## Periodontal Chart Form

| Last Name: | Green | First Name: | Thomas |
| :--- | :--- | :--- | :--- |
| Date of Birth: | July 14, 1970 | Date of Examination: | February 1, 2024 |
| Dentist / Hygienist: | Dr. Alice Martin |  |  |
| Initial Exam | Reevaluation |  |  |

## Periodontal Examination

## Instructions:

Measure and record the following parameters for each tooth. Use a periodontal probe to measure pocket depths, recession, and other relevant indicators. Mark the presence of bleeding on probing (BOP), plaque accumulation, and tooth mobility as observed.

## Charting Key

- PD: Pocket Depth (in mm)
- REC: Gingival Recession (in mm)
- CAL: Clinical Attachment Level (in mm)
- BOP: Bleeding on Probing (Yes/No)
- Plaque: Plaque Presence (Yes/No)
- Mobility: Tooth Mobility (Grade 0-III)
- Furcation: Furcation Involvement (Grade 0-III)


## Teeth Numbers

Use the Universal Numbering System (1-32 for adults, A-T for children's primary teeth).

Fill out the chart for all teeth, including missing teeth (mark as "MT") and implants (mark as "IM")

| Tooth \# | PD (mm) | REC (mm) | CAL (mm) | BOP | Plaque | Mobility | Furcation |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1 | 2 | 0 | 2 | No | Yes | 0 | 0 |
| 2 | 3 | 0 | 3 | Yes | Yes | 0 | 0 |
| 3 | 2 | 1 | 3 | No | No | 0 | 0 |
| 4 | 5 | 2 | 7 | Yes | Yes | 1 | 1 |
| 5 | 4 | 1 | 5 | Yes | Yes | 0 | 0 |


| Tooth \# | PD (mm) | REC (mm) | CAL (mm) | BOP | Plaque | Mobility | Furcation |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 6 | 1 | 1 | 2 | No | No | 0 | 0 |
| 7 | 2 | 2 | 3 | Yes | No | 1 | 0 |
| 8 | 4 | 2 | 4 | No | No | 0 | 0 |
| 9 | 4 | 3 | 3 | No | No | 1 | 1 |
| 10 | 5 | 1 | 2 | No | Yes | 0 | 1 |
| 11 | 1 | 0 | 2 | Yes | No | 1 | 1 |
| 12 | 2 | 1 | 2 | No | Yes | 0 | 0 |
| 13 | 3 | 0 | 3 | No | Yes | 0 | 0 |
| 14 | 3 | 0 | 4 | Yes | No | 0 | 0 |
| 15 | 3 | 0 | 4 | No | Yes | 1 | 0 |
| 16 | 1 | 0 | 2 | Yes | Yes | 1 | 0 |
| 17 | 4 | 1 | 5 | No | Yes | 1 | 0 |
| 18 | 4 | 1 | 2 | No | Yes | 0 | 0 |
| 19 | 2 | 2 | 3 | Yes | No | 0 | 1 |
| 20 | 2 | 2 | 3 | Yes | No | 0 | 1 |
| 21 | 2 | 0 | 2 | Yes | No | 0 | 1 |
| 22 | 2 | 0 | 2 | No | No | 0 | 0 |
| 23 | 3 | 0 | 2 | No | Yes | 1 | 0 |
| 24 | 2 | 0 | 2 | Yes | Yes | 0 | 0 |
| 25 | 3 | 1 | 3 | No | Yes | 1 | 1 |
| 26 | 3 | 1 | 3 | No | Yes | 1 | 1 |


| Tooth \# | PD (mm) | REC (mm) | CAL (mm) | BOP | Plaque | Mobility | Furcation |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 27 | 2 | 0 | 2 | No | No | 0 | 1 |
| 28 | 3 | 0 | 2 | No | No | 0 | 0 |
| 29 | 2 | 0 | 3 | No | Yes | 0 | 0 |
| 30 | 3 | 0 | 3 | Yes | Yes | 1 | 0 |
| 31 | 2 | 0 | 2 | No | No | 0 | 0 |
| 32 | 3 | 1 | 4 | Yes | Yes | 0 | 0 |

## Additional Observations

General Oral Hygiene:
OGood

- Fair
Opoor

Gum Health:
Healthy
Gingivitis

- Periodontitis


## Notes

Immediate scaling and root planing for teeth with PD $>4 \mathrm{~mm}$. Reinforce oral hygiene education, focusing on effective brushing and flossing techniques. Consider a referral to a periodontist for comprehensive evaluation and treatment planning.

## Treatment Plan

Immediate Needs:
Scaling and root planing for teeth 4 and 5; monitor areas of bleeding on probing.

## Long-Term Recommendations:

Regular periodontal maintenance cleanings every 3-4 months. Evaluate the need for adjunctive therapies, such as localized antibiotic delivery.

## Next Appointment

Date:April 2, 2024
Time:10:00 AM
Purpose:Initial scaling and root planing, with follow-up periodontal evaluation.

