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THE ASSISTANT SECRETARY OF DEFENSE

WASHINGTON, DC 20301-1200

DEC 19 1996

MEMORANDUM FOR: SURGEON GENERAL OF THE ARMY
SURGEON GENERAL OF THE NAVY
SURGEON GENERAL OF THE AIR FORCE

SUBJECT: Policy For Standardization of Dental Classifications

Good oral health is essential to readiness posture of our forces. An excellent Dental classification system has been developed to identify varying degrees of dental health and readiness. In order to assure ongoing continuity of dental classification for all military personnel, this policy memorandum establishes policy on Dental Classifications for the DoD.

It is DoD policy to maintain uniformity of nomenclature used for dental classifications. Nomenclature and criteria shall be documented as found in the attached [Standardized Dental Classification System](#). My point of contact is Col Marvin Bennett, Senior Consultant for Dentistry, (703) 697-9181.

Edward D. Matter
Stephen C. Joseph, M.D., M.P.H.

Attachment:
As stated

HA POLICY 97-020

**DEPARTMENT OF DEFENSE
STANDARDIZED DENTAL CLASSIFICATION SYSTEM**

The oral health status of personnel shall be classified as follows:

1. **Class 1.** Patients not requiring dental treatment or reevaluation within 12 months.

Criteria:

- a. No dental caries or defective restorations.
- b. Arrested caries for which treatment is not indicated.
- c. Healthy periodontium, no bleeding on probing; oral prophylaxis not indicated.
- d. Replacement of missing teeth not indicated.
- e. Unerupted, partially erupted, or malposed teeth that are without historical, clinical, or radiographic signs or symptoms of pathosis and are not recommended for prophylactic removal.

2. **Class 2.** Patients who have oral conditions that, if not treated or followed up, have the potential but are not expected to result in dental emergencies within 12 months.

Criteria:

- a. Treatment or follow up indicated for dental caries with minimal extension into dentin or minor defective restorations easily maintained by the patient where the condition does not cause definitive symptoms.
- b. Interim restorations or prostheses that can be maintained by the patient for a 12-month period. this includes teeth that have been restored with permanent restorative materials but for which protective coverage is indicated.
- c. Edentulous areas requiring prostheses but not on an immediate basis.
- d. Periodontal disease or periodontium exhibiting:
 1. Requirement for oral prophylaxis.
 2. Requirement for maintenance therapy; this includes stable or non-progressive mucogingival conditions requiring periodic evaluation.

3. Non-specific gingivitis.

4. Early or mild adult periodontitis.

e. Unerupted, partially erupted, or malposed teeth that are without historical, clinical, or radiographic signs or symptoms of pathosis, but which are recommended for prophylactic removal.

f. active orthodontic treatment.

g. Temporomandibular disorder patients in maintenance therapy.

3. **Class 3.** Patients who have oral conditions that if not treated are expected to result in dental emergencies within 12 months. Patients should be placed in Class 3 when there are questions in determining classification between Class 2 and Class 3.

Criteria:

a. Dental caries, tooth fractures, or defective restorations where the condition extends beyond the dentinoenamel junction and causes definitive symptoms; dental caries with moderate or advanced extension into dentin; and defective restorations not maintained by the patient.

b. Interim restorations or prostheses that cannot be maintained for a 12-month period. This includes teeth that have been restored with permanent restorative materials but for which protective coverage is indicated.

c. Periodontal diseases or periodontium exhibiting:

1. Acute gingivitis or pericoronitis.

2. Active moderate to advanced periodontitis.

3. Periodontal abscess.

4. Progressive mucogingival condition.

5. Periodontal manifestations of systemic disease or hormonal disturbances.

d. Edentulous areas or teeth requiring immediate prosthodontic treatment for adequate mastication, communication, or acceptable esthetics.

e. Unerupted, partially erupted, or malposed teeth with historical, clinical, or radiographic signs or symptoms of pathosis that are recommended for removal.

f. Chronic oral infections or other pathologic lesions including:

1. Pulpal or periapical pathology requiring treatment.
2. Lesions requiring biopsy or awaiting biopsy report.

g. Emergency situations requiring therapy to relieve pain, treat trauma, treat acute oral infections, or provide timely follow-up care (e.g., drain or suture removal) until resolved.

h. Temporomandibular disorders requiring active treatment.

4. **Class 4.** Patients who require dental examinations. This includes patients who require annual or other required dental examinations and patients whose dental classifications are unknown.

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Last update: 1/5/1999