

University of Alabama at Birmingham
School of Dentistry
Department of Periodontology

JUNIOR PERIODONTOLOGY COURSE

2003-2004

OBJECTIVES

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UNIVERSITY OF ALABAMA AT BIRMINGHAM
SCHOOL OF DENTISTRY
DEPARTMENT OF PERIODONTOLOGY

JUNIORS

Goals of the Undergraduate Curriculum in Periodontology

Periodontics is one of the cornerstones of the practice of dentistry. This is as true in the generalist's office as for the periodontist. The overall goal of the undergraduate education in the Department of Periodontology is to develop a knowledge of the pathogenesis of periodontal diseases, the biologic rationale for periodontal therapy, and the necessary clinical skills to evaluate, diagnose, and treat the most prevalent periodontal diseases within the concept of comprehensive dental care. Of primary importance in this effort is the prevention of disease and the achievement and maintenance of periodontal health.

The student is encouraged to seek guidance at any time from the faculty. We sincerely want your clinic periods to be a learning experience, and feel that this can only be accomplished through student-teacher dialogue and instruction.

Junior Periodontology Clinic — Specific Objectives

The objectives for the Junior Periodontology Clinic are for each student to be able to:

1. Perform a periodontal examination and evaluation.
2. Diagnose all forms of gingivitis and periodontitis.
3. Identify primary and contributing etiological factors in patients with gingivitis and periodontitis.
4. Establish a prognosis for patients with gingivitis and periodontitis.
5. Develop a plan for periodontal therapy for patients with gingivitis and adult periodontitis.
6. Prevent gingivitis.
7. Diagnose and treat acute periodontal lesions.
8. Treat patients with mild and moderate chronic periodontitis.
9. Evaluate the results of periodontal therapy.
10. Maintain periodontal health of treated patients.

JUNIOR CLINICAL REQUIREMENTS

- (1) Manage at least three (3) patients with chronic periodontitis continually throughout the academic year. For every patient you need to complete a periodontal treatment summary form and have the faculty grade phases of treatment.
- (2) Perform 20 quadrants of Scaling and Root Planing during the junior academic year in the Periodontal Clinic and receive a satisfactory clinical grade.
NO CREDIT WILL BE RECEIVED FOR A QUADRANT OF ROOT PLANING UNTIL THE PHASE I EVALUATION OF THE CASE IS COMPLETED. Do not wait until the end of the year to complete your root planing quadrants.
- (3) Perform 20 visits of oral hygiene instructions.
- (4) Demonstrate competency in basic periodontal skills.

To meet this requirement the student must earn a satisfactory grade on the skills competency tests administered in these areas. These are: 1) Periodontal examination and diagnosis; 2) Scaling and root planing; 3) Health Promotion and Disease Prevention.

- (5) Perform three (3) Phase I Evaluation Visits.

The student should perform Phase I evaluations on all patients undergoing periodontal treatment. At a minimum, the junior student should perform three (3) Phase I evaluations.

- (6) Assist three (3) periodontal flap procedures.

To meet this requirement the junior student must assist periodontal residents' surgical procedures in the Periodontal Surgery Clinic or the VA hospital periodontology clinic. The grading form for surgical treatment must be used for the grading.

- (7) Obtain one (1) periodontal surgical procedure experience by performing or participating in one periodontal surgery in the Periodontal Clinic.

To meet this requirement the student should plan a periodontal surgery for a patient with whom the student has completed Phase I therapy. The periodontal surgery plan and sequence should be presented to the clinical instructor who will be covering the surgical procedure prior to the clinic session in which the student plans to perform surgery.

If the student elects to participate with a resident's surgery, the student should discuss the procedure with the resident prior to the surgery, and submit a minimum two-page typewritten paper within one week of the procedure to a full time faculty member. The paper will be graded on a pass/fail basis. The paper should include the pertinent findings in the medical and dental examinations, the rationale for the procedure, post-operative management, the alternative treatment options, and the future treatment recommendations. To participate on another student's surgery does NOT count as surgical credit.

- (8) Manage and deliver the periodontal maintenance therapy (Recall) for all periodontally treated and completed patients.

To meet this requirement the junior student must provide and deliver periodontal maintenance according to specific time intervals determined by the clinical instructor. Completed recall visits will count as one quadrant of root planing (up to 8.)

- (9) Provide the periodontal therapy needed in a timely manner throughout the academic year.

- (10) Diagnose and treat acute periodontal problems (Emergency).

To meet these criteria the junior student should be present for all periodontal emergency rotations and treat patients as instructed by the resident on call.

JUNIOR CLINICAL MINIMUM REQUIREMENTS

SUMMARY

• Periodontal Treatment Cases	(3)
• Oral Hygiene Instructions	(20)
• Scaling and Root Planing Quadrants or Recalls (up to 8)	(20)
• Competency Tests	
– Periodontal examination and diagnosis	(1)
– Scaling and root planing	(1)
– Health promotion and disease prevention	(1)
• Phase I Evaluations	(3)
• Surgical Assists	(3)
• Surgical Procedure	(1)
• Perio Emergency Clinic	all scheduled
• VA surgical rotation	all scheduled
• Patient Management	all patients treated

MINIMAL EXPECTATIONS FOR EACH QUARTER

By the end of fall quarter:

- Complete two periodontal treatment-planning cases.
- Assist one periodontal surgery.
- Finish four quadrants of root planing.

By the end of winter quarter:

- Continue the treatment of periodontal patients.
- Assist two periodontal surgeries.
- Finish eight quadrants root planing.
- Complete periodontal examination and diagnosis competency test.

By the end of spring quarter:

- Complete all requirements and competency examinations.

SUGGESTED TIME GUIDELINES FOR PERIODONTAL PROCEDURES

In order to optimize patient management, the students' Instructor must set a return date for each patient before the patient leaves the Periodontal Clinic. These return dates will be entered in the Periodontal Clinic Data file and failure to see the patient within this time interval will result in a lower clinic grade, or when part of a pattern of mismanagement, the student may fail the clinical course.

The following time guidelines are suggested to assess reasonable patient management in the Junior Periodontics Clinic:

Scaling and Root planing	• within 8 weeks after periodontal evaluation.
Phase I Evaluation	• within 6 weeks after completion of phase I.
Additional Reevaluation	• within 4 weeks after last phase I evaluation.
Surgical Phase	• within 8 weeks after last phase I evaluation and treatment plan.
Maintenance Phase	• within 3 months after completion of active perio therapy and/or the last perio visit.

COMPLETION OF THE JUNIOR PERIODONTOLOGY CLINICAL & DIDACTIC COURSE

Successful completion of the Periodontology Clinic Course will be based upon:

Passing competency tests and daily clinical grades.

Satisfactory patient management throughout the academic year.

Notes:

- Failure to achieve these clinical requirements result in failure of the junior clinical academic year in Periodontology.
- Remediation will be individualized to student needs. The Faculty may elect to have the student undergo any or all of the following:
 - Retake an examination;
 - Undergo one on one tutorial;
 - Write a paper on the subject;
 - Perform additional clinical procedures.
- A student may be required to remediate at any time during the year if, in the opinion of the Faculty, performance in didactic, clinical, or patient management in the phases of the curriculum are unsatisfactory. If a student fails the clinical course in Periodontics, deficiencies must be remedied in August before the senior year. In this case, the new grade will be entered on the student record, but the "F" grade remains.

CLINICAL ACTIVITIES AND PATIENT CARE

NEW PATIENTS

1. Each new patient must be a registered UAB patient.
2. Each patient should be examined in Treatment Planning Clinic. In Treatment Planning Clinic you will examine the patient, develop a diagnosis, list of findings, and determine the prognosis and etiology of the patient's diseases. The treatment plan should be comprehensive and should take into consideration the patient's periodontal, restorative and other needs. Be sure you have a signature indicating approval of your treatment plan.
3. Complex cases may require a Phase I treatment plan for elimination of hopeless teeth and control of etiologic factors before a final treatment plan is completed
4. Shifting of patients from one student to another is not permitted. Any exception to this rule will have to be discussed with the coursemasters. Approval must be documented in the chart. Patient history must be reviewed before beginning treatment.

RECALL PATIENTS

The junior students are responsible for recalling their own patients for the entire period as a dental student according to the treatment needs of the patient. Prior to graduation arrangements for recalls should be made for each patient.

CLINICAL REPORTS

Every quarter you will receive a report including patients assigned, procedures completed, and date for the patient to be rescheduled in Perio Clinic. This clinical report will help the students to organize their patient management requirements.

USE OF CLINICAL TIME

The students should perform patient care in the Periodontics Clinic 80% of the scheduled clinic sessions as explained in the course objectives and requirements sections of this course outline. Broken appointments should be used to assist with surgery, chart and assist other students, or see emergency patients.

NOTE: The last day of clinic as published by the UAB Schedule will be strictly enforced.

RECEIVING CREDIT FOR PROCEDURES PERFORMED

Each student must have a starting check before beginning patient care. You should be prepared to provide the instructor with: (1) a brief medical history; (2) diagnoses; (3) succinct treatment plan and treatment performed to date; and (4) procedures to be performed that session. In order to receive proper credit for the periodontal procedures performed in Periodontics, the student should obtain a proper Periodontic Clinic Care Slip. This form should have the student name and number and patient name and number. Also, the procedure to be performed with the proper code should be recorded. It is the *responsibility* of each student to be sure the instructor has signed *before* and *after* completion of the procedure and given you a proper grade. *Failure to obtain* a faculty signature and final grade may cause errors in your patient care report. Also, *each* procedure must be *correctly charged* in order to receive credit.

Credit for your clinical requirements will only be given to students with slip forms correctly signed by perio instructors and receiving a passing grade.

PERIO CLINIC HOURS AND PROCEDURES

The Periodontics Clinic is open to students according to the UAB Academic schedule from 9-12 a.m. and from 1-5 p.m. from Monday to Friday.

EMERGENCY TREATMENT

Each junior student will be assigned to periodontal emergency treatment according to a schedule. When you are assigned to emergencies, you will treat patients under the supervision of a Periodontal Resident. You can appoint your own patients during your assigned periodontal emergency rotation for non-surgical treatment. However be aware that the treatment of this patient could be interrupted to evaluate and treat an emergency patient. Attendance is required for these sessions and you should report to the scheduled emergency resident at the start of the clinic session. At completion of the emergency session a grading form should be completed and signed by the emergency resident.

SURGICAL ASSIST ROTATION

Each junior student will be assigned to a surgical assist rotation in the VA hospital. On clinic sessions when you are assigned to this rotation do not appoint any patients and report to the Periodontal clinic in the VA Hospital. **Directions** to the VAMC Dental Service, Periodontic Section: From the University Boulevard entrance – turn left immediately past the doors; turn right at the end of the lobby. The 2nd door on the left is the handicap access; a sign shows Dental Clinic. Go through the double doors at the end of the corridor. The periodontic section is the clinic area on your right. Report to the periodontal faculty or resident in the area. Attendance for this rotation is **mandatory**.

GRADING IN PERIODONTOLOGY

Every Clinic session you will receive two grades: A daily clinical grade and a daily patient management grade. A sample grading form is enclosed.

Every quarter a case management grade will be given.

DAILY CLINICAL GRADING

1. You will receive a grade for each clinic session. Please make sure that the instructor writes the grade on the grading sheet. Always be sure that you know your grade and feel free to discuss the reasons for the grade with the instructor.
2. The instructor will take into consideration your technical ability, clinical skills and preparation for the procedure.
3. For clinical procedures the following general guidelines will apply:
 - 0 – Failure - Fails to meet the minimum standards for clinical performance, poor patient management of infection control. This is in the judgment of the instructor.
 - 1 – Meets the minimum acceptable standards.
 - 2 – Meets the expected standards
 - 3 – Exceeds the expected standards
 - 4 – Well exceeds the expected standards

DAILY PATIENT MANAGEMENT GRADE

Students will receive a patient management grade for each clinic session using. The faculty will assess using the following for daily patient manage grade:

- (1) Organization and preparation for clinical procedures.
- (2) Consideration of individual patient needs and adjusting treatment plans to meet these needs.
- (3) Use of broken appointment time. These sessions should be used to chart for other students, assist at surgery, or see emergency patients. You must have a careslip signed, indicating patient care has been performed.
- (4) Knowledge: Demonstrate an understanding of your work and at all times strive to obtain increased knowledge of concepts and methods.
- (5) Records Management: Dental records must be accurate, neat and legible and adhere to both the School and Department policies regarding patient records, particularly as relative to storage, security and confidentiality.
- (6) Asepsis and Infection Control: Adhere strictly to the policies and procedures set forth in our School's Infection and Hazard Control Manual.

FINAL GRADE IN CLINICAL PERIODONTOLOGY I

Daily clinical procedure grade (30%)

Daily patient management grade (30%)

Case management grade (40%)

Department of Periodontology Grading Form

Student _____

Patient _____

Date _____

Instructions:

1. It is the student's responsibility to fill out this form; no credit will be given for the session if this form is not completed.
2. Student should report to the floor instructor before any clinical activity starts and gets proper starting check signature.
3. Student should fill the expected date for the patient's next visit in the Periodontology clinic, give a reason if there is no need for the patient to come back (e.g. patient will be treated in 2nd floor clinic).

Starting check / Infection control _____

Instructor's initials

Procedure code	Description	Teeth	Comment

Patient to return by _____
date

Clinical grade _____ **Patient Management grade** _____

- 0:** Fails to meet the minimum standards
- 1:** Meets the minimal acceptable standards
- 2:** Meets the expected standards
- 3:** Exceeds expected standards
- 4:** Well exceeds expected standards

Instructor's signature _____
Instructor #: _____

*Please return completed form to **floor instructor** by the end of clinic session.*

Surgical Experience Evaluation form

Student name: _____ Patients name: _____

Date of procedure: _____

Type of procedure: _____

Surgical assist: _____ or Surgery performed _____
Name of Resident: _____

Pre-surgical planing

Student discussed case prior to surgical treatment	0	1	2	3	4
Student demonstrated understanding of the planned procedure	0	1	2	3	4
Pre-surgical planning adequate	0	1	2	3	4

Surgical procedure

Student participated in the pre-surgical prep of the patient	0	1	2	3	4
Student was familiar with the surgical procedure	0	1	2	3	4
Student utilized good sterile surgical technique	0	1	2	3	4
Student showed general interest in the procedure	0	1	2	3	4
Student actively managed the patient during the surgery	0	1	2	3	4

Post-operative care

Student participated in the post-operative instructions	0	1	2	3	4
Student scheduled to participate in the post-op care	0	1	2	3	4

Clinical grade _____ **Patient Management grade** _____

- 0:** Fails to meet the minimum standards
- 1:** Meets the minimal acceptable standards
- 2:** Meets the expected standards
- 3:** Exceeds expected standards
- 4:** Well exceeds expected standards

Instructor's signature _____ **Instructor number:** _____

CASE MANAGEMENT GRADING SHEET

Student: _____ Date: _____
Instructor: _____

- I. **DIAGNOSTIC SKILL** 0 1 2 3 4
1. Completeness of records and diagnostic materials.
 2. Thoroughness and accuracy of examination and ability to extract information.
 3. Understanding of theories and principles.
 4. Ability to make reasonable conclusions and decisions on his own.
 5. Understanding of related information (medical, other dental, social).
 6. Ability to arrive at, and defend, an alternative procedure.
 7. Ability to determine if and when an objective is achieved and when next procedure should be started.
- II. **TECHNICAL SKILL** 0 1 2 3 4
1. Proper handling of tissue.
 2. Sufficient skill to carry out procedure being attempted.
 3. Maintenance of sterile technique when appropriate.
 4. Effective use of proper instruments.
 5. Completion of procedure in reasonable amount of time.
 6. Proper postoperative instructions and care.
 7. Quality of final product.
- III. **RELATIONSHIP WITH PATIENT** 0 1 2 3 4
1. Personal interest in patient's well-being.
 2. Ability to communicate with patient and elicit his confidence and cooperation.
 3. Observant of patient's reactions and ability to make him comfortable and at ease.
 4. Ability to communicate treatment objectives, what is involved, and patient progress.
 5. Does not leave patient unattended for extended periods of time.
- IV. **PROFESSIONAL BEHAVIOR** 0 1 2 3 4
1. Prior proper planning of all procedures.
 2. Proper personal grooming and clinic al attire.
 3. Solicits consultation and advice when necessary and respects views of others.
 4. Ability to work harmoniously as member of a team, being a leader when appropriate.
 5. Ability to function independently in a clinical situation without constant supervision.
 6. Accepts suggestions and criticism gracefully.
 7. Reliability in fulfilling assignments
 8. Familiarity and compliance with rules and regulations of department, school
 9. Concentration on task at hand with minimum of outside conversation.
 10. Proper care of utilities in general area in which he is working.
- V. **ATTENDANCE AND RECORDS** 0 1 2 3 4
1. Sees patients regularly.
 2. Keeps records up to date and in proper location.
 3. Punctuality in keeping appointments.
 4. Puts names of patients on surgery appointment book.
 5. Has instructor's supervision and signature.
 6. Gives patient next appointment prior to dismissal and issues appointment card.

COMPETENCY EXAMINATIONS
JUNIOR YEAR

1. All students must pass a competency test in Examination and Diagnosis in order to pass the second quarter of the Junior year. This competency examination will consist of an examination of a new patient, and arriving at a diagnosis within a single clinic session. Please inform the instructors that you wish a Starting Check on a COMPETENCY EXAMINATION and get instructor's approval of your case prior to the examination. The instructors will grade you on a Pass/Fail basis. A sample grading sheet is enclosed. A single unsatisfactory grade of 1 or multiple unsatisfactory grades of 2 will define a failure. In the event you fail an examination, it may be repeated with a different patient at a different clinic session. The patient must have a minimum of 12 teeth, with at least two molars, evidence of bone loss, probing depths greater than 3mm. You must plan to complete the examination in either the Periodontics or Treatment Planing Clinic. You must pass this examination before the end of winter quarter. Failure to complete this examination in a timely manner will result in a failure in Periodontics.

2. ALL students must pass a competency examination in Scaling and Root Planing in order to pass Periodontics in the Junior Year. Prior to attempting the COMPETENCY EXAMINATION you will be expected to have completed **eight** quadrants of scaling and root planing. The competency examination will consist of scaling and root planing a quadrant in a patient with evidence of radiographic supra- and/or subgingival calculus. Please inform the instructor that you wish a starting check on a COMPETENCY EXAMINATION. The instructor will evaluate your patient and determine if the case is an appropriate case for this examination. The instructors will grade you on a Pass/Fail basis. A single unsatisfactory grade of 1 or multiple unsatisfactory grades of 2 will define a failure. A sample-grading sheet is enclosed. In the event you fail an examination, you will have to perform 2 quadrants of root planing satisfactorily prior to re challenging the competency examination. The competency examinations may only be administered by full and part time faculty of the periodontology department. Resident coverage requires prior faculty approval.

3. ALL students must pass a competency examination Health Promotion and Disease Prevention. This competency examination can be scheduled on a patient that presents for scaling and root planing, phase I evaluation, or maintenance care in the periodontology clinic. Please inform the instructor that you wish a starting check on a COMPETENCY EXAMINATION. The instructors will grade you on a Pass/Fail basis. A sample-grading sheet is enclosed.

The Department strongly recommends that you take the Competency examination as soon as you have met the minimum requirements and feel you are ready to do so. This will allow you to retake an examination within the quarter, if necessary, so that we do not have to turn in a failing grade to the Administration.

EXAMINATION & DIAGNOSIS COMPETENCY EXAMINATION

Student Name: _____

Date: _____

Patient Name: _____

Pass/fail

Faculty Signature: _____

MEDICAL HISTORY

Unsatisfactory

1. Failure to give appropriate consideration to medical problems which affect the delivery of dental care.
2. Inadequate knowledge of patients systemic problems, medications, etc., which did not affect the delivery of dental care.

Satisfactory

3. Adequate assessment of the patients medical conditions and its implications for dental management

RADIOGRAPHIC ANALYSIS

Unsatisfactory

1. Major errors in radiographic analysis: e.g. failure to observe obvious pathology or interpretation of normal anatomy as pathology.
2. Incomplete radiographic analysis of minor consequence (no effect on therapy).

Satisfactory

3. Accurate assessment of the radiographic surveys

OCCLUSAL ANALYSIS

Unsatisfactory

1. Major inadequacies in occlusal examination (e.g. obvious fremitis, RC-IC discrepancy).
2. Minor inadequacies in occlusal examination.

Satisfactory

3. Adequate assessment of the occlusion

PERIODONTAL PROBINGS

Unsatisfactory

1. Inaccurate by a) 3 mm or more at two or more sites, or b) greater than 1 mm at more than one-half of the sites.
2. Inaccurate by less than 2 mm at less than one-half the areas probed.

Satisfactory

3. Accurate periodontal probing measurements

FREE GINGIVAL MARGIN & MUCOGINGIVAL JUNCTION

Unsatisfactory

1. Failure to indicate location of free-gingival margin and/or mucogingival junction or inaccurate location by greater than 2 mm.
1. Failure to recognize mucogingival problems.
2. Inaccurate location of free-gingival margin or mucogingival junction by 1-2 mm.

Satisfactory

3. Location of the mucogingival junction within 1 mm

FURCATION INVOLVEMENT

Unsatisfactory

1. Failure to detect Class 2 or 3 furcation.
2. Failure to detect Class 1 furcations.

Satisfactory

3. Adequate assessment of the furcation involvement

GINGIVAL INFLAMMATION

Unsatisfactory

1. Failure to detect gingival inflammation.
2. Failure to properly classify gingival inflammation.

Satisfactory

3. Adequate assessment of the gingival inflammation present

PLAQUE ASSESSMENT

Unsatisfactory

1. Failure to detect plaque on greater than 25% of surfaces.
2. Failure to detect plaque on greater than 10% of surfaces.

Satisfactory

3. Adequate assessment of the patients plaque control

MOBILITY

Unsatisfactory

1. Failure to detect Class 2 or 3 mobility on 2 or more teeth or failure to detect mobility on 3 or more teeth.
2. Under or over-assessment of mobility on 2 or more teeth.

Satisfactory

3. Correct assessment of the mobility of all teeth

OTHER DIAGNOSTIC MEASURES

Unsatisfactory

1. Failure to conduct pulpal sensitivity tests where clearly indicated
1. Failure to detect lesions involving oral soft and hard tissues (caries, fistulous tract, etc.)

Satisfactory

3. Satisfactory

DIAGNOSES

Unsatisfactory

1. Incorrect or omitted diagnosis (e.g. gingivitis vs. periodontitis).
2. Non-specific diagnosis (e.g. periodontal disease).

Satisfactory

3. Correct diagnosis of the periodontal diseases

PROBLEM LIST

Unsatisfactory

1. Failure in recognition of significant problems.
1. Failure to individualize problem list to patient's needs.
2. Failure in distinguishing problems from findings.

Satisfactory

3. Correct problem list formulated

TREATMENT PLAN

Unsatisfactory

1. Inability to formulate an adequate treatment plan.
2. Treatment plan formulated with minor inaccuracies.

Satisfactory : Correct treatment plan formulated

ROOT PLANING COMPETENCY EXAMINATION

Student Name: _____

Date: _____

Patient Name: _____

Pass/fail
Faculty Signature: _____

INSTRUMENT USAGE

Unsatisfactory:

1. Inability to recognize dull or excessively worn instruments.
1. Inability to demonstrate proper instrument sharpening.
1. Inability to demonstrate proper use of instruments (e.g. wrong edge).

Satisfactory:

3. Proper Instrument usage.

CALCULUS REMOVAL

Unsatisfactory:

1. Significant quantities of calculus remaining on two or more tooth surfaces.
2. Most calculus removed but root roughness remaining in a few areas.
2. Slight amount of calculus remaining in areas of difficult access.

Satisfactory:

3. No remaining calculus can be found.

TISSUE TRAUMA

Unsatisfactory:

1. Excessive tissue injury indicative of careless instrumentation.
2. Minor tissue trauma.

Satisfactory:

3. No tissue trauma noticed.

PATIENT MANAGEMENT

Unsatisfactory:

1. Inadequate pain control.
2. Inadequate cleanliness in performance of scaling and root planing.

Satisfactory:

3. The patient is well managed.

COMMENTS:

Preceptor Signature: _____

Date: _____

**Health Promotion and Disease Prevention
Competency Examination
UAB School of Dentistry**

Date: _____

Patient _____

Student _____

Introduction: This competency examines the dental student's ability to assess individual treatment needs concerning control of oral diseases and conditions. Additionally, the student is expected to counsel the patient with respect to self-care and then should demonstrate competency in providing preventive procedures such as fluoride application and prophylaxis.

Case Selection: Competency must be demonstrated on an adult patient who should be appointed in the Periodontics Clinic.

Faculty: A faculty member in Periodontology must approve and administer the competency. Resident coverage requires prior faculty approval.

Grading Criteria: Each step in the competency will be graded on a pass/fail basis. All steps must receive a satisfactory grade in order to pass the competency exam.

Remediation of Failure: If the competency exam is failed a new patient must be identified and the exam repeated.

Guidelines: A treatment planned patient should be selected and the chart reviewed with a faculty member in Periodontology for approval. The patient can be appointed to complete the competency exam at the same time that other procedures can be accomplished in that clinic; i.e. a root planing appointment in Periodontics Clinic. Obtain the competency grading form from the course objectives and proceed with clinical procedures after the starting check. When the steps in the competency exam are completed contact the instructor to grade the procedures.

Criteria Examined:

1. Identification of Etiologic Factors for Existing Conditions.

- _____ Failure to identify major etiologic factors
- _____ Etiologic factors not properly related to conditions
- _____ Satisfactory

2. Formulation of Treatment Plan for Control of Etiologic Factors

- Failure to account for all etiologic factors in treatment plan
- Failure to properly sequence treatment plan
- Satisfactory

3. Preventive Techniques Demonstrated to Patient

- Failure to properly communicate rationale and instructions to patient
- Failure to demonstrate techniques properly
- Failure to obtain feedback from patient
- Satisfactory

4. Fluoride Application

- Improper isolation of teeth
- Use of incorrect formulation of fluoride
- Improper fluoride application technique
- Satisfactory

5. Prophylaxis

- Improper equipment set-up
- Failure to remove majority of stains
- Damage to soft tissue evident
- Satisfactory

PASS FAIL
(circle)

Instructor

Date