

## **Sample Competency Forms**

The competency and assessment forms and grading criteria included in this packet are suggestions only. Utilize and/or modify as it fits with your institution's practices.

### **Procedures on which we would like to test our students to competency**

1. Examination, Diagnosis, and Treatment Planning/Comprehensive Periodontal Evaluation
2. Scaling and Root Planing
3. Periodontal Maintenance/Evaluation of Longitudinal Care
4. Implant Treatment Planning
5. Oral Hygiene/Health Promotion
6. Surgical Treatment Planning/Referral

## RATING FORM FOR PERIODONTAL CLINICAL PERFORMANCE ASSESSMENT

### Periodontal Examination and Treatment Plan

**Patient eligibility criteria: Make sure you check your manual for the selection criteria before scheduling your patient for this CPA.**

- At least 6 teeth with at least one site presenting probing depths  $\geq$  5mm.
- At least 6 teeth with presence of supra or subgingival calculus in at least one site
- At least 4 teeth with loss of clinical attachment

Patient: \_\_\_\_\_ Chart #: \_\_\_\_\_

ELIGIBLE and ACCEPTED FOR CPA  NOT ELIGIBLE AND NOT ACCEPTED FOR CPA  DATE: \_\_\_\_\_

Faculty Evaluator/s: \_\_\_\_\_

<b>Section I</b>	<b>+ -</b>	<u>MINIMUM EXPECTATIONS</u>	
<b>ORGANIZATION OF TREATMENT AREA</b>	+	-	Student is organized for the periodontal procedure with proper records and informed consent signed by patient.
	+	-	<b>C.E. - Maintain infection control in a neat and orderly work environment.</b>
	+	-	Instruments are clean, and tray is organized with correct instruments for proper faculty assessment of procedures.
	+	-	Hand mirror for patient is readily available in the operatory

<b>Section II</b>	<b>+ -</b>	<u>MINIMUM EXPECTATIONS</u>	
<b>PREPARATION FOR TREATMENT</b>	+	-	Review patient record before initiating procedure accurately.
	+	-	Takes and Records blood pressure and heart rate accurately.
	+	-	Demonstrates familiarity and knowledge about patient's medical and dental history and inaccuracies do not endanger patient.
	+	-	<b>C. E. - Medical history has inaccuracies that endanger the patient.**</b>
	+	-	Obtain proper forms, instruments and supplies to provide the periodontal care planned.
	+	-	Patient record documentation is appropriate to initiate this clinical visit.

<b>Section III</b>	<b>+ -</b>	<u>MINIMUM EXPECTATIONS – Identify and record</u>	
<b>PERIODONTAL CHARTING &amp; RADIOGRAPHIC FINDINGS</b>	+	-	Probing depths within 1-2mm of those measured by evaluator
	+	-	Level of the free gingival margin
	+	-	Mucogingival line on buccal surfaces
	+	-	Specific sites with immediate and delay bleeding on probing
	+	-	Furcation involvement accurately with symbols for class I, II and III
	+	-	Tooth mobility useful for diagnosis and treatment planning
	+	-	Presence of supra and/or subgingival calculus with accuracy
	+	-	Radiographic evidence of horizontal bone loss
	+	-	Radiographic evidence of angular bone loss
	+	-	Radiographic evidence of furcation radiolucencies
	+	-	Radiographic evidence of widening of PDL
	+	-	Radiographic evidence of periapical radiolucencies

<b>Section IV</b>	<b>+ -</b>	<u>MINIMUM EXPECTATIONS</u>	
<b>PLAQUE CONTROL AND OHI</b>	+	-	Uses disclosing agents properly and patient has access to a hand mirror
	+	-	Plaque Scores reflects actual presence of plaque
	+	-	<b>C.E. – Appropriate OHI and training given to patient, and correct feedback is given.</b>
	+	-	Patient demonstrates OHI appropriately when requested by instructor.

<b>Section V + -</b>		<b>MINIMUM EXPECTATIONS</b>
<b>ETIOLOGY, PERIODONTAL DIAGNOSIS, CASE TYPE &amp; PROGNOSIS</b>	+ -	Primary etiologic factor is accurately recorded
	+ -	Secondary etiologic factors are identified and recorded
	+ -	Local factors are identified and recorded
	+ -	Systemic factors are identified and recorded
	+ -	Periodontal Diagnosis is clinically accurate
	+ -	Case Type is accurate
	+ -	Accurately identifies Long and short term prognosis for the dentition
	+ -	Accurately identifies and record long and short term prognosis for individual tooth

<b>Section VI + -</b>		<b>MINIMUM EXPECTATIONS</b>
<b>PERIODONTAL TREATMENT PLAN</b>	+ -	Develops and records plan for initial periodontal therapy
	+ -	Periodontal Treatment plan addresses acute needs
	+ -	Periodontal Treatment plan eliminates etiological factors
	+ -	Periodontal Treatment plan is appropriately sequenced
	+ -	Periodontal treatment plan addresses extraction of hopeless teeth, endodontic exam or treatment, cervical decay, overhangs or any iatrogenic factors that are contributing to local to periodontal diseases.
	+ -	Identify and record possible periodontal surgical therapy after initial therapy or for proper restorative procedures

<b>Section VII + -</b>		<b>MINIMUM EXPECTATIONS</b>
<b>PROFESSIONALISM</b>	+ -	Maintains professional appearance and demeanor at all times.
	+ -	<b>C.E. – Accepts and follows instructions provided by instructor**</b>
	+ -	Operatory and tray continue to be organized and clean before faculty is called for any “checking”
	+ -	During faculty evaluation of patient, dental student does not leave the operatory and stays observing and listening all faculty comments, any information or discussion with student and/or patient, only leaving if allowed by faculty.
	+ -	Maintains good communication with patient
	+ -	Controls patient discomfort appropriately for this visit

<b>Section VIII + -</b>		<b>MINIMUM EXPECTATIONS</b>
<b>Understanding &amp; Completion of Treatment visit</b>	+ -	Demonstrates understanding of procedures performed.
	+ -	Records and document clinical activities, procedures and discussions accurately and legible
	+ -	Prepare Axiom by entering with proper codes and ready for final closing of electronic charting by periodontal faculty
	+ -	Schedules sequence of future visits and treatment adequately for the patient.

**Clinical Grade: Satisfactory    Unsatisfactory**

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Check your clinical manual for any question.

## RATING FORM FOR PERIODONTAL COMPETENCY PERFORMANCE ASSESSMENT SCALING AND ROOT PLANING (Sc + Rp)

Record in these boxes your selected teeth, PD and calculus

PD	[Empty grid for PD recording]															
Tooth #	[Empty grid for Tooth # recording]				[Empty grid for Tooth # recording]				[Empty grid for Tooth # recording]				[Empty grid for Tooth # recording]			
Calculus	[Empty grid for Calculus recording]															

**Patient eligibility criteria (check manual for details)**

- Minimum of 3 teeth being at least one molar or 5 consecutive teeth
- Probing depth > 5mm in at least one site per tooth
- At least 3 teeth with supra or subgingival **calculus** in at least one site per tooth.

Patient: \_\_\_\_\_ Chart #: \_\_\_\_\_

ELIGIBLE and ACCEPTED FOR CPA  NOT ELIGIBLE AND NOT ACCEPTED FOR CPA  DATE: \_\_\_\_\_

Faculty Evaluator/s: \_\_\_\_\_

<b>Section I + -</b>		<u>MINIMUM EXPECTATIONS</u>	
	+ -		Student is organized for the periodontal procedure with proper records and informed consent signed by patient.
<b>ORGANIZATION OF TREATMENT AREA</b>	+ -	<b>C.E. - Maintain infection control in a neat and orderly work environment.</b>	
	+ -		Instruments are clean and sharp, and tray is organized with correct instruments for proper faculty assessment of procedures.
	+ -		Hand mirror for patient is readily available in the operatory

<b>Section II + -</b>		<u>MINIMUM EXPECTATIONS</u>	
	+ -		Review patient record before initiating procedure accurately.
<b>PREPARATION FOR TREATMENT</b>	+ -		Takes and Records blood pressure and heart rate accurately.
	+ -		Demonstrates familiarity and knowledge about patient's medical and dental history and inaccuracies do not endanger patient.
	+ -	<b>C. E. - Medical history has inaccuracies that endanger the patient.**</b>	
	+ -		Obtain proper forms, instruments and supplies to provide the periodontal care planned.
	+ -		Patient record documentation is appropriate to initiate this clinical visit.

<b>Section III + -</b>		<u>MINIMUM EXPECTATIONS</u>	
	+ -		Uses disclosing agents properly and Plaque Scores reflects actual presence of plaque
<b>PLAQUE CONTROL &amp; OHI</b>	+ -	<b>C.E. - Oral Hygiene Instructions and training given to patient appropriately and patient can provide correct feedback to instructor**</b>	
	+ -		Patient has access and uses appropriately a clean hand mirror for OH instructions

<b>Section IV + -</b>		<u>MINIMUM EXPECTATIONS</u>	
	+ -		Identifies distinct presence of stain, plaque and supragingival calculus
<b>CALCULUS DETECTION AND PD</b>	+ -	<b>C.E. - Records accurately the presence of supra and subgingival calculus before CPA's</b>	
	+ -	<b>C.E. - Records accurately (within 2mm of error) P.D for the selected teeth before CPA's</b>	
	+ -		Request instructor to use sonic or ultrasonic instrumentation in appropriate cases.

<b>Section V + -</b>		<b>MINIMUM EXPECTATIONS</b>
	+ -	Operatory and tray are properly organized as described in periodontics clinical manual.
<b>EFFICIENCY OF THERAPY - SCALING AND ROOT PLANING</b>	+ -	Removes distinct plaque, stain and supra gingival calculus from all tooth surfaces
	+ -	<b>C.E. - Removes enough plaque, supra and subgingival calculus to provide good expectation of disease control.</b>
	+ -	Root planning was effective leaving smooth root surfaces with glass like-texture
	+ -	<b>C.E. - Clear evidence of soft tissue trauma inconsistent with the procedure.</b>
	+ -	Overhangs are eliminated and/or are recognized to be eliminated by proper restorative work and before periodontal reevaluation.
	+ -	Operatory and tray continue to be organized and clean before faculty is called for "checking"

<b>Section VI + -</b>		<b>MINIMUM EXPECTATIONS</b>
	+ -	Maintains professional appearance and demeanor at all times.
<b>PROFESSIONALISM</b>	+ -	<b>C.E. – Accepts and follows instructions provided by instructor**</b>
	+ -	Operatory and tray continue to be organized and clean before faculty is called for any "checking"
	+ -	During faculty evaluation of patient, dental student does not leave the operatory and stays observing and listening all faculty comments, any information or discussion with student and/or patient, only leaving if allowed by faculty.
	+ -	Maintains good communication with patient
	+ -	Controls patient discomfort appropriately for this visit

<b>Section VII + -</b>		<b>MINIMUM EXPECTATIONS</b>
	+ -	Demonstrates understanding of procedures performed.
<b>Understanding &amp; Completion of Treatment visit</b>	+ -	Records and document clinical activities, procedures and discussions accurately and legible
	+ -	Prepare the Axium by entering with proper codes and ready for final closing of electronic charting by periodontal faculty
	+ -	Schedules sequence of future visits and treatment adequately for the patient.

Clinical Grade: **Satisfactory** **Unsatisfactory**

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Check your clinical manual for any question.

## RATING FORM FOR PERIODONTAL COMPETENCY PERFORMANCE ASSESSMENT

### Prophylaxis and OHI – Preventive and Treatment of Gingivitis

**Patient eligibility criteria**

- Minimum of 6 teeth being at least one molar or 8 consecutive teeth
- PSR code <3 in all sextants

Patient: \_\_\_\_\_ Chart #: \_\_\_\_\_

ELIGIBLE and ACCEPTED FOR CPA  NOT ELIGIBLE AND NOT ACCEPTED FOR CPA  DATE: \_\_\_\_\_

Faculty Evaluator/s: \_\_\_\_\_

<b>Section I</b>	<b>+ -</b>		<u>MINIMUM EXPECTATIONS</u>
<b>ORGANIZATION OF TREATMENT AREA</b>	+	-	Student is organized for the periodontal procedure with proper records and informed consent signed by patient.
	+	-	<b>C.E. - Maintain infection control in a neat and orderly work environment.</b>
	+	-	Instruments are clean and sharp, and tray is organized with correct instruments for proper faculty assessment of procedures.
	+	-	Hand mirror for patient is readily available in the operatory

<b>Section II</b>	<b>+ -</b>		<u>MINIMUM EXPECTATIONS</u>
<b>PREPARATION FOR TREATMENT</b>	+	-	Review patient record before initiating procedure accurately.
	+	-	Takes and Records blood pressure and heart rate accurately.
	+	-	Demonstrates familiarity and knowledge about patient's medical and dental history and inaccuracies do not endanger patient.
	+	-	<b>C. E. - Medical history has inaccuracies that endanger the patient.**</b>
	+	-	Obtain proper forms, instruments and supplies to provide the periodontal care planned.
	+	-	Patient record documentation is appropriate to initiate this clinical visit.

<b>Section III</b>	<b>+ -</b>		<u>MINIMUM EXPECTATIONS</u>
<b>PLAQUE CONTROL &amp; OHI</b>	+	-	Uses disclosing agents properly and Plaque Scores reflects actual presence of plaque
	+	-	<b>C.E. - Oral Hygiene Instructions and training given to patient appropriately and patient can provide correct feedback to instructor**</b>
	+	-	Patient has access and uses appropriately a clean hand mirror for OH instructions
	+	-	Adequate time is devoted to OHI
	+	-	OHI given is personalized and take patient's abilities into consideration
	+	-	OHI and OH aids given are expected to improve patient's home care and gingival tissue health

<b>Section IV</b>	<b>+ -</b>		<u>MINIMUM EXPECTATIONS</u>
<b>STAIN CALCULUS DETECTION</b>	+	-	Identifies distinct presence of stain, plaque and supragingival calculus
	+	-	Recognize sites with gingival inflammation and associated etiologic factors
	+	-	<b>C.E. - Records accurately the presence of supra and subgingival calculus before CPA's</b>
	+	-	Request instructor to use sonic or ultrasonic instrumentation in appropriate cases.



## RATING FORM FOR PERIODONTAL COMPETENCY ASSESSMENT PERFORMANCE

### Periodontal Reevaluation or Maintenance

**Patient eligibility criteria: Make sure you check your manual for the selection criteria before scheduling your patient for this CPA.**

- Patient that has received an initial periodontal diagnosis of periodontitis
- Completed initial periodontal therapy 4-6 weeks or Periodontal maintenance recall every 3 months.

Patient: \_\_\_\_\_ Chart #: \_\_\_\_\_

ELIGIBLE and ACCEPTED FOR CPA  NOT ELIGIBLE AND NOT ACCEPTED FOR CPA  DATE: \_\_\_\_\_

Faculty Evaluator/s: \_\_\_\_\_ Overall Rating: 4.0 \_\_\_ 3.5 \_\_\_ 3.0 \_\_\_ 2.0 \_\_\_ 0 \_\_\_ (F)

<b>Section I</b>	<b>+ -</b>		<u>MINIMUM EXPECTATIONS</u>
<b>ORGANIZATION OF TREATMENT AREA</b>		+ -	Student is organized for the periodontal procedure with proper records and informed consent signed by patient.
		+ -	<b>C.E. - Maintain infection control in a neat and orderly work environment.</b>
		+ -	Instruments are clean and sharp, and tray is organized with correct instruments for proper faculty assessment of procedures.
		+ -	Hand mirror for patient is readily available in the operatory

<b>Section II</b>	<b>+ -</b>		<u>MINIMUM EXPECTATIONS</u>
<b>PREPARATION FOR TREATMENT</b>		+ -	Review patient record before initiating procedure accurately.
		+ -	Takes and Records blood pressure and heart rate accurately.
		+ -	Demonstrates familiarity and knowledge about patient's medical and dental history and inaccuracies do not endanger patient.
		+ -	<b>C. E. - Medical history has inaccuracies that endanger the patient.**</b>
		+ -	Obtain proper forms, instruments and supplies to provide the periodontal care planned.
		+ -	Patient record documentation is appropriate to initiate this clinical visit.

<b>Section III</b>	<b>+ -</b>		<u>MINIMUM EXPECTATIONS - Identify and Record</u>
<b>PERIODONTAL CHARTING &amp; RADIOGRAPHIC FINDINGS</b>		+ -	Probing depths within 1-2mm of those measured by evaluator
		+ -	Level of the free gingival margin
		+ -	Mucogingival line on buccal surfaces
		+ -	Specific sites with immediate and delay bleeding on probing
		+ -	Furcation involvement accurately with symbols for class I, II and III
		+ -	Tooth mobility useful for diagnosis and treatment planning
		+ -	Presence of supra and/or subgingival calculus with accuracy
		+ -	Radiographic evidence of horizontal bone loss
		+ -	Radiographic evidence of angular bone loss
		+ -	Radiographic evidence of furcation radiolucencies
		+ -	Radiographic evidence of widening of PDL
		+ -	Radiographic evidence of periapical radiolucencies

<b>Section IV</b>	<b>+ -</b>		<u>MINIMUM EXPECTATIONS</u>
<b>PLAQUE CONTROL AND OHI</b>		+ -	Use disclosing agents properly and patient has access to hand mirror
		+ -	Plaque Scores reflects actual presence of plaque
		+ -	<b>C.E. – Appropriate OHI and training given to patient, and correct feedback is given.</b>
		+ -	Patient demonstrates OHI appropriately when requested by instructor.



<b>Section V + -</b>		<u>MINIMUM EXPECTATIONS</u>
	+ -	Primary etiologic factor is accurately recorded
<b>UPDATE, ETIOLOGY, PERIODONTAL DIAGNOSIS, CASE TYPE &amp; PROGNOSIS</b>	+ -	Secondary etiologic factors are identified and recorded
	+ -	Local factors are identified and recorded
	+ -	Systemic factors are identified and recorded
	+ -	Periodontal Risk assessments is defined
	+ -	Periodontal Diagnosis is updated
	+ -	Accurately updates long and short term prognosis for the dentition
	+ -	Accurately updates and record long and short term prognosis for individual tooth

<b>Section VI + -</b>		<u>MINIMUM EXPECTATIONS</u>
	+ -	Develop and record plan for further periodontal therapy
<b>UPDATE PERIODONTAL TREATMENT PLAN</b>	+ -	Reevaluate and Identify needs for further periodontal therapy
	+ -	<b>C.E. - Identify the need for appropriate referral to a specialist in Periodontics</b>
	+ -	Provide written evidence of proper referral to a specialist in Periodontics

<b>Section VII + -</b>		<u>MINIMUM EXPECTATIONS</u>
	+ -	Maintain professional appearance and demeanor at all times.
<b>PROFESSIONALISM</b>	+ -	<b>C.E. – Accepts and follows instructions provided by instructor**</b>
	+ -	Operator and tray continue to be organized and clean before faculty is called for any “checking”
	+ -	During faculty evaluation of patient, dental student does not leave the operatory and stays observing and listening all faculty comments, any information or discussion with student and/or patient, only leaving if allowed by faculty.
	+ -	Maintain good communication with patient
	+ -	Control patient discomfort appropriately for this visit

<b>Section VIII + -</b>		<u>MINIMUM EXPECTATIONS</u>
	+ -	Demonstrates understanding of procedures performed.
<b>Understanding &amp; Completion of Treatment visit</b>	+ -	Record and document clinical activities, procedures and discussions accurately and legible
	+ -	Prepare Axium by entering with proper codes and ready for final closing of electronic charting by periodontal faculty
	+ -	Schedule sequence of future visits and treatment adequately for the patient.

**TOTAL SECTIONS (8): DEFICIENT IN \_\_\_\_\_ SECTIONS**

Expectations were not met in the following area(s): \_\_\_\_\_

Critical Error was detected at: \_\_\_\_\_

Critical Error as stated before will lead to a failing grade of “F”. The remaining expectations are also considered important and NOT meeting expectations in four (4) or Sections will also lead to a failing grade of “F” for the this CPA.

**KEY to your Overall CPA grading**

- 4.0 EXPECTATION MET ON ALL SECTIONS AND NO CRITICAL ERRORS.
- 3.5 EXPECTATION MET ON MOST SECTIONS BUT ONE SECTION (-) MINOR DEFICIENCY, NO CRITICAL ERROR.
- 3.0 EXPECTATION MET ON MOST CRITERIA BUT TWO SECTIONS (-, -) DEFICIENCIES, NO CRITICAL ERROR.
- 2.0 EXPECTATION MET ON MOST CRITERIA BUT THREE SECTIONS (-,-,-) DEFICIENCIES, NO CRITICAL ERROR.
- 0 – F EXPECTATION NOT MET IN FOUR(-,-,-,-) OR MORE SECTIONS OR ANY CRITICAL ERROR.

Check your clinical manual for any question.

**GRADING CRITERIA FOR 4<sup>TH</sup> ORAL PRESENTATION**

Criteria	Total Points	Score
(1) Medical History	5	
(2) Clinical Examination: CAL, plaque scores, BOP, suppuration, furcation recognition, gingival margin, zone of keratinized tissue	15	
(3) Radiographic Examination: Identify vertical/horizontal defects, loss of laminadura, % age of bone loss when present	10	
(4) Charting	10	
(5) Etiology	5	
(6) Referral complete with Diagnosis	25	
(7) Prognosis	5	
(8) Treatment Plan	10	
(9) Evaluation of Results: justification of schedule based on post-treatment findings, evaluate change in oral hygiene based on instructions given	5	
(10) Maintenance: CAL, plaque score, gingiva margin, zone of keratinized tissue	5	
(11) Record of Treatment Achieved	5	
<b>TOTAL SCORE</b>	<b>100</b>	

**Grading Criteria:**

94-100 = A	87-89 = B+	78-79 = C+
90-93 = A-	84-86 = B	75-77 = C
	80-83 = B-	<75 = F

**DEDUCTIONS**

1. TIMELINESS		POINTS
Approval Date: <b>After</b>	Deduct 5 points	_____
Final Report: <b>Schedule date in April</b>	Deduct 5 points	_____
<b>2. COMPLETENESS</b>		
Approval Sheet: <b>No approval sheet</b>	Deduct 5 points	_____
Charting: <b>No re-evaluation</b>	Deduct 10 points	_____
<b>No charting post-surgery</b>	Deduct 10 points	_____
Progress Notes: <b>No progress notes</b>	Deduct 5 points	_____
Radiographs: <b>No radiographs</b>	Deduct 5 points	_____
<b>3. DIAGNOSIS</b>		
Accuracy: <b>Blatant incorrect diagnosis</b>	Automatic Failure	
<b>4. PAGE LENGTH</b>	<b>If longer than 2 pages</b>	Deduct 1 point/page _____
<b>TOTAL POINTS DEDUCTED</b>		_____

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

INSTRUCTOR \_\_\_\_\_

FINAL GRADE \_\_\_\_\_

## PERIODONTAL COMPETENCY SECTION #1: TREATMENT PLANNING STAGE

SCORING CRITERIA				EVALUATION MARKS						
	Excellent	Satisfactory	Unsatisfactory/ Critical Deficiency	Student Evaluation			Faculty Evaluation			Final Grade
				E	S	N	E	S	N	
<b><u>Patient Selection</u></b>	<ul style="list-style-type: none"> <li>- Patient's medical history is updated, accurate, and complete.</li> <li>- Periodontitis patient with <u>mild-to-moderate periodontitis in all four quadrants, with active disease, and in need of active periodontal therapy</u></li> <li>- 6-8 erupted natural, permanent teeth <b>in each of the four quadrants,</b></li> <li>- At least 3 posterior teeth (premolars and molars), including one molar that is <i>in contact with a neighboring tooth in each of the four quadrants</i></li> <li>- Explorer detectable subgingival calculus present on anterior <u>AND</u> posterior teeth <b>in each of the four quadrants</b></li> </ul>	<ul style="list-style-type: none"> <li>- Patient's medical history is incomplete or has slight inaccuracies that do not jeopardize or endanger the patient.</li> <li>- Periodontitis patient with <u>mild-to-moderate periodontitis in 3 of the four quadrants, with active disease, and in need of active periodontal therapy</u></li> <li>- A <i>minimum</i> of 5 erupted natural, permanent teeth <b>in each of the four quadrants</b></li> <li>- At least 3 posterior teeth (premolars and molars), including one molar that is in contact with a neighboring tooth <b>in only 3 of the four quadrants.</b></li> <li>- Explorer detectable subgingival calculus present on anterior <u>AND</u> posterior teeth <b>in 3 of the four quadrants selected</b></li> </ul>	<ul style="list-style-type: none"> <li>- Patient's medical history is incomplete, incorrect, and/ or has inaccuracies that do jeopardize or endanger the patient.</li> <li>-Periodontitis patient with <b><u>only 2 of the four quadrants periodontally involved</u></b></li> <li>-<i>Fewer</i> than 5 erupted natural, permanent teeth <b>in each of the four quadrants</b></li> <li>- Fewer than 3 posterior teeth (premolars and molars) <b>in each of the four quadrants.</b></li> <li>- <b>No explorer detectable subgingival calculus</b> present on anterior <u>AND/OR</u> posterior teeth in each of the four quadrants.</li> </ul>							

## PERIODONTAL COMPETENCY SECTION #1: TREATMENT PLANNING STAGE

SCORING CRITERIA				EVALUATION MARKS						
	Excellent	Satisfactory	Unsatisfactory/ Critical Deficiency	Student Evaluation			Faculty Evaluation			Final Grade
				E	S	N	E	S	N	
<b><u>Periodontal Charting</u></b>	<p>- Student has <b>accurately</b> completed the periodontal charting of the patient's oral condition- the charting includes tooth mobility, furcation involvement and mucogingival condition.</p> <p>- Student demonstrates a strong understanding of the charting procedure</p>	<p>- Student has completed the periodontal charting of the patient's oral condition- the charting includes tooth mobility, furcation involvement and mucogingival condition. If applicable, oral pathologic lesions are accurately recorded and described. However, <u>there are minor errors such as recession in 1 area, not accurately recording the mobility score in less than 2 teeth, or incorrectly classifying a furcation involvement. Probing depths are accurate to <math>\pm</math> 1mm.</u></p> <p>- Student demonstrates an adequate understanding of the charting procedure</p>	<p>- Student has <b>not</b> charted the patient's oral condition. <u>Periodontal charting is incomplete and/or does not include probing depths, O'Leary plaque score, bleeding score, tooth mobility, furcation, involvement and mucogingival conditions Probing depths show generalized discrepancy of <math>\pm</math> 2mm.</u></p> <p>- Student demonstrates a poor understanding of the charting procedure</p>							

## PERIODONTAL COMPETENCY SECTION #1: TREATMENT PLANNING STAGE

SCORING CRITERIA				EVALUATION MARKS						
	Excellent	Satisfactory	Unsatisfactory/ Critical Deficiency	Student Evaluation			Faculty Evaluation			Final Grade
				E	S	N	E	S	N	
<b><u>Radiographs</u></b>	<p>- Student has taken full mouth periapical radiographs that are of diagnostic quality, mounted them in the correct order. In addition, the student has obtained additional appropriate radiographs as the case dictates.</p> <p>-Student is able to accurately and correctly interpret and recognize normal radiographic anatomy and pathology.</p> <p>- Student has a <b>strong</b> understanding of the patient's radiographic history.</p>	<p>- Student has taken full mouth periapical radiographs that are of diagnostic quality, mounted them in the correct order. In addition, the student has obtained additional appropriate radiographs as the case dictates.</p> <p>-Student is able to adequately interpret and recognize normal radiographic anatomy and pathology, however <b>minor errors</b> in the diagnosis of normal anatomy exist.</p> <p>-Student has an <b>adequate</b> understanding of the patient's radiographic history.</p>	<p>- Student has <b>NOT</b> taken full mouth periapical radiographs. Existing radiographs are <b>NOT</b> of diagnostic quality. Radiographs have been <b>IMPROPERLY MOUNTED</b>. The student has <b>NOT</b> obtained additional appropriate radiographs as the case dictates.</p> <p>- The student demonstrates <b>SIGNIFICANT DEFICIENCIES</b> in the understanding of normal versus pathologic anatomy.</p> <p>- Student has <b>NO</b> understanding of the patient's radiographic history</p>							

## PERIODONTAL COMPETENCY SECTION #1: TREATMENT PLANNING STAGE

SCORING CRITERIA				EVALUATION MARKS						
	Excellent	Satisfactory	Unsatisfactory/ Critical Deficiency	Student Evaluation			Faculty Evaluation			Final Grade
				E	S	N	E	S	N	
<b><u>Diagnosis/ Etiology/ Prognosis</u></b>	<p>- Student has made an <b>accurate</b> diagnosis of the patient's periodontal condition, correctly identified the etiology of the disease, and has determined the overall prognosis as well as the individual tooth prognosis.</p> <p>- The write up of the patient's periodontal history is clear and correlates well with the final diagnosis, prognosis, and etiologic factors.</p> <p>-Student has a <b>strong</b> understanding of the diagnostic criteria, prognostic criteria, etiology, and classification that is being used.</p>	<p>- Student has made an adequate diagnosis of the patient's periodontal condition, identified the etiology of the disease, and has determined the overall prognosis as well as the individual tooth prognosis.</p> <p>- The write up of the patient's periodontal history is clear and correlates well with the final diagnosis. However <b>minor errors</b> noted in the terminology used for the final diagnosis, prognosis, and etiologic factors.</p> <p>- Student has an <b>average</b> understanding of the diagnostic criteria, prognostic criteria, and etiology.</p>	<p>- Student has attempted to make a diagnosis, determine the prognosis, and identify the etiology of the patient's periodontal condition. However, <b>significant errors</b> are noted with the write up of the patient's periodontal condition. Errors also noted in the terminology used for the final diagnosis and prognosis. Student has <b>a less than average</b> understanding of the diagnostic criteria, prognostic criteria, and classification that is being used</p> <p>- Student has <b>NOT</b> attempted to make a diagnosis, <b>NOT</b> identified the etiology, or <b>NOT</b> determined the prognosis.</p>							

## PERIODONTAL COMPETENCY SECTION #1: TREATMENT PLANNING STAGE

SCORING CRITERIA				EVALUATION MARKS						
	Excellent	Satisfactory	Unsatisfactory/ Critical Deficiency	Student Evaluation			Faculty Evaluation			Final Grade
				E	S	N	E	S	N	
<b><u>Treatment Plan</u></b>	- Student has presented an <b>excellent</b> treatment plan write up which includes neatly trimmed maxillary and mandibular casts. The treatment plan correlates well with the patient's existing periodontal condition. It includes, but is not limited to, number of quadrants of scaling and root planing required, time interval before reevaluation will be done, possibility of periodontal surgery if required and the frequency of periodontal maintenances.	- Student has presented an <b>average</b> treatment plan write up which includes neatly trimmed maxillary and mandibular casts. The treatment plan correlates <b>adequately</b> with the patient's existing periodontal condition. It includes, but is not limited to, number of quadrants of scaling and root planing required, time interval before reevaluation will be done, possibility of periodontal surgery if required and the frequency of periodontal maintenances.	- Student has presented a <b>less than average</b> treatment plan write up. The student <b>fails to present study casts with the treatment plan</b> . The treatment plan does <b>NOT CORRELATE</b> adequately with the patient's existing periodontal condition. It includes but is not limited to; number of quadrants of scaling and root planing required, time interval before reevaluation will be done, possibility of periodontal surgery if required and the frequency of periodontal maintenances.							

**Grading:**

**E**= 10 points

**S**= 7 points

**N**= 0 points

If any single criterion is rated as **Unsatisfactory/Critical Deficiency**, **NO** points are awarded for that section and the **competency is deemed a failure**.

Student Name (**PRINT**): \_\_\_\_\_

Faculty Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Section Grade:** \_\_\_\_\_ /50 points



## PERIODONTAL COMPETENCY SECTION #2: TISSUE AND TREATMENT MANAGEMENT

1. O’Leary plaque score **MUST** be recorded prior to performing **EACH** SRP appointment.
2. Scale and root plane the designated quadrants.
3. Upon completion of instrumentation, have perio faculty evaluate.
4. This is **NOT** a time-limited competency. You may keep the procedure “**In Process**” and re-appoint the patient to check and re-instrument at second appointment. However, the second appointment must be done WITHIN 14 DAYS of the initial SRP appointment.

SCORING CRITERIA				EVALUATION MARKS						
	Excellent	Satisfactory	Unsatisfactory/ Critical Deficiency	Student Evaluation			Faculty Evaluation			Final Grade
				E	S	N	E	S	N	
<p><b><u>Scaling and Root Planing</u></b></p> <p><b><u>AND</u></b></p> <p><b><u>Tissue Management</u></b></p>	<ul style="list-style-type: none"> <li>- There is <b>NO</b> evidence of supragingival plaque or calculus</li> <li>- There is <b>NO</b> evidence of subgingival calculus</li> <li>- There is <b>NO</b> evidence of soft/hard tissue trauma</li> </ul>	<ul style="list-style-type: none"> <li>- There is still evidence of supragingival plaque or calculus <b>localized to 1-2 sites/ quadrant.</b></li> <li>- There is still evidence of subgingival calculus <b>localized to 3-4 sites/ quadrant</b></li> <li>- There is <b>slight/minor</b> soft/hard tissue trauma that neither traumatizes the patient nor irreversibly damages the instrumented tooth structure, the restoration(s), the adjacent teeth structures, and/or periodontium. Soft tissue trauma may include, but not limited to, lacerations or abrasions. Hard tissue trauma may include root surface abrasions that do not require additional definitive treatment</li> </ul>	<ul style="list-style-type: none"> <li>- Plaque control is <b>inadequate.</b> There is evidence of <b>generalized supra and subgingival plaque and/or calculus.</b> Student has neither shown competence nor understanding in treating the case.</li> <li>There is evidence of major damage to the soft and/or hard tissue that is inconsistent with the procedure and pre-existing condition and may jeopardize the prognosis of the tooth and/or periodontium. This damage may include, but may not be limited to, amputated papilla, exposure of the alveolar process, laceration or damage to the periodontium that requires suturing or periodontal packing, ultrasonic burns, broken instrument tip, damage to tooth structure (i.e. damaging adjacent teeth) etc.</li> </ul>							

## PERIODONTAL COMPETENCY SECTION #2: TISSUE AND TREATMENT MANAGEMENT

SCORING CRITERIA				EVALUATION MARKS						
	Excellent	Satisfactory	Unsatisfactory/ Critical Deficiency	Student Evaluation			Faculty Evaluation			Final Grade
				E	S	N	E	S	N	
<b><u>Patient Management</u></b>	Student is <b>prompt</b> for the appointment, and <b>has the patient seated</b> . The patient's chart is <b>completely up to date</b> and the radiographs have been mounted on the view box. The operator is <b>neat and organized</b> . The student's dress code is <b>in complete compliance with the established regulations</b> . Student maintains a respectful attitude towards both the patient and the instructor. <b><u>Additionally, the student has completely explained to the patient all the relevant information regarding the procedure(s) to be accomplished during the appointment</u></b>	Student is <b>5 minutes late or less for the appointment, but the patient has been seated</b> . The patient's chart is <b>not completely up to date</b> and the radiographs have not been mounted on the view box. The operator is <b>neat, but disorganized</b> . The student's dress code is <b>not</b> in complete compliance with the established regulations. Student maintains a respectful attitude towards both the patient and the instructor. <b><u>However, the student has not completely explained to the patient all the relevant information regarding the procedure(s) to be accomplished during the appointment</u></b>	Student is <b>&gt; 5 minutes late for the appointment. The patient has not been seated</b> . The patient's chart is <b>not up to date</b> and the radiographs have not been mounted on the view box. The operator is <b>poorly organized</b> . The student's dress code is <b>not</b> in complete compliance with the established regulations. Student maintains a <b>poor attitude towards both the patient and the instructor</b> . <b><u>Student has not explained to the patient all the relevant information regarding the procedure(s) to be accomplished during the appointment.</u></b>							

**Grading:**

**E**= 10 points

**S**= 7 points

**N**= 0 points

If any single criterion is rated as **Unsatisfactory/Critical Deficiency, NO** points are awarded for that section and the **competency is deemed a failure**.

Student's Name (PRINT) \_\_\_\_\_

Faculty's Signature \_\_\_\_\_

Date: \_\_\_\_\_

**Section Grade: \_\_\_\_/ 20 points**

## PERIODONTAL COMPETENCY SECTION #3: PERIODONTAL RE-EVALUATION

SCORING CRITERIA				EVALUATION MARKS						
	Excellent	Satisfactory	Unsatisfactory/ Critical Deficiency	Student Evaluation			Faculty Evaluation			Final Grade
				E	S	N	E	S	N	
<b><u>Periodontal Charting</u></b>	<p>- Student has <b><i>accurately completed</i></b> the periodontal charting of the patient's oral condition- the charting includes tooth mobility, furcation involvement and mucogingival condition.</p> <p>- Student demonstrates a strong understanding of the charting procedure</p>	<p>- Student has completed the periodontal charting of the patient's oral condition- the charting includes tooth mobility, furcation involvement and mucogingival condition. If applicable, oral pathologic lesions are accurately recorded and described. However, <b><i>there are minor errors such as missing the presence of recession in 1 area, not accurately recording the mobility score in less than 2 teeth, or incorrectly classifying a furcation involvement. Probing depths are accurate to ± 1mm.</i></b></p> <p>- Student demonstrates an adequate understanding of the charting procedure</p>	<p>- Student has <b><i>NOT</i></b> charted the patient's oral condition. Periodontal charting is incomplete and/or does <b><i>NOT</i></b> include probing depths, O'Leary plaque score, bleeding score, tooth mobility, furcation, involvement and mucogingival conditions. <b><i>Probing depths show generalized discrepancy of ± 2mm.</i></b></p> <p>- Student demonstrates a poor understanding of the charting procedure</p>							

1. Re-evaluation patient **MUST** be the same COMPETENCY patient.
2. Update patient's medical history
3. Complete periodontal charting, oral examination, and axiUm Periodontal Re-evaluation Form
4. Have periodontal faculty evaluate the patient and data collection
5. If required, re-instrument

## PERIODONTAL COMPETENCY SECTION #3: PERIODONTAL RE-EVALUATION

SCORING CRITERIA				EVALUATION MARKS						
	Excellent	Satisfactory	Unsatisfactory/ Critical Deficiency	Student Evaluation			Faculty Evaluation			Final Grade
				E	S	N	E	S	N	
<b><u>Treatment Plan</u></b>	- Student has presented an <b>excellent</b> treatment plan write up. The treatment plan correlates well with the patient's existing periodontal condition. It includes, but is not limited to, number of quadrants of scaling and root planing required, time interval before reevaluation will be done, possibility of periodontal surgery if required and the frequency of periodontal maintenances.	- Student has presented an <b>average</b> treatment plan write up. The treatment plan correlates <b>adequately</b> with the patient's existing periodontal condition. It includes, but is not limited to, number of quadrants of scaling and root planing required, time interval before reevaluation will be done, possibility of periodontal surgery if required and the frequency of periodontal maintenances.	- Student has presented a <b>less than average</b> treatment plan write up. The treatment plan does <b>NOT CORRELATE</b> adequately with the patient's existing periodontal condition. It includes but is not limited to; number of quadrants of scaling and root planing required, time interval before reevaluation will be done, possibility of periodontal surgery if required and the frequency of periodontal maintenances.							

## PERIODONTAL COMPETENCY SECTION #3: PERIODONTAL RE-EVALUATION

SCORING CRITERIA				EVALUATION MARKS						
	Excellent	Satisfactory	Unsatisfactory/ Critical Deficiency	Student Evaluation			Faculty Evaluation			Final Grade
				E	S	N	E	S	N	
<b><u>Patient Management</u></b>	<p>Student is <b>prompt</b> for the appointment, and <b>has the patient seated</b>. The patient's chart is <b>completely up to date</b> and the radiographs have been mounted on the view box. The operator is <b>neat and organized</b>. The student's dress code is <b>in complete compliance with the established regulations</b>. Student maintains a respectful attitude towards both the patient and the instructor. <b><u>Additionally, the student has completely explained to the patient all the relevant information regarding the procedure(s) to be accomplished during the appointment</u></b></p>	<p>Student is <b>5 minutes late or less for the appointment, but the patient has been seated</b>. The patient's chart is <b>not completely up to date</b> and the radiographs have not been mounted on the view box. The operator is <b>neat, but disorganized</b>. The student's dress code is <b>not in complete compliance with the established regulations</b>. Student maintains a respectful attitude towards both the patient and the instructor. <b><u>However, the student has not completely explained to the patient all the relevant information regarding the procedure(s) to be accomplished during the appointment</u></b></p>	<p>Student is <b>&gt; 5 minutes late for the appointment. The patient has not been seated</b>. The patient's chart is <b>not up to date</b> and the radiographs have not been mounted on the view box. The operator is <b>poorly organized</b>. The student's dress code is <b>not in complete compliance with the established regulations</b>. Student maintains a <b>poor attitude towards both the patient and the instructor</b>. <b><u>Student has not explained to the patient all the relevant information regarding the procedure(s) to be accomplished during the appointment.</u></b></p>							

**Grading:**

**E**= 10 points

**S**= 7 points

**N**= 0 points

If any single criterion is rated as **Unsatisfactory/Critical Deficiency**, ***NO*** points are awarded for that section and the ***competency is deemed a failure.***

Student Name (PRINT): \_\_\_\_\_

Faculty Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Section Grade: \_\_\_\_\_ / 30 points**

## FINAL COMPETENCY SCORING

Periodontal Competency Section 1 Grade	
Periodontal Competency Section 2 Grade	
Periodontal Competency Section 3 Grade	
Total (out of 100 points)	

***To pass***, student must achieve a minimum of 70 points.

## SUGGESTION FOR IMPLANT OSCE ASSESSMENT

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### Text Key:

Regular text: The actual proposed content to be on the OSCE test.

**Bold text: The proposed answers, critical error identification, etc.**

*Italics text: The proposed grading criteria: 4 questions @ 25pts each.*

Multiple implant case, which OBVIOUSLY needs a sinus lift and grafting procedure.

STATION X --- BRIAN SMITH, MD

Dr. Brian Smith is a recently retired physician who has moved to your town. He is a healthy 67 year old male and presents to you as a new patient with a recently taken single periapical view radiograph of the upper left and chief complaint: "I want a second opinion from you about some implants". It has been approximately 2 years since the loss of tooth 14 due to fracture and tooth #15 was lost prior to that, due to caries. His remaining dentition includes a full complement of mandibular teeth except the third molars, with no active caries noted on your initial oral examination. Dr. Smith has a history of periodontal disease. The patient hates being without these teeth when he smiles, but was too busy with the sale of his medical practice to seek this dental treatment before he moved. He definitely wants implant(s) instead of a removable prosthesis and has financial means to accomplish that desire. He is requesting an "approximate idea" of the treatment needed, fees and time needed to accomplish his goal, for comparison to what he has previously learned from another dentist.

## SUGGESTION FOR IMPLANT OSCE ASSESSMENT

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### Question 1)

Do you need to locate or collect any additional diagnostic item(s) or information to answer this patient's restorative/prosthetic questions properly? If so what would they be? Briefly explain your answer(s)

### **Acceptable answers:**

**A) Complete health history**

**B) any discussion related to a preliminary work up, which could simply be a listing of upper and lower diagnostic casts, bite registration, facebow, OR the term "diagnostic mounting" (which would be considered inclusive of the previous listed items. Width of ridge, implant location measurements at proposed sites**

**C) additional imaging, (radiographs, CT scans, etc) to evaluate disease control and/or available bone.**

**D) Periodontal chart.**

### **Critical error:**

**Stating no additional items or info needed, or only giving one of the four answers above.**

*Grading guidelines: answering only two of 4 possible answers earns a maximum of 15pts.*

*Additional loss of points is possible, if there is lack of detail or inaccuracy in the answers given)*

*Full credit (25pts) for 3 or 4(all) points covered.*



## SUGGESTION FOR IMPLANT OSCE ASSESSMENT

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### Question 2)

Regarding the patient's esthetic and occlusal function requirements, what factor(s) would you need to consider in your implant planning decisions for the upper left quadrant.

### **Acceptable answers:**

**A) Adequate inter-arch space for implant supported crowns (has opposing arch hyper-erupted?)**

**B) Need for 1 or 2 implants to achieve optimal esthetic result vs occlusal function**

### **Critical error:**

**No discussion of the number of implants required to properly restore this space.**

*Grading guidelines: 15 pts for 1 answer, 25 for both.*

## SUGGESTION FOR IMPLANT OSCE ASSESSMENT

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### Question 3)

What issue(s) do you need to consider regarding implant size and location(s) when fabricating a surgical stent for this case?

### **Acceptable answers:**

**A) Quality and quantity of bone.**

**B) Width of ridge + bucco-lingual position of available bone relative to ideal crown size and location (may be answered with references to the diagnostic wax-up)**

**C) Proper consideration w/accurate explanation of basic minimum space requirements (1mm Lingual plate, 2 mm Buccal plate, 1mm clear of Maxillary sinus, 1.5mm from adjacent tooth, 3.0 mm between implants)**

**D) WP for molars if possible**

**Critical error: NO space analysis at all**

*Grading guidelines: 25 points for an answer that involves 2 or all the above points. 18pts if only one answer is covered.*

## SUGGESTION FOR IMPLANT OSCE ASSESSMENT

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### Question 4)

You intend to refer this patient to an oral surgeon or periodontist for placement of the implant(s), are there any questions you would need answered by the surgeon in order to provide the approximate cost and time needed for the treatment of this patient's upper left quadrant?

### **Acceptable answers:**

**A) Recognition of need to ask about bone augmentation via grafting AND/OR sinus lift.**

**B) Can implants be placed at same time as any grafting?**

**C) Healing time to be expected prior to restorative phase.**

**D) Cost for all surgical procedures anticipated.**

**Critical error: no mention of need for bone augmentation**

*Grading guidelines: full credit (25pts) for 3 or 4 of these answers. Only 1 answer is 15pts, 2 answers is 20pts.*

## SUGGESTION FOR IMPLANT OSCE ASSESSMENT

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### Extra Credit

If either of these additional details are found in any of the answers on this test- earns the candidate extra credit of 10 points:

### **Acceptable answers:**

- 1) Recognition of Sinus pneumatization lacking bone height for proper implant placement and vertical bone resorption compromising crown/root ratio.**
- 2) Any reference to Sinus lift grafting protocol, Option III (5-8 mm bone) or Option IV (4mm or less bone) (Option III- can have immediate implant placement, Option IV-cannot)**

## SUGGESTION FOR IMPLANT OSCE ASSESSMENT

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### ***Proposed Overall grading criteria:***

**4 questions, 25pts each.**

**Need 70% or 75% to pass. (need to decide this) Can we really fail someone with 70%??**

**Critical error is 0 points for that question, so you can still pass if you only have 1, but must then get your 70 points via remaining questions.**

**2 or more critical errors is always a Fail**

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As you can see I took a shot at some grading criteria. For purposes of our discussion about that grading criteria- please note that less than complete answers, still allow the candidate to earn 15,18 or 20pts instead of 25. 4 minimal answers gets you 60 or 65 of the 70 you need. If you know the bonus stuff you could get 10 more for that in one of your answers. So you could theoretically pass with only 1 answer per question, IF you included the extra credit bonus material. More likely that students will get full credit on 1-2 answers and partial credit on rest.