WA 98274
 360-428-6705



Overview

Your Clinical Access Code: FFHBP8P6JF

Oral Cancer Risk Score



4 out of 5

5 Very High Risk

4 High Risk

3 Moderate Risk

2 Low Risk

1 Very Low Risk

The oral cancer risk score describes the probability of developing mouth cancer as a result of your individual risk factors. These can include inherited factors as well as lifestyle factors.

Your Oral Forecast



Showers. Your current oral health needs to improve. Your dental professional can explain the most effective strategies for gaining that improvement.

Your scores can help determine what professional treatments and preventive home care strategies may benefit you.

What is oral cancer?

Oral cancer is a cancer that develops in any part of your mouth. This includes your tongue, under your tongue, your gums, your lips, the roof of your mouth, and inside your cheeks.

Finding oral cancer saves lives: Mouth cancer can be cured if detected early, when it has just started to develop. Treatment for the early stages may not require surgery, although if the disease spreads, surgery is likely to be necessary.

The early signs of oral cancer

- A red or white patch that lasts for more than three weeks
- An ulcer that lasts for more than three weeks
- A lump or swelling that lasts for more than three weeks

Many of these early signs might seem similar to normal problems in your mouth. However, normal problems will clear up by themselves in two or three weeks. Problems that last for three weeks or longer should be brought to the attention of your dentist.

Thanks to King College London and Dr. Crispian Scully for their contribution to the content of this report. Note: ALL types of "screening" can produce false negatives/positives and NO algorithms are 100% effective.

Oral Cancer and You.

Am I at risk?

Anyone can get oral cancer. The most common factors for oral cancer are:

- Over 40 years of age
- Use of any type of tobacco product
- Regularly drink alcohol
- Exposure to the HPV virus

How do I reduce my risk?

Lifestyle factors like tobacco, alcohol use and poor dental hygiene can be managed with a subsequent reduction in the risk of mouth cancer. In addition, recent research has indicated that exposure to the HPV 16 virus that can be sexually transmitted is a significant risk factor for oral cancer, and may be responsible for the increasing incidence of mouth cancers in younger populations.

Options you should consider:

VISIT YOUR DENTIST



Dental professionals check your mouth for early signs of oral cancer during routine dental examinations. More thorough oral cancer examinations may include a very detailed look at the soft tissue of your mouth, including feeling your tongue or your lymph nodes. New diagnostic tests have been developed that can also assist in the identification of potentially cancerous lesions at their earliest stages. An annual examination that is supplemented with additional diagnostics may occur every 5 years for risk scores of 1, 2, or 3. For risk scores of 4, enhanced diagnostics may be included on an interval of every 2 years and for a risk score of 5 enhanced diagnostics may be warranted annually. In the event that a suspicious site is located, a biopsy of the tissue may be recommended, including a possible referral to a cancer specialist.

RESTRICT OR ELIMINATE TOBACCO USE



Tobacco use of any kind (e.g. cigarettes, cigars, pipe or chewing tobacco) increases the risk of developing oral cancer. It is thought that chemicals in tobacco can damage the soft tissue of the mouth and this damage can lead to cancer. If you use tobacco and drink alcohol, the combinations of these activities can increase your risk of developing mouth cancer by up to 40 times when compared to those who neither smoke nor drink alcohol. If you wish to quit smoking and need help, your dental professional can advise you on effective strategies that may include drugs specifically designed to help people quit tobacco use, or counseling to help manage addiction.

REDUCE ALCOHOL USE



The degree to which alcohol use can increase your risk of oral cancer is determined by how much and how frequent you drink. If you drink more than three alcoholic beverages a week, your risk will increase slightly. If you drink two or more alcoholic beverages daily, your risk is significantly increased.

WHEN TO SEEK HELP:

If you notice a red or white patch, ulcer, lump or pain in your mouth that lasts longer than three weeks, it is a good idea to point this out as soon as possible to your dental professional. Don't put this off. The longer you wait the more complex and expensive the treatment can become, and if the problem is cancer, the worse your outcome may be.

ADDITIONAL RESOURCES:

There are many public resources available if you have questions about oral cancer, quitting tobacco or limiting your alcohol consumption. Here are just a few:

Oral Cancer Foundation:
American Cancer Society:
National Cancer Institute:
Surgeon General's Office

www.oralcancerfoundation.org
www.cancer.org/cancer/oralcavityandoropharyngealcancer/index
www.cancer.gov/cancertopics/types/oral/
www.surgeongeneral.gov/tobacco/

Oral Cancer - page 3 Clinical Options


Clinical Access Code: FFHBP8P6JF Patient ID: 0cb3b3e4-da86-48ae-ad0f-5e401110f2bd	
Oral Cancer Risk: 4	Has History of oral cancer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Patient Age: <input type="checkbox"/> less than 20 <input type="checkbox"/> 20-49 <input checked="" type="checkbox"/> 50-64 <input type="checkbox"/> 65-74 <input type="checkbox"/> 75+	Gender: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
Cigarette Smoking: <input type="checkbox"/> Never Smoked <input checked="" type="checkbox"/> Smokes/Has Smoked	Quit: <input type="checkbox"/> less than 10 years ago <input type="checkbox"/> 10 or more years ago
Cigarettes Per Day: <input checked="" type="checkbox"/> less than 10 cigs/day <input type="checkbox"/> 10 or more cigs/day	Years Smoked (Cigarette): <input checked="" type="checkbox"/> less than 10 years <input type="checkbox"/> 10 or more years
Cigar Smoking: <input checked="" type="checkbox"/> Never Smoked <input type="checkbox"/> Smokes/Has Smoked	Quit: <input type="checkbox"/> less than 10 years ago <input type="checkbox"/> 10 or more years ago
Cigars Per Day: <input type="checkbox"/> less than 1 cigar or pipes/day <input type="checkbox"/> 1 or more cigar or pipes/day	Years Smoked (Cigar): <input type="checkbox"/> less than 10 years <input type="checkbox"/> 10 or more years
Smokeless/Chewing Tobacco: <input checked="" type="checkbox"/> Never Used Smokeless/Chewing Tobacco <input type="checkbox"/> Uses/Has Used Smokeless/Chewing Tobacco	Quit: <input type="checkbox"/> less than 10 years ago <input type="checkbox"/> 10 or more years ago
Chewing Tobacco Uses Per Day: <input type="checkbox"/> Occasionally Use <input type="checkbox"/> Daily Use	Years Chewing Tobacco Used: <input type="checkbox"/> less than 10 years <input type="checkbox"/> 10 or more years
Alcohol Use <input type="checkbox"/> None <input type="checkbox"/> Less than 1 drink per day <input checked="" type="checkbox"/> 1 drink per day <input type="checkbox"/> 2 drinks per day <input type="checkbox"/> 3 or more drinks per day	

[Home](#) > [Sally James](#)


English

[Correct Report](#)
[Print](#)

Comprehensive Risk and Oral Health Assessment



Exam Date: 1/23/2019
Date Submitted: 1/23/2019
Prepared For: Sally James
Prepared By: Mariya Zhalkovsky, ohis91demo Practice



Overview

[Home Care Report](#)

Your Clinical Access Code: E2525D2D-D249-4A7C-99E1-4E9970EE6621

Your Oral Disease Risk and Health Assessment Scores:

Tooth Decay Risk Score

5

out of 5

The tooth decay risk score describes the likelihood that without appropriate home and professional care, the health of your teeth may worsen resulting in tooth decay or breakdown of existing restorations.

Restorative Needs Score

pat.

64

out of 100

Your score indicates that you have a significant amount of active tooth decay or a number of existing restorations that may be failing. Your dental professional can advise you on the best strategy to correct this situation.

Gum Disease Risk Score

pat.

5

out of 5

The gum disease risk score describes the likelihood that without appropriate home and professional care, the health of your gums may worsen resulting in infection and inflammation and the possible loss of teeth.

Gum Disease Score

pat.

99

out of 100

Your score indicates you have significant bone loss and/or gum tissue damage typically associated with severe periodontitis. This damage may be the result of current active disease or the results of damage you experienced in the past. Your likely treatment and on-going maintenance needs are very substantial.

Gum Health Stability Score

5

out of 100

This score is an indication of how long your gum health has been stable, which is 0 at your first gum disease assessment. For subsequent assessments, your score will increase to a maximum of 100 if the condition of your gums is stable or improved. A zero stability score after treatment may mean more treatment could be beneficial.


Oral Cancer Risk Score

3

out of 5

The oral cancer risk score describes an increasing probability of developing mouth cancer as a result of your individual risk factors. These can include inherited factors as well as lifestyle factors.

Your Comprehensive Forecast



Stormy. You have already experienced deterioration in your oral health, but with conscientious professional and home care further damage can be minimized.

Your scores can help determine what professional treatments and preventive home care strategies may benefit you.

Oral Disease and You

There are three major oral diseases:

- Tooth decay
- Gum disease
- Oral cancer

Your dental professional is your first line of defense in helping to ensure a lifetime of oral health. With emerging research showing that the health of your mouth may have an impact on your overall health, good oral care is no longer just about a beautiful smile.

FFHMYKN48G

62 | Page

Comprehensive - page 2 & 3 Treatment Options

To help maintain or improve the health of your teeth:

PREVENTION - ACTIVE INTERVENTION



Prevention is based on risk and risk factors. This is treatment before disease is observed. Repair of the effects of disease rarely results in a condition as good as the original state. Preventing disease eliminates tooth loss and reparative treatment.

COMMUNICATION



Dental treatment cannot keep you healthy. Your participation is very important. The most common patient behaviors that influence health and treatment success are oral hygiene, nutrition, and smoking. You may receive advice, including resources for you to change to health-promoting behaviors.

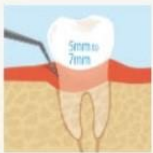
VISIT THE DENTIST



Symptoms are warning signs that frequently appear too late in the disease process for the simplest, most predictable, and least costly treatment. Regular visits to the dentist to detect disease in the early stages can prevent more complex and expensive treatment. Better still are regular visits for preventive care targeted to your risk factors.

To help maintain or improve the health of your gums:

POCKETS 5-7MM

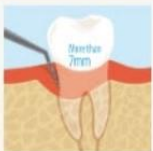


Pockets in the 5 to 7 depth range cannot be cleaned with a toothbrush and floss, and professional cleaning instruments don't always reach the bottom of the pocket. Incomplete removal of plaque and calculus results in deeper pockets and tooth loss.

CONSIDER

- ➡ SRP
- ➡ Surgery when SRP is not effective, which may include:
 - Osseous Surgery
 - Gingival Flap Surgery
 - Regenerative Therapy (Special Circumstances)
- ➡ Extraction
- ➡ Prophylaxis or Maintenance
- ➡ Chemo therapeutic (special circumstances)

POCKETS GREATER THAN 7MM





Pockets deeper than 7mm pose the greatest challenge to removing the bacteria and calculus. It's impossible to completely remove these disease causing entities with routine cleaning methods. Retained bacteria will cause the disease to progress and the pocket to become deeper, making for a more complex treatment situation and possible tooth loss.



CONSIDER

- ➡ Osseous Surgery
- ➡ Gingival Flap Surgery
- ➡ Extraction
- ➡ Regenerative Therapy (Special Circumstances)
- ➡ SRP
- ➡ Prophylaxis or Maintenance
- ➡ Chemo therapeutic (special circumstances)

Comprehensive - page 2 & 3 Treatment Options

FURCATION INVOLVEMENTS		CONSIDER
	<p>Furcation is the junction of the roots in multi-rooted teeth (molars). The term "furcation involvement" describes loss of the bone filling these junctions. They are more challenging to clean than deep pockets, which means bacteria and calculus are not completely removed. Furcation lesions generally worsen until the tooth is lost.</p>	<ul style="list-style-type: none"> ⬆ Root Resection ⬆ Regenerative Therapy ⬆ Extraction ⬆ Osseous Surgery ⬆ Gingival Flap Surgery ⬆ SRP ⬆ Chemo therapeutic
DIABETES		CONSIDER
	<p>Poorly managed diabetes can worsen gum disease while the presence of gum disease can reduce control of diabetes.</p>	<ul style="list-style-type: none"> ⬆ Refer to and/or consult with the patient's doctor or endocrinologist ⬆ Resolve the periodontal inflammation using one or more of the treatments listed for periodontal disease ⬆ Diabetes can inhibit healing. All treatments for gum disease include healing. Therefore, it is important for a diabetic patient to have good control of their blood glucose (HbA1c) level. ⬆ Antibiotics following scaling and root planing may be beneficial in severe cases
	<p>The best outcome is with good diabetic control and establishment and maintenance of periodontal health</p>	

To help reduce your risk of oral cancer
consider the following treatment options:

RESTRICT OR ELIMINATE TOBACCO USE	
	<p>Tobacco use of any kind (e.g. cigarettes, cigars, pipe or chewing tobacco) increases the risk of developing oral cancer. It is thought that chemicals in tobacco can damage the soft tissue of the mouth and this damage can lead to cancer. If you use tobacco and drink alcohol, the combinations of these activities can increase your risk of developing mouth cancer by up to 40 times when compared to those who neither smoke nor drink alcohol. If you wish to quit smoking and need help, your dental professional can advise you on effective strategies that may include drugs specifically designed to help people quit tobacco use, or counseling to help manage addiction.</p>
REDUCE ALCOHOL USE	
	<p>The degree to which alcohol use can increase your risk of oral cancer is determined by how much and how frequent you drink. If you drink more than three alcoholic beverages a week, your risk will increase slightly. If you drink two or more alcoholic beverages daily, your risk is significantly increased.</p>
WHEN TO SEEK HELP:	
<p>If you notice a red or white patch, ulcer, lump or pain in your mouth that lasts longer than three weeks, it is a good idea to point this out as soon as possible to your dental professional. Don't put this off. The longer you</p>	<p>wait the more complex and expensive the treatment can become, and if the problem is cancer, the worse your outcome may be.</p>
ADDITIONAL RESOURCES:	
<p>There are many public resources available if you have questions about oral cancer, quitting tobacco or limiting your alcohol consumption. Here are just a few:</p>	
<p>Oral Cancer Foundation:</p>	<p>www.oralcancerfoundation.org</p>
<p>American Cancer Society:</p>	<p>www.cancer.org/cancer/oralcavityandoropharyngealcancer/index</p>
<p>National Cancer Institute:</p>	<p>www.cancer.gov/cancertopics/types/oral/</p>
<p>Surgeon General's Office</p>	<p>www.surgeongeneral.gov/tobacco/</p>

Comprehensive - page 4 Clinical Options

Clinical Access Code: E2525D2D-D249-4A7C-99E1-4E9970EE6621

Target tooth:		Patient inputs:	
Sound or sealed, or occlusal restorations only	<input type="checkbox"/>	Sugar snacks > 4 times/day	<input type="checkbox"/>
Pits, fissures or other defects	<input type="checkbox"/>	Drinks fluorided water	<input checked="" type="checkbox"/>
Interproximal restorations	<input type="checkbox"/>	Nonprescription fluoride used	<input checked="" type="checkbox"/>
Early decalcification or carious	<input type="checkbox"/>	Chlorhexidine used > 1 week/month for last 6 months	<input type="checkbox"/>
		Xylitol products > 4 times daily for last 6 months	<input type="checkbox"/>
		Calcium or phosphate toothpaste have been used	<input type="checkbox"/>
		during last 6 months	<input type="checkbox"/>
		Recreational drug/alcohol use	<input type="checkbox"/>
		Major change in health during the past 12 months	<input type="checkbox"/>
Months caries free:		Diabetic status:	
36+	<input type="checkbox"/>	Not diabetic	<input type="checkbox"/>
24-35	<input checked="" type="checkbox"/>	Good control	<input type="checkbox"/>
12-23	<input type="checkbox"/>	Fair control	<input checked="" type="checkbox"/>
Less than 12	<input type="checkbox"/>	Poor control	<input type="checkbox"/>
Excluding third molars:		Bone height:	
# of visible teeth	<input checked="" type="checkbox"/>	Upper Right	2-4mm
# of natural teeth restored	<input type="checkbox"/>	Upper Anterior	No Teeth
# of teeth with caries and defective restorations	<input checked="" type="checkbox"/>	Upper Left	2-4mm
# of teeth with primary caries or an incipient caries lesion	<input type="checkbox"/>	Lower Right	greater than 4mm
		Lower Anterior	greater than 4mm
		Lower Left	greater than 4mm
Patient history:		Cigarette smoking:	
Oral hygiene improvement is needed	<input type="checkbox"/>	Never/Unknown	<input type="checkbox"/>
Dental care infrequent	<input type="checkbox"/>	Smoke(d) less than 10/day	<input type="checkbox"/>
Development problems/special needs	<input type="checkbox"/>	Smoke(d) 10 or more/day	<input checked="" type="checkbox"/>
Teeth extracted due to caries in last 36 months	<input type="checkbox"/>	Smoke(d) less than 10 years	<input checked="" type="checkbox"/>
Fluoride varnish in last 6 months	<input checked="" type="checkbox"/>	Smoke(d) 10 or more years	<input type="checkbox"/>
Has ortho appliance space maintainer or obturator	<input type="checkbox"/>	Quit less than 10 years ago	<input checked="" type="checkbox"/>
History of oral cancer	<input type="checkbox"/>	Quit 10 or more years ago	<input type="checkbox"/>
Other:		Cigar smoking:	
Scaling and root planing for any tooth has been done	<input type="checkbox"/>	Never/Unknown	<input type="checkbox"/>
Prior periodontal surgery	<input checked="" type="checkbox"/>	Smoke(d) less than 10/day	<input type="checkbox"/>
Furcation involvements exist	<input checked="" type="checkbox"/>	Smoke(d) 10 or more/day	<input checked="" type="checkbox"/>
Subgingival restorations present	<input type="checkbox"/>	Smoke(d) less than 10 years	<input checked="" type="checkbox"/>
Vertical bone lesions exist	<input type="checkbox"/>	Smoke(d) 10 or more years	<input type="checkbox"/>
Subgingival calculus detected by x-ray or exam	<input type="checkbox"/>	Quit less than 10 years ago	<input checked="" type="checkbox"/>
		Quit 10 or more years ago	<input type="checkbox"/>
Pocket depths:		Smokeless tobacco:	
Bleeding Upper Right	greater than 7mm	Never used	<input type="checkbox"/>
Bleeding Upper Anterior	No Teeth	Occasional user	<input type="checkbox"/>
Upper Left	5-7mm	Daily user	<input checked="" type="checkbox"/>
Lower Right	greater than 7mm	Use less than 10 years	<input checked="" type="checkbox"/>
Bleeding Lower Anterior	greater than 7mm	Use 10 or more years	<input type="checkbox"/>
Bleeding Lower Left	greater than 7mm	Quit less than 10 years ago	<input checked="" type="checkbox"/>
		Quit 10 or more years ago	<input type="checkbox"/>
Root surfaces:		Alcohol usage:	
Visible	<input checked="" type="checkbox"/>	None	<input type="checkbox"/>
Not visible	<input type="checkbox"/>	less than 1 drink/day	<input checked="" type="checkbox"/>
Bacteria culture includes elevated MS and/or LB?		1 drink/day	<input type="checkbox"/>
YES	<input checked="" type="checkbox"/>	2 drinks/day	<input type="checkbox"/>
NO	<input type="checkbox"/>	3 or more drinks/day	<input type="checkbox"/>
No culture	<input type="checkbox"/>		
Clinical conditions			
Oral hygiene improvement is needed	<input type="checkbox"/>		
Defective restoration margins/open contacts	<input type="checkbox"/>		
Xerostomia	<input checked="" type="checkbox"/>		