

Checklist: BASELINE

(Aim: Establish reference values – critical for all future comparisons)

Clinical Baseline parameters

- Record **probing depth (PD)** at 6 sites/implant
- Record **bleeding on probing (BOP)**
- Check for **suppuration (should be absent)**
- Assess **plaque levels**

Soft Tissue Parameters

- Keratinized mucosa width (KMW)** ≥ 2 mm
- Mucosal thickness (MT)** ≥ 2 mm
- Presence of attached gingiva**
- Vestibular depth** adequate (>4 mm ideal)
- Soft tissue: color, contour, consistency

Prosthetic Assessment

- Check **abutment/crown fit**
- Ensure **no excess cement**
- Assess **emergence profile (<40° ideal)**
- Confirm **cleanability of prosthesis**
- Record **type of restoration** (single/bridge/full arch)

Occlusion

- Light, well-distributed **centric contacts**

No **cantilevers / non-axial loading**

Check for **parafunction (bruxism)**

Night guard planned if needed

Radiographic Baseline

Take **baseline periapical radiograph**

Record **marginal bone level**

Patient Education of Oral Hygiene

Oral hygiene instructions (customized)

Demonstrate **interdental aids**

Explain importance of **SPC (Supportive Periodontal Care)**

CHECKLIST: AT EVERY MAINTENANCE APPOINTMENT

1. PD + BOP → 2. Plaque → 3. Soft tissue → 4. Prosthesis → 5. Occlusion → 6. Radiograph (if needed)

PD & BOP

Measure **probing depth minimum six sites (if data, compare to baseline)**

Check **bleeding on probing in every site**

Check for **suppuration**

Clinical signs of inflammation

▲ Red flags:

- Persistent BOP in one or more sites
- Suppuration
- PD \geq 6 mm in one or more sites
- Implant threads detectable

Oral Hygiene Assessment

Assess **plaque accumulation**

Identify **difficult to clean areas**

Evaluate **patient technique**

Reinforce hygiene instructions

▲ Red flags:

- Persistent inflammation despite hygiene
- Poor compliance

Soft Tissue Evaluation

Colour (Signs of inflammation)

- Consistency (firm vs edematous)
- Presence of **swelling / recession**
- KMW (<2 mm risk)
- MT (<2 mm risk)
- Vestibular depth

▲ **Red flags:**

- Signs of inflammation
- Thin phenotype with inflammation
- Recession or tissue breakdown

Prosthetic Integrity

- Check **screw stability**
- Look for **chipping / fractures of the crown**
- Detect **cement remnants**
- Evaluate **emergence profile & cleanability**
- Assess **abutment material & biocompatibility**

▲ **Red flags:**

- Loose screw
- Over contoured crown
- Excess cement

Occlusal Evaluation

- Check **occlusal contacts**
- Identify **wear facets / fractures**
- Assess **prosthetic mobility**
- Look for **bruxism signs**

Confirm **night guard use (if indicated)**

▲ **Red flags:**

- Repeated screw loosening
- Parafunction/ Bruxism

Radiographic Monitoring *(Not at every visit—based on risk)*

Compare with **baseline radiograph**

Assess **marginal bone level changes**

Look for:

- Bone loss progression
- Cement remnants
- Prosthetic misfit
- Bone density changes
- Assessment of Neighbouring Structures

▲ **Red flags:**

- Bone loss ≥ 3 mm from baseline