



## Canadian Performance Examination in Dental Hygiene Clinical Care Notes With Tooth Debridement Assignments

CPEDH Evaluation Date: \_\_\_\_\_

Client Name: \_\_\_\_\_

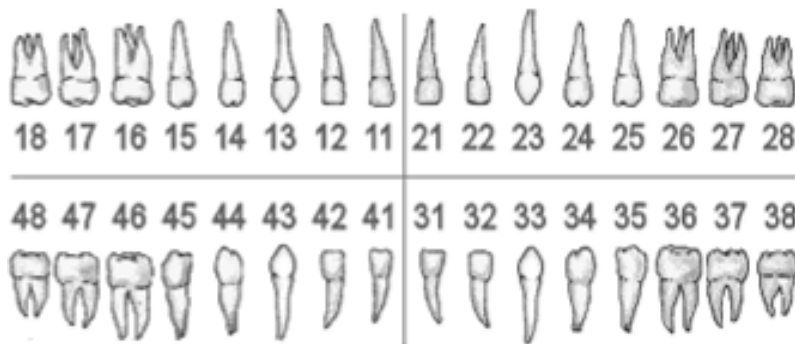
Candidate ID #: \_\_\_\_\_

Rater ID # and Signature:

\_\_\_\_\_

Teeth Assigned by Rater for Debridement: \_\_\_\_\_

(Circle assigned teeth on the odontogram below)



### Clinical Care Notes

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