

The Oral ATP- A Photo Tour



The Patient: Jax Goodman
1.5 year old, neutered male Labrador Retriever cross, 65 pounds
Indication for oral examination: preventative therapy

Stage 1: Assessment

A. Initial consultation



During the initial consultation we will perform as thorough an oral exam as possible, based on your pet's size, temperament and level of cooperation. Areas checked include:



Each tooth with accompanying gingiva



Swelling or painful areas on the face



Swelling around or behind the eyes



Pain or crepitus (crunching) when opening and closing the mouth

Jax is a friendly, enthusiastic large dog and Dr. Yelland was able to visualize the majority of his teeth and oral cavity. The initial gross examination revealed (as expected in a young, healthy dog) minimal oral disease and a simple cleaning and polishing with fluoride treatment and dental sealant application was recommended.



B. Pre-anesthetic diagnostics







Before anesthesia we will perform all appropriate diagnostics to insure your pet's good general health and to minimize anesthetic risk.

Jax good-naturedly donated blood and urine. Diagnostic lab work showed all his chemistry, electrolyte and cell counts to be within normal limits and this, combined with normal findings on his physical exam, allowed the staff to proceed with anesthesia.

C. Anesthetic examination and charting

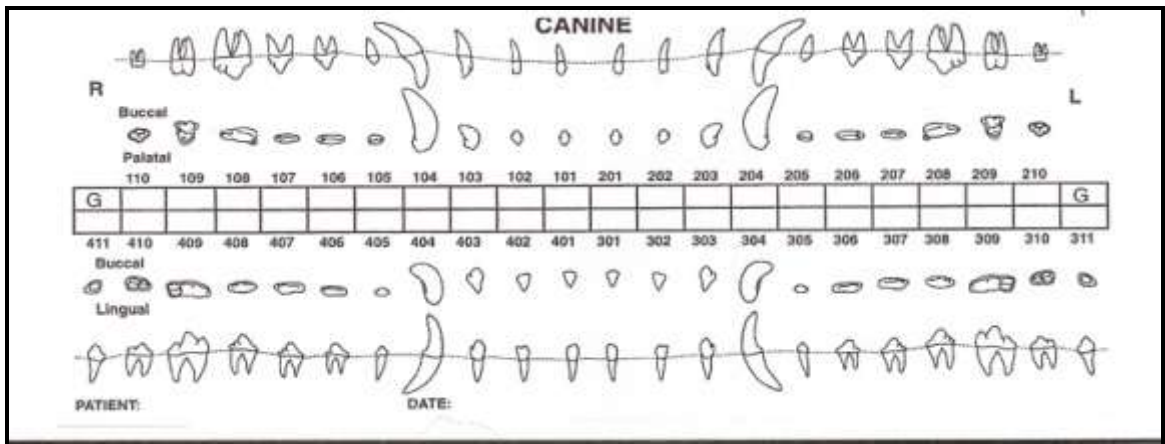


Once your pet is safely under anesthesia, we perform a thorough tooth-by-tooth examination looking for:

-  Mobility
-  Fractures
-  Malocclusion
-  Periodontal disease



... and charting:



This chart is annotated to reflect missing, extracted, fractured or otherwise diseased teeth. The depth of the gingival margin (an indicator of periodontal disease) is also measured and recorded for every tooth. A similar version exists for cats (see following page), which have a different dental formula (numbers of the four types of teeth) than do dogs (or humans).

Jax's teeth were duly examined charted and (again, as anticipated in a young healthy dog) no evidence of advanced oral disease was found!

D. Dental Radiographs:



Partial or full-mouth radiographs are taken to determine if non-visible pathology exists.



A sensor is placed in the mouth behind the tooth/teeth to be x-rayed. Dr. Yelland is positioning the collimator (the device that aims and focuses the actual x-ray beam) so that the x-ray penetrates the tooth and hits the sensor. Also note the anesthetic and monitoring equipment in the right background...



For safety purposes, the generation of the x-ray is triggered by a remote hand switch. This hand switch also acts to modify the x-ray settings to produce a lighter or darker image as desired by the dentist.



The images are compiled digitally and sent to a capture device (in this case a laptop computer). Once in digital format, the images can be enhanced and otherwise manipulated if needed to diagnose pathology.

Jax actually had no x-rays taken. His procedure was scheduled early enough in his life that noteworthy oral disease had not yet developed. This underscores the importance of early preventative (versus corrective) medicine! Most pets, and all pets with any significant degree of periodontal disease, will require partial or complete oral radiographs. Samples of dental x-rays are shown below.



Fractured Crown (cat)




Resorptive Lesion (cat)




Oral Tumor (dog)

Stage 2: Treatment


A. Scaling, Polishing and Irrigation

 The teeth are thoroughly cleaned, polished and treated with a fluoride applicator and dental sealant.




 Tartar and calculus are removed with an ultrasonic scaler.




 If indicated, curettes are used to remove subgingival (below the gum line) deposits.


1. Root scaling removes plaque and calculus from the root surface, creating a better environment for healing and reattachment.
2. Root planing uses a curette to produce a clean smooth root surface.
3. Subgingival curettage removes the diseased soft tissue of the inner surface of the gingival pocket (converting chronically inflamed tissue into a clean surgical surface).



 Regardless of the care taken during the previous step, minor defects of the tooth occur during planing and curettage. Polishing “smooths out” the defects and removes any remaining plaque.


 After polishing, water or disinfectant solution is used to remove diseased tissue, plaque and polishing paste from the gingival sulcus (pocket).



 OraVet dental sealant is applied with a combination of an applicator gun and swabs. This product creates a waxy barrier that helps prevent plaque from developing on the teeth. We generally recommend weekly reapplication at home (which is accomplished using the provided applicator swabs).

Because his teeth were so free of disease, Jax only required a simple cleaning and polishing to remove the inevitable plaque coating his teeth. Despite this cleaning, the bacteria which cause plaque, and consequently tartar, will re-colonize his mouth within 24 hours, emphasizing the need for *daily* brushing!

B. Advanced Treatments

 If we observe advanced disease we formulate an additional treatment plan and estimate. Examples of this include:





Fractured Teeth



Feline Odontoclastic Resorptive Lesions (FORLs) aka "Cat Cavities"




Oral Tumors

-  We will call you to discuss these findings, make our recommendations and get your approval for further treatments.
-  Authorized treatments are completed with any necessary follow-up radiographs taken as indicated.

For example, a post-root canal:




-  Your pet is closely monitored until he/she is completely recovered from anesthesia.





Fortunately for Jax, the anesthetic exam revealed no additional evidence of advanced periodontal disease! Although certain types of disease, such as tumors, would be unlikely in a young patient, many pets do present with fractured teeth (particularly dogs, from chewing inappropriate objects). Retained deciduous (baby) teeth are also a common oral health complication in young pets.

Stage 3: Prevention

A. Customized Treatment Plan


 Immediately following the assessment and treatment, we develop recommendations for a prevention plan customized to address your pet's individual condition.


 You are an integral part of our dental team! *Home care is the single most important aspect of maintaining good oral health.* Our oral ATP is not complete until we have discussed regular, ongoing home care- this not only keeps your pet happy and healthy, but increases the interval between teeth cleaning sessions.

 The type of home care products dispensed largely depends upon the nature and degree of dental disease present and your willingness to apply regular home care. Home care products include:

1. Toothbrush and toothpaste
2. Fluoride gel
3. Oral antiseptic rinses
4. Special dental diets
5. Antibiotics

B. Follow-Up Exam:

 We will schedule a complimentary follow-up examination in approximately 7-10 days to re-evaluate the Oral ATP procedure and to discuss and demonstrate recommended home care.

 *Follow-up visits are as essential as any of the above steps!* Time between visits is determined based on the nature and degree of dental disease.



Brushing Lesson!



Examples of Home Care Products

After all... it's all about a happy pet showing those pearly whites



Jax ready to go home!