



CASE REPORT REQUIREMENTS

Information for Trainees

This version is in effect for the 2008 Credentials Review Cycle

Items shown in underlined italic font are available on the AVDC web site, by links from the Information for Registered Trainees page unless otherwise stated.

Contents of This Document

Introduction	Page 1
Selecting Cases for Case Reports	Page 2
Case Report Requirements	Page 3
Content	Page 4
Format and Editorial Details	Page 7
Submitting a Case Report	Page 8
AVDC Process Following Submission	Page 8
Options if a Case Report is not Approved	Page 9

Introduction

As one means of ensuring that AVDC trainees have reached a level of competence appropriate for an entry-level specialist, AVDC requires that four case reports submitted by the trainee have been reviewed and approved by the Credentials Committee.

The Board of Directors of the AVDC adopted the following purpose of case reports on August 11, 2002: ***Case Reports are a required part of the application that provide a means to evaluate the trainee's level of competence in veterinary dentistry through the report of a clinical case. The Case Report should demonstrate proficiency, skill, and expertise in the proper management of a veterinary dental case. Case Reports also allow assessment of the trainee's ability to think through and perform veterinary dental procedures, making clinical decisions that are supported by published literature or for which valid justification is provided by the author.***

Case reports can be submitted prior to the submission of the completed credentials application package; read Pre-Approval for more information. Submission for Pre-Approval review is strongly encouraged. The standard by which a case report will be

judged will be the same whether the report was submitted for Pre-Approval or with the Credentials Application package.

A case report is an opportunity for a trainee to show that s/he has learned dental concepts during her/his training period, and is able to integrate these principles as they apply to specific veterinary patients. Thus, the report is to be a well-written and well-documented scientific paper about a case that the trainee has managed well by current standards. It must be sufficiently detailed that it would be possible for a reader to repeat any procedures from the description given. Specific requirements are given below.

When reviewing a case report, the Credentials Committee considers not only the dental and surgical skills of the trainee. The Committee also considers the diagnostic abilities, and the abilities of the trainee to evaluate the patient as a whole, as demonstrated in the report. Approval of a case report depends on documentation of excellence and thoroughness in managing the case from presentation through follow-up.

It is not necessary to select a complex case, or one in which advanced technology or procedures were used. However, since the standard required is that of an entry level specialist, dental cases that are commonly performed by veterinarians who are not dental specialists, such as routine scaling and extraction cases, will likely be considered too simple for approval.

The form used by the Credentials Committee to evaluate case reports is available for your examination (the link to [*Case Report Evaluation Form*](#) is at the bottom of the Information for Registered Trainees web page). AVDC strongly recommends that trainees carefully read through the Requirements for Case Reports given below and the evaluation form *before* selecting a case and preparing a case report. After the case report is prepared, AVDC recommends that the trainee and supervisor read through the Evaluation Form again and then read through the case report as a self-evaluation process prior to submission to AVDC.

Selecting Cases for Case Reports

As you consider whether a case you are working on may be appropriate for an AVDC case report, keep in mind the need for documentation of the case (photographs, radiographs), and the need for documented follow up. Also, keep in mind that four case reports are required. Should one or more of your submitted case reports not be approved, keep a “back-up” list of suitable cases with available follow-up, so that you can promptly prepare an additional report at short notice. Alternatively, five or more case reports may be submitted for Pre-Approval.

Questions or comments about case reports or any other AVDC policy are to be addressed to the AVDC Executive Secretary (ExecSec@AVDC.org), who will respond to them or distribute them to the appropriate person or committee for response.

Case Report Requirements

1. The trainee must have been the primary clinician on each of the required four case reports. Each case report is to have a specific dental discipline category as its primary subject, which is to be noted as the first word in its title (For example: “*Endodontics: Standard Endodontic Treatment of a Maxillary Fourth Pre-Molar Tooth in a Dog*”). The categories of three of the four case reports are to be three of the four core disciplines of periodontics, endodontics, restorative/prosthetic dentistry, and oral surgery. The primary subject of the fourth case report is the candidate’s choice.
2. When a trainee submits a case report to AVDC DMS, an e-mail message is automatically sent to the Supervisor to notify him or her that a Supervisor Form is to be submitted. Case reports cannot be approved if this completed form is not received by AVDC. Even though an automatic e-mail will be sent to the supervisor, AVDC recommends that you remind your supervisor to complete and submit the form.
3. Cases selected do not have to be included in the trainee’s AVDC case-log. Thus cases treated prior to registration in an AVDC Training Program or in a period that is no longer permitted for case log purposes (i.e. beyond the permitted six years prior to Credentials Application or during a leave of absence) can be presented as case reports. However, for all case reports, the techniques and materials used must meet the “standard of care” as would apply to an entry-level veterinary dental specialist at the time of submission of the case report.
4. Case reports may be submitted with the Credentials Application Package, or for Pre-Approval consideration. Submission of case reports to the AVDC for Pre-Approval consideration is strongly recommended; read *Pre-Approval* for details.
5. Case reports are reviewed by the Credentials Committee after they have been assigned a code number by the Executive Secretary, to maintain anonymity of the trainee during the review process. Thus, **the case report must not include any reference to the trainee's name, practice or other identifying details.**
6. Case reports are to be submitted as electronic files (see below for submission details).
7. Although subsequent submission for publication of AVDC-approved case reports is encouraged, AVDC strongly recommends that case reports intended for AVDC Credentials review are not submitted for publication until the Credentials process is completed for that report. Case reports that have already been subject to a peer-review process for publication in a journal are not to be submitted for AVDC Credentials Review, because the case report may no longer be primarily the original work of the trainee. Case reports that have been approved by the Academy of Veterinary Dentistry or published in an un-reviewed meeting proceedings book may be submitted to AVDC, and will be subject to the AVDC Case Report review process.
8. When items for which AVDC-approved nomenclature is available are mentioned, the AVDC-approved terminology is to be used. The AVDC Nomenclature is available at <http://www.avdc.org/Nomenclature.pdf> or by clicking the Veterinary Dental Nomenclature link on the AVDC Home page.

Content of a Case Report

Case reports will normally be presented in the following sequence:

1. **Title:** Dental discipline category, followed by a brief description. For example:
Endodontics: Apexogenesis of a Fractured Canine Tooth in a Two Year Old Dog.
2. **Introduction:** Introduce the topic of your case report. A brief statement describing why you selected this particular case may be relevant. A concise literature review is not required in the Introduction, though it may be appropriate depending on the subject of the case report.
3. **History:**
 - a. Signalment.
 - b. Presenting problem or chief complaint, as reported by the owner.
 - c. Past dental history.
 - d. Past medical history, if relevant.
 - e. Describe any other relevant problems.
4. **Diagnostics:**
 - a. Include physical and oral examination findings, laboratory reports, radiographs, MRI, etc. (when appropriate). (Relevant detailed reports can be included as appendices).
 - b. Radiographs:
 - All radiographs relevant to the subject of the report and mentioned in the text of the report are to be included as figures, with interpretation of the radiograph in the text or in the legend accompanying the figure.
 - If a full-mouth radiograph series was taken of the patient, specific radiographs that are not relevant to the subject of the case report do not have to be included as figures.
 - c. Demonstrate attention to the patient as a whole. Report appropriate pre-operative diagnostics and laboratory tests.
5. **Diagnosis and/or Problem List:**
 - Provide an accurate assessment. Use appropriate classifications, if applicable.
 - Mention differential diagnoses and their rule-outs.
 - Mention all other lesions observed in the mouth. Photographs of other lesions do not need to be included if they are not directly relevant to the subject of the case report. The dental chart may be included as an appendix if desired.
6. **Treatment Plan:**
 - Describe different modalities of treatment and their prognosis. Justify your treatment plan based on the information available to you when you made the decision.
 - Address any potential genetic impact of the condition.
 - For malocclusion cases, a report of the pre-treatment bite evaluation and a signed Owner Consent and Release Form are to be included. To maintain

anonymity of the case report, do not include information identifying the hospital, veterinarian and owner by either:

- a. Fold over the hospital information part of the form when scanning or photographing the form, or
- b. Make a copy of the form and cut out the information that is to be excluded before scanning or photographing the form, or
- c. Insert the whole scanned or photographed form into the word file, then use the Rectangle command (shown as a rectangle in the command line at the bottom of the Word screen) to insert a rectangle to cover the identification information - use more than one rectangle as necessary. Submit the file as a Word document if you do not have a full version of Acrobat, and the Executive Secretary will create an Acrobat version to ensure that the reviewers cannot delete the rectangle to see the information behind it.

7. Treatment:

- a. Describe the **anesthetic and patient support protocols**, including:
 - i. Pre-op, intra-op and post-op drugs (generic name, with trade name and name and city of manufacturer in footnote), dosages and route of administration.
 - ii. IV fluid support.
 - iii. Body temperature support.
 - iv. Monitoring techniques and frequency.
 - v. Pay particular attention to any need for pain recognition and management.
- b. Describe the **oral-dental procedures** in detail, including:
 - i. Technique, instruments and materials, using correct terminology (generic name of materials in the text, with trade name and name and city of manufacturer in footnote). **Treatments and materials used must be currently accepted techniques supported by published references cited in the case report, or, if an alternative or novel technique or material was used, thorough justification must be provided by the author, with supporting references if available.** If you performed a technique that could be considered non-standard, describe the variation in detail, and justify your selection here or in the Discussion.
 - ii. For procedures involving surgery, describe the incision (location, type, length) and pertinent anatomical landmarks. Describe suture pattern and material.
 - iii. Include dosages and routes of administration of any medications used or prescribed. Indicate generic names (with trade names and name of manufacturer and city in footnotes).
 - iv. Include original or good quality copies of postoperative radiographs with interpretation of the radiographic findings in endodontic, periodontic, restorative, orthodontic and surgical cases. For endodontic cases, also include and label selected intra-operative radiographs.

- v. Describe the recognition, severity and management of any complications.
- vi. If other lesions were treated, briefly summarize the treatment. Photographic documentation of treatment of lesions not directly relevant to the subject of the case report is not required.

8 Post-operative care:

Describe instructions given to the client, including medication dispensed for home use and dental home care procedures.

9. Follow-up:

- Describe the timing, extent of examination and results of follow-up examination. Six months is the minimum follow-up period required for endodontic, orthodontic, periodontal surgery, oncologic surgery and other oral surgery cases. Three months is the minimum period required for restorative and prosthodontic cases. Longer follow-up is encouraged if it will augment the case report. Appropriate follow-up radiographs and clinical images are to be included. Include assessment of the treatment and your short- and long-term prognoses.
- Were any other treatments recommended or given since your described procedures?
- Describe compliance with and efficacy of oral home-care instructions.

10. Discussion:

- If appropriate, briefly review the literature on the disease condition and/or procedure that is the subject of your case report.
- Discuss important aspects of the diagnostic work-up, technique and results.
- If you had to change your treatment plan during the therapy or if, looking back on your case, you think another therapy, material or technique would have given better results, discuss those points.
- Comment on the results, short and long term. Did it/will it work? Why?
- If applicable, you may discuss the likelihood of recurrence of pathology, or the ethics of providing the type of treatment used (orthodontics, genetic problems), etc.
- Provide references to support your statements. (See under Format and Editorial Details, below). Be clear about what is theory or anecdote (yours or someone else's) and what is established fact.
- Discuss any unusual features of or difficulties encountered during the case. Was the case different from what was expected? How did you manage any problems or complications encountered?

11. Conclusion (optional):

What conclusion, if any, can be drawn from this case?

Format and Editorial Details

- To maintain anonymity of the trainee, case reports must not include any reference to the trainee's name, practice or institution or other identifying details.
- The length of each case report is to be no more than 10 printed pages (**not** including the title page, references, figures [if included on pages separate from the text], figure legends or the Supervisor Involvement Form). **Reports longer than this maximum will be returned to the trainee without review.**
- Pages are to be numbered in the top right-hand corner. **Case reports without page numbers will be returned to the trainee without review.**
- When items for which AVDC-approved nomenclature is available are mentioned, the AVDC-approved terminology is to be used (see *AVDC Nomenclature*).
- Text: Use 1.5 line spacing, 12 pt Times New Roman font, 1 inch margins, 8.5"x11" paper.
- Provide photographs to support your report, with descriptive figure legends.
- Submit the case report as a Word document with embedded images, as a Word document with separate images in .jpg format, or as an Acrobat .pdf file. See **Submitting a Case Report**, below.

References:

- A reference is a statement made in a published source (e.g. journal article, textbook or meeting Proceedings book).
- References should be limited to 2 pages, using 1.5 line spacing, 12 pt font, 1 inch margins, Times New Roman font.
- Number references consecutively in the order in which they are first mentioned in the text. Identify them in the text as arabic numbers either as superscript or in (parentheses).
- References are to be specific citations (author, page number, journal volume or book title, year) of work that is in the public domain.
- Other attributable but unpublished statements are to be used sparingly, with the source identified in a foot-note.

Submitting a Case Report

All case reports are to be submitted to the AVDC Executive Secretary.

Electronic Submission:

- Electronic submissions are to be sent to the AVDC Executive Secretary via DMS.
- The case report can be submitted as a Word document with embedded images, as a Word document with separate images in .jpg format or as an Acrobat .pdf file.
- Name the file: *{TraineeLASTNAME,FirstName} CaseReport {Short Title} {Year}*.
- For additional images, name the .jpg files: *{TraineeLASTNAME,FirstName} CaseReport {ShortTitle} {Year} Image{1 etc.}*.

- Radiographs may be included in a case report as digital dental radiography images, by scanning a radiograph, or by using a digital camera to photograph a radiograph directly from a view-box. Recommendations to improve the quality of photographed images:
 - use a camera with macro focus option so that only the radiograph is framed.
 - black out the unwanted areas on the view-box.
 - check that the long axis of the lens is perpendicular to the radiograph surface.
 - turn off the camera flash.
 - turn off the lights in the room.
 - use a tripod because a long exposure time may be needed.

If you wish to submit a case report other than in electronic format via DMS, contact the Executive Secretary first via e-mail (ExecSec@AVDC.org).

AVDC Process Following Submission

- All case reports will be evaluated blindly, whether they are sent for Pre-Approval review or as part of a Credentials Application Package.
- The case report is assigned a code number by the Executive Secretary, and made available to a Credentials Committee review team via DMS.
- Comments and recommendations are forwarded by the review team members to the Chair of the Credentials Committee, who reviews the team's comments. If three or four members recommend approval, the case report is approved. If two members recommend approval and two do not, the Chair reviews the case report and review team comments and casts a deciding vote.
- The Credentials Committee may, at its discretion, **request clarification** if there are specific issues that would otherwise prevent approval of a case report. A final decision will be with-held until a response to the Request for Clarification is received from the trainee.
- For case reports that are Not Approved, the Committee prepares a list of reasons for non-approval.
- The trainee is informed of the results of the review by the Executive Secretary.
- The AVDC will, whenever possible, report the results of the review within 10 weeks of receipt of the case report.

Options if a Case Report is Not Approved

1. **Resubmission** of a Not Approved case report is **not** permitted.

2. **Rebuttal Option**

Following receipt of a non-approval decision, the trainee may submit a **rebuttal**, which is to include reasons why the trainee considers each of the major concerns listed by the Credentials Committee to be inappropriate. A **maximum of 30 days** is permitted for receipt by the Executive Secretary of a Rebuttal of a non-approval case report or radiograph set decision.

A rebuttal is not considered an appeal by AVDC, and is sent to the members of the Credentials Committee review team who originally reviewed the item.

Name the rebuttal file *{TraineeLASTNAME,FirstName} {Case Report Code number} Rebuttal* and upload it to DMS as a Miscellaneous Document. Additional images may be included in or with the rebuttal file. The rebuttal document will be forwarded to the review team as a blinded document.

If the rebuttal does not result in approval of the case report, the trainee has the right to request that the original case report and the rebuttal are considered as an Appeal of an Adverse Decision, which will be handled according to the procedures stated in the AVDC Appeals document.

3. **Appeal**

The trainee may elect to submit a formal Appeal to the AVDC Executive Secretary. **The appeal is to be received within 20 days of receiving electronic notification of an adverse decision.** The Appeal procedure is described in the Appeals document, available in the document list in the Information for Registered Trainees web page.