

Dental numbering systems

There are three different numbering systems used to identify the teeth in dentistry.

1.The Universal Numbering System has been adopted by the ADA. Tooth number 1 is the tooth farthest back on the right side of your mouth in the upper (maxillary) jaw. Numbering continues along your upper teeth toward the front and across to the tooth farthest back on the top left side number 16. The numbers continue by dropping down to the lower (mandibular) jaw. Number 17 is the tooth farthest back on the left side of your mouth on the bottom. Numbering continues again toward the front and across to the tooth farthest back on the bottom right side of your mouth number 32. In this system, the teeth that should be there are numbered. If you are missing your third molars, your first number will be 2 instead of 1, acknowledging the missing tooth. If you've had teeth removed or teeth missing, the missing teeth will be numbered as well.

2.The Palmer Notation Numbering System. The mouth is divided into four sections called quadrants. The numbers 1 through 8 and a unique symbol is used to identify the teeth in each quadrant. The numbering runs from the center of the mouth to the back. In the upper right quadrant tooth, number 1 is the incisor. The numbers continue to the right and back to tooth number 8, which is the third molar. The numbers sit inside an L-shaped symbol used to identify the quadrant. The L is right side up for the teeth in the upper right quadrant. The teeth in the upper left use a backwards L. For the bottom quadrants, the L is upside down following the same pattern from the uppers. Letters such as UR or URQ for the upper right or upper right quadrant may also identify the quadrants.

3.The Federation Dental International Numbering System (FDI). Internationally the two- digit system is used worldwide. Every branch of dentistry uses this system. Each quadrant is assigned a number. The maxillary right quadrant is assigned the number 1, the maxillary left quadrant is assigned the number 2, the mandibular left quadrant is assigned the number 3, and the mandibular right quadrant is assigned the number 4. The teeth within each quadrant are assigned a number from 1 through 8 with 1 being the central incisor and 8 being the third molar.

Palmer Notation															
Permanent Teeth															
upper right								upper left							
8┘	7┘	6┘	5┘	4┘	3┘	2┘	1┘	L ¹	L ²	L ³	L ⁴	L ⁵	L ⁶	L ⁷	L ⁸
8┐	7┐	6┐	5┐	4┐	3┐	2┐	1┐	┐ ₁	┐ ₂	┐ ₃	┐ ₄	┐ ₅	┐ ₆	┐ ₇	┐ ₈
lower right								lower left							
Deciduous Teeth															
upper right								upper left							
			E┘	D┘	C┘	B┘	A┘	L ^A	L ^B	L ^C	L ^D	L ^E			
			E┐	D┐	C┐	B┐	A┐	┐ _A	┐ _B	┐ _C	┐ _D	┐ _E			
lower right								lower left							

The FDI two digit tooth numbering system (below) is used in all examinations.

FDI / UNIVERSAL NUMBERING SYSTEM

PERMANENT DENTITION

FDI	1.8	1.7	1.6	1.5	1.4	1.3	1.2	1.1	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8	FDI
Universal	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Universal
FDI	4.8	4.7	4.6	4.5	4.4	4.3	4.2	4.1	3.1	3.2	3.3	3.4	3.5	3.6	3.7	3.8	FDI
	RIGHT																LEFT

PRIMARY DENTITION

FDI	5.5	5.4	5.3	5.2	5.1	6.1	6.2	6.3	6.4	6.5	FDI
Universal	A	B	C	D	E	F	G	H	I	J	Universal
FDI	8.5	8.4	8.3	8.2	8.1	7.1	7.2	7.3	7.4	7.5	FDI
	RIGHT										LEFT

Dental Indices

Index is a numerical value describing the relative status of a population on a graduated scale with definite upper and lower limits, which is designed to permit and facilitate comparison with other populations classified by the same criteria and methods.

Ideal properties of an index:

- ❖ **Clarity:** The examiner should be able to carry out the index rules in his mind.
- ❖ **Simplicity:** The index should be easily to apply.
- ❖ **Objectivity:** The index criteria should have clear-cut.
- ❖ **Validity:** The index should be measure what it is intended to measure. So it should be correspond with clinical stages of the disease, (ex. number of missing teeth in adults is not a valid measure of caries activity?).
- ❖ **Reliability:** The index should measure consistently at different times and under a variety of conditions, by the same person or different persons.
- ❖ **Quantifiability:** The index should have meaning to statistical analysis. So that the status of a group can be expressed by a number that corresponds to a relative position on a scale from zero to the upper limit.
- ❖ **Sensitivity:** The index should be able to detect reasonably small shifts, in either direction in the group condition.
- ❖ **Acceptability:** The use of the index should not be painful or demeaning to the subject.

Uses of dental indices:

1. To provide data for epidemiological studies by studying prevalence, incidence, and severity of disease.
2. To study and compare oral health status of individuals and population and finding out etiological and predisposing factors for the diseases.
3. For planning of oral health policy and evaluating the success and effectiveness of preventive programs.

Dentition status (DMFS / dmfs Index)

		Upper				
		M	O	D	B	L
Right	7					
	6					
E	5					
D	4					
C	3					
B	2					
A	1					
A	1					
B	2					
C	3					
D	4					
E	5					
	6					
	7					

		Lower				
		M	O	D	B	L
Left	7'					
	6'					
E	5					
D	4					
C	3					
B	2					
A	1					
A	1					
B	2					
C	3					
D	4					
E	5					
	6					
	7					

DS:

ds:

MS:

ms:

FS:

fs:

DMFS:

dmfs:

DMFT:

dmft:

D/d= Decay

M/m= Missing due to caries

F/f= Permanent filling due to carie

Preventive and Community Dentistry / Case sheet

Patient's name: Age:

Student's name: Group:

Oral hygiene and gingival health status

Index	Surface	E 6	B 2	D 4	E 6	B 2	D 4	Mean
PII	Buccal							
	Mesial							
	Lingual							
	Distal							
GI	Buccal							
	Mesial							
	Lingual							
	Distal							

Index	Surface	E 6	A 1	D 4	E 6	A 1	D 4	Mean
Call	Buccal							
	Lingual							

Plaque Index (Silness and Loe, 1964):

- 0 No plaque.
- 1 Plaque on the gingival 1/3 that cannot be seen by naked eye, only by using probe.
- 2 Moderate accumulation of plaque on the gingival 1/3 that can be seen by naked eye.
- 3 Abundance of plaque on the gingival 1/3.

Gingival Index (Loe and Silness, 1963):

- 0 No inflammation.
- 1 Mild inflammation, slight redness, edema, no bleeding on probing.
- 2 Moderate inflammation, bleeding on probing.
- 3 Severe inflammation, spontaneous bleeding.

Calculus component of Periodontal Disease Index (Ramfjord, 1959):

- 0 No calculus.
- 1 Supra gingival calculus.
- 2 Moderate supra gingival and sub gingival calculus or sub gingival calculus only.
- 3 Abundance of supra gingival and sub gingival calculus.