


Critical Errors in TalEval

Why Enter Critical Errors in TalEval Setups

- Critical errors are those that concern patient safety, patient centered care ethics and professionalism.
- Demonstrate Compliance with CODA Standard 6-2
 - Quality Assurance in Patient Care
- Demonstrate Compliance with CODA Standard 2-12
 - TalEval deems students competent when they treat every patient type with no critical errors:
 - All age groups
 - Special needs
 - Every perio type from mild – moderate- severe involvement
 - Recare (re-evaluation)
- Critical Errors only affect the grade of the student who made the errors.

√ or X in Critical Errors Appear on Grade Header



For Dental Programs Clinical Evaluation

Cynthia Biron
[Schedule](#)

[Lists](#) ▶ [\[Student Data\]](#) ▶ [\[Patient Data\]](#) ▶ [\[Student Evaluation\]](#) ▶ [\[User Setup\]](#) ▶ [\[Grade Validation\]](#) ▶ [\[Logout\]](#)

Grade Entry

[print report](#)

Select a Student: Include Inactive Students Edit Existing Grade:

Date: 10/11/2019	Patient: PerioEXT 15	Instructor: Cynthia Biron	Calculus Class:
Recall Date:	Quad / Sextant:	Clinic: NON GRADED	Perio Level:
Recare: <input type="checkbox"/>	Patient Complete: <input type="checkbox"/>	ASA: I	Special Needs:
Treatment Phase:	02. Initial appointment with student		Critical Error: 0.25
Gingival Perio Disease:			Extra Credit: 0.00
Comments:			

[Edit Header](#)

Assessment 1 - 44 **Planning 45 - 53** **Implementation 54 - 108** **Evaluation 109 - 140**

Planning
[Save Grade](#)

[New Grade](#) [Delete Record](#)

* Items specified as CRITICAL under SETUP LISTS - COMPETENCY SUB CATEGORIES, will appear in Red below.

How to Recognize Critical Errors in TalEval

They appear in RED

SubCompetency		±	√	X	N/A	
Further QUESTIONS Findings	1	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>
USES references	2	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>
Vital Signs accurate techniques	3	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>
NOTIFIES Instructor of risk factors before check-in	4	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>
Documents appropriately in medical alert box	5	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>
Documents medications and contraindications	6	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>
Documents lifestyle RISK factors	7	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>
Documents a concise statement "summary of health"	8	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>
UPDATES history at successive and recall appts	9	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>

SubCompetency		±	√	X	N/A	
Technique - visual, palpation, auscultation, order	10	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>
I.D. ABNORMALITY, measures, describes, DOCUMENTS	11	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>
Assessment UPDATE at successive and recall appts.	12	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>

Examples of Critical Errors in the Grade Form

Rad

SubCompetency		±	√	X	N/A	
PRESCRIPTION prior to taking radiographs	29	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>
APPROVAL prior to taking retakes	30	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>
Interpretation/correlation: EO/IO perio + hard tissue exam	31	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>
NAME/DATE on radiographs computerized records	32	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>
Technique/ process	33	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>
CONFERS with Dr. on diagnosis	34	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>

AAP/EPF Stage & Grade documented

28

Hrd tis

SubCompetency		±	√	X	N/A	
Missing teeth I.D.	35	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>
Restoration I.D.	36	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>
Caries I.D.	37	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>
ABNORMALITY I.D., rotations, versions, migrations	38	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>
UPDATES at successive and recare appointments	39	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="..."/>

Dep

SubCompetency		±	√	X	N/A	
Supra underassessed /overassessed	40	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Sub underassessed/overassessed	41	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Soft deposit assessment and indices	42	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Assessment of stain	43	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
UPDATES AT SUCCESSIVE APPOINTMENTS	44	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

TP

SubCompetency		±	√	X	N/A	
Formulates, presents dental hygiene diagnosis applies evidence-based decision making	45	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Prioritizes on patient's needs, changes as needed	46	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Has realistic goals for the process of care	47	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Plans the correct number/sequence of appointments	48	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
PLANS for pain control and stress reduction	49	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Plans timeframe for recare appointments	50	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Explains the need for referral to a specialty practice	51	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Explains plan, alternatives, expected outcomes, expenses	52	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Patient CONSENT of plan confirmed with signatures	53	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

Prev

SubCompetency		±	√	X	N/A	
EDUCATES patient on conditions, needs, and commitment	54	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Overall health condition CONSIDERED in instruction	55	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Correct toothbrush and technique taught	56	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
CORRECT interdental aids and techniques taught	57	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Presentation - delivery, LAY TERMS, visual aids, etc.	58	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Plaque index explained to patient	59	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Patient as plaque free as possible after OHI	60	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Tobacco cessation as NEEDED utilizing current methodology	61	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Dietary Counseling and lifestyle concerns	62	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Selective coronal polishing: explains, uses correct techniques	63	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Topical fluoride treatment: explains correct data	64	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Fluoride self care instruction as indicated	65	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Care of restorations, oral appliances, dentures	66	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Pit & Fissure sealants as prescribed, techniques, results	67	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Antibacterial placement agents (Arestin, etc.)	68	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Chemotherapeutic agents (chlorhexidine, etc.)	69	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Desensitizing indications, products, techniques	70	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
UPDATES at successive and recare appointments	71	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	















Pain C

SubCompetency		±	√	X	N/A	
INDICATIONS/CONTRAINDICATIONS - clinician's judgement	72	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
EXPLAINS the need, procedure, post op. precautions	73	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
SELECTION of type of local anesthetic	74	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
Topical anesthetic APPLICATION	75	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
Local anesthesia set up/administration TECHNIQUE	76	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
Sedation: preparation/monitoring	77	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
Antianxiety measures (pre-sedation) clinician's JUDGEMENT	78	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
DOCUMENTS record: type, amount, effectiveness, reactions	79	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...

Inst

SubCompetency		±	√	X	N/A	
Appropriate indications for ultrasonics, deposits, health status, risks	80	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
Explanation of procedure to patient	81	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
Equipment preparation: PT/OP protections, safety/tip selection	82	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
Pt/op positioning-neutral wrist, clock/handle position with ultrasonic	83	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
Technique-placement and movement of ultrasonic tip/fulcrum	84	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
Retraction of soft tissue, avoids spray on patients face	85	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
Fluid control suction, pt. not swallowing fluid, debris during ultrasonic or hand instrumentation	86	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
Pt/op positioning-neutral wrist during hand instrumentation	87	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
Retraction/indirect vision	88	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
Instrument selection, correct for area (end/edge) sharpness	89	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
Grasp (no split) fulcrum finger advanced, "C" thumb-index	90	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
Fulcrum placement, use, pivot, not traveling	91	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
Parallelism- facial/lingual(way tooth grows)	92	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
Subgingival insertion at line angle, toe leads at 0 degrees	93	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
Exploratory stroke first, reposition under deposit	94	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
Adaptation: face of toe third on tooth	95	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	...
Activation: whole hand as unit, press while						...

QA

SubCompetency		±	√	X	N/A	
Organization, sequence in appointment procedures	109	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Equipment preparation set up/break down	110	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
DOCUMENTATION, entries in computerized record control	111	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
No gloves at check in, gloves on at check out	112	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Reason for visit discussed & documented	113	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Treatment record page documented	114	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Patient's name/date on every page	115	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Makes certain all chart entries have signatures	116	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Completes student QA chart review	117	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Treatment plan is patient centered and followed to completion	118	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Student evaluation of care (treatment results documented)	119	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Continued/comprehensive care - referrals recommended	120	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Recare appointment times scheduled	121	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

Ethics/Prof

SubCompetency		±	√	X	N/A	
Attendance, arrives on time/does not leave early	122	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Time management	123	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Infection control and PATIENT SAFETY	124	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
ALL CRITICAL Appearance, demeanor, attitude, composure, judgment	125	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Consent forms SIGNED	126	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Discretion and patient PRIVACY	127	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Patient management, rapport, compassion	128	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Teampayer self directed, helps	129	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Accepts fair, negative feedback	130	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Recognizes the need to learn	131	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Acknowledges and CORRECTS errors	132	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Practices effective communication skills	133	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Proper grammar spoken and written	134	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Practices WITHIN LIMITS of knowledge and skills	135	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
FOLLOWS, rules, laws and regulations	136	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Meets commitments	137	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Reports misconduct	138	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Completes assignments on time	139	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Makes learning a top priority. Has no more than 4 "No Patient Appointments per semester	140	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

How to Enter Critical Errors in Set-Ups

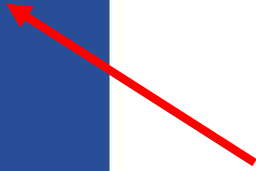


[\[Setup Lists\]](#) ▶ [\[Student Data\]](#) ▶ [\[Patient Data\]](#) ▶ [\[Student Evaluation\]](#) ▶ [\[User Setup\]](#) ▶ [\[Grade Validation\]](#) ▶ [\[Logout\]](#)

- Calculus Level
- Category Sequence
- Citizenship
- Clinic Levels
- Competency Categories
- Competency Sub Categories
- Ethnicity
- Health Requirements
- Instructors
- Perio Level
- Point Values
- Programs
- School Info
- Semesters
- Setup Surveys
- SubCategory Sequence Management
- Treatment Phase
- Technique Comp Types
- Technique Competencies

Welcome to TalEval.com

Go to Setup Lists Dropdown
And select
Competency Sub Categories



Competency Sub-Categories

[Click here to print](#)

- Select One--
- Calc
- Dep
- Eoio
- Ethics/Prof**
- Hrd tis
- Inst
- Occl
- Pain C
- Perio
- Prev
- QA
- Rad
- Risk
- TP

Selecting Competency Category:

Add New / Edit Sub-Competency

Active

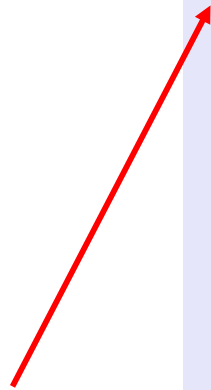
Critical Single Error: Critical Multiple Error: Non-Critical Single Error: Non-Critical Multiple Error:

(Enter Non-Critical error points only if you are grading by appointment.)

Current Sub-Competency categories on File

	Sub-Category	Active?	Critical Error?	Critical Single Error Points	Critical Multiple Error Points	Non-Critical Single Error Points	Non-Critical Multiple Error Points
Edit Delete	Attendance, arrives on time/does not leave early	<input checked="" type="checkbox"/>	<input type="checkbox"/>	0.00	0.00	0.00	0.00
Edit Delete	Time management	<input checked="" type="checkbox"/>	<input type="checkbox"/>	0.00	0.00	0.00	0.00
Edit Delete	Infection control and PATIENT SAFETY	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	0.25	0.50	0.00	0.00
	ALL CRITICAL Appearance.						

Select the category to enter critical error



Click on Edit to
activate critical
error

Edit Delete	Acknowledges and CORRECTS errors	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	0.25	0.50	0.00	0.00
Edit Delete	Practices effective communication skills	<input checked="" type="checkbox"/>	<input type="checkbox"/>	0.00	0.00	0.00	0.00
Edit Delete	Proper grammar spoken and written	<input checked="" type="checkbox"/>	<input type="checkbox"/>	0.00	0.00	0.00	0.00
Edit Delete	Practices WITHIN LIMITS of knowledge and skills	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	0.50	1.00	0.00	0.00
Edit Delete	FOLLOWS, rules, laws and regulations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	0.50	1.00	0.00	0.00
Edit Delete	Meets commitments	<input checked="" type="checkbox"/>	<input type="checkbox"/>	0.00	0.00	0.00	0.00
Edit Delete	Reports misconduct	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	0.50	1.00	0.00	0.00
Edit Delete	Completes assignments on time	<input checked="" type="checkbox"/>	<input type="checkbox"/>	0.00	0.00	0.00	0.00
Edit Delete	Makes learning a top priority. Has no more than 4 "No Patient Appointments per semester	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	0.50	1.00	0.00	0.00

Edit Delete	feedback	<input checked="" type="checkbox"/>	<input type="checkbox"/>	0.00	0.00	0.00	0.00
Edit Delete	Recognizes the need to learn	<input checked="" type="checkbox"/>	<input type="checkbox"/>	0.00	0.00	0.00	0.00
Edit Delete	Acknowledges and CORRECTS errors	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	0.25	0.50	0.00	0.00
Edit Delete	Practices effective communication skills	<input checked="" type="checkbox"/>	<input type="checkbox"/>	0.00	0.00	0.00	0.00
Edit Delete	Proper grammar spoken and written	<input checked="" type="checkbox"/>	<input type="checkbox"/>	0.00	0.00	0.00	0.00
Edit Delete	Practices WITHIN LIMITS of knowledge and skills	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	0.50	1.00	0.00	0.00
	FOLLOWS rules, laws			0.50	1.00	0.00	0.00
				0.00	0.00	0.00	0.00
				0.50	1.00	0.00	0.00
Edit Delete	Completes assignments on time	<input checked="" type="checkbox"/>	<input type="checkbox"/>	0.00	0.00	0.00	0.00
Update Cancel	Makes learning a top priority	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	0.50	1.00	0.00	0.00

Click these two boxes so checks appear in both boxes

Enter points to deduct for a check(single) error

Enter points to deduct for an X (Multiple) error

Lastly, Click Update

Caution on Points

Points lost from Critical Errors
come off the top of the Total TalEval Grade

Most items should be:

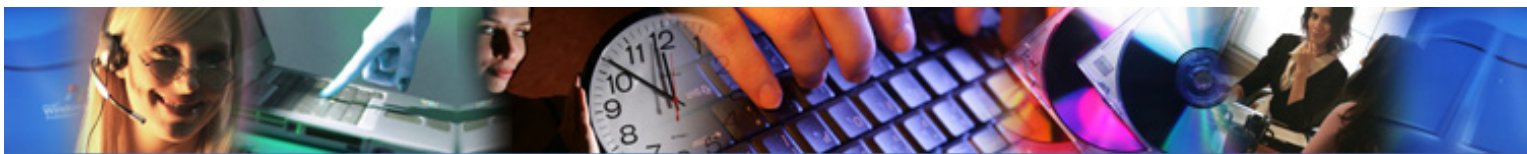
.25 loss for single error

.50 loss for multiple error

Edit Delete	Makes learning a top priority. Has no more than 4 "No Patient Appointments per semester	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	0.50	1.00	0.00	0.00
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This item should be weighted more heavily as students who avoid treating patients are not making learning a top priority.

Keep track of the number of "No Patient Treatments" per semester.



Monitor No Patient
Treatments in the Edit
Existing Grade
Dropdown

[User Setup] ▶ [Grade Validation]

Grade Entry

Inactive Students Edit Existing Grade:

Clinic:*
Patient IIB

Special Needs:
 No Yes

Gingival Perio Disease: Healthy

III IV

- Select One--
- Brown, Iris Renee - 11/19/2019 - Calc II - Perio II - MC - IIB
- Beckwith, Alonzo - 11/7/2019 - Calc III - Perio III - MC - IIB
- Hickman, Judy - 11/7/2019 - Calc I - Perio I - MC - IIB
- Virgille, Olivia - 11/5/2019 - MO - IIB
- Hoover, Lorette - 10/31/2019 - Calc II - Perio I - MC - IIB
- Hoover, Lorette - 10/31/2019 - Calc II - Perio I - MC - IIB
- Kline, Jimmy - 10/29/2019 - Calc II - Perio III - LS - IIB
- No Patient, Today - 10/29/2019 - LS - IIB
- No Patient, Today - 10/24/2019 - DB - IIB
- Brown, Iris Renee - 10/24/2019 - Calc II - Perio II - DB - IIB
- Oglesby, Sammie - 10/22/2019 - Calc II - Perio I - DB - IIB
- Kline, Jimmy - 10/22/2019 - Calc III - Perio III - DB - IIB
- Brown, Iris Renee - 10/17/2019 - Calc II - Perio II - GW - IIB
- Marshall, Calvin - 10/17/2019 - Calc IV - Perio III - GW - IIB
- Spruell, Marguerite - 10/10/2019 - Calc II - Perio II - AA - IIB
- Oglesby, Sammie - 10/10/2019 - Calc III - Perio I - AA - IIB
- Oglesby, Sammie - 10/8/2019 - Calc III - Perio II - MC - IIB
- Malloy, Timothy - 10/8/2019 - MC - IIB
- Korton, Hunter - 10/1/2019 - Calc I - Perio I - LS - IIA
- Ferguson, Destini - 10/1/2019 - Calc I - Perio I - LS - IIA
- No Patient, Today - 9/30/2019 - DB - IIA
- Barfield, John Ted - 9/26/2019 - Calc I - Perio II - GW - IIA
- Marshall, Calvin - 9/26/2019 - Calc III - Perio II - GW - IIA
- Hoier, Sarah - 9/24/2019 - Calc II - Perio II - LS - IIA
- Spruell, Marguerite - 9/24/2019 - Calc II - Perio II - LS - IIA
- No Patient, Today - 9/23/2019 - DB - IIA
- Ferguson, Destini - 9/19/2019 - Calc II - Perio I - DB - IIA
- Muhammad, Karim - 9/19/2019 - Calc III - Perio II - DB - IIA
- No Patient, Today - 9/16/2019 - DB - IIA

Cynthia Biro
Schedul

Date: 10/29/2019	Patient: Today No Patient	Instructor: Lorinda Simon	Calculus Class:
Recall Date:	Quad / Sextant:	Clinic: IIB	Perio Level:
Recare: <input type="checkbox"/>	Patient Complete: <input type="checkbox"/>	ASA: I	Special Needs:
Treatment Phase:	05. No treatment today		Critical Error: 0.00
Gingival Perio Disease:			Extra Credit: 0.00
Comments:			

Assessment 1 - 44 **Planning 45 - 53** **Implementation 54 - 108** **Evaluation 109 - 140**

Assessment
Save Grade

New Grade Delete Recc

To have "Today No Patient" show up in the Edit Existing Grade dropdown you must enter a patient named Today No Patient in the Grade Header Entry Screen