



Simulated Patient Treatment Clinical Examination Dental Hygiene Mock Board

Calculus Detection

Select **“Yes”** if any subgingival calculus is **present**.
Select **“No”** if subgingival calculus is **NOT present**.

Tooth # Record here & on ACF Form	Surface	Examiner #1	Examiner #2	Examiner #3	Majority response	In agreement with candidate findings (see ACF Form)? Yes or No
<input style="width: 40px; height: 40px;" type="checkbox"/>	Mesial	Yes No	Yes No	Yes No		
	Distal	Yes No	Yes No	Yes No		
	Facial	Yes No	Yes No	Yes No		
	Lingual	Yes No	Yes No	Yes No		
<input style="width: 40px; height: 40px;" type="checkbox"/>	Mesial	Yes No	Yes No	Yes No		
	Distal	Yes No	Yes No	Yes No		
	Facial	Yes No	Yes No	Yes No		
	Lingual	Yes No	Yes No	Yes No		
<input style="width: 40px; height: 40px;" type="checkbox"/>	Mesial	Yes No	Yes No	Yes No		
	Distal	Yes No	Yes No	Yes No		
	Facial	Yes No	Yes No	Yes No		
	Lingual	Yes No	Yes No	Yes No		
<input style="width: 40px; height: 40px;" type="checkbox"/>	Mesial	Yes No	Yes No	Yes No		
	Distal	Yes No	Yes No	Yes No		
	Facial	Yes No	Yes No	Yes No		
	Lingual	Yes No	Yes No	Yes No		

Total (0-16 pts):
(+1 point for each agreement with
Candidate)



Mock Calculus Removal and Final Case Presentation

SPTCE Candidates are assigned one quadrant for calculus removal on the SimProDH™, available only for ADEX Dental Hygiene Examinations.

Programs using the Acidental ModuPro DS™ or other simulated models may assign the Lower Right, Lower Left or Lower Arch to meet the recommended number of surfaces for evaluation.

12 surfaces within the assignment are worth 5.5 points each. Any additional surfaces within the assignment are worth a total of 6 points.

Identify (by highlighting) the 12 surfaces worth 5.5 points. Additional surfaces are evaluated under Final Case Presentation.

Lower Left

TOOTH # & calculus location	Examiner #1		Examiner #2		Examiner #3		CALCULUS REMOVAL Record check mark for surfaces with 2 or more "YES" responses.
	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	

Lower Right

TOOTH # & calculus location	Examiner #1		Examiner #2		Examiner #3		CALCULUS REMOVAL Record check mark for surfaces with 2 or more "YES" responses.
	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	
<input type="checkbox"/> <input type="checkbox"/>	Yes	No	Yes	No	Yes	No	

12 surfaces Total x 5.5 pts: +

Removal of Additional Surfaces = 6 pts
 Minus 3 points if 1 surface remains
 Minus 6 points if 2 or more surfaces =

Post-Treatment Periodontal Probing

Recorded in mm after calculus removal

Anterior Tooth (enter here and on ACF Form)

Examiner # 1

DL	2 or <	3	4	5	6	7 or +
L	2 or <	3	4	5	6	7 or +
ML	2 or <	3	4	5	6	7 or +
DF	2 or <	3	4	5	6	7 or +
F	2 or <	3	4	5	6	7 or +
MF	2 or <	3	4	5	6	7 or +

Examiner # 2

DL	2 or <	3	4	5	6	7 or +
L	2 or <	3	4	5	6	7 or +
ML	2 or <	3	4	5	6	7 or +
DF	2 or <	3	4	5	6	7 or +
F	2 or <	3	4	5	6	7 or +
MF	2 or <	3	4	5	6	7 or +

Examiner # 3

DL	2 or <	3	4	5	6	7 or +
L	2 or <	3	4	5	6	7 or +
ML	2 or <	3	4	5	6	7 or +
DF	2 or <	3	4	5	6	7 or +
F	2 or <	3	4	5	6	7 or +
MF	2 or <	3	4	5	6	7 or +

2 or more examiners in agreement with Candidate's findings on ACF (+/- 1 mm)

DL	Yes	No
L	Yes	No
ML	Yes	No
DF	Yes	No
F	Yes	No
MF	Yes	No

Posterior Tooth (enter here and on ACF Form)

Examiner # 1

DL	2 or <	3	4	5	6	7 or +
L	2 or <	3	4	5	6	7 or +
ML	2 or <	3	4	5	6	7 or +
DF	2 or <	3	4	5	6	7 or +
F	2 or <	3	4	5	6	7 or +
MF	2 or <	3	4	5	6	7 or +

Examiner # 2

DL	2 or <	3	4	5	6	7 or +
L	2 or <	3	4	5	6	7 or +
ML	2 or <	3	4	5	6	7 or +
DF	2 or <	3	4	5	6	7 or +
F	2 or <	3	4	5	6	7 or +
MF	2 or <	3	4	5	6	7 or +

Examiner # 3

DL	2 or <	3	4	5	6	7 or +
L	2 or <	3	4	5	6	7 or +
ML	2 or <	3	4	5	6	7 or +
DF	2 or <	3	4	5	6	7 or +
F	2 or <	3	4	5	6	7 or +
MF	2 or <	3	4	5	6	7 or +

2 or more examiners in agreement with Candidate's findings on ACF (+/- 1 mm)

DL	Yes	No
L	Yes	No
ML	Yes	No
DF	Yes	No
F	Yes	No
MF	Yes	No



Total (0-12 pts):
(+1 point for each agreement with Candidate)



Tissue Management

NOTE: Major Hard and Soft Tissue Damage are extremely rare; consult the Candidate Manual for criteria if major damage is suspected.

Soft Tissue <i>Where <u>MINOR</u> damage is present, list surface in space provided.</i>	Examiner #1	Examiner # 2	Examiner #3	If 2 or more "Yes" responses
1 area of damage	Yes No	Yes No	Yes No	-1 point
	Surface	Surface	Surface	
2 areas of damage	Yes No	Yes No	Yes No	-2 points
	Surfaces	Surfaces	Surfaces	
3 areas of damage	Yes No	Yes No	Yes No	-3 points
	Surfaces	Surfaces	Surfaces	
4 or more areas of damage	Yes No	Yes No	Yes No	-100 points
	Surfaces	Surfaces	Surfaces	

Total:
(penalties)

Hard Tissue <i>Where <u>MINOR</u> damage is present, list surface in space provided.</i>	Examiner #1	Examiner # 2	Examiner #3	If 2 or more "Yes" responses
1 area of damage	Yes No	Yes No	Yes No	-1 point
	Surface	Surface	Surface	
2 areas of damage	Yes No	Yes No	Yes No	-2 points
	Surfaces	Surfaces	Surfaces	
3 areas of damage	Yes No	Yes No	Yes No	-3 points
	Surfaces	Surfaces	Surfaces	
4 or more areas of damage	Yes No	Yes No	Yes No	-100 points
	Surfaces	Surfaces	Surfaces	

Total:
(penalties)

(Accumulated points) - (Tissue Management Penalties) = Final Score

$$(\text{---}) + (\text{---}) + (\text{---}) - (\text{---}) + (\text{---}) = \underline{\hspace{2cm}}$$