

PERIODONTAL MAINTENANCE REPORT

To: Dr. Paul Kazmer Patient: _____ Date: _____

Our patient was seen today for periodontal recall and examination.

Clinical Findings Reveal:

- Periodontal Health: Good Fair Poor
- General level of plaque control: Excellent Good Fair Poor
- Calculus: Light Moderate Heavy - Generalized Localized _____
- Sulcus depths ___to ___ mm generally, - deeper areas _____
- Bleeding: Generalized Localized ____ Purulence: Generalized Localized ____

Evaluation of Findings:

- No appreciable periodontal changes noted since last visit
- Periodontal concerns/changes noted: _____

- Restorative concerns that need to be addressed: _____

Maintenance Care:

- Continue present recall schedule, alternating on a ___ month basis with your office.
- Your patient is *due for recall in your office* in _____
- Due to periodontal concerns, we suggest that our patient's periodontal maintenance be performed in your office.

- Arestin placed (sites): _____
- Oral hygiene aids recommended: _____

- Current radiographs: FMX: _____ BWX: _____

Your patient has been asked to contact you:

- Please evaluate: _____

Comments for Periodontist: _____

