

Delta Dental of Virginia Clinical Policy # 410

Subject Full Mouth Debridement	Originating Department Clinical Professional Services
	Signature Authority Dental Director

Type: New Replacement Revision Clarification

Date: 11/09/2009 **Revision Date:** 11/15/2011

Preamble:	<p>The Clinical Policy Bulletin is an expression of Delta Dental of Virginia's (DDVA) determination regarding whether certain services or supplies are medically or dentally necessary. DDVA bases its conclusions on a review of currently available clinical literature. This includes, but is not limited to, clinical outcome studies published in the peer-reviewed medical and dental literature, regulatory status of the technology, evidence-based guidelines of public health and health research agencies, evidence-based guidelines and positions of leading national health professional organizations, views of physicians and dentists practicing in relevant clinical areas, and other relevant factors. DDVA reserves the right to revise these policies as new clinical information is available and we welcome submission of further relevant information.</p> <p>A group may define covered dental services under their dental plan, as well as those services that may be subject to dollar caps or other limits. The plan documents outline covered benefits, exclusions and limitations. DDVA advises dentists and enrollees to consult the plan documents to determine if there are exclusions or other benefit limitations applicable to the service request. The conclusion that a particular service is medically or dentally necessary does not constitute an indication or warranty that the service requested is a covered benefit payable by DDVA. Some plans exclude coverage for services that DDVA considers either medically or dentally necessary. When there is a discrepancy between DDVA's clinical policy and the group's plan documents, DDVA is to defer to the group's plan documents as to whether the dental service is a covered benefit. In addition, if state or federal regulations mandate coverage then DDVA will adhere to the applicable regulatory requirement.</p>
History:	<p>This procedure is necessary when a patient's teeth have not been cleaned for an extended period of time, allowing heavy deposits of debris, bacterial plaque and calculus (tartar) to accumulate. This accumulation subsequently creates an unhealthy gingival (gum tissue) environment and renders adequate and comprehensive examination of the oral cavity and dental structures difficult or impossible. Full mouth debridement (also known as "gross scaling" or "gross debridement") is the initial cleaning procedure that removes debris and the bulk of plaque and calculus. This procedure allows inflammation to subside and facilitates the beginning of healing of the gum tissues. After about several weeks of healing time, and at a second appointment, resultant healing and resolution of inflammation will allow an accurate examination and will facilitate removal of additional residual calculus.</p>

Policy:	DDVA Guidelines: <ol style="list-style-type: none">1. Full mouth debridement is appropriate when the patient has no history of prophylaxis, scaling and root planing, periodontal surgery, or periodontal maintenance procedures within three years.2. This procedure must be accompanied by a narrative report explaining rationale for necessity.3. Full mouth debridement will not be considered for patients under 14 years of age.
Code(1):	D4355 – Full mouth debridement to enable comprehensive evaluation and diagnosis. The gross removal of plaque and calculus that interferes with the ability of the dentist to perform a comprehensive oral evaluation. This procedure does not preclude the need for additional procedures.
References:	1. American Dental Association; <i>Current Dental Terminology. CDT 2011-2012</i> ;30 (©ADA 2010).