

New York City College of
Technology
Department dental
hygiene department
Case presentation

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Patient Profile

- Mr. G is a 26 year-old Hispanic male.
- He does not remember the date of his last dental visit.
- The patient states that he brushes twice a day with a manual toothbrush and Colgate toothpaste. He rinses twice a day. And does not use any interdental aid or tongue cleaner.
- Medical history: WNL



Comprehensive Assessments





Radiographs

Radiographs show evidence of generalized slight bone loss, with localized 33% bone loss on the mandibular interiors.

Generalized subgingival calculus tags. Caries detected on #4-D, #5-M, #12-D, #13-D, and #14-M.

Amalgam restoration on #3-ML, #4-O, #12-O, #14-OB, #18-B, #19-B, and #30-B .

Summary of Clinical Findings

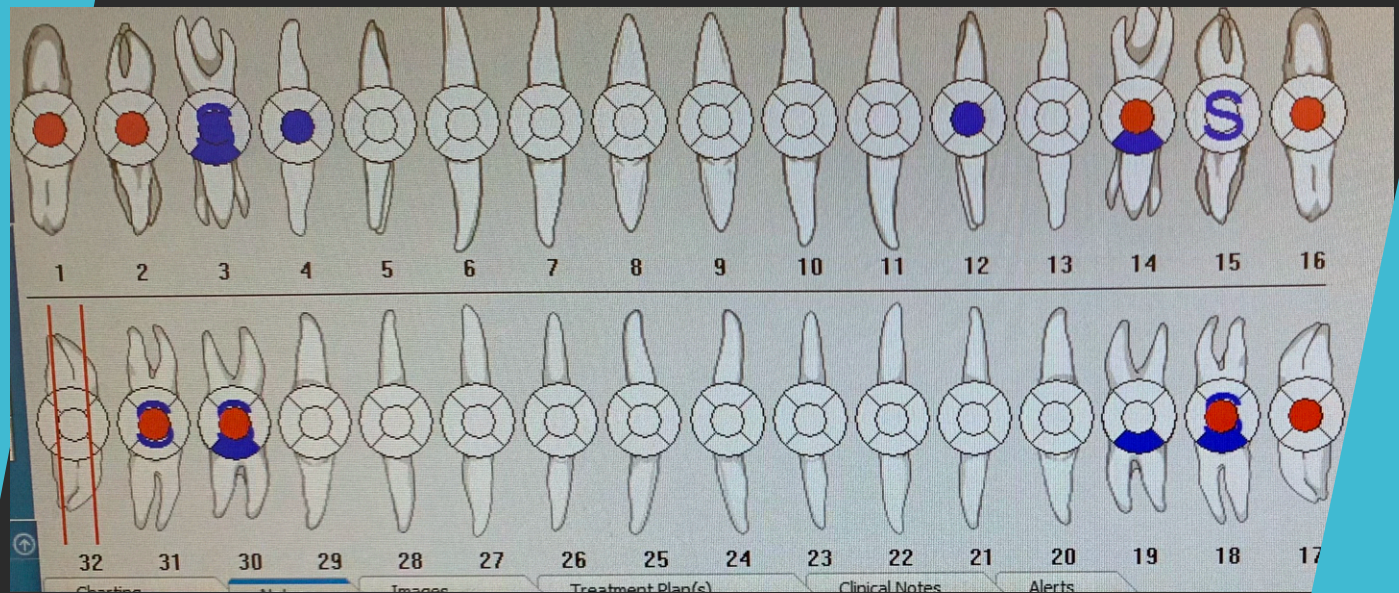
- Extraoral/Intraoral Findings: WNL
- Occlusion: Bilateral class I occlusion. 4mm overjet and 40% overbite.
- Deposits: Generalized heavy subgingival and supragingival biofilm and deposits.

Dental Charting

Composite restorations on #3-OL, #4-O, #12-O, #14-L, #18-B, #19-B, and #30-B.

Sealant on #14

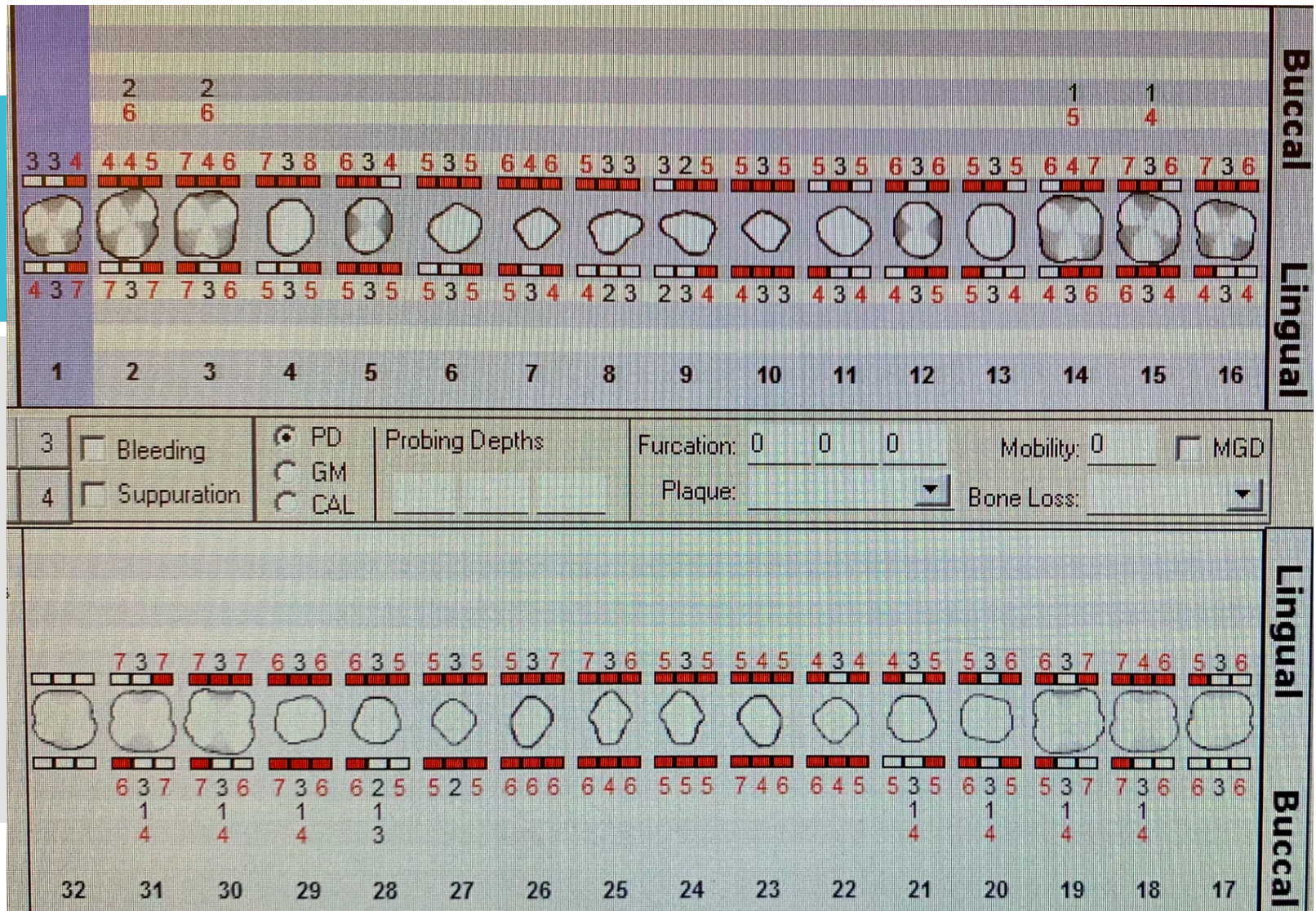
Suspicious carious lesions on #1-O, #2-O, #14-O, #16-O, #17-O, #18-O, #30-O and #31-O.



Gingival Description and Periodontal Status

- Gingival Description: Generalized reddish gingiva, papilla is bulbous. Generalized marginal inflammation. Gingiva is severely inflamed, especially in the lower anterior area.
- Periodontal Status: Stage II/Grade C based on clinical and radiographic evidence.

Periodontal Charting



Dental Hygiene Diagnosis

Periodontal Diagnosis:

Stage II/Grade C

- Radiographic evidence of generalized slight bone loss, with localized 33% bone loss on the mandibular anterior.
- Generalized probing depth readings of 2-7 mm on all quadrants.
- Generalized heavy sub and supragingival calculus deposits on all quadrants.

Dental Hygiene Care Plan

Visit One:

- Completed all assessment.

Visit Two:

- OHI: Manual toothbrushing (modified bass technique). Expose FMS, and scale LRQ and URQ.

Visit Three:

- OHI: Flossing, scale ULQ. Oraqix as needed. Give referral for periodontitis, 3rd molar evaluation and cavity evaluation.

Visit Four:

- Scale LLQ, apply Oraqix 5%, engine polish and fluoride treatment.

<p>Visit 1: <u>TBD</u> (Date)</p> <p>Patient Education: <input checked="" type="checkbox"/> CTB manual D power assisted <input type="checkbox"/> Interdental Aid _____ <input type="checkbox"/> Toothpaste _____ D <input type="checkbox"/> Rinse _____</p> <p>Radiographs: Digital <input checked="" type="checkbox"/> FMS <input type="checkbox"/> BWS (V/H) <input type="checkbox"/> D Pan</p> <p>Debridement: <input type="checkbox"/> D Quadrant(s) <u>4, 1</u> <input type="checkbox"/> D Whole Mouth</p> <p>Pain Management: <input type="checkbox"/> D Topical</p> <p><input checked="" type="checkbox"/> Oraqix <input type="checkbox"/> D Local Anesthesia Coronal Polish:</p>	<p>Visit 2: <u>TBD</u> (Date)</p> <p>Patient Education: <input type="checkbox"/> D TB manual D power assisted <input checked="" type="checkbox"/> Interdental Aid _____ <input type="checkbox"/> D Toothpaste _____ <input type="checkbox"/> D Rinse _____</p> <p>Radiographs: Digital <input type="checkbox"/> D FMS <input type="checkbox"/> D BWS (V/H) <input type="checkbox"/> D Pan</p> <p>Debridement: <input type="checkbox"/> D Quadrant(s) <u>2</u> <input type="checkbox"/> D Whole Mouth</p> <p>Pain Management: <input type="checkbox"/> D Topical</p> <p><input checked="" type="checkbox"/> Oraqix <input type="checkbox"/> D Local Anesthesia Coronal Polish:</p>	<p>Visit 3: <u>TBD</u> (Date)</p> <p>Patient Education: <input type="checkbox"/> D TB manual D power assisted <input type="checkbox"/> D Interdental Aid _____ <input type="checkbox"/> D Toothpaste _____ <input type="checkbox"/> D Rinse _____</p> <p>Radiographs: Digital <input type="checkbox"/> D FMS <input type="checkbox"/> D BWS (V/H) <input type="checkbox"/> D Pan</p> <p>Debridement: <input type="checkbox"/> D Quadrant(s) <u>3</u> <input type="checkbox"/> D Whole Mouth</p> <p>Pain Management: <input type="checkbox"/> D Topical</p> <p><input checked="" type="checkbox"/> Oraqix <input type="checkbox"/> D Local Anesthesia Coronal Polish:</p>	<p>Visit 4: _____ (Date)</p> <p>Patient Education: <input type="checkbox"/> DTB manual D power assisted <input type="checkbox"/> D Interdental Aid _____ <input type="checkbox"/> D Toothpaste _____ <input type="checkbox"/> D Rinse _____</p> <p>Radiographs: Digital <input type="checkbox"/> D FMS <input type="checkbox"/> D BWS (V/H) <input type="checkbox"/> D Pan</p> <p>Debridement: <input type="checkbox"/> D Quadrant(s) _____ <input type="checkbox"/> D Whole Mouth</p> <p>Pain Management: <input type="checkbox"/> D Topical</p> <p><input type="checkbox"/> D Oraqix <input type="checkbox"/> D Local Anesthesia Coronal Polish:</p>
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Treatment plan picture

Implementation

Visit One:

- All assessments were completed. Patient present with advanced periodontal disease.
- Applied topical anesthesia 20% Benzocaine.

Implementation

- Visit Two:
- Pt reported no changes on medical history, no recent hospitalizations/surgeries.
- Gingival statement: generalized reddish gingiva, papilla is bulbous. Generalized severe marginal inflammation. Localized severe inflamed tissue on mandibular interiors, the tissue is red and movable. Localized severe calculus beneath the gingiva.
- OHI: Brushing (modified bass technique).
- Exposed digital radiograph FMS. Hand scaled LLR and LLQ, with pain management Oraqiz 5%.

Mandibular
anterior area
after initial
debridement



Implementation

- Visit Three:
- Pt reported no changes on medical history, no recent hospitalizations/surgeries.
- Localized moderate to severe inflammation from 22-27 facial, the papilla is bulbous and moderately red. Papilla between 22-23 is moderately inflamed on the lingual side. Marginal moderate inflammation on the LRQ and LLQ lingual posteriors. The tissue still movable and unattached on mandibular anterior facial.
- Scaled URQ and applied Oraqix 5%.

Implementation

- Visit Four:
- Pt reported no changes on medical history, no recent hospitalizations/surgeries.
- URQ was severely inflamed, now there is moderate marginal inflammation present, with rolled margins on the palatal side. Localized moderate to severe inflammation from 22-27 facial, the papilla is bulbous and moderately red. The tissue is still movable and unattached on mandibular anterior facial. Moderate marginal inflammation still present on LRQ and LLQ posteriors.
- OHI: Oral rinse. Scaled ULQ, applied Oraqix 5% for pain management, engine polished and applied fluoride varnish.

Implementation

- Mr. G was a very cooperative patient, and It was really challenging to explained to him the advanced of his periodontal condition. His periodontal disease was realized advanced for his age, and he had severe loss of gingival attachment.
- Mr. G was concerned about the appearance of his front teeth. He reported feeling ashamed.
- He was a heavy case with very tenacious subgingival and supragingival calculus.
- Mr. G debridement was completed by hand scaling.

Referrals

- Two referrals were given to the patient, the first referral was given on the first visit; for periodontist, 3rd molars evaluation and cavities evaluation.
- A second referral was given for his general doctor. The patient presented with elevated blood pressure. A blood pressure fact sheet was also given.

Continuation of care recommendation

- The recare recommendation given to the patient was 3 months.
- A 3-months recommendation was given to the patient due the presence of generalized subgingival and supragingival calculus, and the radiographic evidence of generalized slight bone loss and localized 33% bone loss on lower anterior area. Our goal is to help restore the patient's oral health, by providing frequent cleanings, and follow ups on his implementation of home care.