

GUIDELINES FOR COMPLETION OF AN ORAL HEALTH CERTIFICATE

1. PATIENT INFORMATION SECTION

Please record the name and home address of the patient for future reference by other health care providers.

2. MEDICAL ISSUES IMPACTING PROSTHODONTIC TREATMENT SECTION

This section is to identify medical conditions which may affect or alter treatment options for the patient.

As a dry mouth may affect retention of a removable denture or increase caries (decay) rates, it should be identified and discussed with the patient. Many medications may cause xerostomia - parasympatholytic agents, tricyclic antidepressants, etc. If it does not impact the patient's overall health, drug or dosage changes may improve salivary flow. An investigation of the patient's current prescriptions and their influence on saliva production should be performed prior to denture fabrication. Appropriate changes may increase the patient's overall satisfaction with the denture and reduce other oral disease risks. Please see <http://jada.ada.org/cgi/content/full/134/1/61>.

Dentures are composed of a variety of materials. The greatest potential allergens would be associated with acrylics and metals. Patients with potential allergies or adverse reactions to certain materials should be made aware of the concern and further investigation of the condition may be necessary prior to denture fabrication.

Latex reactions range from mild to severe. As many products used by oral health providers (gloves, toothbrushes, rubber dams, etc.) contain latex, awareness by all health providers is important to protect the patient's health.

As certain materials used in the fabrication of dentures may exacerbate a metallic taste, awareness of problem is helpful. As there are potential health issues related to a metallic taste, a further investigation of the symptom's cause may be necessary.

Although not specifically indicated on the form, tobacco use – smoking and chewing – and the general and oral health risks associated should be discussed with the patient. As the risks may be further aggravated by irritations related to denture wear, a discussion about tobacco cessation programmes is beneficial.

3. PATIENT REMOVEABLE PROSTHODONTIC CONCERNS SECTION

The section offers a quick checklist of the patient's current denture situation and future interests.

4. ORAL EXAMINATION SECTION

Generally for this section:

No significant finding - would indicate there is no pathology or condition in the area that requires delay or further diagnosis before fabrication of a denture.

Recommended follow up - is a relative contraindication to fabricating a denture. It indicates an issue that should be assessed further or treated which would improve the final denture result.

Required follow up - should be considered an absolute contraindication for fabricating a denture until the follow up is complete. A "required follow up" should be limited to situations affecting the feasibility of any planned denture fabrication (i.e. infections, tumours, decay, etc.).

4(a) EXTERNAL HEAD AND NECK SECTION

Examination primarily involves:

- discussion about any patient pain or symptoms associated with the head and neck;
- visual and tactile assessment of the skin, muscles and lymph nodes;
- assessment of the temporomandibular joint (TMJ) for disorders or dysfunction.

Along with completing the OHC, doctor should communicate any findings with the patient and explain the significance of the finding, effect on denture fabrication and importance of appropriate follow up.

4(b) INTRA-ORAL SOFT TISSUE SECTION

Examination (recommended with an intra-oral mirror, gauze and tongue blade) includes:

- discussion about any patient pain, recent changes or symptoms associated with the mouth;
- visual and tactile assessment of the lips and intra oral cavity for:
 - for abnormal discolouration or inflammation/bleeding;
 - ulcerated, raised or underlying hard lesions;
- emphasize the lateral borders of the tongue, floor of the mouth and fauces.

Soft tissue hypertrophy on the palate or residual ridge should be assessed and the potential impact on denture retention discussed. Rehabilitative or surgical treatment options prior to denture fabrication should be reviewed with the patient.

The residual alveolar ridge needs to be carefully examined to assess its ability to support and retain a prosthesis. Size, shape and contour will affect the functionality of the denture. Lingual and palatal tori; sharp edges, points or undercuts in the hard tissue may limit the comfort and retention of a denture. Surgical correction of the anatomical structure; value in retaining remaining teeth or auxiliary retention options (i.e. implants) may improve the feasibility of a denture and should be discussed at this time.

4(c) DENTAL/TEETH – RESTORATIVE AND PERIODONTAL SECTION

Radiographs may be considered for an edentulous patient to examine for:

- impacted teeth;
- retained roots;
- underlying hard tissue pathology;
- assessment for implants, surgical hypertrophic soft tissue removal or ridge recontouring.

Follow up as appropriate.

For partially edentulous patients, visual and tactile examination (recommended with an intra-oral mirror, explorer and periodontal probe) of the teeth and supporting periodontal tissue is necessary. For examining inaccessible tooth surfaces, and the underlying hard tissue support of the teeth, radiographs are necessary.

Teeth should be examined for:

- decay, abrasions, occlusal wear, cuspal fractures and deteriorating restorations;
- mobility;
- pulpal pathosis;
- restorative feasibility;
- value for denture retention.

Periodontal tissue should be examined for:

- swelling, pocketing, bleeding on probing, suppuration, discolouration;
- calculus/tartar accumulation on teeth;
- bone loss around teeth.

The diagnosis of dental and periodontal treatment options, the prognosis for the teeth and their value in prosthodontic retention can be discussed with the patient. It is important to consider the patient's current oral hygiene practices and willingness to comply with preventative care in discussing the prognosis.

5. SPECIFIC ADVICE SECTION

Please include any additional information discussed with the patient related to future denture care.

6. SIGNATURE SECTION

Please date; print your name and title (MD, DMD, DDS) and sign. Retain a copy of the completed form with the patient's chart.