

OHE Delivery	1	2	3	4	C			Faculty Initials:
Impressions (1 set = mx & md)	1	2	3	4				Cases Only Faculty Initials: <i>12</i> Admin Initials: _____
Instrumentation (teeth/area:)	1	2	3	4				<input checked="" type="checkbox"/> Successful (all criteria met)
Sportsguard Fabrication & Delivery	1	2	3	4	I	C		<input type="checkbox"/> Unsuccessful (e.g., grade of 1 or 2 / critical warning) Student Initials: _____
Nutrition Counseling & Delivery	1	2	3	4	I	C		<input type="checkbox"/> N/A (e.g., no rads / missing grades) Student Initials: _____
PICO Development & Delivery	1	2	3	4	I	C		Faculty Comments (**Add additional comments on reverse if needed)
Tobacco Cessation Counselling	1	2	3	4		C		Date
Ultrasonic Inst. (teeth/area:)	1	2	3	4				Comments
Whitening Trays Fabrication & Delivery	1	2	3	4	I	C		Fac. I
Evaluation								
Human Needs Evaluation	1	2	3	4				Administrator Comments
Re-evaluation (4-6 week periodontal)	1	2	3	4				
Re-evaluation (other:)	1	2	3	4				
Documentation								
Documentation (Daily Record of Care)	1							