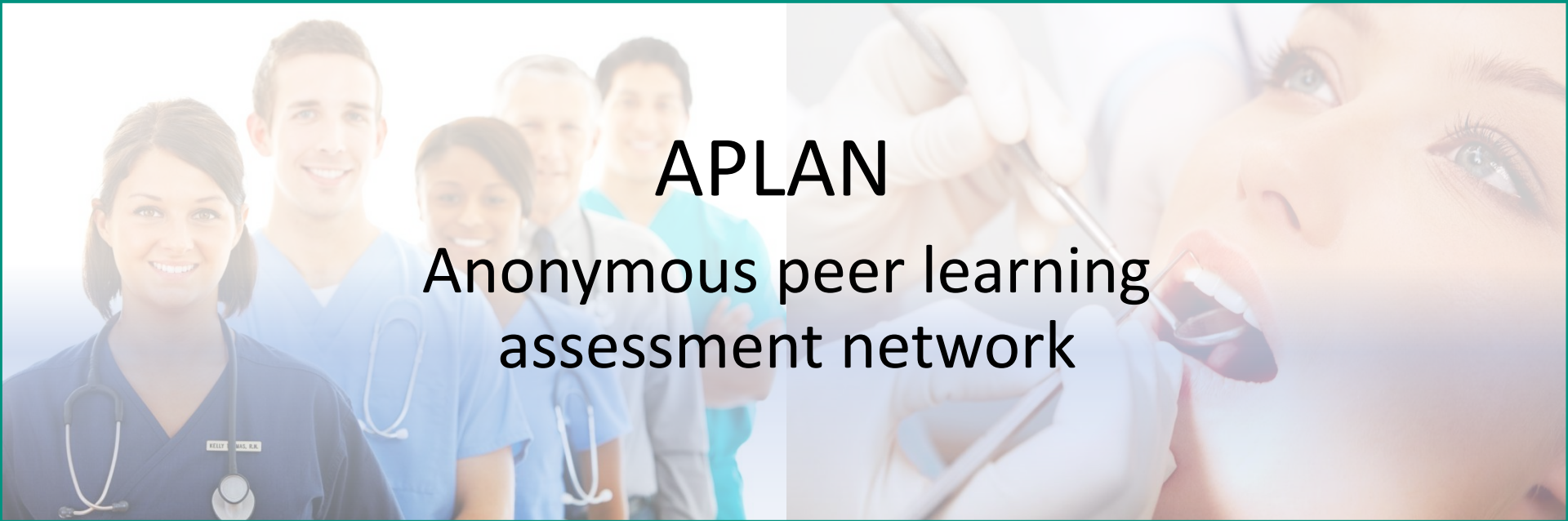




APLAN

Anonymous peer learning assessment network

Alison Johnston BDS MSc ClinEd FDTFEd



Three Cases

- Case 1 - a pain/emergency appointment
- Case 2 - molar endodontic case preferably with definitive restoration for that unit
- Case 3 – completion of a case



Case 1

Case 1 not uploaded to system but must be consented in same way

Anonymised PPP must be emailed to Dentalfoundation.nimdta@hscni.net before 3pm on Tuesday 27th October.

Cases presented in groups 3rd and 4th November



Case 1

Introduction

Examination & special investigations

Study models, photographs, radiographs

Diagnosis

Treatment Plan

Treatment Sequence

Summary/Conclusions/Learning



Case 2

Case 2- molar endo- obturation & definitive restoration

Submission Period 6th to 22rd January, for upload window

Feedback window 23rd January to 6th February 2027

Cases presented in groups 16th & 17th February 2027



Security

Log in

Your account will have been created on your behalf by your Deanery. If you did not receive login details, click the "forgotten password" link and enter your email address to receive a password reset token.

Email address

jason.atkinson@yh.hee.nhs.uk

Password

.....

GDC No

☐ **Remember me?**

Log in

[I've forgotten my password](#)



Case format

Case 139

Summary

Presenting Complaint / History

Examination Findings

Special Test Results / Reports

Diagnosis

Definitive diagnoses:

- Chronic generalised severe periodontitis with grade iii mobile 25, 32, 42
- Chronic apical periodontitis in 16, 17, 24, 31, 32
- Gross unrestorable caries 33
- Small carious lesion in 34
- Under extended and poorly retentive P/P

Treatment Options

Treatment Plan

Treatment Carried Out

Change to Treatment Plan / Prognosis / Follow Up

Reflection & References

Images

Charting



Pre-Op



Radiographs



FD Feedback

Submission deadline: 17/04/2017										
Case	Trainee									
139		2	2	2	2					Compare
195		2	3	3	3	2	2	3		Compare
122		2	2	3	3	3				Compare
117		3	2	3	3	3	2			Compare
132		3	3	3	3	2	2			Compare
108		3	3	2	3	3	2	3	3	Compare
136		3	3	3	3	3	2 *			Compare
188		3	3	3	3	3	2 *			Compare
158		2	3	3	4	3	2	3		Compare
135		3	4	3	3	2	3			Compare
175		3	3	3	3	3				Compare
181		3	2	3	4	3	3			Compare
184		1	4	3	2	4	4			Compare
131		3	3	4 *	3	3				Compare

Learning for all!

<u>2</u>	<u>2</u>	<u>2</u>	<u>1</u>	<u>2</u>	<u>1</u>	
<u>2</u>	<u>3</u> *	<u>2</u>	<u>2</u>	<u>2</u>	<u>2</u>	
<u>2</u>	<u>2</u>	<u>2</u>	<u>4</u> *	<u>1</u>	<u>2</u>	
<u>2</u>	<u>3</u> *	<u>2</u>	<u>2</u>	<u>2</u>	<u>2</u>	
<u>3</u>	<u>2</u>	<u>2</u>	<u>3</u>	<u>3</u>	<u>2</u>	
<u>3</u>	<u>2</u>	<u>3</u>	<u>2</u>	<u>2</u>	<u>3</u>	<u>3</u>
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<u>3</u>	<u>3</u>	<u>2</u>	<u>3</u>	<u>2</u>	<u>3</u>	
<u>3</u>	<u>2</u>	<u>3</u>	<u>3</u>	<u>3</u>	<u>2</u>	<u>3</u>
<u>2</u>	<u>4</u>	<u>3</u>	<u>2</u>	<u>3</u>	<u>3</u>	
<u>3</u>	<u>3</u>	<u>3</u>	<u>3</u>	<u>3</u>	<u>2</u> *	
<u>4</u>	<u>4</u>	<u>2</u>	<u>3</u>	<u>3</u>	<u>3</u>	<u>4</u>

Some very nice work but also...

1. Lack of rubber dam
2. Combinations of irrigants
3. Lack of understanding of modified or conventional step-back with manual instrumentation
4. Radiograph quality
5. Questionable evaluation of outcome
6. No definitive restoration
7. No molar endo completed



Case 3

Completed course of treatment

Submission window to Upload case 3rd-14th May

Feedback window 15th– 29th May

All schemes present cases Tuesday 8th June 2027
Presenting to own Scheme plus ES's



What makes a good APLAN 3 case?

- Opportunity to showcase skills
- GDS work done well
- Evidence of appropriate decision making, all care aspects considered and managed, appropriate quality radiographs, evidence of best practice being implemented
- Consideration of long term maintenance
- A completed case!

How will the final day in June look?

- FDs will present to their scheme and the ES's
- Provide 1 A4 sheet listing treatment carried out to the audience but **do not** present this verbally
- Present pre-op radiographs and photographs
- Present any interim radiographs or photographs
- Present any final radiographs and photographs
- Format is an informed **discussion** about decision making not a list of appointments
- Cases which are sub-optimal **can** be presented- it's evidence of learning which is important!!

APLAN feedback resulted in me reviewing my own clinical practice:

- ESs 64.51%
- FDs 87.50%

APLAN encouraged me to review the way in which I give feedback to others:

- ESs 80.64%
- FDs 81.25%

Receiving feedback was challenging: 59.38%

Receiving feedback from other colleagues through APLAN has been beneficial to my professional development:

84.38%

FD comments

- Enjoyed listening to other cases
- A lot of feedback focused on results
- Felt most positive comments came from FDs but ESs were highly critical
- APLAN is good to see the difference in cases other FDs are seeing/treating

ES comments

- Great way of seeing numerous trainees working and reviewing their work
- APLAN helped me critique my own work
- Good system, allows me to hear other clinicians' views