



FORM CRED 560EQ

EQUINE Credentials
Radiograph Reviewer Report
Form

This version is in effect for the Credentials Review cycle current at the time of download of this form.

Introduction

Radiographs of good quality are critically important for the diagnosis and treatment of sinus and oral diseases. An entry-level diplomate should know what perfect skull and dental radiographs look like and how to produce them, including proper mounting, labeling, projection geometry and processing.

AVDC residents are required to submit a radiographic survey set of a mature equine cadaver head. On the Resident Resources page on the AVDC web site (www.AVDC.org), click *Equine Radiograph Set Information* for more information on what images are to be obtained, use of cadavers, how to submit a radiograph set and other details of this requirement.

The goal of the Credentials Committee relative to this requirement is to ensure that the radiographs indicate that the resident has the training, knowledge and skill to fulfill the requirements.

Specific criteria are used to assess the radiograph set. ***Doing the wrong thing well is not sufficient for approval.*** The submission of satisfactory radiographs is an opportunity for a resident to show how well s/he has integrated the principles of dental radiography into her/his practice.

The evaluation form used by the Credentials Committee members is shown below. Trainees are encouraged to use this form to complete a self-assessment of their radiographs before submitting them to their Supervisor and then to AVDC for review. The comments included on the form describe common reasons for non-approval of radiographic submissions. Please note that these comments are not all inclusive - there may be other reasons for non-approval. If the radiograph set cannot be approved, please indicate which comments are intended to be **Major Reasons for Non Approval.**

Full-mouth Dental and Sinus Survey Review Form

Code number:	Species:
Reviewer:	Date reviewed:

All teeth clearly visible?

A complete permanent dentition is required. First premolar teeth do not have to be present. Multiple or major teeth missing is automatic cause for non-approval. The resident is not required, but is encouraged to use a male cadaver with canine teeth.

Comments:

Sinuses imaged with lateral, dorsoventral and lateral dorsal-ventral oblique views?

The frontal, conchal and maxillary sinus structures can be fully evaluated in a combination of dorsoventral (DV), lateral and lateral DV oblique views of the skull.

Comments:

Radiographs mounted in labial presentation and labeled?

The radiographs are to be mounted using “labial mounting”. The maxillary teeth are to have the roots facing upwards and the crown downwards. The reverse applies for the mandibular teeth. The mounting requirement applies to conventional and digital submissions. See example in the Radiograph Set Information.

The label is to include: Cadaver, date, age (if known), breed (if known), sex (if known).

Comments:

Number of radiographs included?

The maximum number of views that may be submitted is 30. When multiple views of the same teeth are included, the label is to include the reason for the additional views. Inclusion of unexplained multiple views is automatic cause for non-approval.

Comments:

Proper angulation - no foreshortening, elongation, horizontal overlap?

Foreshortening or elongation of teeth may be a cause for non-approval if it interferes with interpretation of the radiograph. If additional radiograph(s) are included to isolate some roots, does the label state the purpose of the additional radiograph(s)?

Comments:

Adequate isolation of roots, with apical periodontal structures clearly visible?

Sufficient space beyond apices is to be visible (on a series of views when necessary). 5mm or half a central incisor width would be considered sufficient.

Comments:

Exposure/Developing Technique Adequate? Contrast, clarity, lack of artifacts?

Chemical stains, scratches, other artifacts are automatic cause of non-approval if they interfere with interpretation of the radiograph.

Comments:

SUMMARY:

Unable to review: Quality of the digital images submitted is too poor to permit review in electronic format. E.g. pixelation. Return to resident un-reviewed.

Approve.

Request clarification before Approve/Non-Approve decision is made:

Items Requiring Clarification:

Do not Approve: (Use space below for specifics – must include at least one Major Reason for Non Approval)

Reasons for Non Approval:

Submit the completed form via DMS by attaching the review report file within the document that is being reviewed.

Name the file: Code# YourLASTNAME Approve or Comments or Not Approve