

Grading System

4th Year Clinical Conservative Dentistry

»60% Requirements

»40% Final exam

Requirements (60%)

70%

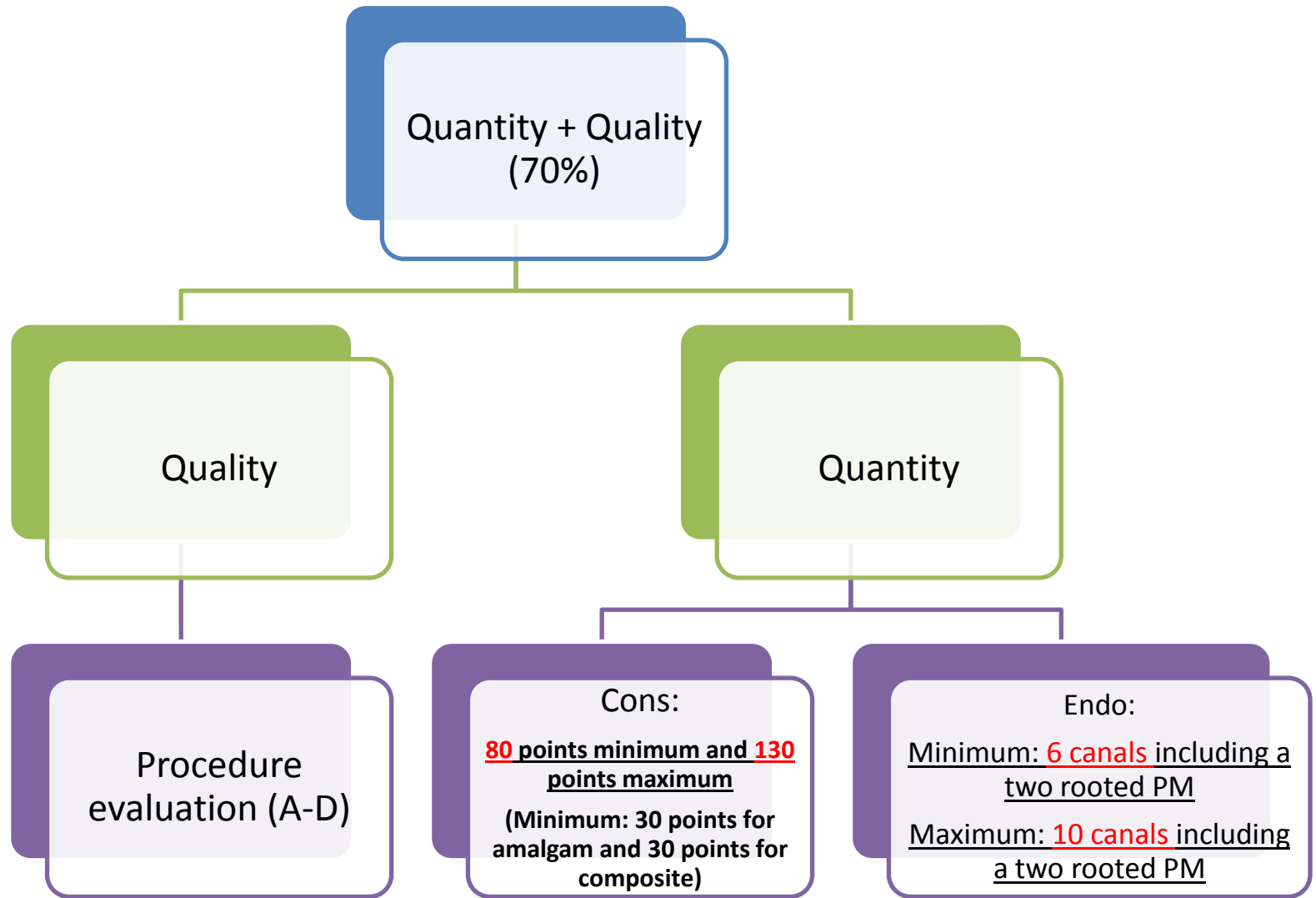
- Quantity + Quality

15%

- Patient Management

15%

- Competencies



Final grade will be: $\text{sum}(\text{procedure points} * \text{procedure evaluation})$

Point Based System

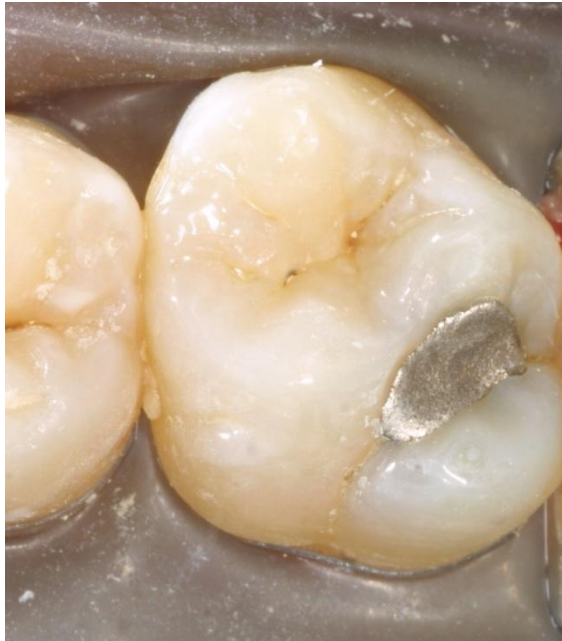
Procedure	Equivalent points
One surface amalgam	2
Two surface amalgam	3
Three surface amalgam	4
Complex amalgam involving cuspal coverage	5
One surface composite*	2
Two surface composite*	3
Three surface composite*	4
Four surface composite or composite veneer*	5
Prefabricated post or pins	2
Home bleaching (single case allowed)	5
Internal bleaching (single case allowed)	5
Microabrasion (single case allowed)	3
Extras (pits, class VI (incisal notch), enameloplasty and polishing)	1

****Composites that are restoring fractured teeth (non carious) take one point less than the number of points for composites restoring carious teeth.***

For example..

One surface restoration

- Class I on the occlusal surface with no extensions
- Class V
- A small class III



Two surface restoration

- Class II
- A big class III
- Class IV (involving one proximal surface)



Three surface restoration

- Class II^{MOB}, class II^{MOD}
- A big class IV involving 2 proximal surfaces



Four surface restoration

- Complex amalgam restoration involving cuspal coverage
- Composite veneer
- Complete tooth build up with composite (what usually requires auxiliary retentive features)



Quality assessment

The quality of the procedures delivered in each clinic will be evaluated as follows:

Grade	Description
A*	Outstanding: Task performed to the ideal level with NO assistance from the supervisor
A	Task performed to the competent level with minimal assistance from the supervisor
B	Task performed to the competent level with significant assistance
C	Mere pass
D	Failure

>> **An A* grade has to be justified; i.e, the supervisor has to write why did the student deserve an A* for the procedures. A* grades with no justification will not be counted!**

>> A "D" grade ONLY can be modified to a better grade in the following case: the procedure is reversible, and the student knew it is a failure and was not satisfied with the end result. In this case, the procedure is graded as "D" in the register with a note saying "REDO" next to it. Once the student repeats the procedure, the new grade can replace the old one.

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Patient management (15%)

- 15 points are granted for the student if he/she abides by certain professional and ethical necessities
- Categories to be evaluated:
 - Cross infection control
 - Time management
 - Dress code
 - Patient management and professionalism (adhering to appointments and treating patients with decency..)
- One point is deducted for each violation of the categories mentioned above

Cross infection control:

1. Adherence to clinic attire guidelines and personal protective equipment is mandatory.
2. All instruments used for patient care should be properly cleaned and sterilized.
3. Clean disposable sheets and wrapping should be used to cover the dental tray, chair handles, head rest, suction hose and bench top.
4. Contaminated items like gloves and instruments should always be left in the student's cubicle area during patient treatment. No contaminated items shall be at the dispensary area or other students' cubicles.
5. Students should avoid contaminating commonly perceived as "clean" items like; log books, history sheets, pens and personal items like bags and burses.
6. Thorough hand washing with soap should be performed before and after treating patients.
7. Items to be sent to a dental laboratory should be appropriately disinfected.
8. Students should dispose sharps in an appropriate manner. A one-handed "scoop" technique should be used to recap dental needles. All sharps should be disposed in the sharps containers distributed throughout the clinic area.
9. Students are required to clean and disinfect their dental chair and bench area after treating patients by the end of their assigned clinic time.

Dress code:

1. A clean clinic coat fully buttoned with a shirt or blouse must be worn during all patient contact activities
2. Garments worn under the clinic coat shall not extend below the coat sleeve or over the collar.
3. Avoid wearing clothing which is flammable (polyester).
4. Socks and hosiery along with clean footwear are required. Sandals, flip flops, open top and open toe shoes are unacceptable as well as any footwear with the potential for injury from penetrating objects.
5. Safety glasses with side shields and a facemask must be worn during all patient contact activities.
6. Hair or beard which may interfere with clinic procedures must be controlled or confined within a surgical cap or face mask.
7. If scrubs are worn in clinic, a clinic coat worn over the top is required for patient care.
8. Jeans, pants with holes in them, hoodies, shorts and warm-up suits are not acceptable clinic attire.
9. Hands should be free of rings or any jewelry that may compromise the barrier of the glove. Wrists should be free of watches and jewelry that cannot be protected by the clinic coat sleeve during clinical activities.
10. The Guidelines for Personal Hygiene and Grooming:
 - o Fingernails short, clean, smooth and free of colored or clear nail polish
 - o Guard against offensive body odors
 - o Guard against use of strong perfumes or colognes
 - o Hair shall be clean and neatly trimmed
 - o Mouth free of objectionable odor. Avoid food that has a lingering effect on your breath and might be unpleasant for patients while you are providing care.
 - o Scrupulous oral hygiene

Professionalism:

Dental professionals are expected to follow these standards:

1. Putting patients' interests first and acting to protect them.
2. Respecting patients' dignity and choices.
3. Protecting the confidentiality of patients' information.
4. Co-operating with other members of the dental team and other healthcare colleagues in the interest of patients.
5. Maintaining professional knowledge and competence.
6. Being trustworthy.
7. Obtaining informed consent from patients after discussing all treatment options and the validity and prognosis of each option.
8. Providing a timely treatment for patients. Patients' treatment plans should be completed in a timely manner. Adherence to given appointments is expected. No delays are excused.
9. The student should be respectful to their patients, faculty, staff and other students.

Student Conduct in the Clinical Area:

1. Behavior in clinics shall, at all times, be professionally oriented.
2. Avoid whistling, humming and gum chewing when treating patients.
3. Discretion and courtesy should be exercised when seeking faculty and staff assistance.
4. Students must not discuss patient information in public places.
5. Students should have their mobile telephones turned off or on "silent mode" during patient care.

3

Competencies 15%

- Certain procedures have to be performed during the course with an outstanding or competent evaluations (A*, A or B)
- If the evaluation was pass or unsatisfactory, the student has to repeat the procedure to get an A or B
- Students should inform the supervising faculty when a competency is to be performed
- Supervisors should evaluate the procedures according to specific criteria

Competencies

1	Simple amalgam restoration	13	Matrix band placement
2	Complex amalgam restoration	14	Evaluation of patient's mandibular movements and occlusion
3	Anterior composite	15	Single tooth isolation with rubber dam (RD)
4	Posterior composite	16	Access cavity for anterior teeth
5	Effective administration of LA (regional infiltration)	17	Access cavity to premolar teeth
6	Effective administration of LA (ID block)	18	Use of apex locator in working length determination
7	Multiple isolation with rubber dam	19	Use of radiographs in working length determination
8	Shade matching for restorations	20	Root canal obturation
9-10	Proper history taking, clinical exam and treatment plan (2 cases required, 2 points each)	21	Decision making and referrals (ENDO)
11	Glass ionomer filling	22	Decision making and referrals (CONS)
12	Taking and interpreting intraoral bitewings and periapicals	23	Four handed dentistry (assistant side)

Step by step guide for clinic procedures

- Get your patient from screening
- Perform a complete history taking and clinical examination, formulate a treatment plan for all new patients you see in the clinic
- Document all the information in the patient's file
- Discuss the case with your supervisor
- When an agreement has been reached about the treatment plan, ask your supervisor to sign the sheets you filled

Step by step guide for clinic procedures cont'd..

- Ask for a start on the procedure you want to do.
- Perform the regular steps of cavity preparation, lining or basing, and restoration. **You have to ask your supervisor's approval for every step.**
- Bring your log book to the supervisor. Write your name and tooth number on the evaluation sheet for the procedure you've done.
- The supervisor will sign it and give you feedback about your work.
- Fill the progress notes, sign it and get it signed by the supervisor.

Student name

Date:

One surface amalgam restoration

tooth#:

Major Faults: Student committing any of those and the procedure will be deemed
un satisfactory

Fault		Fault	
Pulp exposure		Presence of gross caries at final stage	
Irreversible loss of resistance/retention form		Gross occlusal discrepancy (gross over-carving/ under-carving)	

1- Cavity:

	Adequate	Inadequate/Inappropriate
Outline form		
Retention form		
Resistance form		
Removal of caries		
Cavity depth		

2- Lining:

	Adequate	Inadequate/Inappropriate
Coverage thickness		

3- Filling:

	Adequate	Inadequate/Inappropriate
Condensation		
Occlusal form/carving		
Waste management		

Final mark

A

B

C

D

A=Outstanding, B=Competent, C=Pass, D=Unsatisfactory

Student name

Date:

Two surface amalgam restoration

tooth#:

Major Faults: Student committing any of those and the procedure will be deemed
un satisfactory

Fault		Fault	
Pulp exposure		Presence of gross caries at final stage	
Irreversible loss of resistance/retention form		Gross occlusal discrepancy (gross over-carving/ under-carving)	
Gross overhang of the amalgam		Open proximal contact	

1- Cavity:

	Adequate	Inadequate/Inappropriate (0)
Outline form		
Retention/resistance form		
Removal of caries		
Cavity depth		

2- Lining

	Adequate (1)	Inadequate/Inappropriate (0)
Coverage thickness		

3- Filling:

	Adequate (1)	Inadequate/Inappropriate (0)
Condensation		
Occlusal form/carving		
Marginal ridge carving		
proximal contact		

Final mark

A

B

C

D

A=Outstanding, B=Competent, C=Pass, D=Unsatisfactory

Student name

Date:

One surface composite restoration

tooth#:

Major Faults: Student committing any of those and the procedure will be deemed un satisfactory

Fault		Fault	
Pulp exposure		Presence of gross caries at final stage	
Irreversible loss of resistance/retention form		Contamination with blood/saliva which prevented adequate bonding	
Gross overhang /roughness of composite			

1-

2- Cavity:

	Adequate	Inadequate/Inappropriate
Outline form		
Retention/resistance form		
Removal of caries		
Cavity depth		

3- Lining

	Adequate	Inadequate/Inappropriate
Coverage		
thickness		

4- Filling:

	Adequate	Inadequate/Inappropriate
Moisture control/bonding technique		
Morphology		
Colour match		
Finishing/polishing		

Final mark

A

B

C

D

A=Outstanding, B=Competent, C=Pass, D=Unsatisfactory

Student name

Date:

Two surface composite restoration

tooth#:

Major Faults: Student committing any of those and the procedure will be deemed un satisfactory

Fault		Fault	
Pulp exposure		Presence of gross caries at final stage	
Irreversible loss of resistance/retention form		Contamination with blood/saliva which prevented adequate bonding	
Gross overhang /roughness of composite		Open proximal contact	

1- Cavity:

	Adequate	Inadequate/Inappropriate
Outline form		
Retention/resistance form		
Removal of caries		
Cavity depth		

2- Lining

	Adequate	Inadequate/Inappropriate
Coverage		
thickness		

3- Filling:

	Adequate	Inadequate/Inappropriate
Moisture control/bonding technique		
Morphology		
Colour match		
Finishing/polishing		

Final mark

A

B

C

D

A=Outstanding, B=Competent, C=Pass, D=Unsatisfactory

Student name

Date:

Endodontic treatment.

Tooth#:

Major Faults: Student committing any of those and the procedure will be deemed un satisfactory

Fault		Fault	
Improper diagnosis/case selection (e.g Un-restorable tooth)		Failure to totally remove caries	
Unjustified perforation (any type)		Improper isolation technique (leakage of irrigants , solution or saliva)	
Any reckless procedural error which is beyond repair		Violation of infection control policies	
Improper temporisation technique			

1- Treatment planning/Access cavity:

	Adequate	Inadequate/Inappropriate
History taking/clinical examination		
Rational use of special investigation/Radiographs		
Isolation/Rubber dam placement		
Unroofing		
Conservation of tooth structure		
Straight line access		
Identification of all canal orifices		

2- Working length determination

	Acceptable	Inadequate/Inappropriate
WL estimation/Use of apex locator		
Working apical file selection.		
WL determination/Diagnostic radiograph technique		

3- Cleaning and shaping/Master cone fit:

	Adequate	Inadequate/Inappropriate
cleaning		
shaping		
Proper use of irrigant/ intra canal medicament		

4- Obturation:

	Adequate	Inadequate/Inappropriate
MA cone selection		
Technique/ awareness		
Length		
Taperness		
Absence of voids/condensation		
Removal of excess GP/sealer from pulp chamber		
Temporization/post obturation management		

Final mark

A

B

C

D

A=Outstanding, B=Competent, C=Pass, D=Unsatisfactory

Step by step guide for clinic procedures cont'd..

- Make sure that your supervisor will sign the case also in the register (registers are locked at the dispensary and only the supervisors can take them out)
- Log books should be brought to all clinics.

- Please do not hesitate to ask us any question and give us feedback about the system.
- Your comments are valuable and appreciated for the ongoing process of improving dental education.