



EXTRAORAL AND INTRAORAL DOCUMENTATION

CLIENT NAME _____ BIRTHDATE _____ DATE _____

RDH SIGNATURE _____ DDS SIGNATURE _____

RELEVANT HEALTH HISTORY/STATUS _____

KNOWN RISK FACTORS _____

PAIN/SYMPTOMS/DURATION _____

Action Taken

Re-appoint/re-evaluate in _____

Refer to _____

Comments

EXTRAORAL FINDINGS

FACE

HAIRLINE

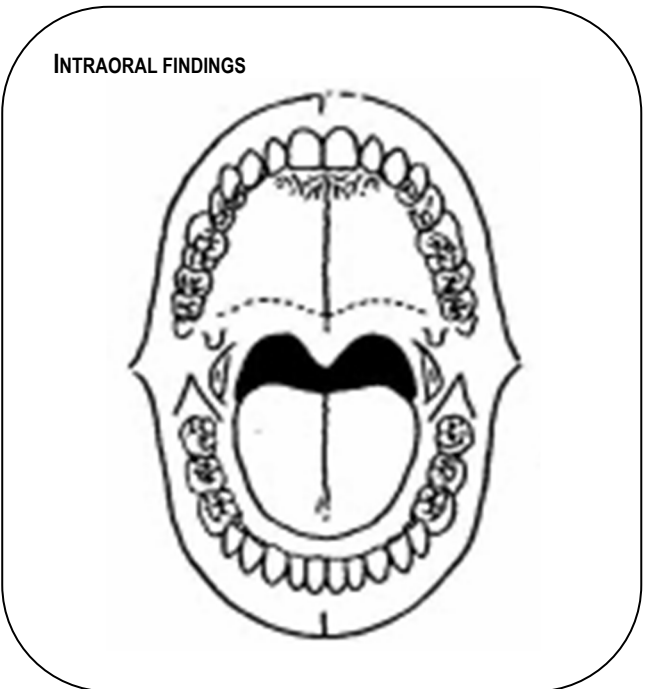
NECK

PALPABLE NODE(S)

TMJ

THYROID

Description of findings



LOCATION OF LESION

Lips

Labial Mucosa/Vestibule

Buccal Mucosa/Vestibule

Buccal Mucosa

Gingival Tissues

Tongue Dorsum

Latera Left Right

Ventral

Floor of Mouth

Palate Soft Hard

Oropharynx

Tonsillar Pillar

Location/dentition reference

DESCRIPTION OF LESION

Shape

Round

Oval

Triangular

Linear

Size

_____ mm x _____ mm

_____ cm x _____ cm

Colour

Normal

White

Red

Yellow

Brown, blue or black

Surface of Lesion

Smooth (covered with intact mucosa)

Rough (pebbly, papillary or corrugated)

Hyperkeratinized

Erosive (thinning, ulcerated, fissured)

Verrucous/wart-like

Mode of Attachment

Broad (sessile)

Narrow (pedunculated stalk)

Symmetry

Bilateral

Unilateral

Consistency

Soft

Firm

Number

Single

Multiple

Margins

Circumscribed (defined)

Ill-Defined

Irregular

Overall Configuration

Flat/Muscular

Raised/nodular _____ mm x _____ mm

Mobility

Mobile

Fixed