Clinical Dentistry – Patient Management Flow Diagram

Chief complaint(s)

- Burden of Personal / Social situation
- Burden of Dental condition / illness
- Burden of Medical condition / illness

General & Extraoral status (Diagnostic tests?)
Intraoral status (Diagnostic tests?)
Dentition status (Diagnostic tests?)
Individual tooth status (Diagnostic tests?)

Establish: Etiology
Prognosis

Establish: Diagnosis (etiology, prognosis & therapy)

Diagnose(s)

Treatment objectives formulated "Contract Part A" Consent
- Tx strategy A
- Tx strategy B
- Tx strategy C

Strategy to achieve objectives "Contract Part B" Consent
- Therapy step etc.
- Patient explained etiology to avoid future illness
- Patient explained need for maintenance & repair

Therapy steps

Remake or alternative treatment strategy

Were objective(s) achieved?
- yes
- no

Revise treatment objectives?
- yes
- no

Happy patient

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Tooth Substance Loss – treatment decisions

Physiological

Examination - Tooth surface Loss

Pathological

Determine etiology
Corrosion?
Friction?
Stress?

Management
1. Explanation and patient education
2. Prevent further loss
3. Active treatment?

Localized loss / only anterior teeth

Diet?
Splint?
Fluoride?
Habit?
Further referral?

General loss

Lower

Upper

Upper and lower

Dahl appliance

Establish CR. Restore to existing facial height

Decreased VDO (Increased FWS)
No Dento-alveolar compensation)

VDO appropriate
(Normal FWS)
Dento-alveolar compensation

Stabilisation splint at increased vertical height tolerated?

Yes - restore to this increased height

No - consider crown lengthening procedures

Restore or Refer?

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VDO= Vertical dimension of occlusion
FWS = Free Way Space
Dental Trauma & irreparable tooth – treatment decisions

- Trauma - Irreparable tooth
  - Remove
  - Space closure
    - Spontaneous mesial movement of posterior teeth
    - Small residual spaces are accepted
    - Orthodontic space closure
    - Autogenous transplantation
    - Prosthetics, removable or fixed
    - Implants
  - Retain - Extraction later RISK: root resorption / ankylosis / infraocclusion

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Structurally Damaged Dentition – treatment decisions

No extractions
- Restorative & Crowns
  - Contraindications
    - Immediate
  - Bone support

Occlusal morphology problems

Occlusal trauma

Identify Problem with dentition

Structural Damage

Strategic Extractions

Tooth bounded space
- Single missing
  - FDP
    - Retention & Resistance
      - Esthetics
      - Endo status

Lost Periodontal support

No tooth distal to edentulous space
- No extractions
- Full extractions

Few teeth remain
- Strategic Extractions

Few teeth remain
- Immediate Denture
  - Reline
  - Denture
  - Anatomy & Mucosa

Full extractions
- Immediate Denture
  - Reline
  - Denture
  - Anatomy & Mucosa

Overdenture

Implant
- Implant
- Bone support

RDP
- Overdenture
- Implant
- Bone support
- Splint vs non-splint
- Fixed vs removable

Immediate
- Full extractions
- Immediate Denture
- Overdenture
- Implant
- RDP

Anatomy & Mucosa

Immediate
- Full extractions
- Immediate Denture
- Overdenture
- Implant
- RDP

Bone support
- Full extractions
- Immediate Denture
- Overdenture
- Implant
- RDP

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Når bør en fylling revideres? 4 trinns risiko evaluering

1. Generell risikoprofil
   - Manglende oppfølgning i recall program eller uregelmessige tannlegebesøk
   - Systemisk sykdom
   - Medisiner - bivirkninger
   - Sigarettrøkning
   - Kosthold
     - Sukkerinntak, frekvens
     - Tilgjengelighet av snacks
   - Bruk av fluorider
   - Lavt sosialt ressursnivå
   - Lavt kunnskapsnivå om tannsykdommer
   - Lavt forventningsnivå til tannbehandling
   - Historikk av gjentatte behandlinger......

2. Risiko nøkkel-markører på oral sykdom
   - Tidligere karieserfaring eller tap av støttevev i forhold til pasientens alder
   - Høye plaque-, og/eller blødning-score
   - Saliva kvantitet og kvalitet
   - Prevalens av dype periodontal-lommer

3. Indikatorer på patogene forhold eller på en progressiv oral sykdom
   - Periodontal inflammasjonsparametre
   - Karies og karies-lokalisasjon
   - Tilstedevarse av økologiske nisjer med vanskelig tilgang, eksempelvis furkasjoner
   - Tilstedevarse av iatrogene faktorer, eksempelvis fyllingsdefekter

4. Teknisk perfeksjon av fylling
   - Har fravær av en fyllings tekniske perfeksjon en betydning i forhold til din vurdering om mulig risiko for sykdomsutvikling på bestemte steder på eller rundt tannen?

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## Time Point of Implant Loading / Restoration

<table>
<thead>
<tr>
<th>Planning Level &amp; Decision-Making Unit</th>
<th>Immediate</th>
<th>Early</th>
<th>Late</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Patient</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>healthy; cooperative/compliant; no occlusal/oral parafunctions</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>patient’s demands on treatment outcome are well defined and feasible</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>low smile line</td>
<td></td>
<td></td>
<td>high smile line</td>
</tr>
<tr>
<td><strong>Bone</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>bone quantity A or B; bone quality I, II or III</td>
<td></td>
<td></td>
<td>reduced bone quantity type C, D or E and/or bone quality type IV</td>
</tr>
<tr>
<td>no peri-implant bone defects directly communicating with implant surface; defect class 0</td>
<td>minor peri-implant bone defects as class I, II and allowing for a transmucosal healing modus</td>
<td>peri-implant bone defects as class III to V and/or sinus lift; defects as class I, II with missing option for a transmucosal healing modus</td>
<td></td>
</tr>
<tr>
<td><strong>Soft Tissue</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>gingiva morphotype = thick, low scalloped</td>
<td>gingiva morphotype = thin, high scalloped</td>
<td></td>
<td></td>
</tr>
<tr>
<td>healed soft tissues</td>
<td>extraction site with minor needs for soft tissue grafting and practicable at implant surgery</td>
<td>extraction site with major needs for soft tissue grafting</td>
<td></td>
</tr>
<tr>
<td>sufficient amount of soft tissue; sufficient width of keratinized mucosa; no scars or tattoos to be corrected</td>
<td>presence of small-sized soft tissue defects/scars/tattoos where correction is practicable at implant surgery</td>
<td>presence of soft tissue defects with a need for correction; presence of scars/tattoos with a need for correction</td>
<td></td>
</tr>
<tr>
<td><strong>Prosthetics</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>high diagnostic predictability with regard to design of suprastructure</td>
<td>diagnostic uncertainty of prospective suprastructure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>good control of initial implant load possible (number &amp; length of implants, splinting with suprastructure, infraocclusion)</td>
<td>increased implant loading (reduced number of implants, short implant length, suprastructure unspanned)</td>
<td></td>
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</tr>
<tr>
<td>option to produce implant prosthetics fully or at least in part prior to surgery</td>
<td>final prosthetic suprastructure practicable (no provisional necessary)</td>
<td>complex prosthetics; stepwise approach to final design mandatory</td>
<td></td>
</tr>
<tr>
<td><strong>Team</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>well established treatment sequences with regard to implant surgery and prosthetics</td>
<td></td>
<td></td>
<td>limitations (distance, frequency) in communication between clinician(s) and dental technician</td>
</tr>
<tr>
<td>excellent communication between clinician(s) and dental technician</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Bone quantity A-E; bone quality I-IV according to Lekholm & Zarb 1985

Bone defect class 0-V according to Glauser 1999
## Comparisons of Dental Products – online resources

<table>
<thead>
<tr>
<th>Website</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><a href="http://www.realityesthetics.com">Reality</a></td>
<td>Reality. No Subscription but registration necessary for website. Presents and rates products from editors’ perspectives and users.</td>
</tr>
<tr>
<td><a href="http://www.dentalcompare.com/index.asp">Dental compare</a></td>
<td>Dental compare. Presents products and allows comparisons. Contain video links for proper handling</td>
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<tr>
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Links checked per March 2009.
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