Dental Hygiene Diagnosis and Treatment Planning:
The Role of the Dental Hygienist in Comprehensive Patient Care

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Objectives

• Explain the components of the dental hygiene process of care
• Differentiate between the periodontal diagnosis and the dental hygiene diagnosis
• Explain how the patient’s periodontal diagnosis and prognosis are determined
• Describe the evidence-based approach to treatment planning
• Explain how periodontal case types aid in treatment planning

Clinical Decision Making

• Dental Team’s Role
  • Dentist’s responsibility to arrive at a periodontal diagnosis
  • HOWEVER it is both the dentist and RDH responsibility to plan the NSPT
• Patient’s Role
  • Dental healthcare providers have an obligation to encourage patients to fully participate in treatment decisions and goals.
  • On-going process

Steps in Treatment Planning

1. Assigning a Correct Periodontal Diagnosis

Diagnostic Questions

1. Does the clinical assessment indicate health or inflammatory disease in the periodontium?
   • Signs of periodontal disease: features of a disease that can be observed or measure by a clinician
   • Symptoms of periodontal disease: features noted by the patient
Signs of Inflammation in the Periodontium

<table>
<thead>
<tr>
<th>Overt Signs</th>
<th>Hidden Signs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Color change in gingiva</td>
<td>Bone loss</td>
</tr>
<tr>
<td>Contour change in gingiva</td>
<td>Exudate</td>
</tr>
<tr>
<td>Change in consistency in</td>
<td>Bleeding on probing</td>
</tr>
<tr>
<td>gingiva</td>
<td></td>
</tr>
</tbody>
</table>

Diagnostic Questions

2. If the clinical assessment indicates inflammatory disease, is the disease gingivitis or is it periodontitis?
   • Attachment Loss
   • Radiographs

Diagnostic Questions

3. If the patient has gingivitis, what type of gingivitis?
3. If the patient has periodontitis, what type of periodontitis?
   • Refer to 1999 AAP Classification of Periodontal Diseases and Conditions

DH Process of Care

• Assessment
• Diagnosis and Prognosis
• Treatment plan
• Implementation
• Evaluation
• Maintenance

Assessment

• Data collection
  • MDHX, oral and perio exam, radiographs, etc.
• Identification
  • Patient’s condition
  • Risk factors
• Formulate DH diagnosis & prognosis
  • Requires application of professional judgment and critical thinking

Dental Hygiene Diagnosis and Prognosis

• Relates to problems/solutions addressed within scope of dental hygiene practice
• Link oral health problems to etiologies/risk factors
• Provides basis for planning intervention
• Identify expected outcomes and patient responses
• Excludes diagnoses requiring treatment legally defined as dental practice
Periodontal Diagnosis and Prognosis

• Diagnosis
  • Identification of disease or condition
  • Based on:
    • Assessment findings
    • Recognition of periodontal disease classifications

• Prognosis
  • Prediction regarding outcome of disease
  • Consider influencing factors

Periodontal Diagnosis

• Use correct classification
  • Plaque-induced gingivitis, chronic periodontitis, etc.

• Include descriptive modifiers
  • Localized, generalized
  • Slight, moderate, severe

• Supplemental description
  • Case type (I-IV)
    • Designates disease severity only
    • NOT a diagnosis

Descriptive Modifiers

<table>
<thead>
<tr>
<th>Disease severity</th>
<th>Disease extent</th>
<th>Descriptive Modifier</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Slight</td>
<td>Localized</td>
<td>Slight</td>
<td>1-2 mm CAL</td>
</tr>
<tr>
<td>Moderate</td>
<td></td>
<td>Moderate</td>
<td>3-4 mm CAL</td>
</tr>
<tr>
<td>Severe</td>
<td></td>
<td>Severe</td>
<td>&gt;5 mm CAL</td>
</tr>
<tr>
<td></td>
<td>Generalized</td>
<td>Generalized</td>
<td>&gt;30% site involvement</td>
</tr>
</tbody>
</table>

AAP Case Types

| Case Type I       | Gingivitis only |
| Case Type II      | Mild (Slight) periodontitis |
| Case Type III     | Moderate periodontitis |
| Case Type IV      | Severe periodontitis |

Periodontal Prognosis

• Prediction of outcome
  • Short-term
  • Long-term

• Descriptions
  • Good
  • Fair
  • Guarded
  • Poor

Periodontal Prognosis

• 2 components of the periodontal prognosis
  • Overall case prognosis
  • Individual tooth prognosis

• What factors influence each of these components?
Activity

• Groups of 4
  • Develop case studies
    • Medical history
    • Local and systemic risk factors
    • Periodontal findings
    • Radiographs (provided)
  • Share with class

Treatment Plan

• Evidence-based
  • Patient need
  • Scientific literature
  • Includes patient education

• Sequential outline
  • Comprehensive plan
  • Dental hygiene plan

IMPORTANT…….

• Include the PATIENT in treatment plan development!!

• ALWAYS REMEMBER-the patient is a real person, not just a set of teeth!

Comprehensive Treatment Plan

• Assessment and preliminary therapy (preliminary phase)
• Restorative therapy (phase III)

• Non-surgical periodontal therapy (phase I)
• Periodontal Maintenance (phase IV)

• Surgical therapy (phase II)

Direct participation by RDH

• Assessment

• NS Periodontal Therapy – phase 1

• Periodontal Maintenance – phase 4

Considerations When Developing a Treatment Plan

• Individual patient’s needs/desires

• Health

• Age

• Treatment tolerance
  • Physical, emotional
  • Sensitivity (pain management)

• Number of teeth present
Considerations When Developing a Treatment Plan

- Extent of disease
- Amount of calculus
- Restorative needs
- Barriers to care
  - What are some examples of barriers to care?

DH “Periodontal” Treatment Plan

- Assess patient periodontal status
  - Health vs. disease
- Health
  - Patient education
  - Prophylaxis
  - Fluoride
- Disease
  - Patient education
  - Periodontal debridement
  - Re-evaluation
    - Maintenance interval, re-treat, adjunctive therapy, or referral

General Guidelines for Treatment of Periodontal Disease

- Length and # appointments varies
- Must include re-evaluation appointment
- Periodontal Maintenance

General Guidelines

- Anxious patient
  - Scale least complicated area first (fewest teeth, least severe, etc.) to build rapport
- Minimize treatment discomfort
  - Local anesthesia, analgesia
  - Plan one quadrant at a time or half mouth (max/mand same side)

Gingivitis (Case Type I)

- Active/Initial Therapy and Re-evaluation
- Active/Initial Therapy (1 appointment)
  - MDHx
  - PHP/Patient education
  - Full mouth scaling/debridement with ultrasonics, hand instruments
  - Antimicrobial irrigation or rinse
  - Post-op instruction

Gingivitis (Case Type I)

- Re-evaluation (4-6 weeks)
  - MDHx
  - Patient education
  - Assess healing
    - Gingival contour, color, etc.
  - Re-probe
    - Fine scale
    - Selective polishing (if no inflammation)
    - Fluoride
    - Determine re-treat or recare interval
Periodontitis (Case Types II, III, IV)

- **Active/Initial therapy and Re-evaluation**
  - **Active/Initial therapy (2 or 4 appointments)**
    - MDHX and vital signs
    - Patient education
    - Scaling/debridement with ultrasonics, hand instruments
  - **Quadrant or half mouth**
  - **Local Anesthesia**
    - Antimicrobial irrigation or rinse
    - Post-op instructions

- **Re-evaluation (4-6 weeks)**
  - MDHX
  - Patient education
  - Assess healing
    - **Gingival contour, color, etc.**
    - **Re-probe**
      - Fine scale
      - Selective polishing (if no inflammation)
      - Fluoride
      - Determine re-treat, adjunctive therapy, surgery, maintenance interval

Insurance Treatment Codes

- **Codes for insurance reimbursement**
  - 1110-prophylaxis (health)
  - 4341-periodontal debridement by quadrant (sometimes referred to as SRP)
  - 4910-periodontal maintenance, after active therapy
    - Use 1110 for re-eval, then 4910 for maintenance
    - Once a 4910, always a 4910
  - 4355-FM debridement to enable comprehensive periodontal exam

Activity

- **Determine periodontal diagnosis and prognosis**
- **Identify risk factors**
- **Write out specific DH treatment plan for each appointment, including re-evaluation**
  - **Specific patient education**
  - **Instrument sequence**
  - **Post-operative instructions**
- **Share with class**

Case Presentation

- **Process of presenting assessment data and treatment options to patient**
  - Benefits and risks of treatment
  - Risks of non-treatment
  - All options
    - Treatment alternatives
    - No treatment

Informed Consent

- **What is informed consent?**
- **What are the specific elements of informed consent?**
- **Why would written consent be better than verbal consent?**
Ethics

• Failure or delay in communicating findings or treatment options is unethical

• Performing procedures without consent is unethical and illegal

Activity

• Based on your group’s case study:
  • Explain your findings and recommendations to the dentist
  • Explain your findings and recommendations to the patient
  • Include rationale for your treatment recommendations

Ethical Scenario

• What are some of the ethical considerations in this scenario?

• How would you respond to the patient in such a situation?

• How would you respond to the dentist in such a situation?