



HD.FR.32 | YT:22.04.2014 | REV.NO:01 | REV.T: 24.06.2022 | S.NO: 1/2

**The Patient**

Name Surname:

Age:

Job:

Education Level:

Date:

Telephone Number:

Examining physician:

**Systemic History / Drugs Used:**

**Dental History:**

Main complaint:

Frequency of Visits to the Dentist:

The Most Recent Dentist Visit and the Reason:

Operations, Causes of Tooth Extraxtion, Restorative Procedures, Periodontal Treatment

**Extra Oral Examination:**

Head Neck Area, Lymph Nods, TMJ, Sinus

**Intra Oral Examination:**

Oral mucosa, Tongue, Oropharyngeal Area, Buccal Mucosa, Floor of Mouth, Hard-Soft Palate

**Dental Examination:**

Proximal and Occlusal Relationships

UPPER JAW	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Dental restorations																
Abrasions, Attritions, Erosions																
Sensitivity to Percussion																
Hot-Cold Sensitivity																
Pathological Migration																
LOWER JAW	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Dental restorations																
Abrasions, Attritions, Erosions																
Sensitivity to Percussion																
Hot-Cold Sensitivity																
Pathological Migration																

**Periodontal Examination:**

Gingiva (Color, Contour, Roughness, Consistency, Width of adherent and keratinized gingiva)

Mucogingival stress: High frenulum; Right upper bukkal ( ) Labial ( ) Left upper bukkal ( )

Right lower bukkal ( ) Labial ( ) Left lower bukkal ( )

**Oral Hygiene:**

Dental Calculus: Supragingival amount and localisation:

Subgingival amount and localisation:

Tooth brushing frequency and method:

Other oral hygiene tools:

Habits:

**Radyolojik Muayene:**

Percentage of Bone loss:

Type and Localization of Bone loss:

Occlusal Trauma Findings:

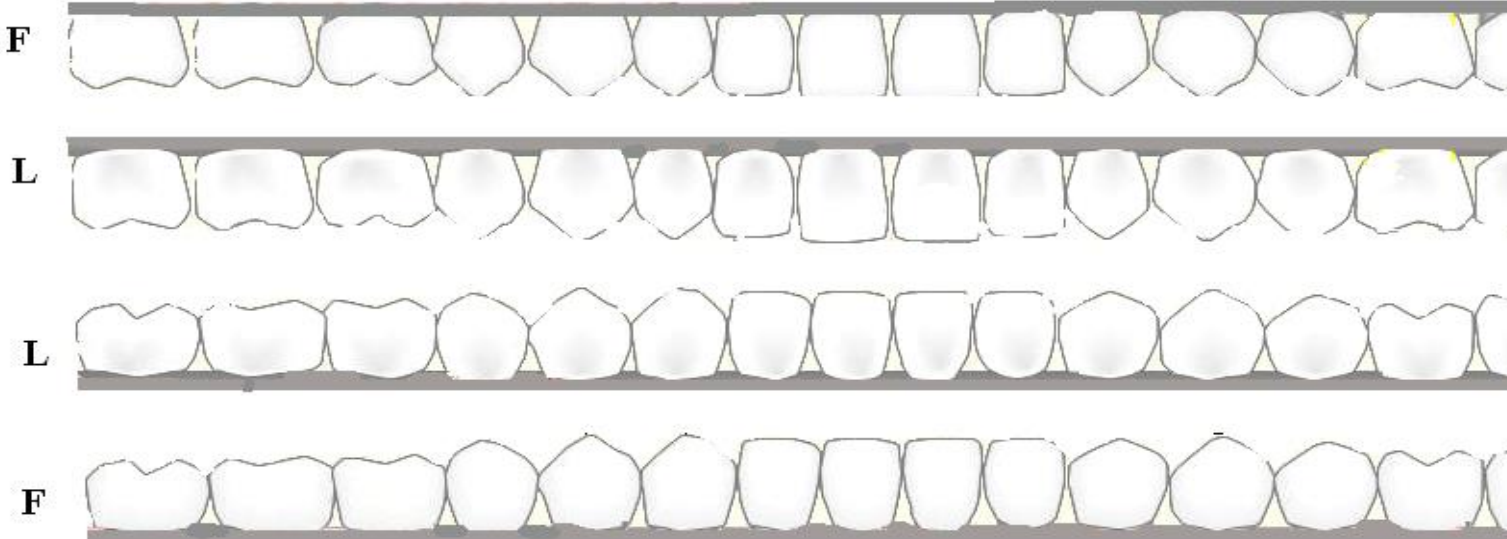
Presence of Periapical Lesion:



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UPPER JAW	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Plaque index																
Gingival index																
Bleeding on Probing																
Mobility																
Fremitus																
Furcation problem																
Attachment loss																

SAG



LOWER JAW	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Plaque index																
Gingival index																
Bleeding on Probing																
Mobility																
Fremitus																
Furcation Problem																
Attachment loss																

Etiological factor:

Periodontal Diagnosis:

Treatment Plan:

.....Anamnesis

.....Det+Pol

.....Control

I was examined by Dt .....on .../.../...../. The information I have provided about my general health condition and dental complaints is correct. The treatment process was explained by my doctor. I accept the recommended treatment with its possible complications.

NAME/SURNAME

SIGNATURE

PATIENT'S GUARDIAN

SIGNATURE

RESPONSIBLE DT.

SIGNATURE