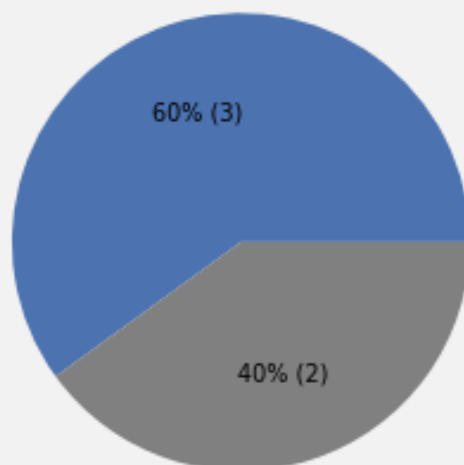


# Marlene Yu

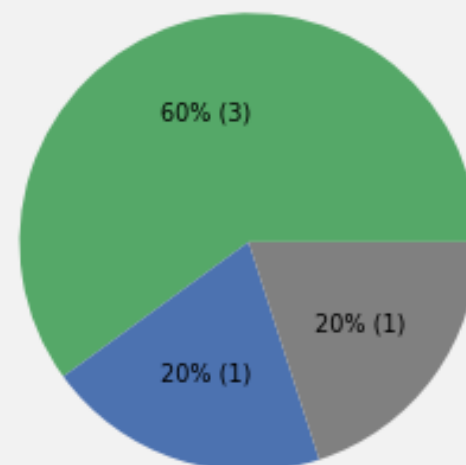
Number of forms: 5

- Completed with substantial assistance
- Completed with minimal assistance
- Completed independently (competent)
- No basis for evaluation

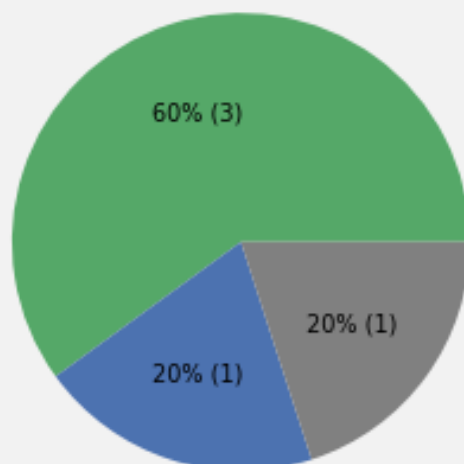
1.1 Obtain and interpret a prenatal, natal and neonatal history, medical history, dental history and social history and identify the chief complaint



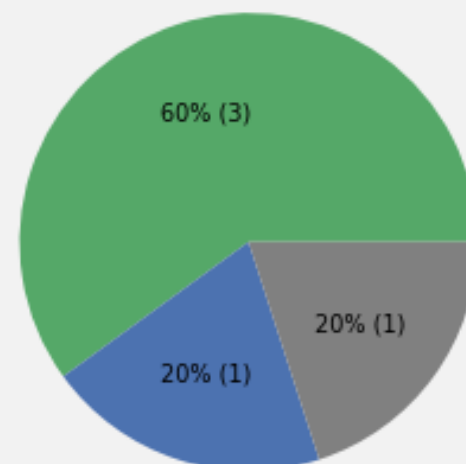
1.2 Conduct a thorough and accurate clinical examination



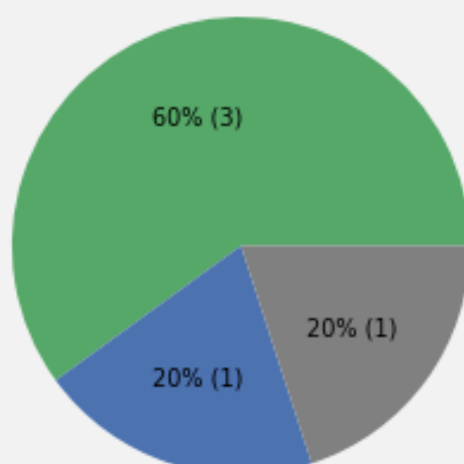
1.3 Determine the appropriate radiographic study and obtain diagnostic radiographs with minimal radiation exposure to patient and personnel



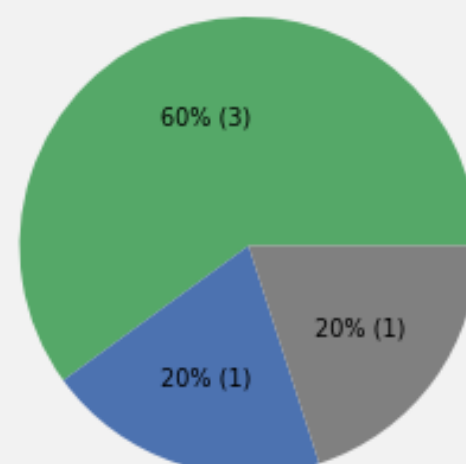
1.4 Interpret findings from history, clinical exam and diagnostic tests, and arrive at a diagnosis



1.5 Develop a comprehensive, logically sequenced, individualized treatment plan based on the diagnosis

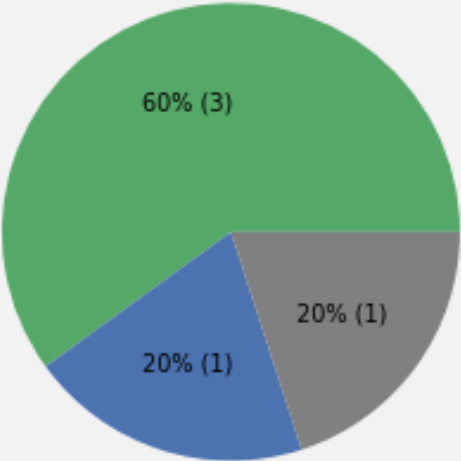


1.6 Recognize when consultation with other clinician(s) is indicated and provide a written referral(s) that includes appropriate diagnostic material

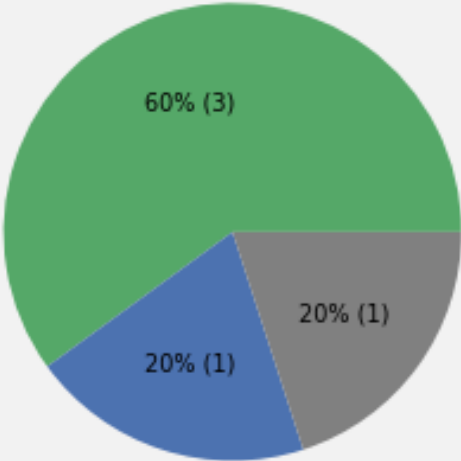


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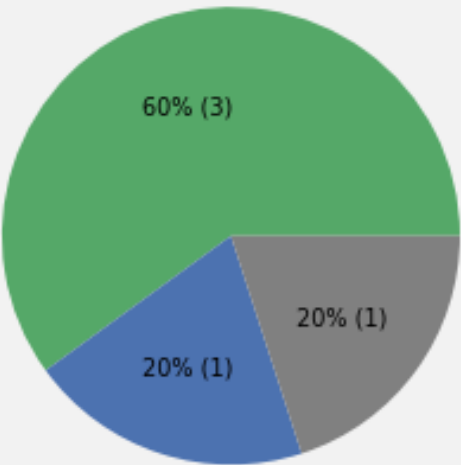
1.7 Recognize the significance of special health care needs in individual patients and formulate a treatment plan that utilizes the alternatives in the delivery of dental care that those conditions may require



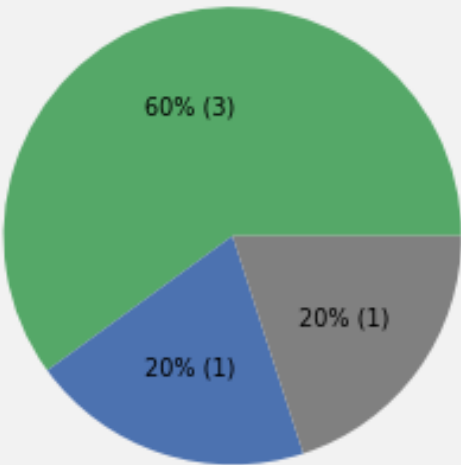
1.8 Explain and discuss the findings, diagnosis and treatment options with the patient, parent and /or guardian including an explanation of a treatment plan that has been modified due to medical or physical limitations, behavioral, financial, or other unexpected factors



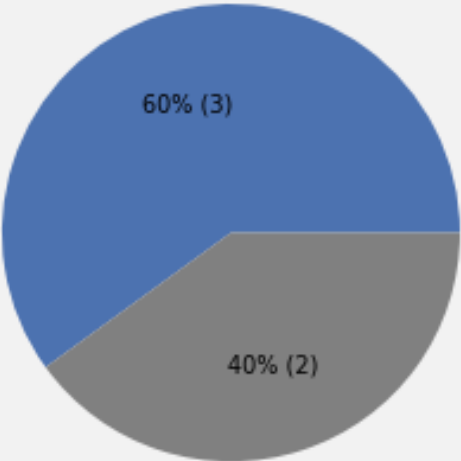
1.9 Discuss financial obligations and obtain informed consent from the legally responsible party



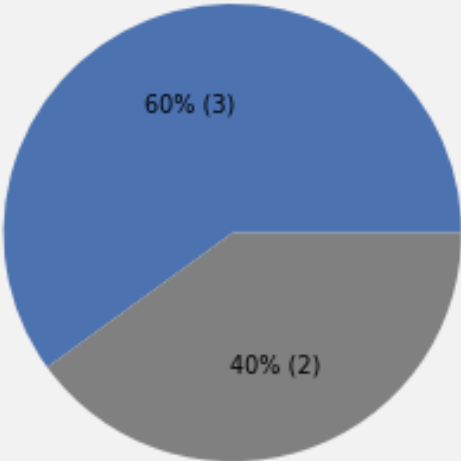
1.10 Establish and maintain accurate patient treatment records



2.1 Provide developmentally and age-appropriate education to patients, parents and caretakers concerning the etiology and scientific principals underlying the prevention of oral diseases including diet management, chemotherapeutics and other approaches

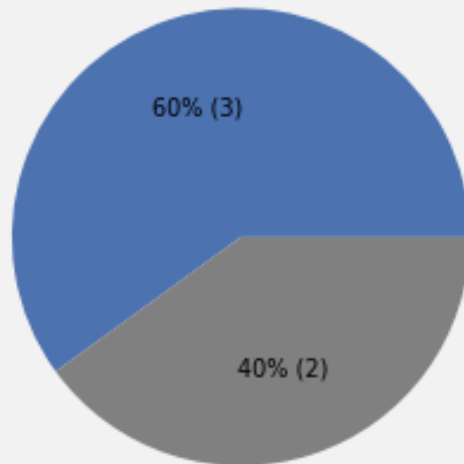


2.2 Implement individualized plans for health promotion and disease prevention by identifying factors that may impede behavioral change and compliance, and implement strategies to motivate patients, parents and caretakers to assume responsibility for their oral health

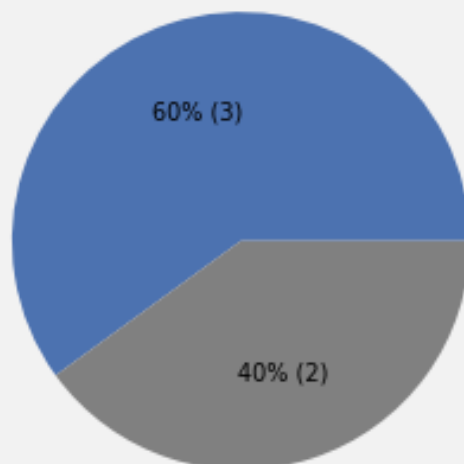


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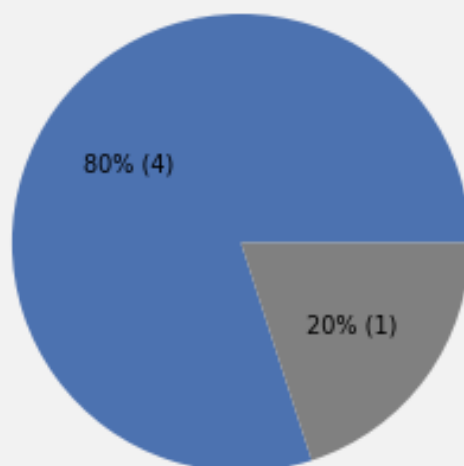
2.3 Evaluate the effectiveness of preventive programs and make adjustments when indicated



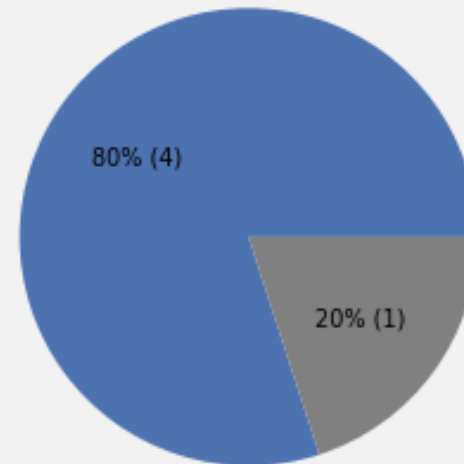
3.2 Describe to parents, in understandable terms, the various behavior guidance techniques and obtain informed consent



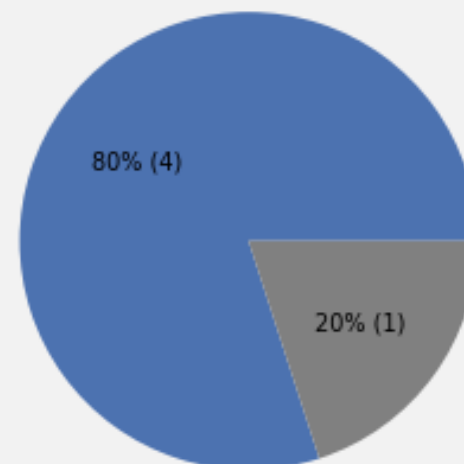
3.4 Utilize nitrous oxide inhalation appropriately and effectively



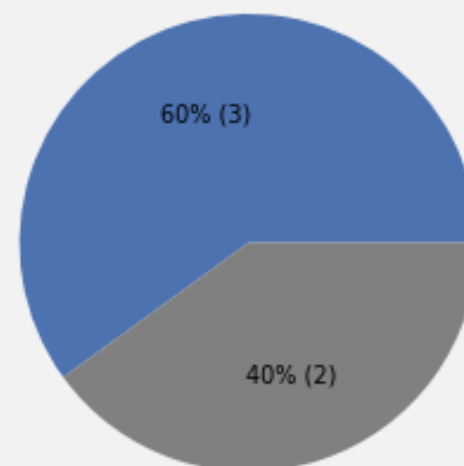
3.1 Perform a differential diagnosis of patient fear and anxiety and select the appropriate behavior guidance technique to alleviate pain and anxiety



3.3 Apply age-appropriate and culturally sensitive non-pharmacologic behavior guidance techniques effectively in an out-patient setting

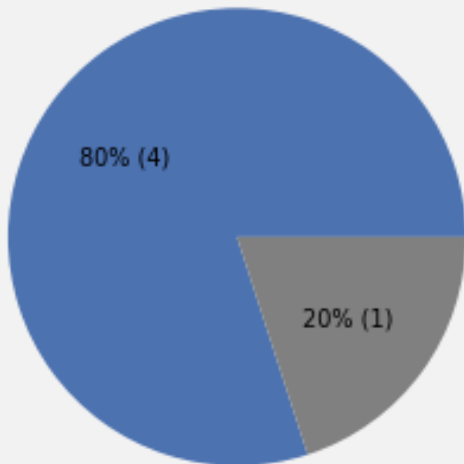


3.5 Perform pre-operative workup and assessment including medical risk assessment prior to sedation and general anesthesia

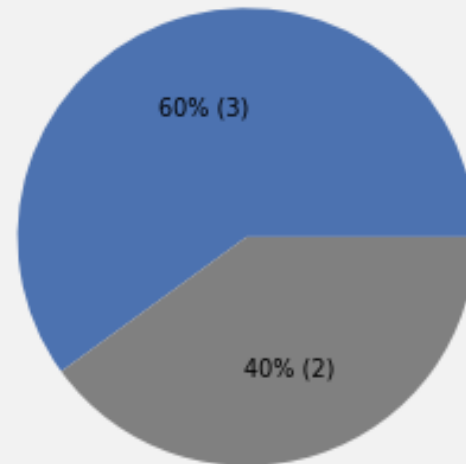


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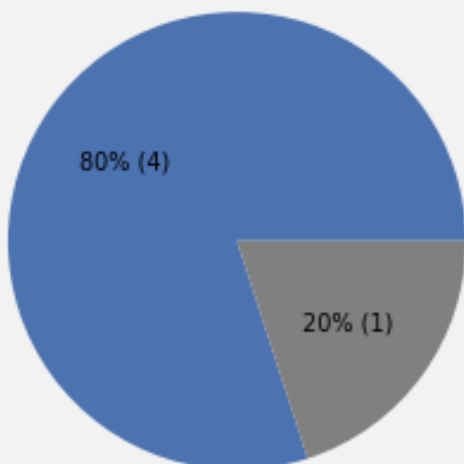
3.6 Continuously monitor and interpret physiologic data during sedation and prior to discharge



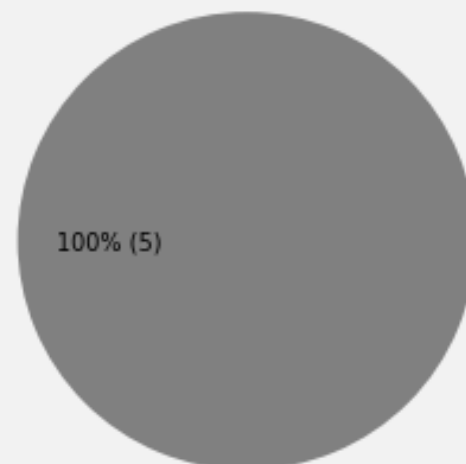
3.7 Prevent, recognize and manage complications related to drugs used for pain and anxiety control



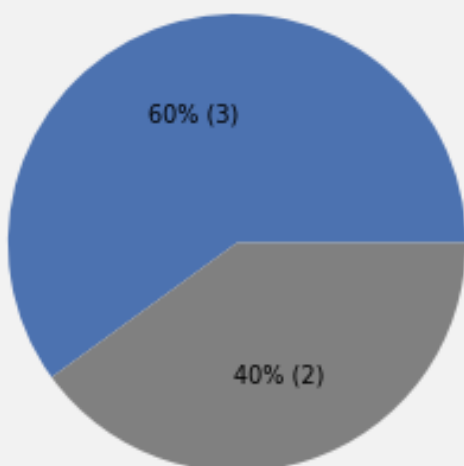
4.1 Diagnose and manage traumatic injuries of the oral and perioral structures including the soft tissues, alveolar bone, as well as the primary and permanent dentition



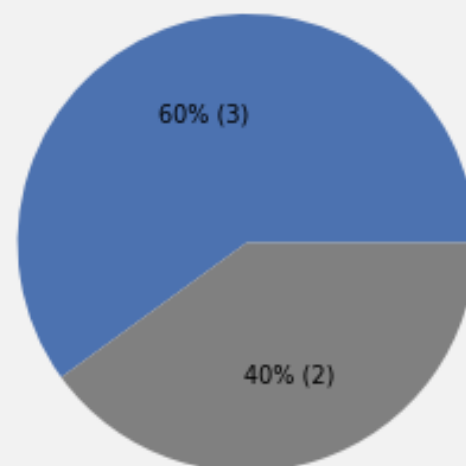
4.2 Assess and manage dental pain and infections while on emergency services



5.1 Perform a comprehensive examination of the periodontium and formulate a diagnosis

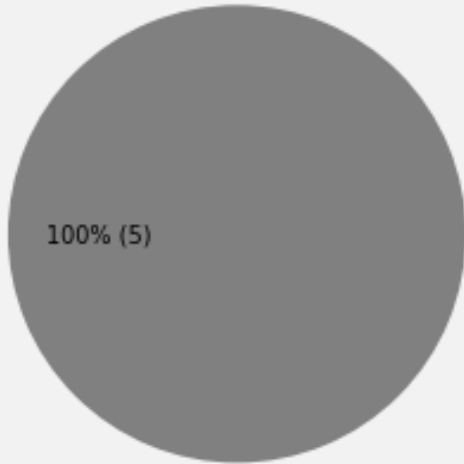


5.2 Perform supra and subgingival cleaning and debridement

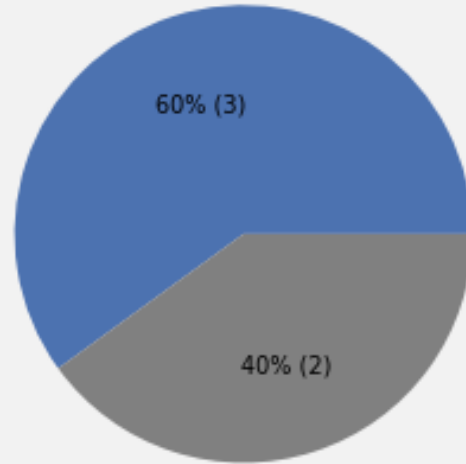


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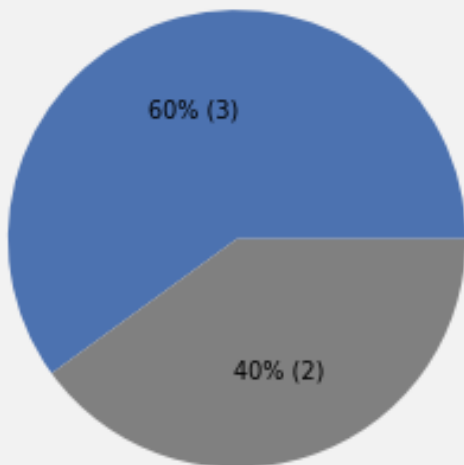
5.3 Recognize when specialist periodontal care is indicated and make an appropriate referral



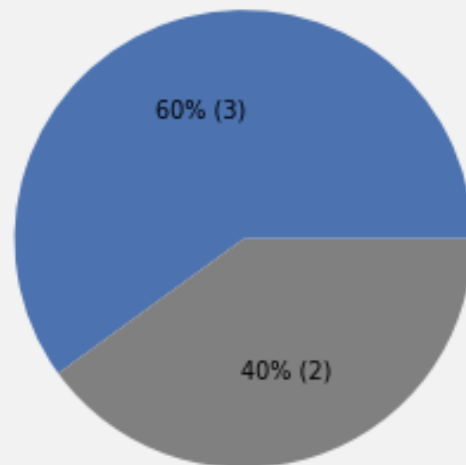
6.1 Understand the properties and indications for contemporary restorative and prosthetic techniques available for the restoration of primary, mixed and permanent dentition



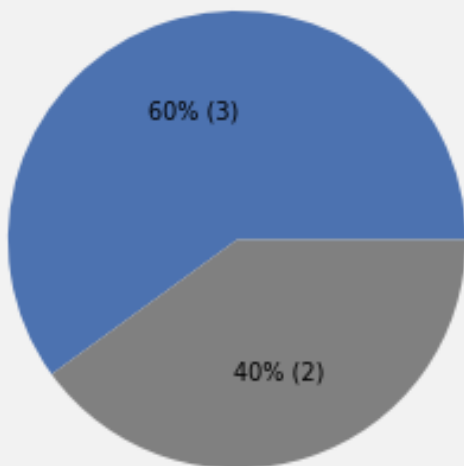
6.2 Administer local anesthesia safely and effectively, and appropriately manage local and general complications



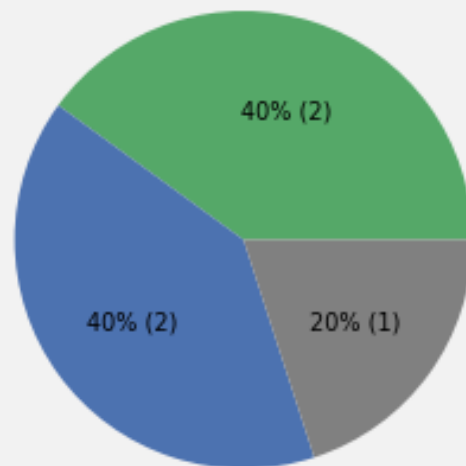
6.3 Utilize the various restorative and prosthetic techniques appropriately and effectively, and be able to analyze failures



6.4 Lead multi-disciplinary teams in providing comprehensive care for healthy patients as well as those who are medically, physically, mentally or socially compromised

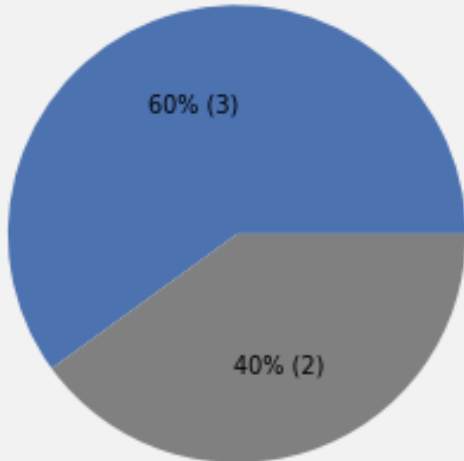


7.1 Diagnose and manage pulpal disease in primary as well as immature and mature permanent teeth

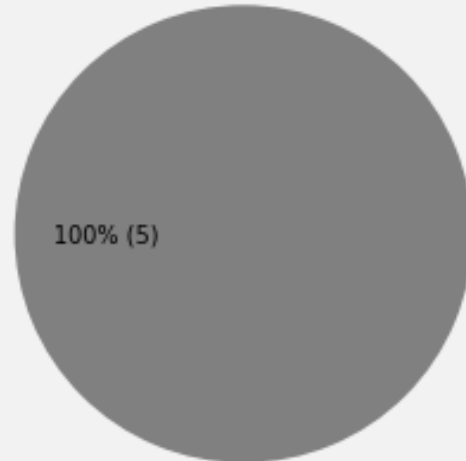


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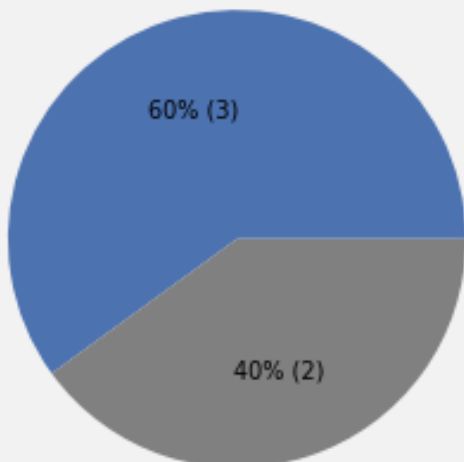
7.2 Recognize when specialist endodontic care is indicated and make appropriate referral



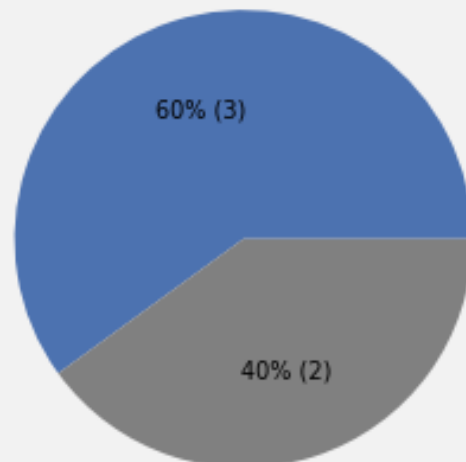
8.1 Diagnose and manage the common bacterial, fungal and viral oral diseases in infants, children and adolescents



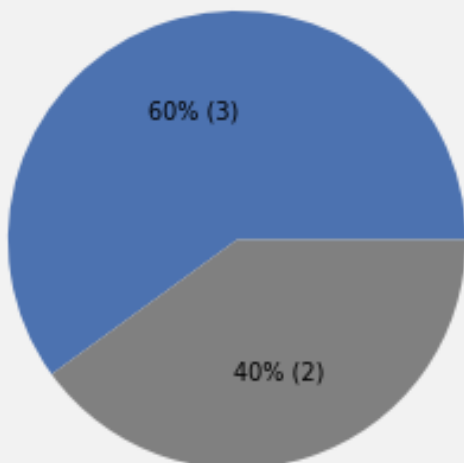
9.1 Participate in general anesthesia cases by completing: pre-operative workup and assessment, medical risk assessment, admitting procedures, and informed consent



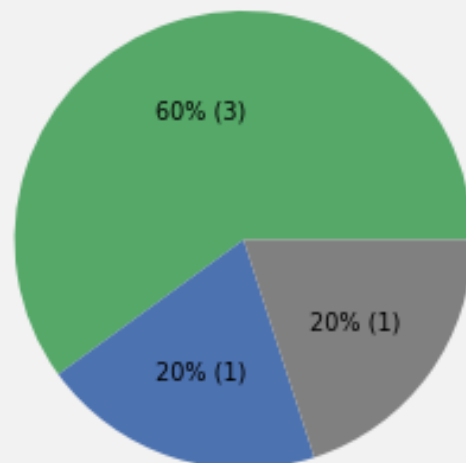
9.2 Perform intra-operative management including completion of the dental procedures, post-operative care, discharge, follow up, and completion of medical records



9.3 Manage the oral care of patients who have been admitted to general, psychiatric or rehabilitation hospitals/facilities

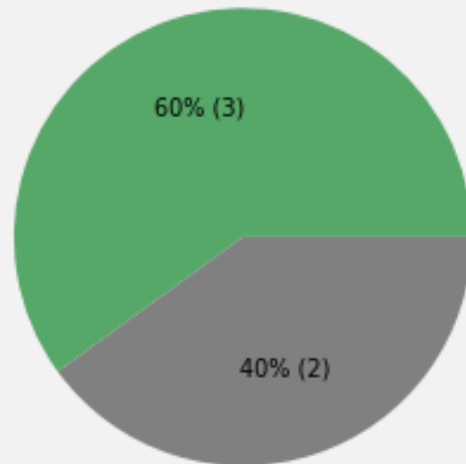


10.1 Recognize normal growth and development of the craniofacial complex and diagnose abnormalities in the developing dentition utilizing clinical examination and other diagnostic tests.

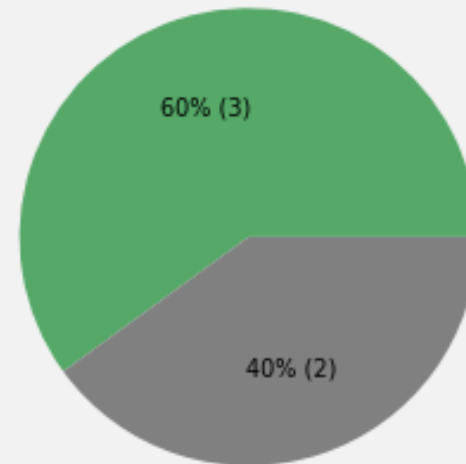


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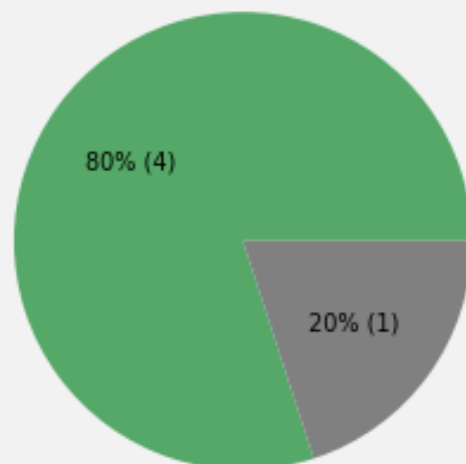
10.2 Recognize the indications, contraindications and fundamental treatment modalities used in guidance of eruption and space supervision of the developing dentition.



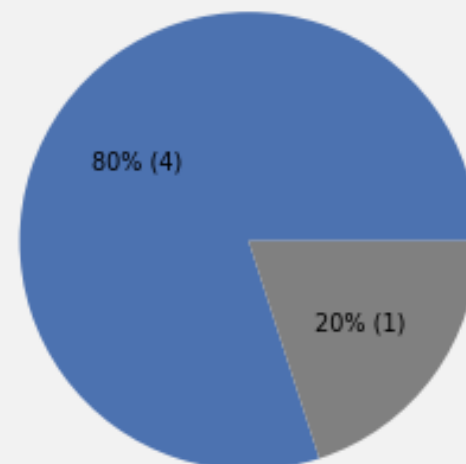
10.3 Recognize when consultation with and/or timely referral to orthodontic or other specialist care is indicated in order to achieve optimal outcomes in the developing occlusion



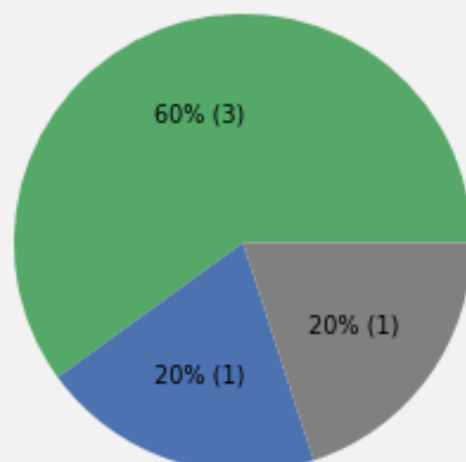
10.4 Perform interceptive removable and/or fixed orthodontic procedures in the primary, mixed, and early permanent dentition to establish a stable, functional and esthetic occlusion



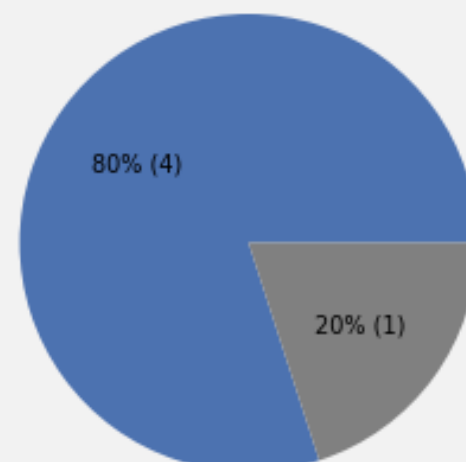
11.1 Perform extraction of uncomplicated primary and permanent teeth including fractured or residual root tips



11.2 Perform minor oral surgical procedures including excisional and incisional biopsy, soft tissue surgery and exposure of impacted teeth

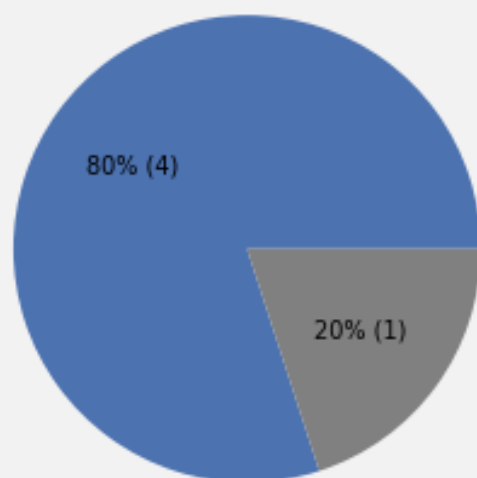


11.3 Recognize and manage common intra-operative and post-operative surgical complications



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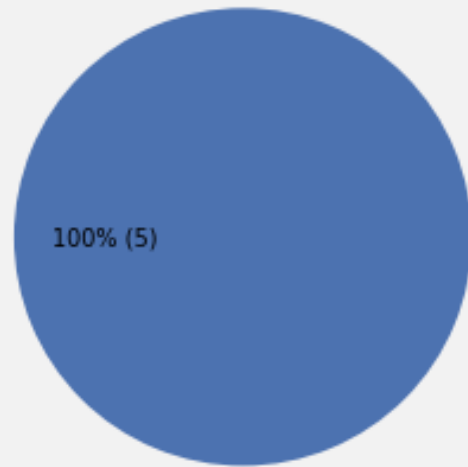
11.4 Recognize when specialist oral surgical care is indicated and make appropriate referral



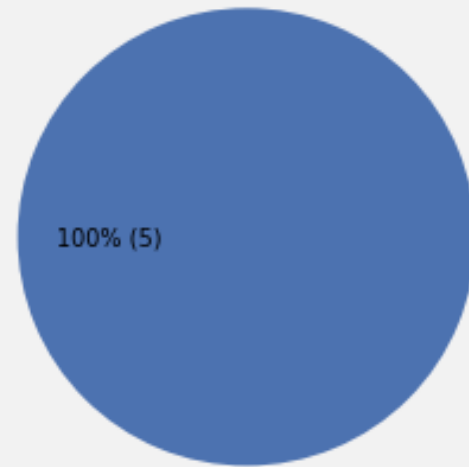




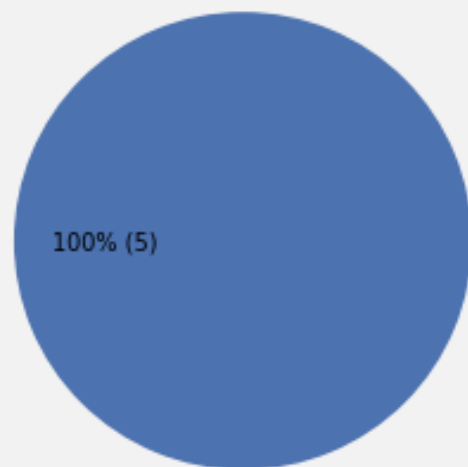
12.1 Appropriate professional attire and appearance



12.2 Punctual and prepared for clinic



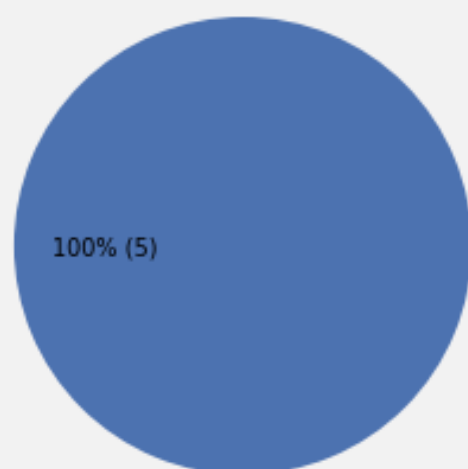
12.3 Speaks respectfully to parents and patients



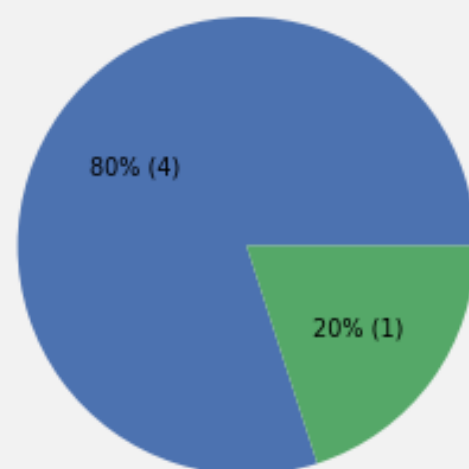
12.4 Self-evaluates clinical performance



12.5 Seeks appropriate faculty advice

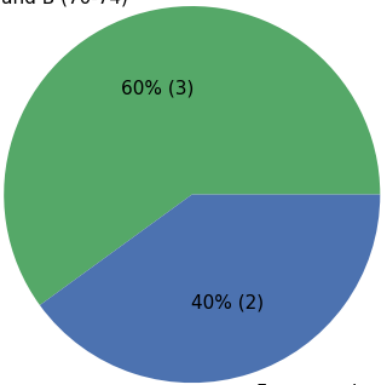


12.6 Alters behaviour based on faculty advice



# Final Grades

Exceeds expected level of performance considering stage of training: H 2A (75-79) and B (70-74)



Far exceeds expected level of performance considering stage of training: H1 (80-100)

**Describe the strongest aspects of the student’s performance, including examples of noteworthy incidents**

Staff	Comments
Daniel Andreasen-Cocker	Doing well in DSU in both direct and indirect supervised lists
Dharini Ravindra	Marlene is always very prepared and organised for her general anaesthetic sessions. Her prep is detailed and she always obtains the required consults with other specialities and as a result she is highly efficient in GA.
Wendy Cheney	Dr. Yu continues to provide evidence-based, thoughtful and compassionate care to all her patients. Well done.
Wenny Kuo	Good efficiency in DSU

**Describe any aspect of the student’s performance where he/she needs to spend more time and effort. Include any examples of critical incidents**

Staff	Comments
Daniel Andreasen-Cocker	Terminology still remains quite unprofessional, I have fed this back since first year and would like Marlene to work on this change. Professional to professional communication should maintain correct terminology and not everyday terms (eg nerve for pulp). Inaccurate terminology risks inaccurate thinking.
Dharini Ravindra	Marlene is an outstanding clinician with excellent hand skills, realising this will increase her confidence in her own ability and clinical decision making.
Wenny Kuo	Crown preps were a bit aggressive and too subgingival however this was corrected immediately after I brought it up with Marlene