## **Pre-doctoral Periodontal Surgical Case Management**

Per Dr. Shapurian: The following form is a preparation guideline (not a grading sheet) for UGs students as to what the requirements are and if the patient needs isolated area of flap/osseous surgery for pocket elimination or crown-lengthening.

## Pre-doctoral Periodontal Surgical Case Management

Prerequisites				Comment
Completion of 6 non-surgical periodontal procedures				
Completion of 3 surgical assisting experiences ( Preferably osseous surgery)				
Pre-Doctoral student is the primary provider of the patient				
Proof of attendance & completion of third year surgical workshops				
Evidence of phase I completion (caries control, RCTx, Provisional restorations, extraction of hopeless teeth)				
Updated Medical history & medical consultation ( recent blood work as applicable)				
T 101 1 5		1		
Initial Document				Comment
Diagnostic Full mouth radiographs ( 1-3 yrs) & updated PA/BW as needed				
Diagnostic models				
The appropriate surgical treatment planned by periodontology faculty is entered into AXIUM by group practice coordinator				
Evidene of patient's consent to proposed treatment recommendation				
Request Pre-surgical Evaluation appointment (arranged with Dr. Shapurian on WEDNESDAY AM)				
<u> </u>				
Pre-op Appt				Comment
Pre-surgical Evaluation & case presentation by Pre-doctoral student				
Pre-doctoral dental student has read the appropriae literature and demonstrates knowledge of the proposed tx				
A plaque free score of 80% or better must be achieved prior to surgical therapy ( additional initial therapy prn)				
Pre-op instructions & pertinent prescriptions ( CHX- rinse) will be provided to patient				
Step-by-step review of surgical technique ( to be repeated as needed prior to pt's sx appointment)				
Appointment is set on AXIUM <u>in PG- perio clinic</u> & consultation case note approved by faculty				
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Day of The Surg				Comment
Pre-doc & another dental student ( assistant) to be present 15mins earlier to set up for the surgery				
Proper attir, infection control technique & barrier protection is reinforced				
Patient is on time & upon arrival will be seated for review of MHX & monitoring vitals				
Premedication with anti-inflammatory med ( Tylenol, Advil, Aleve)				
Surgical Evaluati	ion ( & Feedback)			Comment
	•	esthesia with proper anesthetic		
Debridement of the surgical field prior to incision				
Satisfatory Flap design				
Successful removal of soft tissue to gain acess to osseous crestal anatomy				
Meticulous SCRP				
Proper Ostectomy & Osteoplasty				
Correct choice of suture material & adequate wound closure				
Proper mixing of periodontal dressing & adaptation to the surgical site (optional)				
Review of post- op instruction ( written & verbal) & ice-pack & presriptions				
Schedule lwk/ 2-3wks/ 6-8wks suture removal & follow up appointments				
Completion of surgical case note & "swipe" by attending faculty				
completion of saligical case note at swipe by affecting faculty				
Date of supperv		II.	Ontient percent I	*

Patient

Attending faculty

Pre-doctoral-1

Pre-doctoral-2 (assistant)