

Oral Hygiene Instruction Patient: A Case Study

Presented by Grace Schroeder DH2

Lane Community College Dental Hygiene Program

Patient Background

- 36-year-old female
- Good overall health with no systemic conditions or medications contributing to lessened oral health.
- Has third molars
- Patient reports that she brushes 2x daily with OTC fluoridated toothpaste, but does not floss.
- Patient is 27% plaque free upon disclosing

Patient Background

- Aesthetics are very important to this patient.
- Has been about 7 years since last hygiene appointment. Patient seems to understand the importance of a healthy mouth, and is traveling all the way from Portland to receive care (states that other clinics would “find reasons why they couldn't work” on her).

First Appointment: Intraoral Photos



First Appointment: Intraoral Photos



First Appointment: Intraoral Photos



First Appointment: Intraoral Photos



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First Appointment: Intraoral Photos



First Appointment: Oral Hygiene

Instructions

Tell-Show-Do:

- 45-degree sulcular brushing
- Tuft end brush for reaching reaching posterior teeth/ third molars
- C-shaped flossing
- Floss holder to extend patient reach posteriorly

Discussed inadequate plaque removal and how it contributes to progression of periodontal disease, and how this affects oral health/aesthetics.

First Appointment: Patient

Motivation Goals

Between 10/21/14 and 11/04/14:

- Reduce retention of plaque by 20%
- Reduce inflammation from generalized moderate papillary and marginal inflammation to generalized slight papillary and marginal inflammation through adequate plaque removal.
- Achieve the above by brushing 2x daily and flossing 1x daily using the skills learned during OHI.

Second Appointment

- Patient reports that she brushes 2x daily (including gingiva) with OTC fluoridated toothpaste, and flosses once per day.
- Amount of visible plaque reduced from generalized heavy deposits to slight-moderately thick deposits on the interproximal and marginal areas of teeth.
- Inflammation is now generalized slight papillary and marginal, with localized moderate.
- Patient is now 42% plaque free upon disclosing.

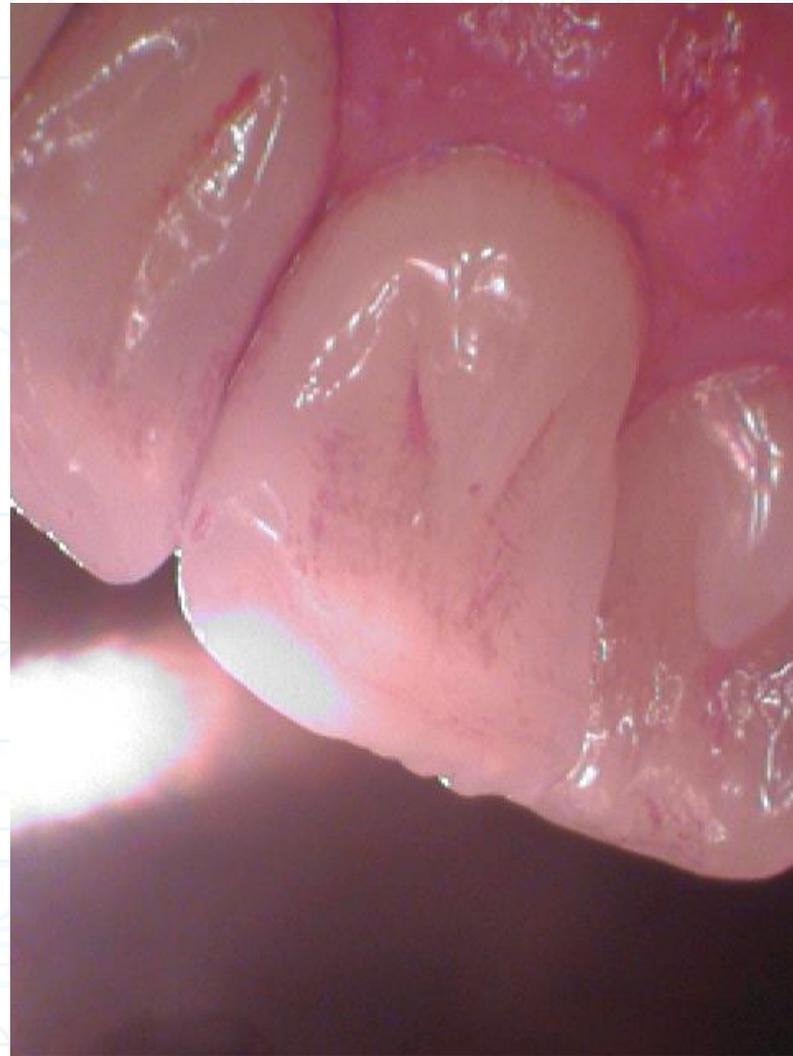
Second Appointment: OH

Observations

Reminded patient of OHI from first appointment and observed patient performing OH prior to disclosing:

- Patient brushes teeth in a very disorderly fashion, jumping from one area of the mouth to another. No one area is given much attention (2-3 strokes are taken before moving on to the next spot). 45-degree angle is noted, however.
- Patient flosses but does not make the C-shape on either interproximal tooth surfaces.

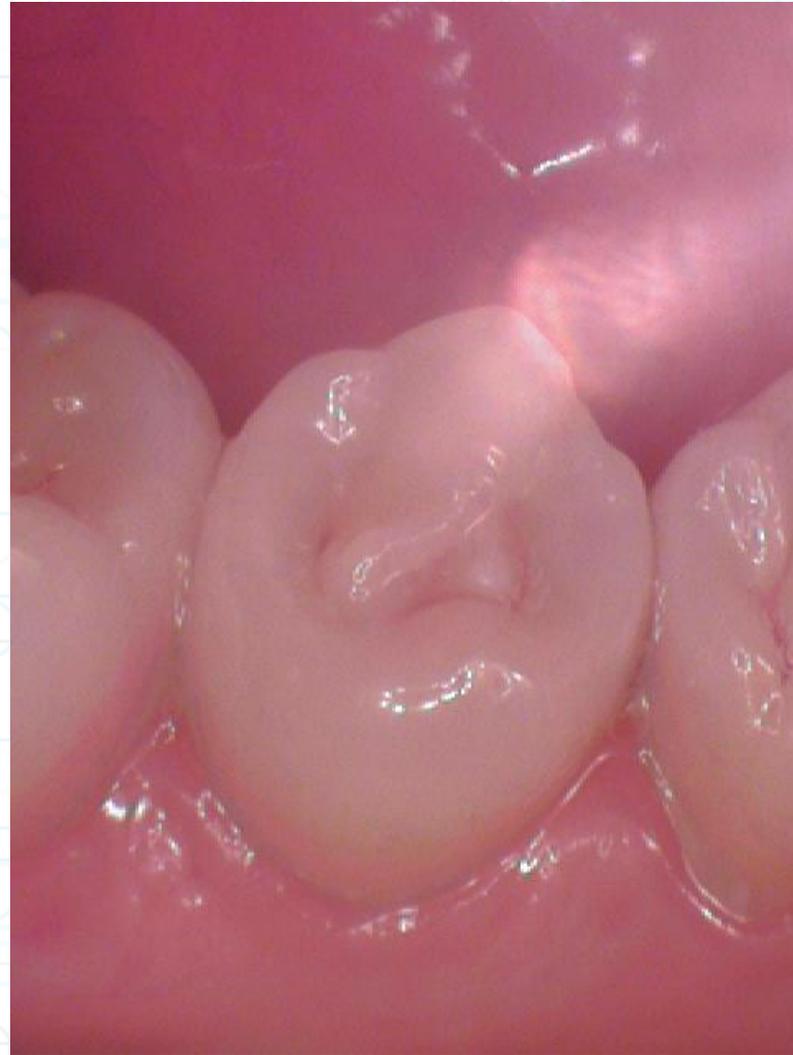
Second Appointment: Intraoral Photos



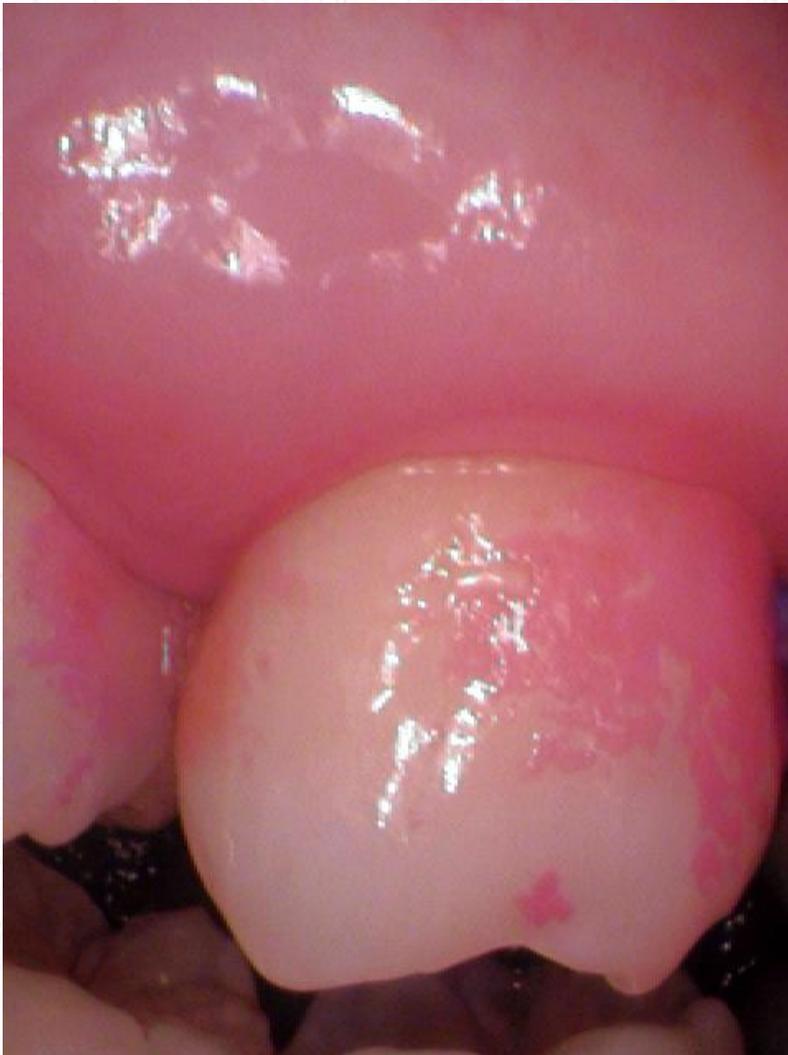
Second Appointment: Intraoral Photos



Second Appointment: Intraoral Photos



Second Appointment: Intraoral Photos



Second Appointment: Intraoral Photos



Second Appointment: OHI

Modifications

- Recommended using a systematic approach while brushing to reduce missed areas (example: start on top and work from right to left on front facing surfaces, then move left to right for the surfaces on the tongue side. Repeat same concept on bottom teeth).
- Tell-Show-Do: Reinforced C-shaped flossing

Second Appointment: OHI

Modifications

- Explained to patient how brushing gingiva may cause damage to the tissues. Reiterated that bristles should sweep beneath gingiva while brushing teeth but should not be directly applied to the gingival tissues. Recommended using a wet 2x2 to wipe gingiva instead (if patient still wishes to continue “cleaning her gums”).

Reflection: Challenges

It was moderately difficult to keep this patient's attention, and patient management was difficult during treatment sessions. Despite all of that, I do feel that by reiterating OHI and continually re-visiting the information (even while scaling), I was able to give this patient at least some scientifically-based motivation for maintaining her oral health. This patient is one that would benefit from reviewing OHI on a very regular basis.

Reflection: Importance of OHI

Although my patient did not reduce the amount of plaque by as much as I had hoped, there was still marked improvements in both the amount of plaque present and the condition of her gingival tissues. What has struck me as even more important, however, is how actively trying to keep up with homecare seems to increase patient pride and motivation. And there might not be anything better than a proactive patient.

-Grace