

# Oral Diagnosis and Treatment Planning (Adult) Skills Assessment

PCC 139A/B

<b>Course #, Course Name</b>		<b>Examiner Name</b>		<b>Exam 1 Date</b>	<b>Exam 2 Date</b>
PCC 139A/B: Comprehensive Adult General Dentistry I					
<b>Student Name</b>	<b>Student ID</b>	<b>Examiner Signature</b>		<b>Start Time</b>	<b>Start Time</b>
<b>Patient EHR # (if applicable)</b>		<b>Final Score</b>	<b>Factors 1-8</b>	<b>Factors A-E</b>	<b>End Time</b>
		<b>Total:</b>			
<b>Exam Name</b>		Passing Score:	≥63	≥18	<b>This is an individual, high stakes exam.</b>
Oral Diagnosis and Treatment Planning (Adult) SA		Total Possible:	90	25	

Examiner name, exam date/start time, student name/ID, patient EHR# above must be completed before the exam can begin.

<b>CODA Competency</b>	<b>SOD Competency</b>
2-10, Critical Thinking and Problem-Solving; 2-15, Biomedical Science and Patient Care; 2-16, Behavioral Science and Patient Care; 2-17, Treating Diverse Patients; 2-20, Communication w/other Healthcare Prof; 2-22, Scientific and Lay Literature; 2-24a, Patient Assess, Tx Planning & Prognosis; 2-24b, Screening for Head and Neck Cancer; 2-24c, Referral; 2-24d, Health Promotion & Disease Prevention; 2-24k, Oral Mucosal & Osseous Disorders	2- Applies course-based knowledge, 3-Critical thinking, 4- Assesses oral health, diagnoses oral diseases, creates comprehensive treatment plans emphasizing prevention, and makes appropriate referrals, 10- Communicates respectfully
<b>Learning Objectives</b>	
<input type="checkbox"/> Obtain chief complaint, history of present illness, medical, dental, and social history for patients seeking general dental care. <input type="checkbox"/> Assess the medical and psychosocial status of a patient, asking appropriate follow-up questions, in order to determine if any modifications are necessary to dental care or preventive oral home care, including a referral to a more advanced provider.	<input type="checkbox"/> Determine need for, order, and interpret radiographs and apply radiologic interventions safely and effectively. <input type="checkbox"/> Record and interpret patient assessment and diagnostic data to formulate differential diagnoses.
<b>Exam Instructions</b>	
<input type="checkbox"/> You must have passed the calibration quiz associated with this assessment BEFORE you start this assessment. <input type="checkbox"/> Patient has not been a patient of record at the SOD for 3 or more years <input type="checkbox"/> Treatment plan has substantially considered at least 3 of the following 5 disciplines: <input type="checkbox"/> Periodontics (at least 2 molars with 5mm PDs) <input type="checkbox"/> Endodontics <input type="checkbox"/> Operative/Crown <input type="checkbox"/> Fixed (Bridge/Implant) or Removable Prosthodontics <input type="checkbox"/> Oral Surgery <input type="checkbox"/> Patient who needs referral to AEGD or a (resident/faculty) prosthodontist is not acceptable <input type="checkbox"/> Exam occurs over multiple sessions, with total session time to not exceed 8 hours. Assessment of Factors 2, 3, 6, or 7 must occur by 11:00am (if patient presents for morning session), or 4:30pm (patient presents for either afternoon session). No extended time given if patient arrives late. <input type="checkbox"/> Examiner must be the same for session #1 and session #2.	<input type="checkbox"/> Mounted casts and intraoral photographs of the patient MUST be taken and uploaded into EHR as appropriate. Patient must have permission for photographs on file. <input type="checkbox"/> Multiple treatment plans should be developed as appropriate, but each plan will be evaluated as if they are the only treatment plan developed. <input type="checkbox"/> If a factor cannot be properly assessed because an assessment opportunity was missed, it is a critical error. Furthermore, if the factor cannot be properly assessed because the integrity of the assessment comes into question, then the assessment may be disqualified. <input type="checkbox"/> If factors 2 and 3 combined score is less than 13, this is a critical error. <input type="checkbox"/> If factors 6 and 7 combined score is less than 13, this is a critical error. <input type="checkbox"/> This exam has two (2) parts: Factors 1-8 and Factors A-E. You must pass each part to pass this exam.
<b>Outcome if Fail</b>	
The exam is a 'No Pass' if the score is < 70%, or if there are any critical errors, or if the exam is not completed within the allotted time. The student is encouraged to seek guidance from the faculty examiner and/or course director for re-learning, and then must attempt the exam again, when deemed ready, on another patient as advised by the faculty examiner and their group practice leader.	

FACTOR 1: CHIEF COMPLAINT, MEDICAL, SOCIAL, AND DENTAL ISSUES THAT IMPACT DENTAL CARE, and TREATMENT MODIFICATIONS BASED ON MEDICAL CONDITIONS			
15 – Optimal	10	5	0 – Critical errors
<ul style="list-style-type: none"> <li>Identifies patient with age and preferred gender.</li> <li>Accurately identifies all of the patient’s chief complaint(s) and concerns in patient’s own words</li> <li>Identifies HPI (Onset, Provocation/Palliation/Progression, Quality, Radiation, Severity, Timing (Frequency &amp; Duration)</li> <li>Provides realistic differential diagnoses based on HPI.</li> <li>Accurately describes patient’s treatment goals and priorities.</li> <li>Vitals presented and explanation given if values are acceptable for the patient’s demographic.</li> <li>Medical history includes relevant conditions and their severity where appropriate.</li> <li>Relevant surgeries (removal of organs, replacement of organs/joints, cardiac surgeries) and hospitalizations provided.</li> <li>Medication list provided with understanding of each medication’s use and impact on dental care.</li> <li>Drug allergies and reaction provided</li> <li>Social history includes occupation, health-related behaviors, and cultural beliefs of relevance</li> <li>Explanation of dental implications of medical, dental, and social histories on impact of care.</li> <li>Identifies all parameters in dental history:               <ul style="list-style-type: none"> <li>Regularity of care</li> <li>History of dental treatment</li> <li>Problems with dental care in the past (including difficulty with local anesthesia and bad experiences with previous dentists)</li> <li>Problems with occlusion</li> </ul> </li> </ul> <p>Identifies all treatment modifications</p> <ul style="list-style-type: none"> <li>Identifies if it is safe to proceed with the COE/POE</li> <li>Identifies if there is an increased risk of bleeding or infection</li> <li>Identifies if there is a need for prophylactic antibiotics</li> <li>Identifies if there are contraindications to invasive procedures</li> <li>Identifies if there is a need for medical or behavioral consultation before continuing with exam</li> <li>Identifies modifications to treatment based on dental history</li> </ul>	<p>Has slight deviation(s) from optimal that may include, but is not limited to:</p> <ul style="list-style-type: none"> <li>Accurate, but incomplete recording of CC or HPI</li> <li>Must be prompted one (1) to two (2) times to <b>provide</b> pertinent information from the patient</li> <li>Accurate, but incomplete recording of MedHx, SocHx, and/or DentHx</li> <li>Must be prompted one (1) to two (2) times to <b>provide</b> pertinent information from the patient</li> <li>Must be prompted one (1) to two (2) times to <b>provide</b> pertinent information from the patient to confirm need of treatment modifications</li> </ul>	<p>Has moderate or major deviation(s) from optimal that may include, but is not limited to:</p> <ul style="list-style-type: none"> <li>Inaccurate or grossly incomplete recording of CC or HPI</li> <li>Must be prompted three (3) or more times to <b>provide</b> pertinent information from the patient</li> <li>Must be prompted to <b>gather</b> additional information from the patient</li> <li>Inaccurate or grossly incomplete recording of MedHx, SocHx, and/or DentHx</li> <li>Must be prompted four (4) or more times to <b>provide</b> pertinent information from the patient</li> <li>Must be prompted to <b>gather</b> additional information from the patient</li> <li>Must be prompted to <b>gather</b> additional information from the patient to determine need of treatment modifications</li> </ul>	<ul style="list-style-type: none"> <li>Chief complaint or HPI not identified</li> <li>Differential diagnoses are grossly inaccurate based on patient’s reported symptoms</li> <li>Does not identify patient’s treatment goals and priorities</li> <li>Misses medical or medication items that would cause potential harm.</li> <li>Neglects to address medical, social, and/or dental history.</li> <li>Misses treatment modifications that would cause potential harm. Examples include, but are not limited to:               <ul style="list-style-type: none"> <li>chemotherapy</li> <li>malignant hypertension</li> <li>head and neck radiation therapy</li> <li>need for prophylactic antibiotics.</li> </ul> </li> </ul> <p><b>Any critical error will result in automatic failure of the exam.</b></p>
Score Awarded:	Comments: <i>points taken off for reasons not specified above must be written down</i>		

**STUDENT MUST PRESENT THIS FACTORS TO EXAMINER AND OBTAIN PERMISSION TO PROCEED WITH EXAM**

FACTOR 2: NON-RADIOGRAPHIC DIAGNOSTIC TESTING, CONSULTS, AND SIGNIFICANT CLINICAL FINDINGS			
15 – Optimal	10	5	0 – Critical errors
<p>Prescribes all clinically necessary non-radiographic diagnostic tests, identifies all clinical findings, and appropriately consults with specialists with solid rationale and independence.</p> <p><u>Extraoral Exam:</u> TMJ abnormalities; gross facial asymmetries; soft tissue abnormalities; submental, submandibular, cervical lymphadenopathy</p> <p><u>Intraoral Exam:</u></p> <ul style="list-style-type: none"> <li>• Oral cancer screening completed</li> <li>• Intraoral soft tissues abnormalities (e.g. soft tissue, xerostomia)</li> <li>• Occlusion: abnormalities identified</li> <li>• Dentition: existing conditions/ treatments, problems, results of endodontic testing where appropriate</li> <li>• Periodontium: charting accurate, need for specialty consultation identified</li> </ul> <p><u>Impressions/Mounted Cast:</u></p> <ul style="list-style-type: none"> <li>• Alginate impressions of both arches are of diagnostic quality</li> </ul>	<p>Has slight or moderate deviation(s) from optimal that may include, but is not limited to:</p> <ul style="list-style-type: none"> <li>• Misses one (1) clinical findings related to chief complaint</li> <li>• Misses one (1) to three (3) clinical findings unrelated to chief complaint, but should have invoked concern</li> <li>• Identifies need for clinically necessary diagnostic tests and consults, but <u>rationale</u> used is sufficient, but not thorough</li> <li>• Perform various diagnostic tests, but they fail to do a test that is instrumental to the assessment</li> <li>• Case presentation to specialist requires specialist to ask for already gathered information</li> </ul>	<p>Has major deviation(s) from optimal that may include, but is not limited to:</p> <ul style="list-style-type: none"> <li>• Misses (2) or more clinical findings related to chief complaint</li> <li>• Misses four (4) or more clinical findings unrelated to chief complaint, but should have invoked concern</li> <li>• Must be prompted to gather additional clinical information, or fails to recognize need to consult with specialist</li> <li>• Identifies need for additional diagnostic tests and consults, but <u>rationale used is weak or non-existent, or prescribes non-contributory tests or consults.</u></li> <li>• Case presentation to specialist requires specialist to prompt student to gather more information</li> </ul>	<ul style="list-style-type: none"> <li>• Misses clinical findings that substantially alter treatment plan.</li> <li>• Missing such findings would result in significant harm to the patient if left untreated until the next recall.</li> <li>• Does NOT identify clinically necessary diagnostic tests or referrals.</li> <li>• Faculty needed to do a critical diagnostic test themselves due to student's inability to execute said test</li> <li>• Case presented to specialist is not in standardized format</li> <li>• Consults with specialist without informing examiner or student defers decision making to specialist</li> </ul> <p><b>If this factor and factor 3 combined score is less than 13, this is a critical error.</b></p>
<b>Score Awarded:</b>	<b>Comments:</b> <i>points taken off for reasons not specified above must be written down</i>		
FACTOR 3: SIGNIFICANT RADIOGRAPHIC FINDINGS			
10 – Optimal	7	3	0 – Critical errors
<p>Identifies all radiographic findings.</p> <ul style="list-style-type: none"> <li>• Radiographs consistent with ADA Guidelines</li> <li>• Identifies if radiographs are of diagnostic quality, and rationale for needing new information</li> </ul> <p>Identifies the following from radiographs:</p> <ul style="list-style-type: none"> <li>• Lucencies/Opacities on teeth</li> <li>• Bone height (BWVs)</li> <li>• Calculus</li> <li>• Lucencies/Opacities with root apices (PAs)</li> <li>• Widened PDL or pronounced lamina dura</li> <li>• Bony pathology</li> <li>• Furcations</li> <li>• Defective restorations</li> <li>• Calcified canals</li> <li>• Crown:Root Ratio</li> </ul>	<p>Has slight or moderate deviation(s) from optimal that may include, but is not limited to:</p> <ul style="list-style-type: none"> <li>• Misses one (1) radiographic findings related to chief complaint</li> <li>• Misses one (1) to three (3) radiographic findings unrelated to chief complaint, but should invoke concern</li> <li>• Interprets radiograph(s) to diagnose that are recent (as of last exam), but do not represent current state</li> <li>• Interprets radiographs that do not represent the current state inappropriately</li> </ul>	<p>Has major deviation(s) from optimal that may include, but is not limited to:</p> <ul style="list-style-type: none"> <li>• Misses three (3) clinical or radiographic findings related to chief complaint</li> <li>• Interprets radiograph(s) that do not capture areas of interest</li> <li>• Needs multiple attempts to capture areas of interest radiographically</li> <li>• Must be prompted to gather additional radiologic information</li> </ul>	<p>Misses radiographic findings that substantially alter treatment plan.</p> <p>Missing such findings would result in significant harm to the patient if left untreated until the next recall.</p> <p><b>If this factor and factor 2 combined score is less than 13, this is a critical error.</b></p>
<b>Score Awarded:</b>	<b>Comments:</b> <i>points taken off for reasons not specified above must be written down</i>		
<b>STUDENT MUST PRESENT ALL FINDINGS (EXCEPT FOR CASTS AND PHOTOGRAPHS) BEFORE PURSUING CONSULTATIONS – CONSULTANT MUST BE INFORMED OF EXAM</b>			

FACTOR 4: FINDINGS FROM MOUNTED DIAGNOSTIC CASTS AND PHOTOGRAPHS			
5 – Optimal	4	1	0 – Critical errors
<ul style="list-style-type: none"> <li>• Casts and mounting reflect patient's oral condition; Identifies all diagnostic findings from casts.</li> <li>• Articulator is free of debris, mounting is clean and smooth.</li> </ul> <p><u>Photos of patient's mouth:</u></p> <ul style="list-style-type: none"> <li>• Of diagnostic quality</li> <li>• Soft tissue retraction optimal to allow full visibility of dentition where appropriate</li> <li>• Mounted correctly in electronic health record (flipped, cropped)</li> </ul> <p><u>All views included:</u></p> <ul style="list-style-type: none"> <li>• Full face</li> <li>• Smile</li> <li>• Frontal MIP</li> <li>• L lateral in MIP</li> <li>• R lateral in MIP</li> <li>• Maxillary occlusal</li> <li>• Mandibular occlusal</li> </ul>	<p>Has slight deviation(s) from optimal that may include, but is not limited to:</p> <ul style="list-style-type: none"> <li>• Casts and mounting have slight discrepancies, but can be corrected to reflecting patient's oral condition.</li> <li>• Misses <u>one</u> (1) diagnostic finding that does NOT substantially alter treatment plan.</li> <li>• Photos must be rotated to be viewed properly, or require minor contrast and brightness adjustments to interpret</li> </ul>	<p>Has moderate or major deviation(s) from optimal that may include, but is not limited to:</p> <ul style="list-style-type: none"> <li>• Casts and mounting have moderate or major discrepancies can still be corrected to match patient's oral condition.</li> <li>• Misses <u>two</u> (2) or more diagnostic findings that do NOT substantially alter treatment plan.</li> <li>• Photos require significant contrast and brightness adjustments to interpret</li> <li>• Dentition in photos is occluded by significantly by soft tissue, are fogged, or other issues that make the photo suboptimal</li> <li>• Photos are not mirrored corrected when presented (e.g. L lateral in MIP photo incorrectly looks like R lateral in MIP)</li> </ul>	<ul style="list-style-type: none"> <li>• Casts and mounting do NOT reflect patient's oral condition. Examples include, but is not limited to: <ul style="list-style-type: none"> <li>○ Cast distortion</li> <li>○ Missing vestibule</li> <li>○ Iatrogenic damage to cast during preparation/mounting</li> </ul> </li> <li>• Misses diagnostic cast findings that substantially alter treatment plan.</li> <li>• Articulator has gross debris.</li> <li>• Photos of non-diagnostic quality (blurry).</li> </ul>
<b>Score Awarded:</b>	<b>Comments:</b> <i>points taken off for reasons not specified above must be written down</i>		
FACTOR 5: DIFFERENTIAL DIAGNOSIS and CARIES AND PERIODONTAL RISK LEVEL ASSESSMENT			
10 – Optimal	7	3	0 – Critical errors
<ul style="list-style-type: none"> <li>• All problems identified and can summarize all relevant medical, behavioral, social conditions that impact treatment options.</li> <li>• Risk of caries and periodontal disease identified (risk factors, risk indicators, and protective factors) and relevance explained</li> <li>• All diseases correctly diagnosed. Examples include, but are not limited to: <ul style="list-style-type: none"> <li>○ Identifies abnormalities of the TMJ, occlusion, EO and IO soft tissue that warrant further discussion</li> <li>○ Accurately dx dental, endodontic, and periodontic conditions</li> </ul> </li> </ul>	<p>Has slight or moderate deviation(s) from optimal that may include, but is not limited to:</p> <ul style="list-style-type: none"> <li>• <u>One</u> (1) problem and/or diagnosis NOT identified without potential harm to patient.</li> <li>• Risk level and relevance of risk level identified but misses one (1) or two (2) risk factors, risk indicators, and/or protective factors for caries and/or periodontal disease</li> </ul>	<p>Has major deviation(s) from optimal that may include, but is not limited to:</p> <ul style="list-style-type: none"> <li>• <u>Two</u> (2) or more problems and/or diagnosis NOT identified without potential harm to patient.</li> <li>• Risk level identified but misses three (3) or more risk factors, risk indicators, and protective factors for caries and/or periodontal disease</li> </ul>	<ul style="list-style-type: none"> <li>• Problems with potential harm to patient NOT identified. Examples include, but are not limited to: caries, missing teeth, esthetics, pulpal pathology, food impaction, etc</li> <li>• Missed diagnosis, or misdiagnosis when followed through, that will result in potential harm to patient when followed up</li> <li>• Risk level NOT identified for caries and/or periodontal disease</li> </ul>
<b>Score Awarded:</b>	<b>Comments:</b> <i>points taken off for reasons not specified above must be written down</i>		

FACTOR 6: OVERALL TREATMENT APPROACH AND INTERACTION OF PROBLEMS			
15 – Optimal	10	5	0 – Critical errors
<p>All treatment options identified within standard of care; Provides thorough rationale which is optimal for given patient.</p> <ul style="list-style-type: none"> <li>Identifies the risks, benefits, and alternatives of different treatment options.</li> <li>Incorporates patient’s compliance with home care, caries risk, patient’s goals, and medical conditions into treatment approach.</li> <li>Identifies if there is a need for medical consultation before finalizing treatment plan</li> <li>Identifies interactions of dental-related conditions (e.g. strength of abutment tooth that has periodontal disease, need for crown lengthening to restore a tooth).</li> <li>Approach addresses the etiology of the diagnoses made and caries/periodontal risk identified</li> </ul>	<p>Has slight deviation(s) from optimal that may include, but is not limited to:</p> <ul style="list-style-type: none"> <li>All treatment options identified within standard of care, explaining rationale at an <u>acceptable</u> level for the given patient.</li> <li>Weak rationale given for recommended materials, or aggressiveness or conservativeness of treatment (e.g. limited vs. full SRP, prefab vs. cast post, etc.)</li> <li><u>One</u> (1) interaction NOT identified without potential harm to patient.</li> <li>Recommends treatment that does not account for the etiology of the diagnosis</li> </ul>	<p>Has or moderate major deviation(s) from optimal that may include, but is not limited to:</p> <ul style="list-style-type: none"> <li>Any recommended treatment lacks sound rationale, even if recommended treatment is appropriate</li> <li>Incomplete set of treatment options given</li> <li>No rationale given for recommended materials, or aggressiveness or conservativeness of treatment (e.g. limited vs. full SRP, prefab vs. cast post, etc.)</li> <li><u>Two</u> (2) or more interactions NOT identified without potential harm to patient</li> <li><u>One</u> (1) or more interactions NOT identified will cause harm to the patient</li> <li>Recommends treatment that maintains or exacerbates the etiology of the diagnosis</li> </ul>	<ul style="list-style-type: none"> <li>Treatment options presented are NOT within standard of care as they are grossly aggressive, significantly infeasible, or negligent for given patient.</li> <li>Recommends treatment that is incompatible with caries/periodontal risk identified</li> </ul> <p><b>If this factor and factor 7 combined score is less than 13, this is a critical error.</b></p>
Score Awarded:	Comments: <i>points taken off for reasons not specified above must be written down</i>		
FACTOR 7: PHASING & SEQUENCING OF COMPREHENSIVE TREATMENT PLAN			
10 – Optimal	7	3	0 – Critical errors
<p>Treatment optimally phased and sequenced.</p> <ul style="list-style-type: none"> <li>Provides rationale for phasing and sequencing.</li> <li>Incorporates patient’s priorities as appropriate.</li> </ul> <p>Treatment plan addresses all problems; all treatment procedures are indicated.</p> <ul style="list-style-type: none"> <li>Patient’s chief complaint is addressed in plan.</li> <li>All diagnosed problems included in treatment plan.</li> <li>Includes recommendation for medical follow-up, as appropriate, for poorly controlled medical conditions.</li> <li>Includes home care plan with rationale.</li> </ul>	<p>All problems are addressed, but treatment plan still has slight or moderate deviation(s) from optimal that may include, but is not limited to:</p> <ul style="list-style-type: none"> <li>Tx phased correctly, but one (1) to two (2) procedures out of sequence with no harm to patient.</li> <li>One (1) treatment procedures is NOT indicated, but will NOT result in harm to patient</li> </ul>	<p>Has major deviation(s) from optimal that may include, but is not limited to:</p> <ul style="list-style-type: none"> <li>Treatment plan does not address one (1) or more problems, or addresses non-existent problem(s)</li> <li>Treatment <b>NOT phased</b> correctly, but no potential harm to patient</li> <li>Tx phased correctly, but <ul style="list-style-type: none"> <li>One (1) or more procedures are out of sequence <b>WITH potential harm</b> to the patient</li> <li>Three (3) or more procedures are out of sequence with no harm to the patient</li> </ul> </li> <li>Two (2) or more treatment procedures is <b>NOT</b> indicated, but will <b>NOT</b> result in harm to patient</li> <li>Treatment plan is incomplete, but <b>DOES NOT</b> cause harm to patient</li> </ul>	<ul style="list-style-type: none"> <li>Treatment <b>NOT phased nor sequenced</b> correctly with potential harm to patient.</li> <li>Treatment plan is incomplete and <b>causes potential harm</b> to patient.</li> <li>Treatment procedures <ul style="list-style-type: none"> <li>included <b>are NOT indicated</b> that results in harm to patient.</li> <li>included <b>WILL cause harm</b> to the patient</li> <li>are missing from treatment plan that results in <b>HARM</b> to patient</li> </ul> </li> </ul> <p><b>If this factor and factor 6 combined score is less than 13, this is a critical error.</b></p>
Score Awarded:	Comments: <i>points taken off for reasons not specified above must be written down</i>		

STUDENT TO COMPLETE ALL CHARTING AND NOTES FOR FINAL REVIEW AND APPROVAL

FACTOR 8: PATIENT PRESENTATION OF TREATMENT PLAN AND TREATMENT RECORD			
10 – Optimal	7	3	0 – Critical errors
<p>Summarized all data collected, diagnoses, and comprehensive rationale for treatment options</p> <ul style="list-style-type: none"> <li>• Documents presentation of risks and benefits or all treatment options.</li> <li>• All records completed in electronic health record including forms.</li> <li>• Note is organized and clearly delineates patient report from objective clinical findings and recommended treatment.</li> <li>• Review of treatment options and patient's decision (informed consent discussion) documented in treatment note.</li> <li>• Patient understands the treatment plan, the financial implications, and next steps</li> </ul>	<p>Has slight deviation(s) from optimal that may include, but is not limited to:</p> <ul style="list-style-type: none"> <li>• Documentation of presentation of risks and benefits of some or all treatment options has some detail, but requires some inference to interpret full discussion</li> <li>• Some forms are filled out sparsely such that some inference is required to interpret records</li> <li>• Documentation to patient opinions and responses to recommendations is brief, but adequate</li> </ul>	<p>Has or moderate major deviation(s) from optimal that may include, but is not limited to:</p> <ul style="list-style-type: none"> <li>• Documents presentation of risks and benefits of some or all treatment options occurs generically.</li> <li>• Only documents presentation of risks and benefits for preferred option(s).</li> <li>• Summary of data collected, diagnoses, and treatment options is vague; requiring inference to interpret what was found, determined (diagnosis), or what was discussed about options (treatment discussion)</li> <li>• A few to no forms are filled out in the record</li> <li>• Documentation to patient opinions and responses to recommendations is lacking or non-existent</li> <li>• Records biased viewpoints about the patient</li> <li>• Patient remains confused about the treatment plan</li> </ul>	<ul style="list-style-type: none"> <li>• Does NOT summarize all data collected, diagnoses and/or treatment options.</li> <li>• Does NOT document presentation of risks and benefits or all treatment options.</li> </ul>
Score Awarded:	Comments: <i>points taken off for reasons not specified above must be written down</i>		

Factor 1	Factor 2	Factor 3	Factor 4	Factor 5	Factor 6	Factor 7	Factor 8	TOTAL SCORE
/15	/15	/10	/5	/10	/15	/10	/10	___/90

If factors 2 and 3 combined score is less than 13, this is a critical error.

If factors 6 and 7 combined score less than 13, this is a critical error.

FACTOR A: CRITICAL THINKING							
5	4	3	2	1	0	Score	Comments
<p>Identifies clinical problem; critically interprets available evidence and understands nuance; coherently analyzes and defends clinical choices; synthesizes clinical findings with evidence to provide a persuasive argument for the best option(s); has insight into his/her own reasoning and decision-making.</p> <ul style="list-style-type: none"> <li>Takes various signs and subjective information from the patient to ask appropriate follow up questions</li> </ul>	<p>Identifies clinical problem; gathers and critiques valid evidence; makes inferences about how evidence will relate to patient outcomes; describes the implications of various choices based on evidence; identifies best options based on the above.</p>	<p>Identifies clinical problem; gathers and discusses valid evidence and rejects inferior evidence; describes his/her reasoning process superficially; elaborates some options based on findings the above.</p>	<p>Identifies clinical problem; gathers basic clinical information and scientific evidence to aid in decision-making.</p>	<p>Identifies problem or question of interest, but is unable to reason further.</p>	<p>Learner cannot identify the problem of interest, is unable to gather information that would aid in decision-making, and bases decisions on opinions OR anecdotes rather than evidence.</p> <ul style="list-style-type: none"> <li>Explains actions are simply due to being told or "this is what I was taught"</li> </ul>		<p>Points taken off for reasons not specified at left must be written down</p>
FACTOR B: COMMUNICATION & DIVERSE PATIENT POOL							
5	3	0	Score	Comments			
<p>Does not turn back to patient. At or below eye level when speaking with patient. Communicates respectfully with patient taking into account health literacy. Recognizes need for and uses interpreter as appropriate. Discusses and incorporates patient's health-related beliefs- as related to culture, religion, etc.- into treatment plan or treatment.</p>	<p>Mostly does not turn back to patient. Mostly is at or below eye level when speaking with patient. Communicates respectfully with patient, taking into account health literacy. Does not recognize need for interpreter OR does not discuss or incorporate patient's health-related beliefs.</p> <ul style="list-style-type: none"> <li>Unable to control the conversation when it is warranted</li> </ul>	<p>ANY of the following will result in a critical error: Overtly disrespectful OR recognizes need for interpreter and does not arrange for interpreter services OR disrespectfully discredits patient's beliefs.</p>		<p>Points taken off for reasons not specified at left must be written</p>			
FACTOR C: INFECTION CONTROL							
5	3	0	Score	Comments			
<p>Provider PPE appropriately worn throughout procedure and during cubicle breakdown including mask, gloves, protective eyewear, tied gown, closed shoes. Hair out of working space. Nametag on. Hand hygiene performed. Clean and contaminated areas maintained. No cross- contamination. Sharps are capped when on table.</p>	<p>Provider PPE worn mostly appropriately, but gown untied OR eyewear worn after clean gloves OR eyewear is not fully enclosed OR hair in face but has not touched treatment area</p>	<p>ANY of the following will result in a critical error: Gross cross- contamination including clean items placed in area of trash receptacle. PPE for patient or provider not worn during cubicle breakdown or while instruments are being used. Hair touches treatment area. Nametag not worn. Sharps uncapped on table.</p>		<p>Points taken off for reasons not specified at left must be written down</p>			

FACTOR D: PRIDE VALUES AND PROFESSIONALISM					
5	3	1	0	Score	Comments
Treats patient, peers, staff, and faculty with respect & contributes to a positive work environment. Puts patients' needs before own. Punctual and prepared. Displays honesty, integrity, and accountability.	Treats patient, peers, staff, and faculty with respect though may not contribute to a positive environment. Puts patients' needs first. Punctual and mostly prepared. Displays honesty, integrity, and accountability.	Prioritizes own needs ahead of patient care (patient safety is not compromised) or best practices, late or unprepared for patient care, disregards clinic safety measures.  • Deflects blame when complications arise	ANY of the following will result in a critical error: Academic dishonesty, unethical behavior OR Treats patient, peers, staff, or faculty with gross disrespect OR Breaches clinic safety measures (start checks, unsupervised practice, unauthorized change of treatment plan, etc).  • Does not respect the time of the patient, faculty, and staff.		<i>Points taken off for reasons not specified at left must be written down</i>
FACTOR E: SELF-ASSESSMENT					
5	3	0	Score	Comments	
Accurately assesses MOST strengths and areas for improvement in clinical performance, including patient management, infection control, and professionalism.	Accurately assesses SOME strengths and areas for improvement in clinical performance, including patient management, infection control, and professionalism.	Grossly inaccurate in ability to assess strengths and areas for improvement in clinical performance, including patient management, infection control, and professionalism.		<i>Points taken off for reasons not specified at left must be written down</i>	
<b>FACTORS A-E TOTAL SCORE</b>				__ /25	

**SUMMARY OF SCORES/SUM OF SCORES:**

Factors 1-8	Factors A-E
__ /90	__ /25
Pass ≥63	Pass ≥18

*If the combined score of factors 2 and 3 is less than 13, it is considered to be a critical error.  
If the combined score of factors 6 and 7 is less than 13, it is considered to be a critical error.*

Any critical errors? Yes / No

Exam completed on time? Yes / No

*Both parts of this exam must be passed in order to pass the exam.  
Any critical error or exam not completed on time will result in automatic failure of the exam.*

Outcome (circle one)	
PASS	FAIL