Classification System for the Completely Dentate Patient
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This completely dentate classification system offers the following potential benefits:

- Improved intra-operator consistency
- Improved professional communication
- Insurance reimbursement commensurate with complexity of care
- An objective method for patient screening in dental education
- Standardized criteria for outcome assessment and research
- Improved diagnostic consistency
- Simplified, organized aid in the decision to refer a patient
Classification System for the Completely Dentate Patient

Diagnostic Criteria
1. Tooth condition
2. Occlusal scheme

Class I
- Ideal or minimally compromised

Class II
- Moderately compromised

Class III
- Substantially compromised

Class IV
- Severely compromised
REVIEW OF THE DIAGNOSTIC CRITERIA

1. Tooth condition
2. Occlusal scheme
Criteria 1

Tooth Condition
Ideal or minimally compromised tooth condition

- No localized adjunctive therapy required
- Pathology that affects the coronal morphology of three or less teeth in a sextant
Moderately compromised tooth condition

Insufficient tooth structure to retain or support intracoronal or extracoronal restorations— in one sextant

• Pathology that affects the coronal morphology of 4 or more teeth in a sextant

• Pathology can be in two sextants and can be in opposing arches

• Teeth require localized adjunctive therapy, i.e., periodontal, endodontic or orthodontic procedure for a single tooth or in a single sextant
Substantially Compromised Tooth Condition

Insufficient tooth structure to retain or support intracoronal or extracoronal restoration—in two sextants

- Pathology that affects the coronal morphology of 4 or more teeth in three or more sextants
- Pathology can be in three sextants in the same arch and/or can be in opposing arches
- Teeth require localized adjunctive therapy, i.e., periodontal, endodontic or orthodontic procedure for teeth in two sextants
Severely Compromised Tooth Condition

Insufficient tooth structure to retain or support intracoronal or extracoronal restorations—in three or more sextants

- Pathology that affects the coronal morphology of 4 or more teeth in all sextants

- Teeth require localized adjunctive therapy, i.e., periodontal, endodontic or orthodontic procedure for teeth in three or more sextants
Criteria 2

Occlusal Scheme
Ideal or minimally compromised occlusal scheme

• No preprosthetic therapy required

• Contiguous, intact dental arches
Moderately compromised occlusal scheme

- Anterior guidance is intact
- Occlusal scheme requires localized adjunctive therapy
Substantially compromised occlusal scheme

- Occlusal scheme requires major therapy to maintain the entire occlusal scheme without any change in the occlusal vertical dimension
Severely compromised occlusal scheme

• Occlusal scheme requires major therapy to reestablish the entire occlusal scheme including any changes in the occlusal vertical dimension
Class I
Ideal or minimally compromised tooth condition

- No localized adjunctive therapy required
- Pathology that affects the coronal morphology of three or less teeth in a sextant
Criteria 2

Ideal or minimally compromised occlusal scheme

- No preprosthetic therapy required
- Contiguous, intact dental arches
Class II
Criteria 1

Moderately compromised tooth condition

- Insufficient tooth structure to retain or support intracoronal or extracoronal restorations—in one sextant
  - Pathology that affects the coronal morphology of four or more teeth in a sextant
  - Pathology can be in two sextants and can be in opposing arches
Moderately compromised occlusal scheme

- Anterior guidance is intact
- Occlusal scheme requires localized adjunctive therapy
Class III
Substantially compromised tooth condition

- Insufficient tooth structure to retain or support intracoronal or extracoronal restorations—in two sextants
  - Pathology that affects the coronal morphology of four or more teeth in three or more sextants
  - Pathology can be in three sextants in the same and/or can be in opposing arches
- Teeth require localized adjunctive therapy, i.e., periodontal, endodontic, or orthodontic procedure in two sextants
Criteria 2

Substantially compromised occlusal scheme

• Occlusal scheme requires major therapy to maintain the entire occlusal scheme without any change in the occlusal vertical dimension
Class IV
Criteria 1

Severely compromised tooth condition

• Insufficient tooth structure to retain or support intracoronal or extracoronal restorations—in three or more sextants

  ▪ Pathology that affects the coronal morphology of four or more teeth in all sextants

  ▪ Teeth require localized adjunctive therapy, i.e., periodontal, endodontic or orthodontic procedure for teeth in three or more sextants
Severely compromised occlusal scheme

• Occlusal scheme requires major therapy to reestablish the entire occlusal scheme including any changes in the occlusal vertical dimension
Other Class IV characteristics

- Severe manifestations of local or systemic disease, including the sequelae from oncologic treatment
- Maxillomandibular dyskensia and/or ataxia
- A refractory patient—a patient who presents with chronic complaints following appropriate treatment
Guidelines for the Use of the Classification System for the Completely Dentate Patient
In those instances when a patient’s diagnostic criteria are mixed between two or more classes, any single criterion of a more complex class places the patient into the more complex class.
The following additional guidelines will assist in the consistent application of the classification:

- Consideration of future treatment procedures must not influence the choice of diagnostic level.
- Initial adjunctive therapy can change the original classification level. Classification may need to be reassessed after existing restorations are removed.
- Esthetic concerns or challenges raise the classification in complexity by one or more levels in Class I and II patients.
- In the presence of TMD symptoms, the classification is increased in complexity by one or more levels in Class I and II patients.
- Periodontal health is intimately related to the diagnosis and prognosis for completely dentate patients.

For the purpose of this system, it is assumed that patients will receive therapy to achieve and maintain periodontal health so that appropriate prosthodontic care can be accomplished.