

D4355 – ADA Guide to Reporting Full Mouth Debridement

Developed by the ADA, this guide is published to educate dentists and others in the dental community on this procedure and its code, first published in *CDT-2* (1995) and newly revised in *CDT 2023*.

Introduction

CDT code D4355's nomenclature and descriptor were revised, effective January 1, 2023. The current full entry first published in *CDT 2023* is:

D4355 full mouth debridement to enable a comprehensive periodontal evaluation and diagnosis on a subsequent visit

The 2023 revisions are illustrated here:

D4355 full mouth debridement to enable a comprehensive ~~oral~~ periodontal evaluation and diagnosis on a subsequent visit

~~Full mouth debridement involves the preliminary removal of plaque and calculus that interferes with the ability of the dentist to perform a comprehensive oral evaluation. Not to be completed on the same day as D0150, D0160, or D0180.~~

Why Revise D4355? – These revisions clarify that full mouth debridement is a procedure reported with its own unique code (D4355). A comprehensive periodontal evaluation is a separate procedure reported with code D0180. As the D0180 procedure must include periodontal probing and charting delivery during a subsequent visit allows time for gingival tissue to heal so that findings are accurate.

Questions and Answers

1. If I am unable to perform a comprehensive (D0150) or periodic (D0120) evaluation due to extensive calculus and bleeding, and must deliver a D4355 procedure, how may I report a limited clinical inspection that I have performed?

The answer is a code within CDT's "Pre-diagnostic Services" – specifically D0191 that according to its descriptor involves a limited clinical inspection:

D0191 assessment of a patient

A limited clinical inspection that is performed to identify possible signs of oral or systemic disease, malformation, or injury, and the potential need for referral for diagnosis and treatment.

Findings from this procedure, combined with the dentist's clinical judgement, establish a need for the full mouth debridement procedure.

2. How can I justify reporting D0140 as the evaluation that led to delivery of D4355 – isn't D0140 for emergency visits?

This is a continuing misperception. The "D0140 limited oral evaluation – problem focused" descriptor's first sentence says this type of evaluation is "...limited to a specific oral health problem or complaint." The patient's complaint could be pain or bleeding gums, which could be caused by the accumulation of plaque or calculus. Hence the need for a full mouth debridement, a definitive procedure that, as the D0140 descriptor says "...may be required on the same date..."

3. May I report either comprehensive (D0150) or periodic (D0120) oral evaluation procedure delivered on the same date of service as a D4355 procedure?

Yes. With the D4355 nomenclature and descriptor revisions effective January 1, 2023, either a comprehensive or a periodic oral evaluation can be reported on the same date of service as the D4355 if all the components noted in the D0150 or D0120 descriptors have been accomplished.

Likewise, as noted in questions #1 and #2 above either D0191 or D0140 are other procedures that may be reported when all components noted in these codes' descriptors are accomplished.

Note: “**D0180 comprehensive periodontal evaluation – new or established patient**” is a procedure that may only be delivered and reported on a subsequent date of service, not on the same date as delivery of a full mouth debridement (D4355) procedure.

4. My patient is scheduled for the full mouth debridement procedure on the first of the month and a comprehensive periodontal evaluation two weeks later. The debridement procedure is delivered, but the patient decides not to present for the comprehensive periodontal evaluation. How does this affect reporting the D4355 procedure delivered?

Reporting D4355 is correct as this service was delivered with the expectation that the patient would comply with the treatment plan and return on a later date for the comprehensive periodontal evaluation.

5. The D4355 nomenclature does not specify the procedure code for reporting the “comprehensive periodontal evaluation and diagnosis on a subsequent visit.” Am I correct in assuming that “D0180 comprehensive oral evaluation – new or established patient” is the only procedure and code appropriate for the subsequent visit?

No. A dentist’s selection of the oral evaluation code to report is guided by the descriptor and the scope of the service delivered. For example:

Keywords in the D0180 descriptor are “It includes evaluation of periodontal conditions, probing and charting, an evaluation for oral cancer, the evaluation and recording of the patient’s dental and medical history and general health assessment. It may include the evaluation and recording of dental caries, missing or unerupted teeth, restorations, and occlusal relationships”

Keywords in the D0150 descriptor are “This includes an evaluation for oral cancer, the evaluation and recording of the patient’s dental and medical history and a general health assessment....It may include the evaluation and recording of dental caries, missing or unerupted teeth, restorations, existing prostheses, occlusal relationships, periodontal conditions (including periodontal screening and/or charting)....”

Questions or Assistance?

Additional information about the D4355 procedure, including clinical scenarios, is found in the ADA’s CDT Companion publication (to purchase online go to [American Dental Association Online Store \(ada.org\)](https://www.ada.org) or call 800-947-4746)

One-on-one assistance for ADA members – call 800-621-8099 or send an email to dentalcode@ada.org

Notes:

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