

Dental Treatment Plan

Meridian Dental Associates

Comprehensive Care | Restorative | Implantology

July 15, 2026

2400 Cascade Boulevard, Suite 410

Portland, OR 97201

Patient Information

Name: Robert Martinez
Date of Birth: March 14, 1979 (47 yrs)
Patient ID: MDA-2026-07281
Phone: (503) 555-4291
Email: r.martinez@email.com

Attending Provider

Dentist: Dr. Sarah Chen, DDS
License: OR-DE-08421
Specialty: Prosthodontics
NPI: 198-263-7405
Referral: Dr. James Okonkwo, MD

Chief Complaint

The patient reports persistent discomfort in the lower left quadrant with difficulty chewing on the right side. Noted sensitivity to cold on multiple posterior teeth bilaterally. Patient expresses concern about aesthetics of missing lower posterior teeth and desires a comprehensive restorative solution. Last dental visit was approximately four years ago.

Medical History

Hypertension (controlled, Lisinopril 10 mg daily). Type II diabetes mellitus (well-controlled, HbA1c 6.4%). No known drug allergies. Non-smoker. Occasional alcohol consumption (2–3 drinks/week). ASA Classification: II.

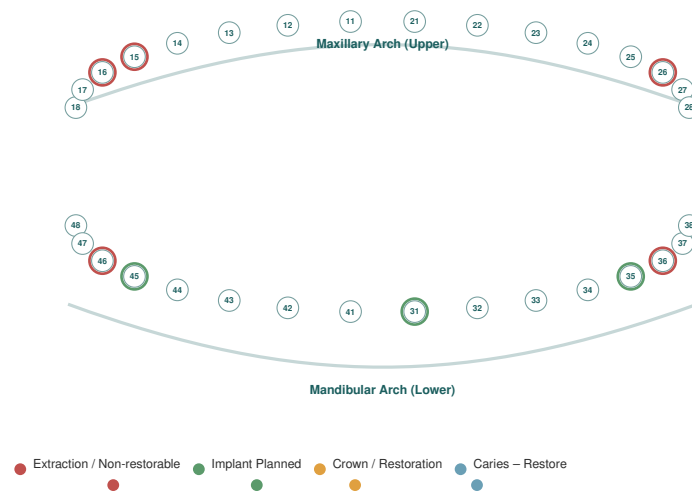
Vital Signs

BP: 128/82 mmHg
HR: 74 bpm
SpO₂: 98%
Weight: 84 kg

Clinical Findings

- Generalized moderate chronic periodontitis
- #16-DO:** Deep caries with pulpal involvement
- #26-MOD:** Non-restorable; vertical root fracture suspected
- #15-MO:** Fractured amalgam with recurrent caries
- #36-OB:** Carious lesion approaching pulp
- #46-O:** Large occlusal caries
- Edentulous spans: #35–#36, #45–#46
- Class II skeletal malocclusion
- Moderate generalized attrition

Odontogram | Treatment Status Overview



Radiographic Summary

Panoramic radiograph dated July 15, 2026 reveals: generalized horizontal bone loss consistent with moderate chronic periodontitis (3–5 mm probing depths, Class I furcation involvement on #16 and #26). Periapical radiolucency noted at apex of #26 measuring approximately 4 mm × 3 mm, suggestive of chronic periapical abscess. Vertical root fracture suspected on #26 (mesial root, confirmed via CBCT). Caries extending into pulp on #16-DO. Adequate bone height in edentulous sites #35–#36 and #45–#46 for implant placement (≥ 10 mm vertical, ≥ 6 mm buccolingual width).

Treatment Plan

Comprehensive Phased Approach | Est. Duration: 9–12 Months

PHASE I | Urgent Care | Appointment 1

Procedure	Details
Extraction #26	Surgical extraction of non-restorable tooth #26 with socket preservation graft (allograft). Local anesthesia: 2% Lidocaine with 1:100,000 epinephrine (3.6 mL).
Interim Medication	Prescription: Amoxicillin 500 mg TID × 7 days; Ibuprofen 600 mg PRN for pain; Chlorhexidine 0.12% rinse BID.

PHASE II | Disease Control | Appointments 2–3

Procedure	Details
Scaling & Root Planing	Full-mouth quadrant scaling and root planing under local anesthesia. Four quadrants over two appointments. Ultrasonic and hand instrumentation.
Oral Hygiene Instruction	Customized OHI: modified Bass technique, interproximal brush sizing, water flosser recommendation. Diet counseling for caries risk reduction.
Fluoride Varnish	5% sodium fluoride varnish application to all teeth post-SRP.
Periodontal Re-evaluation	6-week recall for probing depth reassessment and treatment response documentation.

PHASE III | Restorative | Appointments 4–7

Procedure	Details
Composite Restoration #16-DO	Caries excavation, indirect pulp cap (calcium hydroxide liner), bonded composite restoration (nanohybrid). Rubber dam isolation.
Composite Restoration #36-OB	Caries removal, bonded composite core build-up. Evaluate pulp vitality via cold test pre-operatively.
Composite Restoration #46-O	Occlusal caries removal, bonded composite restoration.
Crown #15 (PFM)	Core build-up, crown preparation with 1.0–1.2 mm chamfer margin. Porcelain-fused-to-metal crown. Temporary crown placement. Final cementation at separate appointment.
Occlusal Guard	Maxillary custom hard acrylic night guard fabrication for attrition management and parafunction control.

PHASE IV | Prosthodontic Rehabilitation | Appointments 8–14

Procedure	Details
Implant Placement Surgery	Surgical placement of four endosseous implants at sites #35, #36, #45, #46 (Apex Implant System, 4.1 mm × 10 mm). Two-stage protocol with submerged healing. CBCT-guided surgical stent.
Bone Grafting (if indicated)	Particulate allograft with resorbable collagen membrane at sites with < 6 mm buccolingual width. Guided bone regeneration protocol.
Second-Stage Surgery	Implant uncover and healing abutment placement after 4-month osseointegration period. Transmucosal healing: 3–4 weeks.
Implant-Level Impressions	Open-tray polyether impression with splinted transfer copings. Verification jig fabrication.
Implant Crowns (4 units)	Screw-retained porcelain-fused-to-zirconia implant crowns on custom titanium abutments. Occlusal scheme: mutually protected articulation with canine guidance.

PHASE V | Maintenance | Ongoing

Procedure	Details
Periodontal Maintenance	3-month recall for supportive periodontal therapy: probing depths, bleeding on probing, plaque index, implant health assessment (peri-implant probing, mobility check).
Annual Radiographs	Bitewing radiographs annually; periapical radiographs for implant sites at 6 and 12 months post-loading.
Occlusal Guard Adjustment	Annual evaluation and adjustment of night guard for continued parafunction management.

Financial Estimate

All fees are estimates and subject to change based on clinical findings during treatment.

Procedure	Code (CDT)	Units	Unit Fee	Subtotal
Phase I — Urgent Care				
Surgical Extraction #26	D7210	1	\$385	\$385
Socket Preservation Graft	D7953	1	\$420	\$420
Phase I Subtotal				\$805
Phase II — Disease Control				
SRP — 4 Quadrants	D4341	4	\$240	\$960
Fluoride Varnish	D1208	1	\$45	\$45
Periodontal Evaluation	D0180	2	\$85	\$170
Phase II Subtotal				\$1,175
Phase III — Restorative				
Composite 4+ Surfaces #16	D2394	1	\$380	\$380
Composite 3 Surfaces #36	D2393	1	\$310	\$310
Composite 2 Surfaces #46	D2392	1	\$240	\$240
Core Buildup #15	D2950	1	\$275	\$275
Crown PFM #15	D2750	1	\$1,450	\$1,450
Night Guard (Hard)	D9944	1	\$520	\$520
Phase III Subtotal				\$3,175
Phase IV — Prosthodontic				
Implant Placement (4 units)	D6010	4	\$1,850	\$7,400
Bone Graft (per site)	D7950	2	\$580	\$1,160
Second-Stage Surgery	D6011	4	\$320	\$1,280
Custom Abutment (4 units)	D6057	4	\$780	\$3,120
Implant Crown PFZ (4 units)	D6058	4	\$1,620	\$6,480
Surgical Stent (CBCT)	D6190	1	\$395	\$395
Phase IV Subtotal				\$19,835
Total Estimated Treatment Cost				\$24,990

Insurance Coordination

Provider: Nimbus Dental PPO
Group: 84721-003
Annual Max: \$2,000
Deductible: \$50 (met)
Est. Coverage: 50%–80% per CDT

Pre-authorization submitted for Phases III and IV. Estimated insurance contribution: approximately \$4,800–\$6,200. Patient responsibility after insurance: approximately \$18,790–\$20,190.

Payment Options

- Cash/Check: 5% courtesy discount
- Credit Card: Visa, MC, Amex, Discover
- CareCredit: 12-month no-interest plan
- In-House Plan: 40% deposit, balance over 6 installments
- Senior Discount: 10% (age 65+)

Treatment Notes & Risk Disclosure

- All treatment plans are based on current clinical and radiographic findings. Unforeseen conditions discovered during treatment may necessitate modification of the plan and associated fees.
- Implant success rates are approximately 95%–98% in healthy patients. Risk factors include smoking, uncontrolled diabetes, and poor oral hygiene. The patient has been counseled on these risks.
- Alternative treatment options discussed: (a) removable partial dentures for edentulous spans (lower cost, less stability); (b) no treatment (risk of further bone loss, supra-eruption of opposing teeth, and occlusal collapse).
- Restoration longevity varies by material, oral hygiene, and parafunctional habits. Average lifespan: composite 7–10 years, crown 10–15 years, implant crown 15+ years with proper maintenance.
- The patient understands that failure to complete all phases of treatment in the recommended sequence may compromise outcomes and lead to additional costs or treatment failure.
- A signed informed consent will be obtained prior to each surgical procedure.

Patient Signature

Dr. Sarah Chen, DDS — Provider Signature

Date

Date

Witness / Staff Signature

Treatment Coordinator

 This document is part of the patient's permanent dental record. Copy provided to patient.

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