

Implant Maintenance and Failure Tracking Form

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Abstract

Dental implant failure is multifactorial, and it can happen either before or after loading with the prosthesis. Tracking the most possible cause of failure is usually difficult unless detailed information was available. An implant tracking form and a detailed list, that record pertinent information would be valuable for any future treating dentists is described in this article. The form is to be filled throughout the stages of implant treatment to ease both the maintenance process and the analysis in case of failure. This form can be used as well throughout any course, or comprehensive implant training program to be able to track the performance and have controlled quality supervision.

Keywords: Dental Implant; Failure Analysis; Treatment Record

Introduction

Dental implants are the aesthetic and functional alternative for tooth replacement. Despite the high success rate shown by longitudinal studies, failures do occur, even in patients who present appropriate clinical conditions [1]. The primary function of a dental implant is to act as an abutment for a prosthetic device, similar to a natural tooth root and crown. Any success criteria, therefore, must include first and foremost support of a functional prosthesis [2].

The term implant success may be used to describe ideal clinical conditions. It should include a time period of at least 12 months for implants serving as prosthetic abutments. The term early implant success is suggested for a span of 1 to 3 years, intermediate implant success for 3 to 7 years, and long-term success for more than 7 years. The implant success rate should also include the associated prosthetic survival rate in a clinical report [2]. Implant failures can be categorized as early or late. Early failures occur before osseointegration takes place while late failures occur after prosthetic rehabilitation [3].

There have been publications regarding the radiographic identification of implants [4,5] and also regarding the use of implant consultation forms to document pre-surgical and surgical information [6]; however, there have not been publications identifying the pertinent dental implant information that should be recorded in a patient's treatment record for future use. A specific form, and a detailed list, that records pertinent information would be valuable for any future treating dentists. A copy of this form can be given to patients for their records, as well as be retained in the practitioner's patient treatment file.

The Form

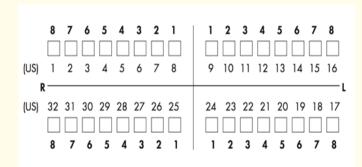
Patient Information

Patient name		
Date of birth		
File Number		
Gender	Male	Female
Medical History		
History of Habits		
Allergy		

Implant Information

Company		
Serial Number		
Implant dimensions	Length	Diameter
Implant placed By		
Placement Date		

Implant Site



Surgery Information

Placement Method	Manually driven			Handpiece driven	
Bone quality (type)	I II		III	IV	
Implant Placement Level	Crestal Sub-Crsetal				Sub-Crsetal
Placement time:	Immediate placement Immediate delayed Delayed placement				
Immediate placement condition:	Keratinized mucosa Local chronic infection Bone loss in adjacent teeth				
Soft tissue biotype:	Thick Thin				
Implant Placement Protocol:		Single Stage			Two Stages
Implant Insertion Torque:			N-c	m	
Was primary stability achieved?	Yes			No	
Ridge augmentation:	NA Particulate Block Titanium mesh Splitting Others :				
GTR membrane used:	NA Resorbable Non-Resorbable Material Used:				
Material of bone graft used:	NA Autograft Allograft Xenograft Other Material Used:				
Sinus floor elevation		vith implant placement			it implant placement
Soft tissue procedures:	External with implant placement External without implant placement Free gingival graft Connective tissue graft Frenectomy Sulcus deepening Soft tissue tenting Others				
In case of single stage and placement of the healing cap					

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Suture Removal Stage Information

Sutures removed by:	
Suture removal date	
At the time of suture	Premature exposure of the cover screw
removal:	Post operative infection
	GTR part exposure
	Maxillary sinus complications
	Implant mobility
	Parasthesia
	Lost cover screw/healing cap
	Others

Second Stage Surgery Information

Second stage performed by:				
Second stage date:				
Soft tissue augmentation needed	Free gingival graft Connective tissue graft			
Uncovery technique	Flapless With flap technique			
Assessment of hygiene	Excellent	Good	Fair	Poor
ISQ value	N-cm			
Healing cap	Size Height			t
Were any of the following conditions involved during second stage?	Periodontal disease Infection in the implant site Exposure of implant threads Implant shadow through the mucosa Others:			

Prosthetic Steps Information

Prosthodontist:					
Type of planned prosthesis?	Crown FPD Over denture		Full (upper) Full (lower)		
Type of opposing arch:	Natural dentition		Prosthesis		
Type of opposing prosthesis:	Removable Denture: Complete Partial		Fixed PD		
Type of material of opposing prosthesis:	PFM Full Ceramic	Hybrid Material			
Date of impression making		Impression technique		Open tray Closed tray	
Date of recording jaw relation		Shade			
Abutment type					
Abutment material					
Means of retention		ned: ceme	hole closed by: entation material: ocator		
Date temporary abutment installed		Date temporary restoration installed			
Date final abutment installed		Date final restoration installed			
Torque Control Device used	No		Yes – Torque AppliedN-cm		
Information about fit:	Passive Non passive Other:				

Recall Information

Recall done by				
Recall date				
Assessment of hygiene	Excellent	Good	Fair	Poor
Bone loss	0 - 2 mm		- 411	1001
Dolle 1035	2 - 4 mm 4 mm (less than half of the implant b			
				e implant body)
	-	n half of tl		
Pain score	No pain o	or tendern	ess up	on function
	Pain on f	unction	_	
Mobility	Mobile			
	Non mob	ile		
Exudate discharge	No exuda	te history		
	Exudate	present		
Soft tissue condition	Stable			
		-		erate/severe)
		of the imp		
	-	e of thread	S	
	Black tria	on probin	σ	
		of attache	•	osa
Screw access hole restoration	Intact	Partial W	/ear	Complete Wear
material	muuot	1 41 6141 11	- Cui	comprete treat
Occlusion and Stomtaognathic	Heavy co	ntact	I	
System	-	ption of op	oposin	g
	Loss of opposing teeth			
		opposing t	eeth	
	Wear facets			
	Inability to grind food			
	Evidence of parafunctional habits Pain during mastication			
	Discomfo	-	ation	
		cking" "pa	in" "de	viation"
	Headach			
	Shoulder	pain		
	Muscle s			
	Others:			
Mobility of the prosthesis	Screw loosening			
	Screw fra			
	Abutment fracture Prosthesis fracture			
	Loss of cementation			
	Relining required for overdenture			
	Change of retentive means required			s required for
	overdent			
	Others:			
Ceramic	Chipping of ceramic			_
	-	e of metal/	zircon	ia core
Shade mismatch Others:				
				uro tooth
Acarric	wear of a	Acrylic Wear of acrylic overdenture teeth Broken flanges		iie teeth
Acrylic	Broken fl	anges		
Acrylic		-	ment	
Acrylic		e of attach	ment	

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