Protocol of the practical training Restorative dentistry 5th year

Simulation part

Name and surname

ID

Date

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Task | Cavity | Rubberdam | Matrix | Filling |
| Cavity II. class MO for composite 16 or 26 |  |  |  |  |
| Cavity II. class MO for composite MOD, 36 or 46 molár |  |  |  |  |
| Cavity III. class M for composite 11 or 21 |  |  |  |  |
| Cavity III class D for composite |  |  |  |  |
| Cavity V. class for composite |  |  |  |  |
| Cavity V. class for GIC |  |  |  |  |

Individually tasks are possible.

Protocol of practical training

Restorative 5th year

Clinical part

Name and surname

ID:

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| --- | --- | --- | --- | --- | --- |
| Date | Patient | Diagnosis | Description | Code | Stamp and signature of the teacher |
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