## OKLAHOMA DEPARTMENT OF CORRECTIONS Dental Treatment Plan

## Legend: Circle One: Amalgam - Solid Gingiva: Normal Inflamed Highly Inflamed black Deposits: Slight Moderate Heavy Composite -Stain: Slight Moderate Heavy Outline in black Crown - Outline, Prosthesis Present: F/F P/P diagonal lines in Prosthesis Needed: F/F P/P black Root Canal Fill -**PSR Code:** R Solid black canals Missing - Black 12 13 "X" on roots 14 Head and Neck Exam (circle one) Unerupted -32 28 27 26 25 24 23 22 Circle in black Normal Abnormal Caries - Solid **Buccal Mucosa** Normal Abnormal red **Pharynx** Normal Abnormal Radiolucency -**Hard Palate** Normal Abnormal Outline size, **Soft Palate** Normal Abnormal location & form in black **Tongue** Normal Abnormal Sublingual Normal Abnormal Extraction Indicated - 2 red TMJ Normal Abnormal vertical lines **Neck Nodes** Normal Abnormal Explain all "Abnormal" answers below. Tooth # **Treatment Plan Date Completed Dentist's Comments** Dentist's Signature: \_\_ Date:

**Inmate Name:** 

ODOC #: