

TABULATION OF SCALED SCORE

ENDODONTICS

FACTOR	EXAMINER A	EXAMINER B
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
TOTAL		
SCALED SCORE		

FINAL SCALED SCORE _____

I hereby certify the forgoing is true and correct.

Signature _____

Date _____

Endo Scaled Score Conversions
10 factors

Raw Score (x)	Scaled score
40	100
39	99
38	98
37	96
36	95
35	94
34	93
33	91
32	90
31	89
30	88
29	86
28	85
27	84
26	83
25	81
24	80
23	79
22	78
21	76
20	75
19	74
18	71
17	69
16	66
15	64
14	61
13	59
12	56
11	53
10	51
9	48
8	46
7	43
6	40
5	38
4	35
3	33
2	30
1	28
0	25