

## PERSONAL DETAILS

Name: Ms. Shikha Singh	Age/Gender: 25/F	<b>Booking ID:</b> 18092624	<sup>49</sup> LAB ID:							
Chief Complaints:	Malaligned teeth and cleaning issues in the same area.									
History Of Present Illness:	No relevant history.									
Past Medical History:	No relevant history.	Past Dental History:	No relevant history.							
Smoke/Smokeless/Alcohol:	No deleterious habit.	Frequency/Duration:	No relevant history.							
Diet:	Consumes a non-vegetarian diet.									
Brushing:	Toothbrush + Toothpaste	Frequency: Once	Method: Circular							

## **DENTAL EXAMINATION:**

EXTRAORAL EXAMINATION: TMJ / LYMPHNODES / LIPS OTHERS									No abnormalities detected.											
Mouth Opening: Optimum									Male	odor:	Ab	Absent								
INTR	ORA	L EX	AMIN	JATIO	DN:															
I	•	HAI	RD TI	ISSUE	E EXA	MIN	ATIO	N:												
RIGHT						_	ılalign	1		FT		1			STAIN: +					
18	17	16	15	14	13	12	11	21	22 D	23	24	25	26	27	28	-	CALCULUS: +			
48	47	46	45	44	43	42	41	31	32	33	34	35	36	37	38		*D= Decayed Teeth, *M= Missing Teeth, *F= Filled Teeth			
DMF	T SCO	ORE:	RIC	GHT							LF	FT					*r= rilled	Teeth		
	1	<u>м</u>	0	F	. (	)		DMF	т ѕсс	ORE:		1	1 <b>TEETH INTACT:</b> 31							
II. SOFT TISSUE EXAMINATION: GINGIVA: NAD TONGUE: NAD TONSILS: NAD PALATE: NAD CPI INDEX: 1 Code 0: Healthy Perior																				
Code       1         Code       1         Code       1         Description       Code 1: Bleeding observed after probing. Code 2: Calculus or other plaque retentive factors either seen or felt during probing. Code 3: Pathological pocket 4-5 mm in depth. Code 4: Pathological pocket 6 mm or more in depth.																				
ADV	ADVISED INVESTIGATIONS: IOPA ORT 22 REGION (to evaluate the roots)																			
CLIN	ICAI	L TEN	TAT	IVE D	DIAGN	NOSIS	5 (*Fii	nal Di	agnosi	is give	n only	after s	specif	ied in	vestig	atio	ns correlat	ions)		
<ul><li>Chronic generalized gingivitis.</li><li>Grossly decayed 22.</li></ul>								(ha-												
TREATMENT ADVISED:							DR. TINA'BHARDWAJ BDS, MDS.													
<ul> <li>Scaling and Root Planing.</li> <li>Brush twice daily.</li> <li>Orthodontic &amp; Endodontic Consultation/Extraction irt 22.</li> </ul>								22.	Consultant Dentist, Consultant Oral & Maxillofacial Pathologist. Certified: Oral Cancer Screening, Salivary Diagnostics.											