

**Comprehensive Exam For** \_\_\_\_\_

**Comprehensive Exam Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Prepared By** \_\_\_\_\_

**1 or more teeth have an exposed root?**

- Yes  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.**

- 36 or more  24-35  
 12-23  1 or more teeth has had caries in the last 12 months

**Bacteria culture includes elevated MS and/or LB level?**

- Yes  No  
 No culture or test available

**Please answer the following questions**

How many erupted teeth are present in the oral cavity?

\_\_\_\_\_ # of teeth

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

\_\_\_\_\_ # of teeth

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

\_\_\_\_\_ # of teeth

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

\_\_\_\_\_ # of teeth

**Check all that apply**

**Clinical Conditions**

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

**Questions the Patient Can Answer**

- Snacks or beverages containing sugar are consumed between meals 4 or more times per day

## Treatment History and Considerations

- Dental care frequency is NOT as regular as advised
- Development problems or special care needs
- Teeth have been extracted due to caries in last 36 months
- Fluoride varnish applied in last 6 months
- Has orthodontic appliance, space maintainer, or obturator
- Patient drinks fluoridated water
- Nonprescription or prescription fluoride other than water are used
- Chlorhexidine used for at least 1 week per month for last 6 months
- Xylitol products have been used 4 times daily for last 6 months
- Calcium & phosphate toothpaste have been used during last 6 months
- Recreational drug/alcohol use
- Has had a major change in health (heart attack, stroke, etc.) during the past 12 months

## Has History of Oral Cancer

- Has History of Oral Cancer

## Cigarette Smoking

- Never Smoked
- Smoke(d)**
  - less than 10 cigs/day
  - 10 or more cigs/day
- Smoke(d)**
  - less than 10 years
  - 10 or more years
- Quit**
  - less than 10 years ago
  - 10 or more years ago

## Pipes/Cigars

- Never Smoked
- Smoke(d)**
  - less than 1 cigar or pipes/day
  - 10 or more 1 cigar or pipes/day
- Smoke(d)**
  - less than 10 years
  - 10 or more years
- Quit**
  - less than 10 years ago
  - 10 or more years ago

## Smokeless (Chewing) Tobacco

- Never Used
- Use**
  - Occasionally use
  - Daily Use
- Use**
  - less than 10 years
  - 10 or more years
- Quit**
  - less than 10 years ago
  - 10 or more years ago

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

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
- 1 drink per day
- 2 drinks per day
- 3 or more drinks per day

## Diabetic Status

	Good Control	Fair Control	Poor Control
HbA1c (%)	Less than 6.5	6.5 - 7.5	Greater than 7.5
All 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

## Check all that apply

- Scaling and root planing for any tooth has been done
- Furcation involvements exist
- Vertical bone lesions exist
- Peridental 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

### Upper Right

- Less than 5 mm
- 5 - 7 mm
- Greater than 7 mm
- No Teeth
- Bleeding

### Upper Anterior

- Less than 5 mm
- 5 - 7 mm
- Greater than 7 mm
- No Teeth
- Bleeding

### Upper Left

- Less than 5 mm
- 5 - 7 mm
- Greater than 7 mm
- No Teeth
- Bleeding

### Lower Right

- Less than 5 mm
- 5 - 7 mm
- Greater than 7 mm
- No Teeth
- Bleeding

### Lower Anterior

- Less than 5 mm
- 5 - 7 mm
- Greater than 7 mm
- No Teeth
- Bleeding

### Lower Left

- Less than 5 mm
- 5 - 7 mm
- Greater than 7 mm
- No Teeth
- Bleeding

## X-ray distance from CEJ to Bone Crest

Measured	Visual
Less than 2 mm	Normal bone height
2-4 mm	Between normal and excessive
Greater than 4 mm	Excessive bone loss

### Upper Right

- Less than 2 mm
- 2-4 mm
- Greater than 4 mm
- No Teeth

### Upper Anterior

- Less than 2 mm
- 2-4 mm
- Greater than 4 mm
- No Teeth

### Upper Left

- Less than 2 mm
- 2-4 mm
- Greater than 4 mm
- No Teeth

### Lower Right

- Less than 2 mm
- 2-4 mm
- Greater than 4 mm
- No Teeth

### Lower Anterior

- Less than 2 mm
- 2-4 mm
- Greater than 4 mm
- No Teeth

### Lower Left

- Less than 2 mm
- 2-4 mm
- Greater than 4 mm
- No Teeth

## Report Settings

- Treatment Options

- Home Care Report (coming soon)

- Clinical Care Plan (coming soon)

## Include in Report

- AAP, Surgical Emphasis

- Do you wish to indicate the use of laser therapy?

**Model this Patient**

**Save for Later**

**Finish**