

Perio Exam For _____

Perio Exam Date ____/____/____

Prepared By _____

Smoking

- | | | | |
|---------------------------------------|---|--|--|
| <input type="checkbox"/> Never smoked | Smoke(d) | Smoke(d) | Quit |
| | <input type="radio"/> Less than 10 cigs/day | <input type="radio"/> Less than 10 years | <input type="radio"/> Less than 10 years ago |
| | <input type="radio"/> 10 or more cigs/day | <input type="radio"/> 10 or more years | <input type="radio"/> 10 or more years ago |

Diabetic Status

	Good Control	Fair Control	Poor Control
HbA1c (%)	Less than 6.5	6.5 - 7.5	Greater than 7.5
All fasting plasma glucose (mg/dl)	90 - 104	105 - 130	Greater than 130

- Not diabetic or unknown Good diabetic control Fair diabetic control Poor diabetic control

Check all that apply

- | | |
|---|--|
| <input type="checkbox"/> Oral hygiene improvement is needed | <input type="checkbox"/> Dental care frequency is NOT regular as advised |
| <input type="checkbox"/> Scaling and root planing for any tooth has been done | <input type="checkbox"/> Periodontal surgery for pockets has been done |
| <input type="checkbox"/> Furcation involvements exist | <input type="checkbox"/> Subgingival restorations are present |
| <input type="checkbox"/> Vertical bone lesions exist | <input type="checkbox"/> Subgingival calculus detected by x-ray or exam |
| | <input type="checkbox"/> Patient currently uses vaping products |

Deepest Pocket per sextant from the gingival margin to the base of the Sulcus

Upper Right

- Less than 5 mm
- 5 - 7 mm
- Greater than 7 mm
- No Teeth
- Bleeding

Upper Anterior

- Less than 5 mm
- 5 - 7 mm
- Greater than 7 mm
- No Teeth
- Bleeding

Upper Left

- Less than 5 mm
- 5 - 7 mm
- Greater than 7 mm
- No Teeth
- Bleeding

Lower Right

- Less than 5 mm
- 5 - 7 mm
- Greater than 7 mm
- No Teeth
- Bleeding

Lower Anterior

- Less than 5 mm
- 5 - 7 mm
- Greater than 7 mm
- No Teeth
- Bleeding

Lower Left

- Less than 5 mm
- 5 - 7 mm
- Greater than 7 mm
- No Teeth
- Bleeding

X-ray distance from CEJ to Bone Crest

Measured

- Less than 2 mm
- 2-4 mm
- Greater than 4 mm

Visual

- Normal bone height
- Between normal and excessive
- Excessive bone loss

Upper Right

- Less than 2 mm
- 2-4 mm
- Greater than 4 mm
- No Teeth

Lower Right

- Less than 2 mm
- 2-4 mm
- Greater than 4 mm
- No Teeth

Upper Anterior

- Less than 2 mm
- 2-4 mm
- Greater than 4 mm
- No Teeth

Lower Anterior

- Less than 2 mm
- 2-4 mm
- Greater than 4 mm
- No Teeth

Upper Left

- Less than 2 mm
- 2-4 mm
- Greater than 4 mm
- No Teeth

Lower Left

- Less than 2 mm
- 2-4 mm
- Greater than 4 mm
- No Teeth