Treatment Planning	Phase 1 Urgent/ Diagnostic	Phase 2 Disease Control Phase				Reassessment D0003	Phase 3 Rehabilitation Phase		Maintenance
Collect data. Develop Tx plan	Answer key questions in Tx Plan. Address urgent problems.	Provide treatment to control disease, prepare patient for Phase 3. It should not leave the patient in a worse situation if treatment does not progress to Phase 3. Treatment below generally can be done concurrently				Determine if disease processes are controlled.	Provide restoration of form, function and esthetics. Must be sequenced, generally from top to bottom below.		Create plan that will maintain dental health.
	Medical consult Relieve pain	ORTHO When used to prepare patient for restorative treatment				Tx goals met	ORTHO	When Ortho is definitive care	Specify fixed or removable retention appliance; duration
1. Patient Exam	Biopsy	<b>ENDO</b> As required for pulpal or periapical p			pical pathosis	Symptoms resolved?	ENDO	Prophylactic Tx for restorative reasons	Evaluation every 12 months
Problem/ Dx Tx Plan 2. Diagnostic Review	ANSWER QUESTIONS ON WHICH TX PLAN HINGES:	PERIO (Mod to Severe Dx)	OHI: Scale and Root Plane quads as needed. (4-6 wks healing)	Perio Reeval: Re-chart PD, CAL; Eval OH: GI, Pl; Eval for surgical Tx	Perio Corrective Phase: Any surgery necessary for disease control.	Rechart. Evaluate OH and pt compliance over time.	PERIO	Perio Plastic Surg for esthetics; Adjunctive surg for Pros; ie. crown length, ridge augmentation for FPros	Specify care needed and recall interval: 3, 4, or 6 months
Phase 1 3. Phase 3 Plan (tentative) OR	Determine restorability Perio evaluation D0180 Other referrals	SURGERY	Any oral surgery required for disease control or to prepare patient for restorative care in Phase 2, 3, including preprosthetic surgery. Place implants.			Tx goals met. Healing complete	FIXED PROS	Generally: 1. Max, Mand anteriors 2. Mandibular posterior 3. Maxillary posterior	For caries maintenance, Specify interval for: Radiographs and Fluoride
TxPl Board	Determine implant feasibility Esthetic evaluation	<b>CARIES</b> (Mod to High Risk)	Pt Education -Diet counsel -Home Fl -Xylitol -Office Fl #1	Optional: Caries Control -Remove seeding lesions -Seal grooves, rough or open margins	-Complete definitive operative procedure -Fl varnish every 3-6 mo	Re-do Caries Risk Assessment Tx Pl Bd pts: Sequence with Pros Fac	REM PROS	Work with mentor on sequencing	Specify eval interval: 6-12 months for fit and stability. Reline as necessary.
<b>D0120 or</b> <b>D0150</b> Tentative Tx Pl developed	Questions answered. Phase 2 Tx plan completed and approved.	Disease processes addressed by appropriate treatment and patient education. Treatment required prior to Phase 3 treatment is now completed. If patient compliance with disease control not adequate, this phase may be the final one for this patient.				D0003 -Disease controlled -Healing complete -Pt compliance adequate to expect control of disease	<b>D0005</b> All treatment goals have been met.		<b>No endpoint.</b> Other follow-up: Risk assessment OS follow-up Path follow-up