

Two Key slides from the  
presentation on the 2018 AAP  
classification

Workshop:	2015			2018			
	Slight	Moderate	Severe	Stage I	Stage II	Stage III	Stage IV
Probing Depth	>3 to <5mm	≥5 to <7mm	≥7mm	Max ≤4mm	Max ≤5mm	Max ≥6mm	Max ≥6mm
Radiographic Bone Loss	Up to 15% of root length or ≥2- ≤3mm	16-30% of root length or ≥3 - ≤5mm	>30% or >5mm	<15%, coronal 1/3 mostly horizontal	15-33%, coronal 1/3 mostly horizontal	Extending to the middle 1/3 and beyond	Extending to the middle 1/3 and beyond
Clinical Attachment Loss	1-2mm	3-4mm	5+mm	1-2mm interdental	3-4mm interdental	≥5 interdental	≥5 interdental
Complexity						<ul style="list-style-type: none"> <li>• Vertical bone loss ≥3mm</li> <li>• Class II or III furca</li> <li>• Moderate ridge defects</li> </ul>	<ul style="list-style-type: none"> <li>• Same as stage III plus:</li> <li>• Masticatory dysfunction</li> <li>• 2° occlusal trauma (mobility ≥2)</li> <li>• Severe ridge defects</li> <li>• Bite collapse, flariong, drifting</li> <li>• &lt;20 remaining teeth(10 opposing pairs)</li> </ul>



	Healthy Periodontium	Gingivitis-dental biofilm induced	Periodontitis Stage I	Periodontitis Stage II	Periodontitis Stage III	Periodontitis Stage IV
Bleeding on probing (BOP)	None/less than 10% of sites	Yes	Yes	Yes	Yes	Yes
Probing depth (PD, mm)	1-3mm	1-3mm or slightly higher	Max ≤4mm	Max ≤5mm	Max ≥6mm	Max ≥6mm
Clinical Attachment Level (CAL)	None	None	1-2mm interdental	3-4mm interdental	≥5 interdental	≥5 interdental
Radiographic Bone loss	None	none	<15%, coronal 1/3 mostly horizontal	15-33%, coronal 1/3 mostly horizontal	Extending to the middle 1/3 and beyond	Extending to the middle 1/3 and beyond
Suggested Treatment	OHI, prophylaxis every 6 months or according to patient's risk factors	OHI, prophylaxis every 6 months or according to patient's risk factors	OHI scaling and root planing as needed, re-evaluation, periodontal maintenance	OHI scaling and root planing as needed, re-evaluation, periodontal maintenance every 3 months, refer to Graduate Periodontics as needed especially if residual deep PD with BOP	OHI scaling and root planing as needed, re-evaluation, likely to have periodontal surgery in Graduate Periodontics clinic after initial therapy and re-evaluation, periodontal maintenance every 3 months after active periodontal therapy is complete	

