

Periodontal Exam Note Template

SOAP format, version 1.4, Apr 2022 by Dr. Robert Gyurko

Subjective:

1. CHIEF COMPLAINT (in the patient's own words):
2. REVIEW OF MEDICAL HISTORY (refer to Revised Health Form for detailed medical history):
 - Diabetes (HbA1c %):
 - Smoking:
 - Medications:
 - Allergies:
 - Other:
3. HISTORY OF PREVIOUS PERIODONTAL CARE:
 - Date of last prophylaxis and frequency of care:
 - Any prior periodontal diagnosis:
 - Any previous periodontal treatment (procedure, date):
4. ORAL HYGIENE PRACTICES:
 - Toothbrush type (manual/electric):
 - Brushing technique and frequency:
 - Flossing (yes/no, frequency):

Objective:

1. VITAL SIGNS:
 - Blood pressure:
 - Heart rate:
2. EXTRAORAL EXAMINATION:
 - Asymmetry:
 - Swelling:
 - Mouth opening, TMJ:
 - Palpable nodules:
 - Other:
3. INTRAORAL EXAMINATION:
 - Missing teeth:
 - Oral mucosa:
 - Tongue:
 - Other:
4. PERIODONTAL FINDINGS:
 - Gingival color (normal/erythematous):
 - Size (normal/enlarged):
 - Shape (scalloped/blunted papilla):
 - Margins (knife-edge/rolled):
 - Consistency (firm/spongy):
 - Texture (stippled/smooth):
 - Bleeding on probing (%):
 - Plaque free score (%):
 - Gingival inflammation (none/localized/generalized):

Tooth mobility (localized/generalized, grade):

Furcation (tooth #, grade):

Attachment loss (site # of greatest interdental attachment loss, mm):

5. RADIOGRAPHIC FINDINGS:

Bone loss extent (none/localized/generalized):

Bone loss type (horizontal/vertical):

Degree of bone loss (site # of greatest interdental bone loss, %):

Other:

Assessment:

1. DIAGNOSIS:

ADA Classification (Type I/II/III/IV):

AAP 2017 Periodontal Disease Classification (Periodontal

Health/Gingivitis/Periodontitis):

Localization (Generalized/Localized):

Stage (I/II/III/IV):

Grade (A/B/C):

Other (Periodontal Abscess/Endodontic-Periodontal Lesion/Mucogingival

Deformities/Peri-implant conditions):

2. ETIOLOGY:

Systemic contributing factors (smoking/diabetes/other):

Local contributing Factors (plaque/calculus/anatomy/occlusion/restoration/other):

3. PROGNOSIS:

Overall (good/fair/poor/questionable/hopeless):

Individual (tooth #, prognosis):

Plan:

1. TREATMENT PLAN:

Phase I therapy:

PG perio referral:

Other consultation:

Recare interval (3mo/6mo):

NEXT VISIT: