PERIODONTAL CHART

Date: _____

Patient Last Name: _____ First Name: _____ Date Of Birth: _____

Initial Exam: ☐ Reevaluation: ☐ Clinician: _____

BUCCAL	Mobility															
	Implantat															
	Furcation															
	Gingival Margin															
	Probing Depth															
								BUCCAL								
	BOP															
	PI															
		18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28
LINGUAL	Furcation	I	I	I		I							I		I	I	I
	Gingival Margin																
	Probing Depth																
								LINGUAL								
	PI																
	BOP																

LINGUAL	BOP															
	PI															
								LINGUAL								
	Furcation															
	Gingival Margin															
	Probing Depth															
		48	47	46	45	44	43	42	41	31	32	33	34	35	36	37	38
BUCCAL	PI																
	BOP																
								BUCCAL								
	Gingival Margin																
	Probing Depth																
	Furcation																
	Implantat																
	Mobility																

BOP: Bleeding On Probing
PI: Plaque Index

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