A cleaning is a check and a fine-tune.

Your daily brushing does the main work of reducing gum inflammation.[1][2] A cleaning visit is time to find problems before they hurt, and time to ask questions.

What we check during a cleaning

Things we want to find before they hurt

Tooth decay

New cavities, or decay coming back at the edges of fillings and crowns

Gums

Swelling or bleeding. The depth of gum pockets

Soft tissue

Lumps or sores on the cheeks, tongue and gums

Bite

Worn or chipped teeth. Too much force on some teeth

Fillings, crowns

Chips or gaps. Anything coming loose

Dentures

Whether they fit, and any sore spots they cause

X-rays

Disease at the tips of the roots (periapical lesions). How often X-rays are taken differs by person and clinic

All of these **need less treatment if they're found before they hurt**.

Daily brushing does the main work

Daily brushing — Main role

- Brush **twice a day for at least 2 minutes** with fluoride toothpaste
- If your gums are inflamed, clean between your teeth **once a day**, with interdental brushes or similar[1]

Cleaning visits — Check and fine-tune

Not just "getting the tartar removed," but **finding where inflammation remains and fixing how you brush, together**. A research review found that professional cleaning works best when combined with brushing instruction.[2]

Nearly 40%

of gum sites still bleeding after 3 years

In a UK trial, in every group, nearly 40% of gum sites were still bleeding after 3 years. **More frequent scaling did not make the gum inflammation go away.**[3]

No dentist today? That's a good sign

Ideally, you won't need to see the dentist at your visit, because that means there's nothing to treat. Cleanings are usually done by a dental hygienist. Dental hygienists are nationally licensed, and by law they remove tartar and give brushing instruction under a dentist's direction.[4] **If you have questions, they can help.**

From your clinic A clinic stamp is fine for contact details

Phone _____

Hours _____

Next visit _____

Today ☐ Scaling ☐ Brushing practice ☐ X-rays ☐ Other ( )

Watch for ☐ Gum bleeding ☐ Between teeth ☐ Bite ☐ Fillings, crowns ☐ Dentures

Interdental brush Size _____

Next cleaning ☐ 1 month ☐ 2 months ☐ 3 months ☐ 6 months ☐ ( ) months

References [1] Chapple IL, et al. Primary prevention of periodontitis: managing gingivitis. J Clin Periodontol. 2015;42 Suppl 16:S71-6. [2] Needleman I, et al. Professional mechanical plaque removal for prevention of periodontal diseases in adults — systematic review update. J Clin Periodontol. 2015;42 Suppl 16:S12-35. [3] Clarkson J, et al. Examining the impact of oral hygiene advice and/or scale and polish on periodontal disease: the IQuaD cluster factorial randomised controlled trial. Br Dent J. 2021;230(4):229-235. [4] Dental Hygienists Act of Japan (Act No. 204 of 1948), Article 2.

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Book your next visit before you leave.

How often to come differs from person to person

No serious gum disease

In adults who visit regularly, check-ups every 6 months, at risk-based intervals, or every 24 months made little difference to tooth decay or gum bleeding after 4 years.[5] Research also found that **people who kept visiting over the long term had less decay and fewer lost teeth**.[6]

Treated for gum disease? It's different

Gum disease tends to come back, even after treatment settles it.[7][8] A research review found that people who kept coming regularly after treatment were less likely to lose teeth than those who stopped.[9] **Sticking to the interval you're given is the surest way.**

Make it easy to keep going

1 Book before you leave

"I'll call later" usually turns into "when it hurts."

2 Set it by your risk

How fast tartar builds up differs. Let your clinic set the right interval for you.

3 Ask your hygienist

Where you miss when brushing, which interdental brush size fits. This visit is time to ask.

4 Come back anyway

Even after 2 years away, things are rarely beyond repair.

Common myths

Myth

"I'll go when it hurts."

If you wait until it hurts, the visit often can't end with just a cleaning. Drilling a cavity, root canal treatment, removing tartar under the gums with anesthetic: by then you need the dentist's treatment.

Myth

"I can remove tartar myself."

Tartar also forms under the gums (inside gum pockets). Even at the dentist, removing tartar under the gums is a separate treatment.[8] You can't see it yourself, so scraping with tools or fingernails can injure your gums.

Myth

"Bleeding means the cleaning was done badly."

The main difference between people who bleed or feel pain and those who don't is how inflamed their gums are. Bleeding gums are a sign of inflammation.[7]

Myth

"I get cleanings, so my brushing doesn't matter."

Daily brushing does the main work of reducing gum inflammation.[1] A cleaning every 3–4 months can't make up for all the other days.

Come in sooner if Come any time you think of it

- Your gums are **swollen**, or **bleed when you brush** day after day
- A tooth is **sensitive or painful**
- A tooth feels **loose**
- A filling or crown has **chipped or come out**
- Your denture **doesn't fit**, or rubs and hurts
- You've **stopped coming** after gum disease treatment

Clinic contact (stamp is fine)

Notes

References

[1] Chapple IL, et al. J Clin Periodontol. 2015;42 Suppl 16:S71-6. [5] Fee PA, et al. Recall intervals for oral health in primary care patients. Cochrane Database Syst Rev. 2020;10:CD004346. [6] Thomson WM, et al. J Dent Res. 2010;89(3):307-311. [7] Chapple ILC, et al. J Periodontol. 2018;89 Suppl 1:S74-S84. [8] Japanese Association for Dental Science. Basic principles of periodontal treatment. March 2026. [9] Lee CT, et al. J Dent Res. 2015;94(6):777-786.

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