Dental Tooth Charting Form

PROBE

DATE 3
DATE 2
DATE 1

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

FACIAL

R L

LINGUAL

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

PROBE 1 2 3

Upper Mobility I I

1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3

Lower Mobility II II

PROBE 3 2 1

32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17

LINGUAL

R L

FACIAL

32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17

PROBE

DATE 1
DATE 2
DATE 3