## Orthodontic Case Presentation (OCP-ST3)

In addition to the list of cases being managed by the trainee detailed in the Orthodontic Logbook Assessment Toolkit (OLAT), evidence of orthodontic diagnosis and treatment planning, longitudinal delivery of care, evaluation of the skeletal, dental and soft tissue effects of treatment and discussion of appropriate retention strategies should also undergo formative assessment during ST3.

**OCP-ST3** will consist of two detailed Orthodontic Case Presentations (OCP) selected primarily on the basis that they have produced a useful learning experience for the trainee, which should be formally presented during ST3 as a single exercise to a pair of appropriate trainers (CS/AES, ideally not directly involved in supervision of the case) to provide an opportunity for reflection on delivery of care by the trainee.

These cases can encompass a range of treatment modalities, including but not limited to interceptive treatment, orthodontic camouflage, growth modification followed by fixed appliance treatment, and multidisciplinary treatment including the management of tooth agenesis or impaction. For **OCP-ST3**, there should be an emphasis on longitudinal delivery of care and outcomes from diagnosis to completion of treatment and retention, and trainees are encouraged to liaise with their AES in terms of case selection. Indeed, it is encouraged that the AES should play a key role in the selection of cases for presentation.

This **OCP–ST3** document provides a roadmap for the information required and following formal presentation of both cases, appropriate sign-off should be undertaken by the AES within the 'Other evidence' area of the ISCP site and validation at the ARCP.

MOrthRCSEd2009 doc

## CASE HISTORY TEMPLATE

CASE NUMBER: [N]

PATIENT'S INITIALS: [I.I]

CASE SUMMARY
[A brief description of the case, maximum 100 words]

## SECTION 1. PRE-TREATMENT ASSESSMENT PATIENT DETAILS Initials: Sex: Date of birth: Age at start of treatment: PATIENT'S COMPLAINT/S RELEVANT MEDICAL HISTORY CLINICAL EXAMINATION: EXTRA-ORAL FEATURES CLINICAL EXAMINATION: INTRA-ORAL FEATURES Soft tissues: Oral hygiene: Erupted teeth present: General dental condition:

CROWDING / SPACING Maxillary arch:	
Mandibular arch:	
OCCLUSAL FEATURES	
Incisor relationship:	
Overjet (mm):	
Overbite:	
Centrelines:	
Left buccal segment relationship: Right buccal segment relationship:	
Crossbites:	
Displacements:	
Other occlusal features:	

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[insert frontal a	nd profile photo	grapns nerej		

[Insert frontal, right and left b	ouccal, upper an	d lower occluse	al photographs he	re]	
- · · •				-	

[Insert any other relevant v	views herel		
importariy outor relevant v	nowo noroj		

PRE-TREAT	MENT PHOTOGR	RAPHS: STUDY	MODEL PHO	TOGRAPHS O	R 3D SCANS	
[Insert fronta	al, right and left b	ouccal, upper a	nd lower occl	usal images h	ere]	
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GENERAL RADIOGRAPHIC EXAMINATION
Pre-treatment radiographs taken:
Unerupted teeth:
Teeth absent:
Teeth of poor prognosis:
Other relevant radiographic findings:

PRE-TREATMEN	NT RADIOGRAPI	HS			
[Insert prints of			radiographs	here]	
	0 1	•	0 1	•	

## OTHER SPECIAL TESTS / ANALYSES

[This is optional. Present details and results of any other tests or measurements, which are available and which contribute to the assessment of the case]

## PRE-TREATMENT CEPHALOMETRIC TRACING:

[Attach cephalometric tracing here. The tracing should be either 1) provided on acetate to scale so that the tracing can be checked directly over the cephalometric radiograph; or 2) provided digitally over the cephalometric radiograph so the tracing can be assessed.]

## PRE-TREATMENT CEPHALOMETRIC ANALYSIS

VARIABLE	PRETREATMENT	NORMAL
SNA		82° ± 3
SNB		79° ± 3
ANB		3° ± 1
SN to maxillary plane		8°± 3
Wits appraisal		0 mm
Upper incisor to maxillary plane angle		108° ± 5
Lower incisor to mandibular plane angle		92° ± 5
Interincisal angle		133° ± 10
Maxillary mandibular planes angle		27° ± 5
Upper anterior face height		
Lower anterior face height		
Face height ratio		55%
Lower incisor to APo line		0-2 mm
Lower lip to Ricketts E Plane		-2 mm

## Sources of normal values:

Houston WJB, Stephens CD & Tulley WJ (1992) A textbook of Orthodontics. Wright, Oxford Cobourne MT, DiBiase AT (2024) Handbook of Orthodontics. 3<sup>rd</sup> Edition. Elsevier

	HALOMETRIC ANALYSIS (OPTIONAL)
Where an additior neans and standa	nal analysis is used, provide clear definitions of the measurements together ward deviations]
NTERPRETATION	

## DIAGNOSTIC SUMMARY

PROBLEM LIST
[Add as few or as many as are appropriate to the case]
1.
2.
3.
4.
5.
6.
AIMS AND OBJECTIVES OF TREATMENT
[Add as few or as many as are appropriate to the case]
1.
2.
3.
4.
5.
6

TREATMENT PLAN
Extractions:
Appliances:
Special anchorage requirements:
Minor adjunctive surgery:
Major adjunctive surgery:
Additional dental treatment:
Proposed retention strategy:
Prognosis for stability:

## **COMPUTER PREDICTIONS**

[Optional: Where cases are presented which involve orthognathic surgery, output from computerised planning systems may be included on these two pages. Alternatively, these pages may be used for additional mid-treatment photographs demonstrating treatment mechanics in SECTION 2]

## OCP FOR ORTHODONTIC ST3 COMPUTER PREDICTIONS

## **SECTION 2. TREATMENT**

TREATMENT PROGRESS

**Start of active treatment:** 

Age at start of active treatment:

**End of active treatment:** 

Age at end of active treatment:

**End of retention:** 

## KEY STAGES IN TREATMENT PROGRESS

[Provide a brief summary of approximately 8 – 10 key stages in the treatment sequence]

	DATE	STAGE	
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

# OCP FOR ORTHODONTIC ST3 KEY STAGES IN TREATMENT PROGRESS (CONTINUED)

	OCP FOR ORTHODONTIC ST3				
MID-TREATMENT PHOTOGRAPHS:					
Insert any relevant photonterest]	ographs which illustrate treatment mechanics at any key stages of				

	JCF FUR	RORTHOD	CHIIC 31.	<u>•</u>	
MID-TREATMENT F	RADIOGRAPHS:				

# MID-TREATMENT CEPHALOMETRIC TRACING

## MID-TREATMENT CEPHALOMETRIC VALUES

VARIABLE	PRE-TREATMENT	MID - TREATMENT	CHANGE
SNA			
SNB			
ANB			
SN to maxillary plane			
Wits appraisal			
Upper incisor to maxillary plane angle			
Lower incisor to mandibular plane angle			
Interincisal angle			
MM angle			
Upper anterior face height			
Lower anterior face height			
Face height ratio			
Lower incisor to APo line			
Lower lip to Ricketts E Plane			

## SECTION 3. POST-TREATMENT ASSESSMENT

OCCLUSAL FEATURES		

Incisor relationship:

Overjet (mm):

Overbite:

Centrelines:

Left buccal segment relationship:

Right buccal segment relationship:

**Crossbites:** 

**Displacements:** 

**Functional occlusal features** 

Other occlusal features:

COMPLICATIONS ENCOUNTERED DURING TREATMENT:

## OCCLUSAL INDICES

INDEX	PARAMETER	VALUE
Index of Treatment Need (IOTN)		
Dental Health Component	Start	
	Finish	
	Finish	
Aesthetic Component	Start	
	F	
	Finish	
Peer Assessment Rating (PAR)		
	Start	
	Finish	
	Change	
	Change	
	% Change	
Other		

RADIOGRAPHS TAKEN TOWARDS / AT END OF TREATMENT
Radiographs taken:

Relevant findings:

						пово			
POS	ST-TREA	TMENT I	RADIOGF	RAPHS					
[Ins	ert prints	of radic	graphs c	r duplica	te film ra	diographs	s here]		

				RIC TRAC	ING: (Where	e appropriate	e)	
Inse	ert cephalo	metric tra	cingj					

## POST-TREATMENT CEPHALOMETRIC ASSESSMENT (where appropriate)

VARIABLE	PRE-TREATMENT	POST- TREATMENT	CHANGE
SNA			
SNB			
ANB			
SN to maxillary plane			
Wits appraisal			
Upper incisor to maxillary plane angle			
Lower incisor to mandibular plane angle			
Interincisal angle			
MM angle			
Upper anterior face height			
Lower anterior face height			
Face height ratio			
Lower incisor to APo line			
Lower lip to Ricketts E Plane			

ADDITIONAL	ANALYSIS (OPTI	ONAL)		
	TION OF CEPHA	I OMETRIC CI	IANCEC	
INTERPRETA	TION OF CEPHA	LOIVIE I RIC CH	IANGES	

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Overall superimposition of	i the antenor cran	iai base (rather t	nan on the Sella-N	asion linej

## CEPHALOMETRIC SUPERIMPOSITION

Maxillary and mandibular regional superimpositions.

[The stable anatomical structures of the mandible are: 1) The anterior contour of the chin; 2) The inner cortical structure at the inferior border of the symphysis; 3) Trabecular structures in the symphysis; 4) Trabecular structures related to the mandibular canal; 5) The lower contour of a molar tooth germ from the time mineralisation of the crown is visible until the roots begin to form]

[The stable structure associated with the maxillary complex is the anterior contour of the zygomatic process]

	OCP FO	OR ORTHO	DONTIC S	Т 3	
POST-TREATMEN	T PHOTOGRAPHS	S: EXTRA-ORAL			
[Insert frontal and	profile photograpl	ns here]			

Insert frontal, rig	ht and left bucc	al unner and l	ower occlused	images herel	
insert nontal, ng	int and left bucca	ai, uppei and i	OWEI OCCIUSAI	illiages rielej	

POST-TREATMENT PHOTOGRAPHS: STUDY MODEL PHOTOGRAPHS OR 3D SCANS [Insert frontal, right and left buccal, upper and lower occlusal images here]					

## SECTION 4.

[No more than 2 pages Arial font 11]

a) RATIONALE FOR TREATMENT

b) CRITIQUE

Learning outcomes section: Trainees are encouraged to include evidence they have achieved the learning outcomes expected of them during their training. A list of outcomes and evidence can be included here: