

ITEM NO 011 COMPREHENSIVE EXAMINATION AIDE MEMOIRE |

September 2020

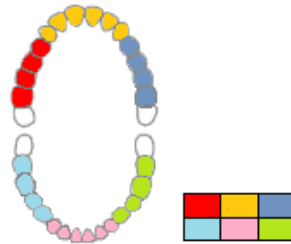
Medical history	PMH	Past and present medical history – recorded if new or 2 years have passed since last visit Past and present drug (medication) history – record all relevant medications
Dental history	PDH	Date of last visit, Frequency of visits, Prior dental treatments and Experiences, Maintenance regime (at home and professional)
Concerns	RFA	“Reason for attendance”
Other complaints	O/C	Any other presenting problems?
Extra-oral findings	E/O	General observations (asymmetry, pigmentations, skin breaches/ ulcers), lymph nodes, TMJ, muscles of mastication, lips
Intra-oral findings	I/O	Soft Tissue: Cheeks, tongue, palate, gingiva, oral cancer check Record all observations or “NAD”
		Full charting: odontogram, dental findings, Angle classification (e.g.: Class I, II, III), erosion, abrasion, attrition. Record the date next to the findings
		Periodontal charting - (PEPE, BPE*, PSR) Divide mouth into 6 regions, record a score (0,1,2,3,4) for each sector
		Clinical findings and observations: Tooth specific e.g.: Fracture noted, TTP, TTH, TTC, Unusual findings (tori etc), oral hygiene status – level of plaque, calculus observed, gingivitis, which teeth affected
X-Ray results	XRR	Discuss with patient and record in the notes – even NAD
Diagnosis		What is wrong (differential diagnoses if unsure)
Treatment plan		What can be done and who can treat (refer to specialist is always an option), discuss effects of NO treatment
Consent		Discuss risks and benefits and costs of available treatment alternatives . Record the conversation (e.g.: deep filling, warned RCT may be needed)
Treatment details		<ul style="list-style-type: none"> <input type="checkbox"/> Identify tooth/teeth/area treated or examined <input type="checkbox"/> Describe all procedures conducted <input type="checkbox"/> Instrument batch (tracking) control identification, where relevant <input type="checkbox"/> Any medicine/drug prescribed, administered or supplied or any other therapeutic agent used (name, quantity, dose, route of administration, instructions) <ul style="list-style-type: none"> <input type="checkbox"/> Details of advice provided e.g.: POIG (Do not eat for 30 minutes) <input type="checkbox"/> Unusual sequelae of treatment and management plan – eg Haemostasis delayed - Recommended sit down quietly, place a pad of clean gauze (NOT paper tissues) onto the socket and apply pressure to the wound by biting onto the pad for 15 minutes. PTCU if happens again. Sterile gauze given

Advisory Services



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* **BPE** (Basic Periodontal exam) - Divide mouth into 6 regions, record a score (0,1,2,3,4) for each sector



Code	Description	Treatment
0	No disease (gingival pockets < 3 mm)	No action required
1	Bleeding on probing, but gingival pockets < 3 mm	wiki/oral hygiene instruction because bleeding on probing usually indicates the presence of plaque induced wiki/gingivitis
2	Periodontal pocketing < 3mm, but wiki/calculus (dental) present with or without plaque retentive factors such as "overhanging" restorations	wiki/oral hygiene instruction, remove plaque retentive factors (e.g. replace ledged restoration with correct use of matrix band, remove calculus with professional tooth cleaning)
3	Shallow periodontal pockets 4 - 5 mm (i.e. first band on probe partially visible)	More detailed examination of periodontal condition indicated
4	Deep periodontal pockets > 6 mm (first band on probe disappears)	More detailed examination of periodontal condition indicated
	Periodontal defect furcation	More detailed examination of periodontal condition indicated

If you require more details please do not hesitate to contact Advisory Services and ask to speak to a Peer Advisor. We can be contacted on Ph: 8436 9944 or at advisory@adansw.com.au