<table>
<thead>
<tr>
<th>Chart#10</th>
<th>Chart#9</th>
<th>Chart#8</th>
<th>Chart#7</th>
<th>Chart#6</th>
<th>Chart#5</th>
<th>Chart#4</th>
<th>Chart#3</th>
<th>Chart#2</th>
<th>Chart#1</th>
</tr>
</thead>
</table>

**Screen Criteria Details**

**Key Code:**
- Y = Yes/ Present
- N = No/Absent
- NA = Not applicable

**Exam**

Dental Peer Review

2009

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CCS GI Auditing Tool

CCS Correct Care Systems

Cummings

Date: 10-30-2009

# Chars: 10
<table>
<thead>
<tr>
<th>No.</th>
<th>Question</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>The documentation is legible?</td>
</tr>
<tr>
<td>2.</td>
<td>The documentation is in the approved format (i.e., SOAP)?</td>
</tr>
<tr>
<td>3.</td>
<td>The date and time of the encounter are documented?</td>
</tr>
<tr>
<td>4.</td>
<td>The sick call note includes a plan of care?</td>
</tr>
<tr>
<td>5.</td>
<td>The sick call note includes the treatment provided?</td>
</tr>
<tr>
<td>6.</td>
<td>The sick call note includes clinical findings?</td>
</tr>
<tr>
<td>7.</td>
<td>The provider's signature and title are documented?</td>
</tr>
<tr>
<td>8.</td>
<td>All &quot;NO's&quot; require explanation</td>
</tr>
</tbody>
</table>

**Screen Criteria Details**

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**Key Code:**
- Y = Yes
- P = Present
- N = No
- A = Absent
- NA = Not Applicable

**Sick Call**

**Dental Peer Review**

**2009**

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**CCS AUDITING TOOL**

**CCS**

**Correlated Care**

**Cummins**

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**Dentist**

**Date:**

**Charts:** 10