



Institute for Advanced Laser Dentistry

LANAP Treatment Sequence

Appt/Date	Time Interval*	Time Needed	Procedure(s)
Initial Visit		1 hour +	Exam, X-Rays, Perio charting, Treatment Plan, Informed Consent, Prescriptions, Pre and Post-op information
START TREATMENT		2 hours	LANAP, half mouth
	1 week	2 hours	Post-op, Occlusal adjustment LANAP, half mouth
	2 weeks	30 minutes	Post-op, Occlusal Adjustment Impressions for bite guard
	1 month	30 minutes 30 minutes	Supragingival polish Deliver bite guard Occlusal Adjustment
	3 months	1 hour	Prophylaxis Occlusal Adjustment
	6 months	1 hour	Perio maintenance Occlusal Adjustment
	9 months	1 hour	Perio maintenance Occlusal Adjustment
	12 months	1 hour 1 hour	Perio maintenance Perio charting X-Rays Occlusal Adjustment
	Q3 months	1 hour	Perio maintenance Occlusal Adj./Equil
	Annually	1 hour	Perio charting, X-Rays

* refers to amount of time since 'start treatment' date