

ADULT HYGIENE PROCEDURE

Prophylaxis: (Most commonly known as a “cleaning”)

This scaling and polishing procedure is performed on patients in normal or good periodontal health to remove plaque, calculus and stains to prevent caries and periodontal diseases. Since pockets are absent in a healthy mouth, the scaling and polishing are performed on the clinical crown and into very healthy and shallow sulci. This appointment also includes a complete periodontal evaluation.

Initial Therapy:

An initial therapeutic procedure performed prior to root debridement therapy. In addition to a complete evaluation, this appointment involves the removal of plaque below the gingiva, calculus above the gingiva and a cosmetic polish.

Tissue Evaluation:

Upon diagnosis of not more than three 4mm periodontal pockets in an otherwise healthy mouth, a 2 week tissue evaluation appointment is indicated. This appointment will be to reprobe and evaluate the periodontal status and determine the possible need for further therapy.

Root Debridement Therapy:

Root debridement is a definitive treatment procedure, requiring local anesthesia, designed to detoxify the root surface. Additional procedures include in this appointment are subgingival irrigation and oral hygiene instruction. These procedures are critical elements in establishing periodontal health.

Definitive Therapy:

Re-probe and evaluate the periodontal status following therapy. This will consist of scaling, polishing, isolated root debridement if necessary, and the determination of the maintenance interval.

Supportive Periodontal Treatment:

Following periodontal therapy (root debridement) typically a 3 month interval is established for ongoing care. This is not a prophylaxis. Maintenance procedures consist of a complete examination including hard and soft tissue, periodontal evaluation, removal of bacteria from the crown and pocket areas, scaling and root debridement - possibly with anesthesia where indicated, subgingival irrigation, polishing and a review of the patient's plaque control efficiency. The successful long-term control of periodontal disease depends upon active maintenance care through supportive periodontal treatments.

Therapeutic Removal of Hard and Soft Deposits:

With no loss of attachment or bone in gingivitis, this scaling procedure is difficult because of the amount of calculus and inflammation present, and is not a routine procedure. This appointment will be followed by a fine scale polish appointment within 2 weeks.