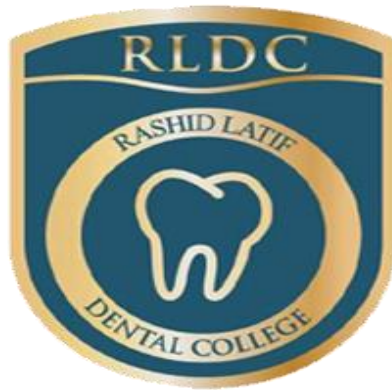
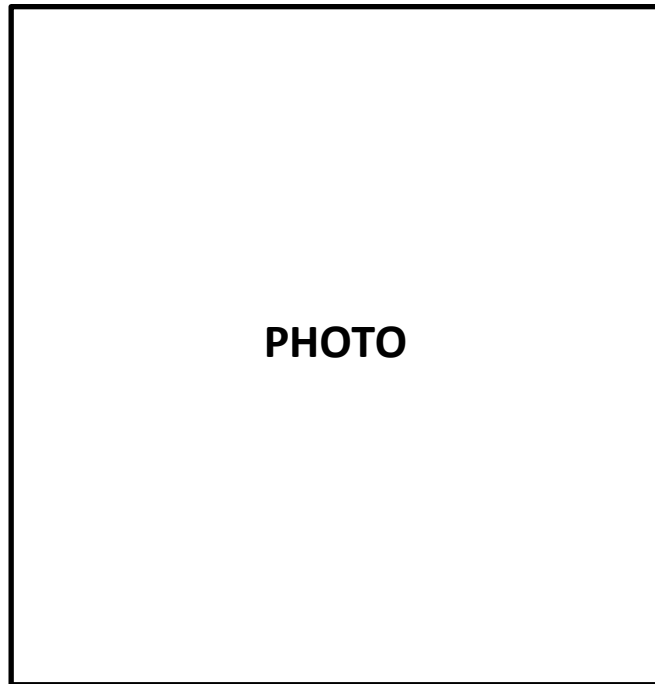




Clinical Foundation Rotation Clerkship

LOGBOOK - YEAR 2

Student Profile



Roll No: _____

Name: _____

S/O D/O: _____

Address: _____

Phone: _____

Email: _____

Batch: _____

Mission & Vision

MISSION:

To educate dental students with the knowledge, clinical skills, and professional values required to address oral health needs while fostering ethical and patient-centered practice.

VISION:

To prepare competent dental professionals through hands-on clinical training, structured teaching standards, and ethical patient care.

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LIST OF ABBREVIATIONS

Abbreviations	Subjects
UHS	University of Health Sciences
BDS	Bachelor of Dental Surgery
PRISME	Professionalism, Research, Informatics, Social Responsibility and Accountability, Management & Entrepreneurship, Ethics Evidence Based Dentistry
WHO	World Health Organization
A	Anatomy
AI	Artificial Intelligence
B	Biochemistry
GDC	General Dental Council
Ph	Pharmacology
P	Physiology
Pa	Pathology
OB	Oral Biology
OP	Oral Pathology
CD	Community Dentistry
OD	Operative Dentistry
AIMA	American Medical Informatics Association
AMEE	
BhS	Behavioral Sciences
CNS	Central Nervous System
GIT	Gastrointestinal Tract
CVS	Cardiovascular System
TMJ	Temporomandibular Joint
CBC	Complete Blood Count
ESR	Erythrocyte Sedimentation Rate

PCR	Polymerase Chain Reaction
ED50	Median Effective Dose
LD50	Median Lethal Dose
TD50	Median Toxic Dose
AUC	Area Under Curve
MCV	Mean Corpuscular Volume
MCH	Mean Corpuscular Hemoglobin
MCHC	Mean Corpuscular Hemoglobin Concentration
Na	Sodium
K	Potassium
DNA	Deoxyribonucleic Acid
TORCH	Toxoplasmosis, Other, Rubella, Cytomegalovirus, Herpes simplex
CF	Craniofacial
CFII	Craniofacial II
Car	Cariology
DEJ	Dentin enamel Junction
HERS	Hertwig's Epithelial Root Sheath
FDI	Fédération Dental International
GAGs	Glycosaminoglycans
EFA	Essential Fatty Acids
Hb	Hemoglobin
HbA1c	Glycated Hemoglobin
ATP	Adenosine Triphosphate
RBC	Red Blood Cell
NMJ	Neuromuscular Junction
ID50	Median Infectious Dose
RCTs	Randomized Control Trials

PREAMBLE

The aim of dental education is to prepare graduates who can provide safe, effective, and patient-centered oral healthcare. This goal can only be achieved when dental students are holistically trained to deliver standardized patient care, incorporating diagnostic, preventive, and management skills along with effective communication and counseling abilities.

The competencies outlined by the Pakistan Medical and Dental Council (PMDC) for a graduating dentist include:

- Care Provider
- Decision Maker
- Communicator
- Community Leader

These competencies can only be developed through a structured and comprehensive clinical training program. The purpose of this document is to outline the UHS Clinical Clerkship framework for BDS students. This program is designed as a vertically integrated module spanning all four years of dental education. Recognizing the diversity among dental colleges affiliated with UHS, this framework has been designed with flexibility so that each institution can adapt it to its available resources and clinical settings. We are confident that this step will promote uniformity in clinical training and enhance the overall quality of dental education across UHS-affiliated colleges.

How to use this logbook

Each clinical skill has an entry in this logbook along with the checklist to be filled by the supervisor.

Number of entries per skill must be mentioned in the modular study guides.

The Clinical supervisor must tick all boxes deemed fulfilled and give feedback to the student regarding their performance.

BLOCK 4

CHECKLIST FOR INTERPRETATION OF CBC LABORATORY REPORTS

CHECKLIST FOR INTERPRETATION OF CBC LABORATORY REPORTS (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	SCORE
<u>Expected competency</u> Correctly interpret CBC results relevant to dental treatment risk. <u>Performance indicator (skills):</u> ➤ States normal ranges: • Hb: 12–16 g/dL (female), 13–18 g/dL (male) • WBC: 4,000–11,000 /μL • Platelets: 150,000–400,000 /μL ➤ Identifies abnormal values: • Anemia • Leukopenia • Thrombocytopenia ➤ Recognize the risk: • Implications for bleeding risk, infection risk, and healing potential	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

Place a “**V**” in case box if step/task is **performed satisfactorily**, an “**X**” if it is **not performed**.

Satisfactorily, or N/O if not observed.

Satisfactory: Performs the step or task according to the standard procedure or guidelines

Unsatisfactory: Unable to perform the step or task according to the standard procedure or guidelines

CHECKLIST FOR INTERPRETATION OF LFTs LABORATORY REPORTS

CHECKLIST FOR INTERPRETATION OF LFTs LABORATORY REPORTS (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	SCORE
<u>Expected competency</u> Correctly interpret LFTs results relevant to dental treatment risk. <u>Performance indicator (skills):</u> ➤ States normal ranges: • ALT: 7–56 U/L • AST: 10–40 U/L • ALP: 44–147 U/L • Bilirubin total: 0.3–1.2 mg/dL ➤ Identifies abnormal values: • Elevated enzymes • Hyperbilirubinemia ➤ Recognize the risk: • Relates results to bleeding risk, drug metabolism, and liver disease implications for dental procedures	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

Place a “**V**” in case box if step/task is **performed satisfactorily**, an “**X**” if it is **not performed**.

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CHECKLIST FOR INTERPRETATION OF RFTs LABORATORY REPORTS

CHECKLIST FOR INTERPRETATION OF RFTs LABORATORY REPORTS (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	SCORE
<u>Expected competency</u> Correctly interpret RFTs results relevant to dental treatment risk. <u>Performance indicator (skills):</u> ➤ States normal ranges: • Serum creatinine: 0.6–1.3 mg/dl • BUN: 7–20 mg/dL • eGFR: ≥90 mL/min/1.73m² ➤ Identifies abnormal values: • Renal insufficiency • Chronic kidney disease ➤ Recognize the risk: • Implications for drug dosing bleeding risk, infection risk, and healing potential	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

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CHECKLIST FOR INTERPRETATION OF BT REPORTS

CHECKLIST FOR INTERPRETATION OF BT REPORTS (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	SCORE
<u>Expected competency</u> Correctly interpret BT results relevant to dental treatment risk. <u>Performance indicator</u> <u>(skills):</u> • 2–7 minutes (Ivy method) ➤ Identifies abnormal values: • Prolonged BT (>7 min) → platelet dysfunction, von-Willebrand disease • Shortened BT (<2 min) → rarely significant ➤ Relates results to primary hemostasis and platelet function ➤ Recognize the risk: • Implications for invasive dental procedure	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

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Satisfactorily, or N/O if not observed.

Satisfactory: Performs the step or task according to the standard procedure or guidelines

Unsatisfactory: Unable to perform the step or task according to the standard procedure or guidelines

CHECKLIST FOR INTERPRETATION OF CT REPORTS

CHECKLIST FOR INTERPRETATION OF CT REPORTS (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	SCORE
<u>Expected competency</u> Correctly interpret CT results relevant to dental treatment risk. <u>Performance indicator (skills):</u> • Capillary tube method: 3–6 minutes • Lee–White method: 5–15 minutes ➤ Identifies abnormal values: • Prolonged CT (>6 min capillary, >15 min Lee–White) • Shortened CT (<3 min capillary, <5 min Lee–White) ➤ Relates results to coagulation pathways ➤ Recognize the risk: • Implications for invasive dental procedure	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

Place a “V” in case box if step/task is **performed satisfactorily**, an “X” if it is **not performed**.

Satisfactorily, or N/O if not observed.

Satisfactory: Performs the step or task according to the standard procedure or guidelines

Unsatisfactory: Unable to perform the step or task according to the standard procedure or guidelines

CHECKLIST FOR INTERPRETATION OF PT LABORATORY REPORTS

CHECKLIST FOR INTERPRETATION OF PT LABORATORY REPORTS (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	SCORE
<u>Expected competency</u> Correctly interpret PT results relevant to dental treatment risk. <u>Performance indicator (skills):</u> ➤ States normal ranges: • 11–13.5 seconds ➤ Identifies abnormal values: • (>13.5 sec) • Relates abnormal PT to bleeding risk and anticoagulant therapy ➤ Recognize the risk: • Implications for bleeding risk, and anticoagulation therapy	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

Place a “**V**” in case box if step/task is **performed satisfactorily**, an “**X**” if it is **not performed**.

Satisfactorily, or N/O if not observed.

Satisfactory: Performs the step or task according to the standard procedure or guidelines

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CHECKLIST FOR INTERPRETATION OF APPT LABORATORY REPORTS

CHECKLIST FOR INTERPRETATION OF APPT LABORATORY REPORTS (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	SCORE
<u>Expected competency</u> Correctly interpret APPT results relevant to dental treatment risk. <u>Performance indicator (skills):</u> ➤ States normal ranges: • 25–35 seconds ➤ Identifies abnormal values: • (>35 sec) • Relates abnormal results to coagulation disorders or heparin therapy ➤ Recognize the risk: • Implications for invasive dental procedure	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

Place a “V” in case box if step/task is **performed satisfactorily**, an “X” if it is **not performed**.

Satisfactorily, or N/O if not observed.

Satisfactory: Performs the step or task according to the standard procedure or guidelines

Unsatisfactory: Unable to perform the step or task according to the standard procedure or guidelines

CHECKLIST FOR INTERPRETATION OF INR LABORATORY REPORTS

CHECKLIST FOR INTERPRETATION OF INR LABORATORY REPORTS (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	SCORE
<u>Expected competency</u> Correctly interpret INR results relevant to dental treatment risk. <u>Performance indicator (skills):</u> ➤ States normal ranges: • 0.8-1.2 (not on anticoagulants) ➤ Identifies abnormal values: • >1.2 (not on anticoagulants) • 2–3 (patients on warfarin) ➤ Recognizes elevated INR implications for invasive dental procedures ➤ Recognize the risk: • Implications for invasive dental procedure	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

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Satisfactorily, or N/O if not observed.

Satisfactory: Performs the step or task according to the standard procedure or guidelines

Unsatisfactory: Unable to perform the step or task according to the standard procedure or guidelines

CHECKLIST FOR PATIENT-CENTERED COMMUNICATION

CHECKLIST FOR PATIENT-CENTERED COMMUNICATION (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	SCORE
<u>Expected Competency</u> Applies patient-centered communication strategies and shared decision-making in managing medically compromised patients. <u>Getting Ready:</u> • Understands principles of patient-centered communication • Recognizes importance of shared decision-making in medically compromised patients	
Skill/Activity performed satisfactorily	
<u>The Procedure:</u> • Greets patient respectfully and establishes rapport • Uses open-ended questions to explore patient concerns • Listens actively without interruption • Explains condition and management in clear, simple language • Involves patient in decision-making process • Respects patient preferences and values • Confirms patient understanding (e.g., teach-back)	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

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Satisfactory: Performs the step or task according to the standard procedure or guidelines

Unsatisfactory: Unable to perform the step or task according to the standard procedure or guidelines

CHECKLIST FOR COMMUNICATION IN NON- STIGMATIZING

CHECKLIST FOR COMMUNICATION IN NON-STIGMATIZING LANGUAGE (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	SCORE
<u>Expected Competency</u> Communicates diagnosis, treatment modifications, and infection control rationale in a non-stigmatizing manner. <u>Getting Ready:</u> • Understands concept of stigma in healthcare • Identifies examples of stigmatizing vs non-stigmatizing language	
Skill/Activity performed satisfactorily	
<u>The Procedure:</u> • Uses respectful and neutral language throughout interaction • Avoids judgmental or blaming statements • Explains diagnosis sensitively and clearly • Communicates treatment modifications without causing fear or shame • Explains infection control measures with rationale • Maintains patient dignity and confidentiality	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

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Satisfactorily, or N/O if not observed.

Satisfactory: Performs the step or task according to the standard procedure or guidelines

Unsatisfactory: Unable to perform the step or task according to the standard procedure or guidelines

CHECKLIST FOR EMPATHY AND EMOTIONAL INTELLIGENCE

CHECKLIST FOR EMPATHY AND EMOTIONAL INTELLIGENCE (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	SCORE
<u>Expected Competency</u> Applies empathy and emotional intelligence during patient interactions and role plays. <u>Getting Ready:</u> • Understands components of empathy and emotional intelligence • Recognizes importance of empathy in patient care	
Skill/Activity performed satisfactorily	
<u>The Procedure:</u> • Demonstrates appropriate verbal and non-verbal communication • Acknowledges patient emotions appropriately • Responds with empathy (e.g., supportive statements) • Maintains appropriate eye contact and body language • Manages own emotions during interaction • Builds a supportive and trusting environment	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

Place a “V” in case box if step/task is **performed satisfactorily**, an “X” if it is **not performed**.

Satisfactorily, or N/O if not observed.

Satisfactory: Performs the step or task according to the standard procedure or guidelines

Unsatisfactory: Unable to perform the step or task according to the standard procedure or guidelines

BLOCK 5

CHECKLIST FOR HISTORY TAKING

CHECKLIST FOR HISTORY TAKING (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	Score
<u>Expected Competency</u> Demonstrates effective communication and systematic history taking. <u>Performance Indicators (Skills):</u> General Communication: • Greets patient and introduces self • Confirms patient identity. • Maintains professional demeanor. Demographic Data: • Records name, age, gender, contact, address. Chief Complaint: • Identifies main complaint clearly. History of Presenting Complaint: • Record pain history according to site, onset, character, radiation, alleviating factors, timing, exacerbating factors and severity • Identify risk factors associated with dental carries • Identify patient concerns Medical & Dental History: • Records systemic diseases, medications. • Records past dental treatments. - Summarize findings. - Confirm accuracy.	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

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Satisfactorily, or N/O if not observed.

Satisfactory: Performs the step or task according to the standard procedure or guidelines

Unsatisfactory: Unable to perform the step or task according to the standard procedure or guidelines

CHECKLIST FOR TOOTH CHARTING AND NUMBERING

CHECKLIST FOR TOOTH CHARTING & NUMBERING (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	Score
<u>Expected Competency</u> Demonstrates effective skills in tooth charting and numbering. <u>Performance Indicators (Skills):</u> • Greets patient appropriately and introduce. • Maintains professional demeanor. • Defines tooth charting and numbering correctly. • Explains purpose of tooth charting. • Identifies teeth correctly using FDI system (adults). • Identifies teeth correctly using FDI system (children). • Identifies teeth correctly using Palmer notation (adults). • Identifies teeth correctly using Palmer notation (children) • Identifies teeth correctly using Universal system (adults) • Identifies teeth correctly using Universal system (children) • Records caries, restorations, and missing teeth accurately • Marks findings correctly on chart • Maintains neat and clear charting • Explains importance in preventing wrong-tooth treatment • Explains importance for diagnosis and treatment planning • Encourages patient understanding if needed • Summarizes key points before closure	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

Place a “V” in case box if step/task is **performed satisfactorily**, an “X” if it is **not performed**.

Satisfactorily, or N/O if not observed.

Satisfactory: Performs the step or task according to the standard procedure or guidelines

Unsatisfactory: Unable to perform the step or task according to the standard procedure or guidelines

CHECKLIST FOR TOPICAL FLOURIDE APPLICATION

CHECKLIST FOR TOPICAL FLOURIDE APPLICATION (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	SCORE
<u>Expected competency</u> Applies topical fluoride safely and effectively using appropriate technique, ensuring proper tooth preparation, isolation, application, and delivery of post-procedure instructions. <u>Performance indicator (skills):</u> 1. Tooth preparation • Isolate teeth on typodont with cotton rolls. • Clean all surfaces with pumice slurry or water to remove pellicle. • Wash thoroughly and air dry. • Teeth must be dry for max fluoride contact. 2. Fluoride Application APF Gel Method • Select appropriate tray size for typodont arch. • Fill tray 1/3rd with 1.23% APF gel. • Do not overfill to prevent swallowing in real patients. • Insert tray on arch. • Keep in place for 4 minutes. • Remove tray. • Instruct patient not to rinse, eat, or drink for 30 minutes. 3. Precautions • Do not swallow APF is acidic can cause gastric irritation. LD = 5mg/kg. • Upright position in real patient, prevents swallowing. • Use suction to avoid pooling in floor of mouth. • Avoid in porcelain/ceramic restorations. • APF etches ceramic. • Use neutral NaF instead. 5. Post-operative Instructions • No eating/drinking/rinsing for 30 min. • Avoid hard/abrasive foods for 4-6 hours. • Expect temporary yellowish discoloration with APF disappears in 24 hrs.	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	
Place a “V” in case box if step/task is performed satisfactorily, an “X” if it is not performed. Satisfactorily, or N/O if not observed. Satisfactory: Performs the step or task according to the standard procedure or guidelines Unsatisfactory: Unable to perform the step or task according to the standard procedure or guidelines	

CHECKLIST FOR PATIENT AND OPERATOR POSITIONING

CHECKLIST FOR OPERATOR & PATIENT POSITIONING (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	Score
<u>Expected Competency</u> Demonstrates correct patient and operator positioning for optimal ergonomics. <u>Performance Indicators (Skills):</u> • Understands importance of positioning • Positions patient upright for extraoral exam • Supports head properly • Positions patient supine for intraoral exam • Adjusts headrest correctly • Maintains proper operator posture • Uses correct working positions (7, 9, 11, 12 o'clock) • Adjusts patient head position • Performs extraoral palpation correctly • Uses mirror and lighting properly • Ensures patient comfort throughout	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

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Satisfactorily, or N/O if not observed.

Satisfactory: Performs the step or task according to the standard procedure or guidelines

Unsatisfactory: Unable to perform the step or task according to the standard procedure or guidelines

CHECKLIST FOR EXTRA ORAL EXAMINATION

CHECKLIST FOR EXTRA ORAL EXAMINATION (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	SCORE
<u>Expected competency</u> Performs systematic extraoral examination with proper technique. <u>Performance indicator (skills):</u> Preparation: • Washes hands • Explains procedure and takes consent • Positions patient properly Inspection: • Checks facial symmetry • Identifies swellings or lesions Palpation: • Assesses tenderness, consistency • Checks lymph nodes systematically TMJ Examination: • Assesses movement, pain, clicking Conclusion: • Thanks patient • Document findings	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

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Unsatisfactory: Unable to perform the step or task according to the standard procedure or guidelines

CHECKLIST FOR INTRA ORAL EXAMINATION

CHECKLIST FOR INTRA ORAL EXAMINATION (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	SCORE
<u>Expected competency</u> Demonstrates systematic and effective intraoral examination skills. <u>Performance indicator (skills):</u> • Wash hands and wear gloves • Introduce self and explain procedure • Obtain consent • Position patient comfortably • Ensure adequate lighting • Use sterile instruments • Examine lips and labial mucosa • Examine buccal mucosa • Assess gingiva • Examine tongue • Examine floor of mouth • Examine palate • Count and identify teeth • Check caries, fractures, discoloration • Assess periodontal status • Evaluate occlusion • Record findings • Inform patient and conclude	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

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Unsatisfactory: Unable to perform the step or task according to the standard procedure or guidelines

CHECKLIST FOR APPLICATION OF PLAQUE DISCLOSING AGENT

CHECKLIST FOR PLAQUE DISCLOSING AGENT (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	SCORE
<u>Expected competency</u> Visualize and assess plaque distribution on teeth <u>Required Materials</u> • Disclosing agent • Mirror • Water <u>Performance indicator (skills):</u> Preparation • Washes hands • Explains procedure and takes consent • Positions patient properly • Instructs patient to rinse with water Application of Disclosing Agent • Applies agent correctly (tablet/solution) Instruction to student/patient • Instructs patient to rinse to remove excess Inspection & recording • Uses mirror to visualize stained plaque • Identifies plaque (blue/pink areas) • Marks plaque areas on chart/diagram • Note's location, extent, and severity • Compares findings for monitoring • Shows stained plaque areas to student/patient Conclusion - Thanks patient - Document findings	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

Place a "✓" in case box if step/task is **performed satisfactorily**, an "X" if it is **not performed**.

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BLOCK 6

CHECKLIST FOR WASTE DISPOSAL IN DENTISTRY

CHECKLIST FOR WASTE DISPOSAL IN DENTISTRY (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	SCORE
<u>Expected competency</u> Safely manages biomedical waste by correctly identifying categories and color-coded containers, using PPE, and segregating waste according to infection control protocols with minimal guidance. <u>Performance indicator (skills):</u> • Demonstrates understanding of importance of proper waste segregation in preventing cross infection • Identifies categories of dental waste (general, infectious, sharps, pharmaceutical) • Identifies color-coded waste containers used in clinic • Wears appropriate PPE before handling biomedical waste • Correctly identifies waste containers in clinical area • Segregates general waste into correct container • Segregates infectious waste into designated biomedical waste bag • Disposes sharps into puncture-resistant sharps container • Demonstrates knowledge of amalgam waste disposal protocol • Avoids recapping needles or uses single-handed scoop technique • Ensures sharps container is not overfilled and properly closed • Avoids mixing general waste with biomedical waste • Performs hand hygiene after handling biomedical waste	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

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Satisfactorily, or N/O if not observed.

Satisfactory: Performs the step or task according to the standard procedure or guidelines

Unsatisfactory: Unable to perform the step or task according to the standard procedure or guidelines

CHECKLIST FOR STERILIZATION AND DISINFECTION

CHECKLIST FOR STERILIZATION AND DISINFECTION (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	SCORE
<u>Expected competency</u> Demonstrates safe handling and basic sterilization practices by identifying instruments and methods, using PPE, and preparing and managing instruments according to standard infection control protocols with minimal guidance. <u>Performance indicator (skills):</u> • Demonstrates understanding of importance of sterilization and disinfection • Identifies instruments requiring sterilization • Names and identifies sterilization methods • Wears appropriate PPE before handling contaminated instruments • Safely handles contaminated instruments after procedure • Places contaminated instruments in designated container for transport • Avoids touching sharp ends during handling • Performs initial cleaning/rinsing before sterilization • Places instruments correctly in sterilization pouch/cassette • Checks sterilization indicator strip • Handles sterilized instruments aseptically • Performs hand hygiene after handling instruments	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

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Satisfactorily, or N/O if not observed.

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Unsatisfactory: Unable to perform the step or task according to the standard procedure or guidelines

CHECKLIST FOR NEEDLESTICK INJURY

CHECKLIST FOR NEEDLESTICK INJURY (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	SCORE
<u>Expected competency</u> Recognizes and manages needlestick injuries by identifying risks, using PPE, avoiding unsafe practices, and initiating immediate first aid and reporting according to standard infection control protocols with guidance. <u>Performance indicator (skills):</u> • Demonstrates understanding of the risks associated with needlestick injuries in dental practice • Identifies instruments that commonly cause needlestick injuries (needles, scalpel blades, endodontic files, orthodontic wires) • Identifies situations where needlestick injuries may occur (during injection, recapping needles, instrument handling, waste disposal) • Wears appropriate personal protective equipment during procedures involving sharps • Recognizes that a needlestick injury has occurred and immediately stops the procedure • Performs immediate wound care • Avoids unsafe practices such as sucking the wound or aggressive squeezing • Reports the incident immediately to the supervising clinician or infection control officer • Identifies the need for documentation and incident reporting • Demonstrates understanding of post-exposure evaluation and follow-up • Performs hand hygiene after incident management	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

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Unsatisfactory: Unable to perform the step or task according to the standard procedure or guidelines

CHECKLIST FOR PRESCRIPTION WRITING

CHECKLIST FOR PRESCRIPTION WRITING (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	Score
<u>Expected Competency</u> Writes prescription that accurately include all legal components (patient info, date, and signature) while correctly selecting the generic drug name, dosage, frequency based on the patient's medical history and to produce a legible, error-free document that ensures patient safety, adhering to rational pharmacological principles. <u>Performance Indicators (Skills):</u> Header: Info includes date, prescriber's name/address/BDS title, and patient details (Full name, Age, Gender, and Address). Superscription: The symbol $\{R_x\}$ is clearly placed before the drug details. Inscription drug name: Used generic name (e.g., Amoxicillin). Strength/Form: Clearly stated (e.g., $\{500\text{mg}\}$ Capsule). Subscription: Directions to the pharmacist on the total quantity to dispense (e.g., Dispense 15 capsules). Signatura (Sig)Instructions for the patient: Route (Oral), Dose (1 cap), Frequency (8-hourly), and Duration (5 days). Pharmacology Dosage: Is correct for the patient's weight/age. No contraindications or known allergy conflicts. Ethics/Safety: Includes specific warnings (e.g., "Finish the full course" or "Take with food"). Legible handwriting. Closing: Prescriber's signature and professional registration number are included at the bottom.	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

Place a "✓" in case box if step/task is **performed satisfactorily**, an "X" if it is **not performed**.

Satisfactorily, or N/O if not observed.

Satisfactory: Performs the step or task according to the standard procedure or guidelines

Unsatisfactory: Unable to perform the step or task according to the standard procedure or guidelines

CHECKLIST FOR MEASUREMENT OF RESPIRATORY RATE

CHECKLIST FOR MEASUREMENT OF RESPIRATORY RATE (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	SCORE
<u>Expected competency</u> Correctly assess respiratory rate and identify abnormal breathing patterns relevant to clinical risk. <u>Performance indicator (skills):</u> States normal physiological ranges: • Adult: 12–20 breaths/min • Neonate: 30–60/min • Infant: 30–40/min • Toddler: 24–30/min • School age: 18–25/min Identifies abnormal values: • Tachypnea: >20/min (adult) • Bradypnea: <12/min • Apnea: Absent breathing Measures respiratory rate correctly: • Ensure patient is at rest (no recent exertion) • Observe chest/abdominal movement without alerting patient • Count respirations for: ➤ 30 sec × 2 (routine) ➤ 60 sec if irregular Note: • Rate • Rhythm • Depth • Effort	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

Place a “**v**” in case box if step/task is **performed satisfactorily**, an “**X**” if it is **not performed**.

Satisfactorily, or N/O if not observed.

Satisfactory: Performs the step or task according to the standard procedure or guidelines

Unsatisfactory: Unable to perform the step or task according to the standard procedure or guidelines

CHECKLIST FOR INHALER AND SPACER USE

CHECKLIST FOR INHALER AND SPACER USE (Some of the following steps/tasks should be performed simultaneously.)	CASES
STEP/TASK	SCORE
<u>Expected competency</u> Correctly demonstrate inhaler/spacer technique and counsel patient for effective drug delivery. <u>Performance indicator (skills):</u> - States device types: MDI, DPI, MDI with spacer 1: Demonstrates MDI technique: - Shake inhaler → exhale → seal lips → slow inhalation + actuation → hold breath 10 sec → wait 30–60 sec 2: Demonstrates spacer technique - Attach inhaler → 1 puff into spacer → slow deep breath or 5–6 tidal breaths → hold breath 3: Demonstrates DPI technique - Load dose → exhale away → forceful deep inhalation → hold breath 4: Counsels patient - Teach-back method, adherence, rinse mouth after steroids, correct timing 5: Identifies errors - Poor coordination, no shaking, fast inhalation, no breath-hold 6: Recognizes risks - Poor control, treatment failure, increased exacerbations	
Skill/Activity performed satisfactorily	
Signature Of Supervisor	
Date Observed	

Place a “V” in case box if step/task is **performed satisfactorily**, an “X” if it is **not performed**.

Satisfactorily, or N/O if not observed.

Satisfactory: Performs the step or task according to the standard procedure or guidelines

Unsatisfactory: Unable to perform the step or task according to the standard procedure or guidelines