SAINT LOUIS UNIVERSITY.

Program-Level Assessment: Annual Report

Program Name (no acronyms): Graduate Periodontics	Department: Graduate Periodontics
Degree or Certificate Level: Degree and Certificate	College/School: Center for Advanced Dental Education
Date (Month/Year): **November 2023**	Assessment Contact: Elio Reyes Rosales, DDS, MS.

In what year was the data upon which this report is based collected? **2022-23**

In what year was the program's assessment plan most recently reviewed/updated? **2020**

Is this program accredited by an external program/disciplinary/specialized accrediting organization or subject to state/licensure requirements? **YES**

If yes, please share how this affects the program's assessment process (e.g., number of learning outcomes assessed, mandated exams or other assessment methods, schedule or timing of assessment, etc.):
The Graduate Periodontal Program at Saint Louis University is accredited by the Commission on Dental Accreditation (CODA) dependent of the American Dental Association (ADA). The accreditation process takes place every 7 years. CODA employs a rigorous accreditation process to evaluate the quality of dental education programs and develops and implements accreditation standards of quality and improvement of dental education programs. The areas of competency and educational requirements are established by CODA, in all didactic, clinical, institutional, and research areas.

1. Student Learning Outcomes

Which of the program's student learning outcomes were assessed in this annual assessment cycle? (Please provide the complete list of the program's learning outcome statements and **bold** the SLOs assessed in this cycle.)

1. **Prepare residents to be competent in all aspects of clinical periodontics**.
2. **Prepare residents to become certified by The American Board of Periodontology.**
3. Cultivate intellectual growth and a desire to seek continued knowledge in the field of periodontics.
4. Prepare residents to effectively teach in the field of periodontics.
5. Demonstrate an understanding of research design and methodology.
6. Conduct an original research project resulting in a written thesis.
7. Contribute to the knowledge base of periodontology through presentation or publication.
8. **Critically evaluate scientific literature and communicate the information to others**.
9. Meet the periodontal treatment needs of the Saint Louis University Center for Advanced Dental Education and the A.T. Still University- Missouri School of Dentistry and Oral Health.

2. Assessment Methods: Artifacts of Student Learning

Which artifacts of student learning were used to determine if students achieved the outcome(s)? Please describe the artifacts in detail, identify the course(s) in which they were collected, and if they are from program majors/graduates and/or other students. Clarify if any such courses were offered a) online, b) at the Madrid campus, or c) at any other off-campus location.

Assessment activities take place on several levels. Each course is assessed with either a grade or pass/fail for each resident and is based on a rubric to determine competency level in both didactic and clinical courses. Additionally, the third-year periodontics residents take the qualifying exam from the American Board of Periodontology in January during their third year. The American Board of Periodontology requires passing the qualifying exam before the candidates take the Oral Board Examination. Most graduates take the American Board of Periodontology certification exam following graduation and their performance is assessed annually. The Program Director makes ongoing assessments on the qualifying exam and oral exam outcomes.

The Graduate Periodontics Advisory committee meets twice a year and assesses multiple items including clinical competency, exit interviews, alumni surveys, In-Service exams, resident teaching, resident research, infection control and case presentations. These artifacts of student learning reveal the success of the program in achieving, or not, the educational goals.
The courses relevant to the outcomes analyzed in this cycle are:

PERI 5000	Principles of Periodontics
PERI 5400-xx	Periodontics Case Presentation Seminar
PERI 5600-xx	Clinical Periodontics
PERI 5910	Current Literature in Periodontics
CAD 5250	Multidisciplinary & Evidence Based Diagnosis & Treatment Planning
PERI 5010	Periodontal Literature Review
PERI 5220-xx	Advanced Implant Surgery
PERI 5300	Clinical Teaching Practicum

3. Assessment Methods: Evaluation Process

What process was used to evaluate the artifacts of student learning, and by whom? Please identify the tools(s) (e.g., a rubric) used in the process and **include them in/with this report document** (please do not just refer to the assessment plan).

The process used to determine the level of competency or grade for each resident is based on a rubric for both didactic and clinical courses. Each course is evaluated by the course director with either a grade or pass/fail for each resident. Additionally, for the third-year residents, the scores from the qualifying exam from the American Board of Periodontology are utilized for the evaluation of student learning. The Program Director makes ongoing assessments on the qualifying exam and oral exam outcomes. The Graduate Periodontics Advisory committee meets twice a year and assesses residents' performance, considering the feedback from the course instructors, clinical experience, clinical competency and didactic progress, In-Service exams, resident teaching, resident research, infection control and case presentations, to determine the promotion of the residents.
The rubrics and assessment tools are attached at the end of the document.

4. Data/Results

What were the results of the assessment of the learning outcome(s)? Please be specific. Does achievement differ by teaching modality (e.g., online vs. face-to-face) or on-ground location (e.g., STL campus, Madrid campus, other off-campus site)?

All didactic courses and clinical experiences for the Periodontal Residents are offered at the Center of Advanced Dental Education, and the affiliated institutions as a face-to-face experience. The assessment of the learning outcomes is comprehensive and inclusive of all the locations.
1. To be competent in all aspects of clinical periodontics.
All residents received satisfactory grades in courses that are used to assess this learning objective. All faculty members on the Graduate Periodontics Advisory Committee agreed that the three graduating residents were competent in all aspects of clinical periodontics.

2. To be prepared for American Board of Periodontology certification.
All residents received satisfactory grades in courses that are used to assess preparation for board examination. The three graduating residents have not taken the ABP qualifying examination which will occur in the spring of 2024. Of the 2023 graduating class, one of the three graduated residents successfully passed the American Board of Periodontology exam. The other two are prepared to re-take it in 2024.

3. To critically evaluate scientific literature and communicate the information to others.
All the residents participated actively and productively in critical reviews of the literature, case presentations and

multidisciplinary seminars at the Center of Advanced Dental Education. Moreover, the residents on their second- and third year, are involved in teaching undergraduate students at the affiliated dental school. Finally, the three graduating residents completed a written thesis and successfully passed an oral examination from the Graduate Thesis Committee.

5. Findings: Interpretations & Conclusions

What have you learned from these results? What does the data tell you? Address both a) learning gaps and possible curricular or pedagogical remedies, and b) strengths of curriculum and pedagogy.

The outcomes assessment from this cycle has revealed that overall, the educational methodology has been effective to achieve the specific goals of the program satisfactorily. Beyond that, graduates are well prepared to start to practice as periodontics specialists immediately after graduation.

a) The most important area that we identified as an area for improvement, was from the poor results of the American Board of Periodontology Qualifying exam. This exam has been offered historically after the residents' graduation. However, 2023 was the first year that the exam was taken during the residency, one year before compared to previous years. Changes have been made in response to the assessment findings, like incorporating the Year-I residents in the Classic Literature Reviews, and the Periodontal Systemic Reviews, to aid in resident preparation for the American Board of Periodontology examination. Also, scheduled seminars for In-Service examination preparation, and re-organized the schedule to provide more available time for the Year-III residents for self-study.

b) The strength of the program remains the extensive clinical exposure that the residents achieve during the 3 years of the residency, as well as the multidisciplinary collaborations among residents at CADE. The Advisory Committee agrees that the educational methodology is relevant and effective.

6. Closing the Loop: Dissemination and Use of Current Assessment Findings

A. When and how did your program faculty share and discuss the results and findings from this cycle of assessment?

The faculty provides feedback from the outcomes assessment of each course, at the end of the Spring and Fall Semesters directly to the Program Director through a -resident grades report- via direct communication or through e-mail. Assessment feedback to the residents occurs during discussions with the Program Director, the Course Directors, Program Faculty and Graduate Thesis Committee members. Feedback also occurs following the results of the American Board of Periodontology qualifying exam.

B. How specifically have you decided to use these findings to improve teaching and learning in your program? For example, perhaps you've initiated one or more of the following:

Changes to the Curriculum or Pedagogies	• Course content: Reviewing the list of relevant classic literature to update and synthetize the reading assignments of the residents. • Course sequence: Incorporating the Year-I class in the Classic Literature Reviews.	• Changes in frequency or scheduling of course offerings: Adding additional time to the didactic courses related to classic literature and board exam preparation. • Course methodology: The residents participate on identifying areas of weakness, and as a group prepare mini-topic presentations to facilitate learning.
Changes to the Assessment Plan	• Evaluation process There have been no significant changes to the assessment plan or process within the last year. Minor changes about curricular content and course assessment have been made in the	• Evaluation tools (e.g., rubrics): New rubrics and competency benchmarks have been added to help standardize the assessment of the residents.

individual program courses.

Please describe the actions you are taking as a result of these findings.

Changes have been made to increase the didactic time for the Year-I residents in the Classic Literature Reviews, and the Periodontal Systemic Reviews. Also, scheduled seminars for In-Service examination preparation, and re-organized the schedule to provide more available time for the Year-III residents for self-study.

If no changes are being made, please explain why.

n/a

7. Closing the Loop: Review of Previous Assessment Findings and Changes

A. What is at least one change your program has implemented in recent years **as a result of previous assessment data**?

Incorporation of Rubrics and Benchmarks for resident assessment. This facilitates the calibration of faculty members regarding the establishment of competency and promotion for the residents.

B. How has the change/have these changes identified in 7A been assessed?

The Graduate Periodontics Advisory Committee has assessed through communication with the course directors and faculty the impact of the incorporation of the Rubrics and Benchmarks. All interested parts agreed that it was a positive addition to the assessment methodology.

C. What were the findings of the assessment?

The Periodontics Program Faculty and the Graduate Periodontics Advisory Committee all agreed that the incorporation of Benchmarks and Rubrics facilitates a more objective evaluation and assessment of the residents.

D. How do you plan to (continue to) use this information moving forward?

The assessment of the residents through the established rubrics and benchmarks will continue to be done by the faculty and course directors at least twice a year and reported to the program director to be analyzed by the Graduate Periodontics Advisory Committee.

IMPORTANT: Please submit any assessment tools (e.g., artifact prompts, rubrics) with this report as separate attachments or copied and pasted/appended into this Word document. Please do not just refer to the assessment plan; the report should serve as a stand-alone document. Thank you.

Graduate Periodontics Competencies Benchmarks

Category	Procedure	LEVEL	Items for evaluation
Exam	Comprehensive Periodontal Exam	**C**	Analysis of clinical and radiographic findings Consideration of local and systemic factors Consideration of previous therapy Establishing diagnosis, based on staging and grading Establishing prognosis Establishing treatment plan and alternatives Establishing stages of treatment and priorities Consideration of prosthetic and restorative plan Communication with patient, referring dentist and faculty Establishing need for multidisciplinary approach
	Implant Consultation Clinical and Radiographic exam Restorative plan	**C**	Analysis of clinical and radiographic findings Consideration of local and systemic factors Consideration of previous therapy Establishing diagnosis, including sorf and hard tissue deficiencies Establishing prognosis Establishing treatment plan and alternatives Establishing stages of treatment and priorities Consideration of prosthetic and restorative plan Communication with patient, referring dentist and faculty Establishing need for multidisciplinary approach
	Re-evaluation	**C**	Clinical and Radiographic exam Assessment of therapy results Establishing further therapy Establishing maintenance recall
Nonsurgical	Scaling and Root Planing	**C**	Assessment of Local and systemic factors Detection of accretions Removal of accretions Time management Establishing re-evaluation Establishing maintenance recall intervals Establish need for adjunct therapy Strategies for biofilm control
	Biofilm control.	**C**	Assessment of Local and systemic factors Review of maintenance recall intervals Establish need for adjunct therapy Incorporate strategies for biofilm control
	Periodontal Maintenance Control of local factors	**C**	Assessment of clinical parameters Review of radiographic findings Assessment of Local and systemic factors Detection of accretions Removal of accretions Time management Establishing re-evaluation Establishing maintenance recall intervals Establish need for adjunct therapy Strategies for biofilm control
	Adjunctive therapy local and systemic	**C**	Assessment of Local and systemic factors Establish need for additional surgical or non-surgical therapy
	Occlusal Therapy	**C**	Establish need for adjunct therapy, night guards or splinitng. Consideration for restorative phase Impact of occlusion on periodontal disease progression
Surgical	**Resective surgery**		Indication for procedure Anesthetic Incisions Flap reflection Soft tissue management Hard tissue management Flap reapproximating Sutures Dressing Post operative management
	Gingivoplasty /Gingivectomy	**C**	
	Periodontal flap,	**C**	
	Osteoplasty, ostectomy,	**C**	
	Regenerative and reparative surgery		Indication for procedure Anesthetic Incisions Flap reflection Soft tissue management Hard tissue management Graft and membrane selection Biologics Selection Flap reapproximating Sutures Dressing Post operative management
	Osseous grafting	**C**	
	Guided tissue regeneration	**C**	
	---use of biologics	**C**	
	---utilization of tissue substitutes	**C**	
	Periodontal plastic and esthetic surgery		Indication for procedure Anesthetic Incisions Flap reflection Soft tissue management Root modification Graft selection Biologics Selection Flap reapproximating Sutures Dressing Post operative management
	Root coverage procedures	**C**	
	Gingival augmentation	**C**	
	Esthetic crown lengthening	**C**	Indication for procedure and proper classification Anesthetic Incisions Flap reflection Soft tissue management

			Hard tissue management Prosthetic considerations Root modification Flap reapproximating Sutures Dressing Post operative management
	Tooth extraction within		Indication for procedure Anesthetic Incisions Flap reflection Soft tissue management Hard tissue management Flap reapproximating Sutures Dressing Post operative management
	Periodontal therapy	**C**	
	Implant therapy	**C**	
Systemic	Interrelationships of periodontal and systemic health	**C**	Medical history assessment Clinical exam Pathophysiology Patient Management and Co-management Pharmacological interactions Consideration of local and systemic factors Establishing diagnosis and prognosis Establishing treatment plan and alternatives Establishing stages of treatment and priorities Communication with physiscian Establishing need for multidisciplinary approach
	Periodontal treatment of medically compromised patients	**C**	
	Management of non-plaque related periodontal disease	**C**	
Implant Therapy	**Implant site development** Hard Tissue Soft Tissue	**C**	Indication for procedure Establish prosthetic goals Analysis of clinical and radiographic information Use of 3D planning Interaction with restoring dentist or prosthodontist Anesthetic Incisions Flap reflection Soft tissue management Hard tissue management Graft and membrane selection Biologics Selection Flap reapproximating Sutures Dressing Post operative management
	Ridge Augmentation	**C**	
	Sinus Augmentation ---Vertical --- Lateral Window	**C**	
	Implant placement Anterior Posterior Immediate	**C**	
	Provisionalization of dental implants. Anterior Posterior	**C**	Case Selection Adequate timing Adequate occlusion Adequate soft tissue profile
	Maintenance of implants	**C**	Review of clinical parameters Review of radiographic findings Biofilm control Control of local factors
Management of peri-implant diseases	Peri-implant mucositis	**C**	Establishing diagnosis and treatment plan Indication for procedure Anesthetic Incisions Flap reflection Soft tissue management Hard tissue management Flap reapproximating Sutures Dressing Post operative management
	Peri-implantitis	**C**	
Anxiety Management	Minimal Enteral Sedation	**C**	Case selection Assessment of anxiety level and scale Assessment of medical history Assessment of ASA Classification Physical assessment of airway Pharmacology Pre- intra- and post-operative management
	Moderate Parenteral Sedation	**C**	

Graduate Periodontics Resident Performance Rubrics

LEVEL	Competent	Satisfactory	Needs Improvement
Overall Resident Skillset	Student Resident demonstrates high-level ability to: 1. Collect, organize, analyze and interpret data. 2. Interpret conventional and three-dimensional images as they relate to periodontal and dental implant therapy. 3. Formulate diagnoses and prognoses. 4. Develop a comprehensive treatment plan. 5. Understand and discuss a rationale for the indicated therapy. 6. Evaluate critically the results of therapy. 7. Apply Critical Thinking 8. Demonstrate Self-Assessment capacity. 9. Apply Biomedical Knowledge 10. Apply Principles of Evidence-Based Patient Care 11. Apply Principles of Ethical Decision Making 12. Communicate effectively to patients the nature of their periodontal health status, risk factors and treatment needs. 13. Communicate effectively with dental and other health care professionals, interpret their advice and integrate this information into the treatment of the patient. 14. Integrate the current concepts of other dental and medical disciplines into periodontics. 15. Organize, develop, implement, and evaluate a periodontal maintenance program. 16. Utilize allied dental personnel effectively. 17. Integrate infection control into clinical practice	Student Resident demonstrates an acceptable level of ability to: 1. Collect, organize, analyze and interpret data. 2. Interpret conventional and three-dimensional images as they relate to periodontal and dental implant therapy. 3. Formulate diagnoses and prognoses. 4. Develop a comprehensive treatment plan. 5. Understand and discuss a rationale for the indicated therapy. 6. Evaluate critically the results of therapy. 7. Apply Critical Thinking 8. Demonstrate Self-Assessment capacity. 9. Apply Biomedical Knowledge 10. Apply Principles of Evidence-Based Patient Care 11. Apply Principles of Ethical Decision Making 12. Communicate effectively to patients the nature of their periodontal health status, risk factors and treatment needs. 13. Communicate effectively with dental and other health care professionals, interpret their advice and integrate this information into the treatment of the patient. 14. Integrate the current concepts of other dental and medical disciplines into periodontics. 15. Organize, develop, implement, and evaluate a periodontal maintenance program. 16. Utilize allied dental personnel effectively. 17. Integrate infection control into clinical practice	Student Resident demonstrates a minimally acceptable level of ability to: 1. Collect, organize, analyze and interpret data. 2. Interpret conventional and three-dimensional images as they relate to periodontal and dental implant therapy. 3. Formulate diagnoses and prognoses. 4. Develop a comprehensive treatment plan. 5. Understand and discuss a rationale for the indicated therapy. 6. Evaluate critically the results of therapy. 7. Apply Critical Thinking 8. Demonstrate Self-Assessment capacity. 9. Apply Biomedical Knowledge 10. Apply Principles of Evidence-Based Patient Care 11. Apply Principles of Ethical Decision Making 12. Communicate effectively to patients the nature of their periodontal health status, risk factors and treatment needs. 13. Communicate effectively with dental and other health care professionals, interpret their advice and integrate this information into the treatment of the patient. 14. Integrate the current concepts of other dental and medical disciplines into periodontics. 15. Organize, develop, implement, and evaluate a periodontal maintenance program. 16. Utilize allied dental personnel effectively. 17. Integrate infection control into clinical practice
Patient Assessment, Periodontal and Implant Exam, Diagnosis, Prognosis, and Treatment Plan	Student Resident demonstrates high-level ability in performing proper evaluation of the periodontium, ridge structures and implant needs by 1. Completing an appropriate visual examination. 2. Determining accuracy of periodontal charting and radiographic assessment, 3. Identifying etiology and risk factors (plaque index, predisposing factors, systemic risk factors, occlusion) 4. Formulating a periodontal diagnosis using the staging and grading system. 5. Determining the patient's periodontal prognosis. 6. Developing an appropriate treatment plan, considering the treatment phases. 7. Developing a prosthetically driven treatment plan for implant cases with collaboration of the restoring dentist. 8. Completing the informed consent.	Student Resident demonstrates an acceptable ability in performing proper evaluation of the periodontium by 1. Completing an appropriate visual examination. 2. Determining accuracy of periodontal charting and radiographic assessment, 3. Identifying etiology and risk factors (plaque index, predisposing factors, systemic risk factors, occlusion) 4. Formulating a periodontal diagnosis using the staging and grading system. 5. Determining the patient's periodontal prognosis. 6. Developing an appropriate treatment plan, considering the treatment phases. 7. Developing a prosthetically driven treatment plan for implant cases with collaboration of the restoring dentist. 8. Completing the informed consent.	Student Resident demonstrates minimally acceptable ability in performing proper evaluation of the periodontium by 1. Completing an appropriate visual examination. 2. Determining accuracy of periodontal charting and radiographic assessment, 3. Identifying etiology and risk factors (plaque index, predisposing factors, systemic risk factors, occlusion) 4. Formulating a periodontal diagnosis using the staging and grading system. 5. Determining the patient's periodontal prognosis. 6. Developing an appropriate treatment plan, considering the treatment phases. 7. Developing a prosthetically driven treatment plan for implant cases with collaboration of the restoring dentist. 8. Completing the informed consent.
Evaluate Outcomes of Treatments, Recall Strategies and Prognosis	Student Resident demonstrates a high-level ability in performing proper evaluation of periodontal and implant therapy outcomes (visual examination, periodontal charting, radiographic analysis) and assessing the tissue response to initial therapy and treatment outcomes. Considers etiologic and risk factors, determines prognosis, and establishes future treatment and/or maintenance plan based on patient's specific needs.	Student Resident demonstrates an acceptable ability in performing proper evaluation of periodontal and implant therapy outcomes (visual examination, periodontal charting, radiographic analysis) and assessing the tissue response to initial therapy and treatment outcomes. Considers etiologic and risk factors, determines prognosis, and establishes future treatment and/or maintenance plan based on patient's specific needs.	Student Resident demonstrates a minimally acceptable ability in performing proper evaluation of periodontal and implant therapy outcomes (visual examination, periodontal charting, radiographic analysis) and assessing the tissue response to initial therapy and treatment outcomes. Considers etiologic and risk factors, determines prognosis, and establishes future treatment and/or maintenance plan based on patient's specific needs.
Use Critical Thinking	Student Resident demonstrates high level of critical thinking in analyzing the patient's medical history, clinical and radiographic findings, and etiologic and risk factors establishing an appropriate diagnosis, prognosis and defining the periodontal and/or implant treatment plan as part of the comprehensive treatment. Student Resident demonstrates high level of critical thinking in analyzing the response of the tissue to the initial phase of the periodontal treatment, etiology, risk factors, and/or implant therapy. Evaluating the changes of the periodontal tissue through visual examination, periodontal charting and radiographic exam, defining treatment plan for the next phases of periodontal treatment, and/or implant therapy.	Student Resident demonstrates an acceptable level of critical thinking in analyzing the patient's medical history, clinical and radiographic findings, and etiologic and risk factors establishing an appropriate diagnosis, prognosis and defining the periodontal and/or implant treatment plan as part of the comprehensive treatment. *minimal guidance required from faculty. Student Resident demonstrates an acceptable level of critical thinking in analyzing the response of the tissue to the initial phase of the periodontal treatment, etiology, risk factors, and/or implant therapy. Evaluating the changes of the periodontal tissue through visual examination periodontal charting and radiographic exam; defining treatment plan for the next phases of periodontal treatment, and/or implant therapy. *minimal guidance required from faculty	Student Resident demonstrates a basic level of critical thinking in analyzing the patient's medical history, clinical and radiographic findings, and etiologic and risk factors establishing an appropriate diagnosis, prognosis and defining the periodontal and/or implant treatment plan as part of the comprehensive treatment. * substantial guidance required from faculty. Student Resident demonstrates a basic level of critical thinking in analyzing the response of the tissue to the initial phase of the periodontal treatment, etiology, risk factors, and/or implant therapy.. Evaluating the changes of the periodontal tissue through visual examination, periodontal charting and radiographic exam; defining treatment plan for the next phases of periodontal treatment, and/or implant therapy. * substantial guidance required from faculty

Demonstrate Self Assessment	Student Resident demonstrates an excellent understanding of the procedure and the relevance of the application of clinical skills to successfully complete treatment. Student Resident has an excellent awareness of his/her strengths and weaknesses in successfully completing the procedure. Student Resident highly appreciates the importance of self-assessment to improve future clinical experiences.	Student Resident demonstrates an acceptable understanding of the procedure and the relevance of the application of clinical skills to successfully complete treatment. Student has an acceptable awareness of his/her strengths and weaknesses in successfully completing the procedure. Student Resident appreciates the importance of self-assessment to improve future clinical experiences.	Student Resident demonstrates a basic understanding of the procedure and the relevance of the application of clinical skills to successfully complete treatment. Student Resident has a basic awareness of his/her strengths and weaknesses in successfully completing the procedure. Student Resident minimally appreciates the importance of self-assessment to improve future clinical experiences.
Apply Biomedical Knowledge	Student Resident demonstrates an excellent ability integrating biomedical concepts into the clinical experience through: 1. Identification of systemic influences (medical conditions and medications) affecting the patient's periodontal condition or treatment. 2. Proper assessment of periodontal tissue and accuracy of periodontal examination, 3. Identification of the patient's periodontal risk factors. 4. Formulation of diagnosis and a sequenced periodontal treatment plan. 5. Proper assessment of the local conditions including osseous and soft tissue, as well as prosthetic considerations for implant therapy and peri-implant tissue management.	Student Resident demonstrates an acceptable ability integrating biomedical concepts into the clinical experience through: 1. Identification of systemic influences (medical conditions and medications) affecting the patient's periodontal condition or treatment. 2. Proper assessment of periodontal tissue and accuracy of periodontal examination, 3. Identification of the patient's periodontal risk factors. 4. Formulation of diagnosis and a sequenced periodontal treatment plan. 5. Proper assessment of the local conditions including osseous and soft tissue, as well as prosthetic considerations for implant therapy and peri-implant tissue management.	Student Resident demonstrates a minimally acceptable ability integrating biomedical concepts into the clinical experience through: 1. Identification of systemic influences (medical conditions and medications) affecting the patient's periodontal condition or treatment. 2. Proper assessment of periodontal tissue and accuracy of periodontal examination, 3. Identification of the patient's periodontal risk factors. 4. Formulation of diagnosis and a sequenced periodontal treatment plan. 5. Proper assessment of the local conditions including osseous and soft tissue, as well as prosthetic considerations for implant therapy and peri-implant tissue management.
Apply Principles of Evidence-Based Patient Care	Student Resident demonstrates an excellent ability to apply the principles of EBPC by: 1. Estimating a correct sequence and timing of the reevaluation assessment, 2. Making appropriate future treatment planning decisions based on evidence (including surgical considerations, restorative implications and or/ recall intervals), 3.Considering appropriate multidisciplinary needs or medical consultations.	Student Resident demonstrates an acceptable ability to apply the principles of EBPC by: 1. Estimating a correct sequence and timing of the reevaluation assessment, 2. Making appropriate future treatment planning decisions based on evidence (including surgical considerations, restorative implications and or/ recall intervals), 3.Considering appropriate multidisciplinary needs or medical consultations.	Student Resident demonstrates a minimally acceptable ability to apply the principles of EBPC by: 1. Estimating a correct sequence and timing of the reevaluation assessment, 2. Making appropriate future treatment planning decisions based on evidence (including surgical considerations, restorative implications and or/ recall intervals), 3.Considering appropriate multidisciplinary needs or medical consultations.
Apply Principles of Ethical Decision Making	Student Resident demonstrates high-level ability in applying the ethical principles (autonomy, beneficence, nonmaleficence, justice, veracity) in the planning of the patient's periodontal and/ or implant therapy treatment including making proper clinical decisions.	Student Resident demonstrates an acceptable ability in applying the ethical principles (autonomy, beneficence, nonmaleficence, justice, veracity) in the planning of the patient's periodontal and/ or implant therapy treatment including making proper clinical decisions.	Student Resident demonstrates a minimally acceptable ability in applying the ethical principles (autonomy, beneficence, nonmaleficence, justice, veracity) in the planning of the patient's periodontal and/ or implant therapy treatment including making proper clinical decisions.
Evaluation of Complexity and Need for Interdisciplinary Care	Student Resident demonstrates a high-level ability in determining the complexity of the case, and indication for interdisciplinary care, with other members of the health care team through the analysis of risk factors, severity and progression of the periodontal condition, medical history (systemic conditions and medications) and treatment challenges	Student Resident demonstrates an acceptable level of ability in determining the complexity of the case, and indication for interdisciplinary care, with other members of the health care team through the analysis of risk factors, severity and progression of the periodontal condition, medical history (systemic conditions and medications) and treatment challenges	Student Resident demonstrates a minimally acceptable level of ability in determining the complexity of the case, and indication for interdisciplinary care, with other members of the health care team through the analysis of risk factors, severity and progression of the periodontal condition, medical history (systemic conditions and medications) and treatment challenges.
Communication and Collaboration with Other Members of the Health Care Team	Student Resident demonstrates a high-level of ability in efficient and timely communication with the referring dentist or specialist, or other members of the health care team. Student Resident documents properly the progression of care.	Student Resident demonstrates an acceptable level of ability in efficient and timely communication with the referring dentist or specialist, or other members of the health care team. Student Resident documents properly the progression of care.	Student Resident demonstrates a minimally acceptable level of ability in efficient and timely communication with the referring dentist or specialist, or other members of the health care team. Student Resident documents properly the progression of care.
Overall Patient Management	Student Resident performs to a level that exceeds what it is expected at his stage of clinical training in the areas of time management, patient comfort, patient education, professional conduct, organization and infection control practices.	Student Resident demonstrates competency in the areas of time management, patient comfort, patient education, professional conduct, organization and infection control practices.	Student Resident performs at level of minimally acceptable in the areas of time management, patient comfort, patient education, professional conduct, organization and infection control practices. The Student Resident needs to be more proactive in clinical management.