

## A Hygienist's Guide to Implant Care

- Verify implant locations with current radiographs.
- Evaluate tissue for tone, color and texture.
- Perform periodontal probing with light pressure to monitor the periodontal attachment level at every visit. Look for signs of gingival inflammation, bleeding upon probing or suppuration.
- Take periapical radiograph if clinical pathology is present. Otherwise, take radiographs every 2 years to check for bone level changes.
- Evaluate plaque and calculus for quantity and location. Review findings with patient and provide homecare instruction and demonstration.
- Check clinically and radiographically for residual cement if cement retained restoration has been placed.
- For implant debridement, use Ultrasonic implant inserts with protective, disposable, plastic tips and titanium scalars.
  - Important: Do not use stainless steel curettes or standard ultrasonic and sonic instruments. These types of instrumentation can damage the titanium implant abutment or implant surface.
- Establish a regular recall schedule for the implant patient. Implant patients are typically scheduled for a 3-4 month recall interval during the first year.

- Consider the following oral hygiene aids for optimal implant home care.

- soft-bristle toothbrush and endtuft brush (advise dry brushing in addition to brushing with fluoridated toothpaste)
- floss and/or superfloss (demonstrate wrapping technique to access under the crown margin from all sides)
- interproximal brush (look for protective coating that is safe to use around implants)
- soft foam or plastic interdental picks

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