Protocol of practical training

Restorative Dentistry V. Practice

Simulated part

Name and surname:

UCO:

Date:

|  |  |
| --- | --- |
| Postendodontic restoration |  |
| Cavity and filling class III. |  |
| Cavity and filling Class IV. |  |
| Cavity, base,matrix and filling class II. for Ag |  |
| Cavity,matrix and filling class II. for composite, slot preparation. |  |
| Cavity,matrix and filling class II. for composite, conventional preparation. |  |
| Cavity,filling class V. for composite,glassionomer |  |
| Rubberdam placement 1x |  |

Clinical part

Name and surname

UCO:

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| --- | --- | --- | --- | --- | --- |
| Date | Pacient | Diagnosis | Treatment | Code | Signature of the supervisor |
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