British Orthodontic Society

**Maurice** **Berman** **Award**

**for** **Clinical** **Excellence**

Entrant Number:

Case:

**Case** **summary:**

Section 1.

Pre-treatment assessment

**Patient** **details:**

**Initials:**

**Gender:**

**Date** **of** **birth:**

**Age** **at** **start** **of** **treatment:**

**Presenting** **Complaint:**

**Relevant** **Medical** **History:**

**Extra** **Oral** **Examination:**

**Intra** **Oral** **Examination:**

**Soft** **Tissues:**

**Oral** **Hygiene:**

**Dental** **Health:**

**Teeth** **present:**

**Occlusal** **features.**

**Incisor** **relationship:**

**Overjet** **(mm):**

**Overbite:**

**Centrelines:**

**Left** **buccal** **segments:**

**Right** **buccal** **segments:**

**Crossbites:**

**Other** **occlusal** **features:**

**Space** **analysis:**

**Pre-treatment** **–** **Radiographic** **Examination**

**Radiographs** **taken:**

**Relevant** **(non-cephalometric)** **radiographic** **findings:**

Pre-treatment - Extra Oral photographs

Full face Profile

Smile

Pre-treatment - Intra oral Photographs

Labial view

Right Buccal

Segment view

Left Buccal

Segment view

Upper occlusal Lower occlusal

Pre-treatment DPT

Pre-treatment Intra Oral Radiographs (if clinically justified)

Pre-treatment Lateral Cephalogram

Pre-treatment Cephalometric tracing

**Pre-treatment** **Cephalometric** **analysis**

**Interpretation** **of** **pre-treatment** **Cephalometric** **analysis:**

**Diagnostic** **summary:**

**Problem** **list:**

**Aims** **and** **objectives** **of** **treatment:**

**Treatment** **plan:**

**Section** **2.**

**Treatment**

**Date** **of** **treatment** **start:**

**Patient** **age** **at** **start** **of** **treatment:**

**Date** **of** **completion** **(active** **treatment):**

**Date** **of** **completion** **(retention):**

**Key** **stages** **in** **treatment** **progress:**

In-treatment Extra Oral Photographs

Full face Profile

Smile

In-treatment Intra oral photographs

Labial view

Right Buccal

Segment view

Left Buccal

Segment view

Upper occlusal Lower occlusal

*Insert* *additional* *pages* *for* *in-treatment*

*photographs* *as* *required*

**Mid** **treatment** **Radiographic** **Examination** (if clinically justified)

**Radiographs** **taken** **(and** **dates):**

**Relevant** **(non-cephalometric)** **radiographic** **findings:**

**Mid** **treatment** **Cephalometric** **analysis**

Mid treatment DPT (if clinically justified)

Mid treatment Lateral Cephalogram (if clinically justified)

Cephalometric tracing

**Cephalometric** **superimpositions**

**Summary** **of** **changes** **demonstrated** **in** **mid-treatment** **records:**

Section 3.

Post-treatment assessment

**Occlusal** **features:**

**Incisor** **relationship:**

**Overjet** **(mm):**

**Overbite:**

**Centrelines:**

**Left** **buccal** **segments:**

**Right** **buccal** **segments:**

**Crossbites:**

**Other** **occlusal** **features:**

**Occlusal** **indices**

**Pre-treatment**:

**IOTN** **Dental** **Health** **Component:**

**IOTN** **Aesthetic** **component:**

**PAR:**

**Post** **treatment:**

**PAR** **(score)**

**PAR** **(percentage** **change)**

End of treatment - Extra Oral Photographs

Full face Profile

Smile

End of treatment - Intra oral photographs

Labial view

Right BS view Left BS view

Upper occlusal Lower occlusal

**Radiographic** **Examination** **near** **the** **end** **of** **treatment**

**Radiographs** **taken** (and dates):

**Relevant** **(non-cephalometric)** **radiographic** **findings**:

**‘Near** **End’** **of** **treatment** **Cephalometric** **analysis**

DPT taken towards the end of treatment (if clinically justified)

Intra Oral radiographic views (if clinically justified)

Lateral Cephalogram (taken near the end of treatment)

Cephalometric tracing

**Cephalometric** **superimpositions**

Interpretation of end of treatment Cephalometric analysis:

Section 4.

1 Year post-treatment assessment

**Occlusal** **features:**

**Incisor** **relationship:**

**Overjet** **(mm):**

**Overbite:**

**Centrelines:**

**Left** **buccal** **segments:**

**Right** **buccal** **segments:**

**Crossbites:**

**Other** **occlusal** **features:**

1 Year post treatment - Extra Oral Photographs

Full face Profile

Smile

1 year post treatment - Intra oral photographs

Labial view

Right BS view Left BS view

Upper occlusal Lower occlusal

Section 5 – Post Treatment Evaluation