




New York City College of Technology
Department of Dental Hygiene
Case Presentation 2

Rui Wen Li

Patient Profile

Ms. C is a 23 year-old Asian female. She is single and is new college graduate and is currently looking for jobs.



Her last dental exam and cleaning was in 2016 for braces removal. She also had 1 pano taken after the braces were removed in 2016. She had braces for two years and does not wear retainers anymore because her teeth has shifted. Patient had a bad dental experience with a tooth extraction in 4th grade.

Patient states that she uses a soft manual toothbrush twice a day and flosses occasionally.

Patient's does not drink, smoke nor use recreational drugs.

Medical History Overview

Blood pressure: 106/83, Pulse 79, ASA I

**Covid Screening performed WNL.
Temperature 97.2**

No systemic conditions, no medications

Chief Complaint

Patient states: “My gums in the front teeth bleed sometimes when I brush, and I have cold sensitivity in my front teeth.”

▼ Due to the bad dental experience she had as a kid, she does not like to go to the dentist. She has not been getting periodic dental exams nor dental cleanings.

She also experiences concerns of her teeth shifting because she has not worn her retainers.

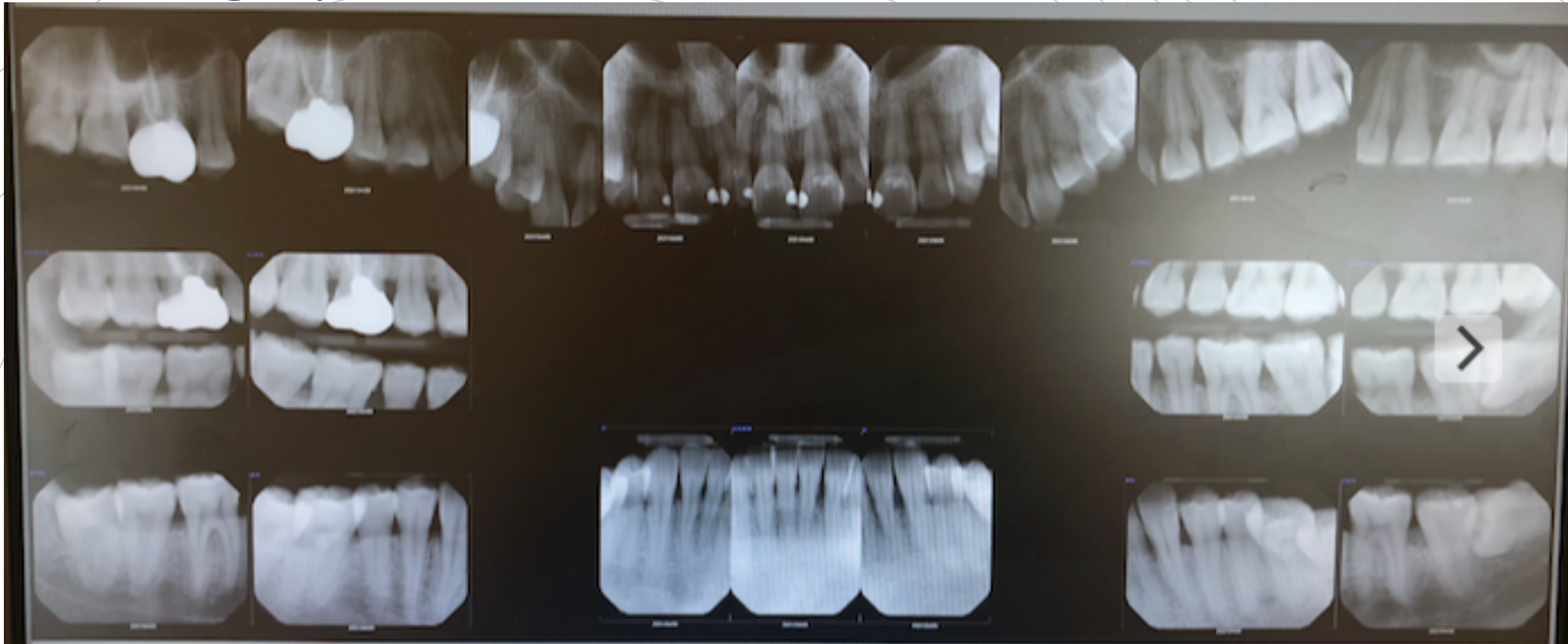


Comprehensive Assessments

Clinical Findings

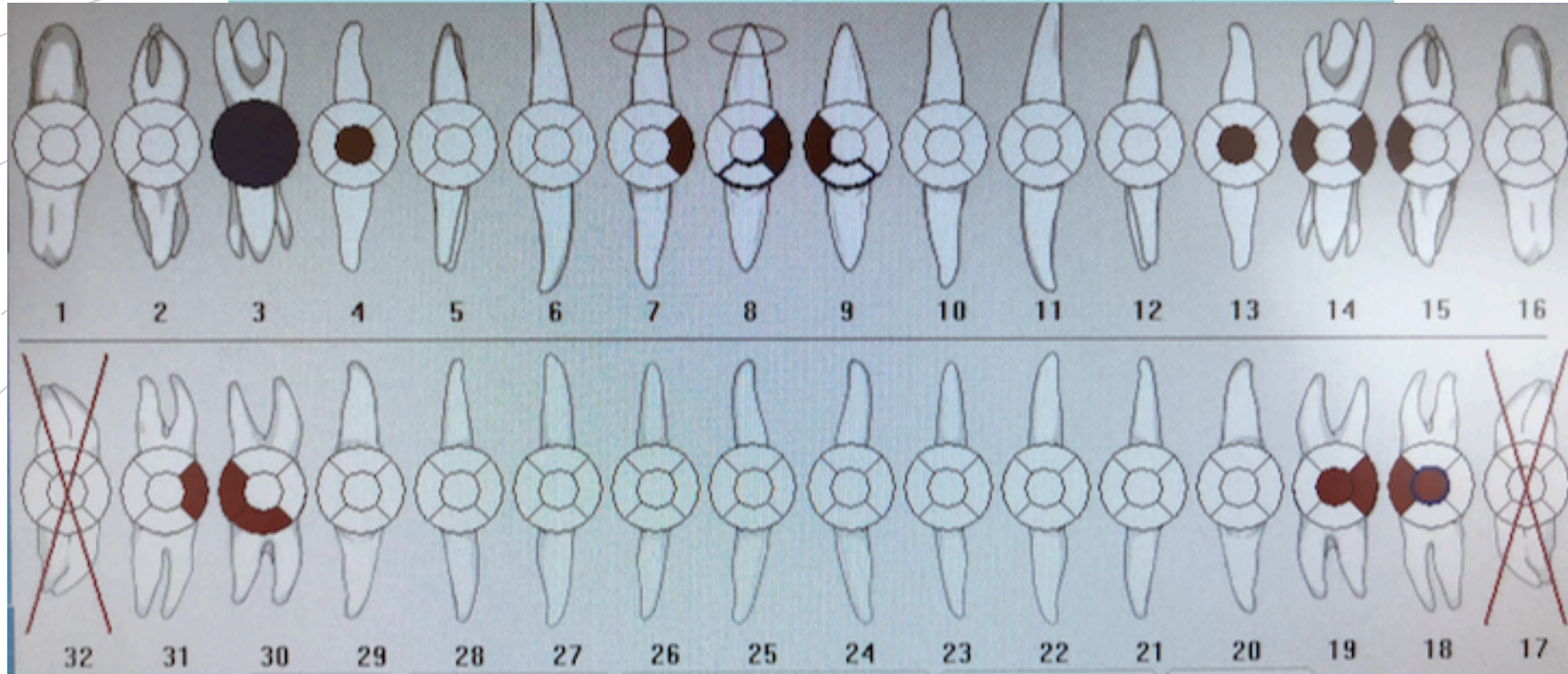
- **Extraoral Findings:** WNL. Generalized acne and multiple brown macules around both eyes.
- **Intraoral Findings:** WNL. Coated tongue
- **Gingival Description:** Generalized red, soft, spongy and inflamed gingiva with red gingival margins. Localized erythematous margins on #7, #8, #9 facial. Generalized moderate inflammation.
- **Occlusion:** Bilateral Class I with 3mm overjet and 10% overbite
- **Dental:** Localized slight attrition on anteriors.
- **Deposits:** Generalized heavy, tenacious subgingival calculus with supragingival calculus on mandibular anteriors.
- **Periodontal Status:** Periodontal Stage II Grade C

Radiographs



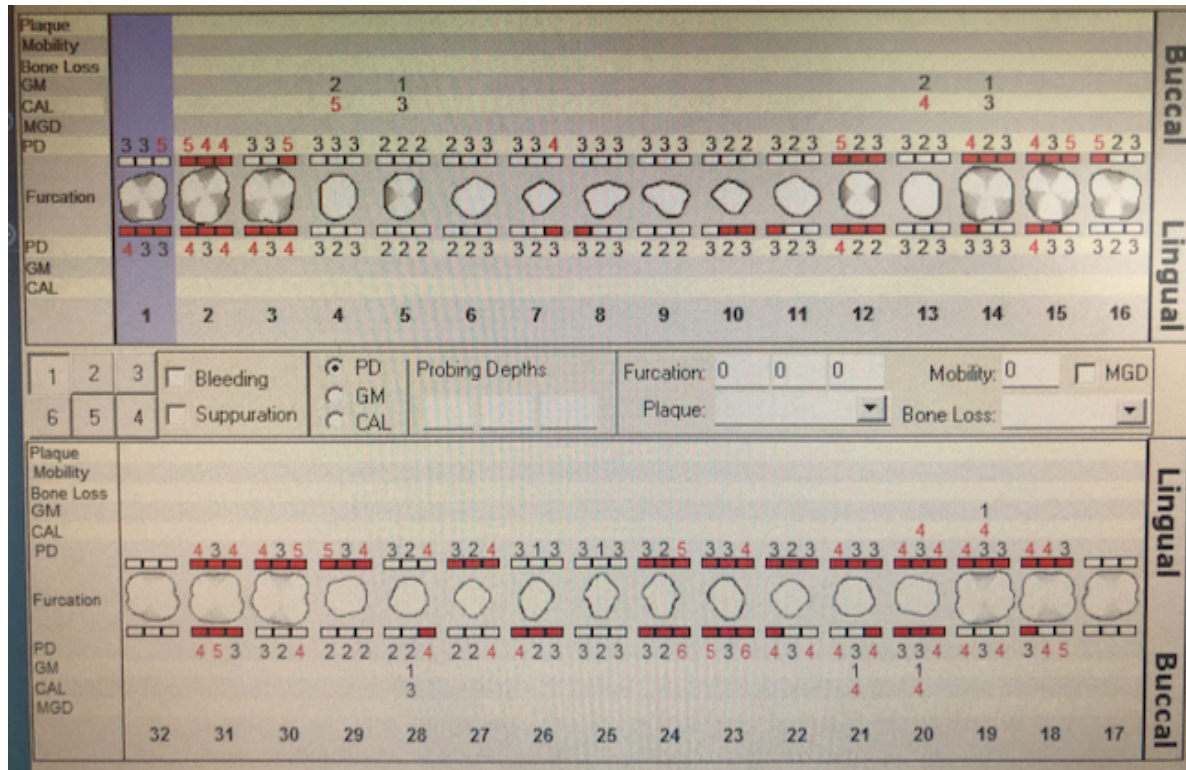
- **Generalized slight horizontal bone loss with localized 15% bone loss on maxillary anteriors and localized 30% bone loss between #22, #23.**
- **Calculus tags present on xrays**
- **Radiolucency on apex of #7 and #8**
- **Suspicious caries on #7-M, #8-M, #9-M, #14-MD, #15-M, #18-M, #19-D, #30-D, #31-M**
- **Impacted #17, #32**

Dental Charting



- Metal crown on #3
- Composite fillings on #7-MF, #8-MF, #9-MF
- Suspicious carious lesions and impacted mandibular third molars correlate with radiographs

Periodontal Charting



Generalized heavy bleeding on all quadrants

Generalized 4 – 6 mm probing depths on posteriors. Localized 5– 6 mm probing depths on #23, #24.

Localized recession (1 – 2 mm) on premolars (buccal).

CAL: 4 – 5 mm

No furcations, nor mobility present.

Dental Hygiene Diagnosis

Periodontal Diagnosis

Periodontal Stage 2 Grade C based on

- Patient's chief complain was based on concern of bleeding gums
- Generalized heavy bleeding on probing and exploring with generalized moderate inflammation
- Generalized slight horizontal bone loss with localized 15% bone loss on maxillary anteriors and localized 30% bone loss between #22, #23. (Stage 2 RBL)
- AAP Classification: 30% bone loss/ 23 years old = rapid rate (Grade C)
- CAL:
- Generalized heavy, tenacious subgingival calculus with supragingival calculus on mandibular anteriors.

Caries Risk

High due to history of caries and clinical and radiographic evidence of suspicious carious lesions.

Dental Hygiene Care Plan

Visit 1: <u>4/9/2021</u> (Date)	Visit 2: _____ (Date)	Visit 3: _____ (Date)	Visit 4: _____ (Date)
Patient Education: <input checked="" type="checkbox"/> TB manual D power assisted <input type="checkbox"/> Interdental Aid _____ <input type="checkbox"/> Toothpaste _____ D <input type="checkbox"/> Rinse _____ Radiographs: Digital <input type="checkbox"/> FMS <input type="checkbox"/> BWS (V/H) <input type="checkbox"/> Pan Debridement: <input checked="" type="checkbox"/> Quadrant(s) <u>LL</u> <input type="checkbox"/> Whole Mouth Pain Management: <input type="checkbox"/> Topical <input checked="" type="checkbox"/> Oraqix <i>if needed</i> <input checked="" type="checkbox"/> Local Anesthesia Coronal Polish: <input type="checkbox"/> Engine <input type="checkbox"/> Air Polisher: Agent _____ Other: <input type="checkbox"/> Topical Fluoride: <input type="checkbox"/> Arestin: <input type="checkbox"/> Sealant(s): <input type="checkbox"/> Impressions _____	Patient Education: <input type="checkbox"/> TB manual D power assisted <input checked="" type="checkbox"/> Interdental Aid _____ <input type="checkbox"/> Toothpaste _____ <input type="checkbox"/> Rinse _____ Radiographs: Digital <input checked="" type="checkbox"/> FMS <input type="checkbox"/> BWS (V/H) <input type="checkbox"/> Pan Debridement: <input type="checkbox"/> Quadrant(s) <u>UL</u> <input type="checkbox"/> Whole Mouth Pain Management: <input type="checkbox"/> Topical <input checked="" type="checkbox"/> Oraqix <input checked="" type="checkbox"/> Local Anesthesia Coronal Polish: <input type="checkbox"/> Engine <input type="checkbox"/> Air Polisher: Agent _____ Other: <input type="checkbox"/> Topical Fluoride: <input type="checkbox"/> Arestin: <input type="checkbox"/> Sealant(s): <input type="checkbox"/> Impressions _____	Patient Education: <input type="checkbox"/> TB manual D power assisted <input type="checkbox"/> Interdental Aid _____ <input type="checkbox"/> Toothpaste _____ <input checked="" type="checkbox"/> Rinse _____ Radiographs: Digital <input type="checkbox"/> FMS <input type="checkbox"/> BWS (V/H) <input type="checkbox"/> Pan Debridement: <input type="checkbox"/> Quadrant(s) <u>VR, LR</u> <input type="checkbox"/> Whole Mouth Pain Management: <input type="checkbox"/> Topical <input checked="" type="checkbox"/> Oraqix <input checked="" type="checkbox"/> Local Anesthesia Coronal Polish: <input checked="" type="checkbox"/> Engine <input type="checkbox"/> Air Polisher: Agent _____ Other: <input checked="" type="checkbox"/> Topical Fluoride: <input type="checkbox"/> Arestin: <input type="checkbox"/> Sealant(s): <input type="checkbox"/> Impressions _____	Patient Education: <input type="checkbox"/> TB manual D power assisted <input type="checkbox"/> Interdental Aid _____ <input type="checkbox"/> Toothpaste _____ <input type="checkbox"/> Rinse _____ Radiographs: Digital <input type="checkbox"/> FMS <input type="checkbox"/> BWS (V/H) <input type="checkbox"/> Pan Debridement: <input type="checkbox"/> Quadrant(s) _____ <input type="checkbox"/> Whole Mouth Pain Management: <input type="checkbox"/> Topical <input type="checkbox"/> Oraqix <input type="checkbox"/> Local Anesthesia Coronal Polish: <input type="checkbox"/> Engine <input type="checkbox"/> Air Polisher: Agent _____ Other: <input type="checkbox"/> Topical Fluoride: _____ <input type="checkbox"/> Arestin: _____ D <input type="checkbox"/> Sealants: _____ D <input type="checkbox"/> Impressions _____

Implementation

Visit One (Initial Visit)

Began debridement of LL with hand instruments but was not completed due to heavy bleeding and tenacious calculus. No pain management was necessary.

OHI: Biofilm score: 1. Taught patient modified Bass method due to heavy buildup along gingival margin and pockets. Explained to the patient that bacteria in the mouth is causing inflammation and bleeding.

Modification on treatment plan, exposure of FMX digital radiographs completed on initial visit instead of second visit. Patient was informed about findings on x-rays: bone loss, calculus tags, suspicious carious lesion, impacted third molars and radiolucency on apex of #7 and #8. Referral was given to patient.

Visit Two (Revisit)

No changes in medical history. Covid screening performed. Temperature 96.6. Patient reports slight discomfort in gums from previous visit. Patient reports she has incorporated modified Bass technique.

IO: Coated tongue.

Tissue response: Tissue still present with marginal redness, bleeding still present, residual calculus on #19-MD, #20-MD, #21-MD. Minimal improvement observed.

Treatment plan modification, rescaled residual calculus on LL and scaled UL, UR with hand instruments. No pain management was necessary.

OHI: Biofilm score 0.5 (improvement from previous visit). Taught patient correct flossing method and practiced with patient until she was comfortable with it.

Implementation

**Visit Three
(Continuation
of treatment
from morning
session)**

**No changes to EO/IO, gingival assessment nor biofilm score. Covid screening performed.
Temperature 98.2**

Checked LL, UL, UR for rescales and scaled LR with hand instruments to completion. No pain management was necessary.

OHI: Introduced patient to Crest Pro Health Mouthwash with Fluoride (Alcohol Free), because patient could not handle Listerine Antiseptic with alcohol. Also introduced tongue cleaner to patient and explained to the patient the importance of cleaning the tongue to get rid of bacteria.

Engine polished with medium grit prophy paste and applied 5% Fluoride Varnish. Post-op instructions were given to the patient to not have hot drinks or hard foods for the next 4-6 hours. After 4-6 hours, brush and floss the remaining varnish off.

Evaluation of Care- Outcome of Care

Ms. C's chief complaint about her bleeding gums in the front teeth when brushing was addressed. Through OHI, Ms. S seemed interested in improving her oral hygiene. Another concern she has was the sensitivity to cold in her front teeth. Through clinical and radiographic examination, it was revealed that she has recurrent caries on #7, 8, 9 and there were radiolucent lesions at the apex of #7 and 8. She was informed about the findings, and a list of dental offices was also provided along with the referral.

Referral

The patient is being referred to you for consultation and treatment in the following areas:

- Caries: Please evaluate suspicious caries # 8^M, #9^M, #14^{MP}, #15^M, #18^{MO}, #19^{DQ}, #30^{DB}, #31^M, #40, #130
- Restorative Care: _____
- Oral Pathology: _____
- Oral Surgery: Please evaluate 3rd molars
- Periodontal Disease: _____
- Elevated Blood Pressure: 1st reading: _____ 2nd reading: _____
- Other: Endodontic evaluation of #7 & 8

Patient was given referrals for suspicious caries, impacted third molars and for endodontic evaluation of #7 and 8. A copy of the patient's digital radiographs and a list of dental offices were included with the referral.

Continued Care Recommendations



The recare recommendation interval given to the patient is 3 months.

Ms. C has localized periodontitis stage 2 grade C. We would like to be updated about the patient's incorporation of oral hygiene instructions in her daily routine because our goal is to help her achieve a stable oral health. We would also like to make sure that she is getting her regular dental exams.

Final Reflection

Ms. C has had a bad dental experience when she was younger. When working with her, I made sure to do things at her pace. I took my time with her to make sure she was comfortable and made sure I explained everything I was going to do so that there wasn't going to be any surprises. I wanted her to know that she was in control and that she could let me know when to stop for a break. With that, I felt that I was able to build trust with Ms. C. We were able to complete everything that was on the treatment plan. She also demonstrated great interest and commitment to want to improve and to stabilize her oral health. It is safe to say, we are both satisfied with the results.