CASE REPORT EVALUATION FORM

This version is in effect for the 2004 Credentials Review cycle

Guidelines for Case reports are detailed in Case Reports, available from the AVDC web-site Information for Applicants page. AVDC strongly suggests that the applicant and her/his mentor use the evaluation form to perform a self-evaluation of the case report prior to submitting it to AVDC for review. Comments on commonly identified problems are included as examples below; however, this is not an all-inclusive list of problems identified in case reports by the Credentials Committee.

Code Number: Date Reviewed:

Dental Discipline: Case Report Title:

1. Signalment complete?
   Need species, breed, age, sex/neuter, and body weight.

2. Does the case presentation adequately describe the history, presenting problem (chief complaint), physical examination and other relevant findings?
   The report is to mention any information sent by the referring veterinarian. The history is to include relevant general medical as well as dental information.

3. Are appropriate diagnostics included (oral examination, lab work, radiographs, histology, etc.)?
   The report is to demonstrate proper patient management, including assessment of general and oral health. The diagnostic workup is to be appropriate for the dental condition presented.
4. Is assessment or diagnosis of the case, and discussion of possible differential diagnoses, appropriate?

The report is to demonstrate the diagnostic ability of the applicant, including a thorough evaluation, differential diagnosis with rule-outs of conditions and confirmation of the diagnosis if applicable.

5. Is the treatment plan appropriate for the problem, and are options discussed?

A list of the treatments considered is to be included, noting the option selected and reasons for that choice. Merits of each option can be described in the Discussion.

6. Are the anesthetic protocol, monitoring techniques and peri-operative care sufficient and appropriate?

The report is to demonstrate proper management of the patient as a whole.

- The anesthetic protocol is to be appropriate for the age, health status of the patient and procedure(s) to be performed. It is to take into account the pre-anesthetic patient evaluation: results of blood work, cardio-respiratory assessment, thoracic radiographs if taken, hydration, body condition scoring, etc.

- The anesthetic protocol is to include mention of premedication, induction, maintenance, recovery and pain management.

- The vital functions are to be appropriately supported and monitored.

- The choice of drugs, dosages and mode of administration are to be appropriate. In the report, generic names of drugs and dosage in mg/kg are to be used, with trade names and sources of uncommonly used products in footnotes.

- If the dosage, use or frequency of administration of a drug differs from that found in current literature, the author is to briefly comment. Unexplained use of non-standard techniques will be cause for non-approval.
7. Are the dental/oral treatment techniques and materials used currently accepted, and is management of complications appropriate and likely to succeed?

The Committee expects a detailed, step-by-step description of the procedure(s) performed. Any variations from normal technique are to be well described, giving reasons for use of the selected technique rather than currently accepted technique. It is important that no condition relevant to the subject of the case report, and no complications, are left un-addressed.

8. Are the photos/slides/radiographs that are included sufficient, appropriate and captioned?

The report is to include good quality, in-focus images that document the pathology, how the procedure was executed, and the result of treatment. The members of the Credentials Committee cannot evaluate, for example: the quality of a surgical procedure without a postoperative photograph; a root canal treatment without adequate radiographic documentation; or a prosthodontic procedure without a close-up photograph of the margin preparation, etc.

All clinical pictures submitted are to be accompanied by an explanatory legend or a description of the figure in the text of the report.

Radiographs must have correct radiographic technique for proper contrast and correct positioning with no or minimal elongation or foreshortening of the target teeth. Identification of the site/tooth, technique used and interpretation of the radiographic findings must be included.

9. Adequate post-operative instructions, pain management and care given?

Pain management is to be appropriate for the level of pain anticipated (preemptive analgesia) and the health status of the patient. The applicant is to take into consideration the potency of each drug, its length of action, interaction with other drugs used and potential side effects. Although it is not required that these points are described in detail, appropriate pain assessment and management is required; unmentioned or insufficient pain management will be cause for non-approval. The Committee understands that assessment of pain felt by veterinary patients is not an exact science. The Committee does require the applicant to demonstrate that s/he has paid attention to pain management for this patient.
10. Are the dental materials used and the way they are used appropriate?
Dental materials are to be used appropriately. In the report, the applicant is to use generic names of materials in the text, with specifics of products in footnotes. If a technique or material is used in a non-standard manner, such use must be described in detail and justified.

11. Is the re-examination or follow-up sufficient to ensure that the procedure has been a success?
Appropriate follow-up radiographs/pictures are to be submitted. A follow-up of greater than 6 months will not be required in any case report. Longer follow-up is encouraged if it will augment the case report. Six months is the minimum follow-up period required for endodontic, orthodontic, periodontal surgery and oncologic surgery cases.

12. Discussion includes justification of diagnosis, treatment performed, materials, alternatives etc. appropriate for the case?
The clinical photographs, radiographs, and follow-up examination information must support the discussion. The discussion is to be relevant to the case presented. Simple statements of general principles or descriptions of generic techniques supported by references from textbooks are of little interest or value – what is it about this case that is worthy of comment?
13. If relevant, is genetic counseling discussed?

The genetic aspects of a case are critical for orthodontic and some other types of case. Ethical aspects of a case are to be addressed if applicable (for example, prosthodontic or implant procedures for a show dog).

SUMMARY:  
(Circle one)  
Approve: YES  
Request clarification before Approve/Non-Approve decision is made: YES  
(Use comments space for specifics)  
Do not Approve: YES  
(Use comments space for specifics)  
Comments:

Signature of reviewer:  
Date forwarded to Credentials Committee Chair: