# Periodontics

**National Dental Examining Board of Canada (NDEB) Virtual OSCE and Assessment of Fundamental Knowledge (AFK)**

About 8% of the AFK · 4 topics · 2026 blueprint

Periodontics covers the anatomy of the periodontium, the classification and diagnosis of periodontal and peri-implant conditions, the systemic links of periodontitis, and nonsurgical and surgical therapy. It is about 8% of the AFK in NDEB's 2026 blueprint. Its questions test measuring attachment loss correctly, staging and grading, and choosing and judging treatment.

**You should be able to:** A site has a 3 mm probing depth with the gingival margin 2 mm coronal to the CEJ. What is the clinical attachment level?

## Every topic: the key point and the trap

### PD-1 Periodontal anatomy and clinical measurement

The periodontium is gingiva, periodontal ligament, cementum and alveolar bone; the attached gingiva lies between the free gingival groove and the mucogingival junction.

**Trap:** Using probing depth alone as a measure of disease severity and missing attachment loss hidden by recession.

### PD-2 Classification: staging and grading

Gingivitis in a patient with an intact periodontium is defined by bleeding on probing at 10% or more of sites, without attachment loss.

**Trap:** Forgetting that heavy smoking or poorly controlled diabetes shifts the grade up regardless of the bone loss to age ratio.

### PD-3 Risk factors and systemic links

Smoking is a major modifiable risk factor; it masks gingival bleeding through vasoconstriction, so smokers can have deep pockets with little bleeding.

**Trap:** Telling the patient to stop the antihypertensive yourself; drug changes are made with the prescribing physician.

### PD-4 Periodontal therapy and maintenance

Step one is behaviour change and risk control (oral hygiene, smoking cessation, glycemic control) plus removal of supragingival plaque and calculus.

**Trap:** Judging the result at one or two weeks, before healing allows accurate probing.

## Key terms

**Clinical attachment level:** Distance from the cementoenamel junction to the base of the pocket.

**Probing depth:** Distance from the gingival margin to the base of the pocket.

**Mucogingival junction:** Line where attached gingiva meets the movable alveolar mucosa.

**Stage:** Part of the periodontitis diagnosis describing severity and complexity, I to IV.

**Grade:** Part of the periodontitis diagnosis describing rate of progression, A to C.

**Glickman classification:** System grading furcation involvement from I (incipient) to IV (visible through-and-through).

**Scaling and root planing:** Mechanical removal of subgingival plaque and calculus from root surfaces.

**Guided tissue regeneration:** Use of a barrier membrane to let periodontal ligament and bone regenerate instead of epithelium growing down.

**Supportive periodontal care:** Ongoing maintenance visits after active therapy to prevent recurrence.

**Necrotizing gingivitis:** Painful infection with necrotic, punched-out papillae and bleeding.

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