



University of Pittsburgh  
School of Dental Medicine  
Department of Periodontics  
Clinic Manual  
2006-2007

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# Clinical Periodontics 1

## 1. General Information

**Department:** Periodontics  
**Course Number:** 5279  
**Time/Days:** M, T, W, TH, F  
9:00-12:30 PM  
1:30-4:30 PM  
**Room:** Dental School Clinics  
2<sup>nd</sup>/3<sup>rd</sup> Floors  
**Course Director:** Dr. Ali Seyedain  
B-95 Salk Hall  
(412) 648-8596  
seyedain@pitt.edu

### Participating Faculty:

Dr. Bruce Doll	B-98 Salk Hall	648-1961	bad43@pitt.edu
Dr. Pouran Famili	B-119 Salk Hall	648-8598	pof@pitt.edu
Dr. Stepheny Gordon	B-97 Salk Hall	648-8595	seg45@pitt.edu
Dr. Edward Heinrichs	B-119 Salk Hall	383-8779	eph8@pitt.edu
Dr. James Manning	B-95 Salk Hall	648-8596	jdm9@pitt.edu
Dr. John Michael	B-97 Salk Hall	648-8595	jjm62@pitt.edu
Dr. Charles Sfeir	B-98 Salk Hall	648-1949	csfeir@cs.cmu.edu
Dr. Alan Timko	B-97 Salk Hall	648-8595	amt42@pitt.edu

**Credit Hours:** 3.0

**Year/Semester** Second Year, Summer (Rising Juniors)

Required/Selective/Elective Required

## 2. Course Goals

The goal of this course is to provide clinical experience in the field of Periodontics, and related disciplines, for First Professional dental students. The clinical experience will build on the basic biology and pre-clinical lectures in Periodontics aimed at enhancing the competence in diagnosis and management of periodontal conditions/diseases of dental patients.

### 3. **Related SDM Competencies (method of evaluation)**

- Competency 1. Apply ethical principles to professional practice
- Competency 11. Present and discuss with the patient (or responsible party) the findings, diagnoses and treatment options including the probable benefits, potential outcomes, limitations and risks associated with treatment, the probable consequences of no treatment, estimated fees and patient responsibilities for successful treatment outcomes
- Competency 12. Obtain informed consent for agreed upon care.
- Competency 13. Monitor and evaluate therapeutic outcomes and utilize the results to reassess and modify initial diagnosis and/or treatment
- a) Periodontal Evaluation for Periodontitis Competency form
  - b) Patient Education Evaluation Competency form
  - c) Periodontal Re evaluation for Periodontitis Competency form
- Competency 14. Implement and monitor infection control, radiation, chemical and environmental safety programs according to current standards
- Competency 17. Manage developmental and acquired oral disorders involving hard and soft tissues
- a) Periodontal Evaluation for Periodontitis Competency form
  - b) Patient Education Evaluation Competency form
  - c) Sacling and Prophylaxis Competency form
  - d) Periodontal Re-evaluation for Periodontitis Competency form
- Competency 28. Diagnose, treat and/or manage patients with periodontal disease and conditions
- a) Periododntal Evaluation for Periodontitis Competency form
  - b) Patient Education Evaluation Competency form
  - c) Sacling and Prophylaxis Competency form
  - d) Periodontal Re-evaluation for Periodontitis Competency form
- Competency 31. Provide patient care that emphasizes prevention of oral diseases and supports the maintenance of systemic and oral health
- a) Patient Education Evaluation Competency form
  - b) Periodontal Re-evaluation for Periodontitis Competency form

### 4. **Course Objectives:**

The objectives for the First Professional Periodontics Clinic are for each student to be able to:

1. Perform an accurate clinical periodontal examination and charting
2. Diagnose gingivitis and the different forms of periodontitis
3. Identify primary and contributing etiologic factors in patients with gingivitis and/or periodontitis
4. Establish a prognosis for patients with gingivitis and/or periodontitis
5. Develop a treatment plan for patients with gingivitis, including oral hygiene instruction

6. Develop a treatment plan for initial therapy for patients with periodontitis, including oral hygiene instruction
7. Treat patients with gingivitis, ensuring that the treatment is performed in a timely manner
8. Treat patients with mild to moderate periodontitis, ensuring that the treatment is performed in a timely manner
9. Sequence periodontal treatment effectively with restorative procedures
10. Evaluate the results of initial periodontal therapy
11. Determine the need for surgical periodontal therapy, and either treat or refer patients as deemed appropriate
12. Maintain periodontal health of treated patients
13. Practice concepts of Infection Control  
(Students, faculty and clinical staff will consistently practice infection control procedures as outlined in the University of Pittsburgh School of Dental Medicine's current Exposure Control Guidelines.)

Required Clinical Course in Periodontics:

Perio Clinic I:

This course will be offered in the summer of the second year (rising Juniors). At the end of this course, students will complete three preventive and two periodontal evaluations and two quadrants of Scaling/Root Planing.

Prerequisite evaluation phase:

The goal of the prerequisite evaluation phase of the student's training is to develop the student's clinical skills through close faculty supervision as the student progresses through the prerequisite clinical procedures; these procedures are as follows:

Evaluation/treatment of gingivitis:

1. Patient evaluation, medical and dental history, meds
2. Initial Therapy (Oral Hygiene Instruction and Scaling/Polish)
3. Reevaluation
4. Supportive Periodontal Therapy

Evaluation/treatment of periodontitis:

1. Patient evaluation, medical and dental history, meds
2. Initial Therapy (Oral Hygiene Instruction and Scaling/Root Planing)
3. Reevaluation
4. Supportive Periodontal Therapy

Each student must complete, with a passing grade, the required number of Prerequisite Evaluation procedures before they will be allowed to progress to the Competency Evaluation phase. However, the required number of prerequisite procedures is merely a **minimum** number of prerequisite procedures that the student must satisfactorily pass. Some students may need to participate in more than the minimum number of required prerequisites to reach the level of competency necessary to pass the competency phase.

## 5. Evaluation Methods:

The goal of the Competency Evaluation phase of the student's training is to measure the student's level of competency after satisfactory completion of the minimum number of Prerequisite Evaluation phase procedures. During competency testing, faculty will evaluate the student's ability to meet the competency standards for a specific diagnostic or treatment procedure without faculty guidance. These procedures are as follows:

1. Oral Hygiene Instructions
2. Periodontal Evaluation
3. Scaling and Root Planing
4. Reevaluation

The student's performance on the Competency procedures will be evaluated based on the competency standards for each procedure. The minimum passing grade for each Competency procedure is a C. **Competency Evaluation grades will comprise 50% of the transcript grade plus clinic procedure evaluation grades awarded at the end of each course.**

A grade for clinical periodontics will be calculated and recorded at the end of each course. Periodontics 5279, 5319, 5379, and 5419 will be graded with H/S/U and Perio 5349, and 5449 will be graded with a letter grade. Junior year and senior year grades will represent a cumulative scoring of all competency phase evaluations. Cumulative scores will be translated to a transcript letter grade in accordance with the University of Pittsburgh grading system policy.

Minimum passing grade for these courses is a C.

Students who have not completed the requirement for the course at the end of the term will receive an "I" (Incomplete) grade on their transcript for the Clinical Periodontics course.

Specific Evaluation/Grading for Patient Care:

## Periodontal Evaluation for Periodontitis

**School of Dental Medicine      Department of Periodontics**

**Student name/number:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Patient name:** \_\_\_\_\_ **Chart:** \_\_\_\_\_

The evaluation is a collaborative activity by you and the periodontics faculty to perform the sequenced criteria listed below to meet the standards of the activity as judged by a periodontics faculty member with whom you are working. You must check with the faculty prior to commencing the evaluation, at each activity step, and at the completion of the evaluation. Blue sheet: Faculty copy, Yellow sheet: Student copy

Activity	Criteria	Points	Score
Documentation of Patient	Medical history update	1	
	Soft Tissue Exam	1	
	BP/ pulse	1	
Periodontal Charting	Bleeding index	1	
	Plaque index	1	
	Pocket Depths	1	
	Attachment Levels	1	
	Furcation involvement	1	
	Mobility	1	
	Keratinized gingival width	1	
	Demonstrate instrument use	1	
Case Presentation	Radiographic Evaluation	1	
	Case Summary	1	
	Treatment Plan	1	
Infection Control	Per SDM exposure control guidelines and rationale	1	
		1	
Patient Management	Oral hygiene instruction	1	
		1	
Student Knowledge	Rationale for diagnosis	1	
	Rationale for therapy	1	

TOTAL \_\_\_\_\_

Grade A: 14-13, B: 12-11, C:10-8, D: 7-6, F: 5 or below GRADE: \_\_\_\_\_

Faculty Signature/Code: \_\_\_\_\_ Date: \_\_\_\_\_

Narrative/Comments: \_\_\_\_\_

### 6. Educational Resources

The Department of Periodontics Clinic Manual (2002-2003) of the University of Pittsburgh and lecture notes from Department lecture and seminar presentations are the primary resource for information. In addition, textbooks in Periodontics, including the required text, Clinical Periodontology, Newman, Takei, and Carranza, 9<sup>th</sup> Edition, Saunders Publishers, are highly recommended as an educational resource.

## 7. Policy and Procedures

The final grade in the course will be based on achieving satisfactory performance as cited above in Evaluation Methods.

Attendance Policy:

The attendance policy in the clinics is in accordance with that outlined in the “University of Pittsburgh School of Dental Medicine Guidelines for Dental Students” handbook.

Remediation:

### I. Prerequisite Phase:

Students must receive at least a C on prerequisite procedures. Students will continue to perform prerequisite procedures until they have received passing grades for the minimum number of required procedures. Once they have done so, they may proceed to participate in their competency tests for that particular category.

### II. Competency Phase:

If a student fails a competency test (Mock Board), he/she will remediate that competency by retaking it. In this instance, the student may decide to participate in additional prerequisite procedures before retaking the competency test.

If the student fails the same Competency Evaluation, they may continue to remediate to a passing competency grade. However, when the student does pass the retake exam (Mock Board), **the grade received on the retake exam will be decreased by one letter grade for each retake the student participated in before achieving a passing grade.**

Faculty may require additional Prerequisite evaluations for a student who has failed a competency or multiple competency tests.

Disabilities:

Students with disabilities who require special testing accommodations or other classroom modifications should notify the instructor and the Office of Disability Resources and Services (DRS) no later than 4<sup>th</sup> week of the term. Students may be asked to provide documentation of their disability to determine the appropriateness of the request. DRS is located in 216 William Pitt Union and can be contacted at 412-648-7890 or (TTY) 412-383-7355.

Students are expected to attend all the clinical session except in the event of illness or emergency. Students must notify the Office of Student Services (412-648-8422) of illness, death in the family, or other unusual circumstances that may necessitate being absent from clinic for more than 4 days. Students are responsible for any clinic missed during their absence. Six unexcused absences from clinic will result in the reduction of the final grade to the next lowest grade.

## 8. Course Schedule

Fall/Spring/Summer Semesters

M-T-W-TH-F            9:00-12:30 PM; 1:30-4:30 PM



## Clinical Periodontics 2

### 1. General Information

**Department:** Periodontics  
**Course Number:** 5319  
**Time/Days:** M, T, W, TH, F  
9:00-12:30 PM  
1:30-4:30 PM  
**Room:** Dental School Clinics  
2<sup>nd</sup>/3<sup>rd</sup> Floors  
**Course Director:** Dr. Ali Seyedain  
B-95 Salk Hall  
(412) 648-8596  
seyedain@pitt.edu

#### Participating Faculty:

Dr. Bruce Doll	B-98 Salk Hall	648-1961	bad43@pitt.edu
Dr. Pouran Famili	B-119 Salk Hall	648-8598	pof@pitt.edu
Dr. Stepheny Gordon	B-97 Salk Hall	648-8595	seg45@pitt.edu
Dr. Edward Heinrichs	B-119 Salk Hall	383-8779	eph8@pitt.edu
Dr. James Manning	B-95 Salk Hall	648-8596	jdm9@pitt.edu
Dr. John Michael	B-97 Salk Hall	648-8595	jjm62@pitt.edu
Dr. Charles Sfeir	B-98 Salk Hall	648-1949	csfeir@cs.cmu.edu
Dr. Alan Timko	B-97 Salk Hall	648-8595	amt42@pitt.edu

**Credit Hours:** 3.0  
**Year/Semester** Third Year, Fall  
**Required/Selective/Elective** Required

### 2. Course Goals

The goal of this course is to provide clinical experience in the field of Periodontics, and related disciplines, for First Professional dental students. The clinical experience will build on the basic biology and pre-clinical lectures in Periodontics aimed at enhancing the competence in diagnosis and management of periodontal conditions/diseases of dental patients.

### 3. Related SDM Competencies (method of evaluation)

- Competency 1. Apply ethical principles to professional practice
- Competency 11. Present and discuss with the patient (or responsible party) the findings, diagnoses and treatment options including the probable benefits, potential outcomes, limitations and risks associated with treatment, the probable consequences of no treatment, estimated fees and patient responsibilities for successful treatment outcomes
- Competency 12. Obtain informed consent for agreed upon care.
- Competency 13. Monitor and evaluate therapeutic outcomes and utilize the results to reassess and modify initial diagnosis and/or treatment  
a) Periodontal Evaluation for Periodontitis Competency form  
b) Patient Education Evaluation Competency form  
c) Periodontal Re evaluation for Periodontitis Competency form
- Competency 14. Implement and monitor infection control, radiation, chemical and environmental safety programs according to current standards
- Competency 17. Manage developmental and acquired oral disorders involving hard and soft tissues  
a) Periodontal Evaluation for Periodontitis Competency form  
b) Patient Education Evaluation Competency form  
c) Sacling and Prophylaxis Competency form  
d) Periodontal Re-evaluation for Periodontitis Competency form
- Competency 28. Diagnose, treat and/or manage patients with periodontal disease and conditions  
a) Periododntal Evaluation for Periodontitis Competency form  
b) Patient Education Evaluation Competency form  
c) Sacling and Prophylaxis Competency form  
d) Periodontal Re-evaluation for Periodontitis Competency form
- Competency 31. Provide patient care that emphasizes prevention of oral diseases and supports the maintenance of systemic and oral health  
a) Patient Education Evaluation Competency form  
b) Periodontal Re-evaluation for Periodontitis Competency form

#### **4. Course Objectives:**

The objectives for the First Professional Periodontics Clinic are for each student to be able to:

1. Perform an accurate clinical periodontal examination and charting
2. Diagnose gingivitis and the different forms of periodontitis
3. Identify primary and contributing etiologic factors in patients with gingivitis and/or periodontitis
4. Establish a prognosis for patients with gingivitis and/or periodontitis
5. Develop a treatment plan for patients with gingivitis, including oral hygiene instruction
6. Develop a treatment plan for initial therapy for patients with periodontitis, including oral hygiene instruction
7. Treat patients with gingivitis, ensuring that the treatment is performed in a timely manner

8. Treat patients with mild to moderate periodontitis, ensuring that the treatment is performed in a timely manner
9. Sequence periodontal treatment effectively with restorative procedures
10. Evaluate the results of initial periodontal therapy
11. Determine the need for surgical periodontal therapy, and either treat or refer patients as deemed appropriate
12. Maintain periodontal health of treated patients
13. Practice concepts of Infection Control  
(Students, faculty and clinical staff will consistently practice infection control procedures as outlined in the University of Pittsburgh School of Dental Medicine's current Exposure Control Guidelines.)

Required Clinical Course in Periodontics (in sequence):

Perio Clinic I:

This course will be offered in the summer of the second year (rising Juniors). At the end of this course, students will complete three preventive and two periodontal evaluations and two quadrants of Scaling/Root Planing.

Perio Clinic II:

This course will be offered in the fall term of the third year. At the end of this course, students are required to complete six preventive cases, three periodontal evaluations, and six quadrants of scaling/root planing. *Note: Cases are cumulative i.e. Periodontics Clinic I and Periodontics Clinic II cases.*

Prerequisite evaluation phase:

The goal of the prerequisite evaluation phase of the student's training is to develop the student's clinical skills through close faculty supervision as the student progresses through the prerequisite clinical procedures; these procedures are as follows:

Evaluation/treatment of gingivitis:

1. Patient evaluation, medical and dental history, meds
2. Initial Therapy (Oral Hygiene Instruction and Scaling/Polish)
3. Reevaluation
4. Supportive Periodontal Therapy

Evaluation/treatment of periodontitis:

1. Patient evaluation, medical and dental history, meds
2. Initial Therapy (Oral Hygiene Instruction and Scaling/Root Planing)
3. Reevaluation
4. Supportive Periodontal Therapy

Each student must complete, with a passing grade, the required number of Prerequisite Evaluation procedures before they will be allowed to progress to the Competency Evaluation phase. However, the required number of prerequisite procedures is merely a **minimum** number of prerequisite procedures that the student must satisfactorily pass. Some students may need to participate in more

than the minimum number of required prerequisites to reach the level of competency necessary to pass the competency phase.

## **5. Evaluation Methods:**

The goal of the Competency Evaluation phase of the student's training is to measure the student's level of competency after satisfactory completion of the minimum number of Prerequisite Evaluation phase procedures. During competency testing, faculty will evaluate the student's ability to meet the competency standards for a specific diagnostic or treatment procedure without faculty guidance. These procedures are as follows:

1. Oral Hygiene Instructions
2. Periodontal Evaluation
3. Scaling and Root Planing
4. Reevaluation

The student's performance on the Competency procedures will be evaluated based on the competency standards for each procedure. The minimum passing grade for each Competency procedure is a C. **Competency Evaluation grades will comprise 50% of the transcript grade plus clinic procedure evaluation grades awarded at the end of each course.**

A grade for clinical periodontics will be calculated and recorded at the end of each course. Periodontics 5279, 5319, 5379, and 5419 will be graded with H/S/U and Perio 5349, and 5449 will be graded with a letter grade. Junior year and senior year grades will represent a cumulative scoring of all competency phase evaluations. Cumulative scores will be translated to a transcript letter grade in accordance with the University of Pittsburgh grading system policy.

Minimum passing grade for these courses is a C.

Students who have not completed the requirement for the course at the end of the term will receive an "I" (Incomplete) grade on their transcript for the Clinical Periodontics course.

Specific Evaluation/Grading for Patient Care:

## Periodontal Evaluation for Periodontitis

School of Dental Medicine      Department of Periodontics

Student name/number: \_\_\_\_\_ Date: \_\_\_\_\_

Patient name: \_\_\_\_\_ Chart: \_\_\_\_\_

The evaluation is a collaborative activity by you and the periodontics faculty to perform the sequenced criteria listed below to meet the standards of the activity as judged by a periodontics faculty member with whom you are working. You must check with the faculty prior to commencing the evaluation, at each activity step, and at the completion of the evaluation. Blue sheet: Faculty copy, Yellow sheet: Student copy

Activity	Criteria	Points	Score
Documentation of Patient	Medical history update	1	
	Soft Tissue Exam	1	
	BP/ pulse	1	
Periodontal Charting	Bleeding index	1	
	Plaque index	1	
	Pocket Depths	1	
	Attachment Levels	1	
	Furcation involvement	1	
	Mobility	1	
	Keratinized gingival width	1	
	Demonstrate instrument use	1	
Case Presentation	Radiographic Evaluation	1	
	Case Summary	1	
	Treatment Plan	1	
Infection Control	Per SDM exposure control guidelines and rationale	1 1	
Patient Management	Oral hygiene instruction	1	
		1	
Student Knowledge	Rationale for diagnosis	1	
	Rationale for therapy	1	

TOTAL \_\_\_\_\_

Grade A: 14-13, B: 12-11, C:10-8, D: 7-6, F: 5 or below GRADE: \_\_\_\_\_

Faculty Signature/Code: \_\_\_\_\_ Date: \_\_\_\_\_

Narrative/Comments: \_\_\_\_\_

### 6. Educational Resources

The Department of Periodontics Clinic Manual (2002-2003) of the University of Pittsburgh and lecture notes from Department lecture and seminar presentations are the primary resource for information. In addition, textbooks in Periodontics, including the required text, Clinical Periodontology, Newman, Takei, and Carranza, 9<sup>th</sup> Edition, Saunders Publishers, are highly recommended as an educational resource.

## 7. Policy and Procedures

The final grade in the course will be based on achieving satisfactory performance as cited above in Evaluation Methods.

Attendance Policy:

The attendance policy in the clinics is in accordance with that outlined in the “University of Pittsburgh School of Dental Medicine Guidelines for Dental Students” handbook.

Remediation:

### I. Prerequisite Phase:

Students must receive at least a C on prerequisite procedures. Students will continue to perform prerequisite procedures until they have received passing grades for the minimum number of required procedures. Once they have done so, they may proceed to participate in their competency tests for that particular category.

### II. Competency Phase:

If a student fails a competency test (Mock Board), he/she will remediate that competency by retaking it. In this instance, the student may decide to participate in additional prerequisite procedures before retaking the competency test.

If the student fails the same Competency Evaluation, they may continue to remediate to a passing competency grade. However, when the student does pass the retake exam (Mock Board), **the grade received on the retake exam will be decreased by one letter grade for each retake the student participated in before achieving a passing grade.**

Faculty may require additional Prerequisite evaluations for a student who has failed a competency or multiple competency tests.

Disabilities:

Students with disabilities who require special testing accommodations or other classroom modifications should notify the instructor and the Office of Disability Resources and Services (DRS) no later than 4<sup>th</sup> week of the term. Students may be asked to provide documentation of their disability to determine the appropriateness of the request. DRS is located in 216 William Pitt Union and can be contacted at 412-648-7890 or (TTY) 412-383-7355.

Students are expected to attend all the clinical session except in the event of illness or emergency. Students must notify the Office of Student Services (412-648-8422) of illness, death in the family, or other unusual circumstances that may necessitate being absent from clinic for more than 4 days. Students are responsible for any clinic missed during their absence. Six unexcused absences from clinic will result in the reduction of the final grade to the next lowest grade.

## 8. Course Schedule

Fall/Spring/Summer Semesters

M-T-W-TH-F            9:00-12:30 PM; 1:30-4:30 PM

## Clinical Periodontics 3

### 1. General Information

**Department:** Periodontics  
**Course Number:** 5349  
**Time/Days:** M, T, W, TH, F  
9:00-12:30 PM  
1:30-4:30 PM  
**Room:** Dental School Clinics  
2<sup>nd</sup>/3<sup>rd</sup> Floors  
**Course Director:** Dr. Ali Seyedain  
B-95 Salk Hall  
(412) 648-8596  
seyedain@pitt.edu

#### Participating Faculty:

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Dr. Stepheny Gordon	B-97 Salk Hall	648-8595	seg45@pitt.edu
Dr. Edward Heinrichs	B-119 Salk Hall	383-8779	eph8@pitt.edu
Dr. James Manning	B-95 Salk Hall	648-8596	jdm9@pitt.edu
Dr. John Michael	B-97 Salk Hall	648-8595	jjm62@pitt.edu
Dr. Charles Sfeir	B-98 Salk Hall	648-1949	csfeir@cs.cmu.edu
Dr. Alan Timko	B-97 Salk Hall	648-8595	amt42@pitt.edu

**Credit Hours:** 3.0

**Year/Semester** Third Year, Spring

Required/Selective/Elective Required

### 2. Course Goals

The goal of this course is to provide clinical experience in the field of Periodontics, and related disciplines, for First Professional dental students. The clinical experience will build on the basic biology and pre-clinical lectures in Periodontics aimed at enhancing the competence in diagnosis and management of periodontal conditions/diseases of dental patients.

### 3. Related SDM Competencies (method of evaluation)

- Competency 1. Apply ethical principles to professional practice
- Competency 11. Present and discuss with the patient (or responsible party) the findings, diagnoses and treatment options including the probable benefits, potential outcomes, limitations and risks associated with treatment, the probable consequences of no treatment, estimated fees and patient responsibilities for successful treatment outcomes
- Competency 12. Obtain informed consent for agreed upon care.
- Competency 13. Monitor and evaluate therapeutic outcomes and utilize the results to reassess and modify initial diagnosis and/or treatment  
a) Periodontal Evaluation for Periodontitis Competency form  
b) Patient Education Evaluation Competency form  
c) Periodontal Re evaluation for Periodontitis Competency form
- Competency 14. Implement and monitor infection control, radiation, chemical and environmental safety programs according to current standards
- Competency 17. Manage developmental and acquired oral disorders involving hard and soft tissues  
a) Periodontal Evaluation for Periodontitis Competency form  
b) Patient Education Evaluation Competency form  
c) Sacling and Prophylaxis Competency form  
d) Periodontal Re-evaluation for Periodontitis Competency form
- Competency 28. Diagnose, treat and/or manage patients with periodontal disease and conditions  
a) Periododntal Evaluation for Periodontitis Competency form  
b) Patient Education Evaluation Competency form  
c) Sacling and Prophylaxis Competency form  
d) Periodontal Re-evaluation for Periodontitis Competency form
- Competency 31. Provide patient care that emphasizes prevention of oral diseases and supports the maintenance of systemic and oral health  
a) Patient Education Evaluation Competency form  
b) Periodontal Re-evaluation for Periodontitis Competency form

#### **4. Course Objectives:**

The objectives for the First Professional Periodontics Clinic are for each student to be able to:

1. Perform an accurate clinical periodontal examination and charting
2. Diagnose gingivitis and the different forms of periodontitis
3. Identify primary and contributing etiologic factors in patients with gingivitis and/or periodontitis
4. Establish a prognosis for patients with gingivitis and/or periodontitis
5. Develop a treatment plan for patients with gingivitis, including oral hygiene instruction



6. Develop a treatment plan for initial therapy for patients with periodontitis, including oral hygiene instruction
7. Treat patients with gingivitis, ensuring that the treatment is performed in a timely manner
8. Treat patients with mild to moderate periodontitis, ensuring that the treatment is performed in a timely manner
9. Sequence periodontal treatment effectively with restorative procedures
10. Evaluate the results of initial periodontal therapy
11. Determine the need for surgical periodontal therapy, and either treat or refer patients as deemed appropriate
12. Maintain periodontal health of treated patients
13. Practice concepts of Infection Control  
(Students, faculty and clinical staff will consistently practice infection control procedures as outlined in the University of Pittsburgh School of Dental Medicine's current Exposure Control Guidelines.)

Required Clinical Course in Periodontics (in sequence):

#### Perio Clinic I:

This course will be offered in the summer of the second year (rising Juniors). At the end of this course, students will complete three preventive and two periodontal evaluations and two quadrants of Scaling/Root Planing.

#### Perio Clinic II:

This course will be offered in the fall term of the third year. At the end of this course, students are required to complete six preventive cases, three periodontal evaluations, and six quadrants of scaling/root planing. *Note: Cases are cumulative i.e. Periodontics Clinic I and Periodontics Clinic II cases.*

#### Perio Clinic III:

This course will be offered in the spring term to third-year students. At the end of this course, students will complete nine preventive cases, one preventive competency, three periodontal evaluations, one periodontal evaluation competency, and eight quadrants of scaling/root planing. *Note: Cases are cumulative i.e. Periodontics Clinic I, Periodontics Clinic II and Periodontics Clinic III cases.*

#### Prerequisite evaluation phase:

The goal of the prerequisite evaluation phase of the student's training is to develop the student's clinical skills through close faculty supervision as the student progresses through the prerequisite clinical procedures; these procedures are as follows:

#### Evaluation/treatment of gingivitis:

1. Patient evaluation, medical and dental history, meds
2. Initial Therapy (Oral Hygiene Instruction and Scaling/Polish)
3. Reevaluation
4. Supportive Periodontal Therapy

#### Evaluation/treatment of periodontitis:

1. Patient evaluation, medical and dental history, meds

2. Initial Therapy (Oral Hygiene Instruction and Scaling/Root Planing)
3. Reevaluation
4. Supportive Periodontal Therapy

Each student must complete, with a passing grade, the required number of Prerequisite Evaluation procedures before they will be allowed to progress to the Competency Evaluation phase. However, the required number of prerequisite procedures is merely a **minimum** number of prerequisite procedures that the student must satisfactorily pass. Some students may need to participate in more than the minimum number of required prerequisites to reach the level of competency necessary to pass the competency phase.

## **5. Evaluation Methods:**

The goal of the Competency Evaluation phase of the student's training is to measure the student's level of competency after satisfactory completion of the minimum number of Prerequisite Evaluation phase procedures. During competency testing, faculty will evaluate the student's ability to meet the competency standards for a specific diagnostic or treatment procedure without faculty guidance. These procedures are as follows:

1. Oral Hygiene Instructions
2. Periodontal Evaluation
3. Scaling and Root Planing
4. Reevaluation

The student's performance on the Competency procedures will be evaluated based on the competency standards for each procedure. The minimum passing grade for each Competency procedure is a C. **Competency Evaluation grades will comprise 50% of the transcript grade plus clinic procedure evaluation grades awarded at the end of each course.**

A grade for clinical periodontics will be calculated and recorded at the end of each course. Periodontics 5279, 5319, 5379, and 5419 will be graded with H/S/U and Perio 5349, and 5449 will be graded with a letter grade. Junior year and senior year grades will represent a cumulative scoring of all competency phase evaluations. Cumulative scores will be translated to a transcript letter grade in accordance with the University of Pittsburgh grading system policy.

Minimum passing grade for these courses is a C.

Students who have not completed the requirement for the course at the end of the term will receive an "I" (Incomplete) grade on their transcript for the Clinical Periodontics course.

Specific Evaluation/Grading for Patient Care:

## Periodontal Evaluation for Periodontitis

School of Dental Medicine      Department of Periodontics

Student name/number: \_\_\_\_\_ Date: \_\_\_\_\_

Patient name: \_\_\_\_\_ Chart: \_\_\_\_\_

The evaluation is a collaborative activity by you and the periodontics faculty to perform the sequenced criteria listed below to meet the standards of the activity as judged by a periodontics faculty member with whom you are working. You must check with the faculty prior to commencing the evaluation, at each activity step, and at the completion of the evaluation. Blue sheet: Faculty copy, Yellow sheet: Student copy

Activity	Criteria	Points	Score
Documentation of Patient	Medical history update	1	
	Soft Tissue Exam	1	
	BP/ pulse	1	
Periodontal Charting	Bleeding index	1	
	Plaque index	1	
	Pocket Depths	1	
	Attachment Levels	1	
	Furcation involvement	1	
	Mobility	1	
	Keratinized gingival width	1	
	Demonstrate instrument use	1	
Case Presentation	Radiographic Evaluation	1	
	Case Summary	1	
	Treatment Plan	1	
Infection Control	Per SDM exposure control guidelines and rationale	1	
		1	
Patient Management	Oral hygiene instruction	1	
		1	
Student Knowledge	Rationale for diagnosis	1	
	Rationale for therapy	1	

TOTAL \_\_\_\_\_

Grade A: 14-13, B: 12-11, C:10-8, D: 7-6, F: 5 or below GRADE: \_\_\_\_\_

Faculty Signature/Code: \_\_\_\_\_ Date: \_\_\_\_\_

Narrative/Comments: \_\_\_\_\_

### 6. Educational Resources

The Department of Periodontics Clinic Manual (2002-2003) of the University of Pittsburgh and lecture notes from Department lecture and seminar presentations are the primary resource for information. In addition, textbooks in Periodontics, including the required text, Clinical Periodontology, Newman, Takei, and Carranza, 9<sup>th</sup> Edition, Saunders Publishers, are highly recommended as an educational resource.

## 7. Policy and Procedures

The final grade in the course will be based on achieving satisfactory performance as cited above in Evaluation Methods.

Attendance Policy:

The attendance policy in the clinics is in accordance with that outlined in the “University of Pittsburgh School of Dental Medicine Guidelines for Dental Students” handbook.

Remediation:

### I. Prerequisite Phase:

Students must receive at least a C on prerequisite procedures. Students will continue to perform prerequisite procedures until they have received passing grades for the minimum number of required procedures. Once they have done so, they may proceed to participate in their competency tests for that particular category.

### II. Competency Phase:

If a student fails a competency test (Mock Board), he/she will remediate that competency by retaking it. In this instance, the student may decide to participate in additional prerequisite procedures before retaking the competency test.

If the student fails the same Competency Evaluation, they may continue to remediate to a passing competency grade. However, when the student does pass the retake exam (Mock Board), **the grade received on the retake exam will be decreased by one letter grade for each retake the student participated in before achieving a passing grade.**

Faculty may require additional Prerequisite evaluations for a student who has failed a competency or multiple competency tests.

Disabilities:

Students with disabilities who require special testing accommodations or other classroom modifications should notify the instructor and the Office of Disability Resources and Services (DRS) no later than 4<sup>th</sup> week of the term. Students may be asked to provide documentation of their disability to determine the appropriateness of the request. DRS is located in 216 William Pitt Union and can be contacted at 412-648-7890 or (TTY) 412-383-7355.

Students are expected to attend all the clinical session except in the event of illness or emergency. Students must notify the Office of Student Services (412-648-8422) of illness, death in the family, or other unusual circumstances that may necessitate being absent from clinic for more than 4 days. Students are responsible for any clinic missed during their absence. Six unexcused absences from clinic will result in the reduction of the final grade to the next lowest grade.

## 8. Course Schedule

Fall/Spring/Summer Semesters

M-T-W-TH-F            9:00-12:30 PM; 1:30-4:30 PM

## Clinical Periodontics 4

### 1. General Information

**Department:** Periodontics  
**Course Number:** 5379  
**Time/Days:** M, T, W, TH, F  
9:00-12:30 PM  
1:30-4:30 PM  
**Room:** Dental School Clinics  
2<sup>nd</sup>/3<sup>rd</sup> Floors  
**Course Director:** Dr. Ali Seyedain  
B-95 Salk Hall  
(412) 648-8596  
seyedain@pitt.edu

#### Participating Faculty:

Dr. Bruce Doll	B-98 Salk Hall	648-1961	bad43@pitt.edu
Dr. Pouran Famili	B-119 Salk Hall	648-8598	pof@pitt.edu
Dr. Stepheny Gordon	B-97 Salk Hall	648-8595	seg45@pitt.edu
Dr. Edward Heinrichs	B-119 Salk Hall	383-8779	eph8@pitt.edu
Dr. James Manning	B-95 Salk Hall	648-8596	jdm9@pitt.edu
Dr. John Michael	B-97 Salk Hall	648-8595	jjm62@pitt.edu
Dr. Charles Sfeir	B-98 Salk Hall	648-1949	csfeir@cs.cmu.edu
Dr. Alan Timko	B-97 Salk Hall	648-8595	amt42@pitt.edu

**Credit Hours:** 3.0  
**Year/Semester** (Summer Semester)  
Required/Selective/Elective Required

### 2. Course Goals

The goal of this course is to provide clinical experience in the field of Periodontics, and related disciplines, for First Professional dental students. The clinical experience will build on the basic biology and pre-clinical lectures in Periodontics aimed at enhancing the competence in diagnosis and management of periodontal conditions/diseases of dental patients.

### **3. Related SDM Competencies (method of evaluation)**

- Competency 1. Apply ethical principles to professional practice
- Competency 11. Present and discuss with the patient (or responsible party) the findings, diagnoses and treatment options including the probable benefits, potential outcomes, limitations and risks associated with treatment, the probable consequences of no treatment, estimated fees and patient responsibilities for successful treatment outcomes
- Competency 12. Obtain informed consent for agreed upon care.
- Competency 13. Monitor and evaluate therapeutic outcomes and utilize the results to reassess and modify initial diagnosis and/or treatment
- a) Periodontal Evaluation for Periodontitis Competency form
  - b) Patient Education Evaluation Competency form
  - c) Periodontal Re evaluation for Periodontitis Competency form
- Competency 14. Implement and monitor infection control, radiation, chemical and environmental safety programs according to current standards
- Competency 17. Manage developmental and acquired oral disorders involving hard and soft tissues
- a) Periodontal Evaluation for Periodontitis Competency form
  - b) Patient Education Evaluation Competency form
  - c) Sacling and Prophylaxis Competency form
  - d) Periodontal Re-evaluation for Periodontitis Competency form
- Competency 28. Diagnose, treat and/or manage patients with periodontal disease and conditions
- a) Periododntal Evaluation for Periodontitis Competency form
  - b) Patient Education Evaluation Competency form
  - c) Sacling and Prophylaxis Competency form
  - d) Periodontal Re-evaluation for Periodontitis Competency form
- Competency 31. Provide patient care that emphasizes prevention of oral diseases and supports the maintenance of systemic and oral health
- a) Patient Education Evaluation Competency form
  - b) Periodontal Re-evaluation for Periodontitis Competency form

### **4. Course Objectives:**

The objectives for the First Professional Periodontics Clinic are for each student to be able to:

1. Perform an accurate clinical periodontal examination and charting
2. Diagnose gingivitis and the different forms of periodontitis
3. Identify primary and contributing etiologic factors in patients with gingivitis and/or periodontitis
4. Establish a prognosis for patients with gingivitis and/or periodontitis

5. Develop a treatment plan for patients with gingivitis, including oral hygiene instruction
6. Develop a treatment plan for initial therapy for patients with periodontitis, including oral hygiene instruction
7. Treat patients with gingivitis, ensuring that the treatment is performed in a timely manner
8. Treat patients with mild to moderate periodontitis, ensuring that the treatment is performed in a timely manner
9. Sequence periodontal treatment effectively with restorative procedures
10. Evaluate the results of initial periodontal therapy
11. Determine the need for surgical periodontal therapy, and either treat or refer patients as deemed appropriate
12. Maintain periodontal health of treated patients
13. Practice concepts of Infection Control  
(Students, faculty and clinical staff will consistently practice infection control procedures as outlined in the University of Pittsburgh School of Dental Medicine's current Exposure Control Guidelines.)

Required Clinical Course in Periodontics (in sequence):

**Perio Clinic I:**

This course will be offered in the summer of the second year (rising Juniors). At the end of this course, students will complete three preventive and two periodontal evaluations and two quadrants of Scaling/Root Planing.

**Perio Clinic II:**

This course will be offered in the fall term of the third year. At the end of this course, students are required to complete six preventive cases, three periodontal evaluations, and six quadrants of scaling/root planing. *Note: Cases are cumulative i.e. Periodontics Clinic I and Periodontics Clinic II cases.*

**Perio Clinic III:**

This course will be offered in the spring term to third-year students. At the end of this course, students will complete nine preventive cases, one preventive competency, three periodontal evaluations, one periodontal evaluation competency, and eight quadrants of scaling/root planing. *Note: Cases are cumulative i.e. Periodontics Clinic I, Periodontics Clinic II and Periodontics Clinic III cases.*

**Perio Clinic IV:**

This course will be offered in the summer, term, of the third year. At the end of this course, students will complete nine preventive cases, one preventive competency, three perio evaluations, one perio evaluation competency, ten quadrants of scaling/root planing, two quadrants of scaling/root planing competency, one perio reevaluation competency. *Note: Cases are cumulative i.e. Periodontics Clinic I, Periodontics Clinic II, Periodontics III and Periodontics Clinic IV cases.*

**Prerequisite evaluation phase:**

The goal of the prerequisite evaluation phase of the student's training is to develop the student's clinical skills through close faculty supervision as the student progresses through the prerequisite clinical procedures; these procedures are as follows:

Evaluation/treatment of gingivitis:

1. Patient evaluation, medical and dental history, meds
2. Initial Therapy (Oral Hygiene Instruction and Scaling/Polish)
3. Reevaluation
4. Supportive Periodontal Therapy

Evaluation/treatment of periodontitis:

1. Patient evaluation, medical and dental history, meds
2. Initial Therapy (Oral Hygiene Instruction and Scaling/Root Planing)
3. Reevaluation
4. Supportive Periodontal Therapy

Each student must complete, with a passing grade, the required number of Prerequisite Evaluation procedures before they will be allowed to progress to the Competency Evaluation phase. However, the required number of prerequisite procedures is merely a **minimum** number of prerequisite procedures that the student must satisfactorily pass. Some students may need to participate in more than the minimum number of required prerequisites to reach the level of competency necessary to pass the competency phase.

## **5. Evaluation Methods:**

The goal of the Competency Evaluation phase of the student's training is to measure the student's level of competency after satisfactory completion of the minimum number of Prerequisite Evaluation phase procedures. During competency testing, faculty will evaluate the student's ability to meet the competency standards for a specific diagnostic or treatment procedure without faculty guidance. These procedures are as follows:

1. Oral Hygiene Instructions
2. Periodontal Evaluation
3. Scaling and Root Planing
4. Reevaluation

The student's performance on the Competency procedures will be evaluated based on the competency standards for each procedure. The minimum passing grade for each Competency procedure is a C. **Competency Evaluation grades will comprise 50% of the transcript grade plus clinic procedure evaluation grades awarded at the end of each course.**

A grade for clinical periodontics will be calculated and recorded at the end of each course. Periodontics 5279, 5319, 5379, and 5419 will be graded with H/S/U and Perio 5349, and 5449 will be graded with a letter grade. Junior year and senior year grades will represent a cumulative scoring of all competency phase evaluations. Cumulative scores will be translated to a transcript letter grade in accordance with the University of Pittsburgh grading system policy.

Minimum passing grade for these courses is a C.



Students who have not completed the requirement for the course at the end of the term will receive an “I” (Incomplete) grade on their transcript for the Clinical Periodontics course.

Specific Evaluation/Grading for Patient Care:

## Periodontal Evaluation for Periodontitis

**School of Dental Medicine      Department of Periodontics**

**Student name/number:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Patient name:** \_\_\_\_\_ **Chart:** \_\_\_\_\_

The evaluation is a collaborative activity by you and the periodontics faculty to perform the sequenced criteria listed below to meet the standards of the activity as judged by a periodontics faculty member with whom you are working. You must check with the faculty prior to commencing the evaluation, at each activity step, and at the completion of the evaluation. Blue sheet: Faculty copy, Yellow sheet: Student copy

Activity	Criteria	Points	Score
Documentation of Patient	Medical history update	1	
	Soft Tissue Exam	1	
	BP/ pulse	1	
Periodontal Charting	Bleeding index	1	
	Plaque index	1	
	Pocket Depths	1	
	Attachment Levels	1	
	Furcation involvement	1	
	Mobility	1	
	Keratinized gingival width	1	
	Demonstrate instrument use	1	
Case Presentation	Radiographic Evaluation	1	
	Case Summary	1	
	Treatment Plan	1	
Infection Control	Per SDM exposure control guidelines and rationale	1	
		1	
Patient Management	Oral hygiene instruction	1	
		1	
Student Knowledge	Rationale for diagnosis	1	
	Rationale for therapy	1	

TOTAL \_\_\_\_\_

Grade A: 14-13, B: 12-11, C:10-8, D: 7-6, F: 5 or below GRADE: \_\_\_\_\_

Faculty Signature/Code: \_\_\_\_\_ Date: \_\_\_\_\_

Narrative/Comments: \_\_\_\_\_

### 6. Educational Resources

The Department of Periodontics Clinic Manual (2002-2003) of the University of Pittsburgh and lecture notes from Department lecture and seminar presentations are the primary resource for information. In addition, textbooks in Periodontics, including the required text, Clinical Periodontology, Newman, Takei, and Carranza, 9<sup>th</sup> Edition, Saunders Publishers, are highly recommended as an educational resource.

### 7. Policy and Procedures

The final grade in the course will be based on achieving satisfactory performance as cited above in Evaluation Methods.

#### Attendance Policy:

The attendance policy in the clinics is in accordance with that outlined in the “University of Pittsburgh School of Dental Medicine Guidelines for Dental Students” handbook.

#### Remediation:

##### I. Prerequisite Phase:

Students must receive at least a C on prerequisite procedures. Students will continue to perform prerequisite procedures until they have received passing grades for the minimum number of required procedures. Once they have done so, they may proceed to participate in their competency tests for that particular category.

##### II. Competency Phase:

If a student fails a competency test (Mock Board), he/she will remediate that competency by retaking it. In this instance, the student may decide to participate in additional prerequisite procedures before retaking the competency test.

If the student fails the same Competency Evaluation, they may continue to remediate to a passing competency grade. However, when the student does pass the retake exam (Mock Board), **the grade received on the retake exam will be decreased by one letter grade for each retake the student participated in before achieving a passing grade.**

Faculty may require additional Prerequisite evaluations for a student who has failed a competency or multiple competency tests.

#### Disabilities:

Students with disabilities who require special testing accommodations or other classroom modifications should notify the instructor and the Office of Disability Resources and Services (DRS) no later than 4<sup>th</sup> week of the term. Students may be asked to provide documentation of their disability to determine the appropriateness of the request. DRS is located in 216 William Pitt Union and can be contacted at 412-648-7890 or (TTY) 412-383-7355.

Students are expected to attend all the clinical session except in the event of illness or emergency. Students must notify the Office of Student Services (412-648-8422) of illness, death in the family, or other unusual circumstances that may necessitate being absent from clinic for more than 4 days. Students are responsible for any clinic missed during their absence. Six unexcused absences from clinic will result in the reduction of the final grade to the next lowest grade.

## 8. Course Schedule

Fall/Spring/Summer Semesters

M-T-W-TH-F 9:00-12:30 PM; 1:30-4:30 PM

## Clinical Periodontics 5

### 1. General Information

**Department:** Periodontics  
**Course Number:** 5419  
**Time/Days:** M, T, W, TH, F  
9:00-12:30 PM  
1:30-4:30 PM  
**Room:** Dental School Clinics  
2<sup>nd</sup>/3<sup>rd</sup> Floors  
**Course Director:** Dr. Ali Seyedain  
B-95 Salk Hall  
(412) 648-8596  
seyedain@pitt.edu

#### Participating Faculty:

Dr. Bruce Doll	B-98 Salk Hall	648-1961	bad43@pitt.edu
Dr. Pouran Famili	B-119 Salk Hall	648-8598	pof@pitt.edu
Dr. Stepheny Gordon	B-97 Salk Hall	648-8595	seg45@pitt.edu
Dr. Edward Heinrichs	B-119 Salk Hall	383-8779	eph8@pitt.edu
Dr. James Manning	B-95 Salk Hall	648-8596	jdm9@pitt.edu
Dr. John Michael	B-97 Salk Hall	648-8595	jjm62@pitt.edu
Dr. Charles Sfeir	B-98 Salk Hall	648-1949	csfeir@cs.cmu.edu
Dr. Alan Timko	B-97 Salk Hall	648-8595	amt42@pitt.edu

**Credit Hours:** 3.0

**Year/Semester** Fourth Year, Fall Semester

Required/Selective/Elective Required

### 2. Course Goals

The goal of this course is to provide clinical experience in the field of Periodontics, and related disciplines, for First Professional dental students. The clinical experience will build on the basic biology and pre-clinical lectures in Periodontics aimed at enhancing the competence in diagnosis and management of periodontal conditions/diseases of dental patients.

### 3. Related SDM Competencies (method of evaluation)

- Competency 1. Apply ethical principles to professional practice
- Competency 11. Present and discuss with the patient (or responsible party) the findings, diagnoses and treatment options including the probable benefits, potential outcomes, limitations and risks associated with treatment, the probable consequences of no treatment, estimated fees and patient responsibilities for successful treatment outcomes
- Competency 12. Obtain informed consent for agreed upon care.
- Competency 13. Monitor and evaluate therapeutic outcomes and utilize the results to reassess and modify initial diagnosis and/or treatment  
a) Periodontal Evaluation for Periodontitis Competency form  
b) Patient Education Evaluation Competency form  
c) Periodontal Re evaluation for Periodontitis Competency form
- Competency 14. Implement and monitor infection control, radiation, chemical and environmental safety programs according to current standards
- Competency 17. Manage developmental and acquired oral disorders involving hard and soft tissues  
a) Periodontal Evaluation for Periodontitis Competency form  
b) Patient Education Evaluation Competency form  
c) Sacling and Prophylaxis Competency form  
d) Periodontal Re-evaluation for Periodontitis Competency form
- Competency 28. Diagnose, treat and/or manage patients with periodontal disease and conditions  
a) Periododntal Evaluation for Periodontitis Competency form  
b) Patient Education Evaluation Competency form  
c) Sacling and Prophylaxis Competency form  
d) Periodontal Re-evaluation for Periodontitis Competency form
- Competency 31. Provide patient care that emphasizes prevention of oral diseases and supports the maintenance of systemic and oral health  
a) Patient Education Evaluation Competency form  
b) Periodontal Re-evaluation for Periodontitis Competency form

#### **4. Course Objectives:**

The objectives for the First Professional Periodontics Clinic are for each student to be able to:

1. Perform an accurate clinical periodontal examination and charting
2. Diagnose gingivitis and the different forms of periodontitis
3. Identify primary and contributing etiologic factors in patients with gingivitis and/or periodontitis
4. Establish a prognosis for patients with gingivitis and/or periodontitis
5. Develop a treatment plan for patients with gingivitis, including oral hygiene instruction
6. Develop a treatment plan for initial therapy for patients with periodontitis, including oral hygiene instruction

7. Treat patients with gingivitis, ensuring that the treatment is performed in a timely manner
8. Treat patients with mild to moderate periodontitis, ensuring that the treatment is performed in a timely manner
9. Sequence periodontal treatment effectively with restorative procedures
10. Evaluate the results of initial periodontal therapy
11. Determine the need for surgical periodontal therapy, and either treat or refer patients as deemed appropriate
12. Maintain periodontal health of treated patients
13. Practice concepts of Infection Control  
(Students, faculty and clinical staff will consistently practice infection control procedures as outlined in the University of Pittsburgh School of Dental Medicine's current Exposure Control Guidelines.)

Required Clinical Courses in Periodontics (in sequence):

Perio Clinic I:

This course will be offered in the summer of the second year (rising Juniors). At the end of this course, students will complete three preventive and two periodontal evaluations and two quadrants of Scaling/Root Planing.

Perio Clinic II:

This course will be offered in the fall term of the third year. At the end of this course, students are required to complete six preventive cases, three periodontal evaluations, and six quadrants of scaling/root planing. *Note: Cases are cumulative i.e. Periodontics Clinic I and Periodontics Clinic II cases.*

Perio Clinic III:

This course will be offered in the spring term to third-year students. At the end of this course, students will complete nine preventive cases, one preventive competency, three periodontal evaluations, one periodontal evaluation competency, and eight quadrants of scaling/root planing. *Note: Cases are cumulative i.e. Periodontics Clinic I, Periodontics Clinic II and Periodontics Clinic III cases.*

Perio Clinic IV:

This course will be offered in the summer, term, of the third year. At the end of this course, students will complete nine preventive cases, one preventive competency, three perio evaluations, one perio evaluation competency, ten quadrants of scaling/root planing, two quadrants of scaling/root planing competency, one perio reevaluation competency. *Note: Cases are cumulative i.e. Periodontics Clinic I, Periodontics Clinic II, Periodontics III and Periodontics Clinic IV cases.*

Perio Clinic V:

This course will be offered in the fall term of the fourth year. At the end of this course, students will complete nine preventive cases, one preventive competency, three perio evaluations, one perio evaluation competency, ten quadrants of scaling/root planing, and three quadrants of scaling/root planing competency. *Note: Cases are cumulative i.e. Periodontics Clinic I, Periodontics Clinic II, Periodontics III, Periodontics IV and Periodontics Clinic V cases.*

Prerequisite evaluation phase:

The goal of the prerequisite evaluation phase of the student's training is to develop the student's clinical skills through close faculty supervision as the student progresses through the prerequisite clinical procedures; these procedures are as follows:

Evaluation/treatment of gingivitis:

1. Patient evaluation, medical and dental history, meds
2. Initial Therapy (Oral Hygiene Instruction and Scaling/Polish)
3. Reevaluation
4. Supportive Periodontal Therapy

Evaluation/treatment of periodontitis:

1. Patient evaluation, medical and dental history, meds
2. Initial Therapy (Oral Hygiene Instruction and Scaling/Root Planing)
3. Reevaluation
4. Supportive Periodontal Therapy

Each student must complete, with a passing grade, the required number of Prerequisite Evaluation procedures before they will be allowed to progress to the Competency Evaluation phase. However, the required number of prerequisite procedures is merely a **minimum** number of prerequisite procedures that the student must satisfactorily pass. Some students may need to participate in more than the minimum number of required prerequisites to reach the level of competency necessary to pass the competency phase.

## 5. Evaluation Methods:

The goal of the Competency Evaluation phase of the student's training is to measure the student's level of competency after satisfactory completion of the minimum number of Prerequisite Evaluation phase procedures. During competency testing, faculty will evaluate the student's ability to meet the competency standards for a specific diagnostic or treatment procedure without faculty guidance. These procedures are as follows:

1. Oral Hygiene Instructions
2. Periodontal Evaluation
3. Scaling and Root Planing
4. Reevaluation

The student's performance on the Competency procedures will be evaluated based on the competency standards for each procedure. The minimum passing grade for each Competency procedure is a C. **Competency Evaluation grades will comprise 50% of the transcript grade plus clinic procedure evaluation grades awarded at the end of each course.**

A grade for clinical periodontics will be calculated and recorded at the end of each course. Periodontics 5279, 5319, 5379, and 5419 will be graded with H/S/U and Perio 5349, and 5449 will be graded with a letter grade. Junior year and senior year grades will represent a cumulative scoring of all

competency phase evaluations. Cumulative scores will be translated to a transcript letter grade in accordance with the University of Pittsburgh grading system policy.

Minimum passing grade for these courses is a C.

Students who have not completed the requirement for the course at the end of the term will receive an “I” (Incomplete) grade on their transcript for the Clinical Periodontics course.



Specific Evaluation/Grading for Patient Care:

## Periodontal Evaluation for Periodontitis

**School of Dental Medicine     Department of Periodontics**

**Student name/number:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Patient name:** \_\_\_\_\_ **Chart:** \_\_\_\_\_

The evaluation is a collaborative activity by you and the periodontics faculty to perform the sequenced criteria listed below to meet the standards of the activity as judged by a periodontics faculty member with whom you are working. You must check with the faculty prior to commencing the evaluation, at each activity step, and at the completion of the evaluation. Blue sheet: Faculty copy, Yellow sheet: Student copy

Activity	Criteria	Points	Score
Documentation of Patient	Medical history update	1	
	Soft Tissue Exam	1	
	BP/ pulse	1	
Periodontal Charting	Bleeding index	1	
	Plaque index	1	
	Pocket Depths	1	
	Attachment Levels	1	
	Furcation involvement	1	
	Mobility	1	
	Keratinized gingival width	1	
	Demonstrate instrument use	1	
Case Presentation	Radiographic Evaluation	1	
	Case Summary	1	
	Treatment Plan	1	
Infection Control	Per SDM exposure control guidelines and rationale	1	
		1	
Patient Management	Oral hygiene instruction	1	
		1	
Student Knowledge	Rationale for diagnosis	1	
	Rationale for therapy	1	

TOTAL \_\_\_\_\_

Grade A: 14-13, B: 12-11, C:10-8, D: 7-6, F: 5 or below GRADE: \_\_\_\_\_

Faculty Signature/Code: \_\_\_\_\_ Date: \_\_\_\_\_

Narrative/Comments: \_\_\_\_\_

### 6. Educational Resources

The Department of Periodontics Clinic Manual (2002-2003) of the University of Pittsburgh and lecture notes from Department lecture and seminar presentations are the primary resource for information. In addition, textbooks in Periodontics, including the required text, Clinical Periodontology, Newman, Takei, and Carranza, 9<sup>th</sup> Edition, Saunders Publishers, are highly recommended as an educational resource.

### 7. Policy and Procedures

The final grade in the course will be based on achieving satisfactory performance as cited above in Evaluation Methods.

## Attendance Policy:

The attendance policy in the clinics is in accordance with that outlined in the “University of Pittsburgh School of Dental Medicine Guidelines for Dental Students” handbook.

## Remediation:

### I. Prerequisite Phase:

Students must receive at least a C on prerequisite procedures. Students will continue to perform prerequisite procedures until they have received passing grades for the minimum number of required procedures. Once they have done so, they may proceed to participate in their competency tests for that particular category.

### II. Competency Phase:

If a student fails a competency test (Mock Board), he/she will remediate that competency by retaking it. In this instance, the student may decide to participate in additional prerequisite procedures before retaking the competency test.

If the student fails the same Competency Evaluation, they may continue to remediate to a passing competency grade. However, when the student does pass the retake exam (Mock Board), **the grade received on the retake exam will be decreased by one letter grade for each retake the student participated in before achieving a passing grade.**

Faculty may require additional Prerequisite evaluations for a student who has failed a competency or multiple competency tests.

## Disabilities:

Students with disabilities who require special testing accommodations or other classroom modifications should notify the instructor and the Office of Disability Resources and Services (DRS) no later than 4<sup>th</sup> week of the term. Students may be asked to provide documentation of their disability to determine the appropriateness of the request. DRS is located in 216 William Pitt Union and can be contacted at 412-648-7890 or (TTY) 412-383-7355.

Students are expected to attend all the clinical session except in the event of illness or emergency. Students must notify the Office of Student Services (412-648-8422) of illness, death in the family, or other unusual circumstances that may necessitate being absent from clinic for more than 4 days. Students are responsible for any clinic missed during their absence. Six unexcused absences from clinic will result in the reduction of the final grade to the next lowest grade.

## 8. Course Schedule

Fall/Spring/Summer Semesters

M-T-W-TH-F 9:00-12:30 PM; 1:30-4:30 PM

## Clinical Periodontics 6

### 1. General Information

**Department:** Periodontics  
**Course Number:** 5449  
**Time/Days:** M, T, W, TH, F  
9:00 AM-12:30 PM  
1:30-4:30 PM  
**Room:** Dental School Clinics  
2<sup>nd</sup>/3<sup>rd</sup> Floors  
**Course Director:** Dr. Ali Seyedain  
B-95 Salk Hall  
(412) 648-8596  
seyedain@pitt.edu

#### Participating Faculty:

Dr. Bruce Doll	B-98 Salk Hall	648-1961	bad43@pitt.edu
Dr. Pouran Famili	B-119 Salk Hall	648-8598	pof@pitt.edu
Dr. Stepheny Gordon	B-97 Salk Hall	648-8595	seg45@pitt.edu
Dr. Edward Heinrichs	B-119 Salk Hall	383-8779	eph8@pitt.edu
Dr. James Manning	B-95 Salk Hall	648-8596	jdm9@pitt.edu
Dr. John Michael	B-97 Salk Hall	648-8595	jjm62@pitt.edu
Dr. Charles Sfeir	B-98 Salk Hall	648-1949	csfeir@cs.cmu.edu
Dr. Alan Timko	B-97 Salk Hall	648-8595	amt42@pitt.edu

**Credit Hours:** 3.0

**Year/Semester** Fourth Year, Spring Semester

Required/Selective/Elective Required

### 2. Course Goals

The goal of this course is to provide clinical experience in the field of Periodontics, and related disciplines, for First Professional dental students. The clinical experience will build on the basic biology and pre-clinical lectures in Periodontics aimed at enhancing the competence in diagnosis and management of periodontal conditions/diseases of dental patients.

### 3. Related SDM Competencies (method of evaluation)

- Competency 1. Apply ethical principles to professional practice
- Competency 11. Present and discuss with the patient (or responsible party) the findings, diagnoses and treatment options including the probable benefits, potential outcomes, limitations and risks associated with treatment, the probable consequences of no treatment, estimated fees and patient responsibilities for successful treatment outcomes
- Competency 12. Obtain informed consent for agreed upon care.
- Competency 13. Monitor and evaluate therapeutic outcomes and utilize the results to reassess and modify initial diagnosis and/or treatment  
a) Periodontal Evaluation for Periodontitis Competency form  
b) Patient Education Evaluation Competency form  
c) Periodontal Re evaluation for Periodontitis Competency form
- Competency 14. Implement and monitor infection control, radiation, chemical and environmental safety programs according to current standards
- Competency 17. Manage developmental and acquired oral disorders involving hard and soft tissues  
a) Periodontal Evaluation for Periodontitis Competency form  
b) Patient Education Evaluation Competency form  
c) Sacling and Prophylaxis Competency form  
d) Periodontal Re-evaluation for Periodontitis Competency form
- Competency 28. Diagnose, treat and/or manage patients with periodontal disease and conditions  
a) Periododntal Evaluation for Periodontitis Competency form  
b) Patient Education Evaluation Competency form  
c) Sacling and Prophylaxis Competency form  
d) Periodontal Re-evaluation for Periodontitis Competency form
- Competency 31. Provide patient care that emphasizes prevention of oral diseases and supports the maintenance of systemic and oral health  
a) Patient Education Evaluation Competency form  
b) Periodontal Re-evaluation for Periodontitis Competency form

#### **4. Course Objectives:**

The objectives for the First Professional Periodontics Clinic are for each student to be able to:

1. Perform an accurate clinical periodontal examination and charting
2. Diagnose gingivitis and the different forms of periodontitis
3. Identify primary and contributing etiologic factors in patients with gingivitis and/or periodontitis
4. Establish a prognosis for patients with gingivitis and/or periodontitis
5. Develop a treatment plan for patients with gingivitis, including oral hygiene instruction

6. Develop a treatment plan for initial therapy for patients with periodontitis, including oral hygiene instruction
7. Treat patients with gingivitis, ensuring that the treatment is performed in a timely manner
8. Treat patients with mild to moderate periodontitis, ensuring that the treatment is performed in a timely manner
9. Sequence periodontal treatment effectively with restorative procedures
10. Evaluate the results of initial periodontal therapy
11. Determine the need for surgical periodontal therapy, and either treat or refer patients as deemed appropriate
12. Maintain periodontal health of treated patients
13. Practice concepts of Infection Control  
(Students, faculty and clinical staff will consistently practice infection control procedures as outlined in the University of Pittsburgh School of Dental Medicine's current Exposure Control Guidelines.)

Required Clinical Courses in Periodontics (in sequence):

Perio Clinic I:

This course will be offered in the summer of the third year (rising Juniors). At the end of this course, students will complete three preventive and two periodontal evaluations and two quadrants of Scaling/Root Planing.

Perio Clinic II:

This course will be offered in the fall of the third year. At the end of this course, students are required to complete six preventive cases, three periodontal evaluations, and six quadrants of scaling/root planing. *Note: Cases are cumulative i.e. Periodontics Clinic I and Periodontics Clinic II cases.*

Perio Clinic III:

This course will be offered in the spring to third-year students. At the end of this course, students will complete nine preventive cases, one preventive competency, three periodontal evaluations, one periodontal evaluation competency, and eight quadrants of scaling/root planing. *Note: Cases are cumulative i.e. Periodontics Clinic I, Periodontics Clinic II and Periodontics Clinic III cases.*

Perio Clinic IV:

This course will be offered in the summer, session one, of the fourth year. At the end of this course, students will complete nine preventive cases, one preventive competency, three perio evaluations, one perio evaluation competency, ten quadrants of scaling/root planing, two quadrants of scaling/root planing competency, one perio reevaluation competency. *Note: Cases are cumulative i.e. Periodontics Clinic I, Periodontics Clinic II, Periodontics III and Periodontics Clinic IV cases.*

Perio Clinic V:

This course will be offered in the fall of the fourth year. At the end of this course, students will complete nine preventive cases, one preventive competency, three perio evaluations, one perio evaluation competency, ten quadrants of scaling/root planing, and three quadrants of scaling/root planing competency. *Note: Cases are cumulative i.e. Periodontics Clinic I, Periodontics Clinic II, Periodontics III, Periodontics IV and Periodontics Clinic V cases.*

Perio Clinic VI:

This course will be offered in the spring of the fourth year. At the end of this course, students will complete nine preventive cases, one preventive competency, three perio evaluations, one perio evaluation competency, ten quadrants of scaling/root planing, four quadrants of scaling/root planing competency, one perio reevaluation competency, and Periodontics Mock Board. *Note: Cases are cumulative i.e. Periodontics Clinic I, Periodontics Clinic II, Periodontics III, Periodontics IV, Periodontics Clinic V, and Periodontics Clinic VI cases.*

Prerequisite evaluation phase:

The goal of the prerequisite evaluation phase of the student's training is to develop the student's clinical skills through close faculty supervision as the student progresses through the prerequisite clinical procedures; these procedures are as follows:

Evaluation/treatment of gingivitis:

1. Patient evaluation, medical and dental history, meds
2. Initial Therapy (Oral Hygiene Instruction and Scaling/Polish)
3. Reevaluation
4. Supportive Periodontal Therapy

Evaluation/treatment of periodontitis:

1. Patient evaluation, medical and dental history, meds
2. Initial Therapy (Oral Hygiene Instruction and Scaling/Root Planing)
3. Reevaluation
4. Supportive Periodontal Therapy

Each student must complete, with a passing grade, the required number of Prerequisite Evaluation procedures before they will be allowed to progress to the Competency Evaluation phase. However, the required number of prerequisite procedures is merely a **minimum** number of prerequisite procedures that the student must satisfactorily pass. Some students may need to participate in more than the minimum number of required prerequisites to reach the level of competency necessary to pass the competency phase.

## **5. Evaluation Methods:**

The goal of the Competency Evaluation phase of the student's training is to measure the student's level of competency after satisfactory completion of the minimum number of Prerequisite Evaluation phase procedures. During competency testing, faculty will evaluate the student's ability to meet the competency standards for a specific diagnostic or treatment procedure without faculty guidance. These procedures are as follows:

1. Oral Hygiene Instructions
2. Periodontal Evaluation
3. Scaling and Root Planing
4. Reevaluation

The student's performance on the Competency procedures will be evaluated based on the competency standards for each procedure. The minimum passing grade for each Competency procedure is a C. **Competency Evaluation grades will comprise 50% of the final grade. Clinic procedure evaluation grades include the other 50% of the final grade.**

A grade for clinical periodontics will be calculated and recorded at the end of each course. Junior year and senior year grades will represent a cumulative scoring of all competency phase evaluations. Cumulative scores will be translated to a transcript letter grade in accordance with the University of Pittsburgh grading system policy.

Minimum passing grade for these courses is a C.

Students who have not completed the requirement for the course at the end of the term will receive an "I" (Incomplete) grade on their transcript for the Clinical Periodontics course.

Specific Evaluation/Grading for Patient Care:

### Periodontal Evaluation for Periodontitis

**School of Dental Medicine      Department of Periodontics**

**Student name/number:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Patient name:** \_\_\_\_\_ **Chart:** \_\_\_\_\_

The evaluation is a collaborative activity by you and the periodontics faculty to perform the sequenced criteria listed below to meet the standards of the activity as judged by a periodontics faculty member with whom you are working. You must check with the faculty prior to commencing the evaluation, at each activity step, and at the completion of the evaluation. Blue sheet: Faculty copy, Yellow sheet: Student copy

Activity	Criteria	Points	Score
Documentation of Patient	Medical history update	1	
	Soft Tissue Exam	1	
	BP/ pulse	1	
Periodontal Charting	Bleeding index	1	
	Plaque index	1	
	Pocket Depths	1	
	Attachment Levels	1	
	Furcation involvement	1	
	Mobility	1	
	Keratinized gingival width	1	
	Demonstrate instrument use	1	
Case Presentation	Radiographic Evaluation	1	
	Case Summary	1	
	Treatment Plan	1	
Infection Control	Per SDM exposure control guidelines and rationale	1	
		1	
Patient Management	Oral hygiene instruction	1	
		1	
Student Knowledge	Rationale for diagnosis	1	
	Rationale for therapy	1	

TOTAL \_\_\_\_\_

Grade A: 14-13, B: 12-11, C:10-8, D: 7-6, F: 5 or below GRADE: \_\_\_\_\_

Faculty Signature/Code: \_\_\_\_\_ Date: \_\_\_\_\_

Narrative/Comments: \_\_\_\_\_

## 6. Educational Resources

The Department of Periodontics Clinic Manual (2002-2003) of the University of Pittsburgh and lecture notes from Department lecture and seminar presentations are the primary resource for information. In addition, textbooks in Periodontics, including the required text, Clinical Periodontology, Newman, Takei, and Carranza, 9<sup>th</sup> Edition, Saunders Publishers, are highly recommended as an educational resource.

## 7. Policy and Procedures

The final grade in the course will be based on achieving satisfactory performance as cited above in Evaluation Methods.

### Attendance Policy:

The attendance policy in the clinics is in accordance with that outlined in the “University of Pittsburgh School of Dental Medicine Guidelines for Dental Students” handbook.

### Remediation:

#### I. Prerequisite Phase:

Students must receive at least a C on prerequisite procedures. Students will continue to perform prerequisite procedures until they have received passing grades for the minimum number of required procedures. Once they have done so, they may proceed to participate in their competency tests for that particular category.

#### II. Competency Phase:

If a student fails a competency test (Mock Board), he/she will remediate that competency by retaking it. In this instance, the student may decide to participate in additional prerequisite procedures before retaking the competency test.

If the student fails the same Competency Evaluation, they may continue to remediate to a passing competency grade. However, when the student does pass the retake exam (Mock Board), **the grade received on the retake exam will be decreased by one letter grade for each retake the student participated in before achieving a passing grade.**

Faculty may require additional Prerequisite evaluations for a student who has failed a competency or multiple competency tests.

### Disabilities:

Students with disabilities who require special testing accommodations or other classroom modifications should notify the instructor and the Office of Disability Resources and Services (DRS) no later than 4<sup>th</sup> week of the term. Students may be asked to provide documentation of their disability to determine the appropriateness of the request. DRS is located in 216 William Pitt Union and can be contacted at 412-648-7890 or (TTY) 412-383-7355.

Students are expected to attend all the clinical sessions except in the event of illness or emergency. Students must notify the Office of Student Services (412-648-8422) of illness, death in the



family, or other unusual circumstances that may necessitate being absent from clinic for more than 4 days. Students are responsible for any clinic missed during their absence. Six unexcused absences from clinic will result in the reduction of the final grade to the next lowest grade.

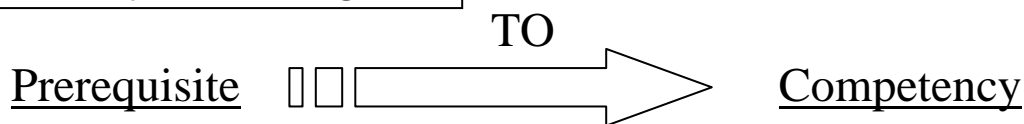
## **8. Course Schedule**


Fall/Spring/Summer Semesters

M-T-W-TH-F 9:00-12:30 PM; 1:30-4:30 PM

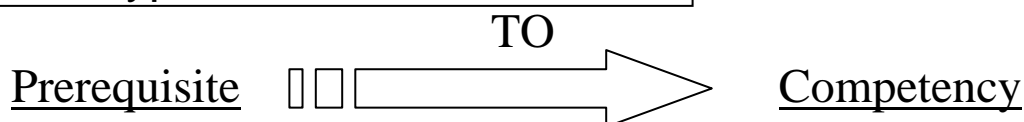
## Clinic Prerequisites and Competency Requirements




### **A. Case Type I: Gingivitis**



1. **10** preventive cases complete  before taking **1** preventive competency
2. Recall of all completed patients or referral to Dental Hygiene

### **B. Case Type II, III, IV: Periodontitis**



1. **3** periodontal evaluations before taking  **1** evaluation competency
2. scaling & root planing before taking  **4** quadrants SC/RP competencies  
**10** quadrants
3. Passing the evaluation before taking  **1** reevaluation competency case  
competency case

\*\*\* Reevaluation of **ALL** patients needed to sign off cases as complete

4. Supportive periodontal therapy of **all** completed patients or referral to Dental Hygiene

Sophomore students **must** have attended the scheduled pre-clinic orientation and the clinic orientation session.

By the end of the Junior year, each student **must** have completed at least the following:

1. Evaluation Competency
2. 6 quadrants of scaling and root planing
3. 5 preventive cases

\*\*\* By the end of the Senior year, each student must have participated, either as an assistant or as a surgeon, in at least 5 surgical procedures.

School of Dental Medicine  
Competencies Addressed by  
The Department of Periodontics

**Competency #1:** Apply ethical principles to professional practice.

**Competency #11:** Present and discuss with the patient (or responsible party) the findings, diagnosis and treatment options including the probable benefits, potential outcomes, limitations and risks associated with treatment, the probable consequences of no treatment, estimated fees and patient responsibilities for successful treatment outcomes.

**Competency #13:** Monitor and evaluate therapeutic outcomes and utilize the results to reassess and modify initial diagnosis and/or treatment.

**Competency #14:** Implement and monitor infection control, radiation, and chemical and environmental safety programs according to current standards.

**Competency #17:** Manage developmental and acquired oral diseases and disorders involving hard and soft tissues.

**Competency # 28:** Diagnose and manage patients with periodontal disease and conditions.

**Competency #31:** Provide patient care that emphasizes prevention of oral diseases and supports the maintenance of systemic and oral health

Periodontics - Substantial

**Competency #1:** Apply ethical principles to professional practice.

Department	Course Name/#	Year	Instructional Format
Periodontics	Periodontology I PERIO 5141	1	Lecture
Periodontics	Periodontics Clinic VI PERIO 5415	4	Clinic

PERIODONTICS - substantial

Competency #11: Present and discuss with the patient (or responsible party) the findings, diagnosis and treatment options including the probable benefits, potential outcomes, limitations and risks associated with treatment, the probable consequences of no treatment, estimated fees and patient responsibilities for successful treatment outcomes.

Department	Course Name/#	Year	Instructional Format
Periodontics	Periodontology I PERIO5141	1	Lecture
Periodontics	Periodontics Clinic II PERIO 5319	2	Clinic
Periodontics	Periodontics Clinic III PERIO 5349	3	Clinic
Periodontics	Periodontology V PERIO 5344	3	Lecture

**Competency #13:** Monitor and evaluate therapeutic outcomes and utilize the results to reassess and modify initial diagnosis and/or treatment.

Instructional

Unit(s): Comprehensive Care Module (Periodontics)

Educational Outcome:

Periodontics:

Students demonstrate an ability to perform the following behaviors,

- a) Integrate acquired foundational knowledge and recognize the normal range of periodontal clinical findings.

- b) Integrate acquired foundational knowledge and recognize deviations from the normal range of periodontal clinical findings.
- c) Evaluate necessity to modify initial diagnosis following a re-evaluation for periodontitis
- d) Recognize factors which may affect the patient's periodontal prognosis.
- e) Recognize and utilize the availability of support/referral systems capable of responding to the patient's periodontal treatment needs.
- f) Evaluate therapeutic outcome of initial periodontal therapy following a re-evaluation
- g) Understand the rationale for establishing a periodontal maintenance program for the patient.
- h) Perform periodontal charting (pocket depths, attachment levels, mobility, furcation involvements , mobility, keratinized gingival)
- i) Perform infection control, patient management, oral hygiene instructions, patient education

<b>Course Name/#</b>	<b>Year</b>	<b>Instructional Format</b>	<b>Competency Component(s)</b>	<b>Evaluation for Course</b>
Periodontics Clinic I PERIO 5279	2	Clinic	Integration of foundation knowledge, skill and value	Periodontics competency, progression and evaluation form
Periodontology I PERIO 5141	1	Lecture	Foundation knowledge	Multiple Choice examinations
Periodontics Clinic II PERIO 5319	2	Clinic	Integration of foundation knowledge, skill and value	Periodontics competency, progression and evaluation form
Periodontology II 5211	2	Lecture	Foundation knowledge	Multiple Choice examinations
Periodontics Clinic III PERIO 5349	3	Clinic	Integration of foundation knowledge, skill and value	Periodontics competency, progression and evaluation form
Periodontology III 5242	2	Lecture	Foundation knowledge	Multiple Choice examinations
Periodontics Clinic IV PERIO 5379	3	Clinic	Foundation knowledge, Integration of skill and value	Periodontics competency, progression evaluation form

Periodontology IV 5313	3	Lecture	Foundation knowledge	Multiple Choice examinations
Periodontics Clinic V PERIO 5419	4	Clinic	Integration of foundation knowledge, skill and value	Periodontics competency, progression and evaluation form
Periodontology V PERIO 5344	3	Lecture	Foundation knowledge	Multiple Choice examinations
Periodontics Clinic VI PERIO 5415	4	Clinic	Integration of foundation knowledge, skill and value	Periodontics competency, progression and evaluation form
Periodontology VI PERIO 5449	4	Lecture	Foundation knowledge	Multiple Choice examinations

A student has demonstrated the above competency if he/she:

- 1) Has successfully passed all of the above courses.
- 2) Has received “has achieved competency” on the following forms related to the above competency:
- 3)
  - a) Periodontal Evaluation for Periodontitis Competency form
  - b) Patient Education Evaluation Competency form
  - c) Periodontal Re evaluation for Periodontitis Competency form

Departments taking substantial but not primary responsibility for this competency:

Comprehensive Care Module (Endodontics, Periodontics, Prosthodontics and Restorative)  
 Oral and Maxillofacial Surgery  
 Oral Medicine / Pathology  
 Orthodontics  
 Pediatric Dentistry  
 Radiology

**Competency #14:** Implement and monitor infection control, radiation, and chemical and environmental safety programs according to current standards.

Department	Course Name/#	Year	Instructional Format
Periodontics	Periodontics Clinic I PERIO 5279	2	Clinic

Periodontics	Periodontics Clinic III PERIO 5349	3	Clinic
Periodontics	Periodontics Clinic VI PERIO 5415	4	Clinic

**Competency #17:** Manage developmental and acquired oral diseases and disorders involving hard and soft tissues.

Instructional Units: Comprehensive Care Module (Periodontics)

Periodontics:

Educational Outcomes:

Students will demonstrate behavior consistent with the following:

- a) Integrate foundational knowledge to understand the normal range of periodontal clinical and radiographic findings
- b) Integrate acquired foundational knowledge and recognize deviations from the normal range of periodontal clinical and radiographic findings
- c) Discuss a differential diagnosis for periodontal conditions at a beginning level.
- d) Perform periodontal charting (pocket depths, attachment levels, furcation involvements, mobility, keratinized gingival) and radiographic analysis
- e) Perform infection control, patient management, oral hygiene instructions, patient education
- f) Recommend non-surgical periodontal therapy to resolve and improve the periodontal condition
- g) Perform scaling and prophylaxis to remove supra and subgingival calculus and resolve the periodontal condition
- h) Demonstrate proper technique with periodontal instrumentation
- i) Demonstrate tissue management while performing scaling and prophylaxis
- j) Perform periodontal charting (pocket depths, attachment levels, mobility, furcation involvements, mobility, keratinized gingival)
- k) Recognize and utilize the availability of support/referral systems capable of responding to the patient's periodontal treatment needs

<b>Course Name/#</b>	<b>Year</b>	<b>Instructional Format</b>	<b>Competency Component(s)</b>	<b>Evaluation for Course</b>
Introduction to Preventive Dentistry PERIO 5151	1	Lecture	Integration of foundation knowledge, skill and value	Multiple Choice examinations,
Periodontics Clinic I PERIO 5279	2	Clinic	Integration of foundation knowledge, skill and value	Periodontics competency, progression and evaluation form
Introduction to Clinical Periodontics PERIO 5178	2	Clinic	Orientation to clinical practice of periodontics – foundation skill and value	Individual Clinical Performance
Periodontology I PERIO 5141	1	Lecture	Foundation knowledge	Multiple Choice examinations
Periodontics Clinic II PERIO 5319	2	Clinic	Integration of foundation knowledge, skill and value	Periodontics competency, progression and evaluation form
Periodontology II 5211	2	Lecture	Foundation knowledge	Multiple Choice examinations
Periodontics Clinic III PERIO 5349	3	Clinic	Integration of foundation knowledge, skill and value	Periodontics competency, progression and evaluation form
Periodontology III 5242	2	Lecture	Foundation knowledge	Multiple Choice examinations
Periodontics Clinic IV PERIO 5379	3	Clinic	Foundation knowledge, Integration of skill and value	Periodontics competency, progression evaluation form
Periodontology IV 5313	3	Lecture	Foundation knowledge	Multiple Choice examinations
Periodontics Clinic PERIO V 5419	4	Clinic	Integration of foundation knowledge, skill and value	Periodontics competency, progression and evaluation form
Periodontology V 5344	3	Lecture	Foundation knowledge	Multiple Choice examinations
Periodontics Clinic VI PERIO 5415	4	Clinic	Integration of foundation knowledge, skill and value	Periodontics competency, progression and evaluation form
Periodontology VI PERIO 5449	4	Lecture	Foundation knowledge	Multiple Choice examinations



A student has demonstrated the above competency if he/she:

- 1) Has successfully passed all of the above courses.
  - 2) Has received “has achieved competency” on the following competency forms related to the above competency:
    - a) Periodontal Evaluation for Periodontitis Competency form
    - b) Patient Education Evaluation Competency form
    - c) Scaling and Prophylaxis Competency form
    - d) Periodontal Re-evaluation for Periodontitis Competency form

Departments taking substantial but not primary responsibility for this competency:

Anatomy and Histology  
 Oral and Maxillofacial Surgery  
 Oral Medicine / Pathology  
 Orthodontics

Department	Course Name/#	Year	Instructional Format
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**Competency # 28:** Diagnose and manage patients with periodontal disease and conditions.

Primary Instructional Unit: Comprehensive Care Module (Periodontics)

Educational Outcome:

Periodontics:

Students demonstrate an ability to perform the following behaviors,

- a) Integrate acquired foundational knowledge and recognize the normal range of periodontal clinical and radiographic findings.
- b) Integrate acquired foundational knowledge and recognize deviations from the normal range of periodontal clinical and radiographic findings
- c) Recommend a periodontal diagnosis for the patient
- d) Recognize factors which may affect the patient’s periodontal prognosis
- e) Recognize and utilize the availability of support/referral systems capable of responding to the patient’s periodontal treatment needs
- f) Treat the periodontal conditions by clinical and pharmacological intervention.
- g) Understand the rationale for establishing and implementing a periodontal maintenance program for the patient
- h) Perform periodontal charting (pocket depths, attachment levels, furcation involvements, mobility, keratinized gingival) and periodontal radiographic analysis
- i) Perform infection control, patient management, oral hygiene instructions, patient education
- j) Recognize the indications for non-surgical periodontal therapy
- k) Perform scaling and prophylaxis to remove supra and subgingival calculus to resolve the periodontal condition
- l) Demonstrate proper technique with periodontal instrumentation
- m) Demonstrate tissue management while performing scaling and prophylaxis

<b>Course Name/#</b>	<b>Year</b>	<b>Instructional Format</b>	<b>Competency Component(s)</b>	<b>Evaluation for Course</b>
Introduction to Preventive Dentistry PERIO 5151	1	Lecture	Integration of foundation knowledge, skill and value	Multiple Choice examinations
Periodontics Clinic I PERIO 5279	2	Clinic	Integration of foundation knowledge, skill and value	Periodontic competency, progression and evaluation form
Introduction to Clinical Periodontics PERIO 5178	2	Clinic	Orientation to clinical practice of periodontics – foundation skill and value	Individual Clinical Performance
Periodontology I PERIO 5141	1	Lecture	Foundation knowledge	Multiple Choice examinations
Periodontics Clinic II PERIO 5319	2	Clinic	Integration of foundation knowledge, skill and value	Periodontic competency, progression and evaluation form
Periodontology II PERIO 5211	2	Lecture	Foundation knowledge	Multiple Choice examinations
Periodontics Clinic III PERIO 5349	3	Clinic	Integration of foundation knowledge, skill and value	Periodontic competency, progression and evaluation form
Periodontology III PERIO 5242	2	Lecture	Foundation knowledge	Multiple Choice examinations
Periodontics Clinic IV PERIO 5379	3	Clinic	Foundation knowledge, Integration of skill and value	Periodontic competency, progression evaluation form
Periodontology IV PERIO 5313	3	Lecture	Foundation knowledge	Multiple Choice examinations
Periodontics Clinic V PERIO 5419	4	Clinic	Integration of foundation knowledge, skill and value	Periodontic competency, progression and evaluation form
Periodontology V 5344	3	Lecture	Foundation knowledge	Multiple Choice examinations
Periodontics Clinic VI PERIO 5415	4	Clinic	Integration of foundation knowledge, skill and value	Periodontic competency, progression and evaluation form
Periodontology VI PERIO 5449	4	Lecture	Foundation knowledge	Multiple Choice examinations

A student has demonstrated the above competency if he/she:

- 1) Has successfully passed all of the above courses.
- 4) Has received “has achieved competency” on the following forms related to the above competency:
  - a) Periodontal Evaluation for Periodontitis Competency form
  - b) Patient Education Evaluation Competency form
  - c) Scaling and Prophylaxis Competency form
  - d) Periodontal Re evaluation for Periodontitis Competency form

Departments taking substantial but not primary responsibility for this competency:  
None presently

**Competency #31:** Provide patient care that emphasizes prevention of oral diseases and supports the maintenance of systemic and oral health.

Instructional Units: Comprehensive Care Module (Periodontics)

Educational Outcomes:

- a) Integrate acquired foundation knowledge and recognize their patient’s oral health.
- b) Integrate acquired foundation knowledge and recognize the importance of prevention of periodontal diseases, by recording plaque indices, and customize educational care based on the patients ‘ ability and interest in performance of home dental care instructions
- c) Describe and demonstrate plaque control instructions, brushing and flossing and us of other dental aids as needed
- d) Describe the etiology of plaque, periodontal disease, and dental caries in language that was easily understood by the patient.
- e) Recognize the need for interdisciplinary (specialty) treatment coordination
- f) Recognize and utilize the availability of support/referral systems capable of responding to the patient’s periodontal treatment needs including maintenance/recall care

Course Name/#	Year	Instructional Format	Competency Component(s)	Evaluation for Course
Introduction to Preventive Dentistry PERIO 5151	1	Lecture	Integration of foundation knowledge, skill and value	Multiple Choice examinations
Periodontics Clinic I PERIO 5279	2	Clinic	Integration of foundation knowledge, skill and value	Periodontics competency, progression and evaluation form
Introduction to	2	Clinic	Orientation to	Individual

Clinical Periodontics PERIO 5178			clinical practice of periodontics – foundation skill and value	Clinical Performance
Periodontology I PERIO 5141	1	Lecture	Foundation knowledge	Multiple Choice examinations
Periodontics Clinic II PERIO 5319	2	Clinic	Integration of foundation knowledge, skill and value	Periodontics competency, progression and evaluation form
Periodontology II PERIO 5211	2	Lecture	Foundation knowledge	Multiple Choice examinations
Periodontics Clinic III PERIO 5349	3	Clinic	Integration of foundation knowledge, skill and value	Periodontics competency, progression and evaluation form
Periodontology III PERIO 5242	2	Lecture	Foundation knowledge	Multiple Choice examinations
Periodontics Clinic IV PERIO 5379	3	Clinic	Foundation knowledge, Integration of skill and value	Periodontics competency, progression evaluation form
Periodontology IV PERIO 5313	3	Lecture	Foundation knowledge	Multiple Choice examinations
Periodontics Clinic V PERIO 5419	4	Clinic	Integration of foundation knowledge, skill and value	Periodontics competency, progression and evaluation form
Periodontology V PERIO 5344	3	Lecture	Foundation knowledge	Multiple Choice examinations
Periodontics Clinic VI PERIO 5415	4	Clinic	Integration of foundation knowledge, skill and value	Periodontics competency, progression and evaluation form
Periodontology VI PERIO 5449	4	Lecture	Foundation knowledge	Multiple Choice examinations

A student has demonstrated the above competency if he/she:

- 1) Has successfully passed all of the above courses.
- 2) Has received “has achieved competency” on the following forms related to the above competency:
  - a) Patient Education Evaluation Competency form
  - b) Periodontal Re-evaluation for Periodontitis Competency form

Departments taking substantial but not primary responsibility for this competency:

Microbiology / Biochemistry  
Oral and Maxillofacial Surgery  
Pediatric Dentistry  
Physiology/Pharmacology  
Radiology

TO BE COMPLETED BY SUBMISSION OF DEPARTMENTS

# Department of Periodontics

## Criteria for Patient Management

The following are criteria that the student will follow in the management of care for their periodontal patients.

### General:

- Students will comply with the School of Dental Medicine Infection Control Guidelines at all times.
- **All new patients (except edentulous patients) assigned to dental students must be screened in the Clinic Module System for the determination of the patient's periodontal status prior to any treatment (except for emergency treatment).**
- Consultations from other Departments must be obtained and must be documented.
- All dental treatment must be provided in the appropriate sequence:  
**No prosthetic treatment (crowns, fixed or removable partial dentures) will be provided until after periodontal reevaluation is completed unless as an emergency procedure or unless specific written permission is given by Department of Periodontics faculty. (Patients must be periodontally "stable" prior to any prosthetic treatment or extensive restorative treatment)**
- Improper Treatment Sequence  
If a student fails to follow proper treatment sequence (provides unauthorized operative procedures, crowns, fixed or removable partial dentures) before periodontal reevaluation and treatment is completed, that student may be required to remediate this breach of policy by completing the treatment of additional periodontal cases in addition to the minimum clinical requirements. In this case, upon discovery of breach of this treatment sequence policy, a committee appointed by the Department of Periodontics Chair will meet to review the case, determine the necessary remediation and notify the student of the necessary remediation.
- Procedures that may be provided prior to initiation of a periodontal evaluation:
  - \* emergency treatment
  - \* operative procedures (approved by a faculty member in the Department of Periodontics or the Clinical Module System)
  - \* endodontic therapy (student and the endodontic faculty will be responsible for determining that the periodontal status of the dentition is appropriate for endodontic treatment. They will also assure that the patient will have the opportunity to subsequently receive proper periodontal evaluation and treatment planning in a timely fashion)
  - \* extractions
- Diagnosis updates may be obtained during Periodontal Recall appointments if non-periodontal treatment needs do not exceed a few amalgam or composite resin restorations.
- Department of Periodontics Case Management Guidelines will be followed for all cases treated.

# **American Academy of Periodontology Classification of the Periodontal Diseases**

## **I. Gingival Diseases**

- A. Dental Plaque-induced gingival diseases
  1. Gingivitis associated with dental plaque only
  2. Gingival diseases modified by systemic factors
  3. Gingival diseases modified by medications
  4. Gingival diseases modified by malnutrition
  
- B. Non-plaque-induced gingival lesions
  1. Gingival diseases of specific bacterial origin
  2. Gingival diseases of viral origin
  3. Gingival diseases of fungal origin
  4. Gingival diseases of genetic origin
  5. Gingival manifestations of systemic conditions
    - mucocutaneous disorders
    - allergic reactions
  6. Traumatic lesions
  7. Foreign body reactions
  8. Not otherwise specified (NOS)

## **II. Chronic Periodontitis**

- A. Localized
- B. Generalized

## **III. Aggressive Periodontitis**

- A. Localized
- B. Generalized

## **IV. Periodontitis as a Manifestation of Systemic Diseases**

- A. Associated with hematological disorders
- B. Associated with genetic disorders
- C. Not otherwise specified (NOS)

## **V. Necrotizing Periodontal Diseases**

- A. Necrotizing ulcerative gingivitis (NUG)
- B. Necrotizing ulcerative periodontitis (NUP)

## **VI. Abscesses of the Periodontium**

- A. Gingival abscess
- B. Periodontal abscess

C. Pericoronal abscess

## **VII. Periodontitis Associated With Endodontic Lesions**

A. Combined periodontic-endodontic lesions

## **VII. Developmental or Acquired Deformities and Conditions**

A. Localized tooth-related factors that modify or predispose to plaque-induced gingival diseases/periodontitis

1. Gingival/soft tissue recession
2. Lack of keratinized gingiva
3. Decreased vestibular depth
4. Aberrant frenum/muscle position
5. Gingival excess
6. Abnormal color

B. Mucogingival deformities and conditions around teeth

C. Mucogingival deformities and conditions on edentulous ridges

D. Occlusal trauma

1. Primary occlusal trauma
2. Secondary occlusal trauma

### ***Missing Periodontal Case Types***



## Prophylaxis

A dental prophylaxis is a preventive procedure designed to remove plaque, calculus and stains from the exposed and unexposed surfaces of the teeth by scaling and polishing. This procedure includes:

- 1) **supra-** and **sub-gingival** scaling (instrumentation of the crown and root surfaces of the teeth to remove plaque, calculus and stains from these surfaces), and
- 2) polishing procedures to remove plaque and stain.

In addition, a prophylaxis is always accompanied by an evaluation of the patient's home care efforts and instructions in improving oral hygiene.

## Scaling and Root Planing

Scaling is defined as “instrumentation of the crown and root surfaces of the teeth to remove plaque, calculus and stains from these surfaces” (AAP Glossary of Terms).

Root planing is defined as “a treatment procedure designed to remove cementum or surface dentin that is rough, impregnated with calculus, or contaminated with toxins or microorganisms” (AAP Glossary of Terms). Root planing can only be accomplished in patients who have loss of attachment due to inflammatory periodontal disease.

Scaling and root planing is usually accomplished by quadrant. Patient comfort during the procedure is the primary consideration in determining the need for local anesthetic.

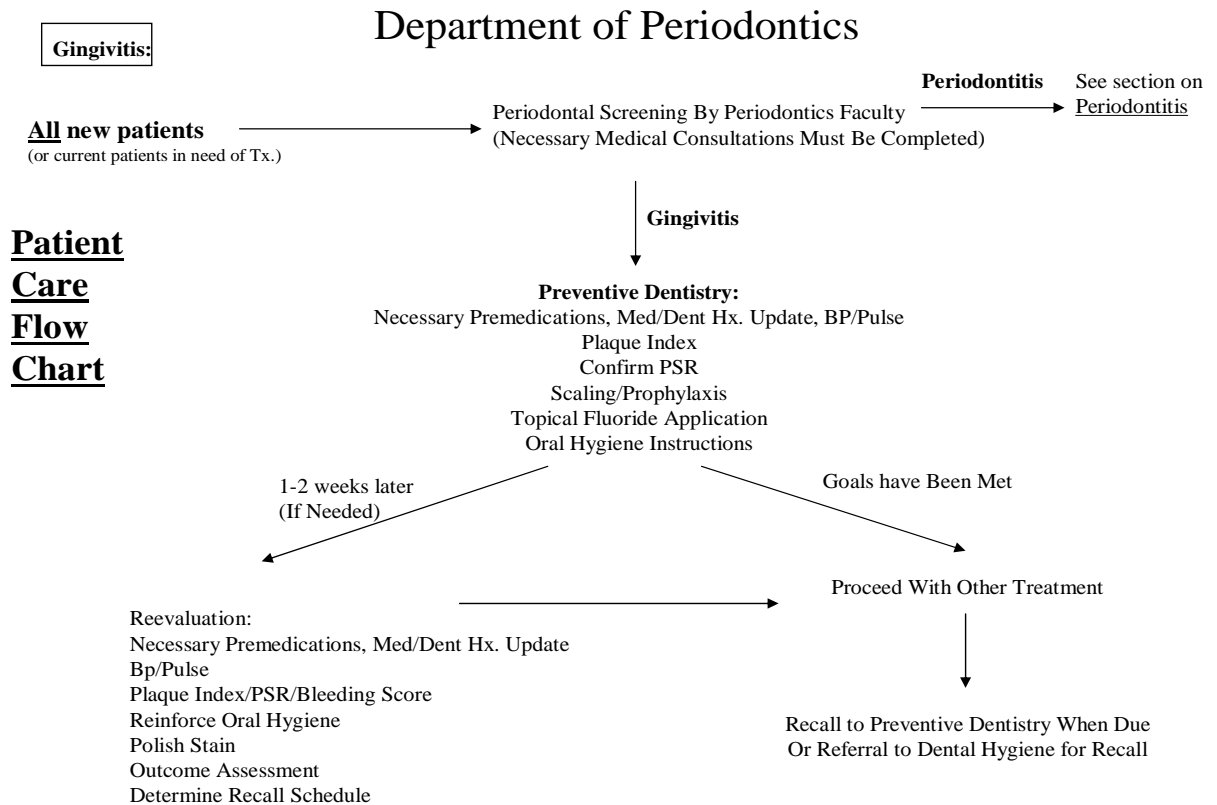
If the patient presents with moderate or heavy supra- or sub-gingival deposits, ultrasonic (Cavitron) or sonic (Densonic) instruments may be utilized to remove the calculus deposits. After using an ultrasonic or sonic device, the teeth should then be planed with hand instruments to complete the root planing procedure.

Scaling and root planing is always accompanied by an evaluation of the patient's home care efforts and instruction in improving oral hygiene.

Polishing the teeth and topical fluoride application are accomplished at the last scaling and root planing appointment.

## C. Case Management and Documentation - Gingivitis

### Patient Care Flow Chart



## Case Management Guidelines

### Case Management Guidelines: Gingivitis

#### Case Type I: Gingivitis

- Visit 1:**
- 1. Confirm medical and dental histories. Record pulse and blood pressure.
  - 2. Evaluate and record visual assessment of the gingival tissues
  - 3. Record plaque index (% dirty)
  - 5. Repeat PSR
  - 5. Record bleeding index using PSR probe (% bleeding)
  - 6. Perform oral hygiene instruction using disclosed patient
  - 7. Remove all plaque and calculus deposits
  - 8. Polish and apply topical fluoride
  - 9. Complete the Risk Assessment form.

- Visit 2:** 1-2 weeks after completion of Visit 1 procedures.
- 1. Confirm medical and dental histories. Record pulse and blood pressure.
  - 2. Record plaque index (% dirty)
  - 3. Record bleeding index using PSR probe (% bleeding)
  - 4. Reinforce oral hygiene instruction as necessary
  - 5. Polish to remove remaining plaque and stain
  - 6. Written evaluation of outcome in Progress Notes (outcomes assessment)
  - 7. Determine and record recall schedule
  - 8. Final grade on completion of second visit

**It is anticipated that gingivitis cases will be complete within 2 weeks of the initial visit.**

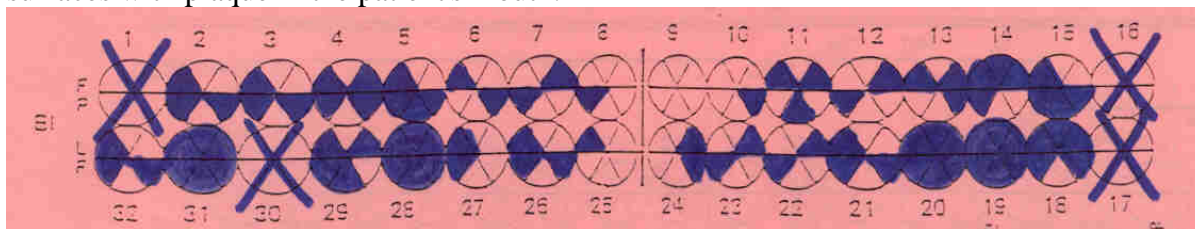
## Recording a Plaque Index in Gingivitis Cases

The plaque index is recorded at Visit 1 and Visit 2 in gingivitis cases on the University of Pittsburgh Periodontics Record Periodontal Indices form.

To stain the teeth for a plaque index, saturate a cotton swab with liquid disclosing solution. Apply the solution along the dentogingival junction (the junction between the free gingival margin and the tooth structure) on each tooth. Use the water syringe to rinse the patient's mouth. Have the patient swish the water and then suction the water out.

To record the presence of plaque, examine six surfaces on each tooth (DF, F, MF, DL, L, ML) for the presence of stained plaque at the dentogingival junction. Record areas that have plaque on the plaque index form.

To calculate the plaque index, multiply the number of teeth present in the patient's mouth by 6 - this gives the number of surfaces present that could have had plaque. Divide this number into the total number of surfaces recorded as having plaque present. Multiply this number by 100 to give the % surfaces with plaque in the patient's mouth.



Example:  $28 \times 6 = 168$  total surfaces that could have plaque

79 = total surfaces that did have plaque

$79/168 = 0.47$

$0.47 \times 100 = 47\%$  dirty surfaces

## Periodontal Screening and Recording

Reference Markings on the WHO probe: 0-3.5mm, 3.5-5.5mm, >5.5mm.

Visibility of Reference Markings	Additional Findings	Code for sextant
Colored area visible in all sites	None	0 or 0*
Colored area visible in all sites	Bleeding on probing	1 or 1*
Colored area visible in all sites	Calculus or overhangs	2 or 2*
Colored area partially visible in $\geq 1$ site in sextant	None	3 or 3*
Colored area not visible in $\geq 1$ site in sextant	None	4 or 4*

\* indicates abnormality including but not limited to furcation involvement, mobility, mucogingival problems, recession extending to the colored area of the probe (3.5mm or greater).

Highest Code Assigned	Action to be Taken
0	Record PSR and treat patient as a healthy case.
0*	Record PSR, obtain periodontics faculty consult and document as deemed necessary.
1	Record PSR and treat patient as a gingivitis case.
1*	Record PSR, obtain periodontics faculty consult and document as deemed necessary.
2	Record PSR and treat patient as a gingivitis case.
2*	Record PSR, obtain periodontics faculty consult and document as deemed necessary.
3 or 3*	Record PSR and perform a complete clinical periodontal examination and charting.
4 or 4*	Record PSR and perform a complete clinical periodontal examination and charting.

### Documenting PSR Scores

Results of PSR examinations conducted during Visit 1 for gingivitis cases are recorded in the daily progress notes.

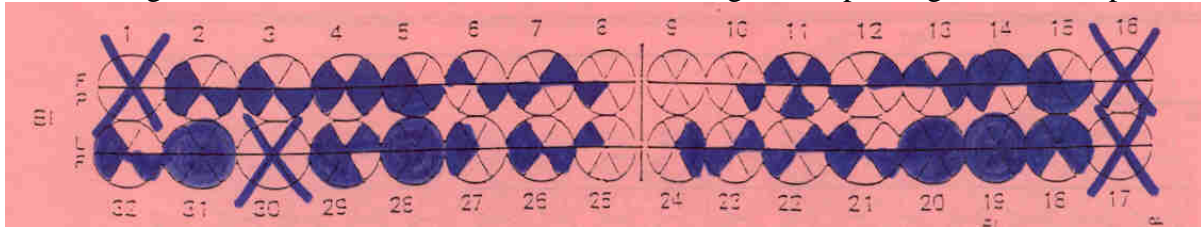
## Recording a Bleeding Index in Gingivitis Cases

The bleeding index is recorded at Visit 1 and at Visit 2 in gingivitis cases on the University of Pittsburgh Periodontics Record Periodontal Indices form.

To examine the periodontium for bleeding on probing (BOP), the periodontal probe is inserted to the depth of the sulcus at three sites on the facial of each tooth in a quadrant (DF, F, MF). Prior to letting the patient close their mouth, examine each of the three areas of all the teeth in that quadrant for the presence of bleeding on probing. Conduct a similar examination from the lingual aspect (DL, L, ML) of all teeth in that same quadrant. This examination is conducted in the same manner for all quadrants and can be performed at the same time as recording probing pocket depths and attachment levels.

Sites that demonstrate the presence of bleeding on probing are recorded on the bleeding index form.

To calculate the bleeding index, multiply the number of teeth present in the patient's mouth by 6 - this is the total number of surfaces present that could have demonstrated bleeding on probing. Divide this number into the total number of surfaces recorded as having bleeding present. Multiply this number by 100 to give the % surfaces with bleeding on probing in the patient's mouth.



Example:  $28 \times 6 = 168$  Total number of sites that could have BOP

87 = total sites that did have BOP

$87/168 = 0.52$

$0.52 \times 100 = 52\%$  sites with BOP

## Prophylaxis

A dental prophylaxis is a preventive procedure designed to remove plaque, calculus and stains from the exposed and unexposed surfaces of the teeth by scaling and polishing. This procedure includes:

- 1) **supra-** and **sub-gingival** scaling (instrumentation of the crown and root surfaces of the teeth to remove plaque, calculus and stains from these surfaces), and
- 2) polishing procedures to remove plaque and stain.

In addition, a prophylaxis is always accompanied by an evaluation of the patient's home care efforts and instructions in improving oral hygiene.

## Topical Fluoride Application

A topical fluoride application is to be performed on patients as needed following a prophylaxis procedure. Topical fluoride is applied as follows:

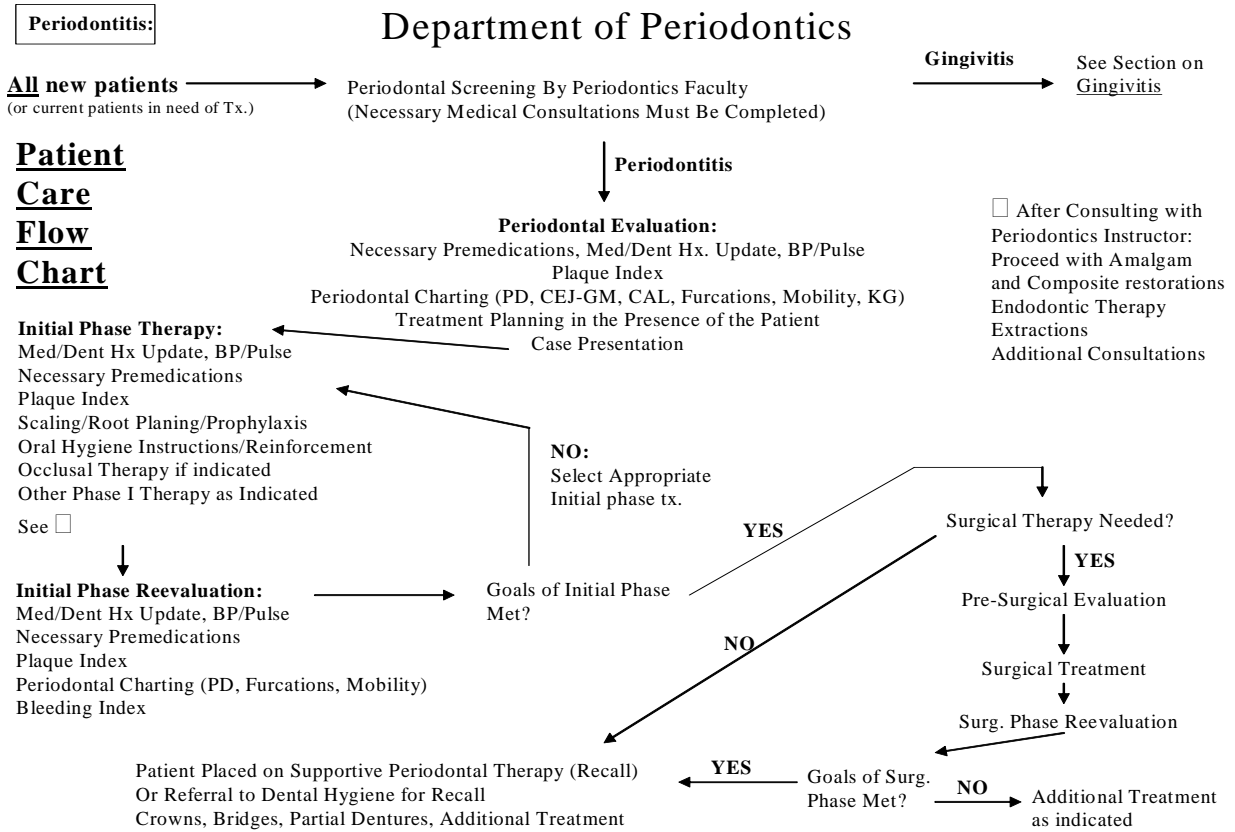
- 1) sit the patient in an upright position
- 2) select the appropriate disposable trays for the patient and line them with either 2.59% acidulated phosphate fluoride gel (APF) or 2% neutral sodium fluoride
- 3) use the air syringe to dry the teeth
- 4) insert the maxillary tray and then the mandibular tray into the patient's mouth
- 5) give the patient the slow speed suction to use while the trays are in their mouth
- 6) leave the trays in the patient's mouth for 4 minutes
- 7) remove the trays and instruct the patient to remove excess fluoride from their mouth with the slow speed suction tip

## **Risk Assessment Documentation: Health and Gingivitis**

This form for this documentation will be provided in the future.



# D. Case Management and Documentation – Periodontitis



## Case Management Guidelines: Periodontitis

### Case Type II, III, or IV: Periodontitis

#### Step I: Evaluation

- 1. Update medical and dental histories. Record pulse and blood pressure.
- 2. Evaluate and record visual assessment of the gingival tissues.
- 3. Record plaque index (% dirty)
- 4. Confirm PSR and record in Progress Notes
- 5. Completion of Periodontal Evaluation
  - a) probing depths
    - pocket depth (PD)
    - CEJ-GM
    - clinical attachment level (CAL)
  - b) bleeding on probing (BOP)
  - c) keratinized gingiva (KG)
  - d) mobility
  - e) furcation involvements
  - f) evaluation of diagnostic radiographs
- 6. Completion of Periodontal Case Summary
- 7. Completion of the Risk Assessment form.
- 8. Completion and recording of treatment plan
- 9. Financial counseling

#### Step 2: Active Treatment

- 1. Confirm medical and dental histories. Record pulse and blood pressure.
- 2. Record plaque index (%dirty)
- 3. Perform oral hygiene instructions using disclosed patient
- 4. Active treatment through completion of initial therapy (e.g.: scaling and root planing)
- 5. Patient ready for reevaluation appointment

**Step 3:  
Reevaluation**

4-6 weeks after completion of initial therapy.

- 1. Update medical and dental histories. Record pulse and blood pressure.
- 2. Record plaque index (% dirty)
- 3. Reinforce oral hygiene instructions as necessary.
- 4. Completion of Periodontal Reevaluation
  - a) probing pocket depths (PD)
  - b) bleeding on probing (BOP)
  - c) mobility
- 5. Written evaluation of outcome in Progress Notes (outcomes assessment)
- 6. Based on outcomes assessment, either:
  - a) Continue active treatment
  - b) Formulate surgical treatment plan with Periodontics Resident
  - c) Determine and record interval for Supportive Periodontal Therapy. Patients who have completed periodontal care and have been reevaluated and require no further periodontal care (pocket depths <5mm and no other periodontal pathology) may be referred to the Department of Dental Hygiene for Supportive Periodontal Therapy. If the patient is referred to the Department of Dental Hygiene, a referral form must be filled out and the referral noted in the Progress Note.

**Management of periodontitis patients through the reevaluation appointment should be complete within 12 weeks following the periodontal evaluation.**

If PSR is greater than 2 at any sextant: Must Schedule Periodontal Evaluation appointment once Diagnosis is completed and signed.

**TREATMENT PLAN**

List in order of proposed sequence

# APPT	# Tooth #to#	PROBLEM	PROPOSED TREATMENT	ADA CODE #	ESTD FEE	FC	TREATMENT COMPLETE	DATE
1		PSR ≥ 3 - Perio. Tx.	Plan TBD in Perio.					
	19	Defective rest.	Gold onlay	02540	210.00			
	9-ML	Defective rest	Comp. resin - 2 surf.	02331	64.00			
	10-DL	Caries	Comp. resin - 2 surf	02331	64.00			
	17	Full bony imp.	Extraction	07240	155.00			
	29	Missing #30	PFM retainer	06250	340.00			
	30	Missing #30	PFM pontic	06240	340.00			
	31	Missing #30	PFM retainer	06250	340.00			

**Date and Dept. of Diagnostic Services Faculty Signature/Number**

UR	Periodontal pockets	Scaling/Root Planing	04341	30.00				
UL	Toxic Root surfaces	Scaling/Root Planing	04341	30.00				
LR	Subg. Accretions	Scaling/Root Planing	04341	30.00				
LL		Scaling/Root Planing	04341	30.00				
29	Fremitus	Occl. adj. - limited	04330	65.00				
	Measure outcome	Reevaluation	04380	0.00				

**Date and Dept. of Periodontics Faculty Signature/Number**


TOTAL

\* R = See revised TX plan.

\*\* I understand that because of unexpected circumstances, the treatment, the fees for treatment and/or the materials required as explained to me at this time, may require some changes after actual care has begun.

John Smith  
Signature of patient, parent or guardian

August 14, 1996  
Date

## Periodontal Screening and Recording

Reference Markings on the WHO probe: 0-3.5mm, 3.5-5.5mm, >5.5mm.

Visibility of Reference Markings	Additional Findings	Code for sextant
Colored area visible in all sites	None	0 or 0*
Colored area visible in all sites	Bleeding on probing	1 or 1*
Colored area visible in all sites	Calculus or overhangs	2 or 2*
Colored area partially visible in $\geq 1$ site in sextant	None	3 or 3*
Colored area not visible in $\geq 1$ site in sextant	None	4 or 4*

\* indicates abnormality including but not limited to furcation involvement, mobility, mucogingival problems, recession extending to the colored area of the probe (3.5mm or greater).

Highest Code Assigned	Action to be Taken
0	Record PSR and treat patient as a healthy case.
0*	Record PSR, obtain periodontics faculty consult and document as deemed necessary.
1	Record PSR and treat patient as a gingivitis case.
1*	Record PSR, obtain periodontics faculty consult and document as deemed necessary.
2	Record PSR and treat patient as a gingivitis case.
2*	Record PSR, obtain periodontics faculty consult and document as deemed necessary.
3 or 3*	Record PSR and perform a complete clinical periodontal examination and charting.
4 or 4*	Record PSR and perform a complete clinical periodontal examination and charting.

### Documenting PSR Scores

Results of PSR examinations conducted during Visit 1 for gingivitis cases are recorded in the daily progress notes.

## Documentation of a Periodontal Evaluation

- a) Evaluate the visual appearance of the gingival tissues and record the findings on the Periodontal Case Summary and Treatment Plan form.
- b) Record the patient's plaque index.

### Recording a Plaque Index in Periodontitis Cases

**The plaque index is recorded at the evaluation appointment, at every appointment during active treatment and at the reevaluation appointment on the University of Pittsburgh Periodontics Record Periodontal Indices form.**

To stain the teeth for a plaque index, saturate a cotton swab with liquid disclosing solution. Apply the solution along the dentogingival junction (where the free gingival margin meets the tooth structure) on each tooth. Use the water syringe to rinse the patient's mouth. Have the patient swish the water and then suction the water out.

To record the presence of plaque, examine six surfaces on each tooth (DF, F, MF, DL, L, ML) for the presence of stained plaque at the dentogingival junction. Record areas that have plaque on the plaque index form.

To calculate the plaque index, multiply the number of teeth present in the patient's mouth by 6 - this is the total number of surfaces present that could have had plaque. Divide this number into the total number of surfaces recorded as having plaque present. Multiply this number by 100 to give the % surfaces with plaque in the patient's mouth.

- c) Record numbers for probing pocket depths and the relationship of the free gingival margin (FGM) to the cementoenamel junction (CEJ) on the University of Pittsburgh Periodontics Record form. Recession will be written as a negative number (eg. -3mm) while teeth with the FGM occlusal or incisal to the CEJ will have a positive number (eg.3mm). Calculate the clinical attachment level (CAL) from these two numbers by subtracting the distance from the FGM-CEJ from the probing pocket depth.

### Periodontal Probing:

With a periodontal probe directed along and parallel to the long axis of the tooth, measure the depth of each sulcus/pocket on six aspects (DF, F, MF, DL, L, ML) of each tooth. **Interproximally, the probe must be positioned with the shank against the contact point and the tip angled slightly into the col so it is directly beneath the contact area. If a tooth has no contact, the probe should be placed at the midpoint of the proximal surface and the same measurement recorded for both the facial and lingual aspects.** The facial and lingual measurements should be made at the midpoint of the tooth (see below). The following illustrations depict the proper placement of the probe, from the occlusal and interproximal perspectives

- d) Record bleeding on probing on the University of Pittsburgh Periodontics Record Periodontal Indices form and calculate the bleeding index.

## **Recording a Bleeding Index in Periodontitis Cases**

**The bleeding index is recorded at the evaluation and reevaluation appointments in periodontitis cases on the University of Pittsburgh Periodontics Record Periodontal Indices form.**

To examine the periodontium for bleeding on probing, the periodontal probe is inserted to the depth of the sulcus at three sites on the facial of each tooth in a quadrant (DF, F, MF). Prior to letting the patient close their mouth, examine each of the three areas of all the teeth in that quadrant for the presence of bleeding on probing.

Conduct a similar examination from the lingual aspect (DL, L, ML) of all teeth in that same quadrant. This examination is conducted in the same manner for all quadrants and can be performed at the same time as recording probing pocket depths and attachment level measurements.

Sites that demonstrate the presence of bleeding on probing are recorded on the bleeding index form.

To calculate the bleeding index, multiply the number of teeth present in the patient's mouth by 6 - this is the total number of surfaces present that could have demonstrated bleeding on probing. Divide this number into the total number of surfaces recorded as having bleeding present. Multiply this number by 100 to give the % surfaces with bleeding on probing in the patient's mouth.

- e) Measure the width of the keratinized tissue on the mid-facial of the maxillary teeth and the mid-facial and mid-lingual of the mandibular teeth, utilizing the free gingival margin and the mucogingival junction as landmarks. Record the findings on the University of Pittsburgh Periodontics Record Form.
- f) Assess each tooth for mobility using the firm end of two instruments (ie. mirror handle and rounded end of cotton pliers) and record the findings on the University of Pittsburgh Periodontics Record form.

### **Classification of Mobility**

Mobility findings are recorded on the drawing of the occlusal surface on the University of Pittsburgh Periodontics Record form

Grade 0 - physiologic - no detectable mobility

Grade I - up to 1mm movement of the tooth in either the buccal or lingual direction

Grade II - greater than 1mm movement of the tooth in either the buccal or lingual direction

Grade III - the tooth can either be rotated or is depressible in the socket

- g) Assess the appropriate teeth for furcation involvements and record the findings on the University of Pittsburgh Periodontics Record form.

### Classification of Furcations

Maxillary and mandibular molars and maxillary first premolars are to be evaluated for furcation involvements using the Nabers furcation probe.

Furcation involvement findings are recorded on the appropriate tooth shown on the University of Pittsburgh Periodontal Record form, indicating mesial or distal on maxillary first premolars; mesial, facial or distal on maxillary molars; and facial or lingual on mandibular molars.

Class I - incipient	Λ
Class II - "cul-de-sac"	Δ
Class III - advanced; "through-and through"	▲

h) Complete an evaluation of the radiographs and record the findings on the University of Pittsburgh Periodontics Record Radiographic Evaluation form.

i) Summarize the findings of the periodontal evaluation on the University of Pittsburgh Periodontal Case Summary and Treatment Plan form and obtain a periodontics faculty signature.

j) Evaluate all teeth for **mucogingival defects**.

Definition: An area which does not demonstrate or display at least 2 mm of keratinized gingiva 1mm of which is attached tissue.\*\*\*

#### Mucogingival Problems:

1) High Frenum Attachments

2) Recession

3) Gingival Clefts

4) Lack of Adequate Attached or Keratinized Gingiva

k) Record a treatment plan for initial therapy, through the reevaluation stage and obtain a periodontics faculty signature.

\*\*\* Additional information on Mucogingival Defects:

Indications for Periodontal Mucogingival Surgery:

A. Increase the amount of attached gingiva

B. Elimination of frenum and muscle attachments

C. Increasing vestibular depth

D. Coverage of Gingival clefts

E. Modification of edentulous ridges prior to prosthetics

F. Establishing a zone of attached gingiva prior to coronally positioning a graft

G. Recession                      When dentinal hypersensitivity is present

    When minimal attached gingiva is present

    When there is a problem with esthetics

8) Poor plaque control due to lack of keratinized gingival





PATIENT NAME: \_\_\_\_\_ CHART NUMBER: \_\_\_\_\_  
 Age: \_\_\_\_\_ Physical Status:  PS1  PS2  PS3  
 Prophylactic Antibiotic Coverage (type): \_\_\_\_\_ Reason: \_\_\_\_\_  
 Previous Periodontal Treatment and Year: \_\_\_\_\_

**SUMMARY OF CLINICAL FINDINGS**

**Gingiva (Visual Signs):**

Papillary: Color: \_\_\_\_\_ Contour: \_\_\_\_\_ Consistency: \_\_\_\_\_  
 Marginal: Color: \_\_\_\_\_ Contour: \_\_\_\_\_ Consistency: \_\_\_\_\_

Plaque Index (%): \_\_\_\_\_ Bleeding on Probing (%): \_\_\_\_\_

Calculus: (By Sextant) Slight/Moderate/Heavy \_\_\_\_\_

**Clinical Probing Measurements:**

Range of Pocket Depths (mm): \_\_\_\_\_ Range of Attachment Levels (mm): \_\_\_\_\_  
 Mucogingival Problems (Tooth #): \_\_\_\_\_  
 Furcation Involvements (Tooth #, location, class): \_\_\_\_\_

**SUMMARY OF RADIOGRAPHIC FINDINGS:**

Horizontal Bone Level (average % bone loss): \_\_\_\_\_  
 Angular/Vertical Defects (tooth #, M or D): \_\_\_\_\_  
 Widened PDL Space (tooth #, M or D): \_\_\_\_\_  
 Furcation Radiolucencies (tooth #): \_\_\_\_\_  
 Caries/Defective Restorations (tooth #, M or D): \_\_\_\_\_  
 Periapical Pathology (tooth #): \_\_\_\_\_  
 Other Comments: \_\_\_\_\_

**RISK FACTORS:**

- Plaque
- Smoking
- Inadequate Restorations
- Other \_\_\_\_\_
- Calculus
- Systemic Disease
- Occlusal Trauma

**SIDE 1**



**DIAGNOSIS:**

- GINGIVAL DISEASE \_\_\_\_\_
- CHRONIC PERIODONTITIS (Localized/Generalized)
- AGGRESSIVE PERIODONTITIS (Localized/Generalized)
- PERIODONTITIS AS A MANIFESTATION OF SYSTEMIC DISEASE \_\_\_\_\_
- NECROTIZING PERIODONTAL DISEASE
  - Necrotizing Ulcerative Gingivitis (NUG)
  - Necrotizing Ulcerative Periodontitis (NUP)
- OTHER (As described by the American Academy of Periodontology)  
 \_\_\_\_\_

**PERIODONTAL CASE TYPE:**

- I       II       III       IV       V

**PROGNOSIS:**

OVERALL: Maxilla: \_\_\_\_\_ Mandible: \_\_\_\_\_  
 Hopeless Teeth: \_\_\_\_\_  
 Questionable Teeth: \_\_\_\_\_

**PERIODONTAL TREATMENT PLAN:**

Required Emergency Care: \_\_\_\_\_  
 Initial Therapy: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Periodontal Surgery is likely to be indicated: (circle one) Yes      No

**RESTORATIVE RECOMMENDATIONS:**

\_\_\_\_\_  
 \_\_\_\_\_

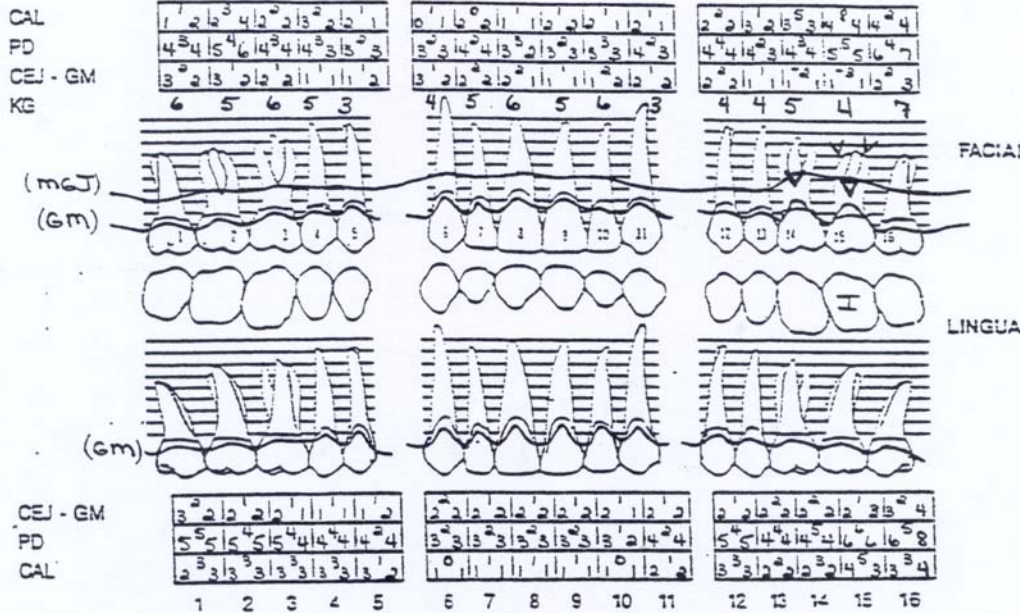
FACULTY SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_



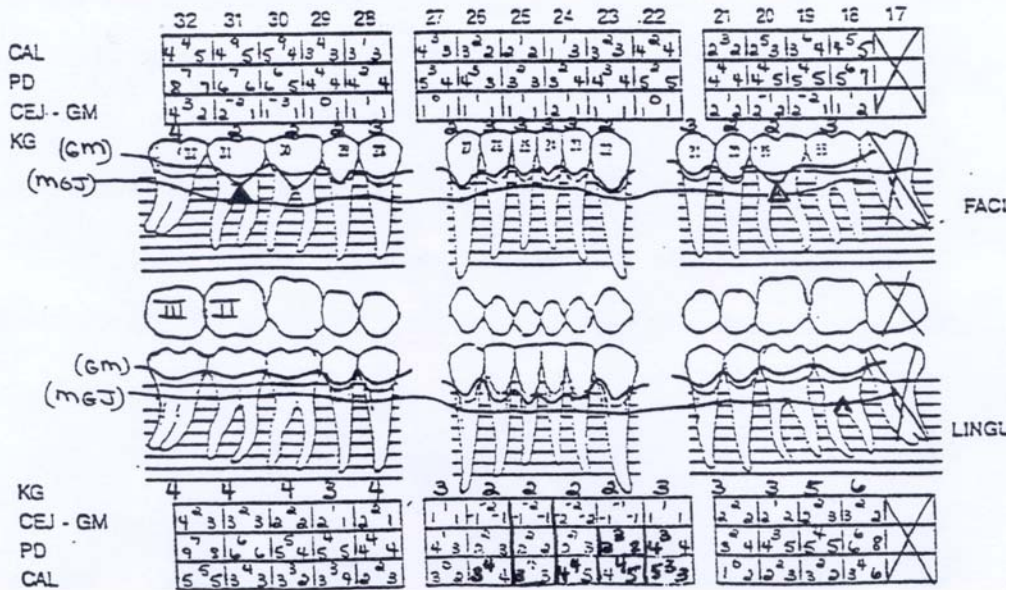
Patient Name: Smith John Age 54 Sex M Race Cauc.

Student Name: Jones Susan Date of Exam: 2/12/96

Stage of Therapy: Pre-treatment  Initial Re-evaluation \_\_\_\_\_ Post SA Re-evaluation \_\_\_\_\_ Post-treatment \_\_\_\_\_  
(CIRCLE ONE)



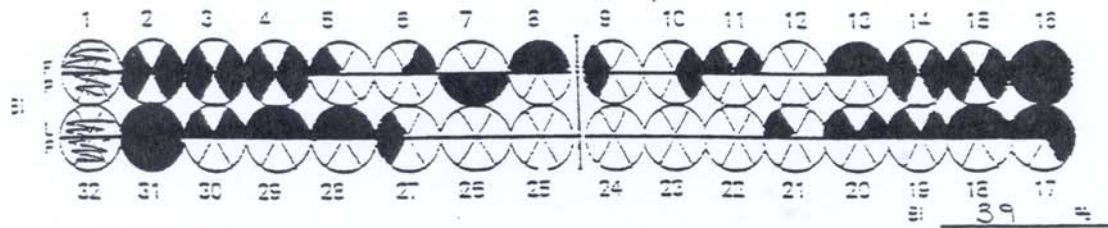
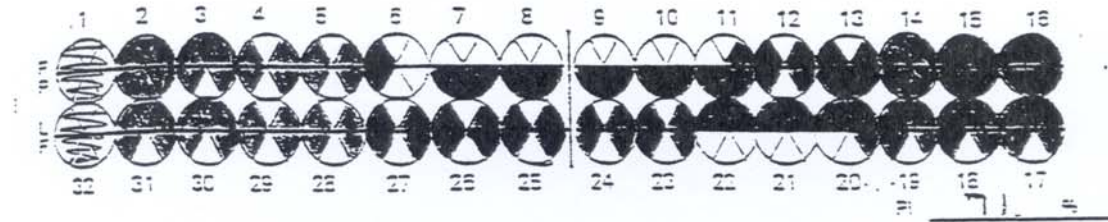
RIGHT \_\_\_\_\_ LE



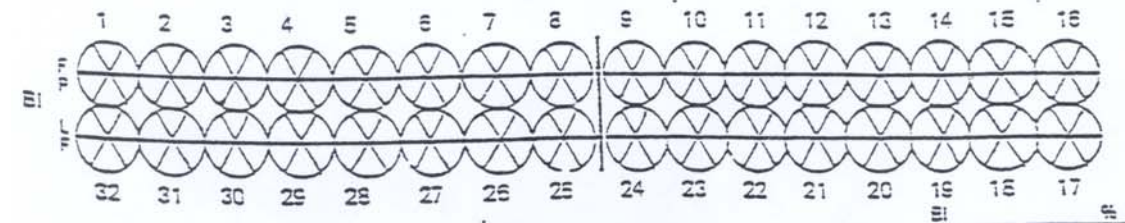
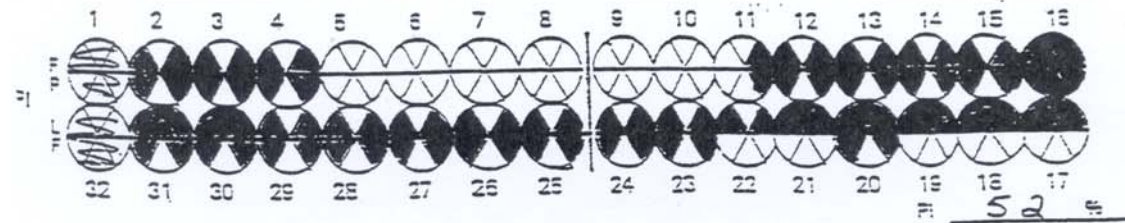


Student Name John Smith

PERIODONTAL INDICES



Examined by Susan Jones Date 2 12 1996  
Mo. Day Yr.



Performed by Susan Jones Date 2 19 1996  
Mo. Day Yr.



RADIOGRAPHIC EVALUATION

Patient's Name John Smith

1. Abnormalities in crown and root anatomy, size and shape.

Fused roots #16, 19 Dilaceration #21, 26, 28

2. Root proximity.

MB # 2 and DB# 3

3. Caries, defective restorations.

M caries #4, D caries #9, Overhang M #14

4. Calculus accretions.

M & D #3, 4, 14, 19, 31

5. Periapical and septal pathosis.

None noted

6. Profile of interproximal bone crests.

Primarily horizontal bone loss, 30%; vertical defect D #21, M #31

7. Distinct abnormalities in bone density.

Radiolucency (5mm diameter) edentulous area #32

8. Radiolucencies in furcal areas.

#18, 19, 30

9. Major alterations in periodontal ligament width.

#4, M root #30

10. Size and position of maxillary sinus.

Within normal limits

11. Presence and position of impacted teeth.

None noted

12. Other radiographic findings.

Retained root tip - mandibular right molar region

Performed by Susan Jones

Date 

0	2
Mo.	

1	2
Day	

9	16
Yr.	

## **Risk Assessment Documentation: Periodontitis**

The form for this documentation will be provided in the future.

**Progress Note Documentation**

## **Scaling and Root Planing**

Scaling is defined as “instrumentation of the crown and root surfaces of the teeth to remove plaque, calculus and stains from these surfaces” (AAP Glossary of Terms).

Root planing is defined as “a treatment procedure designed to remove cementum or surface dentin that is rough, impregnated with calculus, or contaminated with toxins or microorganisms” (AAP Glossary of Terms). Root planing can only be accomplished in patients who have loss of attachment due to inflammatory periodontal disease.

Scaling and root planing is usually accomplished by quadrant. Patient comfort during the procedure is the primary consideration in determining the need for local anesthetic.

If the patient presents with moderate or heavy supra- or sub-gingival deposits, ultrasonic (Cavitron) or sonic (Densonics) instruments may be utilized to remove the calculus deposits. After using an ultrasonic or sonic device, the teeth should then be planed with hand instruments to complete the root planing procedure.

Scaling and root planing is always accompanied by an evaluation of the patient's home care efforts and instruction in improving oral hygiene.

Polishing the teeth and topical fluoride application are accomplished at the last scaling and root planing appointment.



## **Progress Note Documentation – Scaling and Root Planing**

## **Periodontal Reevaluation**

The reevaluation appointment is a reassessment of the patient's status to determine the course of further periodontal therapy - **this is a decision making appointment.**

Options will usually be one of the following:

- 1) the goals of initial therapy have not been met and the patient requires further initial therapy.
- 2) the goals of initial therapy have been met and the patient requires surgical periodontal therapy.
- 3) the goals of initial therapy have been met and the patient is ready to be placed in supportive periodontal therapy (maintenance).

This appointment should occur at a **minimum** of **4-6 weeks** following completion of initial therapy, ie. full mouth scaling and root planing and extensive oral hygiene instruction. This time frame is selected to allow maximum healing of the tissues following initial therapy.

### **Documentation of a Periodontal Reevaluation**

- a) Follow steps a-g as outlined in the section on "Documentation of a Periodontal Evaluation, omitting the FGM-CEJ measurement, calculation of CAL, measurement of width of KG, furcation involvements and mobility (unless occlusal therapy was provided during initial therapy).
- b) Document an evaluation of the outcome of initial therapy in the Progress Notes.

## Periodontal Evaluation for Periodontitis

School of Dental Medicine      Department of Periodontics  
 Student name/number: \_\_\_\_\_ Date: \_\_\_\_\_  
 Patient name: \_\_\_\_\_ Chart: \_\_\_\_\_

The evaluation is a collaborative activity by you and the periodontics faculty to perform the sequenced criteria listed below to meet the standards of the activity as judged by a periodontics faculty member with whom you are working. You must check with the faculty prior to commencing the evaluation, at each activity step, and at the completion of the evaluation. Blue sheet: Faculty copy, Yellow sheet: Student copy

Activity	Criteria	Points	Score
Documentation of Patient	Medical history update	1	
	Soft Tissue Exam	1	
	BP/ pulse	1	
Periodontal Charting	Bleeding index	1	
	Plaque index	1	
	Pocket Depths	1	
	Attachment Levels	1	
	Furcation involvement	1	
	Mobility	1	
	Keratinized gingival width	1	
	Demonstrate instrument use	1	
Case Presentation	Radiographic Evaluation	1	
	Case Summary	1	
	Treatment Plan	1	
Infection Control	Per SDM exposure control guidelines and rationale	1	
		1	
Patient Management	Oral hygiene instruction	1	
		1	
Student Knowledge	Rationale for diagnosis	1	
	Rationale for therapy	1	

TOTAL \_\_\_\_\_

Grade A: 14-13, B: 12-11, C:10-8, D: 7-6, F: 5 or below GRADE: \_\_\_\_\_

Faculty Signature/Code: \_\_\_\_\_ Date: \_\_\_\_\_

Narrative/Comments: \_\_\_\_\_

# COMPETENCY

## Periodontal Evaluation for Periodontitis

School of Dental Medicine      Department of Periodontics

Student name/number: \_\_\_\_\_ Date: \_\_\_\_\_

Patient name: \_\_\_\_\_ Chart: \_\_\_\_\_

This competency format is a similar format to periodontitis evaluations you have previously performed in concert with the periodontics faculty. The competency is performed by you to meet the standards of the competency as judged by a periodontics faculty member with whom you are working. You must check with the faculty prior to commencing the competency whenever you have concerns and at the completion of the competency. Faculty: pink original, Student: yellow copy  
**Failure of any section (1-6) will result in failure of the Competency.**

Activity	Criteria	Completion / comments
1 Documentation of Patient	Medical history update Soft Tissue Exam BP/ pulse	
2 Periodontal Charting	Bleeding index Plaque index Pocket Depths Attachment Levels Furcation involvement Mobility Keratinized gingival width Demonstrate instrument use	
3 Case Presentation	Radiographic Evaluation Case Summary Treatment Plan	
4 Infection Control	Per SDM exposure control guidelines and rationale	
5 Patient Management	Oral hygiene instruction	
6 Student Knowledge	Rationale for diagnosis Rationale for therapy	

Faculty Signature/Code: \_\_\_\_\_ Date: \_\_\_\_\_

Narrative/Comments: \_\_\_\_\_

PASS

FAIL

# PERIODONTAL RE-EVALUATION for PERIODONTITIS

**School of Dental Medicine      Department of Periodontics**  
**Student name/number:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Patient name:** \_\_\_\_\_ **Chart:** \_\_\_\_\_

The evaluation is a collaborative activity by you and the periodontics faculty to perform the sequenced criteria listed below to meet the standards of the activity as judged by a periodontics faculty member with whom you are working. You must check with the faculty prior to commencing the evaluation, at each activity step, and at the completion of the evaluation. Blue sheet: Faculty copy, Yellow sheet: Student copy

Activity	Criteria	Points	Score
Documentation of Patient	Medical history update	1	
	Soft tissue exam	1	
	BP/ pulse	1	
Periodontal Charting	Bleeding index	1	
	Plaque index	1	
	Pocket depths	1	
	Mobility	1	
Case Summary	Written evaluation of outcomes (pre vs post treatment parameters)	1	
	Timely completion of treatment (2-4 wks for completing SRP, 4-6 weeks for Reevaluation)	1	
	Interdisciplinary treatment coordination recorded in progress notes/Treatment plan	1	
Infection Control	Per SDM exposure control guidelines and rationale	1	
Patient Management	Oral hygiene instruction	1	
Student Knowledge	Rationale for diagnosis	1	
	Rationale for therapy	1	

TOTAL \_\_\_\_\_

Grade A: 14-13, B: 12-11, C: 10-8, D: 7-6, F: 5 or below GRADE: \_\_\_\_\_

Faculty Signature/Code: \_\_\_\_\_ Date: \_\_\_\_\_

Narrative/Comments: \_\_\_\_\_

# COMPETENCY

## Periodontal Re-evaluation

School of Dental Medicine      Department of Periodontics  
 Student name/number: \_\_\_\_\_ Date: \_\_\_\_\_  
 Patient name: \_\_\_\_\_ Chart: \_\_\_\_\_

This competency format is a similar format to periodontitis re-evaluations you have previously performed in concert with the periodontics faculty. The competency is performed by you to meet the standards of the competency as judged by a periodontics faculty member with whom you are working. You must check with the faculty prior to commencing the competency, whenever you have concerns and at the completion of the competency. Faculty: pink original, Student: yellow copy

Activity	Criteria	Completion/ comments
1 Documentation of Patient	Medical history update Soft tissue exam BP/ pulse	
2 Periodontal Charting	Bleeding index Plaque index Pocket depths Mobility	
3 Case Summary	Written evaluation of outcomes (pre vs post treatment parameters)  Timely completion of treatment (2-4 wks for completing SRP, 4-6 weeks for Reevaluation)  Interdisciplinary treatment coordination recorded in progress notes/Treatment plan	
4 Infection Control	Per SDM exposure control guidelines and rationale	
5 Patient Management	Oral hygiene instruction	
6 Student Knowledge	Rationale for diagnosis Rationale for therapy	

Faculty Signature/Code: \_\_\_\_\_ Date: \_\_\_\_\_  
 Narrative/Comments: \_\_\_\_\_

PASS

FAIL

# Scaling with Root Planing (SRP)

School of Dental Medicine    Department of Periodontics

Student name/number: \_\_\_\_\_ Date: \_\_\_\_\_

Patient name: \_\_\_\_\_ Chart: \_\_\_\_\_

Indicate quadrant and Teeth:

R \_\_\_\_\_ | \_\_\_\_\_ L

The evaluation is a collaborative activity by you and the periodontics faculty to perform the sequenced criteria listed below to meet the standards of the activity as judged by a periodontics faculty member with whom you are working. You must check with the faculty prior to commencing the evaluation, at each activity step, and at the completion of the evaluation. Blue sheet: Faculty copy, Yellow sheet: Student copy

Activity	Criteria	Points	Score
Documentation of Patient	Medical history updated	1	
	Soft tissue exam	1	
	BP/ pulse	1	
	Treatment plan documented	1	
Periodontal Charting	Plaque index	1	
	Uses chart as guide for SRP	1	
Therapy	Ability to detect/remove plaque	1	
	Ability to detect/remove calculus	1	
	Ability to detect/remove stain	1	
	Scaling and root planing technique	1	
	Smooth root surface	1	
	Inflicting minimal soft tissue trauma	1	
Infection Control	Per SDM exposure control guidelines and rationale	1	
Patient Management	Oral hygiene instruction	1	
	Patient comfortable for procedure	1	
Student Knowledge	Instrumentation	1	
	Rationale for SRP	1	

TOTAL \_\_\_\_\_

Grade A: 14-13, B: 12-11, C:10-8, D: 7-6, F: 5 or below GRADE: \_\_\_\_\_

Faculty Signature/Code: \_\_\_\_\_ Date: \_\_\_\_\_

Narrative/Comments: \_\_\_\_\_

# COMPETENCY

## Scaling with Root Planing (SRP)

School of Dental Medicine      Department of Periodontics

Student name/number: \_\_\_\_\_ Date: \_\_\_\_\_

Patient name: \_\_\_\_\_ Chart: \_\_\_\_\_

Indicate quadrant and Teeth:

R \_\_\_\_\_ | \_\_\_\_\_ L

This competency format is a similar format to scaling with root planings (SRP) you have previously performed in concert with the periodontics faculty. The competency is performed by you to meet the standards of the competency as judged by a periodontics faculty member with whom you are working. You must check with the faculty prior to commencing the competency, whenever you have concerns and at the completion of the competency. Faculty: pink original, Student: yellow copy  
**Failure of any section (1-6) will result in failure of the Competency.**

Activity	Criteria	Completion / comments
1 Documentation of Patient	Medical history updated Soft tissue exam BP/ pulse Treatment plan documented	
2 Periodontal Charting	Plaque index Uses chart as guide for SRP	
3 Therapy	Ability to detect/remove plaque Ability to detect/remove calculus Ability to detect/remove stain Scaling and root planing technique Smooth root surface Inflicting minimal soft tissue trauma	
4 Infection Control	Per SDM exposure control guidelines and rationale	
5 Patient Management	Oral hygiene instruction Patient comfortable for procedure	
6 Student Knowledge	Instrumentation Rationale for SRP	

Faculty Signature/Code: \_\_\_\_\_ Date: \_\_\_\_\_

Narrative/Comments: \_\_\_\_\_

PASS

FAIL



Social Security or Identification #

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Test Site

--	--	--	--	--	--	--	--	--	--

Candidate #:

--	--	--	--	--	--	--	--	--	--

Cubicle #:

--	--	--	--	--	--	--	--	--	--

**MEDICAL HISTORY/ORAL SOFT TISSUE EXAMINATION**

**PATIENT INFORMATION**

Name \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

**MEDICAL HISTORY**

BIRTH DATE \_\_\_\_\_ SEX \_\_\_\_\_ HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_ BLOOD PRESSURE (Right Arm Sitting) \_\_\_\_\_

Your answers to the following questions will aid in proper treatment. All information is CONFIDENTIAL. Please circle YES or NO to indicate your answer and write in your answers on the blank lines, as appropriate. If "YES" the candidate must explain the significance in "Remarks".

- |  |  |
|--|--|
| <p>1. Has there been any change in your general health within the past year? _____ YES NO</p> <p>2. My last physical examination was on _____</p> <p>3. Are you now under the care of a physician? _____ YES NO<br/>If so, what is the condition being treated? _____</p> <p>4. The name and address of my physician is: _____</p> <p>5. Have you been hospitalized or had a serious illness within the past five (5) years? _____ YES NO<br/>If so, what was the problem? _____</p> <p>6. Do you have or have you had any of the following diseases or problems?</p> <p>a. Heart murmur _____ YES NO</p> <p>b. Damaged heart valves or artificial heart valves _____ YES NO</p> <p>c. Mitral valve prolapse, rheumatic heart disease or congenital heart lesions _____ YES NO</p> <p>d. Cardiovascular disease (heart attack, coronary insufficiency, coronary occlusion, high blood pressure, arteriosclerosis, stroke, angina, congestive heart failure) _____ YES NO</p> <p>e. Allergy _____ YES NO</p> <p>f. Asthma, bronchitis, or emphysema _____ YES NO</p> <p>g. Hives or a skin rash _____ YES NO</p> <p>h. Latex sensitivity _____ YES NO</p> <p>i. Fainting spells, seizures, convulsions _____ YES NO</p> <p>j. Diabetes _____ YES NO</p> <p>k. Jaundice, hepatitis, cirrhosis, liver disease _____ YES NO</p> <p>l. Artificial or Prosthetic Joint Replacement _____ YES NO</p> <p>m. Stomach ulcers _____ YES NO</p> <p>n. Kidney trouble _____ YES NO</p> <p>o. Tuberculosis _____ YES NO</p> <p>p. Venereal disease (syphilis, gonorrhea) _____ YES NO</p> <p>q. Nervous breakdown, psychotherapy _____ YES NO</p> <p>r. Cancer _____ YES NO</p> <p>s. Immune suppression, immune deficiency disease _____ YES NO</p> | <p>7. Have you had abnormal bleeding associated with previous extractions, surgery, or trauma _____ YES NO</p> <p>a. Do you bruise easily _____ YES NO</p> <p>b. Have you ever required a blood transfusion? _____ YES NO<br/>If so, explain the circumstances _____</p> <p>8. Have you had surgery or x-ray treatment for a tumor, growth or other condition of your head or neck? _____ YES NO</p> <p>9. Are you taking any drug or medicine? _____ YES NO<br/>If so, what? _____</p> <p>10. In the past, have you taken the weight loss medications 'Redux', fenfluramine, or dexfenfluramine? _____ YES NO</p> <p>11. Are you allergic or have you reacted adversely to local anesthetics, antibiotics, pain medications, or other drugs? _____ YES NO<br/>If yes, what? _____</p> <p>12. Do you have any diseases, conditions, or problems not listed that you think we should know about? _____ YES NO<br/>If so, explain _____</p> <p><b>WOMEN:</b></p> <p>13. Are you pregnant? _____ YES NO</p> |
|--|--|

Date \_\_\_\_\_ Signature of Patient \_\_\_\_\_

**CANDIDATE REMARKS:**

**ORAL SOFT TISSUE EXAMINATION**

Note findings of oral soft tissue examination.  
Circle YES or NO for the presence of the following conditions.

Candidate Remarks on Findings:

- |   |     |    |
|---|-----|----|
| 1. Yellowing of oral mucosa _____                               | YES | NO |
| 2. Bluish Patches on the oral mucosa _____                      | YES | NO |
| 3. Rough white areas on the lateral borders of the tongue _____ | YES | NO |
| 4. White patches on oral mucosa _____                           | YES | NO |
| 5. Red or pigmented areas on oral mucosa _____                  | YES | NO |
| 6. Vesicles or bullae on oral mucosa _____                      | YES | NO |
| 7. Oral ulcers _____  | YES | NO |
| 8. Abnormal oral masses _____                                   | YES | NO |

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Initials of Candidate \_\_\_\_\_ Date \_\_\_\_\_

# Mock Boards

## Periodontal Treatment Selection Worksheet

For use prior to the examination date

On the day of the examination all information on this sheet must be accurately transferred to the Periodontal Exercise Evaluation Form provided at that time.

Do not submit this form to the evaluation station, it is for your use only!

Patient's Name: \_\_\_\_\_

### Patient Selection

Tooth		Pocket Depth	Subgingival Calculus Detection	
[ ]	M			M
	F			F
	D			D
	L			L
[ ]	M			M
	F			F
	D			D
	L			L
[ ]	M			M
	F			F
	D			D
	L			L
[ ]	M			M
	F			F
	D			D
	L			L
[ ]	M			M
	F			F
	D			D
	L			L
[ ]	M			M
	F			F
	D			D
	L			L

In the adjacent grids, fill in the numbers of the 6 teeth that have been selected for treatment. Record the 6 tooth numbers in ascending numerical order using the 1 to 32 system. 1 is the maxillary right third molar, 32 is the mandibular right third molar.

In the grid marked "Pocket Depth", indicate (in mm) all those measurements of 4 mm or more on the four surfaces indicated. Tooth surfaces with pockets of more than 6 mm must not be selected for treatment. At least a total of three pockets of 4 mm or more in depth must be selected for treatment. Pockets less than 4 mm need not be charted. Pockets measured on the line angles of the tooth are listed as M or D.

In the grid marked "Subgingival Calculus Detection", mark an X on 12 surfaces, only, that have subgingival calculus detectable with a number 11/12 explorer, at least one surface per selected tooth. There may be more surfaces with subgingival calculus, but mark only the 12 surfaces selected to be treated.

The two teeth assigned for "Pocket Measurements", will be indicated on the Periodontal Progress Form. The pocket measurements should also be recorded on the Periodontal Progress Form.

Each time the patient is sent to the Evaluation Station, the Periodontal Progress form, the Evaluation form\*, Medical History/Informed Consent and radiographs must accompany the patient.

The assigning examiner will insert Start and Finish times and will initial the Treatment Selection Worksheet and Periodontal Progress Form and return them to verify the candidate assignment. The assigning examiner will also give permission to administer the anesthetic solution.

It is the candidate's responsibility to accurately transfer the information from this Treatment Selection Worksheet to the Evaluation form prior to presenting the patient for assignment.

You may duplicate this form as needed.

# COMPETENCY

## Preventive Evaluation Form

**School of Dental Medicine      Department of Periodontics**

**Student name/number:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Patient name:** \_\_\_\_\_ **Chart:** \_\_\_\_\_

**Indicate quadrant and Teeth:**

**R** \_\_\_\_\_ | \_\_\_\_\_ **L**

This competency format is a similar format to preventive evaluations you have previously performed in concert with the periodontics faculty. The competency is performed by you to meet the standards of the competency as judged by a periodontics faculty member with whom you are working. You must check with the faculty prior to commencing the competency, whenever you have concerns and at the completion of the competency. Faculty: pink original, Student: yellow copy

**Failure of any section (1-6) will result in failure of the Competency.**

<b>Activity</b>	<b>Criteria</b>	<b>Completion /comments</b>
1 Documentation of Patient	Medical history update Soft Tissue exam BP/ pulse Plaque index Bleeding index Patient education	
2 Technique	Demonstrate instrument use	
3 Instrumentation	Removal of plaque Removal of calculus Removal of remaining stain Inflicting minimal soft tissue trauma	
4 Infection Control	Per SDM exposure control guideline and rationale	
5 Patient Management	Oral hygiene instruction	
6 Student Knowledge	Instrumentation Rationale for prevention of oral disease	

Faculty Signature/Code: \_\_\_\_\_ Date: \_\_\_\_\_

Narrative/Comments: \_\_\_\_\_

PASS

FAIL

# **AmericanAcamedy of Periodontology: Definition of Supportive Periodontal Therapy**

## **American Academy of Periodontology: Definition of Supportive Periodontal Therapy (SPT)**

An extension of periodontal therapy. Procedures performed at selected intervals to assist the periodontal patient in maintaining oral health. These usually consist of examination, an evaluation of oral hygiene and nutrition, scaling, root planing and polishing the teeth.

## Case Management Guidelines: Supportive Periodontal Therapy (Maintenance) for Periodontitis Cases

- 1. Update medical and dental histories. Record pulse and blood pressure.
- 2. Evaluate and record visual assessment of the gingival tissues.
- 3. Record plaque index (% dirty)
- 4. Perform oral hygiene instruction using disclosed patient
- 5. Completion of Periodontal Evaluation
  - a) probing pocket depths
  - a) clinical attachment levels confirmed in sites showing 1) increased probing pocket depth or 2) increased recession
  - b) bleeding on probing (BOP)
  - c) mobility
  - d) furcation involvements
  - e) evaluation of new diagnostic radiographs
- 6. Remove all plaque and calculus deposits.
- 7. Perform and record the findings of a D-2 update once every six months
- 8. Polish and apply topical fluoride.
- 9. Determine the need for additional periodontal therapy and either schedule the patient for the therapy or make the appropriate referral.
- 10. If the patient requires no additional periodontal therapy, determine the appropriate recall interval and record in Progress Notes. If the patient is referred to the Department of Dental Hygiene for SPT appointments, a referral form must be filled out and the referral noted in the Progress Notes.

**Patients who have completed periodontal care and have been reevaluated and require no further periodontal care (pocket depths <5mm and no other periodontal pathology) may be referred to the Department of Dental Hygiene for Supportive Periodontal Therapy. Patients who have been referred to the Department of Dental Hygiene who subsequently require further periodontal intervention will be referred back to the Department of Periodontics Graduate Program.**

## **F. Student Surgical Assisting**

### **Department of Periodontics Surgical Assisting Guidelines**

#### **Assisting in patient preparation:**

1. Obtain and record a pre-operative blood pressure and pulse on the patient.
2. Provide patient with safety glasses and head cover.

#### **Infection control and sterile field guidelines:**

1. Student's mask, gown, head cover and safety glasses are in place prior to scrubbing and gloving.
2. Hands are scrubbed and gloved prior to opening sterile instrument tray.
3. Student assists with draping the patient.
4. Sterile field is maintained during procedure.
5. School of Dental Medicine infection control guidelines are followed throughout surgical procedure.

#### **Surgical Assisting.**

1. Student serves as surgical assistant throughout the surgical procedure.
2. Student obtains post-operative pulse and blood pressure.
3. Student assists in patient dismissal and clean-up of the operatory.

#### **Grading:**

Satisfactory

Unsatisfactory

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

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

# **Medical Emergency Protocol**

- Do not leave the victim unattended
- Provide care to the best of your ability
- Ask someone to call 8-8621 and tell the operator to 'STAT PAGE' Anesthesia Department to the exact location of the emergency (e.g. clinic, floor and cubical)
- Ask for emergency equipment located in nearest supply station to be brought to site of emergency

## **H. Codes and Fee Schedules**

Available in every Module