Dental Hygiene Treatment Selection Worksheet

All information from this worksheet must be entered into the electronic grading system either by you online (at least 48 hrs before the start of your exam) or at the exam site by the DSM. If you enter online, you will confirm your entry with the DSM on the day of the exam at which time, changes can be made if necessary.

This form is for your use prior to and on the day of the exam. It can be duplicated as needed.

Tooth # & Calc. Location	Circle Primary quadrant: UR UL Posterior teeth in 2nd quadrant: LR LL # #
	Subgingival Calculus Removal In the large boxes to the left, enter the numbers of the teeth in the primary quadrant (and up to two teeth in a second quadrant) and indicate in the smaller adjacent box the surface on the tooth where the calculus is located that you have selected for removal (M = Mesial, F = Facial, D = Distal, L = Lingual). Twelve surfaces must be listed in ascending order. If more than one surface is selected on the same tooth, enter the tooth number each time a new surface is listed, example:
	Of the 12 surfaces of subgingival calculus, 8 must be on posterior teeth. At least 5 of the 8 must be on mesial or distal surfaces and the teeth must be within 2 mm of an adjacent tooth. At least 3 of the 5 surfaces must be proximal surfaces on molars. Only one of the 3 surfaces on molars may be located on a surfaces with no adjacent tooth. The remaining 4 surfaces may be located on any surface in the case selection.

Candidate Sequential:

PLACE BARCODE HERE

Candidate ID:

Test Site: