Protocol of practical training

Simulating part

Name and surname í:

ID:

Week from to:

**Simulating part**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Task | Cavity | | Base | Matrix | | Filling | | Altogether | | Signature of the teacher |
| Class II. MOD mandib. Molar amalgam |  | |  |  | |  | |  | |  |
| Clas III. |  |  | x |  |  |  |  |  |  |  |
| Class I. composite |  |  | x |  | |  | |  | |  |
| Class II. composite |  | |  |  | |  | |  | |  |
| Class V. Kavita V. composite |  | | x |  | |  | |  | |  |
| Class V.  glassionomer |  | | x |  | |  | |  | |  |
| Rubberdam |  | | |  | | | |  | |  |

Clinical part

Name and surname

ID:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date | Patient | Diagnosis | Performance | Code | Name and signature of the teacher |
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Assistance- write A to the performance