PEDIATRIC DENTISTRY PROGRESS NOTE ENTRIES FOR ALL PEDIATRIC PATIENT ENCOUNTERS

Dx:	Diagnosis	-	Purpose/Reason for visit in codable diagnostic terms
			Not treatment provided
Hx:	History	-	Health and dental history reviewed and updated as appropriate,
			NCTRDC
Tx:	Treatment	-	Evaluation of oral hygiene status (OH)and recommendations
		-	Details of treatment/services provided in codable terms using only accepted abbreviations.
		-	Drugs/medication site of administration and dose in milligrams
			including local anesthesia N O in percent.
		-	Radiographs number, areas exposed and interpretation of films
			must be documented
			PICPF
Bx:	Behavior	-	Assess behavior at each visit** note management techniques employed and outcome see specific documentation for restraints.
Rx:	Recommendations	-	Disposition of patient, e.g. plan for future care(medical or dental) including specialty referral
		-	Purpose, Time and date of next visit e.g. OHM F/U q 6 mo.
~.		-	
Signature:			Sign and date ALL entries
			Hospital chart entries and restraint notes shall also be <u>timed</u>

ALL CHART ENTRIES SHALL BE MADE ONLY IN BLACK OR BLUE INK (not felt tip).

CHART ENTRIES SHALL BE MADE IMMEDIATELY FOLLOWING CARE -- ALONG WITH COMPLETION OF THE ENCOUNTER FORM.

****FRANKL SCALE -- CLASS 1, 2, 3, 4 -- CAN BE USED, BUT ADDITIONAL DESCRIPTION OF INAPPROPRIATE CHILD BEHAVIOR IS REQUIRED.**

ONLY ACCEPTED ABBREVIATIONS SHALL BE USED

NEW PATIENT EVALUATION EXAMPLE OF APPROPRIATE CHART NOTES

7/6/96 Ped. Dent.

- Dx: New patient dental exam
- Hx: Health Hx reviewed with parent. Patient has history of asthma but no problems in past 6 months.
 NKDA, immunizations current.
 NCTRDC
- Tx: OH needs improvement, brushing instructions given child and patient. Exam, Prophy and topical F2. 2 BWX and 1 max. PA revealed caries in primary max. incisors (E&F) and mand. first molars (L and S).
 Obtained consent from parent -- form signed by mother PICPF
- Bx: Patient tolerated procedure well but had difficulty with gagging for BWX. Bx3+
- Rx: NV restore # E and F.

Resident/Student Signature:

Faculty Signature: _____ (necessary for all unlicensed providers)

PROGRESS NOTE DOCUMENTATION FOR ROUTINE ORAL HEALTH MAINTENANCE FOLLOW UP (OHM F/U)

Dx	-	Dental Exam, OHM F/U
Hx	-	Current status and any changes from last visit, NCTRDC
Tx	-	Oral Hygiene (OH)current status and recommendations. Oral exam occlusion, soft tissue, hard tissue, procedures accomplished including radiographs made and interpretation. PICPF
Bx	-	Assess behavior** note management techniques employed and outcomessee specific documentation for restraints.
Rx	-	Disposition of patient, treatment needs and specialty referrals (medical and dental). If no Tx necessary
		"Routine OHM F/U" q 6 mo.

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CHART ENTRIES SHALL BE MADE IMMEDIATELY FOLLOWING CARE -- ALONG WITH COMPLETION OF THE ENCOUNTER FORM.

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ROUTINE OHM-FOLLOWUP

EXAMPLE OF APPROPRIATE CHART

7/6/96 Ped. Dent.

- Dx Dental Exam Routine OHM-F/U
- Hx Health history updated and reviewed NCTRDC
- Tx OH excellent, prophy, scaling, topical F2 PICPF
- Bx Pt. tolerated procedure well, Bx 4
- Rx Routine OHM F/U q 6 months. Card filled and filed.

Resident/Student Signature:

Faculty Signature: _____ (necessary for all unlicensed providers)

SEALANT APPLICATION

7/6/96 Ped. Dent.

- Dx Developmental Occ. Grooves (520.9)
- Tx OH fair, brushing needs improvement Plaque score recorded
 Occlusal sealants applied to teeth #3, 14, 19 and 30 using rubber dam isolation and topical anesthetic applied to gingiva PICPF
 Bx Pt. tolerated procedure well after dam was placed B3+
- Rx Return for routine OHM/F/U q 6 mo. Card filled out and filed.

Resident/Student Signature:

Faculty Signature: _____ (necessary for all unlicensed providers)

RESTORATIVE

EXAMPLE OF APPROPRIATE CHART NOTES:

7/6/96 Ped. Dent.

(Diagnosis)	Dx:	Caries with pulp exposures				
(Treatment)	Tx:	OH improved since the last visit #K-pulpotomy, formecresol with ZOE base. #L-pulpotomy, formecresol with ZOE base. #M-facial composite resin, vitrabond base. 36mg (1.8 ml) 2% Lidocaine 1:100,000 Epinephrine, Left inferior alveolar block. Post-op instructions re: anesthesia given parent. PICPF				
(Behavior)	Bx:	Patient tolerated procedure well Generally cooperative but resisted and grabbed instruments (B-3) except for injection, (B-2) crying and needed hand restraint by assistant and rubber mouth prop.				
(Recommendations)	Rx:	NV #S-SSC; #T-SSC; Use N_2O_2 for injection				
Resident/Student Signature:						
Faculty Signature: (necessary for all unlicensed providers)						