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# Caseworx

### **REVISION HISTORY**

2015, Mar 26 – v1.0 Initial release 2015, Apr 22 – v1.1 Added new feature information, case types (fellow/diplomate), re-submission feature, tracing+overlay

# Caseworx

OVERVIEW

### IBO Case Presentation Format



- Full narrative output
- Copies or prints of radiographs
- Ceph tracings sets (radiograph, tracing, overlay)
- Mounted or grid printed photographs
- Boxes of study models or digital model images
- IBO Cephalometric Summary

Missing details or items completely

- Fields left blank
  - Can't tell if left out or just plain missing
- "Normal" or intentional blank should have something indicating such
  - "Within normal limits"
  - "No extraordinary findings"
  - "Not applicable for this patient"
- Missing whole sections of photos or imaging
  - Should have Pre-Tx, Post-Tx
  - Post+2 years if applicable

Not enough details

- Assumption that examiner knows the patient like you do
- Narrative does not establish a good picture of patient for examiner
  - Poor or thin patient history
  - Should already have data based on actual patient evaluation and management, right?
  - Missing or incomplete clinical evaluation
  - Lack of scientific evidence in details
    - "Patients weight was normal for their age"
    - "Patient weighed 155lbs, within the normal range for their age"

Improper formatting, grammar and/or spelling errors

- Poor grammar and sentence structure
  - What is "that" and where is "there"?
- Narrate case in neutral viewer position
  - No: "I saw the patient and she had pain in the left side of her face"
  - Yes: "The patient presents with a severe case of pain in the left side of her face"
- Data in wrong place(s), not in right order
- Not formatted to "IBO presentation standard"

Poor imaging

- Radiographs not clear
- Copies/scans not clear, but originals are
- Improper items in image
  - Earrings not removed
  - Tongue rings present
- Poor angulation of image
- Landmarks not clearly visible
- Landmarks misidentified in ceph

Poor photographs

- Poorly exposed
- Poorly focused
- Bad coloration/color casts
- Not composed correctly
  - Patient not looking STRAIGHT AHEAD
  - Has eyeglasses on
  - Eyes closed
  - Shoulders not visible
  - Image crooked or not level
- Missing required images

Poor quality study models

- Rough, not finished cleanly
- Bad impression
- Improper size, not within IBO standards
- Not marked with date or doctors ID
- Digital printout not clear
- Digital printout not labeled correctly

# Caseworx

CANDIDATE

# What Benefits? Why?

- Why build a digital case?
- How does it help?
- Where does it all fit in?
- What does it do for me?!

## Benefit – Singular Data Fielding

• One thought, one answer

• Saves each item separately

Easy to spot missing items

Describe estimatic modical history including allocaics, surrent modications & treatments family	
Describe patient's medical history, including anergies, current medications & treatments, family	disease history
The patient has a history of high blood pressure and constant tinnitus with an active allergy to m C, and takes NSAIDS almost every day for headaches. Most members of the patient's family has	netals, specifical a history of HB
	•••
Accident / Causative History	
Describe details if the complaint is related to a work or vehicular accident, specific injury/cause,	, or 'not related
This patient's complaint was not related to an accident, either at work or of vehicular nature.	
Physical Examination	• • •
Physical Examination Indicate details of patient's physical exam, such as demeanor, head posture, gait, balance, etc.	•••
Physical Examination Indicate details of patient's physical exam, such as demeanor, head posture, gait, balance, etc. The patient is in good physical condition, with a smooth gait, decent balance and head posture V slurring and their hearing is WNL. According to the patient, the only time their hearing is affected	VNL. The patien d is when a ringi

### Benefit – Auto Output Formatting

### Properly orders items

- Saved separately from data
- Can be manually edited
- Can be exported to Microsoft Word

#### Case Presentation Output Preview

Calibri

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#### Functional Evaluation

The patient's TMD evaluation and TM joint condition is as follows. Full range of motion, max opening both lateral movements ~11mm, protrusive 8mm, no deviation or deflection, no pain Occasional light from right side. JVA reveals same results. Airway and tongue reveal no noted obstructions or constric Low tongue position (inadequate swallow). Muscle palpation revealed patient relates muscular pain upper trap and temporal muscles Pain scales and treatment progress reports indicate patients initial scale revealed moderately high to high pain in right temporal area. Pain lowered accordingly during treatment. Patient reported no pain in any location at the conclusion of treatment. Subsequent follow reported no pain in any locations.

#### Special Considerations

No extraordinary circumstances or complications are expected in the treatment of this case.

#### Chief Complaint

The patient presents with a pain in the left cheek, mostly near the ear. The pain occurs daily, mostly u waking, and last for a few hours. The patient describes their pain as a burning, throbbing, and sometii numbing pain. During cold weather, the pain is usually worse and the patient takes NSAIDs to relieve pain.

## Benefit – Digital Imaging Storage

- Saved with case
- Labeled and ordered
- WSYIWYG for examiner



## Benefit – Digital Photo Grids

• Saved with case

### Labeled and ordered

Grid auto-generated



Click in box to Add, Clear, or Modify photo

### Benefit – Built-in Image Editing

Non-destructive

 Cropping, exposure, color cast removal

Maintains change history



## Benefit – To-Do List

- Shows missed fields
- Auto-generated when refreshing output
- Reminds of things to do before submitting case

Case Presentation Output Preview

Tahoma

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BIT

Formatted

Perform/Correct/Check the following individual items discovered during generation of this report:

- If printing, export your output and open in word processor. Apply page numbers to your document. Then, insert the page
  numbering into the table of contents accordingly for your output/print.
- Attach/Enclose photographs/images for Post-Treatment + 2 Years study models

Blank fields, with no data entered, were discovered. If nothing notable was discovered for the section, enter something such as 'Within normal parameters' or 'Nothing extraordinary noted'. If a data value was not measured or not applicable, 'n/t' or 'n/a' should be used to note such accordingly. Check the following items and be sure something is entered or noted accordingly:

- Patient Background patients expectations
- Clinical Skeletal chin
- Clinical Skeletal skeletal midlines
- Clinical Skeletal skeletal bite
- Clinical Dental closed bite
- Clinical Dental cross bite
- Clinical Dental arch shapes
- Clinical Dental arch length
- Clinical Dental caries index
- Clinical Soft Tissue nasolabial angle
- Clinical Soft Tissue lips
- Clinical Soft Tissue smile line
- Clinical Soft Tissue gingival display
- Clinical Soft Tissue tonsilar & adenoidal tissue
- Clinical Soft Tissue mentolabial sulcus
- Clinical Soft Tissue chin
- Clinical Soft Tissue other
- Clinical Functional Evaluation muscle palpation
- Clinical Functional Evaluation pain scales / progress reports
- Radiography TMJ complex findings
- Radiography other findings
- treatment planning mechano-therapy
- treatment planning treatment progress
- case finishing rotations
- case finishing spaces
- case finishing soft tissue (intraoral)
- case finishing root parallelism
- case finishing facial & dental midlines

### Benefit – Learn to Collect Proper Documentation

- Covers medical necessity for treatment
- Provides legal documentation
- Consistent, predictable documentation between all cases
- Great exercise for daily practice

### Candidate Case Process

- Gather info
- Enter details
- Import images

Create

 Generate output

# Submit

- Verify output
- Checklist
- Send to server

- Receive score update
- Check results and details

Scored

# Caseworx

INSTALLATION

### Getting Caseworx Package

- Download directly from <u>jklsoftware.com</u>
  - Choose Products -> Caseworx (jklsoftware.com/caseworx)
  - Free for all IAO members

#### Downloads

- Download the installer package
- Download the User's Guide
- Download the Preview Version Cleanup Tool
- Download the Preview Version Cleanup Tool (ZIP Packaged)
- User manuals, Candidate's Handbook included with package
- Updates are directly checked and installed by the program on start

## Installing Caseworx Package

- Run package downloaded
- If computer needs updated, installer will inform and download updates directly from Microsoft website
- Cannot install without the updates installed
- May need reboot after install. Will notify if needed.



### Starting Caseworx on Your Computer

- Must have Internet connection on first start – checks for updates and create user account
- Double-click icon on desktop or start from Start Menu (JKL Software -> Caseworx)



## Creating User Account / Logging In

- Enter e-mail and password to login, if you have an account already
- Create account by clicking on "Don't Have An Account? Click Here To Sign Up" link

Caseworx - IAO Edition X									
Users must login to submit cases electronically and/or check on previous submission scores. Enter the e-mail address you used to sign up and your chosen nassword.									
0	E-N	lail Audress			Louis				
		Password			Login				
	C Rem	ember E-I	Mail Address on	this Compu	ter				
<u>Reset I</u>	Password		Don't Have An Acc	ount? Click Here	<u>: To Sign Up</u>				
			Offline Mode						
lf you a a valid check (	ere not currently account, you ca examiner) cases	r connected o n work in 'of	online, but have logg fline' mode, but can	ged in online pre not submit (cano	viously with lidate) or				
Prev	vious User ID :	DU1004		Offlin	ne Mode				

## Creating User Account

- Enter information to create account
- E-mail address used to identify

- PIN and hint used to reset password
  - Passwords are "hashed", not stored
  - Cannot be decrypted

Case Create	WORX - IAO Edition New User Account	x
Privacy Notice:		
The information provid sell your information to	ded for your account is for usage by JKL Software and o any third-parties for any reason!	d the IAO. We hate spam too, so we'll never give or
First Name		
Last Name		
Telephone Number		
E-Mail Address		
Enter Password		
Re-enter Password		
Password Reset Items to describe the numbe	<ul> <li>Choose a 4-digit PIN which will be required to rese er.</li> </ul>	et a forgotten password. Then, enter a 1-word hint
4-uigit PIN		PIN and Password are one-time encrypted and saved. They cannot ever be read back by
1-word Hint		
		Create Account

## Working "Offline"

- Allows for cases to be built and worked on without active Internet connection
- Once an account created and logged in once (system will remember the last user that logged in)
- Doesn't check submitted cases and score updates
- Can login at any time to go "online"



### ISSUE/SYMPTOM

- Program acts weird
- Gets "Access Denied" messages
- Images may not save or delete correctly

- Local Windows user account does not have enough permissions
- Change Windows user account to "Administrator"

### ISSUE/SYMPTOM

- Text seems too large or cut off in program
- Proportions of text odd or off
- Most prominent in MacOS installed Parallels or Vmware with "Retina Display" hardware

- Windows client is configured for "Custom Text Size" greater than 100% or to odd proportion
- Change or reduce the Windows "Screen DPI" or "Custom Text Size"

### ISSUE/SYMPTOM

 Submitting packages or updating scores seem to take a long time, never complete, or hang the program

- Poor or inconsistent Internet connection
- Check Internet connection
  - If wireless, check signal strength
  - Avoid public Wifi points
  - Some cellular connections have high latency

### ISSUE/SYMPTOM

 Program cannot install or update

- Windows permissions too restrictive or missing "Administrator" permission
- Windows User Access Control (UAC) pop-up authorization window was answered "No" when asking for permission to install or update program

# Caseworx

NAVIGATION

### System Message

- Shown once on program startup
- Announces system-wide messages
  - System maintenance
  - Major updates, fixes, changes
- Can be hidden until message changes



### **On-Screen Instructions**

- Shows quick list of case creation and submission process tasks
- Can be hidden and shown via the "Help" -> "Show Instructions" menu item in main screen
- More detailed instructions while working available in each section

#### Instructions to Prepare Your Case

#### **Caseworx - IAO Edition**

The 'Save Changes' button at the bottom of the generator page can be used at any time. Be sure to save your work often! Cases can be saved and resumed at any time. Exam imaging is automatically saved as they are imported into the case.

Check out the 'Sample Case' pre-installed with the program to see an example of how each field can be filled out!

- Fill out all the fields in the case generator. Be as detailed as possible and include all pertinent details, measurements, and notes.
- Prepare patient photographs, ensuring clarity, sharpness, color balance, and proper cropping of the images. Import the photographs in the proper location on the 'Photographs' page.
- 3. Gather all patient study models. Photograph study models or export digital study models from your model program. Import images into the respective study model 'Imaging' page (PreTx, PostTx, PostTx+2). Be sure to name the images correctly and clearly. Order the images in the proper order.
- 4. Gather patient radiographs. Check films for proper clarity and visibility. For digital imaging, export images/slices from the x-ray software. Import images into the radiography 'Imaging' page. Be sure to name the images correctly and placed in the proper order.
- 5. Gather all ceph tracings and radiographs. Export necessary tracings from digital ceph programs. Scan tracings into or import digital tracings into the ceph 'Imaging' pages. Be sure to place the tracings in the correct page ('Radiographs' vs. 'Tracings'). Name and order the images accordingly.
- 6. The case output can be viewed at any time by choosing the last tab, 'Output', and pressing the "Refresh Output" link in the upper-right corner. The refresh will take into account any changes you've made and generate a new output. NOTE: Any manual changes you may have done directly in the output window will be discarded
- 7. When all the data has been entered and you are satisfied with everything, choose 'Export' from the upper-right of the 'Output' page to export a copy for further finishing in Microsoft Word. You can also print a work copy using the 'Print' link. If you are doing electronic submission, use the 'Submit Case' button.

Do Not Show Again

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### Main Screen "Home Page"

- Everything starts and ends on the Home Page
- Shows case status and scoring if online
- Auto-updates every 15 minutes if online, manual at any time
- Starts "New Case"
  - Can also start from "Program" menu

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Γ	P <u>r</u> ogram	<u>T</u> ools <u>I</u>	elp										r	011004 (1004)
											Last C	hecked: 03/22 06	:40 PM <u>Refres</u>	h From Server
	ID	Туре	Patient ID	Status	Examiner 1	Score 1	Examiner 2	Score2	Examiner 3	Score3				
	10	local	ADJ-201503								-	Output	Submit Case	<u>Delete</u>
	1	sample	JRD-201405 (Sample Case)	assigned	SI1005	90	DH1001				<u>Edit</u>	<u>Output</u>	9719-15E1	Delete
		local	MMT-201503	completed	SI1005	52	ET1019		KL1003	82	<u>Edit</u>	<u>Output</u>	BDEA-6002	Delete



### Main Screen "Home Page"


## Case Functions

- Case and output editor
  - Data editor
  - Image editor
  - Output editor
- Output Viewer
  - Shows exactly what examiner will see
  - Also shows detailed score returns
  - Greyed out if no output saved

<u>Edit</u>	Output	Submit Case	<u>Delete</u>
<u>Edit</u>	<u>Output</u>	9719-15E1	Delete
<u>Edit</u>	<u>Output</u>	BDEA-6002	Delete

- Delete case file
  - Cannot delete after submission
  - Cannot be undone once deleted
- Submit/Resubmit case when ready
  - Shows validation code after submission
  - Greyed out if no output saved

# Caseworx

CASE EDITOR

# New Case Record Caseworx - IAO Edition - JKL Software Program Tools Help Cogout of Account Started from Program menu Also can be started from "New

 Also can be started from "New Case" button at lower-left of Home Page



## New Case Record

- Generation assistant helps create consistent, unique case ID
- Fellow or diplomate case choice
- Fill out the info and press
   "Start New Case"
- Preloads the case Editor with information and prepares file for generation



#### **Caseworx - IAO Edition**

Case Name Generation Assistant

Cases should maintain strict anonymity and present the general viewer no details to who the patient actually is. However, as the presenter preparing the case, it is also important that you are able to differentiate your cases.

This unique 'patient id/name', in conjunction with your doctor's id code, is all the examiner will know about the case. Therefore, it is equally important that the case name is meaningful.

Enter the real name information for your patient below and the program will generate a unique "patient name" for your case.



## Case Generation Assistant "Editor"

- Cases created/edited on this screen
- Organized in logical sections
- Each section contains individual
   boxes to enter data
- Item boxes can be expanded to view more data without scrolling
- Data changes can be saved (or discarded) at any time

Patient Badgroad Clinical Evaluation Radiography Study Models Capp Analysis Photographs Treatment Plann <b>Case ID Number</b> Patient's Identifier 19.2021405 (Sample Case) Patient's Initialist with date & Initialist with an a lattery of HeD and Gl conduces.     Particular function of high block pressure and concleant timulas with an active allog yes/fically induced. The patient has a history of HeD and Gl conduces.   Particular function of the patient is induced to a work or vehicular at work of yes (with date & Initialist with date & Initialist with date & Initialist with an active of yes/lease and with an active all expecting injury/or Initialist date date with an active date date when a ringing in their right early is courring.   Particular with a patient is with an according to the patient, the o	Finishing & Results	Uutput									
Case ID Number       1       Presenter       DH1001         Patient's Identififer       (BP-201405 (Sample Case)       Patient Birthdate       12 / 02 / 1995       0         Patient's Identifier       (BP-201405 (Sample Case)       Patient Current Age       19       1         *Strict anonymity should be maintained. Assign a unique identifier such as patient's initials with date is recommended.       Case Type/Description (also used by Title Page to establish case title)         Case Il Movine I       Medical I       Medical I       Medical I         Medical I Isotop       Case Type/Description (also used by Title Page to establish case title)       Case I page/Description (also used by Title Page to establish case title)         Case Il Movine I       Medical II Isotop       Medical II Isotop       Medical II Isotop         Medical I Isotop       Medical II Isotop       Medical II Isotop       Medical II Isotop         Medical I Isotop       Of Medical Isotop       The patient's candidation I Isotop including alterget, current medications & treatment, family disease history of HBP and GI conditions.         Proceeding Case Internet Isotop       Internet Isotop       Internet Isotop         Proceeding Case Internet Isotop       Internet Isotop       Internet Isotop         Proceeding Case Isotop       Internet Isotop       Internet Isotop         Prescal Examination       Intera Isotop	Patient Background	Clinical Evaluation	kadiography	📐 Stu	udy Models	📐 Ce	ph Analysis	Ö	Photographs	💥 Treatme	nt Planni
Patient's identifier Patient Scarpier Case P	Case ID Number	1				Present	er DH100	1			
Patient Current Age       13       Patient Current Age       19         *Strict anonymity should be maintained. Assign a unique identifier such as patient's initials with date is recommended.       Case Type/Description (also used by Title Page to establish case title)         Case Type/Description (also used by Title Page to establish case title)       Ideal (dividen)         Medical History       Descripte patient's medical history, including allergies, current medications & treatments, family disease history         Descripte patient's medical history of high blood pressure and constant twinka with an active allergy to metala, specifically rided. The patient has been on blood pressure medication, whannes b-12 and C, and takes HEADDS almost every day for headaches. Most members of the patient's family has a history of HEP and Ci conductors.         Posciente actionary       Descripte patient complaint is related to a work or vehicular as the specific injury/d family disease title and the complaint is related to a work or vehicular as the patient's family has a history of HEP and Ci conductors.         Physical Examination       ent, specific injury/d family disease and page patient was not related to a accident, either at work or of vehicular nature or of vehicular nature or of vehicular nature family disease well. The patient is physical condition, with a smooth gait, decent balance and head posture WL. The patient is coherent and understands well. Their speech is well articulated two shuring and their hearing is WH. According to the patient, the only time derive and head posture WL. The patient is cherrent and understands well. Their speech is well articulated in the shuring is on two dis documented, as they have had numerous dentists. Visual examinatio	Patient's Identifier*	JRD-201405 (Sample Case)			Patient	t Birthdat	te 12	/	02 / 19	95 Cal	
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The patient has a history of high blood pressure and constant tinnius with an active allergy to metals, specifically nickel. The patient has been on blood pressure medication, witamins B-12 and C, and takes NSAIDS almost every day for headaches. Most members of the patient's family has a history of HBP and GI conditions.	Describe patient's medica	l history, including allergies, cu	urrent medications & trea	atments, fa	mily disease h	istory					
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Data	Sect	IONS



## Saving Data

- Enables when changes detected in data
- Can save or discard (returns to last saved data)
- Images always saved immediately
- "Save Output" on enables when Output has been edited or re-generated
- Can save at any time
  - "Save often"

Save Outp	ut Save Changes	Discard Changes

## Imaging Sections

- Image List and Functions
  - Name image appropriately
  - "Edit" to open image editor
- Image Ordering
  - Images output in order listed
  - Use arrows to move up/down
- Viewport and View Controls
  - Zoom image to view details
  - Click on image and drag to move

#### nalysis Imaging

Images are outputed in the order listed below. The description entered will be used to caption your image in the output. The caption should include the date and/or type of the image (pre-tx, post-bx, etc.). Be sure images are of the highest quality and scanned/acquired from the best source possible. If no images are present here, the output will be noted that imaging for that section will be attached separately.



## Imaging Sections

- Import images
  - Click 'Import Images' link at bottom of each list
  - If scanning, be sure scanner is on and ready before clicking
  - Images saved immediately

Analysis Imaging

Images are outputed in the order listed below. The description entered will be used to caption your image in the c (pre-tx, post-tx, etc.). Be sure images are of the highest quality and scanned/acquired from the best source possible for that section will be attached separately.

Zoom 237



## Imaging Sections

- Import from File
  - Reads jpg, png, bmp, tiff
- Scan from WIA scanner
  - Enables if scanner found
- Paste from Clipboard
  - Allows any image that can be copied to the clipboard to be used

Analysis Imaging

Images are outputed in the order listed below. The description entered will be used to caption your image in the o (pre-tx, post-tx, etc.). Be sure images are of the highest quality and scanned/acquired from the best source possible for that section will be attached separately.





## Image Importing – Import Detail



## Photo Grids

- Grid Selection -
- Empty Cell
  - Click to get import menu
- Cell Description
  - Describes image that belongs in cell



## Photo Grids

- Click in cell for menu
- Import Menu
  - From file, scanner, or clipboard
- Edit Menu
  - Click in cell with an image for replace, clear, edit options
- Image changes saved immediately



## Image Editor

- Change History —
- Adjustment Tools
  - Exposure, contrast, hue, and rotation most commonly used tools
- Crop Tool

Can be re-edited or reverted at any time



## Image Quality

- 8 megapixel is plenty, useable for up to a 24x36 print
- Large files cause many issues
  - Long upload times for candidate, long download times for examiner
  - More resources to generate output, may result in out-of-memory condition
  - Large files show tiny flaws in image more, like camera shake
- Clarity, consistency, and quality hallmark of a good image
- Quality in = Quality out, cannot fix a poorly recorded image

## Image Editor Can't Fix Everything!

#### OUT OF FOCUS



#### SHARPENING DOESN'T WORK



## Image Editor Can't Fix Everything!

#### OVEREXPOSED / BLOWN OUT DETAIL BEYOND REPAIR





## Image Editor Can't Fix Everything!

#### UNDEREXPOSED / BLOCKED UP



#### BRIGHTENING CAUSES NOISE AND BLOW OUT HIGHLIGHTS



## Generating Output Narrative

- Last section tab
- Click to generate output
  - Based on current data
  - Deletes any manual edits to previous generated output
- Output preview
  - Used to view generated narrative
  - Edit final output before submission
    - Spell check!



## Generating Output Narrative

- To-do page automatically generated at refresh time
- Appears at bottom of narrative output
- Check and correct missing items
- Delete To-Do list before doing final save



## **Output Narrative - Hints**

- Avoid non-standard fonts: examiner may not have font installed on their system!
  - Use "Arial", "Times New Roman", or "Calibri" to remain standard
- Remember, manual edits to output lost when refreshing from data
  - Best to change original source data field in appropriate section
  - However, can edit manually and add narrative detail before FINAL save and submission
- Images fitted to page to best utilize paper orientation
  - Examiner will be able to view image in detail. Be sure image is saved in correct orientation in respective imaging/photo section

## **Output Narrative - Hints**

- No page numbering needed in table of contents
  - Digital submission documents don't have "paging"
- Copy/paste can also be utilized
  - Export document to Word document, perform further editing in Word
  - Return copy from Word to Output window
    - Ctrl-A in Word to "Select All", Ctrl-C to Copy to clipboard
    - Ctrl-A in Output window to select all, Delete, then Ctrl-V to paste into Output

# Caseworx

OUTPUT REVIEW

## Case Functions

- Case and output editor
  - Data editor
  - Image editor
  - Output editor
- Output Viewer
  - Shows exactly what examiner will see
  - Also shows detailed score returns
  - Greyed out if no output saved

<u>Edit</u>	Output	Submit Case	<u>Delete</u>
<u>Edit</u>	<u>Output</u>	9719-15E1	Delete
<u>Edit</u>	<u>Output</u>	BDEA-6002	Delete

- Delete case file
  - Cannot delete after submission
  - Cannot be undone once deleted
- Submit/Resubmit case when ready
  - Shows validation code after submission
  - Greyed out if no output saved

- Exactly what the examiner will see and use for scoring
- Shows last saved output, exactly as saved
  - Manual edits (not generated from data fields) included
- No editing capabilities
- Check carefully once submitted, cannot be submitted again

- Four sections to choose
  - Case Presentation Output
  - IBO Ceph value viewer
  - All imaging viewer
    - Images labeled by section/description
  - Scoring results
    - Shown only to candidates
    - Allows viewing details scoring results and comments from examiner

\_ - > Case Presentation Output 🛛 Cephalometric Values (IBO) Presenter DH1001 Case ID Number 1 tient's Name (or ID\*) JRD-201405 (Sample Case) Patient Birthdate 12 / 02 / 1995 Patient Start Age 18 Patient Current Age 19 Full Output For<u>m</u>atted Print IBO CASE I.D. JRD-201405 (Sample Case) AGE: 19 BIRTHDATE: December 02, 1995 THE FUNCTIONAL AND FIXED ORTHODONTIC TREATMENT OF THIS CLASS II, DIVISION I PATIENT IS PRESENTED IN PARTIAL FULLFILLMENT OF THE REQUIREMENTS OF THE INTERNATIONAL BOARD OF ORTHODONTICS

- Case details
  - Completely anonymous
  - Only shows presenter's ID and abbreviated patient ID (generated by presenter when case created)

\_ 🗆 🗙 Caseworx - Presentation Output - JRD-201405 (Sample Case) Case Presentation Output 📄 Cephalometric Values (IBO) 📗 Imaging 📐 Scoring Results Case ID Number 1 Presenter DH1001 Patient's Name (or ID\*) JRD-201405 (Sample Case) Patient Birthdate 12 / 02 / 1995 Patient Start Age 18 Patient Current Age 19 Full Output Formatted Print IBO CASE I.D. JRD-201405 (Sample Case) AGE: 19 BIRTHDATE: December 02, 1995 THE FUNCTIONAL AND FIXED ORTHODONTIC TREATMENT OF THIS CLASS II, DIVISION I PATIENT IS PRESENTED IN PARTIAL FULLFILLMENT OF THE REQUIREMENTS OF THE INTERNATIONAL BOARD OF ORTHODONTICS

- Case output
  - Shows exact copy as last saved in editor
  - Cannot be changed
  - Includes "printable" imaging and photo grids, embedded in correct section and location

1	ut - JKD-201403 (Sample Case)			
Case Presentation Output	Cephalometric Values (IBO)	coring Results		
Case ID Number	1	Presenter	DH1001	
Patient's Name (or ID*)	JRD-201405 (Sample Case)	Patient Birthdate	12 / 02 / 1995	Cal
Patient Start Age	18	Patient Current Age	19	
Full Output			For <u>m</u> atted	Print Export
				A
		ADE (Sample Ca		
	IBO CASE I.D. JRD-201	405 (Sample Ca	se)	
	IBO CASE I.D. JRD-201 AGE: BIRTHDATE: Dece	405 (Sample Ca 19 mber 02 1995	se)	
	IBO CASE I.D. JRD-201 AGE: BIRTHDATE: Dece	405 (Sample Ca 19 mber 02, 1995	se)	
	IBO CASE I.D. JRD-201 AGE: BIRTHDATE: Dece	405 (Sample Ca 19 mber 02, 1995	se)	
	IBO CASE I.D. JRD-201 AGE: BIRTHDATE: Dece	405 (Sample Ca 19 mber 02, 1995	se)	
	IBO CASE I.D. JRD-201 AGE: BIRTHDATE: Dece	405 (Sample Ca 19 mber 02, 1995	se)	
	IBO CASE I.D. JRD-201 AGE: BIRTHDATE: Dece	405 (Sample Ca 19 mber 02, 1995	se)	
THE FUNCTIONA	IBO CASE I.D. JRD-201 AGE: BIRTHDATE: Dece	405 (Sample Ca 19 mber 02, 1995 TREATMENT O	se) F THIS CLASS II, DIVI	ISION I
THE FUNCTIONA PATIENT IS PRE	IBO CASE I.D. JRD-201 AGE: BIRTHDATE: Dece L AND FIXED ORTHODONTIC ESENTED IN PARTIAL FULLFIL	405 (Sample Ca 19 mber 02, 1995 TREATMENT O LMENT OF THE	se) F THIS CLASS II, DIVI REQUIREMENTS OF	ISION I THE
THE FUNCTIONA PATIENT IS PRE	IBO CASE I.D. JRD-201 AGE: BIRTHDATE: Dece L AND FIXED ORTHODONTIC ESENTED IN PARTIAL FULLFIL INTERNATIONAL BOARE	405 (Sample Ca 19 mber 02, 1995 TREATMENT O LMENT OF THE O OF ORTHODOM	se) F THIS CLASS II, DIVI REQUIREMENTS OF NTICS	ISION I THE

- IBO Ceph Sheet
  - Exact same as saved in editor
  - Cannot be changed
  - Check values carefully!

Caseworx - Presentation Output - JRD-20140	5 (Sample Ca	ise)		200		
Case Presentation Output	ric Values (IBO	) 📕 Imaging 📐	Scoring	Results		
Growth Analysis		Pre Treatment		Post Treatment	+ 2 yrs	
Stage Of Growth Stage (	CVMS)	tage VI	Ŧ	Stage VI	• Stage VI •	
Growth Direction Y Axis	to SN 60			62	63	
Y Axis	to FH 59			60	61	
					_	
Airway Anaiysis		Pre Treatment		Post Treatment	+ 2 yrs	
Upper Airway (Nasopharynx),	<b>mm</b> 14			14	14	
Lower Airway (Oropharynx),	<b>mm</b> 12			12	12	
Skeletal Vertical Analysis	Pr	e Treatment		Post Treatment	+ 2 yrs	
FMA, deg	20.5		20		22	
LAFH (ANS to Mn), mm	61		61		62	
UAFH-LAFH / TAFH, % Ratio	43-57%		44/5	6	44/56	
SN to GoGn (Steiner)	28		27		29	
Skeletal Sagittal Analysis		Pre Treatment		Post Treatment	+ 2 yrs	
Condylion to A pt (Mx Length),	<b>mm</b> 95		!	96	95	
Condylion to Gn (Mn Length),	<b>mm</b> 69			68	69	
Difference (Mn Len - Mx Len),	<b>mm</b> 26			28	26	
Wits (Jacobson),	mm +1			-1	0.5	
ANB,	deg +4			+2	+3	
Dento-Alveolar Relations		Pre Treatme	nt	Post Treatment	+ 2 yrs	
IMPA (Incisor Mn Plane An	gle), deg	96		91.5	90.5	
Interincisal Angle (Upper 1 - Lowe	er 1), deg	126.5		128	127	
· · · · · · · · · · · · · · · · · · ·				1	16	



- Scoring Results
- Only visible to candidate
- Choose examiner position to show details
- Examiner comments in detail for each section
- Print a copy of the score sheet



# Caseworx

CASE SUBMISSION

## Case Functions

- Case and output editor
  - Data editor
  - Image editor
  - Output editor
- Output Viewer
  - Shows exactly what examiner will see
  - Also shows detailed score returns
  - Greyed out if no output saved

<u>Edit</u>	Output	Submit Case	<u>Delete</u>
<u>Edit</u>	<u>Output</u>	9719-15E1	Delete
<u>Edit</u>	<u>Output</u>	BDEA-6002	Delete

- Delete case file
  - Cannot delete after submission
  - Cannot be undone once deleted
- Submit/Resubmit case when ready
  - Shows validation code after submission
  - Greyed out if no output saved

### Case Submission

• Available when output has been saved and logged in online



## **Case Submission**

- Enter account password and check verification box
- Be sure Internet connection is reliable and consistent
- Press "Submit Case" to package, encrypt, and submit case to server
- Not officially accepted unless server responds with verification code (email sent!)



#### Caseworx - IAO Edition

Submit Finalized Case Output

Case submissions cannot be undone once submitted. Be sure that you have reviewed your case, information, images, and details. Also, be sure that you have gone through your "To-Do List" at the end of the output to be sure that all noted issues have been resolved.

Enter your account password to verify your account and begin case submission. The submission can take a few minutes, be patient while the case submits! NOTE that your case submission is not successful or complete without a returned VALIDATION CODE!

Case ID	11 - NDT-201503
Account Password	
Overall Progress	
Packaging Progress	
Submit Progress	
	Ready To Submit
	I have verified my case and am ready to submit
	Submit Case

# Caseworx

SCORING
### Examiner Case Process

- Anonymous server assignment
- Downloads output and image package

## Acquire

Score

- View case output
- Check in detail
- Complete score sheet

- Returned to server
- Detailed scoring with notes

Submit

### Auto-Case Assignment Score Basis

- Two passing = Passed
- Two failing = Failed
- 1 pass, 1 fail = third assignment

	First Examiner Score	Second Examiner Score	Alt Examiner Score
Passed	71	85	
Passed	65	78	73
Failed	62	59	
Failed	73	59	68

## Case Assignment

Unassigned Cases :

- No name or ID when retrieving
- Server random assignment
- Examiner retrieves case package as generated
- Decrypted and imported to examiner's computer

P <u>r</u> ogram <u>T</u> ools <u>H</u> elp	
nassigned Cases : <u>1</u> <u>Acquire Cases</u>	Caseworx - IAO Edition X
ID Type Patient ID	Acquire Unassigned Case From Server
1 sample JRD-201405 (Sample	Acquire Unassigned Case From Server   Cases submitted to the server by users are initially held as 'Submitted'. Examiners are randomnly assigned cases by the server to insure fairness and anonymity.   Once assigned by the server, the case will be downloaded and imported to the examiner's computer, then marked on the server as 'Assigned'. No other examiner will be able to access the file once this has been completed.   Examiners will be able to view the case output directly or print a copy. Scores are entered into the 'Scoring' panel and the results are re-submitted to the server to archive and for the presenter to view.   Available Cases on Server 1   Cases to Import (3 max) 1   Mecount Password ••••••••••••••••••••••••••••••••••••

## Scoring Screen

🖄 Caseworx - Presentation Output - JRD-201405 (Sample Case)		Caseworx -	Case Scoring Worksheet - JRD-20	01405 (Sample Case)			×
Case Presentation Output		Presenter :	DH1001				
Case ID Number 1 Presenter	H1001	🕕 Detai	ls 📐 Ceph & Diagnosis	Treatment	Analysis		
Patient's Name (or ID*) JRD-201405 (Sample Case) Patient Birthdate	12 / 02 / 1995 Cal	Section 1	- Clinical, Complaint, Evaluat	tion	Section 2	- Histories	
Patient Start Age 18 Patient Current Age 1	9	Score (2)	2		Score (1)	1	
Full Output	For <u>m</u> atted <u>Print</u> <u>Export</u>	Notes	Missing radiographic and chin finding	35	Notes		^
	<u>^</u>						
	E						
				Ŧ			Ŧ
IBO CASE I.D. JRD-201405 (Sample Case) AGE: 19 BIRTHDATE: December 02, 1995		Section 3	- Ceph Radiographs		Section 4	- Pano/FMX Radiographs	
		Score (2)	Tonque ring not removed in post-tx c	ephalogram and earrings	Score (1)	Tonque ring not removed in post-tx radiographs, poor	
		in the second se	not removed in post+2 cephalogram	-,,,,,,	110125	angulation of patient resulted in poort quality of post+2	
				+			-
		Section 5	- Photographs		Section 6	- Study Models	
		Score (2)	1		Score (2)	2	
		Notes	Tongue ring not removed in post-tx p	hotographs	Notes		*
THE FUNCTIONAL AND FIXED ORTHODONTIC TREATMENT OF THIS CLASS II, DIVISION I PATIENT IS PRESENTED IN PARTIAL FULLFILLMENT OF THE REQUIREMENTS OF THE INTERNATIONAL BOARD OF OPTHODONTICS				-			~
DOCTOR ID CODE: DU1004							
	-	Grand Tota	90			Clear Save Print	Report

### Scoring Screen

- Examiners cannot view other scores or results
- Examiners do not know who other assigned examiner(s) is/are





# Caseworx

#### Caseworx

- Download jklsoftware.com
  - Choose Products -> Caseworx (jklsoftware.com/caseworx)
- Worldwide submission at anytime
- Anonymity of case
- Removes formatting errors and missed data
- Concentrate on quality data
- Retrieve results quickly and easily

# JKL Software Caseworx

Nelson Mark, (<u>nel@jklsoftware.com</u>) http://jklsoftware.com