

Clinical severity index for Primary Pit and Fissure Carious lesions (PFCLs).

Visual assessment: Direct vision of a cleaned and dried tooth under unit light.

Category	0. Sound	1. Active	2. Arrested
Intact pit and fissure Morphology and surface.	a. Shiny and normal translucent enamel feels smooth and hard in intact pits and fissures. Dragging a probe from slopes to base doesn't produce a difference in hardness sensation No dentinal discolouration underneath. This covers all the pits and fissures in this tooth.	a. Loss of enamel lustre and increase in enamel opacity. Enamel feels rough when dragging a blunt probe along the enamel on the walls. Underlying dentinal staining may be showing through enamel.	a. Shiny enamel in the fissures and/or pits with no loss of enamel lustre anywhere. Evidence of staining. Enamel hard and smooth.
Localised loss of the surface continuity in a pit or fissure less than 0.5mm.	b. Same as above. The probe can enter the discontinuity which is not clear for the naked eye.	b. Same as above. The probe can enter the discontinuity which is not clear for the naked eye.	b. Same as above. The probe can enter the discontinuity which is not clear for the naked eye.
Frank cavitation (more than 0.5 mm)	c. Shiny and normal translucent enamel around the edges of a cavity. Normal dentine colour in the cavity. Hard dentine. Reason for cavity is present.	c. Same as above. Soft or leathery dentine.	c. Same as above. Hard dentine.

Tactile assessment: Done with a blunt probe with light pressure and dragging motion

1.	Hard
2.	Leathery
3.	Soft

Treatment needs assessment:

1.	Requiring drilling and filling	Deemed to have infected dentine where clinical infected demineralisation of the underlying dentine is deemed to be present and progressing. 1a,b,c
2.	Possibly requiring drilling and filling	Possibly deemed to have infected dentine where clinical infected demineralisation of the underlying dentine is possibly considered to be present and progressing. 1a,b,c
3.	Requiring a pharmaceutical approach but not drilling and filling	Deemed to have infected demineralised dentine which is reversing and getting smaller. Clinical remineralisation of the underlying dentine is considered to be occurring.
4.	Requiring no intervention	Deemed to have had infected dentine which reversed and where clinical remineralisation of the underlying dentine is considered to be complete, with no infection remaining in the dentine. Hard dentine (if accessible). Shiny enamel in the fissures and/or pits with no loss of enamel lustre anywhere. Enamel hard and smooth. 2a,b,c