

<b>Student Name:</b>
Shannon Taylor
<b>Case abstract</b> (Provide a brief synopsis of this patient):
58 y/o African American female presented to MUSOD in 10/2019 in pain and wanting a consultation for tooth #8. Medical history is extensive and patient is on several medications. She is diagnosed with an intellectual developmental disability. She is unable to understand complex concepts and communicate pain tolerance. Clinical exam and radiographic imaging confirmed #8 was compromised and needed RCT retreatment. Periodontal findings indicated chronic periodontitis with heavy calculus buildup. Pt underwent RCT retreatment for #8 and completed SRP in all four quadrants.
<b>axiUm Chart:</b>
772127
<b>Date of Rounds presentation:</b>
10/21/2020
<b>D3 Student:</b>
Shannon Taylor
<b>D2 Student:</b>
Joseph Brostowitz
<b>D1 Student:</b>
Eleanor Meyrer Kevin Nitz (ALT D1)
<b>Medical History:</b>
<b>Allergies :</b> General Seasonal <ul style="list-style-type: none"><li>▪ Cetirizine 10mg QD</li><li>▪ Benadryl Allergy 25mg PRN</li><li>▪ Montelukast 10mg 1 tab every night</li></ul>
<b>Heart Disease:</b> HTN <ul style="list-style-type: none"><li>▪ Atenolol 100mg qAM</li><li>▪ Amlodipine 10mg</li><li>▪ Hydrochlorothiazide 25mg qAM</li></ul>
<b>Respiratory:</b> Sleep apnea <ul style="list-style-type: none"><li>▪ Uses CPAP machine, controlled well</li></ul>
<b>Neurologic:</b> Psychiatric disease/mental health disorder <ul style="list-style-type: none"><li>▪ No formal diagnosis, has been experiencing problems since menopause hit</li><li>▪ Not able to communicate or identify pain, didn't complain about knees being bone-on-bone b4 replacement but gets bothered by small things such as mosquito bites<ul style="list-style-type: none"><li>• Olanzapine 10mg qPM, antipsychotic</li><li>• Ziprasidone HCL 40mg 1 tab 2x per day before meals, sensory/behavior management</li></ul></li></ul>
<b>Orthopedic:</b> Bilateral knee replacement 2017

- Premedication – amoxicillin 500mg 1 hour before each dental appt.

**Vitamin Deficiency:** potassium

- Potassium chloride 10mg AD

**Dental History:**

CC specifics - Pt's caretaker indicated pt was pushed off a bus 30 yrs ago, injuring her front teeth. Pt was told by previous dentist that she would need to extract #8 (dentist doesn't provide RCT) but pt and caretaker decided to come to MUSOD to see if eligible for RCT instead

Oral Hygiene - Brushes once a day and flosses sometimes w/ bleeding sometimes

Disability - Cognitive for the past 57 years, cognitive and communication disabilities affect function, Developmental disability and speech impediment, Needs help to communicate needs and helps to understand more complex ideas/instructions, Has caretaker

**Radiographic Findings:**

Endodontic Findings= # 8 PARL and resorption

Periodontal Findings = subgingival calculus and bone loss, generalized

**Clinical Findings:**

Comprehensive Exam = buttressing bone apparent from clenching at night causing slow progressive bone loss

**Periodontal Findings:**

Heavy plaque, sub/supra calculus, and moderate staining

Enlarged, rolled marginal shape

Red and pigmented color

Inadequate attached zone

Bulbous (posterior) and blunted (anterior) papillary shape

Spongy consistency (generalized)

**Periodontal Diagnosis:**

Chronic Periodontitis, generalized >30%

**Problem List:**

Pain

Caries

Perio Disease

Periapical Radiolucency

Home Care

**Other:**

Endodontic Diagnosis = asymptomatic apical periodontitis for #8