Credentials Committee Form for Solicited Article Review

Code number:	
Short title of submission:	
AVDC Policy	Pre-2014 CREP Requirement item **OR** 2014 Publication Requirement Item *(Delete one)*
Dental Discipline: *(Required only for pre-2014 CREP policy)*	*(Delete as necessary)* Endodontics *OR* Oral Medicine *OR* Oral Surgery *OR* Periodontics *OR* Prosthodontics/Restorative Dentistry Radiology *OR* Other
Submission Type:	Solicited Review Article
Supervisor Report:	Does the Supervisor Report confirm that: The trainee/resident was the sole or first author. The trainee/resident conducted the literature research. The trainee/resident wrote the first draft without assistance. The draft chapter was reviewed by the Issue Editor. The trainee/resident wrote the final version as submitted to the Publisher.

REVIEWER'S REPORT *(Delete or add comments as appropriate)*

Is the item accurately categorized as a solicited article?
YES   NO   Comments:
Is the dental discipline accurately categorized?
YES   NO   Comments:

Are all directly relevant published original-content articles appropriately cited and are any conclusions or recommendations that the author draws from the chapter/review appropriate?
YES   NO   Comments:

Is the content logically organized, and does it fully cover what would be expected in an article with that title?
YES   NO   Comments:

Is the article clearly written? **YES   NO**
Comments:
Does the article warrant the CREP points or First/Second Article status recommended by the Supervisor?   **YES   NO**
Comments:

SUMMARY and Recommendation: (Mark one)

Note: The Approve/Non-Approve decision is to be based on **content** of the report. If the report is unclear in **presentation** or incomplete in specific **content** areas, but is generally acceptable otherwise, use the **Request for Clarification** option.

☐	**Unable to review.** Quality of the images submitted is too poor to permit review in electronic format. Recommend return to applicant un-reviewed.
☐	**Unable to complete review.** Recommend opinion from expert in area identified in Comments, below.
☐	**Full approval.**
☐	**Borderline approval.** Although the article is not perfectly written, shortcomings in **presentation** are insufficient to warrant non-approval in an article that is suitable in **content**.
☐	**Request clarification** before Approve/Non-Approve decision is made. Include in Comments (below) exactly what clarification is needed. It is assumed that if the trainee provides the requested material adequately, the article will be approved.
☐	**Do not approve** (requires justification). Use Comment space for specifics.

Comments:

Save this review as: **Code number** and **YourLASTNAME** and **Approve** **or** **NotApprove** and **CREP points or Article status you recommend if approved** (e.g. **CREP 0903 Harvey Approve 2 points or Second Article**). Send it to the Credentials Committee chair by uploading it to DMS **while the document this review relates to is open** (click the Attach File command on the command bar at the top of the document screen, follow the on-screen instructions to browse to and upload the review file, and then be sure to click Save Changes on the command line at the top of the screen).