



**AVDC Online Case Log  
Examples in Each MRCL Category**

**Small Animal Examples are included as pink lines**  
**Equine Examples are included as green lines.**

These examples have been prepared by members of the Nomenclature, Credentials and Training Support Committees. The format and abbreviations follow the AVDC requirements. Included are examples of how to log cases when more than one procedure is performed on that patient.

*Note:* All teeth numbers are to be entered, without use of dashes, except in the case of OM, OS3, OS4 and OS5, where the ‘tooth # - tooth #’ describes the location of a lesion, surgical margins or location of a device.

The on-line Case Log Information document provides additional information and clarifications about specific Case Log Categories. The Abbreviation List contains all AVDC-approved abbreviations in alphabetical order. These documents are available via links in the Information for Registered Residents web page.

<b>OM Category: Oral Medicine:</b> Cases requiring involved diagnostic tests and not involving treatment procedures that would be logged in any other category.		
<b>MRCL Category</b>	<b>Diagnosis</b>	<b>Procedure</b>
<i>Example:</i> Squamous cell carcinoma of the maxilla diagnosed by incisional biopsy		
<b>OM:</b>	OM/SCC 101-201	B/I
<i>Example:</i> Osteomyelitis of the mandible diagnosed by incisional biopsy and culture and sensitivity		
<b>OM:</b>	OST 307, 308, 309	B/I, CS
<i>Example:</i> Developmentally missing teeth 308, 411 (Note: HYP, OLI and ANO should only be used for developmentally missing teeth, not for those missing due to acquired causes such as fell out or extracted.)		
<b>OM:</b>	HYP 308, 411	RAD
<i>Example:</i> Malignant melanoma of the palate diagnosed by incisional biopsy and CT scan		
<b>OM:</b>	OM/MM 109	B/I, CT
<i>Example: Equine:</i> Unilateral nasal discharge		
<b>OM:</b>	Primary sinusitis, left	Rhinoscopy, trephine sinusotomy, CS, TP
	SIN/IN/RMX	N/EN, SIN/TRP, CS, TP

<b>PE1: Periodontal Category 1:</b> Complete professional dental cleaning not requiring involved periodontal treatment. Note: PRO is written in every case in every perio category unless it was not done for some reason (referring DVM just did it or it was declined).		
<b>MRCL Category</b>	<b>Diagnosis</b>	<b>Procedure</b>
<i>Example:</i> Routine oral exam and professional dental cleaning on patient with no periodontal disease		
<b>PE1:</b>	PDO	PRO

<i>Example:</i> Routine oral exam and professional dental cleaning on patient with gingivitis only		
<b>PE1:</b>	PD1	PRO
<i>Example: Equine:</i> Excessive calculus and PD1 of incisors/canine teeth with ultrasonic scaling and polishing <i>*Note:</i> Equine partial prophylaxis is acceptable.		
<b>PE1:</b>	PD1 101, 102, 103, 104, 201, 202, 203, 204, 301, 302, 303, 304, 401, 402, 403, 404	PRO 101, 102, 103, 104, 201, 202, 203, 204, 301, 302, 303, 304, 401, 402, 403, 404

<b>PE2: Periodontal Category 2:</b> Involved periodontal scaling and root planing.		
<b>MRCL Category</b>	<b>Diagnosis</b>	<b>Procedure</b>
<i>Example:</i> Oral exam and professional dental cleaning on patient with root exposure or periodontal pockets of PD2 on 208, 209, 308, 404		
<b>PE2:</b>	PD1, PD2 208, 209, 308, 404	PRO, RP/C GC 208, 209, 308, 404
<i>* Note: entering PD1 and then the particular PD2 teeth implies that there were only 4 PD2 teeth in the mouth, and the rest were PD1.</i>		
<i>Example:</i> Oral exam and professional dental cleaning on patient with periodontal pocket on 304		
<b>PE2:</b>	PD1, PD2 304	PRO, RP/C GC, perioceutic 304
<i>Example: Equine:</i> abnormal interproximal diastema (109, 110) with periodontal pocketing; treatment was cleaning, debridement of pocket, closed 'reserve crown/root' planing, subgingival curettage and reduction of abnormally occluding teeth (OR1)		
<b>PE2:</b>	D, PD2 109, 110	RP/C GC 109, 110
<b>OR1:</b>	T/EL 409, 410	CR/XP 409, 410

<b>PE3: Periodontal Category 3:</b> Periodontal surgery		
<b>MRCL Category</b>	<b>Diagnosis</b>	<b>Procedure</b>
<i>Example:</i> Oral exam and professional dental cleaning on patient with gingival enlargement at multiple teeth		
<b>PE3:</b>	PD1, GH 105, 106, 107, 206, 207, 208	PRO, GV 105, 106, 107, 206, 207, 208
<b>OR (but not both)</b>		
<i>Example:</i> Oral exam and professional dental cleaning on patient with gingival enlargement at multiple teeth, used as OM case instead of PE		
<b>OM:</b>	GH 105, 106, 107, 206, 207, 208, PD1	B/I, GV 105, 106, 107, 206, 207, 208, PRO
<i>Example:</i> Oral exam and professional dental cleaning on patient with PD2 and PD3		
<b>PE3:</b>	PD1, PD2 108, 109, 203, 207, 208, 304, 410, PD3 104, 204	PRO, RP/C GC 108, 109, 203, 207, 208, 304, 410, RP/O 104, 204

<b>PE4: Periodontal Category 4:</b>		
<b>MRCL Category</b>	<b>Diagnosis</b>	<b>Procedure</b>
<i>Example:</i> Oral exam and professional dental cleaning on patient with PD3 at 104 with gingival recession buccally		
<b>PE4:</b>	PD3, GR, cleft 104	PRO, F/LA, RP/O 104
<i>Example:</i> Crown lengthening with root canal therapy of 104, extraction of 105		
<b>PE4:</b>	PD1, T/FX/CCRF 104	PRO, CR/L F/AP 104
<b>OS1:</b>	PD4 105	X 105
<b>EN1:</b>	T/FX/CCRF 104	RCT R/C 104

<i>Example:</i> Open root planing with bone graft, guided tissue regeneration on one tooth, open root planing without bone graft on another tooth, same patient – generates two case log entries		
<b>PE3:</b>	PD1, PD2 207	PRO, RP/O 207
<b>PE4:</b>	PD1, PD3 108	PRO, RP/O, GF/B, GTR [name of membrane] 108
<i>*Note: it is assumed that an appropriate GTR material has been used – the specific material must be stated. Note that AVDC does not consider Doxirobe, Arestin and Clindoral to be GTR membranes. Atrisorb, ePTFE, Guidor are examples of GTR membranes.</i>		
<b>PE4:</b>	PD1, PD3 308, 309	PRO, RP/O, GTR [name of membrane] 308, 309
<b>And if just perioceutic, use PE3 as the category:</b>		
<b>PE3</b>	PD1, PD3 308, 309	PRO, RP/O, perioceutic 308, 309
<i>*Note: do not enter trade name of perioceutic or bone graft</i>		
<i>Example:</i> If all PE4 MRCLs are full, and resident needs PE3 MRCL, this case qualifies because a flap procedure was included.		
<b>PE3:</b>	PD1, PD3 108	PRO, RP/O, GF/B, GTR [name of membrane] 108, downgraded from PE4
<i>Example: Implant-related procedures are not permitted to be included in AVDC MRCL case log. They can be included in the Chronological log.</i>		
<b>PE4:</b>	PD1, T/A 104	PRO, GF/B (ridge augmentation for IMP [case #] [date])
<b>OS5:</b>	LAC/B	LAC/R
<b>PR:</b>	T/A 104	IMP, place abutment and CR [date]
<i>Example: Gingival graft</i>		
<b>PE4:</b>	PD1, PD2, GR cleft 104	PRO, RP/O 104, GF/G 104

Endodontic Category 1:		
MRCL Category	Diagnosis	Procedure
<i>Example:</i> Occlusal caries with pulp exposure treated with root canal; re-examination done with another procedure		
<b>EN1:</b>	CA, T/PE 309	RCT R/C 309, Re-ex [re-ex date]
<b>AND</b>		
<i>Example:</i> Re-examination of root canal with another procedure		
<b>PE1:</b>	PD1	PRO, Re-ex EN1[case #] [original EN1 date]

Endodontic Category 2:		
MRCL Category	Diagnosis	Procedure
<i>Example:</i> Acute complicated crown fracture 404, no other treatment performed at recheck		
<b>EN2:</b>	T/FX/CCF 404	VPT R/C 404, Re-ex EN2 [re-ex date]
<b>EN2: Re-exam</b>	T/FX/CCF 404	Re-ex EN2 [orig EN2 date]
<i>Example:</i> Chronic upper lip trauma from 304, treated with VP		
<b>EN2:</b>	CL/L upper lip from 304	CR/XP, VPT, R/C 304, EN3 [case #] as salvage procedure done on [date of EN3].
<i>* Case log requirements only suggest 'EN3 as salvage procedure done on date'. Adding case # is a good idea.</i>		
<i>Example:</i> Class 1 malocclusion with linguoversion and distoversion of 304 causing palatal trauma treated with VP		
<b>EN2:</b>	MAL1/LV/DV 304	CR/XP VPT R/C 304
<b>OR (but not both)</b>		
<b>OR3:</b>	MAL1/LV/DV 304	CR/XP VPT R/C 304
<i>Example:</i> Class 2 malocclusion with linguoversion of 304 and 404. Note: LV is considered a MAL1 and may or may not be present along with MAL2.		
<b>EN2:</b>	MAL1/LV 304, MAL2	CR/XP VPT R/C 304

<b>EN2:</b>	MAL1/LV 404, MAL2	CR/XP VPT R/C 404
<b>OR (but not both)</b>		
<b>OR3:</b>	MAL1/LV 304, 404, MAL2	CR/XP VPT R/C 304, 404

<b>Endodontic Category 3:</b>		
<b>MRCL Category</b>	<b>Diagnosis</b>	<b>Procedure</b>
<i>Example: Non-vital tooth requiring surgical endodontics</i>		
<b>EN3:</b>	Referral of failed RCT 104	RCT/S MTA 104, replace coronal R/C
<i>Example: Failure of previous primary procedure</i>		
<b>EN3:</b>	Failed EN2 [case #]	RCT/S MTA 304, Salvage procedure for EN2 [case #, date of EN2]
<i>Example: Avulsed tooth with treatment of root canal – resident must be present to log this as a case</i>		
<b>EN3:</b>	T/A 204	T/RI IDS 204, RCT R/C 204. Remove IDS 204 [date of removal]
<i>Example: Luxated tooth without treatment of root canal</i>		
<b>EN3:</b>	T/LUX 204	T/RP IDS 204, endodontic treatment recommended. Remove IDS 204 [date] observed via Skype.

<b>Restoration Category:</b>		
<b>MRCL Category</b>	<b>Diagnosis</b>	<b>Procedure</b>
<i>Example: Repair of enamel defect</i>		
<b>RE:</b>	E/D 104	R/C 104
<i>Example: Occlusal caries lesion</i>		
<b>RE:</b>	CA 109	R/C 109
<i>Example: Endodontic access site restoration logged as RE when all EN1 MRCL slots are full</i>		
<b>RE:</b>	T/FX/CCF 104	RCT R/C 104, downgrade from EN1
<i>Example: Replace restoration on EN1/EN2 case that was done by someone else</i>		
<b>RE:</b>	Missing coronal restoration 204, RCT done elsewhere.	R/C 204
<b>OR</b>		
<i>Example: Replace/repair restoration on EN1/EN2 case that was originally treated by you</i>		
<b>EN1:</b>	T/FX/CCF 204	RCT R/C 204, add to original case log entry: repair coronal restoration {date}

<b>Oral Surgery Category 1:</b>		
<b>MRCL Category</b>	<b>Diagnosis</b>	<b>Procedure</b>
<i>Example: Closed extraction of tooth with severe periodontitis</i>		
<b>OS1:</b>	PD4 101	X 101
<i>Example: Crown amputation of TR4, type II</i>		
<b>OS1:</b>	TR 307	CR/A 307
<i>Example: Equine: unilateral nasal discharge secondary to tooth, tooth extracted intraorally</i>		
<b>OS1:</b>	T/NV 209	X 209

<b>OS5:</b>	SIN/IN/CMX	SIN/TRP, SIN/LAV, debridement
<i>Example: Equine: apical pathology of tooth necessitating extraction</i>		
<b>OS1:</b>	T/NV 106	X 106

<b>Oral Surgery Category 2:</b>		
<b>MRCL Category</b>	<b>Diagnosis</b>	<b>Procedure</b>
<i>Example: Full mouth extractions in 4 quadrants used for (maximum) three OS2 cases</i>		
<b>OS2:</b>	PD4 104, 106, 107, 108, 109, 207, 208	XSS 104, 107, 108, 109, 207, 208 X 106
<b>OS2:</b>	PD4 305, 306, 307, 308, 309, 310	XSS 306, 307, 308, 309, 310, X 305
<b>OS2:</b>	PD4 404, 405, 407, 408, 409, 410	XSS 404, 407, 408, 409, 410, X 405,
<i>Example: Feline stomatitis extractions</i>		
<b>OS2:</b>	ST	XSS 108, 204, 208, 307, 308, 309, 409
<i>Example: Equine: apical pathology of cheek tooth requiring buccotomy for extraction</i>		
<b>OS2:</b>	T/NV 308	XSS/BUC 308

<b>Oral Surgery Category 3:</b>		
<b>MRCL Category</b>	<b>Diagnosis</b>	<b>Procedure</b>
<i>Example: Feline patient with traumatic symphyseal separation repaired with cerclage wire and splint between 304 and 404. Note that teeth involved in a splint should be identified.</i>		
<b>OS3:</b>	SYM/S	SYM/R WIR/C IQS 304, 404, remove WIR/C IQS [date]
<i>Example: Canine patient with non-displaced distal mandibular fracture at 309, 310, and removal observed via Skype.</i>		
<b>OS3:</b>	MN/FX 309-310	FX/R/MZ, remove MZ [date of removal], observed via Skype.
<i>Example: Canine unfavorable right mandibular fracture between 408, 409 repaired by intraosseous wiring and interdental splint.</i>		
<b>OS3:</b>	MN/FX 408-409	FX/R/WIR/OS, IDS 304-411, remove WIR/OS, IDS [date of removal]
<b>OS5:</b>	LAC/B	LAC/R
<b>PE1:</b>	PD1	PRO
<i>Example: Feline left caudal oblique mandibular fracture extending from condylar neck to body of mandible repaired by maxillomandibular fixation.</i>		
<b>OS3:</b>	MN/FX distal to 309	FX/R/MMF 104 to 404, 204 to 304, remove MMF [date of removal]

<b>Oral Surgery Category 4:</b>		
<b>MRCL Category</b>	<b>Diagnosis</b>	<b>Procedure</b>
<i>Example: Repair palatal defect with split U surgery.</i>		
<b>OS4:</b>	PDE caudal hard palate	PDE/R Split U
<i>Example: Oronasal fistula repair (pre-existing to extraction) with extraction 204, 205</i>		
<b>OS4:</b>	ONF 204, 205	ONF/R 204, 205
<b>PE1:</b>	PD1	PRO

<b>OS2:</b>	PD4 204, 205	XSS 204, 205
<i>Example:</i> Cleft palate/palatal defect with surgical repair		
<b>OS4:</b>	CFP	CFP/R
<i>Example:</i> Dentigerous cyst treated by extraction and cyst debridement		
<b>OS4</b>	DTC 305	X 305, DTC/R
Note: If the OS4 category is full, this case could be an OM case, based either on biopsy of the cyst lining or on the radiographic recognition of the cyst being the specific OM diagnostic test conducted.		
<i>Example:</i> Removal of SCC with maxillectomy		
<b>OS4:</b>	<i>Example:</i> OM/SCC 106-108	S/X 104-110
<i>Example:</i> Removal of EPA with rostral mandibulectomy		
<b>OS4:</b>	OM/POF 301, 401	S/MB 305-405

<b>Oral Surgery Category 5:</b>		
MRCL Category	Diagnosis	Procedure
<i>Example:</i> TMJ luxation treated by closed reduction		
<b>OS5:</b>	TMJ/LUX	TMJ/LUX/R closed
<i>Example: Equine:</i> unilateral nasal discharge		
<b>OS5:</b>	SIN/IN	SIN/CF/F, CS, SIN/LAV

<b>Prosthodontics Category:</b>		
MRCL Category	Diagnosis	Procedure
<i>Example:</i> Crown prep same day as root canal, not present for cementation		
<b>PR:</b>	T/FX/CCF 104	CR/P 104, not present for cementation
<b>EN1:</b>	T/FX/CCF 104	RCT R/C 104
<i>Example:</i> Crown prep and cementation on tooth with previous root canal (not in case logs)		
<b>PR:</b>	Previous RCT R/C 104	CR/P 104, cement CR/M 2/17/14

<b>Orthodontics Category 1:</b>		
MRCL Category	Diagnosis	Procedure
<i>Example:</i> Class 3 malocclusion, genetic counselling only.		
<b>OR1:</b>	MAL3	OC
<i>Example:</i> Class 2 malocclusion with linguoversion of 404, genetic counseling only and treatment plan only. Note: LV is considered a MAL1 and may or may not be present along with MAL2.		
<b>OR1:</b>	MAL1/LV 404, MAL2	OC, TP
<i>Example: Equine:</i> Buccal lacerations due to sharp points.		
<b>OR1</b>	LAC/B, T/EL 109, 110, 111, 209, 210, 211	ODY 109, 110, 111, 209, 210, 211
<i>Example: Equine:</i> tooth comparably too long to rest of occlusal table (due to lack of AB/AT) and 'long tooth' reduced in height (replaces hook, ramp, wave)		
<b>OR1:</b>	T/EL 106, 206, 311, 411	CR/XP 106, 206, 311, 411
<i>Example: Equine:</i> complicated crown fracture of 208 with 2 pulp horns exposed but no apical pathology on RAD		

<b>OR1:</b> A second OM case could be logged:	T/EL 208  T/FX/CCF, PH/D 208	CR/XP 208, TP  RAD, TP
---	------------------------------------	------------------------------

<b>Orthodontics Category 2:</b>		
<b>MRCL Category</b>	<b>Diagnosis</b>	<b>Procedure</b>
<i>Example: Caudal crossbite 108 treated with extraction</i>		
<b>OR2:</b>	MAL1 CB/C 108	XSS 108
<i>Example: Class 2 malocclusion together with linguoversion of 304, 404 and persistent deciduous teeth causing malocclusion, recommendation for inclined plane. Note: LV is considered a MAL1 and may or may not be present along with MAL2.</i>		
<b>OR2:</b>	DT/P 704, 804, MAL2, MAL1/LV 304, 404	X 704, 804
<b>OR1:</b>	MAL2, MAL1/LV 304, 404	TP 304, 404
<i>Example: Class 2 malocclusion together with linguoversion of 304, 404 and persistent deciduous teeth causing malocclusion, and acrylic incline plane placed as recommended</i>		
<b>OR2:</b>	DT/P 704, 804	X 704, 804
<b>OR3:</b>	MAL2, MAL1/LV 304, 404	OA/I IP/AC, re-ex 2/25/14, re-ex {date}, OA/R IP/AC [date]

<b>Orthodontics Category 3:</b>		
<b>MRCL Category</b>	<b>Diagnosis</b>	<b>Procedure</b>
<i>Example: Malocclusion class 2, with palatal trauma but not linguoversion of 304 and 404 treated with acrylic inclined plane device. Note: LV is considered a MAL1 and may or may not be present along with MAL2.</i>		
<b>OR3:</b>	MAL2, CL/P from 304, 404	OA/I IP/AC, re-ex 2/17/14, re-ex 3/7/14, OA/R IP/AC 3/14/14

<b>Orthodontics Category 4:</b>		
<b>MRCL Category</b>	<b>Diagnosis</b>	<b>Procedure</b>
<i>Example: Malocclusion class 1, with use of active force appliance to treat the malocclusion</i>		
<b>OR4:</b>	MAL1/LV 304, 404, MV 104, 204	OA/I OA/EC, BKT 104, 108, 109, 204, 208, 209, OA/A 2/17/14, OA/A 3/1/14, OA/R OA/EC, BKT 3/10/14, OA/I IP/AC 3/10/14, re-ex 3/20/14, re-ex 3/30/14, OA/R IP/AC 4/5/14