



Faculty of oral and dental medicine

INTERNSHIP TRAINING PROGRAM



Ahrm
Canadian
University

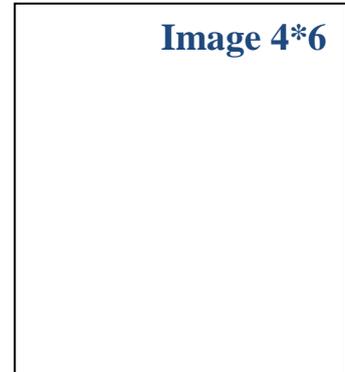
Ahrm Canadian University



Faculty of Oral and Dental

Medicine

Intern's personal information



Name: _____

Graduation Year: _____ University: _____

I.D: _____ Group: _____

Program year: _____/_____

Internal training period: _____ months

From: ____/____/____ to ____/____/____

Intern Signature: _____

Program Director: _____

Rules & Regulations

1. Attendance:

Interns are expected to register their attendance twice everyday by the intern supervisor whether in the clinical sessions or in the seminar presentations. The working hours are from 9:00 am to 3:00 pm. Interns must be present at the beginning of the day and should not leave before it ends. If intern attends more than 30 minutes late but arrive before 10:00 am, intern will be considered one day absent. Otherwise he/she will be considered two days absent. Also, if intern leaves his/her duties early, intern will be considered one day absent.

2. Clinic Attire:

Interns should to follow the recommendation regarding the prescribed clinical dress at all working hours. The prescribed clinical dress code for interns is unified cleaned colored scrub suit and the clean lab coat or disposable gown on top. Blue jeans and casual dress are not allowed in clinical premises. Female interns should refrain from using heavy cosmetics, nail polish, and high-heeled shoes. Long hair should be tied up or covered.

3. Infection control:

Infection control rules must always be followed and under all circumstances. All guidelines from Immunization, hand hygiene, proper personal protective equipment (PPE), Exposure Prevention techniques, surface disinfection/barrier techniques, instrument processing, and instruments sterilization to waste disposal must be strictly followed. Any violation of the infection control protocol will be faced by strict punishment.

4. Professional Ethics:

Interns are expected to maintain respect and confidence of patients through sincere and honest relationship. Any treatment must be free of charge and packed up with psychological support and clinician should be sympathetic and considerate. Courtesy, cooperation and harmonious interpersonal relationship must be highly observed among all clinical staff to promote a wholesome working atmosphere in the clinic. Share in the practice of economy through proper handling of machine, apparatus, equipment and disposable materials are highly appreciated

The medically compromised patients and those who may suffer contagious diseases should find accessible treatment within the medical and dental profession. Infection control measures should be observed all the time regardless of the patient medical status. Under no circumstances should any Intern refuse or object to treat patient who may carry contagious diseases since such attitude is medically and ethically non-acceptable.

5. Discipline:

In case of unapproved absence, negligence, misconduct, incompetence, insubordination or any other act that the interns' superiors deem unacceptable, an Intern shall be duly reported to the Interns' Training Committee for disciplinary action.

Depending on the seriousness of the offence and upon the recommendation of the Interns' Training Committee, a disciplinary action may be one of the following:

- Probation, verbal and written warnings.
- Repeating a period of his/her training.
- Suspension of the Intern for some time as per suggested by ITC.
- Dismissal from the Internship Training Program.

6. Evaluation:

By the end of the program, the intern's performance should be evaluated and assessed by the Internship Training Program Committee. The data for evaluation will be gathered from the summary of procedures recorded in logbook, and the decision of whether the intern has fulfilled his/her requirements or requires an extension of the program will be made. Each procedure performed by the intern is recorded and will be compiled in. A monthly report will be written by the interns' supervisors. For interns training outside the faculty, training supervisors send their evaluation of the intern's performance at the end of each rotation in addition to signing all treated cases.

7. Graduation:

At the end of the one-year internship program, interns will be awarded a certificate of completion of the internship signed by the Dean and the Head of the Administrative Affairs and Chairman of Interns' Training Committee, provided that he/she fulfilled the requirements of the program. Although the certificate of competency should show no grade, an individual report of each intern's performance will be kept in his/her file for future reference.

INTERNS TRAINING COMMITTEE (ITC) Committee structure:

- ❖ Chairman (Dean of the Faculty)

- ❖ Vice Dean for students' affair
- ❖ Vice Dean for community service.
- ❖ Director of the Internship Training Program
- ❖ Director of interns' Clinics
- ❖ Interns' Supervisors
- ❖ Chief Nurse

❖ INTERNSHIP TRAINING PROGRAM'S COMPONENTS:

Interns shall work on a full-time basis during the entire period of their Internship program. They shall execute all dental procedures defined in the curriculum and perform other duties related to their training that may be assigned by the Directors. Interns are expected to observe all rules and regulations specified in this manual.

The following activities are required to complete the Internship Training Program (ITP):

- Clinical Training
- Scientific Activities
- Continuous Education Workshops and Courses
- Journal Club Activity
- Community and Volunteer Dental Training

A. Clinical Training:

The Dental Internship Training Program is structured into: Diagnostic Center, Comprehensive Care Clinic (CCC) and specialty care Clinics that includes: Oral and Maxillo-Facial Surgery (OMFS) & Oral and Maxillo-Facial Radiology (OMFR) and Pediatric Dentistry.

A.1 Diagnostic Center:

- Allow the intern to record the chief complain, assess and examine the patient's oral health condition. Then, Construct patient's treatment plan according to the interdisciplinary approach under supervision. For emergency cases, intern refer patient to surgery clinic for extraction or Comprehensive Care Clinic for endodontic treatment.

- Periodontic Treatment

- ❖ Gingivitis and early Periodontitis treatment.
- ❖ Monitoring the outcome of treatment

A.2 Comprehensive Care Clinic:

- It allows interns to provide comprehensive dental treatment for regular patients with pre-scheduled appointments. The clinical structure of the program has been designed to simulate group practice environment. It is a constructed program in a form of timetable schedule where each intern is provided with a fully equipped operatory throughout the internship period.

Guidelines for Comprehensive Care Clinic:

- The clinical cases assigned to Interns are varied and are from all clinical specialties; Preventive dentistry, Operative dentistry, Endodontics, Prosthodontics,
- A sequential treatment plan must be approved by the instructor in charge and this must be documented in the file of the patient.
- The Intern must be ready and able to present and/ or discuss the treatment plan of the assigned case(s).
- Information on assigned clinical case to be presented must include the following:

- ✓ Patients profile (name, gender, etc.)
- ✓ Chief complaint
- ✓ Medical and Dental history
- ✓ Extra and Intra-oral clinical examination
- ✓ Investigative reports - Xrays, laboratory reports etc., diagnostic cast.
- ✓ Clinical Diagnosis
- ✓ Objective of/and Proposed Treatment Plan.
- ✓ Nutrition /Diet analysis and oral hygiene protocol
 - Documentation, with digital camera of clinical procedures is required (Pre-treatment, during treatment and Post treatment photographs)
 - Each completed case must be fully documented. The appropriate forms must be duly signed by the faculty supervisor(s).
 - Treatment of the chief complaint of an emergency patient.
 - Preventive Treatment.
 - Restorative treatment includes:
 - o Retreatment for amalgam and tooth colored restoration (for single tooth).
 - o Re-cementation of fixed-prostheses.
 - o Repair of provisional fixed partial denture
 - Endodontic treatment:
 - o Initial root canal therapy (pulp extirpation and pain control).
 - o Retreatment for emergency cases.
 - Removable Prosthodontic Procedures:

- o Repair of broken removable complete and partial denture.
- o Denture relining or rebasing

A.3 Oral and Maxillo-Facial Surgery (OMFS) & Oral and Maxillo-Facial Radiology (MFR):

Interns will be distributed and scheduled to perform the following procedures:

- Performing radiographic examinations and film processing.
- Surgical procedures:
 - o Simple non-surgical extraction (elective extraction should be referred to student courses)
 - o Other surgical procedures (transalveolar surgery, incision and drainage, biopsy, impaction, and bone augmentation (live demonstration with the surgeon supervisor).

A.4 Pedodontics Dentistry:

- o Amalgam and tooth-colored Restoration
- o Extraction o Space Maintainer o Pulpotomy & Stainless-steel crowns

Intern must complete ONE advanced full mouth rehabilitation case, by the end of Comprehensive Care Clinic Round (3months) with following advanced criteria:

- Every case must be fully documented. The documentation must include accurate dental records, relevant medical records, detailed treatment records, full mouth radiographs, diagnostic casts and where possible clinical photographs.

- Fixed prosthodontics department case options:

1- Smile design case: Asymmetric disharmonies or violations of esthetic principles. The case should include 4-6 anterior teeth with hard and/or soft tissues modifications.

2- Restoration of an edentulous span (FPD): The case should involve: endodontically treated abutments and/or surgical intervention and/or occlusal plane modification.

3- Endocrown

- Removable prosthodontics department case options:

1. Extra-coronal or radicular overdenture attachment.

2. Single denture

3. Immediate denture

4. Implant supported overdenture

5. Flexible partial denture

6. Obturator for maxillary defect

- Conservative department case options:

Caries risk assessment should be done for every case including:

1. Salivary flow and buffering capacity

2. Cariogram

Case selection criteria:

1. Aesthetic rehabilitation

2. Defective restorations

3. Laminate veneers

4. Bleaching

5. Inlay/ Onlay/ Overlay/ Veneerlay

B. Scientific Activities:

One of the basic requirements to get the internship certificate, that each intern is demanded to attend 6 scientific activities accredited by the Faculty. Also, participation in national and international conferences would improve intern scientific knowledge and technical backgrounds.

C. Continuous Education Workshops and Courses:

- Basic Life Support (CPR/ Life Threatening) & Infection Control course are elementary prerequisite for completion of Internship program.

Supplementary optional courses: (subjected to updates)

- Dental Implants
- Endo Microscope
- Minor Oral Surgeries
- Digital Smile Design (DSD)
- Dental Photography
- Teeth bleaching.
- CAD/CAM
- Botox & Fillers injections
- LASER Applications in Dentistry

D. Journal Club Activity:

Aims to give chance for the intern to be updated and exposed to the current literature in a selected specialty and non-specialty dental journals and gain knowledge from the different publications of dental journals.

E. Community and Volunteer Dental Training:

Aims to give chance for the intern to participate in community and university affairs, particularly when these activities promote the health and well-being of the public.

They are encouraged to take an active role in the education of the public to promote of oral health. Interns are encouraged to be involved in designing and implementing programs to promote oral health in the community.

The dental internship training program will provide an opportunity for interns to work as a group in activities related to public health. All the community dental activities will be arranged with departments and faculty interested in promoting oral health of the public. In collaboration with charities for regular checkup children's' oral health and provide optimum care. Community activities outside the University will include medical convoys to areas with high population and higher dental service needed.

TEACHING & LEARNING METHODS

Method	Intended learning outcomes
Lectures /Tutorials	Knowledge and Understanding skills, Intellectual skills
Clinical practice sessions	Professional Skills, General and Transferable Skills
Case reports and presentations	Professional Skills, General and Transferable Skills
Assignments	Knowledge and Understanding skills, Intellectual skills, General and Transferable Skills

Intended learning outcomes of program (ILOs):

<p>A. Knowledge and understanding: By the end of the training, the student will be able to:</p>	<p>Pediatric Dentistry:</p> <ol style="list-style-type: none"> 1. identify the different behavioral management techniques and methods of communication with young patients and their parents. 2. recognize the basics of cavity preparation and pulp therapy in primary and young permanent teeth, space maintainers, as well as extraction of primary teeth. 3. recognize etiology and methods of treatment of dental caries and periodontal diseases in children <p>Dental public health:</p> <ol style="list-style-type: none"> 4. identify the basic methods and barriers of effective health education for different priority groups 5. recognize the steps of applying the different preventive agents at home,
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office, and community level.

6. recognize the basics of professional ethics in the field of dentistry

7. recognize the concepts and mechanisms of infection control

Oral and Maxillofacial Surgery:

8. identify principles, types, techniques, and complications of local anesthesia

9. recognize complications of tooth extraction

10. identify techniques for removal of impacted teeth

11. describe techniques for management of oral and face infections, cysts of the jaw, TMJ problems, fractures and oral implantology.

Conservative Dentistry:

12. Recognize pain control and postoperative hypersensitivity (theories, types, causes, prevention and management).

13. Discuss recognize how to manage carious and non-carious lesions

Endodontics:

14. recognize management of vital pulp

15. identify different techniques, success and failure of root canal treatment

16. identify the needed endodontic emergency treatment for traumatized teeth.

17. recognize procedures of retreatment.

	<p>Prosthetic Dentistry:</p> <p>18. recognize types of trays, impressions and impression materials for different edentulous cases</p> <p>19. identify and describe different steps of fixed partial dentures constructions</p> <p>20. identify and describe components of removable partial denture</p> <p>21. Identify and describe steps of removable partial and complete dentures constructions</p> <p>Oral Medicine:</p> <p>21. recognize different effects of vitamin deficiency, and their impacts on the oral tissues.</p> <p>22. Explain different diseases affecting salivary glands, their etiology, clinical pictures, pathogenesis, and treatment.</p> <p>23. describe dental management of patients suffering from systemic diseases</p> <p>24. describe etiology, clinical picture, histopathology, prognosis, treatment, and dental implications of vesiculobullous diseases, white lesions, red lesions, pigmentations, exophetic lesions and ulceration affecting oral tissues.</p>
	<p>Periodontology:</p> <p>25. clinically recognize the signs and symptoms, as well as treatment of gingival and periodontal diseases.</p> <p>26. describe technique of</p>

	<p>instrumentation, scaling, and root planning.</p> <p>27. describe methods of periodontal charting.</p> <p>28- monitor the outcome of non-surgical periodontal therapy.</p> <p>29- Recognize different periodontal surgical procedures with emphasis on limitation of general dentist practice.</p>
<p>B. intellectual skills: By the end of the training, the student will be able to :</p>	<p>Pediatric Dentistry:</p> <ol style="list-style-type: none"> 1. demonstrate the basic morphological differences in cavity preparation in clinical procedures for children 2. distinguish the indications for crown preparation and pulp therapy in primary teeth 3. use collected data to evaluate, diagnose and plan treatment for the child patient 4. rating of the child's behavior in the dental office 5. demonstrate dental soft and hard tissue problems of primary and young permanent teeth <p>Dental Public Health:</p> <ol style="list-style-type: none"> 6. analyze the most prominent risk factors affecting the spread of a certain dental health problem including behavioral and social factors. 7. design educational messages for different population groups. 8. differentiate suitable preventive measures for various risk groups. <p>Oral and Maxillofacial Surgery:</p>

9. assess factors leading to complications in local anesthesia, extraction of teeth, and other surgical problems.

10. assess factors leading to facial trauma, spreading of infection and other emergencies

11. assess pathological conditions of both hard and soft oral tissues

Conservative Dentistry:

12. Interpret diagnostic information and findings for an organized treatment plan for patients in need for restorative dental care (problem-oriented treatment plan).

13. assess pulpal and gingival responses to cavity preparation and restorative materials

Endodontics:

14. Interpret diagnostic findings for treatment of pulpal and periapical disease.

15. Select the proper treatment options for emergency cases.

Prosthetic Dentistry:

16. correlate the basic features of complete denture design with the existing oral anatomical landmarks and analyze the factors leading to complete denture failure from the technical point of view

17. design suitable removable partial denture based on existing intra oral conditions and principles of design

18. design suitable Fixed partial denture based on existing intra oral conditions(single, 3 units and simple veneers cases).

Oral Medicine:

19. relate information obtained from the patient history to chief complaints

20. formulate diagnosis, prognosis and treatment planning for different oral and dental diseases based on normal clinical findings and abnormal deviations present.

21. assess treatment options to be done by the general dentist and those that need referral and consultation.

22. interpret signs and symptoms and physical findings in terms of their anatomical, pathological and functional diagnostic significances

23. relate the obtained clinical and investigational data base with the evidence- based knowledge and skill of deductive reasoning to be proficient in clinical problem solving.

24- formulate differential diagnosis for various lesions in relation to radiographical and clinical features

Periodontology:

25. differentiate between different gingival and periodontal diseases.

26. formulate periodontal diagnosis, prognosis and treatment plan for different periodontal conditions.

C. Professional and practical skills:
By the end of the training, the student will be able to :

Pediatric Dentistry:

1. apply appropriate behavior management techniques with different types of children
2. perform the general principles of cavity and stainless-steel crown preparations and restorations on primary teeth
3. treat pulpal problems in primary and young permanent teeth.

Dental Public Health:

4. apply topical fluorides and pit and fissure sealants for young children and adults
5. deliver a suitable health education message for a target group

Oral surgery:

6. apply local anesthesia in different intra oral and extra oral locations
7. perform extractions for different types of teeth
8. assist in removing remaining roots fractured during exodontia and simple impacted teeth
9. perform the necessary procedures for controlling hemorrhage and CPR when needed
10. apply basic surgical techniques
11. perform the necessary procedures for controlling complications of oral surgery both
12. general (medical) and local (surgical) intraoperatively, and post-operatively

Conservative dentistry:

13. operate the dental chair in relation to

- correct posture of the clinician.
14. perform different techniques of moisture exclusion from the operative field in a clinical setting.
 15. detect caries activity, caries risk and caries lesion in a clinical setting.
 16. apply competitively amalgam, composite, and glass ionomer restorations.
 17. perform complex amalgam, anterior and posterior composite restorations with appropriate matrices and retainers.
- Endodontics:**
18. treat disease of pulpal and periapical tissues.
 19. provide vital pulp therapy for indicated cases.
 20. perform radiograph for proper endodontic treatment.
 21. perform emergency treatment for painful tooth in the form of: pulpotomy, pulpectomy, drainage through the tooth and supportive therapy as analgesics and antibiotics.
- Prosthetic Dentistry:**
22. fabricate maxillary and mandibular custom trays and record blocks, arrange maxillary and mandibular artificial teeth and process the complete dentures
 23. construct an acrylic removable partial denture
 24. construct an endocrown and a fiber post/core assembly
 25. make an appropriate impression of partially edentulous study cast
 26. construct a PFM/All ceramic fixed partial denture

Oral medicine:

27. apply a brief concise case examination in an informed oral medicine special consent.

28. practice a comprehensive extra oral and intra oral examination including head and neck, oral hard and soft tissues

29. interpret medical and dental history items relevant to the condition of the patient.

30. compose a prioritized list of tentative diagnosis, differential diagnosis and final diagnosis and treatment.

31. write drug prescription under supervisors confirmation.

32- Ask for laboratory analysis if needed

Periodontology:

33. document clinical findings in periodontal chart

34. practice a comprehensive periodontal examination

35. Interpret signs and symptoms and physical findings in terms of their anatomic, pathologic, and functional periodontal diagnostic significance.

36. Assess the risk for periodontal disease and have to manage risk factors.

37. Propose an individualized treatment plan for different periodontal conditions

38. manage different gingival and periodontal diseases within the limitation of general practitioner .

39. diagnose different oral gingival and periodontal diseases based on appropriate radiographs

D. General and transferable skills: By the end of the training, the student will be able to :

1. use information technology to retrieve scientific data.
2. recognize infection control policies
3. collaborate with peers in an efficient teamwork whether online through Microsoft teams or face to face
4. behave ethically with senior staff, colleagues, and patients
- 5- deal with time management.

Endodontic Department

Lectures:

Registration of the attended lectures scheduled by the department in the month of rotation.

Date	Lecture Subject	Lecturer's Name

Research & advanced professional skills development:

Registration of scientific activity of the intern through the round.

Date	Activity type	Topic name	Supervisor Signature
	<input type="checkbox"/> Research methodology		
	<input type="checkbox"/> Mini conferences		
	<input type="checkbox"/> Seminars		
	<input type="checkbox"/> Scientific days		
	<input type="checkbox"/> Case presentation		
	<input type="checkbox"/> Journal club		
	<input type="checkbox"/> Work shops		
	<input type="checkbox"/> Self-Study		

Clinical Skills Development:

Comprehensive Care Clinic (CCC) through the rotation time in the department. All the case presentation details should be kept in the work sheets folder signed from the clinical supervisors.

Treatment performed	No. of cases	Supervisor Signature
Emergency Access		
Molar RCT		
Premolar RCT		
Anterior RCT		
Retreatment		
Single visit RCT		
Others		

Head of department signature

No.	Date	Procedure performed					Comments
		Access	Mechanical Preparation	Master cone	Obturation	Final Restoration	
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Intern's Quality Evaluation

Kindly assess the intern according to following items by grading appropriately (select one):

I. Clinical performance:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Quality and accuracy of work					
Time management					
Completeness of the ordered tasks					
Initiative and self-motivation					
Reliability and dependability					
Technical skills					
Patient communication					
Infection control rules application					
Proper documentation					
Proper treatment plan sequencing					

II. Attitude and punctuality:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Attitude toward the members of the dental team					
Professional ethics and proper attire					
Willingness to ask for and use guidance					
Showing openness to constructive criticism					
Punctuality in arrival and starts clinic on time					

III. Scientific activity:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Ability to work in a team					
Knowledge of subject					
Organization and structure of presentation					
Level of clarity and appropriate body language					
Methods /Aids used in the presentation					
Ability to answer questions and respond to suggestions					

Supervisor's Comments	1- 2- 3-
Intern' Signature	

Head of department signature _____

Pediatric Dentistry Department

Lectures:

Registration of the attended lectures scheduled by the department in the month of rotation.

Date	Lecture Subject	Lecturer's Name

Research & advanced professional skills development:

Registration of scientific activity of the intern through the round.

Date	Activity type	Topic name	Supervisor Signature
	<input type="checkbox"/> Research methodology		
	<input type="checkbox"/> Mini conferences		
	<input type="checkbox"/> Seminars		
	<input type="checkbox"/> Self-study		
	<input type="checkbox"/> Case presentation		
	<input type="checkbox"/> Journal club		
	<input type="checkbox"/> Work shops		
	<input type="checkbox"/> Other activity		

Clinical Skills Development:

All the case presentation details should be kept in the work sheets folder signed from the clinical supervisors.

Treatment performed	No. of cases	Supervisor Signature
Class II		
Pulpotomy		
Stainless steel crowns		
Space maintainer		
Ellis class II anterior		
Ellis class III endo		
Extraction		

Head of department signature

No.	Date	Procedure performed	Supervisor Signature
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Intern's Quality Evaluation

Kindly assess the intern according to following items by grading appropriately (select one):

I. Clinical performance:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Quality and accuracy of work					
Time management					
Completeness of the ordered tasks					
Initiative and self-motivation					
Reliability and dependability					
Technical skills					
Patient communication					
Infection control rules application					
Proper documentation					
Proper treatment plan sequencing					

II. Attitude and punctuality:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Attitude toward the members of the dental team					
Professional ethics and proper attire					
Willingness to ask for and use guidance					
Showing openness to constructive criticism					
Punctuality in arrival and starts clinic on time					

III. Scientific activity:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Ability to work in a team					
Knowledge of subject					
Organization and structure of presentation					
Level of clarity and appropriate body language					
Methods /Aids used in the presentation					
Ability to answer questions and respond to suggestions					

Supervisor's Comments	1- 2- 3-
Intern' Signature	

Head of department signature _____

Oral and Maxillofacial Surgery /Radiology Departments

Lectures:

Registration of the attended lectures scheduled by the department in the month of rotation.

Date	Lecture Subject	Lecturer's Name

Research & advanced professional skills development:

Registration of scientific activity of the intern through the round.

Date	Activity type	Topic name	Supervisor Signature
	<input type="checkbox"/> Research methodology		
	<input type="checkbox"/> Mini conferences		
	<input type="checkbox"/> Seminars		
	<input type="checkbox"/> Self-study		
	<input type="checkbox"/> Case presentation		
	<input type="checkbox"/> Journal club		
	<input type="checkbox"/> Work shops		
	<input type="checkbox"/> Other activity		

Clinical Skills Development:

All the case presentation details should be kept in the work sheets folder signed from the clinical supervisors.

Treatment performed	No. of cases	Treatment performed	No. of cases	Supervisor Signature
Simple Extraction		Soft Tissue Management		
Surgical Extraction		Oral Pathology		
Post-op Complication Management		Oroantral Comunication		
Impaction		TMD Management		
Infection Case Management		Dental Implants		
Preprosthetic Surgery		Others		

- Radiology

Type of Radiograph	No. of cases	Supervisor Signature

Head of department signature

Head of department signature

No.	Date	Procedure performed	Supervisor Signature
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Intern's Quality Evaluation

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I. Clinical performance:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Quality and accuracy of work					
Time management					
Completeness of the ordered tasks					
Initiative and self-motivation					
Reliability and dependability					
Technical skills					
Patient communication					
Infection control rules application					
Proper documentation					
Proper treatment plan sequencing					

II. Attitude and punctuality:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Attitude toward the members of the dental team					
Professional ethics and proper attire					
Willingness to ask for and use guidance					
Showing openness to constructive criticism					
Punctuality in arrival and starts clinic on time					

III. Scientific activity:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Ability to work in a team					
Knowledge of subject					
Organization and structure of presentation					
Level of clarity and appropriate body language					
Methods /Aids used in the presentation					
Ability to answer questions and respond to suggestions					

Supervisor's Comments	1- 2- 3-
Intern' Signature	

Head of department signature _____ Head of department signature _____

Conservative Dentistry Department

Lectures:

Registration of the attended lectures scheduled by the department in the month of rotation.

Date	Lecture Subject	Lecturer's Name

Research & advanced professional skills development:

Registration of scientific activity of the intern through the round.

Date	Activity type	Topic name	Supervisor Signature
	<input type="checkbox"/> Research methodology		
	<input type="checkbox"/> Mini conferences		
	<input type="checkbox"/> Seminars		
	<input type="checkbox"/> Self-study		
	<input type="checkbox"/> Case presentation		
	<input type="checkbox"/> Journal club		
	<input type="checkbox"/> Work shops		
	<input type="checkbox"/> Other activity		

Clinical Skills Development:

All the case presentation details should be kept in the work sheets folder signed from the clinical supervisors.

Treatment performed	No. of cases	Supervisor Signature

Head of department signature

No.	Date	Procedure performed	Supervisor Signature
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Intern's Quality Evaluation

Kindly assess the intern according to following items by grading appropriately (select one):

I. Clinical performance:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Quality and accuracy of work					
Time management					
Completeness of the ordered tasks					
Initiative and self-motivation					
Reliability and dependability					
Technical skills					
Patient communication					
Infection control rules application					
Proper documentation					
Proper treatment plan sequencing					

II. Attitude and punctuality:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Attitude toward the members of the dental team					
Professional ethics and proper attire					
Willingness to ask for and use guidance					
Showing openness to constructive criticism					
Punctuality in arrival and starts clinic on time					

III. Scientific activity:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Ability to work in a team					
Knowledge of subject					
Organization and structure of presentation					
Level of clarity and appropriate body language					
Methods /Aids used in the presentation					
Ability to answer questions and respond to suggestions					

Supervisor's Comments	1- 2- 3-
Intern' Signature	

Head of department signature _____

Prosthodontics Department

Lectures:

Registration of the attended lectures scheduled by the department in the month of rotation.

Date	Lecture Subject	Lecturer's Name

Research & advanced professional skills development:

Registration of scientific activity of the intern through the round.

Date	Activity type	Topic name	Supervisor Signature
	<input type="checkbox"/> Research methodology		
	<input type="checkbox"/> Mini conferences		
	<input type="checkbox"/> Seminars		
	<input type="checkbox"/> Self-study		
	<input type="checkbox"/> Case presentation		
	<input type="checkbox"/> Journal club		
	<input type="checkbox"/> Work shops		
	<input type="checkbox"/> Other activity		

Clinical Skills Development:

All the case presentation details should be kept in the work sheets folder signed from the clinical supervisors.

- Fixed Prosthodontics

Treatment performed	No. of cases	Supervisor Signature

- Removable Prosthodontics

Treatment performed	No. of cases	Supervisor Signature

Head of department signature

Head of department signature

No.	Date	Procedure performed	Supervisor Signature
1			
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Intern's Quality Evaluation

Kindly assess the intern according to following items by grading appropriately (select one):

I. Clinical performance:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Quality and accuracy of work					
Time management					
Completeness of the ordered tasks					
Initiative and self-motivation					
Reliability and dependability					
Technical skills					
Patient communication					
Infection control rules application					
Proper documentation					
Proper treatment plan sequencing					

II. Attitude and punctuality:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Attitude toward the members of the dental team					
Professional ethics and proper attire					
Willingness to ask for and use guidance					
Showing openness to constructive criticism					
Punctuality in arrival and starts clinic on time					

III. Scientific activity:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Ability to work in a team					
Knowledge of subject					
Organization and structure of presentation					
Level of clarity and appropriate body language					
Methods /Aids used in the presentation					
Ability to answer questions and respond to suggestions					

Supervisor's Comments	1- 2- 3-
Intern' Signature	

Head of department signature

Head of department signature

Diagnosis, Periodontology

Lectures:

Registration of the attended lectures scheduled by the department in the month of rotation.

Date	Lecture Subject	Lecturer's Name

Research & advanced professional skills development:

Registration of scientific activity of the intern through the round.

Date	Activity type	Topic name	Supervisor Signature
	<input type="checkbox"/> Research methodology		
	<input type="checkbox"/> Mini conferences		
	<input type="checkbox"/> Seminars		
	<input type="checkbox"/> Self-study		
	<input type="checkbox"/> Case presentation		
	<input type="checkbox"/> Journal club		
	<input type="checkbox"/> Work shops		
	<input type="checkbox"/> Other activity		

Clinical Skills Development:

All the case presentation details should be kept in the work sheets folder signed from the clinical supervisors.

- Diagnosis and Periodontology

Treatment performed	No. of cases	Supervisor Signature

Head of department signature _____

No.	Date	Procedure performed	Supervisor Signature
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2			
3			
4			
5			
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7			
8			
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Intern's Quality Evaluation

Kindly assess the intern according to following items by grading appropriately (select one):

I. Clinical performance:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Quality and accuracy of work					
Time management					
Completeness of the ordered tasks					
Initiative and self-motivation					
Reliability and dependability					
Technical skills					
Patient communication					
Infection control rules application					
Proper documentation					
Proper treatment plan sequencing					

II. Attitude and punctuality:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Attitude toward the members of the dental team					
Professional ethics and proper attire					
Willingness to ask for and use guidance					
Showing openness to constructive criticism					
Punctuality in arrival and starts clinic on time					

III. Scientific activity:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Ability to work in a team					
Knowledge of subject					
Organization and structure of presentation					
Level of clarity and appropriate body language					
Methods /Aids used in the presentation					
Ability to answer questions and respond to suggestions					

Supervisor's Comments	1- 2- 3-
Intern' Signature	

Head of department signature

Endodontic Department

Lectures:

Registration of the attended lectures scheduled by the department in the month of rotation.

Date	Lecture Subject	Lecturer's Name

Research & advanced professional skills development:

Registration of scientific activity of the intern through the round.

Date	Activity type	Topic name	Supervisor Signature
	<input type="checkbox"/> Research methodology		
	<input type="checkbox"/> Mini conferences		
	<input type="checkbox"/> Seminars		
	<input type="checkbox"/> Scientific days		
	<input type="checkbox"/> Case presentation		
	<input type="checkbox"/> Journal club		
	<input type="checkbox"/> Work shops		
	<input type="checkbox"/> Self-Study		

Clinical Skills Development:

Comprehensive Care Clinic (CCC) through the rotation time in the department. All the case presentation details should be kept in the work sheets folder signed from the clinical supervisors.

Treatment performed	No. of cases	Supervisor Signature
Emergency Access		
Molar RCT		
Premolar RCT		
Anterior RCT		
Retreatment		
Single visit RCT		
Others		

Head of department signature

No.	Date	Procedure performed					Comments
		Access	Mechanical Preparation	Master cone	Obturation	Final Restoration	
1							
2							
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Intern's Quality Evaluation

Month: _____

Location: _____

Kindly assess the intern according to following items by grading appropriately (select one):

I. Clinical performance:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Quality and accuracy of work					
Time management					
Completeness of the ordered tasks					
Initiative and self-motivation					
Reliability and dependability					
Technical skills					
Patient communication					
Infection control rules application					
Proper documentation					
Proper treatment plan sequencing					

II. Attitude and punctuality:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Attitude toward the members of the dental team					
Professional ethics and proper attire					
Willingness to ask for and use guidance					
Showing openness to constructive criticism					
Punctuality in arrival and starts clinic on time					

III. Scientific activity:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Ability to work in a team					
Knowledge of subject					
Organization and structure of presentation					
Level of clarity and appropriate body language					
Methods /Aids used in the presentation					
Ability to answer questions and respond to suggestions					

Supervisor's Comments	1- 2- 3-
Intern' Signature	

Head of department signature _____

Pediatric Dentistry Department

Lectures:

Registration of the attended lectures scheduled by the department in the month of rotation.

Date	Lecture Subject	Lecturer's Name

Research & advanced professional skills development:

Registration of scientific activity of the intern through the round.

Date	Activity type	Topic name	Supervisor Signature
	<input type="checkbox"/> Research methodology		
	<input type="checkbox"/> Mini conferences		
	<input type="checkbox"/> Seminars		
	<input type="checkbox"/> Self-study		
	<input type="checkbox"/> Case presentation		
	<input type="checkbox"/> Journal club		
	<input type="checkbox"/> Work shops		
	<input type="checkbox"/> Other activity		

Clinical Skills Development:

All the case presentation details should be kept in the work sheets folder signed from the clinical supervisors.

Treatment performed	No. of cases	Supervisor Signature
Class II		
Pulpotomy		
Stainless steel crowns		
Space maintainer		
Ellis class II anterior		
Ellis class III endo		
Extraction		

Head of department signature

No.	Date	Procedure performed	Supervisor Signature
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Intern's Quality Evaluation

Month: _____

Location: _____

Kindly assess the intern according to following items by grading appropriately (select one):

I. Clinical performance:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Quality and accuracy of work					
Time management					
Completeness of the ordered tasks					
Initiative and self-motivation					
Reliability and dependability					
Technical skills					
Patient communication					
Infection control rules application					
Proper documentation					
Proper treatment plan sequencing					

II. Attitude and punctuality:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Attitude toward the members of the dental team					
Professional ethics and proper attire					
Willingness to ask for and use guidance					
Showing openness to constructive criticism					
Punctuality in arrival and starts clinic on time					

III. Scientific activity:

Item to be assessed	0 points Not Accepted	1 point Accepted	2 points Good	3 points V. Good	5 points Excellent
Ability to work in a team					
Knowledge of subject					
Organization and structure of presentation					
Level of clarity and appropriate body language					
Methods /Aids used in the presentation					
Ability to answer questions and respond to suggestions					

Supervisor's Comments	1- 2- 3-
Intern' Signature	

Head of department signature _____

Oral & Maxillofacial Surgery/ Radiology Department

Lectures:

Registration of the attended lectures scheduled by the department in the month of rotation.

Date	Lecture Subject	Lecturer's Name

Research & advanced professional skills development:

Registration of scientific activity of the intern through the round.

Date	Activity type	Topic name	Supervisor Signature
	<input type="checkbox"/> Research methodology		
	<input type="checkbox"/> Mini conferences		
	<input type="checkbox"/> Seminars		
	<input type="checkbox"/> Self-study		
	<input type="checkbox"/> Case presentation		
	<input type="checkbox"/> Journal club		
	<input type="checkbox"/> Work shops		
	<input type="checkbox"/> Other activity		

Clinical Skills Development:

All the case presentation details should be kept in the work sheets folder signed from the clinical supervisors.

Treatment performed	No. of cases	Treatment performed	No. of cases	Supervisor Signature
Simple Extraction		Soft Tissue Management		
Surgical Extraction		Oral Pathology		
Post-op Complication Management		Oroantral Communication		
Impaction		TMD Management		
Infection Case Management		Dental Implants		
Preprosthetic Surgery		Others		

- Radiology

Type of Radiograph	No. of cases	Supervisor Signature

Head of department signature

Head of department signature

No.	Date	Procedure performed	Supervisor Signature
1			
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Intern's Quality Evaluation

Month: _____

Location: _____

Kindly assess the intern according to following items by grading appropriately (select one):

I. Clinical performance:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Quality and accuracy of work					
Time management					
Completeness of the ordered tasks					
Initiative and self-motivation					
Reliability and dependability					
Technical skills					
Patient communication					
Infection control rules application					
Proper documentation					
Proper treatment plan sequencing					

II. Attitude and punctuality:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Attitude toward the members of the dental team					
Professional ethics and proper attire					
Willingness to ask for and use guidance					
Showing openness to constructive criticism					
Punctuality in arrival and starts clinic on time					

III. Scientific activity:

Item to be assessed	0 points Not Accepted	1 point Accepted	2 points Good	3 points V. Good	5 points Excellent
Ability to work in a team					
Knowledge of subject					
Organization and structure of presentation					
Level of clarity and appropriate body language					
Methods /Aids used in the presentation					
Ability to answer questions and respond to suggestions					

Supervisor's Comments	1- 2- 3-
Intern' Signature	

Head of department signature _____ Head of department signature _____

Conservative Dentistry Department

Lectures:

Registration of the attended lectures scheduled by the department in the month of rotation.

Date	Lecture Subject	Lecturer's Name

Research & advanced professional skills development:

Registration of scientific activity of the intern through the round.

Date	Activity type	Topic name	Supervisor Signature
	<input type="checkbox"/> Research methodology		
	<input type="checkbox"/> Mini conferences		
	<input type="checkbox"/> Seminars		
	<input type="checkbox"/> Self-study		
	<input type="checkbox"/> Case presentation		
	<input type="checkbox"/> Journal club		
	<input type="checkbox"/> Work shops		
	<input type="checkbox"/> Other activity		

Clinical Skills Development:

All the case presentation details should be kept in the work sheets folder signed from the clinical supervisors.

Treatment performed	No. of cases	Supervisor Signature

Head of department signature _____

No.	Date	Procedure performed	Supervisor Signature
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Intern's Quality Evaluation

Month: _____

Location: _____

Kindly assess the intern according to following items by grading appropriately (select one):

I. Clinical performance:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Quality and accuracy of work					
Time management					
Completeness of the ordered tasks					
Initiative and self-motivation					
Reliability and dependability					
Technical skills					
Patient communication					
Infection control rules application					
Proper documentation					
Proper treatment plan sequencing					

II. Attitude and punctuality:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Attitude toward the members of the dental team					
Professional ethics and proper attire					
Willingness to ask for and use guidance					
Showing openness to constructive criticism					
Punctuality in arrival and starts clinic on time					

III. Scientific activity:

Item to be assessed	0 points Not Accepted	1 point Accepted	2 points Good	3 points V. Good	5 points Excellent
Ability to work in a team					
Knowledge of subject					
Organization and structure of presentation					
Level of clarity and appropriate body language					
Methods /Aids used in the presentation					
Ability to answer questions and respond to suggestions					

Supervisor's Comments	1- 2- 3-
Intern' Signature	

Head of department signature _____

Prosthodontics Department

Lectures:

Registration of the attended lectures scheduled by the department in the month of rotation.

Date	Lecture Subject	Lecturer's Name

Research & advanced professional skills development:

Registration of scientific activity of the intern through the round.

Date	Activity type	Topic name	Supervisor Signature
	<input type="checkbox"/> Research methodology		
	<input type="checkbox"/> Mini conferences		
	<input type="checkbox"/> Seminars		
	<input type="checkbox"/> Self-study		
	<input type="checkbox"/> Case presentation		
	<input type="checkbox"/> Journal club		
	<input type="checkbox"/> Work shops		
	<input type="checkbox"/> Other activity		

Clinical Skills Development:

All the case presentation details should be kept in the work sheets folder signed from the clinical supervisors.

- Fixed Prosthodontics

Treatment performed	No. of cases	Supervisor Signature

- Removable Prosthodontics

Treatment performed	No. of cases	Supervisor Signature

Head of department signature

Head of department signature

No.	Date	Procedure performed	Supervisor Signature
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Intern's Quality Evaluation

Month: _____

Location: _____

Kindly assess the intern according to following items by grading appropriately (select one):

I. Clinical performance:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Quality and accuracy of work					
Time management					
Completeness of the ordered tasks					
Initiative and self-motivation					
Reliability and dependability					
Technical skills					
Patient communication					
Infection control rules application					
Proper documentation					
Proper treatment plan sequencing					

II. Attitude and punctuality:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Attitude toward the members of the dental team					
Professional ethics and proper attire					
Willingness to ask for and use guidance					
Showing openness to constructive criticism					
Punctuality in arrival and starts clinic on time					

III. Scientific activity:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Ability to work in a team					
Knowledge of subject					
Organization and structure of presentation					
Level of clarity and appropriate body language					
Methods /Aids used in the presentation					
Ability to answer questions and respond to suggestions					

Supervisor's Comments	1- 2- 3-
Intern' Signature	

Head of department signature _____ Head of department signature _____

Diagnosis, Periodontology Department

Lectures:

Registration of the attended lectures scheduled by the department in the month of rotation.

Date	Lecture Subject	Lecturer's Name

Research & advanced professional skills development:

Registration of scientific activity of the intern through the round.

Date	Activity type	Topic name	Supervisor Signature
	<input type="checkbox"/> Research methodology		
	<input type="checkbox"/> Mini conferences		
	<input type="checkbox"/> Seminars		
	<input type="checkbox"/> Self-study		
	<input type="checkbox"/> Case presentation		
	<input type="checkbox"/> Journal club		
	<input type="checkbox"/> Work shops		
	<input type="checkbox"/> Other activity		

Clinical Skills Development:

All the case presentation details should be kept in the work sheets folder signed from the clinical supervisors.

- Diagnosis and Periodontology

Treatment performed	No. of cases	Supervisor Signature

Head of department Signature: _____

No.	Date	Procedure performed	Supervisor Signature
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Intern's Quality Evaluation

Month: _____

Location: _____

Kindly assess the intern according to following items by grading appropriately (select one):

I. Clinical performance:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Quality and accuracy of work					
Time management					
Completeness of the ordered tasks					
Initiative and self-motivation					
Reliability and dependability					
Technical skills					
Patient communication					
Infection control rules application					
Proper documentation					
Proper treatment plan sequencing					

II. Attitude and punctuality:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Attitude toward the members of the dental team					
Professional ethics and proper attire					
Willingness to ask for and use guidance					
Showing openness to constructive criticism					
Punctuality in arrival and starts clinic on time					

III. Scientific activity:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Ability to work in a team					
Knowledge of subject					
Organization and structure of presentation					
Level of clarity and appropriate body language					
Methods /Aids used in the presentation					
Ability to answer questions and respond to suggestions					

Supervisor's Comments	1- 2- 3-
Intern' Signature	

Head of department signature _____

Full Mouth Rehabilitation Cases

Guidelines for Comprehensive Care Clinic:

- The intern should complete three advanced full mouth rehabilitation cases. Each case is assigned and supervised by one of the three departments (Fixed prosthodontics department, Removable prosthodontics department or Conservative department) so that each department supervise one case for each intern.
- Cases should be of a high level of complexity urging the need for multidisciplinary treatment plan.
- Every case must be fully documented. The documentation must include accurate dental records, relevant medical records, detailed treatment records, full mouth radiographs or OPG, diagnostic casts and where possible clinical photographs.
- A sequential treatment plan must be approved by the instructor in charge and this must be documented in the file of the patient and the logbook.
- The Intern must be ready and able to present and/ or discuss the treatment plan of the assigned case(s).
- Information on assigned clinical case to be presented must include the following:
 - ✓ Patients profile (name, gender, etc.)
 - ✓ Chief complaint
 - ✓ Medical and Dental history
 - ✓ Extra and Intra-oral clinical examination
 - ✓ Investigative reports - Xrays, laboratory reports etc., diagnostic cast.
 - ✓ Clinical Diagnosis
 - ✓ Objective of/and Proposed Treatment Plan.
 - ✓ Nutrition /Diet analysis and oral hygiene protocol
- Documentation, with digital camera of clinical procedures is required (Pre-treatment, during treatment and Post treatment photographs)
- Each completed case must be fully documented. The appropriate forms must be duly signed by the faculty supervisor(s).

Full Mouth Rehabilitation

Case No. 1

Supervising Department: _____

I. Personal Data & History:

Name: _____ Gender: _____ D.O.B.: _____

Tele. No.: _____ Occupation: _____ File No.: _____

Chief Complaint (C/C):

History of (C/C):

Past Medical Hx.:

Past Dental Hx.:

II. Clinical Examination:

A. Extraoral Exam: Face: _____

TMJ: _____

Others: _____

B. Intraoral Exam:

Soft tissue exam:

Hard tissue exam:

R	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	L
LR																	LL

Periodontal Examination:

III. Radiographic Examination:

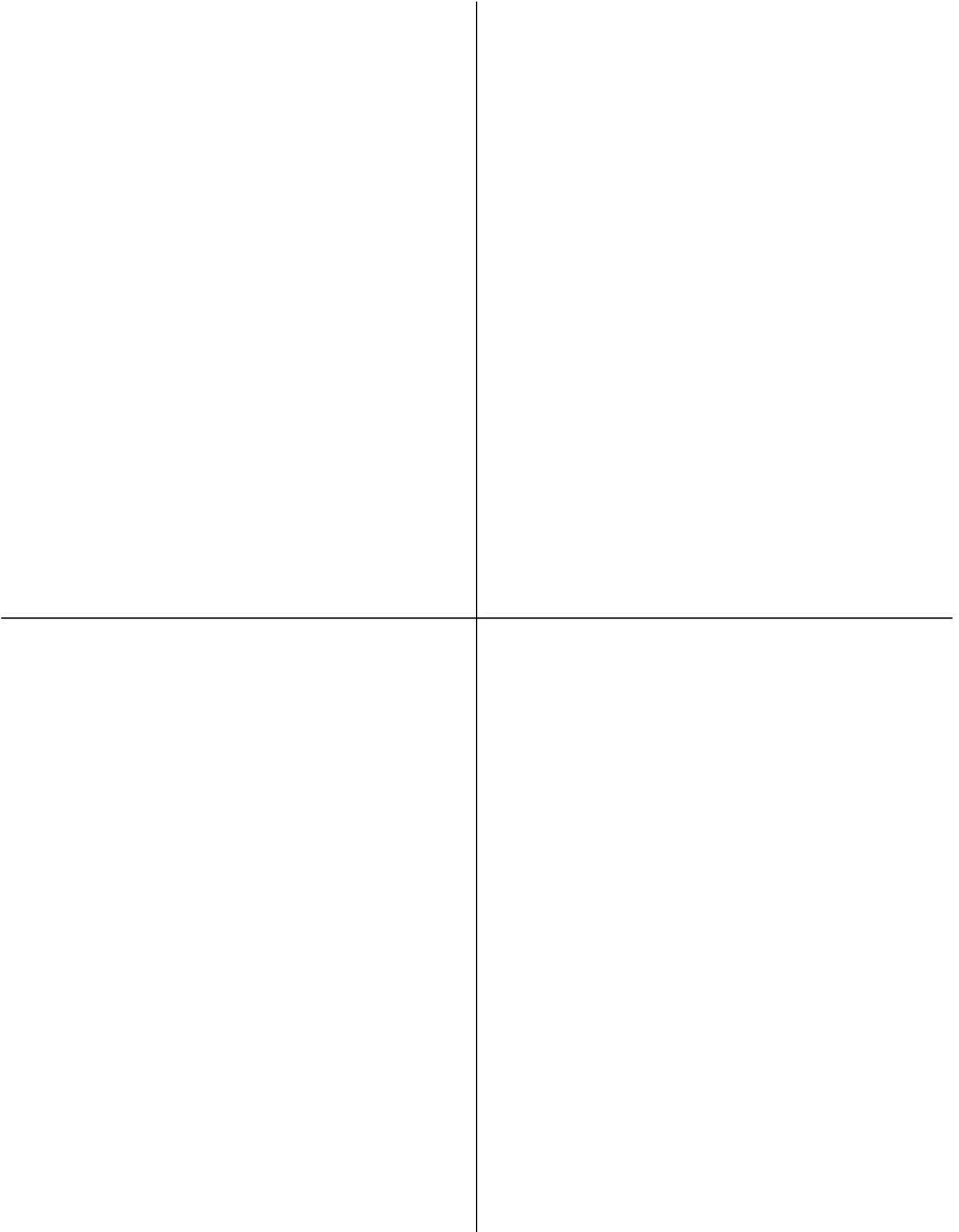
Radiographs types: _____

Findings:

IV. Special investigations:

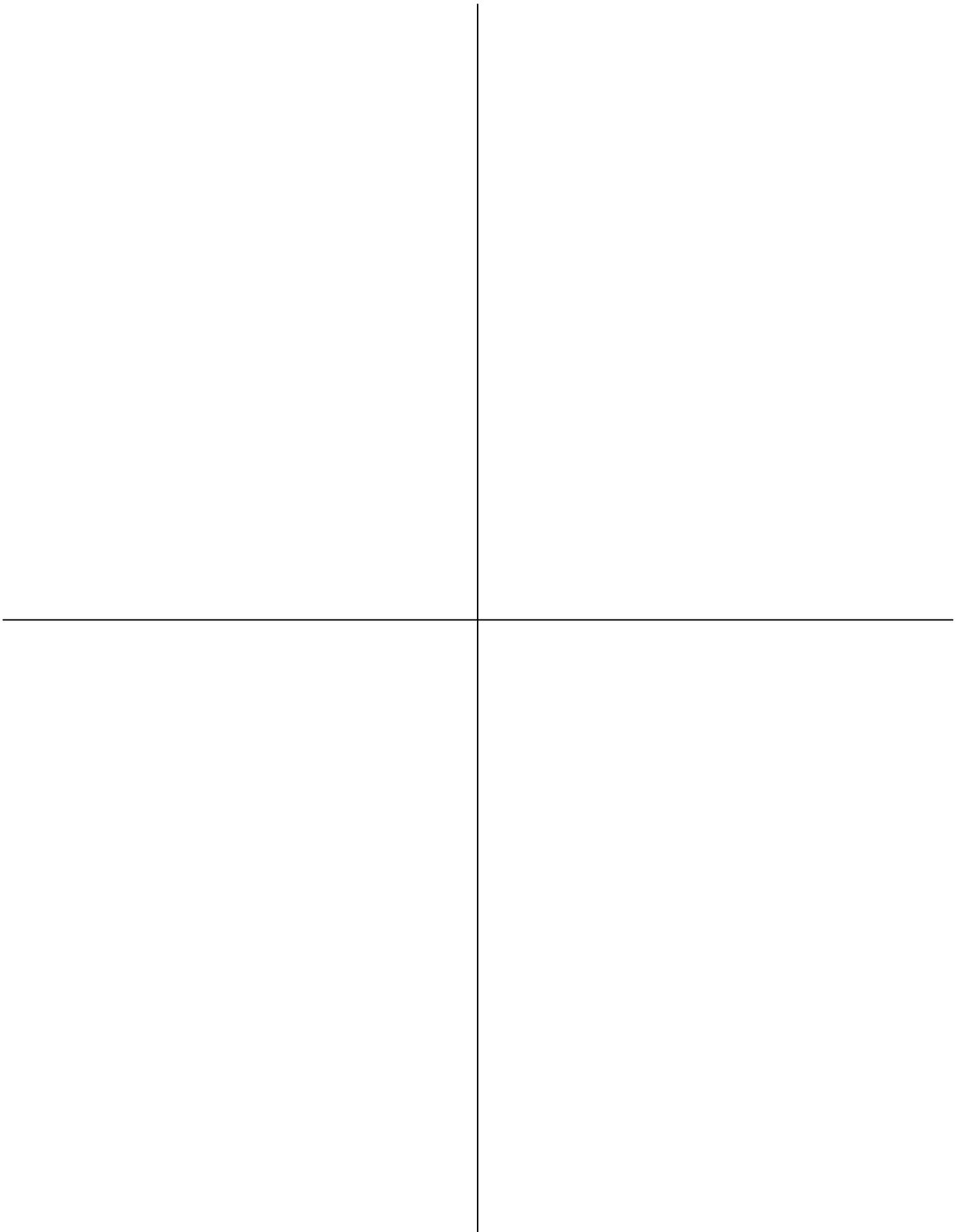
Case Photographs

Pre-operative



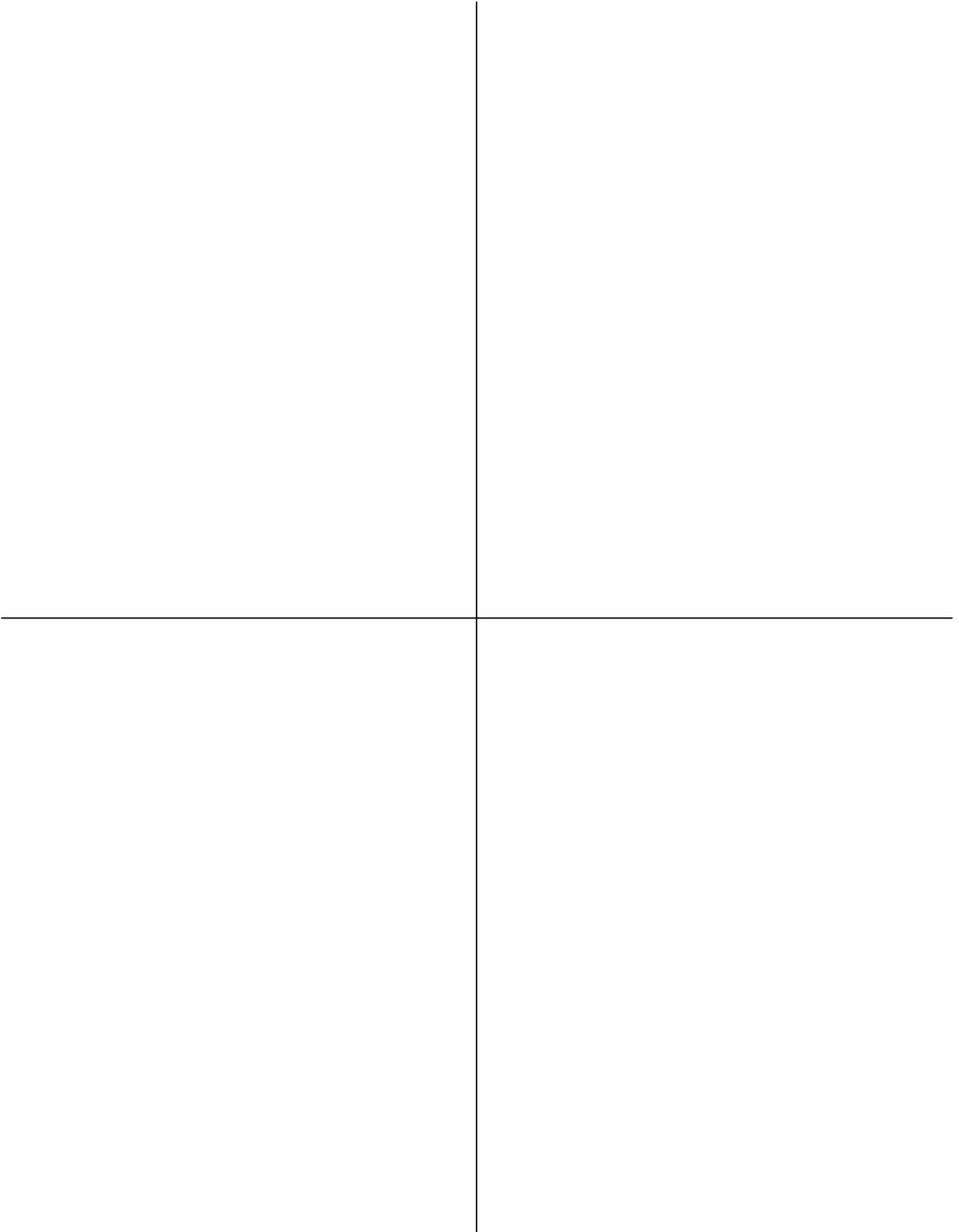
Case Photographs

Clinical steps



Case Photographs

Post-operative



Case Assessment

I. Assessment of the clinical supervisor: _____

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Quality and accuracy of work					
Time management					
Completeness of the ordered tasks					
Initiative and self-motivation					
Reliability and dependability					
Technical skills					
Patient communication					
Infection control rules application					
Professionalism & Ethical behavior					
Proper treatment plan sequencing					

Clinical supervisor: _____

Finishing date: _____

II. Assessment of the faculty committee:

A. Assessment of case presentation:

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Competition of the case					
Integration of evidence-based dentistry					
Self-Evaluation					
Presentation skills					
Discussion and ability to answer					

B. Assessment of Logbook data:

Item to be assessed	0 points Not Accepted	2 points Accepted	3 points Good	4 points V. Good	5 points Excellent
Complete treatment plan execution steps					
Quality of Photographs and Radiographs					
Proper data collection and writing					

Supervisor's Comments	1- 2- 3-
Intern' Signature	

Committee members Signatures: _____

Full Mouth Rehabilitation

Case No. 2

Supervising Department: _____

I. Personal Data & History:

Name: _____ Gender: _____ D.O.B.: _____

Tele. No.: _____ Occupation: _____ File No.: _____

Chief Complaint (C/C):

History of (C/C):

Past Medical Hx.:

Past Dental Hx.:

II. Clinical Examination:

A. Extraoral Exam: Face: _____

TMJ: _____

Others: _____

B. Intraoral Exam:

Soft tissue exam:

Hard tissue exam:

UR																	UL
R	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	L
LR																	LL

Periodontal Examination:

III. Radiographic Examination:

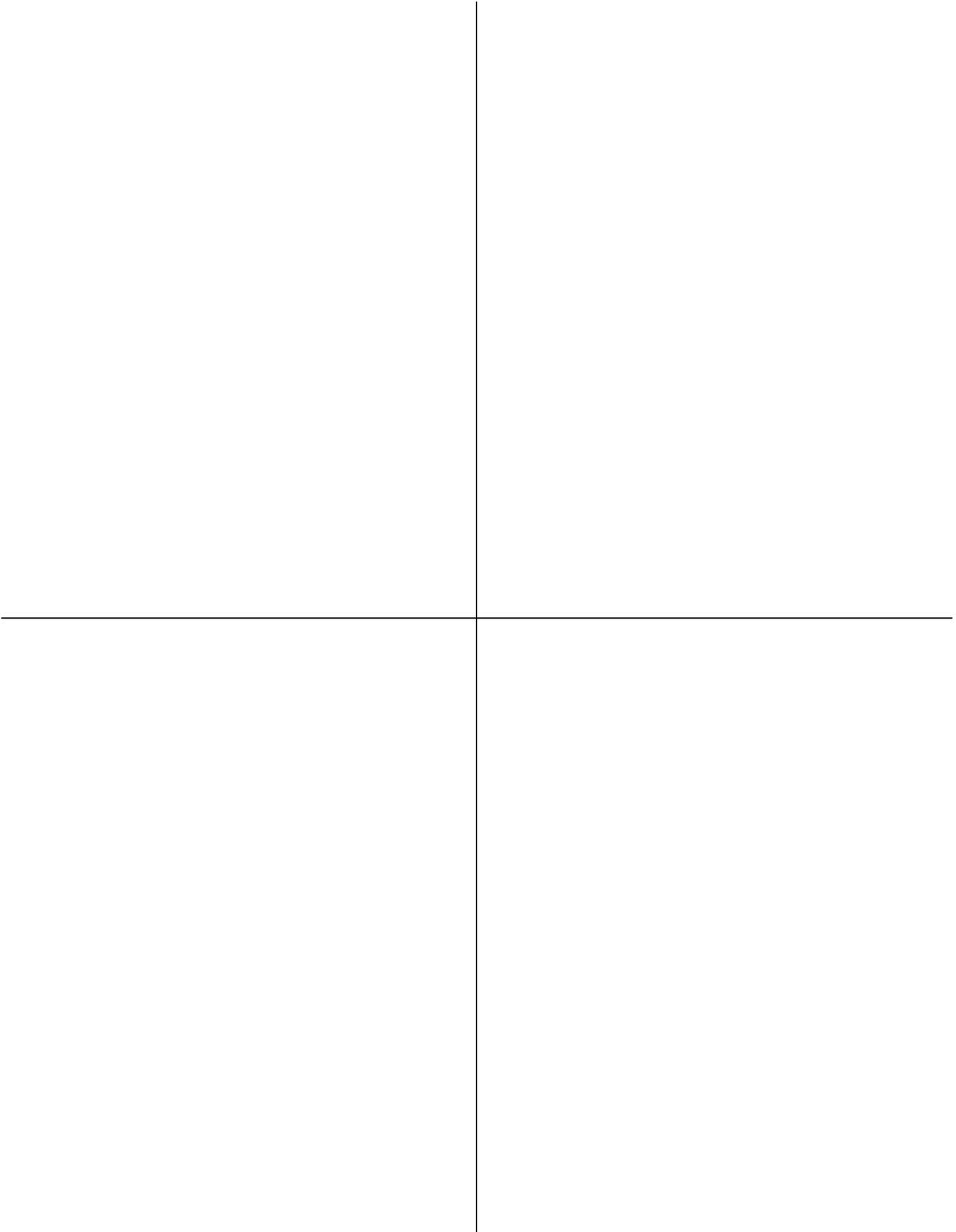
Radiographs types: _____

Findings:

IV. Special investigations:

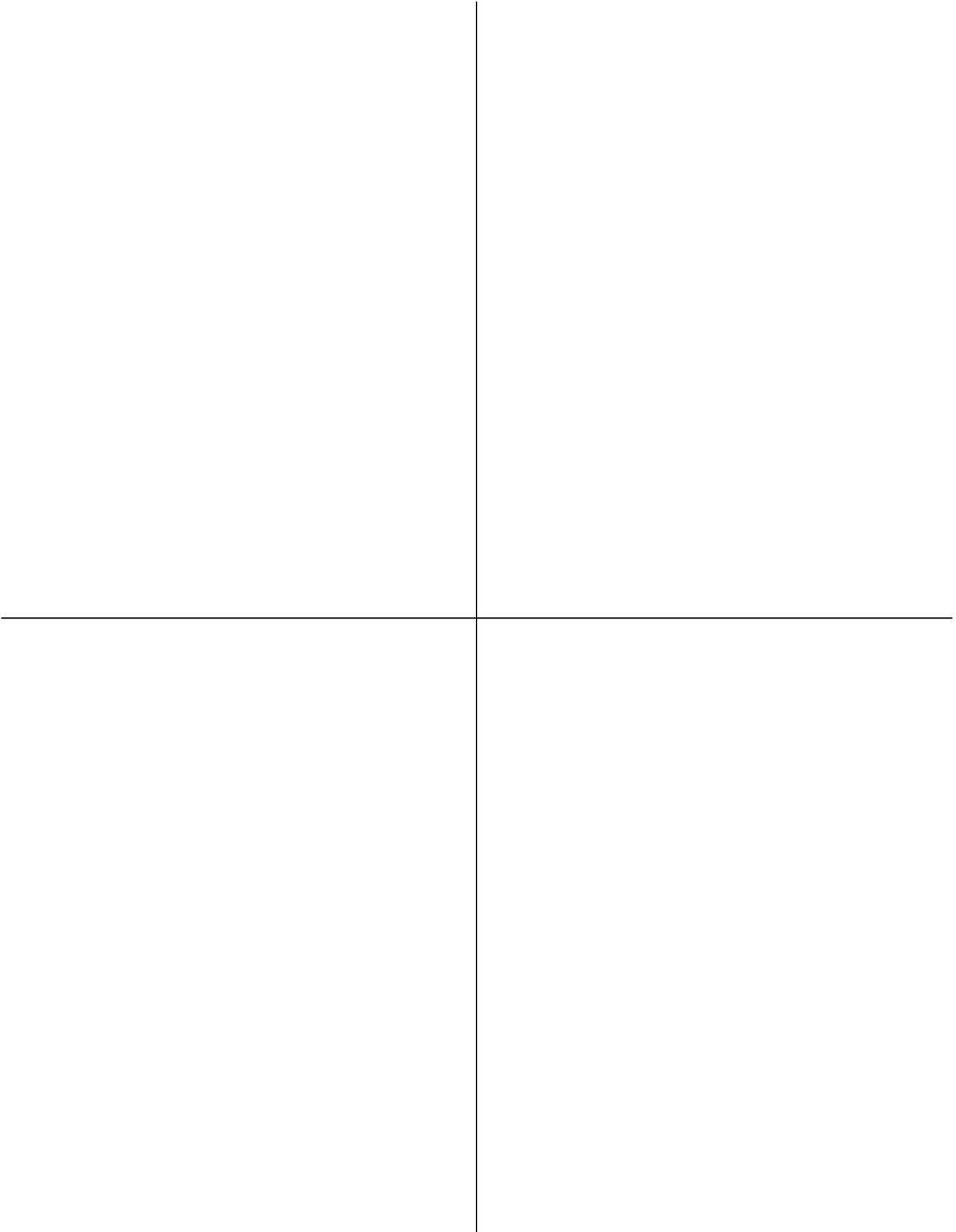
Case Photographs

Pre-operative



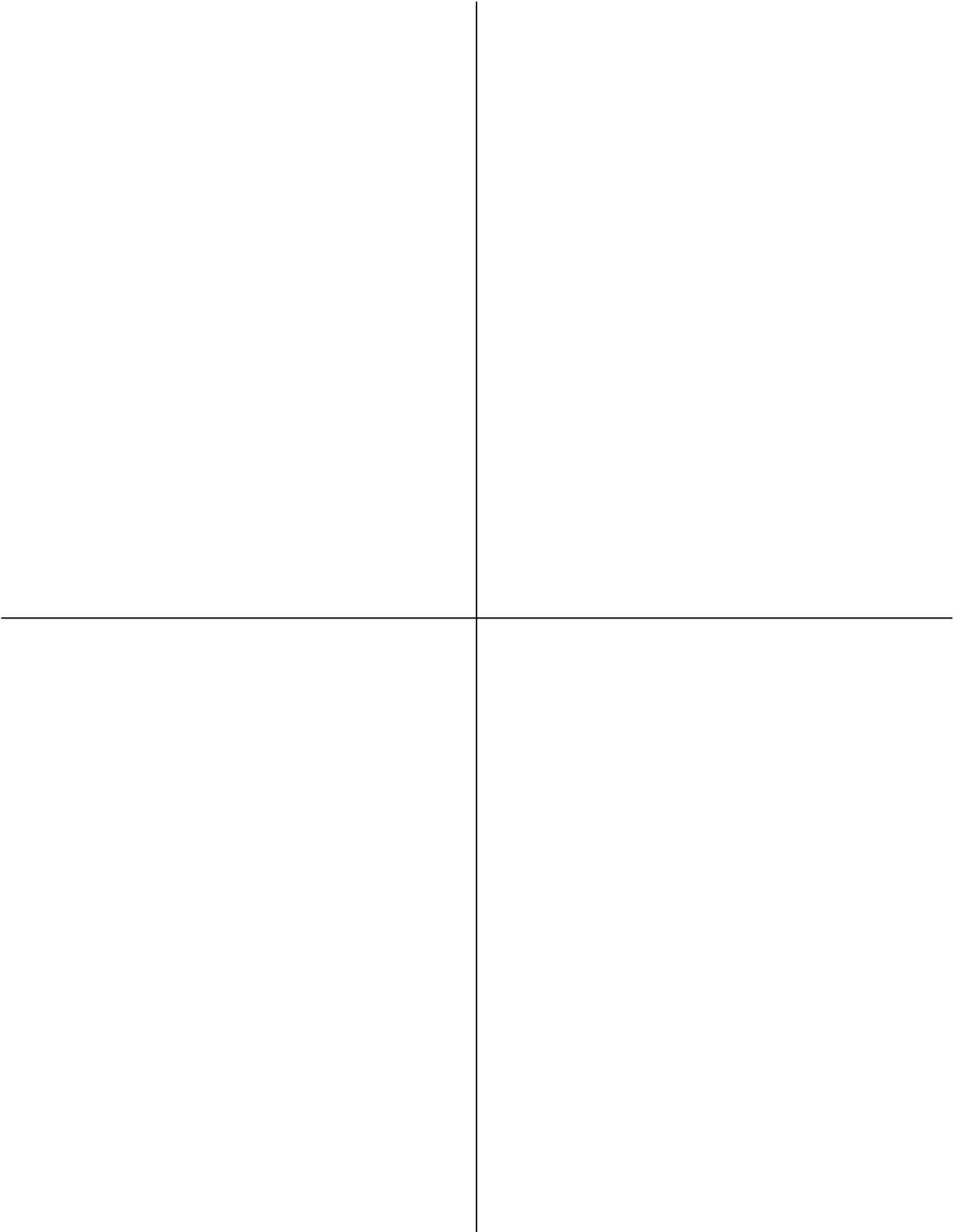
Case Photographs

Clinical steps



Case Photographs

Post-operative



Case Assessment

I. Assessment of the clinical supervisor: _____

Item to be assessed	Not Accepted	Accepted	Good	V. Good	Excellent
Quality and accuracy of work					
Time management					
Completeness of the ordered tasks					
Initiative and self-motivation					
Reliability and dependability					
Technical skills					
Patient communication					
Infection control rules application					
Professionalism & Ethical behavior					
Proper treatment plan sequencing					

Clinical supervisor: _____

Finishing date: _____

II. Assessment of the faculty committee:

A. Assessment of case presentation:

Item to be assessed	0 points	2 points	3 points	4 points	5 points
	Not Accepted	Accepted	Good	V. Good	Excellent
Competition of the case					
Integration of evidence-based dentistry					
Self-Evaluation					
Presentation skills					
Discussion and ability to answer					

B. Assessment of Logbook data:

Item to be assessed	0 points	2 points	3 points	4 points	5 points
	Not Accepted	Accepted	Good	V. Good	Excellent
Complete treatment plan execution steps					
Quality of Photographs and Radiographs					
Proper data collection and writing					

Supervisor's Comments	1- 2- 3-
Intern' Signature	

Committee members Signatures: _____

إدارة تدريب أطباء الإمتياز

القواعد والتعليمات العامة:

الانضمام للبرنامج التدريبي لأطباء الاسنان :

يبدأ البرنامج التدريبي لأطباء الاسنان في الاسبوع الاول من شهر نوفمبر وذلك لخريج كليه طب الفم و الأسنان جامعة الازهر الكنديه دور يونيو . كما يبدأ البرنامج التدريبي لأطباء الاسنان في الاسبوع الاول من شهر مايو وذلك لخريج كليه طب الفم و الأسنان جامعة الازهر الكنديه دور يناير .

مدة التدريب والاستمرار في البرنامج :

إن الزمن المحدد للبرنامج هو 12 شهرا - . لقد تم تصميم البرنامج ليعزز معرفة ومهارات أطباء الامتياز ك ممارسين عامين لمهنة طب الاسنان . وعليه فإن اللوائح والتوجيهات التالية تساعد المتقدمين لفهم البرنامج التدريبي لطب الأسنان :

- على طبيب الامتياز الالتزام بمتطلبات برنامج الامتياز
- إن نظام العمل هو دوام كامل طوال فترة البرنامج التدريبي. كما سيقوم طبيب الامتياز بكامل ممارسات طب الاسنان التي يتضمنها المنهج بالاضافة الى القيام بأعباء اخرى ذات صلة بالبرنامج يحددها مدير البرنامج .
- إن فترة التدريب متواصلة لا تنقطع لذا لا يسمح للمتدرب بطلب عطلة او انقطاع اضطراري تحت اي ظرف باستثناء ما يسمح به البرنامج .
- ستمدد الفترة التدريبية بعد انتهاء البرنامج للمتدرب نسبة الى المدة التي قام بالتغيب فيها عن البرنامج
- إن قبول او رفض الاعذار الطارئة يخضع تماما لتقدير مدير البرنامج التدريبي ان اقصى مدة للتغيب بسبب الاعذار الطارئة هي 10 ايام طوال مدة البرنامج. يجب على طبيب الامتياز ملء الاستمارة الخاصة وتسليمها لمدير البرنامج التدريبي قبل اسبوع من أخذ الأذن .
- الغياب بدون إذن او سبب مقنع يعرض صاحبه لإجراءات صارمة من قبل لجنة تدريب أطباء الإمتياز . ان التغيب عن محاضرة واحدة بدون اشعار يعتبر كغياب يوم كامل .
- على اطباء الامتياز حضور كل النشاطات التي تقرها لجنة تدريب أطباء الامتياز مثل الايام العلمية ومناقشة الحالات المرضية الهامة و ايضا مناقشات المجموعات وتقديم البحوث على طبيب الأمتياز حضور النشاطات المذكورة وعدم المغادرة قبل انتهائها .
- يمكن لطبيب الامتياز ان يقضي جزء من فترته التدريبية خارج كليه طب الفم و الأسنان جامعة الازهر الكنديه في الكليات الحكوميه. على ان لا تزيد فترة التدريب الخارجي عن ستة اشهر

السلوك في العيادة:

1-الحضور:

الالتزام بمواعيد العيادة اجباري، سيتم مراقبة الحضور اليومي مراقبة دقيقة على طبيب الامتياز
الالتزام بمواعيد العمل اضافة الى الالتزام بالقوانين واللوائح لكل مراكز التدريب. يسجل الحضور
اليومي مرتين صباحا ومساء بواسطة مشرف العيادة.

2 -مكافحة العدوى :

يجب تطبيق إجراءات مكافحة العدوى داخل العيادة تحت كل الظروف. أي انتهاك لبروتوكول مكافحة
العدوى سيواجه بعقوبة صارمة .

3 - الزي بالعيادة:

يلتزم اطباء الامتياز بزي العيادة اثناء ساعات العمل في كل مركز تدريب يمنع لبس الجينز والملابس
غير الرسمية في العيادات على طبيبات الامتياز تغطية الشعر بالكامل وعدم وضع العطور والمكياج
الكثير، يمنع طلاء الاظافر والكعب العالي .

4- اخلاقيات المهنة:

على طبيب الامتياز ان يكون محل ثقة واحترام المرضى .ينبغي للطبيب ان يجمع بين الدعم النفسي
والعلاج بالنسبة للمرضى .التعامل الحسن والتعاون والانسجام ينبغي ان يسود ويكون شعار الطاقم
الطبي بالعيادات .كما يشجع الطبيب على حسن استخدام الالات والمعدات والمواد الاستهلاكية و
التاكيد على العلاج ان يكون مجاني للمريض.

المرضى ذوي الحالات الحرجة والمرضى اللذين يعانون من امراض معدية يجب ان يتم علاجهم بما
يناسب حالتهم طبيا ووفق تخصص طب الاسنان .كما يجب ان تراعى اجراءات منع العدوى مهما تكن
حالة المريض الصحية .كما يجب على طبيب الاسنان ان لا يمتنع او يرفض علاج اي حالة مهما كان
المرض معديا لان هذا السلوك غير مقبول طبيا واخلاقيا .