Escondido Smiles Dentistry and Orthodontics

Dental Procedure Details

(Hygienist) • Hygiene

Dental Procedures

D1110 - PROPHYLAXIS - ADULT

Adult Prophylaxis Procedure Note

Medical History: Medical history reviewed and confirmed there are no contraindications to treatment.

All risks, benefits, complications, and alternative treatments, including no treatment, have been discussed and all relative questions have been addressed. Consent has been obtained to perform the procedure. Patient and clinician(s) wore proper eye protection.

An initial periodontal assessment was completed

Supragingival Calc: None
Subgingival Calc: None
Plaque: Generalized light
Inflammation: None
Stain: None
Bone Loss: None
Scaling: Hand scaled and ultrasonic used
Polish: Full mouth polish completed
Irrigation: No irrigation recommended

Fluoride: No fluoride recommended
Oral Hygiene: Great
Discussed oral hygiene instructions with patient.

Adjunctive recommendation were discussed including: None

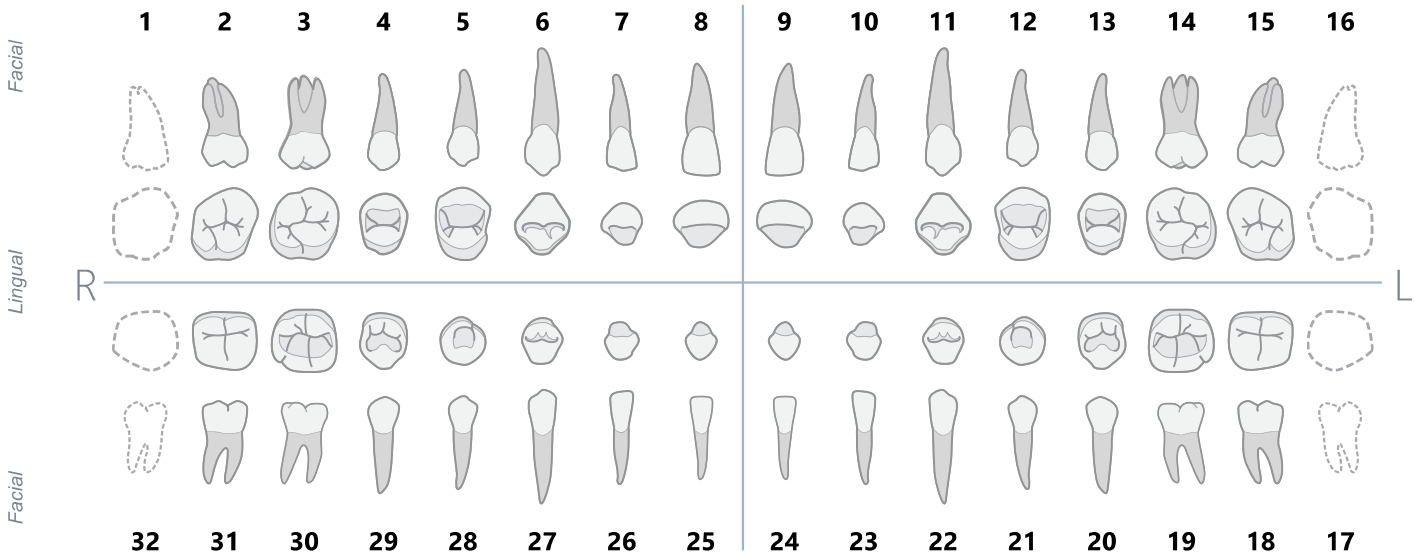
Pocket Depth: N/A
CAL: None
Gingival Recession: None

Next Hygiene Visit: 3 month continuing care

Pt wants to do oral DNA next visit

Tooth Chart as of 7/11/2024

Last edited on 4/4/2024 by



Dental Metrics

Bleeding on Probing

Exam Date	Percent of Sites
04/04/2024	0.0%

Probing Depths

4/4/2024

Range	Count of Sites in Range	Percent of Sites in Range
0 to 4	168	100.0%
5	0	0.0%
6+	0	0.0%

Clinical Attachment Levels

4/4/2024

Range	Count of Sites in Range	Percent of Sites in Range
1 to 2	0	0.0%
3 to 4	0	0.0%
5+	0	0.0%

Instructions

AVS - Outpatient (Snapshot) - Automatic Snapshot taken 7/11/2024

Encounter Status

Signed by on 7/11/24 at 5:18 PM

Addendum Routing History

None

Reviewed this Encounter

	Medications	Problems	Allergies	History
	✔	✔	Reviewed	Medical, Surgical

Dental Procedures

Completed in this encounter

D1110 PROPHYLAXIS - ADULT

Orders Placed

None

Visit Diagnoses

Primary: **Encounter for dental examination and cleaning without abnormal findings** Z01.20

Medication Changes

As of 7/11/2024 5:18 PM

None

Medication List at End of Visit

As of 7/11/2024 5:18 PM

	Refills	Start Date	End Date
atorvastatin (LIPITOR) 10 mg tablet -- Patient-reported medication	—		—
ezetimibe (Zetia) 10 mg tablet Patient-reported medication	—		—
metFORMIN XR (GLUCOPHAGE-XR) 750 mg 24 hr tablet Patient-reported medication	—		—