



Dental Hygiene Record Review Form

Provider: _____

Reviewer: _____

Date: _____

Patient: _____

1. Patient Information

- Preferred DDS and RDH correctly assigned
- Personal memo updated, dated, and initialed
- Correct recare interval documented
- Patient photo present or reason documented
- Health history updated and signed
- Health history complete and accurate

Comments:

2. Imaging

- Imaging completed per office protocol
- Radiographs diagnostic and acceptable quality
- Intraoral photos taken when indicated
- Extraoral photos taken when indicated
- Images properly labeled
- Digital scan completed when indicated

Comments:

3. Charting & Documentation

- Existing restorations updated
- Conditions/watches documented
- Proposed treatment documented
- Odontogram accurate
- Chief concern documented
- SOAP note complete and clinically thorough
- Recare interval and reason documented
- Posted procedures match SOAP notes

Comments:

4. Treatment Planning

- Treatment recommendations justified in notes
- Risks of delaying treatment documented
- Treatment plan presented appropriately
- Treatment phased appropriately
- Follow-up appointment scheduled or reason documented
- Whitening shade documented (if applicable)

Comments:

5. Periodontal Care

- Correct hygiene/perio code selected
- Periodontal diagnosis supported by findings
- Risks of periodontal disease discussed
- Correct exam code utilized
- Full-mouth periodontal chart completed
- Stage and grade assigned appropriately

Comments:

6. Prevention & Oral Hygiene

- Fluoride offered/applied or declined
- Alternative preventive therapy discussed
- Home care recommendations documented
- Appropriate oral hygiene instruction provided
- Preventive products discussed when indicated

Comments:

7. Comprehensive Care Opportunities

Were opportunities identified and discussed when appropriate?

Additional opportunities identified:

**Overall Assessment
Strengths**

1. _____
2. _____

Areas for Improvement

1. _____
2. _____

Action Items

1. _____
2. _____

Key Takeaway

What is one thing learned from this review that can improve future patient care or documentation?

Score

Patient Information _____ / 6

Imaging _____ / 6

Documentation _____ / 8

Treatment Planning _____ / 6

Periodontal Care _____ / 6

Prevention/OHI _____ / 5

Total Score _____ / 37