

# *Prosthodontics*

**Prosthodontics**

**Clinical Courses Syllabus Overview**

DN Status	3			4	
Semester	7	8	9	10	11
Course #	7845L	7846L	8857L	8858L	8859L
Credit hours	2	2	2	3	3
Course Expectations (note: unit totals are cumulative)	<ul style="list-style-type: none"> <li>• Clinical Entry Exam</li> <li>• Fx Tx Plan</li> <li>• Rem Tx Plan</li> </ul>	<ul style="list-style-type: none"> <li>• Fx Tx Plan</li> <li>• Rem Tx Plan</li> <li>• 3 units (1 fixed, 2 removable) in progress</li> </ul>	<ul style="list-style-type: none"> <li>• 5 units* (2 fixed, 3 removable) completed, with other units in progress</li> </ul>	<ul style="list-style-type: none"> <li>• 12 units* (including a minimum of 4 units fixed and 4 units removable) completed, with at least 2 additional units in progress</li> </ul>	<ul style="list-style-type: none"> <li>• Complete all active treatment plans</li> <li>• 28 units* (17 fixed and 2 cast post &amp; cores, 11 removable) completed</li> </ul>
Number Clinical of Competencies/Sem		1	0	1	2
Competency Name and Semester Completion Date		<b>PR-1</b> CI Entry Exam		<b>PR-2</b> Fx. Pros Comp Exam (3 units and a provisional)	<b>PR-3</b> Fx. Pros Comp-Mock Board (written and practical) <b>PR-4</b> Clinical Rem. Patient Competency
Rotation			←	CI Denture Rotation	→
Hours to complete	40	62	67	70	86

\* These are minimum cumulative number of units that must be completed to successfully complete the course.

## DEN7845L CLINICAL PROSTHODONTICS 1

Semester Seven      Junior – Fall

### I. General Information

Course Director: Dr. A.E. Clark, Chair, Department of Prosthodontics is the course director for all clinical courses in prosthodontics. Appointments can be scheduled in the Department of Prosthodontics offices, D 11-6, at 392-4231 or [bclark@dental.ufl.edu](mailto:bclark@dental.ufl.edu). Departmental of Prosthodontics faculty offices are located on the 11<sup>th</sup> floor of the dental tower. Departmental faculty can also be contacted at the above phone number.

Ms. Michelle Hopkins, Secretary, is the departmental contact person for issues related to your clinical patient experiences, “pink forms”, and your academic records in this department. Her phone number is also 392-4231. Contact her for information regarding your academic progress in this department, updating your records, and for print outs of your current status.

The Department of Prosthodontics recommends the following procedures to ensure your semester grades reflect your clinical activity.

- (1) Grades are calculated based on the copies of patient encounter forms (pink forms) that are received in the department offices prior to the university semester deadline for grades. If you do not hand in your pink encounter form copies, you will not receive credit for work you have accomplished in clinic. Encounter forms can be placed in the gray metal boxes located in the student prosthodontics clinic.
- (2) Check your file in the departmental offices prior to the end of the semester to be sure it is correct.
- (3) Encounter forms for procedures completed in the last week of the semester should be hand carried to the departmental secretaries in order to receive credit for that semester.

### II. Educational Goal

The educational goal of this course for this semester is to begin patient treatment with prosthodontic restorations. Components of this goal are:

- To demonstrate your familiarity with the policies of the predoctoral clinics in this department
- To demonstrate your maintenance of psychomotor skill in tooth preparation and provisionalization for single tooth restorations.
- To treatment plan a patient for treatment with fixed prostheses in preparation for treating the patient.
- To treatment plan a patient for treatment with a removable partial denture prostheses in preparation for treating the patient.

### III. Course Materials

The instructions for the Clinic Entry Exam are included in this syllabus in section IV. You will need to study the prosthodontics clinic manual and material from your preclinical courses in prosthodontics to prepare for the written exam. For the psychomotor portion of the Clinic Entry Exam you will need a dentoform with all teeth un-prepared, your handpieces and burs, and sufficient materials to make a provisional restoration for the tooth you are asked to prepare.

Fixed Prosthodontic Treatment Planning: To treatment plan your first patient for fixed prosthodontics treatment, you will need a patient who has had all periodontal, oral surgical, orthodontic, endodontic and operative treatment completed in order to develop a fixed treatment plan. In some cases, this is not required, but this is very unusual. Consult with the clinical faculty in the prosthodontics clinic if you are unsure about treatment planning your patient.

You will need recent, (this means after all restorative treatment has been done) accurate diagnostic casts mounted with a facebow transfer and a CENTRIC RELATION record. (Note: Diagnostic casts are mounted in centric relation to evaluate the patient's occlusal relationships. This does not necessarily mean the patient's restorations will be made in centric relation.) This is usually done in the prosthodontics clinic, Clinic 3B. You must also complete the Fixed Prosthodontics Treatment Plan form. Bring your patient, mounted casts, chart and completed treatment plan form to the clinic and present the proposed treatment plan to the supervising faculty for approval. Faculty signatures on the Fixed Treatment Plan Form and a status of "9" on the encounter form signify this clinical course is completed.

To receive credit for your clinical activity, hand in the pink copy of the Fixed Prosthodontics patient encounter form with a "9" in the status column of the encounter form under the "treatment plan" procedure code. Also hand in the yellow copy of the signed Fixed Prosthodontics Treatment Plan form. These forms can be placed in the gray metal boxes in the student prosthodontics clinic. Your clinical activities are logged into our files when we receive your pink and yellow copies. **If you do not hand these forms in, you will not receive credit for your work.**

Removable Prosthodontics Treatment Planning: To treatment plan your first patient for removable partial denture treatment, in contrast to your fixed prosthodontic patients, your patient will NOT need to have all treatment completed in order to develop a removable partial denture treatment plan. Most of these patients can be treatment planned early during their dental treatment. You will be able to formulate a treatment plan once you have established which teeth are to be retained and restored as potential removable partial denture abutments. In some cases, this requires completion of Phase I periodontal therapy, but this is not the usual situation. Consult with the clinical faculty in the prosthodontics clinic if you are unsure about when to treatment plan your patient.

To treatment plan your patient, you will need accurate diagnostic casts. In most cases these casts do not have to be mounted on the articulator to develop a removable partial denture framework design.

In some cases, for example, where inadequate interarch space is a possibility or when unusual occlusal relationships exist, the diagnostic casts must be mounted on the articulator with a facebow transfer and a CENTRIC RELATION record. Ask supervising clinical faculty for assistance in determining if your diagnostic casts must be mounted in order to develop a treatment plan.

The Removable Partial Denture Treatment Plan has two parts, a Quality Assurance evaluation and a Clinical Evaluation. Faculty signatures in both boxes on the Treatment Plan Form and a status of "9" on the encounter form signify this clinical course is completed.

For your first patient, we recommend that you complete the Quality Assurance portion of the form prior to bringing the patient to the clinic for the Clinical Evaluation. However, you may obtain the signatures in any order you wish as you gain clinical experience.

Quality Assurance portion of the treatment plan: Survey, tripod and draw the tentative framework design on the Removable Partial Denture Treatment Plan form following the instructions on the form. Transfer your drawing to the diagnostic cast. Hand in the patient's chart, surveyed diagnostic casts with opposing cast (unless the opposing cast is a complete denture), the completed Treatment Plan Form, and a Quality Assurance form to the Removable Quality Assurance Desk in the center lab of Clinic 3B. Dr. Gustavo Leal (D11-6, 392-4231,) is responsible for all Quality Assurance activities in removable prosthodontics and he or his designee, will review your work and provide you with written and verbal feedback. When you have received a grade for Quality Assurance you may bring your patient to the clinic for the clinical portion of the treatment plan.

Clinical Portion of the Removable Partial Denture Treatment Plan: Bring your patient, chart, completed Removable Partial Denture Treatment plan form signed by QA, and diagnostic casts surveyed and designed to the clinic. Clinical faculty will review your design and examine the patient for appropriateness of this design. Often there are aspects of removable partial denture design which must be modified based on the conditions in the oral cavity which are not evident on diagnostic casts alone (Ex. tooth mobility, range of motion of the floor of the mouth, caries at proposed clasp tip sites).

Bring your patient, mounted casts, chart and completed treatment plan form to the clinic and present the proposed treatment plan to the supervising faculty for approval.

To receive credit for your clinical activity, hand in the pink copy of the Removable Prosthodontics patient encounter form with a "1" in the status column of the encounter form under the "treatment plan" procedure code. Also, hand in the yellow copy of the signed Removable Prosthodontics Treatment Plan form with both QA and Clinical faculty signatures. These forms can be placed in the gray metal boxes in the student prosthodontics clinic.

Your clinical activities are logged into our files when we receive your pink and yellow copies. **If you do not hand these forms in, you will not receive credit for your work.**

#### IV. Learning Experiences/Competency

1. Competency Demonstration: Prior to entry into the clinic in the junior year, students must successfully complete a Clinic Entry Exam. This includes both a written examination covering fixed and removable prosthodontics and a psychomotor exam consisting of tooth preparation and fabrication of a provisional restoration for a single crown on a typodont. Evaluation of performance is criteria based using the criteria presented in the preclinical courses (DEN 6412 and 6415).

The Clinic Entry Exam, as a prerequisite to patient care, will be administered as follows:

1. At least one week prior to, but no longer than two weeks before the student is to provide treatment for their first fixed prosthodontic patient in the clinic, the written and psychomotor portions of the Clinic Entry Exam must be successfully completed.
2. The written exam covers policies described in the prosthodontic clinic manual and includes factual information presented in the preclinical fixed courses (DEN 5213, 6412, and 6415).
3. The written and psychomotor exams are graded on a pass/fail basis.
4. The written exam also includes material relevant to removable prosthodontics.
5. The minimum passing grade is 90%.
6. The written exam must be completed prior to the psychomotor exam.
7. The psychomotor portion of the exam is to be performed in the prosthodontics clinic. The student will bring the form certifying that he/she passed the written exam to a faculty member in the clinic who will select a tooth and preparation. The student will take the dentoform to the Department of Prosthodontics secretary who will issue the appropriate grading form for the preparation and provisional selected by the faculty. The student will return to the clinic and the faculty member will initial the grading form as a start check and again at the conclusion of the procedure.
8. The psychomotor portion of the entry exam consists of a single tooth preparation and provisional on a dentoform completed within the time constraints of a clinic session (8:30 to 11:15 AM, 2:00 to 4:45 PM). It is graded on a pass/fail basis.
9. When the preparation and provisional restoration are completed, the student will bring the dentoform to the Department of Prosthodontics office, D 11-6, where at least one faculty member will critique the preparation and provisional restoration on a pass/fail basis using the criteria used in DEN 6412 and 6415.

The Clinic Entry Exam, as a means toward obtaining an "A" or "B" grade for the Fall Semester (i.e. not associated with patient treatment in the Fall Semester), will be administered as follows:

1. Students may sign up in advance (until the end of October) to participate in a psychomotor session in the preclinical simulation lab, which will be held in late November or early December – prior to the last day of the semester.

2. Present a treatment plan for patient(s) whose needs include fixed restorations. The presentations should include specific findings, relevant systemic health considerations, patient desires and needs, a written treatment plan proposal, and a rationale for each item of suggested treatment.

1. Patients must have all periodontal, surgical, and restorative treatment completed before the fixed treatment plan can be created.
2. Proper completion of a dysfunction screening form, initial clinical examination and fixed treatment plan form.
3. Current diagnostic casts mounted in centric relation.
4. Appropriate recent (within the past 12 months) radiographs available.
5. Use of diagnostic tooth preparations and/or wax-ups, when indicated.
6. Evaluation of the current periodontal condition of all the remaining teeth, including sulcus depths, tooth mobility, furcation involvement, and attached gingival tissue.
7. Rationale for treatment, including alternatives.
8. Recognition of the need for “special care” and specific proposals for providing prophylactic antibiotic coverage, nitrous oxide/oxygen analgesia, etc.
9. Ability to communicate to a faculty member the specific findings, proposed treatment, and prognosis.
10. Communication to patient of proposed treatment, including estimation of time involved, cost, treatment goals, and patient responsibilities during and after treatment.

3. Perform diagnostic tooth preparations and wax-ups, when indicated, as part of the development of the fixed prosthodontic treatment plan.

If it is determined your patient would benefit from diagnostic tooth preparations and wax-ups, your supervising faculty will tell you at the time of treatment planning.

1. Identification of benefits to be derived from a diagnostic wax-up and whether one is indicated for a particular patient, with the identification based on an evaluation of the occlusal plane, disclusion characteristics, and the extent of the restorative needs.
2. Use of current, accurate diagnostic casts mounted in centric relation.
3. Identification of the need for, and correct use, where indicated, of a custom acrylic anterior guide table.
4. Preparation of the teeth on the casts according to biological, mechanical, and esthetic needs.
5. Restoration of axial tooth contours in wax.
6. Evaluation of the existing occlusal scheme and interpretation of its influence on any proposed changes.
7. Understanding of the relationship between anterior guidance and the occlusal morphology of posterior teeth.

8. Proper execution of the occlusal design in wax.
9. Transfer of the information from such diagnostic procedures to the patient's treatment plan.

4. Examine, diagnose, treatment plan, determine the prognosis for a partially edentulous patient and complete both Quality Assurance and Clinical Evaluation parts of a Removable Partial Denture form at an acceptable or excellent level of quality.

**You must have completed DEN6413C. You will be evaluated on your ability to do the following:**

1. Accurately complete the documentation and evaluation of all diagnostic data on the clinic chart forms
2. Interpret radiographs of the partially edentulous patient
3. Recognize un-favorable biomechanical factors that require preprosthetic surgery or other preparatory or corrective treatment that may require joint consultations with other disciplines of dentistry (such as periodontics, operative, fixed prosthodontics, and oral surgery)
4. Evaluate the patient's existing removable partial denture (if applicable) in relation to the patient's complaints, needs, desires, and expectations of the new partial denture
5. Formulate a prognosis based on the remaining teeth and oral anatomy and the patient's attitude toward dental health
6. Present a logically sequenced treatment plan to the patient, including an estimate of the time involved and fee arrangements
7. Have current, neatly trimmed and clean diagnostic casts (mounted on an articulator when necessary) surveyed and designed with all the removable partial denture components clearly delineated using the proper color coding
8. Complete the Removable Partial Denture form accurately and communicate to your supervising Quality Assurance and clinical faculty member the rationale for your treatment plan and indicated design.

## V. Evaluation

Evaluation of the quality of clinical prosthodontic patient care in the predoctoral clinics at the University of Florida College of Dentistry is both formative and summative in nature. The primary purpose of evaluation is to provide helpful feedback to students to guide student behavior towards attaining competency in this discipline. We recognize that this is a process of growth and change for students as they progress through the prosthodontics curriculum.

Feedback to students is provided in the form of both clinical daily evaluations of quality of patient care and the laboratory Quality Assurance program. A secondary purpose of evaluation includes delineation of student development in order to assign semester grades.

The specific guidelines for awarding semester grades are listed in tabular form in each of the prosthodontics clinical courses and include both quantity and quality components.

The written exam covers clinic policies and procedures as described in the clinical courses syllabus and course materials in the preclinical courses you have taken in fixed and removable prosthodontics as described above. Students must score above 90% in order to pass this portion of the clinic entry exam.

The evaluation criteria for the psychomotor portion of the Clinic Entry Exam are identical to those used in DEN 6412 and 6415 for the tooth preparation and provisional restoration.

## VI. Competency Evaluation

You will be graded on a pass/fail basis on the competency exam. You must score a minimum of 90% to pass the written exam.

## VII. Course Grading Criteria

Grade	Criteria
A	Complete Clinic Entry Exam, both written and psychomotor portion with a passing grade, <u>and</u> Complete one fixed treatment plan & diagnostic wax up (if faculty indicate diagnostic wax-up is needed), <u>and</u> Complete one removable partial denture treatment plan with <u>both Quality Assurance and Clinical evaluation portions completed</u>
B	Complete Clinic Entry Exam, both written and psychomotor portion with a passing grade, <u>and</u> Completion of one fixed treatment plan <u>OR</u> one removable partial denture treatment plan with both portions completed
C	Completion of written Clinic Entry Exam with a passing grade and Evidence of clinical activity in prosthodontics
E	No evidence of patient care in prosthodontics

Evidence of clinical activity in prosthodontics is defined as having patient visits in prosthodontics leading to a fixed or removable treatment plan, as well as any clinical prosthodontic procedures. Five or more Clinical Daily Quality Grades of "E" (excellent) in one semester may increase your grade by one letter. Also, two or more Clinical Daily Quality Grades of " $\Delta$ ", " $\Delta$ " or "U" (little delta, big delta, or unsatisfactory) may decrease your semester grade by one letter.

An important part of your development in prosthodontics is appropriate and efficient use of clinic time. Three or more errors of >15 minute past clinic closing times may decrease your semester grade by one letter.

The final grade determination may be modified if patient profiles, clinic rotation assignments, or uncontrollable circumstances dictate.

**Written portion of Clinic Entry Exam:** Students must attempt the written portion of the Clinic Entry Exam until a grade of at least 90% is reached. Students may attempt this exam as many times as are needed to achieve this score.

**Psychomotor portion of Clinic Entry Exam:** Students may attempt the psychomotor portion of the competency twice. Remediation is required after the second failure and students may not re-attempt the competency until remediation is successfully completed. Remediation activities will be assigned by the department chair or designee.

Remediation for unacceptable quality of effort: Unacceptable quality of effort may be defined as students with 2 or more Clinical Daily Quality Grades of “Δ”, “Δ” or “U” (little delta, big delta, or unsatisfactory) this semester. These students’ records will be individually reviewed by the department chair or designated faculty.

Remediation activities for the Fixed and/or Removable Treatment Plan portion of this clinical course are at the discretion of the department chair or designated faculty.

Students failing any academic/clinic coursework will be awarded an “E” grade and required to remediate. To satisfactorily complete the remediation program at least a “C” grade must be earned. The final grade assigned for the course, after remediation, will be a “D.” Students failing to satisfactorily complete the remediation program will again be awarded an “E” grade and required to repeat the course.

Re-enrollment will be as soon as deemed feasible by the course director. The highest final grade attainable when repeating a course is an “A”. Students receiving an “E” grade for the re-enrolled course will be referred to the Student Performance Evaluation Committee (SPEC) for further action.

**IX. Summary Table**

<b>Semester</b>	<b>Course</b>	<b>Credit Hours</b>	<b>Hours (Estimate to complete)</b>
7 Junior Fall	DEN 7845L	2	40

Appendix: Student Competency Evaluation forms are available in this syllabus and the Prosthodontics Clinic Manual.

## DEN7846L CLINICAL PROSTHODONTICS 2

Semester Eight

Junior – Spring

### I. General Information

See Semester Seven.

### II. Educational Goal

The educational goal for this course is to begin treating patients with fixed and removable prosthodontics restorations. You should complete at least two units of fixed treatment and complete at least four units of removable treatment at an acceptable or excellent level of quality. Components of this goal are:

If you have not already done so, to demonstrate your familiarity with the policies of the predoctoral clinics in this department and your maintenance of clinical skill in tooth preparation and provisionalization for single tooth restorations. This is done by completing both parts of the Clinic Entry Examination. If you have already completed the Clinic Entry Examination in Semester Seven, it does not need to be repeated this semester.

Other objectives include:

- To treatment plan a patient for treatment with fixed prostheses.
- To treatment plan a patient for treatment with removable partial prostheses.
- To treat patients with acceptable to excellent quality fixed restorations appropriate to your patient's needs with a goal of 2 abutments completed.
- To treat your patients with acceptable to excellent quality removable restorations appropriate to your patients' needs with a goal of 4 units of restorations completed, ideally C/C & C/P.

### III. Course Materials

The instructions for the Clinical Entry Exam are included in this syllabus in section IV of DEN 7845 (Fixed, Fall Semester.) You must complete this competency exam prior to treating your first patient with fixed or removable prosthodontic restorations.

To treatment plan your first patient for fixed prosthodontics treatment, in almost all cases, you will need a patient who has had all periodontal, oral surgical, orthodontic, endodontic and operative treatment completed in order to develop a fixed treatment plan. In some cases, this is not required, but this is very unusual. Consult with the clinical faculty in the prosthodontics clinic, Clinic 3B, if you are unsure about treatment planning your patient.

You will need recent, (this means after all restorative treatment has been done) accurate, diagnostic casts mounted with a facebow transfer and a CENTRIC RELATION record.

(Note: Diagnostic casts are mounted in centric relation to evaluate the patient's occlusal relationships. This does not necessarily mean the patient's restorations will be made in centric relation.) This is usually done in the prosthodontics clinic. You must also complete the Fixed Prosthodontics Treatment Plan form. Bring your patient, mounted casts, chart and completed treatment plan form to the clinic and present the proposed treatment plan to the supervising faculty for approval. More information about the fixed treatment planning process can be found in the Prosthodontic Clinic manual.

Remember to hand in the pink copy of the Fixed Prosthodontics patient encounter form for semester credit. Procedures are completed when there is a "9" in the status column of the encounter form. Also, hand in the yellow copy of the signed Fixed Prosthodontics Treatment Plan form for treatment planning credit. These forms can be placed in the gray metal boxes in the student prosthodontics clinic.

Your clinical activities are logged into our files when we receive your pink and yellow copies. If you do not hand these forms in, you will not receive credit for your work. Be sure to keep your yellow copies of encounter forms in your files.

You will need all materials appropriate to treat a patient with cemented fixed prostheses, removable partial, and complete denture prostheses. These materials are listed in the Prosthodontics Clinical Manual, the DEN 6460C Manual, and the DEN 6413 Syllabus.

#### IV. Learning Experiences/Competency

1. Competency Demonstration: Prior to entry into the clinic in the Junior year, students must successfully complete a Clinic Entry Exam. This includes a written examination covering fixed and removable prosthodontics, clinic, lab and QA policies, and a psychomotor exam consisting of tooth preparation and fabrication of a provisional restoration for a single crown on a typodont. Evaluation of performance is criteria based using the criteria presented in the preclinical courses (DEN 6412 and 7415).

Note: This competency only has to be completed this semester if it was not completed/remediated in the Fall semester.

However, if you did Alternate Activity for a Fall semester grade, you will still need to do both the written and psychomotor parts of the Clinic Entry Exam one to two weeks prior to treating your first patient in the fixed prosthodontics clinic.

2. Present a treatment plan for patient(s) whose needs include cast restorations. The presentation(s) should include specific findings, relevant systemic health considerations, patient desires and needs, a written treatment plan proposal, and a rationale for each item of suggested treatment.

1. Proper completion of dysfunction screening form, initial clinical examination and departmental treatment plan form.

2. Current accurate diagnostic casts mounted in centric relation.
3. A written treatment plan
4. Appropriate recent radiographs available.
5. Use of diagnostic tooth preparations and/or wax-ups, when indicated.
6. Evaluation of the current periodontal condition of all the remaining teeth, including sulcus depths, tooth mobility, furcation involvements, and attached gingival tissue.
7. Rationale for treatment, including alternatives.
8. Recognition of the need for “special care” and specific proposals for providing prophylactic antibiotic coverage, nitrous oxide/oxygen analgesia, etc.
9. Ability to communicate to a faculty member the specific findings, proposed treatment, and prognosis.
10. Communication to patient of proposed treatment, including estimation of time involved, cost, treatment goals, and patient responsibilities during and after treatment.

3. Perform diagnostic tooth preparations and wax-ups, when indicated, as part of the development of the fixed prosthodontic treatment plan.

If it is determined your patient would benefit from diagnostic tooth preparations and wax-ups, your supervising faculty will tell you at the time of treatment planning:

1. Identification of benefits to be derived from a diagnostic wax-up and whether one is indicated for a particular patient, with the identification based on an evaluation of the occlusal plane, disclusion characteristics, and the extent of the restorative needs.
2. Use of current, accurate diagnostic casts mounted in centric relation.
3. Identification of the need for, and correct use, where indicated, of a custom acrylic anterior guide table.
4. Preparation of the teeth on the casts according to biological, mechanical, and esthetic needs.
5. Restoration of axial tooth contours in wax.
6. Evaluation of the existing occlusal scheme and interpretation of its influence on any proposed changes.
7. Understanding of the relationship between anterior guidance and the occlusal morphology of posterior teeth.
8. Proper execution of the occlusal design in wax.
9. Transfer of the information from such diagnostic procedures to the patient’s treatment plan.

4. Restore two abutments with fixed restorations at an acceptable or excellent level of quality.

Prepare and restore, utilizing either full gold castings, porcelain fused to metal castings, or all-ceramic restorations, two abutment teeth at an acceptable or excellent level of quality.

5. Examine, diagnose, treatment plan, and determine the prognosis for an edentulous patient; treat the patient with complete dentures and accomplish all the clinical and laboratory procedures for this treatment. Successfully complete all relevant Quality Assurance evaluations.

You must have completed DEN 6460C. You will be judged on your ability to do the following:

- accurately complete the documentation and evaluation of all diagnostic data on the clinic chart forms
- interpret radiographs of the edentulous patients; recognize unfavorable biomechanical factors that require prosthodontic surgery
- evaluate the patient's existing dentures (if applicable) in relation to the patient's complaints, desires, and expectations of the new dentures
- formulate a prognosis based on the residual oral anatomy and the patient's attitude toward dental health
- recognize and communicate to a prosthodontics faculty member certain anatomical landmarks and muscles which will determine the borders of the dentures
- present a logically sequenced treatment plan to the patient, including an estimate of time involved and fee arrangements
- provide patient education in oral hygiene and the care of dentures and make the patient aware of the need for periodic reexamination (recall) and subsequent maintenance procedures, such as reline and rebase
- perform all the clinical and laboratory procedures which are clinically acceptable and biologically compatible with the masticatory system.
- have all relevant clinical and laboratory procedures evaluated through Quality Assurance.

6. Examine, diagnose, treatment plan, and determine the prognosis for a partially edentulous patient or patients; treat the patient or patients with a complete denture and a removable partial denture and accomplish all the clinical and laboratory procedures (except processing resin, casting, and polishing the framework). Complete a Laboratory Work Authorization form for the framework casting. Successfully complete all relevant Quality Assurance evaluations.

- You must have passed the posttest for DEN6413C. You will be judged by the same performance criteria as for DEN7855L. Additionally, you will be judged on your ability to do the following:
- all the clinical and laboratory procedures which are clinically acceptable and biologically compatible with the masticatory system
- provide patient education in oral hygiene and the care of complete and removable partial dentures
- make the patient aware of the need for periodic reexamination (recall) and subsequent maintenance procedures
- properly complete a Laboratory Work Authorization form for the framework.
- have all relevant clinical and laboratory procedures evaluated through Quality Assurance.

Treating a patient with a maxillary complete denture opposing a mandibular distal extension removable partial denture is acceptable as part of the requirements for DEN7846L.

## **V. Evaluation**

The evaluation criteria for the psychomotor portion of the Clinic Entry Exam are identical to those used in DEN 6412 and 7415 for the tooth preparation and provisional restoration. They are reprinted in the appendix for your convenience.

The written psychomotor exam covers clinic policies and procedures as described in the clinical courses syllabus and course materials in the preclinical courses you have taken in fixed and removable prosthodontics as described above. You must score above 90% in order to pass this portion of the clinic entry exam.

All laboratory procedures in fixed and removable prosthodontics are evaluated through the Quality Assurance (QA) program. Dr. Oscar Vazquez (D11-6, 392-4231) is the QA coordinator for fixed prosthodontics and Dr. Gustavo Leal (D11-6, 392-4231) is the QA coordinator for removable prosthodontics. Drs. Vazquez and Leal, along with help from other prosthodontic faculty, will review all of your laboratory work in prosthodontics.

The QA program in prosthodontics is a formative type of evaluation and a method of communication with dental students regarding dental laboratory work. The process is based on written and oral feedback to students with the expectation that student quality will improve as clinical experience, understanding and skills increase.

The department assumes that your clinical and laboratory work will be at the acceptable level of quality as reflected in your QA and clinical daily quality grades showing a trend of improvement as you gain clinical experience.

## **VI. Competency Evaluation**

You will be graded on a pass fail basis on the Clinic Entry Exam. You must pass this exam to begin patient treatment in the prosthodontics clinic.

## VII. Course Grading Criteria

The Department of Prosthodontics recommends the following procedures to ensure your semester grades reflect your clinical activity.

- (4) Grades are calculated based on the copies of patient encounter forms (pink forms) that are received in the department offices prior to the university semester deadline for grades. If you do not hand in your pink encounter form copies, you will not receive credit for work you have accomplished in clinic. Encounter forms can be placed in the gray metal boxes located in the student prosthodontics clinic.
- (5) Check your file in the departmental offices prior to the end of the semester to be sure it is correct. You will not receive credit for fixed and removable prostheses if a treatment plan is not on file.
- (6) Encounter forms for procedures completed in the last week of the semester should be hand carried to the departmental secretaries in order to receive credit for that semester.
- (7) Acceptable or excellent quality is expected for procedures evaluated in the clinic and in QA.
- (8) 2 or more Clinical Daily Quality Grades of “ $\Delta$ ”, “ $\Delta$ ” or “U” (little delta, big delta, or unsatisfactory) or two or more instances of running 30 minutes or more past the clinic closing time this semester will be cause for evaluation of student quality of treatment in prosthodontics, possibly leading to individualized remediation activities and/or delayed graduation.
- (9) Having a completed fixed or removable treatment plan does not mean that a procedure has been started or is in progress. For a procedure to be considered as “in progress” the following steps need to be accomplished: for crowns and FPD’s – preparation started and provisional restoration placed, for removable partial dentures – mouth preparations and impression for framework, for complete dentures – primary impressions.

To get a passing grade all students must:

- Complete clinic entry exam, both written and psychomotor portion (this may have been completed in the Fall Semester)
- Complete a total of one fixed treatment plan
- Complete at least one removable partial denture treatment plan
- Complete diagnostic wax-ups, if faculty indicate they are needed for your patient

In addition, the following criteria must be met to receive a specific grade:

Grade	Criteria
A	Complete a total of six restorations: 2 fixed and 4 removable or 3 fixed and 3 removable
B	Complete one fixed unit and two removable units, with at least 3 other units in progress
C	Less than one fixed unit and two removable units completed Evidence of patients in progress in fixed and removable prosthodontics
E	No evidence of patient care in prosthodontics Unacceptable quality as reflected in Clinical Daily Quality Grades and QA evaluations

## VIII. Remediation

Written portion of Clinic Entry Exam: Students must attempt the written portion of the Clinic Entry Exam until a grade of at least 90% is reached. Students may attempt this exam as many times as are needed to achieve this score.

Psychomotor portion of Clinic Entry Exam: Students may attempt the psychomotor portion twice. Remediation is required after the second failure and students may not rechallenge the competency until remediation is successfully completed. Remediation activities will be assigned by the department chair or designee on an individual basis consistent with the needs of the student.

Remediation for unacceptable quality of effort: Unacceptable quality of effort may be defined as students with 2 or more Clinical Daily Quality Grades of “Δ”, “Δ” or “U” (little delta, big delta, or unsatisfactory) or two or more instances of running 30 minutes or more past the clinic closing time this semester. These students’ records will be individually reviewed by the Chair, Department of Prosthodontics, or designated faculty. Student graduation may be delayed and an individual remediation program designed for students whose clinical quality of patient treatment is found to be unacceptable.

There are no formal remediation activities for the treatment planning portion of this clinical course.

The final grade determination may be modified if patient profiles, clinic rotation assignments, or uncontrollable circumstances dictate.

Students failing any academic/clinic coursework will be awarded an “E” grade and required to remediate. To satisfactorily complete the remediation program at least a “C” grade must be earned the next semester. The final grade assigned for the course, after remediation, will be a “D.” Students failing to satisfactorily complete the remediation program will again be awarded an “E” grade and required to repeat the course.

Re-enrollment will be as soon as deemed feasible by the course director. The highest final grade attainable when repeating a course, is an “A”. Students receiving an “E” grade for the re-enrolled course will be sent to the Student Performance Evaluation Committee (SPEC) for further action.

## IX. SUMMARY TABLE

Semester	Course	Credit Hours	Hours (Estimate to complete)
8 Junior Spring	DEN 7846L	2	62

Appendix: Student Evaluation forms in Prosthodontics Clinic Manual.

## DEN8857L CLINICAL PROSTHODONTICS 3

Semester Nine

Junior – Summer

### I. General Information

See Semester Seven.

### II. Educational Goal

The educational goal of this course is to treatment plan patients for fixed and removable prostheses and to complete treatment of additional patient(s) with fixed and removable prostheses of acceptable to excellent quality appropriate to your patients' needs.

### III. Course Materials

See the Prosthodontic Clinical Manual for a listing of all materials, supplies and instruments needed for specific patient procedures. See this manual also for policies and forms used in the laboratory and clinical patient treatment in prosthodontics.

### IV. Learning Experiences/Competency

1. Present a treatment plan for a patient(s) whose needs include cast restorations. The presentation(s) should include specific findings, relevant systemic health considerations, patient desires and needs, a written treatment plan proposal, and a rationale for each item of suggested treatment.
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1. Proper completion of dysfunction screening form, initial clinical examination and departmental treatment plan form.
2. Current accurate diagnostic casts mounted in centric relation.
3. A written treatment plan
4. Appropriate recent radiographs available.
5. Use of diagnostic tooth preparations and/or wax-ups, when indicated.
6. Evaluation of the current periodontal condition of all the remaining teeth, including sulcus depths, tooth mobility, furcation involvements, and attached gingival tissue.
7. Rationale for treatment, including alternatives.
8. Recognition of the need for "special care" and specific proposals for providing prophylactic antibiotic coverage, nitrous oxide/oxygen analgesia, etc.
9. Ability to communicate to a faculty member the specific findings, proposed treatment, and prognosis.
10. Communication to patient of proposed treatment, including estimation of time involved, cost, treatment goals, and patient responsibilities during and after treatment.

2. Perform diagnostic tooth preparations and wax-ups, when indicated, as part of the development of the fixed prosthodontic treatment plan.

If it is determined your patient would benefit from diagnostic tooth preparations and wax-ups, your supervising faculty will tell you at the time of treatment planning.

1. Identification of benefits to be derived from a diagnostic wax-up and whether one is indicated for a particular patient, with the identification based on an evaluation of the occlusal plane, disclusion characteristics, and the extent of the restorative needs.
2. Use of current, accurate diagnostic casts mounted in centric relation.
3. Identification of the need for, and correct use, where indicated, of a custom acrylic anterior guide table.
4. Preparation of the teeth on the casts according to biological, mechanical, and esthetic needs.
5. Restoration of axial tooth contours in wax.
6. Evaluation of the existing occlusal scheme and interpretation of its influence on any proposed changes.
7. Understanding of the relationship between anterior guidance and the occlusal morphology of posterior teeth.
8. Proper execution of the occlusal design in wax.
9. Transfer of the information from such diagnostic procedures to the patient's treatment plan.

3. Treat a patient in need of a reline, rebase, or repair of a complete or removable partial denture; and satisfactorily accomplish all the clinical procedures for this treatment at an acceptable or excellent quality.

1. Evaluate the patient's existing dentures in relation to the patient's centric relation, vertical dimension, occlusion, extension and in relation to the patient's complaints, desires, and expectations
2. Formulate a prognosis based on the residual oral anatomy and the patient's attitude toward dental health; present a logically sequenced treatment plan to the patient, including an estimate of time involved and fee arrangements
3. Perform all procedures which are clinically acceptable and biologically compatible with the masticatory system.

4. Examine, diagnose, treatment plan, and determine the prognosis for a partially edentulous patient; treat the patient with a removable partial denture at an acceptable or excellent level of quality; complete Laboratory Work Authorization forms; and supervise and evaluate those laboratory procedures performed by the laboratory technician. Complete all relevant Quality Assurance evaluations at an acceptable or excellent level of quality.

5. Complete additional fixed and removable units at an acceptable or excellent level of quality with a goal of 12 units completed and others in progress.

**V Evaluation**

See Course Grading Criteria

**VI COMPETENCY EVALUATION**

There are no competency experiences this semester.

**VII COURSE GRADING CRITERIA:**

To get a passing grade, all students must:

- Complete at least a total of 5 restorations: 2 fixed and 3 removable units, with other units in progress

In addition, the following criteria must be met to receive a specific grade:

Grade	Criteria
A	Complete a total of 12 restorations, with a minimum of 4 fixed and 4 removable units. At least four other units in progress
B	Complete a total of 9 restorations, with a minimum of 3 fixed and 3 removable units. At least three other units in progress
C	Complete a total of 5 restorations: 2 fixed and 3 removable units, with other units in progress
E	No evidence of patient care in prosthodontics Unacceptable quality as reflected in Clinical Daily Quality Grades and QA evaluations

**VIII REMEDIATION**

Remediation for unacceptable quality of effort: Unacceptable quality of effort may be defined as students with 2 or more Clinical Daily Quality Grades of “Δ”, “Δ” or “U”(little delta, big delta, or unsatisfactory) this semester. These students’ records will be individually reviewed by the Chair, Department of Prosthodontics, or designated faculty. Student graduation may be delayed and an individual remediation program designed for students whose clinical quality of patient treatment is found to be unacceptable.

There are no formal remediation activities for the Fixed Treatment Plan portion of this clinical course.

The final grade determination may be modified if patient profiles, clinic rotation assignments, or uncontrollable circumstances dictate.

Students failing any academic/clinic coursework will be awarded an "E" grade and required to remediate. To satisfactorily complete the remediation program at least a "C" grade must be earned. The final grade assigned for the course, after remediation, will be a "D." Students failing to satisfactorily complete the remediation program will again be awarded an "E" grade and required to repeat the course.

Re-enrollment will be as soon as deemed feasible by the course director. The highest final grade attainable when repeating a course, is an "A". Students receiving an "E" grade for the re-enrolled course will be sent to the Student Performance Evaluation Committee (SPEC) for further action.

**X. SUMMARY TABLE**

<b>Semester</b>	<b>Course</b>	<b>Credit Hours</b>	<b>Hours (Estimate to complete)</b>
9 Junior Summer	DEN 8857L	2	67

## DEN8858L CLINICAL PROSTHODONTICS 4

Semester Ten

Senior – Fall

### I. General Information

See Semester Seven.

### II. Educational Goal

The educational goal of this course is to treatment plan patients for fixed and removable prostheses and to complete treatment with additional fixed and removable prosthetic restorations of acceptable to excellent quality appropriate to your patients' needs.

### III. Course Materials

See the Prosthodontic Clinical Manual, DEN 6460C Manual and the DEN 6413 Syllabus for a listing of all materials, supplies and instruments needed for specific patient procedures. The clinic manual lists policies and forms used in the laboratory and clinical patient treatment with fixed prosthodontics.

### IV. Learning Experiences/Competency

1. Determine the appropriate shade for a ceramometal restoration and demonstrate its successful duplication in the final restoration.
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1. Determination of the appropriate stage of treatment for shade selection.
2. Understanding of the nature of light and color and its dimensions: hue, chroma, and value and their correct determination on your patients.
3. Understanding of the additive and subtractive color systems and how a perceived shade depends on the ambient light.
4. Ability to closely duplicate the predetermined shade without the use of superficial staining in the ceramometal restoration.
5. Understanding of how tooth contour and surface texture will influence the appearance of a restoration.
6. Completion of the characterization through the use of minor surface staining where indicated.

2. Prepare teeth, fabricate and cement single cast gold restorations as indicated by a predetermined treatment plan.
--

1. Ability to discuss clearly the indications, contraindications, advantages, and disadvantages of the proposed restoration.
2. Determination of the proper sequence of treatment to give the greatest benefit within the comprehensive patient care plan.
3. Arrangement of the steps needed to complete the restoration to make the most efficient use of the patient's and your time.
4. Skill with which the treatment is provided, including tooth preparation, temporization, impression making, and fabrication of the restoration.
5. Quality of the restoration, including retention; axial contour; occlusal design; marginal adaptation; polish; adequate thickness and, where appropriate, esthetic acceptability and glaze.
6. Knowledge of any limitations of the restoration and judgment as to any corrective procedures that should be undertaken.
7. Patient management and patient comfort.

<ol style="list-style-type: none"><li>3. Prepare teeth, fabricate and cement post and cores on endodontically treated teeth that are going to receive cast restorations.</li></ol>
--

1. An understanding of the special problems related to the restoration of root-filled teeth and the ability to discuss all aspects of the proposed teeth.
2. Knowledge of both direct and indirect procedures to construct a post and core. Understanding of the different techniques available and their advantages and disadvantages.
3. Preparation of the remaining tooth structure, including adequate post length, provision of resistance to rotation, and conservative elimination of unsupported tooth structure allowing for a proper path of withdrawal.
4. Ability to produce a pattern that adequately displays the following features: internal adaptation, marginal fit, proper design for the cast restoration, and smoothness.
5. Minimum finishing of the post and core required clinically.
6. Knowledge of the correct cementation procedures.
7. Understanding of the special considerations for temporizing endodontically-filled teeth and the skillful application of the knowledge.

Two cast posts and cores are needed to complete this course. However, two chamber-retained amalgams can substitute for one cast post, if appropriate to your patients' treatment plans. Students must complete at least one cast post and core.

4. Restore additional abutment teeth at an acceptable or excellent level of quality for a cumulative total of ten restored abutments.

Prepare and restore, utilizing either full gold castings, porcelain fused-to-metal castings or all-ceramic restorations at an acceptable or excellent level of quality.

5. Examine, diagnose, treatment plan, and determine the prognosis for a partially edentulous patient; treat the patient with a complete denture (or overdenture or immediate denture) and a removable partial denture at an acceptable or excellent level of quality; complete Laboratory Work Authorization forms; and supervise and evaluate those laboratory procedures performed by the laboratory technician. Successfully complete all relevant Quality Assurance evaluations at an acceptable or excellent level of quality.

You will be evaluated by the same performance criteria as before in 7856L-2. Additionally, you will be evaluated on your ability to do the following: properly complete Laboratory Work Authorization forms, evaluate those laboratory procedures accomplished for you by the laboratory technician, and perform the clinical procedures independently with faculty observation and evaluation only. You must have all relevant clinical and laboratory procedures evaluated through Quality Assurance at an acceptable or excellent level of quality.

6. Examine, diagnose, treatment plan, and determine the prognosis for an edentulous patient needing conventional complete dentures, immediate dentures and/or overdentures; treat the patient with any combination of complete dentures, immediate complete dentures, or overdentures at an acceptable or excellent level of quality. Complete Laboratory Work Authorization forms, and supervise and evaluate those laboratory procedures performed by the laboratory technician. Successfully complete all relevant Quality Assurance evaluations at an acceptable or excellent level of quality.

You will be evaluated by the same performance criteria as for the first complete denture. Additionally, you will be evaluated on your ability to properly complete Laboratory Work Authorization forms and evaluate those laboratory procedures accomplished for you by the laboratory technician. You must have all relevant clinical and laboratory procedures evaluated through Quality Assurance at an acceptable or excellent level of quality.

7. Satisfactorily complete a clinical rotation in prosthodontics

### **Senior Rotation in Prosthodontics**

A one-day rotation in prosthodontics will be completed during the senior year. The rotations occur on Wednesday or Friday.

This rotation will have several purposes:

1. It will provide a place and mechanism to see complete denture recall patients who are not assigned to a current student (note: current students will not be allowed to discharge their complete denture patients until they graduate). This will provide a useful educational experience and allow the Department of Prosthodontics to document recurring problems in treatment planning and/or the fabrication of complete dentures. The assigned student will work with the attending prosthodontic faculty. This also becomes a viable outcomes assessment process.
2. It will provide a place and mechanism for repairs/relines for complete and partial dentures. Students currently are assigned a patient from Patient Assignment and are only required to do one or the other. Therefore, their experience is very limited. This rotation will expose students to a wider variety of problems and solutions than available now.
3. The receptionist for the Oral Health Maintenance Clinic will schedule these patients. She will coordinate the schedule ahead of time with a representative of the Department of Prosthodontics. For example, patients needing a reline should be seen the first thing each day to allow laboratory time for processing, so they can be inserted by the end of the day.
4. Students receive credit for reline/repair requirement by attending this rotation. This rotation is part of the removable prosthodontics courses for Semesters 9-11 in the Department of Prosthodontics.
5. Those patients with a complete denture and an opposing removable partial denture will continue to be seen in the Oral Health Maintenance Clinic. As needs arise, these patients may be scheduled during the prosthodontic rotation.

## **V. Evaluation**

See Course Grading Criteria

## **VI. Competency Evaluation**

### Fixed Prosthodontics Competency:

Successful completion of this competency is a requirement for graduation. In the Fall Semester, students are required to prepare abutments for a three unit fixed partial denture and fabricate a provisional restoration on a typodont. In the Spring Semester, students must successfully complete the fixed prosthodontic portion of the Mock Board Exam. Students who fail one of these competencies will be given two additional opportunities to complete the competency.

Written Prosthodontics Examination Competency:

Successful completion of this competency is a requirement for graduation. The competency is given as a portion of the Senior Mock Board Examination in the Spring Semester of the senior year. Students must score a minimum of 75% on this written examination. The examination is clinically focused and organized using the learning objectives provided by the Florida State Dental Board Examination. The written examination covers clinically related topics in removable prosthodontics, treatment planning and fixed prosthodontics. Questions are case-based using photographs of clinical cases and laboratory procedures.

Clinical Removable Patient Competency:

Successful completion of this competency is a requirement for graduation. Grading criteria and forms are available from the Department of Prosthodontics offices, D11-6.

**VII. Course Grading Criteria**

To get a passing grade, all students must:

- Complete at least a total of 12 restorations: 5 fixed and 7 removable units, with other units in progress

In addition, the following criteria must be met to receive a specific grade:

Grade	Criteria
A	Complete a total of 20 restorations, with a minimum of 8 fixed and 10 removable units. At least six other units in progress
B	Complete a total of 16 restorations, with a minimum of 6 fixed and 8 removable units. At least four other units in progress
C	Complete a total of 12 restorations, with a minimum of 4 fixed and 4 removable units. At least two other units in progress
E	Completion of less than 12 restorations, with other units in progress. No evidence of patient care in prosthodontics Unacceptable quality as reflected in Clinical Daily Quality Grades and QA evaluations

**VIII. REMEDIATION**

Remediation for unacceptable quantity of effort: Dental students who complete 3 or fewer total abutments of clinical patient treatment in fixed by the end of this semester will be individually reviewed and informed of their status. Students with this level of clinical experiences in fixed prosthodontics patient care are at risk for graduation in a timely manner.

Remediation for unacceptable quality of effort: Unacceptable quality of effort may be defined as students with 2 or more Clinical Daily Quality Grades of “Δ”, “Δ” or “U” (little delta, big delta, or unsatisfactory) this semester. These students’ records will be individually reviewed by the Chair, Department of Prosthodontics, or designated

faculty. Student graduation may be delayed and an individual remediation program designed for students whose clinical quality of patient treatment is found to be unacceptable.

Students failing any academic/clinic coursework will be awarded an "E" grade and required to remediate. To satisfactorily complete the remediation program at least a "C" grade must be earned. The final grade assigned for the course, after remediation, will be a "D." Students failing to satisfactorily complete the remediation program will again be awarded an "E" grade and required to repeat the course.

Re-enrollment will be as soon as deemed feasible by the course director. The highest final grade attainable when repeating a course, is an "A". Students receiving an "E" grade for the re-enrolled course will be sent to the Student Performance Evaluation Committee (SPEC) for further action.

#### IX. SUMMARY TABLE

<b>Semester</b>	<b>Course</b>	<b>Credit Hours</b>	<b>Hours (Estimate to complete)</b>
10 Senior Fall	DEN 8858L	3	70

## DEN8859L CLINICAL PROSTHODONTICS 5

Semester Eleven

Senior – Spring

### I General Information

See Semester Seven.

### II. Educational Goal

The educational goal for this course is to treatment plan and treat patients with fixed and removable prostheses of acceptable to excellent quality with a minimum patient treatment experience of 28 units completed.

### III. Course Materials

See the Prosthodontic Clinical Manual for a listing of all materials, supplies and instruments needed for specific patient procedures. See this manual also for policies and forms used in the Quality Assurance, laboratory and clinical phases of patient treatment with fixed and removable prosthodontics.

Forms for the competency examinations are available in the Department of Prosthodontics office D11-6. (See examples in Appendix of this syllabus.)

### IV. Learning Experiences/Competency

1. Treat patients by preparing abutment teeth, provisionalizing, evaluating the fabrication and cementing fixed partial dentures of three or more units.
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1. Complexity of the overall treatment plan.
2. Knowledge and comprehension of bridge design and construction and the ability to discuss these with the supervisory faculty.
3. Understanding of the advantages and disadvantages of treatment alternatives and the proper selection of treatment sequences in the comprehensive patient care plan.
4. Skill with which the treatment is provided, including tooth preparation, temporization, impression making, jaw recordings, and fabrication of the restoration.
5. Quality of the restorations provided, including retention axial contour; occlusal design; marginal adaptation; pontic design; adequate thickness of the metal; polish; and, where applicable, esthetic acceptability of glaze.
6. Knowledge of connector design for fixed partial dentures and the ability to successfully and correctly solder connectors.
7. Identification of correctable deficiencies in the restorations.

8. Knowledge of the correct cementation procedures and the importance of a dry operating field.
9. Adequate post cementation follow-up to ensure the longevity of the restoration.

**Note:** The acid-etched bridge elective offered by this department includes treating a patient you have identified who would benefit from this type of treatment. Elective credit is given for completing this course. However, no abutment credit is given for an acid-etched bridge.

2. Prepare teeth, fabricate and cement post and cores on endodontically treated teeth that are going to receive cast restorations.
--

1. An understanding of the special problems related to the restoration of root-filled teeth and the ability to discuss all aspects of the proposed teeth.
2. Knowledge of both direct and indirect procedures to construct a post and core. Understanding of the different techniques available and their advantages and disadvantages.
3. Preparation of the remaining tooth structure, including adequate post length, provision of resistance to rotation, and conservative elimination of unsupported tooth structure allowing for a proper path of withdrawal.
4. Ability to produce a pattern that adequately displays the following features: internal adaptation, marginal fit, proper design for the cast restoration, and smoothness.
5. Minimum finishing of the post and core required clinically.
6. Knowledge of the correct cementation procedures.
7. Understanding of the special considerations for temporizing endodontically-filled teeth and the skillful application of the knowledge.

Two cast posts and cores are needed to complete this course. However, two chamber-retained amalgams can substitute for one cast post, if appropriate to your patients' treatment plans. Students must complete at least one cast post and core.

3. Examine, diagnose, treatment plan and determine the prognosis for a partially edentulous patients. Complete Laboratory Work Authorization forms, and supervise and evaluate those laboratory procedures performed by the laboratory technician. Successfully complete all relevant Quality Assurance evaluations at an acceptable or excellent level of quality.
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You should have completed all Prosthodontics courses. You will be evaluated by the same performance criteria as for DEN 7856L-2. Additionally, you will be evaluated on your ability to do the following: properly complete Laboratory Work Authorization forms and evaluate those laboratory procedures accomplished for you by the laboratory technician; and perform the clinical procedures independently at an acceptable or excellent level of quality with faculty observation and evaluation only. You must have

all relevant clinical and laboratory procedures evaluated through Quality Assurance at an acceptable or excellent level of quality.

4. Satisfactorily complete a clinical competency exam at an acceptable or excellent level of quality including examination, diagnosis, treatment planning, and treatment for a patient who requires either a maxillary complete denture opposing a mandibular complete denture or a maxillary complete denture opposing a mandibular removable partial denture.

You may attempt this clinical competency exam at any point in the senior year, semester 9, 10, or 11 and are encouraged to attempt to demonstrate competency as early as you are confident in your clinical skills. Performance criteria for the clinical competency exam will be distributed separately and are available from the secretaries in the Department of Prosthodontics offices.

5. Satisfactorily complete a clinical denture rotation.

### **Senior Rotation in Prosthodontics**

A one-day rotation in prosthodontics will be completed during the senior year. The rotations occur on Wednesday or Friday.

This rotation will have several purposes:

6. It will provide a place and mechanism to see complete denture recall patients who are not assigned to a current student (note: current students will not be allowed to discharge their complete denture patients until they graduate). This will provide a useful educational experience and allow the Department of Prosthodontics to document recurring problems in treatment planning and/or the fabrication of complete dentures. The assigned student will work with the attending prosthodontic faculty. This also becomes a viable outcomes assessment process.
7. It will provide a place and mechanism for repairs/relines for complete and partial dentures. Students currently are assigned a patient from Patient Assignment and are only required to do one or the other. Therefore, their experience is very limited. This rotation will expose students to a wider variety of problems and solutions than available now.
8. The receptionist for the Oral Health Maintenance Clinic will schedule these patients. She will coordinate the schedule ahead of time with a representative of the Department of Prosthodontics. For example, patients needing a reline should be seen the first thing each day to allow laboratory time for processing, so they can be inserted by the end of the day.

9. Students receive credit for reline/repair requirement by attending this rotation. This rotation is part of the removable prosthodontics courses for Semesters 9-11 in the Department of Prosthodontics.
10. Those patients with a complete denture and an opposing removable partial denture will continue to be seen in the Oral Health Maintenance Clinic. As needs arise, these patients may be scheduled during the prosthodontic rotation.

Prepare and restore, utilizing either full gold castings, porcelain fused to metal castings or all-ceramic restorations, additional abutment teeth at an acceptable or excellent level of quality. A cumulative total of 28 units of fixed and removable prosthodontics must be completed prior to the end of the semester.

The Department of Prosthodontics considers patient experiences of less than 12 fixed abutments to be inadequate in number to attain competency in the discipline of fixed prosthodontics, regardless of quality of patient treatment. Students must complete a minimum of 12 abutments of patient treatment in fixed AND have a minimum total patient experience in fixed and removable prosthodontics no less than 28 abutments/units for graduation. Patient experiences in the range of 13 to 21 abutments of acceptable to excellent quality provide most students with an adequate number of patient treatment experiences to develop competency in fixed prosthodontics. Up to two implant crowns will count towards the number of fixed units.

The Department of Prosthodontics considers patient experiences of less than 6 units of removable treatment to be inadequate in number to attain competency in this discipline or removable prosthodontics, regardless of quality of patient treatment. Students must complete a minimum of 7 units of patient treatment in removable AND have a minimum total patient experience in fixed and removable prosthodontics no less than 28 units/units for graduation. Patient experiences in the range of 7 to 15 units of acceptable to excellent quality provide most students with an adequate number of patient treatment experiences to develop competency.

## **V Evaluation**

See Course Grading Criteria

## **VI COMPETENCY EVALUATION**

### Fixed Prosthodontics Competency:

Successful completion of this competency is a requirement for graduation. The competency is given as a portion of the Senior Mock Board Examination in the Spring Semester of the senior year. The criteria for evaluation of tooth preparation are found in the Prosthodontics Clinical Manual. Students are evaluated using a scale of 0 to 5 with a minimum of a 3.0 score as a passing grade. This process and evaluation scale is intended to be similar to that used for the Florida State Dental Board Examination.

Written Prosthodontics Examination Competency:

Successful completion of this competency is a requirement for graduation. The competency is given as a portion of the Senior Mock Board Examination in the Spring Semester of the senior year. Students must score a minimum of 75% on this written examination. The examination is clinically focused and organized using the learning objectives provided by the Florida State Dental Board Examination. The written examination covers clinically related topics in fixed prosthodontics, treatment planning and removable prosthodontics. Questions are case-based using photographs of clinical cases and laboratory procedures.

Clinical Removable Patient Competency:

Successful completion of this competency is a requirement for graduation. Grading criteria and forms are available from the Department of Prosthodontics offices, D11-6.

**VIII. Course Grading Criteria**

To get a passing grade, all students must:

- Complete at least a total of 28 restorations: ideally 17 units of fixed prosthodontics abutments and 11 units of removable prostheses, with a minimum of 13 fixed and 7 removable units. Also, complete two cast post and cores.
- Successfully complete all competency evaluations

In addition, the following criteria must be met to receive a specific grade:

Grade	Criteria
A	Complete a total of 32 restorations, with a minimum of 17 fixed and 11 removable units
B	Complete a total of 30 restorations, with a minimum of 16 fixed and 10 removable units
C	Complete a total of 28 restorations, with a minimum of 13 fixed and 7 removable units
E	Completion of less than 28 restorations Completion of less than 13 fixed units Completion of less than 7 removable units Unacceptable quality as reflected in Clinical Daily Quality Grades and QA evaluations

The final grade determination may be modified if patient profiles, clinic rotation assignments, or uncontrollable circumstances dictate.

The Department of Prosthodontics recommends the following procedures to ensure your semester grades reflect your clinical activity:

Grades are calculated based on the copies of patient encounter forms (pink forms) and treatment plan forms (yellow copies) that are received in the department offices prior to

the university semester deadline for grades. If you do not hand in your pink encounter form copies, you will not receive credit for work you have accomplished in clinic. Encounter forms can be placed in the gray metal boxes located in the student prosthodontics clinic. Check your file in the departmental offices prior to the end of the semester to be sure it is correct. Encounter forms for procedures completed in the last week of the semester should be hand carried to the departmental secretaries in order to receive credit for that semester.

## VIII REMEDIATION

Remediation for unacceptable quality of effort: Unacceptable quality of effort may be defined as students with 2 or more Clinical Daily Quality Grades of “Δ”, “Δ” or “U” (little delta, big delta, or unsatisfactory) this semester. These students’ records will be individually reviewed by the Chair, Department of Prosthodontics, or designated faculty. Student graduation may be delayed and an individual remediation program designed for students whose clinical quality of patient treatment is found to be unacceptable.

Remediation for the Three-Unit Bridge Competency is conducted by the Department of Prosthodontics. Students who score less than 3.0 overall on this competency must reattempt the procedure during regular clinical session. Supervising faculty will select the abutments to be prepared for the 3-Unit Bridge and indicate the types of tooth preparation. When students have completed the procedure the dentoform and the appropriate form will be independently graded by 2 instructors using the same criteria used previously. Students who fail the remediation activity twice will be given additional remedial activities appropriate to their needs.

Remediation for the Written Prosthodontics Competency is conducted by the Department of Prosthodontics. Students who score less than 75% overall on this competency must remediate this competency. This is the same minimal passing score as the Florida State Dental Board Examination. Remediation activities are at the discretion of the Department of Prosthodontics and include a series of videotaped lectures on principles of fixed and removable prosthodontics clinical patient care. Students must attend all remediation activities to successfully remediate this competency.

Remediation for unacceptable quantity of effort: Dental students who complete fewer than 12 abutments of clinical patient treatment in fixed are not eligible for graduation. Students who fail to complete at least a total of 28 patient experiences in fixed and removable prosthodontics are also not eligible for graduation.

Students failing any academic/clinic coursework will be awarded an “E” grade and required to remediate. To satisfactorily complete the remediation program at least a “C” grade must be earned. The final grade assigned for the course, after remediation, will be a “D.” Students failing to satisfactorily complete the remediation program will again be awarded an “E” grade and required to repeat the course.

Re-enrollment will be as soon as deemed feasible by the course director. The highest final grade attainable when repeating a course, is an “A”. Students receiving an “E”

grade for the re-enrolled course will be sent to the Student Performance Evaluation Committee (SPEC) for further action.

**IX SUMMARY TABLE**

<b>Semester</b>	<b>Course</b>	<b>Credit Hours</b>	<b>Hours (Estimate to complete)</b>
11 Senior Spring	DEN 8859L	3	86



Student # \_\_\_\_\_  
Start Check \_\_\_\_\_ (faculty)

**Anterior Porcelain Fused to Metal**

**PREPARATION**

<b>Occlusal Clearance</b> Over reduced (>1.5mm) Under reduced (<0.75mm)	<b>Incisal Reduction</b> Over reduced (>2.5mm) Under reduced (<1.5mm)		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Axial Reduction</b> Over reduced (>tip of 755R-lingual) (>2.0mm-facial) Perio. encroachment (0.5mm from attach.) Overtapered (>20 degrees) Undercut Too short(<2mm) Under reduced (>1.2mm-facial)			<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Margins</b> Unsupported enamel Indefinite Inadequate Clearance (<0.5mm)			<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Finish</b> Rough Dirty (includes dentoform) Sharp line angles			<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

**PROVISIONAL RESTORATION**

<b>Occlusion</b> Excessive Inadequate (includes dentoform) Marginal ridge discrepancy		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Contour</b> Angle of emergence not continuous Excessive height of contour Embrasures inadequate Interprox. contacts inadequate		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Marginal Adaptation</b> Open (>width of tip of perio. probe) Overextended Sub-marginated		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Finish</b> Rough or lacks polish Dirty		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

	<b>Faculty</b>	<b>Date</b>	<b>Pt. Total (40)</b>
<b>Completed</b>			

Minimum = 30 or higher

**Full Gold Crown**

Start Check \_\_\_\_\_ (faculty)

**PREPARATION**

<b>Occlusal Clearance</b> Over reduced (>1.5mm) Under reduced (<0.75mm)		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
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<b>Axial Reduction</b> Over reduced (>tip of 755R-lingual) Perio. encroachment (0.5mm from attach.) Overtapered (>20 degrees) Undercut Too short (<2 mm) Under reduced		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
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<b>Margins</b> Unsupported enamel Indefinite Inadequate Clearance (<0.5mm)		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
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<b>Finish</b> Rough Dirty (includes dentoform) Sharp line angles		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
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**PROVISIONAL RESTORATION**

<b>Occlusion</b> Excessive Inadequate (includes dentoform) Marginal ridge discrepancy		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
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<b>Contour</b> Angle of emergence not continuous Excessive height of contour Embrasures inadequate Interprox. contacts inadequate		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
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<b>Marginal Adaptation</b> Open (>width of tip of perio. probe) Overextended Sub-marginated		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
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<b>Finish</b> Rough or lacks polish Dirty		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
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	<b>Faculty</b>	<b>Date</b>	<b>Pt. Total (40)</b>
<b>Completed</b>			

Minimum = 30 or higher

Student # \_\_\_\_\_

**Anterior Porcelain  
Fused to Metal**

Start Check \_\_\_\_\_ (faculty)

**PREPARATION**

<b>Occlusal Clearance</b> Over reduced (>2.0mm) Under reduced (<1.5mm)		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
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<b>Axial Reduction</b> Over reduced (>tip of 755R-lingual) (>2.0mm-facial) Perio. Encroachment (0.5mm from attach.) Overtapered (>20degrees) Undercut Too short (<2 mm) Under reduced (>1.2mm-facial)		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
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<b>Margins</b> Unsupported enamel Indefinite Inadequate Clearance (<0.5mm)		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
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<b>Finish</b> Rough Dirty (includes dentoform) Sharp line angles		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
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**PROVISIONAL RESTORATION**

<b>Occlusion</b> Excessive Inadequate (includes dentoform) Marginal ridge discrepancy		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
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<b>Contour</b> Angle of emergence not continuous Excessive height of contour Embrasures inadequate Interprox. contacts inadequate		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
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<b>Marginal Adaptation</b> Open (>width of tip of perio. probe) Overextended Sub-marginated		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
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<b>Finish</b> Rough or lacks polish Dirty		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
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	<b>Faculty</b>	<b>Date</b>	<b>Pt. Total (40)</b>
<b>Completed</b>			

Minimum = 30 or higher

**PR-2**  
**Fixed and Removable Prosthodontic OSCE Competency**  
**Description**

During the Spring semester of the Senior year, all senior students must successfully complete a written Objective Structured Competency Examination conducted as part of the Senior Mock Board examination. This case-based 40-50 question timed station examination uses photographs of simulated patient cases to test students' understanding of prosthodontics concepts. Students who do not score 75% or above on this examination are required to remediate this examination by attending remediation sessions in fixed, complete denture and removable partial denture prosthodontics.

**University of Florida College of Dentistry  
PR-3 Mock Board Examination (and Prosthodontic Three-Unit Bridge Competency)**

**Anterior and Posterior Abutment/Preparation & Provisional**

*Criteria*

Preparation of a tooth for an abutment on a mannequin:

1. Preparation:
  - a. outline form
    1. all prepared surfaces smooth and absent of all undercuts
  - b. depth
    1. occlusal reduction
    2. axial reduction
  - c. retention
    1. all axial walls draw from gingival margin
  - d. gingival bevel if indicated by the assigned preparation
  - e. mutilation of opposing or adjacent teeth

Comments (Prep)

- 0 No comment
- 1 Functional Anatomy
- 2 Proximal Contour
- 3 Contact
- 4 Margin
- 5 Gingival Overhand
- 6 Color Match
- 7 Management of Soft Tissue
- 8 Mutilation of adjacent teeth

*Criteria*

Provisional bridge on a mannequin:

1. Occlusion
  - a. Harmonious design occlusal
2. Contour
  - a. Angle of emergence
  - b. Embrasures
  - c. Interprox. Contacts
3. Marginal adaptation
  - a. all margin closed
4. Finish
  - a. smooth and clean

Comments (Prov)

- 0 No comment
- 1 Margins
- 2 Proximal Contour
- 3 Occlusion
- 4 Embrasures
- 5 Pontic Form

It is the intent of the College that each of the criteria are to be accorded equal importance in grading. Equal importance does not mean that each criteria has a numerical or point value but means that any one of the criteria, if missed to a severe enough degree so as to render the completed procedure potentially useless or harmful to the patient in the judgement of the examiner, could result in a failing grade on the procedure. The criteria do not have any assigned numerical or point value but are to be utilized to making a holistic evaluation of the procedure. However, a grade of zero (0) is mandatory if the preparation or restoration is prepared or attempted to be prepared on the wrong tooth or wrong surface; if interproximal contact has not been reestablished; gross overhang; or if the student fails to attempt of complete the procedure.

<p>#3</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">EXAMINER I.D. NO.</div>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Preparation GRADE</td> <td style="width: 15%;"></td> </tr> <tr> <td align="center" colspan="2"><b>0 1 2 3 4 5</b></td> </tr> <tr> <td>Provisional GRADE</td> <td></td> </tr> <tr> <td align="center" colspan="2"><b>0 1 2 3 4 5</b></td> </tr> </table>	Preparation GRADE		<b>0 1 2 3 4 5</b>		Provisional GRADE		<b>0 1 2 3 4 5</b>		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">COMMENT NO (S)</td> <td style="width: 30%;"></td> </tr> <tr> <td align="center" colspan="2"><b>0 1 2 3 4 5 6 7 8 9</b></td> </tr> <tr> <td>COMMENT NO (S)</td> <td></td> </tr> <tr> <td align="center" colspan="2"><b>0 1 2 3 4 5 6 7 8 9</b></td> </tr> </table>	COMMENT NO (S)		<b>0 1 2 3 4 5 6 7 8 9</b>		COMMENT NO (S)		<b>0 1 2 3 4 5 6 7 8 9</b>	
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**PR-4**  
**Removable Prosthodontic Competency**

I. Evaluation and Preliminary Impressions

CD: Max. Mand. Mand. RPD: Class I, Class II

Student: \_\_\_\_\_

Patient: \_\_\_\_\_

Self Evaluation Letter Grade: \_\_\_\_\_

Faculty Evaluation Letter Grade: \_\_\_\_\_

Faculty: \_\_\_\_\_

Remarks: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

II. Border Molding (1) Final Impression (2)

Student: \_\_\_\_\_

Patient: \_\_\_\_\_

Self Evaluation Letter Grade: 1) \_\_\_\_\_ 2) \_\_\_\_\_

Faculty Evaluation Letter Grade: 1) \_\_\_\_\_ 2) \_\_\_\_\_

Faculty: \_\_\_\_\_

Remarks: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

III. Jaw Relationship Record

Wax Occlusal Rims (1) Final Record (2)

Student: \_\_\_\_\_

Patient: \_\_\_\_\_

Self Evaluation Letter Grade: 1) \_\_\_\_\_ 2) \_\_\_\_\_

Faculty Evaluation Letter Grade: 1) \_\_\_\_\_ 2) \_\_\_\_\_

Faculty: \_\_\_\_\_

Remarks: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IV. Wax Trial Insertion

Student: \_\_\_\_\_

Patient: \_\_\_\_\_

Self Evaluation Letter Grade: \_\_\_\_\_

Faculty Evaluation Letter Grade: \_\_\_\_\_

Faculty: (1) \_\_\_\_\_

Remarks: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IV. Wax Trial Insertion

Student: \_\_\_\_\_

Patient: \_\_\_\_\_

Self Evaluation Letter Grade: \_\_\_\_\_

Faculty Evaluation Letter Grade: \_\_\_\_\_

Faculty(2) \_\_\_\_\_

Remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

V. Final Insertion

Student: \_\_\_\_\_

Patient: \_\_\_\_\_

Self Evaluation Letter Grade: \_\_\_\_\_

Faculty Evaluation Letter Grade: \_\_\_\_\_

Faculty:(1) \_\_\_\_\_

Remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

V. Final Insertion

Student: \_\_\_\_\_

Patient: \_\_\_\_\_

Self Evaluation Letter Grade: \_\_\_\_\_

Faculty Evaluation Letter Grade: \_\_\_\_\_

Faculty:(2) \_\_\_\_\_

Remarks: \_\_\_\_\_

\_\_\_\_\_

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