

Mock INDBE	Semester 1	Semester 2	Semester 3	Semester 4
Assignment in Assessment/Assignment Score* (* weighted in grade-tbd)	DEN5013 UFCD Mock 75/Complete	DEN5221 UFCD Mock 75/Complete	DEN6015 UFCD Mock 75/Complete	DEN6015 UFCD Mock 75/Complete
Remediation	2nd Attempt/Complete	2nd Attempt/Complete	2nd Attempt/Complete	2nd Attempt/Complete

Semester 5	Semester 6	Semester 7	Semester 8
DEN6015 UFCD Mock 75/Complete	DEN7016 UFCD Mock 75/Complete	DEN7016 UFCD Mock 75/Complete	DEN6416C Kaplan Simulated Mock 1.5 days 75/Complete
2nd Attempt/Complete	2nd Attempt/Complete	Students submits weekly practice exams in Kaplan Qbank to semester end	Student approved to register Students submits weekly practice exams in Kaplan Qbank to semester end

Semester 9	Semester 10	Semester 11
Students register and challenge INBDE by October 15		

CLIN ORAL DIAGNOSIS & TREATMENT PLANNING

DEN7766L- SEM. 8-9

DMD 2023

Annetty Soto DMD

Clinical Assistant Professor and Team Leader
Course Director for: DEN7761L, DEN 7766L and 8768L
Division of General Dentistry
Department Restorative Science

UFCD competency 14 (CODA 2-24 O)

- **Assessment of Treatment Outcomes:** Provide oral health care within the scope of general dentistry to evaluate the outcomes of treatment, recall strategies and prognosis.
- Proposal: create a new program competency level using one PTA-CC

Current

Semester	Sum/6	Fall/7	Spr/8	Sum/9	Fall/10	Spr/11
Skills Assessments & Exercises	DEN 7761L		DEN 7766L		DEN 8768L	
	<p>Before the D3 is able to be the primary provider for a new patient exam (COE), D3 needs to assist with D4:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 2 codes COE assists D00150 <input type="checkbox"/> 1 POE/PTA assist D00120 <input type="checkbox"/> Virtual clinic activities- to supplement daily grading 	<ul style="list-style-type: none"> <input type="checkbox"/> 3DN oral presentation diagnosis and treatment (all group) Submit .ppt in Canvas after presentation. 	<ul style="list-style-type: none"> <input type="checkbox"/> <input type="checkbox"/> 2 of codes below with D3 associate <ul style="list-style-type: none"> • D0150 • D0120C • D0120 	<ul style="list-style-type: none"> <input type="checkbox"/> Completion of patients assigned and identification complexity of needs <ul style="list-style-type: none"> A. Identify patients in your care for whom you have completed all of the following codes: <ul style="list-style-type: none"> 1) D0150 2) D0120DC 3) D0120CC A. Recognition of complexity of the dental needs by completing these codes: <ul style="list-style-type: none"> <input type="checkbox"/> Tx plan present Routine (D00004) <input type="checkbox"/> Tx plan present Moderate (D00005) <input type="checkbox"/> Tx plan present Extensive (D00006) 		
Competency Assessments			<input type="checkbox"/> Comprehensive Oral Exam Competency Assessment (GD1-C)			
			<input type="checkbox"/> Special Needs Competency Assessment (GD2-C)			
					<input type="checkbox"/> Completed Case Presentation (GDRP1-O)	
Graduation Requirements		<ul style="list-style-type: none"> <input type="checkbox"/> Medical risk assessment for a ASA III patient D00009- Use medical consult code D9311 <input type="checkbox"/> PTA-DC - Minimum of 6 by end of semester 11 <input type="checkbox"/> PTA-CC - Minimum of 2 by end of semester 11 				
Semester Grades	Daily Grades 70%, RVU,30%, Competency Assessments S/U					

Proposal

Semester	Sum/6	Fall/7	Spr/8	Sum/9	Fall/10	Spr/11
Skills Assessments & Exercises	DEN 7761L		DEN 7766L		DEN 8768L	
	Before the D3 is able to be the primary provider for a new patient exam (COE), D3 needs to assist with D4: <input type="checkbox"/> 2 codes COE assists D00150 <input type="checkbox"/> 1 POE/PTA assist D00120 <input type="checkbox"/> Virtual clinic activities- to supplement daily grading	<input type="checkbox"/> 3DN oral presentation diagnosis and treatment (all group) Submit .ppt in Canvas after presentation.	<input type="checkbox"/> <input type="checkbox"/> 2 of codes below with D3 associate <ul style="list-style-type: none"> • D0150 • D0120C • D0120 	<input type="checkbox"/> Completion of patients assigned and identification complexity of needs A. Identify patients in your care for whom you have completed all of the following codes: 1) D0150 2) D0120DC 3) D0120CC A. Recognition of complexity of the dental needs by completing these codes: <input type="checkbox"/> Tx plan present Routine (D00004) <input type="checkbox"/> Tx plan present Moderate (D00005) <input type="checkbox"/> Tx plan present Extensive (D00006)		
Competency Assessments			<input type="checkbox"/> Special Needs with Comprehensive Oral Exam Competency Assessment (GDI-C)			
			<input type="checkbox"/> Outcomes Evaluation Competency Assessment (PTA-CC) (GD2-C)			
					<input type="checkbox"/> Completed Case Presentation (GDRP1-O)	
Graduation Requirements	<input type="checkbox"/> Medical risk assessment for a ASA III patient D00009- Use medical consult code D9311 <input type="checkbox"/> PTA-DC - Minimum of 6 by end of semester 11 <input type="checkbox"/> PTA-CC - Minimum of 2 by end of semester 11					
Semester Grades	Daily Grades 70%, RVU,30%, Competency Assessments S/U					

Outcomes Evaluation Competency Assessment

- Format: Chairside after student completes the PTA-CC appointment
- Team leaders would be responsible for assessment;
- Students can use patient from their pool or wellness clinic to complete this competency assessment
- Focus on: **Outcomes of treatment, recall strategies and prognosis**

PTA-CC form update

- Are there any phases of the treatment plan not completed?
- When was the last examination completed?
- Updated diagnostic information (radiographs, photos, clinical exams)
- Patient is MOST satisfied with oral health
 - (COMFORT, FUNCTION and ESTHETICS)

PerioHealth

- Local, systemic and socio economic risk factors
- **CURRENT Periodontal Disease Risk Assessment:** LOW, MODERATE, HIGH, EXTREME
- **CURRENT Patient Prognosis:** POOR, FAIR, QUESTIONABLE, POOR.
- Improved?
- **Recommendations**
 1. Office (x-rays, fluoride application, clinical exam frequency, OCS)
 2. Homecare (instructions and nutritional)
 3. Recall plan (time interval, measures from improvement)

DentitionHealth

- Local, systemic and socio economic risk factors
- NUMBER OF FULL RESTORATIONS IN THE PAST YEAR
- **CURRENT Caries Risk Assessment:** LOW, MODERATE, HIGH, EXTREME
- **CURRENT Patient Prognosis:** POOR, FAIR, QUESTIONABLE, POOR
- Improved?
- **Recommendations**
 1. Office (x-rays, fluoride application, clinical exam frequency)
 2. Homecare (instructions and nutritional)
 3. Recall plan (time interval, measures from improvement)

Outcomes Assessment: Patient Care Evaluation (chairside)

- Patient's chief complaint has been addressed
- Prosthodontic appliances (FIXED, REMOVABLE, IMPLANTS)
- Does the patient have any oral pathology lesions that have not been identified or addressed?
- Does the patient have any oral medicine concerns that have not been identified or addressed?
- Is there any indication that disease control has been ineffective?
- ADDITIONAL SPECIALTY REFERRALS OUTSIDE OF THE SCOPE OF GENERAL DENTISTRY (Oral medicine, TMJ, Orthodontics, Medical, etc.)
- Is the patient being discharged from the Student Dentist as the provider?
- Patient communication of the plan (written, verbal, both, other)

Rubric

<u>PTA-CC competency grading</u> <u>CMTXP</u>	S- Satisfactory	U- Unsatisfactory
<u>A. Outcomes' evaluation</u>		
1. Patient documentation updated (radiographs, clinical exam)		
2. Capable of evaluating therapy outcomes		
3. Capable of evaluating recall exam (patient improvement or decline)		
4. Capable of evaluating management strategies		
5. Prosthodontics evaluation		
<u>B. Recall Strategies</u>		
1. The patient was discharged and/or referred to the correct Recall Program		
2. Adequate Recall time interval		
3. Accurate documentation for the discharged and/or referral completed		
4. Homecare instructions addressing limitations and a clear plan of care action		
5. Understanding of Treatment Maintenance needs		
<u>C. Prognosis</u>		
1. Capable of evaluating patient's prognosis		
2. Effective patient communication		

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<p>1. Patient documentation updated (radiographs, clinical exam)</p>		
<p>2. Capable of evaluating therapy outcomes</p>		
<p>3. Capable of evaluating recall exam (patient improvement or decline)</p>		
<p>4. Capable of evaluating management strategies</p>		
<p>5. Prosthodontics evaluation</p>		
<p>B. <u>Recall Strategies</u></p>		
<p>1. The patient was discharged and/or referred to the correct Recall Program</p>		
<p>2. Adequate Recall time interval</p>		
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<p>4. Homecare instructions addressing limitations and a clear plan of care action</p>		
<p>5. Understanding of Treatment Maintenance needs</p>		
<p>C. <u>Prognosis</u></p>		
<p>1. Capable of evaluating patient's prognosis</p>		
<p>2. Effective patient communication</p>		

Prosthodontic Competency Assessment Meeting

November 16, 2021

Attendance: Dr. Dilbone, Dr. Upshaw-Esquivel, Dr. Fernandez, Dr. Ribeiro, Dr. Pereira, Stephen Kostewicz, Gail Childs

Purpose of the meeting:

Review the following CODA standards with the fidelity of the current Case Completion Board and Overall Prosthodontic Competency Assessment:

18: Provide oral health care within the scope of general dentistry to include communicating and managing dental laboratory procedures in support of patient care.

19: Provide oral health care within the scope of general dentistry to **include replacement of teeth including fixed, removable and dental implant prosthodontic therapies.**

Dr. Upshaw-Esquivel has talked with prosthodontic colleagues that recently completed accreditation and received no recommendations on their clinical prosthodontic competency assessments. There is a concern that the current Case Completion Board and Overall Prosthodontic Competency Assessment does not fully measure independent student work.

Stephen was asked if some of the previous clinical competency assessments could be activated.

Steven suggested competency steps by student, rather than procedure code, this process can be paused and completed at the last stage. Form would be in evaluations module and overall pass/fail. Lab communication will be part of the of the steps. He will test and confirm proof of process and pass rate reporting.

Initial Proposal: Develop 4 clinical competency assessments in:

- Fixed – Single Crown and Bridge – clinical first, sim in Mock Board if this cannot be completed with current patient pool.
- Removable – clinical (Partial or Denture or combination)
- Implant - simulated

Due to the many forms in axiUm presently. Steven suggested a Faculty-look up table on units reporting be added to assist faculty. Students will need to check their own status reports in the Personal Planner. The course director can delete grade form and add competency.

Class of 2022 - Effective: Spring 2022

- Office of Academic Affairs to identify a sim lab for the implant examination for the class of 2022
- DEN8859L, modify the syllabus for DEN8859L_Clinical Prosthodontics 5 to add the following:
 1. The implant competency (This should be added to the CANVAS Gradebook)
 2. The step competencies on Removable and Fixed Prosthodontics to certify students' independence (Steve will let us know about the reactivation process for the grading forms)

3. Laboratory communications also to certify students' independence (Steve will let us know about these forms as well)

Long term planning:

The bridge and implant competency assessments be implemented as a simulated assessment in DEN7411C and/or DEN8960L: Clinical Examination 2 (Mock Board).

The single crown and removable prosthodontic prosthodontic therapies be done as clinical assessments through DEN7845L, 7846L, 8857L, 8858L,8859L.