

WOMEN'S INTERAGENCY HIV STUDY  
ORAL PROTOCOL  
FORM OP 9: PAPILLARY ASSESSMENT SCORE

COMPLETING THE FORM

**GENERAL INFORMATION**

Affix the Participants ID label in the space indicated.

Record the visit number, which should be the same as the WIHS core visit.

Be sure the form version is the most current version date.

Record your initials.

Record the date.

**PAPILLARY ASSESSMENT SCORE**

If participant is edentulous (OP6#1 is coded as 1). Form OP 9 is left blank.

**Papillary Assessment Score Key**

- Y= Exclude (If neither adjacent tooth is missing)
- 0= The interdental papilla is free from any sign of erythema, edema, necrosis, or cratering. There is no spontaneous bleeding. The papilla is clinically normal.
- 1= Erythema is present.
- 2= Edema is present as manifested by swelling , loss of stippling, or glazing of the surface epithelium.
- \*3= Ulceration, necrosis, or pseudomembranous exudates is present.
- 4= Cratering is present as evidence of past tissue destruction.
- \*5= Alveolar bone is visibly exposed.

## Upper Arch

- B1. –B13** Using the key provided, assess the interdental papillae beginning with the upper left quadrant and proceeding to the right. The appropriate score (s) for each papilla is/are indicated by circling the appropriate code (s) assigned by the examiner.

## Lower Arch

- B14. –B26** Using the key provided, assess the interdental papillae beginning with the upper left quadrant and proceeding to the right. The appropriate score (s) for each papilla is/are indicated by circling the appropriate code (s) assigned by the examiner.

- \* If the papilla score (s) is/are 3 or 5 all, collect subgingival plaque sample. These codes have been shaded on the form as an additional reminder.  
**Refer to form OP 10 for specific instruction on collection procedures.**

## EQUIPMENT

- Dental mirror

## PROCEDURE

An interdental papilla is that part of the free gingiva occupying the gingival embrasure between adjacent teeth. All interdental papillae anterior to the second molars are examined from the buccal and lingual aspects. One or more score (s) is/are assigned to each papilla, as appropriate. Scores are to be recorded under the column labeled as the tooth that is mesial to the papilla. The papilla between two centrals is scored under the column labeled midline.

A maximum of 13 papillary areas are available for observation in each dental arch. Each papilla is examined visually from both the buccal and lingual aspects for signs of redness, swelling, necrosis, cratering and exposed bone.

The examination begins in the **upper left** quadrant and proceeds around the arch to the **upper right**. The procedures are then repeated for the **lower** arch.

Each papilla site is considered as a single unit, to be examined from both buccal and lingual aspects. If one or more of the conditions below is/are present on either aspects, the site is scored accordingly. If no clinical changes are observed on either aspects, the site is scored 0. Scores are not recorded separately for buccal and lingual views. Multiple conditions **should** be recorded when they occur, i.e., the presence of each condition in the scoring system should be recorded as present or absent on each site. Any combination of scores is permitted, except that sites scored 0 (normal) may not have any additional scores. Papilla sites are scored as “Y” if either of the adjacent teeth is missing unless another tooth has moved forward to form a papilla.

## PAPILLARY ASSESSMENT SCORE KEY

- Y= Exclude (If neither adjacent tooth is missing)
- 0= The interdental papilla is free from any sign of erythema, edema, necrosis, or cratering. There is no spontaneous bleeding. The papilla is clinically normal.
- 1= Erythema is present.
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- \*3= Ulceration, necrosis, or pseudomembranous exudates is present.
- 4= Cratering is present as evidence of past tissue destruction.
- \*5= Alveolar bone is visibly exposed.
- \* NOTE: If the papilla score equals 3 or 5 collect subgingival plaque samples. Refer to Form OP 10 for specific instructions on collection procedures.