

# Chen Sitong (1460683)

## Item Summary

Date	Role	Items	No. of Patients
20-01-2025	Operator		Patient FTA
22-01-2025	Operator	022, 121, 114, 222	1
23-01-2025	Operator	022, 141, 221, 024, 013	2
28-01-2025	Observation		0
29-01-2025	Operator	141, 221, 114, 222	2
30-01-2025	Operator	141, 012	2
03-02-2025	Operator	141, 123, 221, 114	2
03-02-2025	Support Operator		0
05-02-2025	Operator	141, 012, 221, 114	1

# Form 1: 20-01-2025

## Role: Operator

### Student Reflection

Only one patient booked by DTC and he FTA'ed. Spent the session organising my books and calling patients. Followed up DTC books issue with the DTC team.

### Edu Feedback

Thanks for utilising your time to organise your future appointment books. Hopefully there's no FTA's or gaps in the appt books going forward

### Entrustment

Lvl 2: Student can be trusted to perform this task with direct supervision

### Clinical Incident

No

### Edu Name

Elise Vo

### Evaluation

Key Competency	Marking Checklist	Student	Educator
Knowledge	Demonstrates the scientific and clinical knowledge requires throughout the session	NA	NA
Competence	Treatment undertaken at a standard that is consistent with the student's level of education	NA	NA
Patient-Centered Care	Provides patient-centered care including through shared decision making	NA	NA
Timeliness	Manages time to complete clinical procedures and dental records within the allocated timeframe	NA	NA
Patient Communication	Communicates clearly and effectively by adapting verbal and non-verbal communication cues based on cultural, contextual and/or personal factors	NA	NA
Staff/Peer Communication	Is respectful towards colleagues and peers. Consults and seeks advice from colleagues/supervisors where appropriate	NA	NA
Professional behaviour and ethical conduct	Upholds professional standards of behaviour which includes but is not limited to: being punctual, organised and prepared for appointments, complying with dress code and PPE requirements. Maintains clear and accurate health records	NA	NA
Minimising risk	Complies with OHS and infection control standards. Minimises risks to clients, team members and themselves in practice. Seeks the appropriate approvals to carry out care as per agency requirements.	NA	NA

# Form 2: 22-01-2025

## Role: Operator

### Patient 1

Details for Patient 1 - Pt.1 Details #1 - Patient 1 - Pt ID: 1036695  
Details for Patient 1 - Pt.1 Details #2 - Patient 1 - Pt Age: 76.0  
Details for Patient 1 - Pt.1 Details #3 - Patient 1 - Visit #: 1  
Details for Patient 1 - Procedure Difficulty - Patient 1: Routine  
Details for Patient 1 - Priority Group - Patient 1: No

### Student Reflection

Originally had no patient booked hence took a patient from a sick student to be seen at 10:15am. Spent the 8:45am session to complete prelearnings for ORAL30001. Clinical hand-over adv for review of Q1, Q4, soft tissues and oral hygiene, as well as debridement of Q2, Q3 and FM fluoride application. Previous student noted pain and therefore a pain history review was conducted as well. Important to remove soft debris from interproximal spaces Debridement of Q2, 3 and sensitivity, thought 26D was because of bone loss but it was cavitated and supervisor did vitality test: TTP +. Learned that important to chase up pain history and perform vitality tests even though the patient says pain is gone. DDS referral required to restore root caries; used duraphat topical application and flairesse FM application PA was taken but film was placed vertically and some discomfort was caused, but radiograph of diagnostic quality

### Edu Feedback

With all clean, please leave the mouth clean.

### Entrustment

Lvl 2: Student can be trusted to perform this task with direct supervision

### Clinical Incident

No

### Edu Name

Abella Huynh

### Evaluation

Key Competency	Marking Checklist	Student	Educator
Knowledge	Demonstrates the scientific and clinical knowledge requires throughout the session	Yes	Yes
Competence	Treatment undertaken at a standard that is consistent with the student's level of education	Yes	No
Patient-Centered Care	Provides patient-centered care including through shared decision making	Yes	Yes
Timeliness	Manages time to complete clinical procedures and dental records within the allocated timeframe	No	Yes
Patient Communication	Communicates clearly and effectively by adapting verbal and non-verbal communication cues based on cultural, contextual and/or personal factors	Yes	Yes
Staff/Peer Communication	Is respectful towards colleagues and peers. Consults and seeks advice from colleagues/supervisors where appropriate	Yes	Yes
Professional behaviour and ethical conduct	Upholds professional standards of behaviour which includes but is not limited to: being punctual, organised and prepared for appointments, complying with dress code and PPE requirements. Maintains clear and accurate health records	Yes	Yes
Minimising risk	Complies with OHS and infection control standards. Minimises risks to clients, team members and themselves in practice. Seeks the appropriate approvals to carry out care as per agency requirements.	Yes	Yes

# Form 3: 23-01-2025

***Role: Operator***

## ***Patient 1***

Details for Patient 1 - Pt.1 Details #1 - Patient 1 - Pt ID: 6344720

Details for Patient 1 - Pt.1 Details #2 - Patient 1 - Pt Age: 75.0

Details for Patient 1 - Pt.1 Details #3 - Patient 1 - Visit #: 1

Details for Patient 1 - Procedure Difficulty - Patient 1: Complex

Details for Patient 1 - Priority Group - Patient 1: No

## ***Patient 2***

Details for Patient 2 - Pt.2 Details #1 - Patient 2 - Pt ID: 6338827

Details for Patient 2 - Pt.2 Details #2 - Patient 2 - Pt Age: 51.0

Details for Patient 2 - Pt.2 Details #3 - Patient 2 - Visit #: 1

Details for Patient 2 - Procedure Difficulty - Patient 2: Routine

Details for Patient 2 - Priority Group - Patient 2: No

## ***Student Reflection***

overall time management should be better. For chatty patients need to know when to stop them and perform exam/ tx 1st pt - 16 TTP+, no radiographic changes + pt says symptoms have reduced and therefore can be monitored - 26M pocket: although the patient's oral hygiene is good and there is minimal plaque and mild localised calculus in sextant 5, pt has 50% bone loss in 26M and therefore pocket still exists. It can be improved but will require pt to use piksters frequently to ensure no subgingival calc forms 2nd pt - need to confirm with interpreter for their attendance - perio chart: got 2mm difference with supervisor; acceptable but still indicates that I have not been reaching the base of the pocket - when there is a lot of loss of tooth structure/ teeth, bridges are not the best option to fill the gap; need to seek help from dentist for tx option - enamel cavitation means caries. When there is catching in the pits and fissures, "deep pits and fissures" should be used

## ***Edu Feedback***

Some complex cases - first patient had a challenging presenting complaint and the second had a challenging dentition however really important that we build knowledge around these kinds of cases as we can encounter them regularly. In particular - interpreting presenting complaints and special investigations with patient 1 and understanding tooth replacement options and referral pathways in patient 2. I would strongly suggest you continue exploring these cases, use them to identify knowledge gaps and review these.

## ***Entrustment***

Lvl 2: Student can be trusted to perform this task with direct supervision

## ***Clinical Incident***

No

## ***Edu Name***

Monica Ramzy

## ***Evaluation***

Key Competency	Marking Checklist	Student	Educator
Knowledge	Demonstrates the scientific and clinical knowledge requires throughout the session	Yes	No
Competence	Treatment undertaken at a standard that is consistent with the student's level of education	No	No
Patient-Centered Care	Provides patient-centered care including through shared decision making	Yes	Yes
Timeliness	Manages time to complete clinical procedures and dental records within the allocated timeframe	No	No
Patient Communication	Communicates clearly and effectively by adapting verbal and non-verbal communication cues based on cultural, contextual and/or personal factors	Yes	NA
Staff/Peer Communication	Is respectful towards colleagues and peers. Consults and seeks advice from colleagues/supervisors where appropriate	Yes	Yes
Professional behaviour and ethical conduct	Upholds professional standards of behaviour which includes but is not limited to: being punctual, organised and prepared for appointments, complying with dress code and PPE requirements. Maintains clear and accurate health records	Yes	Yes
Minimising risk	Complies with OHS and infection control standards. Minimises risks to clients, team members and themselves in practice. Seeks the appropriate approvals to carry out care as per agency requirements.	Yes	Yes

# Form 4: 28-01-2025

***Role: Observation***

## ***Obs Feedback***

Ortho observation at MDC When reviewing ortho pt, check for - presence of calculus, overall oral hygiene - presence of caries - teeth movement, are the teeth still in the midline of the face? Sulfate brackets are used and elastic bands wont be used on the brackets. Wires have three dots in the front indicating the position of the midline. Red dye is used to ensure the position of the wire gets placed onto desired tooth, and wires can be bent if there are teeth that are superior to the other teeth on arch Steel wires more stiff and therefore cannot be placed into the mouth if teeth are still not aligned. NiTi is more flexible and used before steel. Power chain (PC) used to speed up closing gaps. Ortho department takes clinical photos every visit for records. OPG & impacted adult 3s- baby canines can be taken out Herbst appliance- kept in 6-9 months to treat class 2 occlusion in pads. shims placed on each appt to alter occlusion and eventually shift mandible forward for 2mm and promote growth of lower jaw.

## ***Obs Edu Name***

Kamel saeed

# Form 5: 29-01-2025

***Role: Operator***

## ***Patient 1***

Details for Patient 1 - Pt.1 Details #1 - Patient 1 - Pt ID: 6203290

Details for Patient 1 - Pt.1 Details #2 - Patient 1 - Pt Age: 69.0

Details for Patient 1 - Pt.1 Details #3 - Patient 1 - Visit #: 1

Details for Patient 1 - Procedure Difficulty - Patient 1: Complex

Details for Patient 1 - Priority Group - Patient 1: No

## ***Patient 2***

Details for Patient 2 - Pt.2 Details #1 - Patient 2 - Pt ID: 6338827

Details for Patient 2 - Pt.2 Details #2 - Patient 2 - Pt Age: 52.0

Details for Patient 2 - Pt.2 Details #3 - Patient 2 - Visit #: 2

Details for Patient 2 - Procedure Difficulty - Patient 2: Complex

Details for Patient 2 - Priority Group - Patient 2: No

## ***Student Reflection***

Overall: need to think about tooth replacement options rather than being too focused on perio. In the future need to keep in mind of occlusion of the patients if they have missing teeth: implants (?), dentures, crowns and bridges(?). Although cost may be a concern for public patients, still need to let them know about the option of going into private for implants Perio review: Saw heavy calculus build-up 31, 41 interproximal and knew OH wasn't up to date. Asked pt the pikster size she had been using between these two teeth. She was not cleaning using the brown pikster that I gave her in the previous appt as she mixed up the two different sizes. Another OHI was given to ensure cleaning in 31, 41 interproximal. APPT 2: Debridement of Q1, 2 with 4R/4L, Graceys and sickle. OPG. Discussed tooth replacement options- implants elsewhere, dentures in DTC. Didn't realise 44 RCT was exposed and could cause re-infection if left. Therefore informed pt that it will need to be extracted. Pt is happy.

## ***Edu Feedback***

Keep working on thinking more broadly when treatment planning. For the second patient: replacement of lower missing dentition, 44 exposed RCT and missing 47 crown. - You want to replace the missing teeth with denture. Need to think about how the dentures will hold, i.e. need whole teeth not broken ones. - 44 exposed RCT: keep and redo RCT with specialist endo OR remove/exo - 47 missing crown: needs assessment for new crown from dentist Perhaps list out the the diagnoses and then write a treatment plan that will address ALL the problems.

## ***Entrustment***

Lvl 2: Student can be trusted to perform this task with direct supervision

## ***Clinical Incident***

No

## ***Edu Name***

Abella Huynh

## ***Evaluation***

Key Competency	Marking Checklist	Student	Educator
Knowledge	Demonstrates the scientific and clinical knowledge requires throughout the session	No	No
Competence	Treatment undertaken at a standard that is consistent with the student's level of education	Yes	Yes
Patient-Centered Care	Provides patient-centered care including through shared decision making	Yes	Yes
Timeliness	Manages time to complete clinical procedures and dental records within the allocated timeframe	Yes	Yes
Patient Communication	Communicates clearly and effectively by adapting verbal and non-verbal communication cues based on cultural, contextual and/or personal factors	Yes	Yes
Staff/Peer Communication	Is respectful towards colleagues and peers. Consults and seeks advice from colleagues/supervisors where appropriate	Yes	Yes
Professional behaviour and ethical conduct	Upholds professional standards of behaviour which includes but is not limited to: being punctual, organised and prepared for appointments, complying with dress code and PPE requirements. Maintains clear and accurate health records	Yes	Yes
Minimising risk	Complies with OHS and infection control standards. Minimises risks to clients, team members and themselves in practice. Seeks the appropriate approvals to carry out care as per agency requirements.	Yes	Yes



# Form 6: 30-01-2025

***Role: Operator***

## ***Patient 1***

Details for Patient 1 - Pt.1 Details #1 - Patient 1 - Pt ID: 1023098

Details for Patient 1 - Pt.1 Details #2 - Patient 1 - Pt Age: 51.0

Details for Patient 1 - Pt.1 Details #3 - Patient 1 - Visit #: 1

Details for Patient 1 - Procedure Difficulty - Patient 1: Routine

Details for Patient 1 - Priority Group - Patient 1: Yes

Please select all of the applicable priority group/s for your Patient 1: Registered with mental health or disability services

## ***Patient 2***

Details for Patient 2 - Pt.2 Details #1 - Patient 2 - Pt ID: 811931

Details for Patient 2 - Pt.2 Details #2 - Patient 2 - Pt Age: 52.0

Details for Patient 2 - Pt.2 Details #3 - Patient 2 - Visit #: 1

Details for Patient 2 - Procedure Difficulty - Patient 2: Routine

Details for Patient 2 - Priority Group - Patient 2: No

## ***Student Reflection***

Overall First pt: - pt should not be given recalls if they have healthy dentitions and gingiva. Recalls given only if perio or paed's - Implant scaler was used to remove plaque around implant, as instructed by the supervisor. I've never used the scaler before but it was used according to the "V to D rule" and mission successful. Second pt: - Stage 1 grade A perio pt came in reporting that she was not aware that she had gums disease. I learned that treatment planning discussion is important rather than just booking pt in for cleans. Shadowing on 35, 36 interproximal but bitewing shows radiolucency only entered enamel. Floss didn't catch and therefore can deduce that there is no cavitation and can be remineralised. - Spent a long time to encourage with better OH at home; pt was motivated and cares about her gums disease.

## ***Edu Feedback***

good time management and making sure you looked at ohi first for each pt. good notes, nice and concise with all the information needed good session, well done

## ***Entrustment***

Lvl 3: Student can be trusted to perform this task with indirect supervision

## ***Clinical Incident***

No

## ***Edu Name***

keira venaables

## ***Evaluation***

Key Competency	Marking Checklist	Student	Educator
Knowledge	Demonstrates the scientific and clinical knowledge requires throughout the session	No	Yes
Competence	Treatment undertaken at a standard that is consistent with the student's level of education	Yes	Yes
Patient-Centered Care	Provides patient-centered care including through shared decision making	Yes	Yes
Timeliness	Manages time to complete clinical procedures and dental records within the allocated timeframe	Yes	Yes
Patient Communication	Communicates clearly and effectively by adapting verbal and non-verbal communication cues based on cultural, contextual and/or personal factors	Yes	Yes
Staff/Peer Communication	Is respectful towards colleagues and peers. Consults and seeks advice from colleagues/supervisors where appropriate	Yes	Yes
Professional behaviour and ethical conduct	Upholds professional standards of behaviour which includes but is not limited to: being punctual, organised and prepared for appointments, complying with dress code and PPE requirements. Maintains clear and accurate health records	Yes	Yes
Minimising risk	Complies with OHS and infection control standards. Minimises risks to clients, team members and themselves in practice. Seeks the appropriate approvals to carry out care as per agency requirements.	Yes	Yes

# Form 7: 03-02-2025

## Role: Operator

### Patient 2

### Student Reflection

The first pt thought her appt was at 10:15, and fortunately second pt was unable to come and hence she can be seen in second half of the session. The second pt did not inform DTC for her absence and therefore FTA letter was sent. Today's plan was to do perio chart, commence debridement and duraphat application 35 and 36 interproximal. Needed to update her mxh because she had a medication that she did not remember it last time. Pt came in with pc of pain in ULHS gum. Saw traumatic lesion because of the appearance of loss of epithelium. Deduced that it was caused by flossing and brushing too hard. Asked pt to demonstrate brushing and flossing and she was in fact doing it too abrasively. Encouraged her to be more gentle and continue cleaning; use warm salt water rinses once a day up to two weeks and symptoms will reduce gradually. Perio chart: was accurate confirmed by supervisor. Pt did complain about pain when probing but informed her that I need to get accurate readings by getting to the base of the pockets. SC/C: only did Q3. Didn't get to finish everything before supervisor came in to check but there was one area where calculus was present. Pt took a lot of calls during the appt which made me run late :/

### Edu Feedback

We should make it clear to this patient that her phone needs to be turned off or on silent otherwise, we are unable to provide efficient care. Please make sure that all additional tx to the original tx plan is justified, and consented for in the notes.

### Entrustment

Lvl 2: Student can be trusted to perform this task with direct supervision

### Clinical Incident

No

### Edu Name

Abella Huynh

### Evaluation

Key Competency	Marking Checklist	Student	Educator
Knowledge	Demonstrates the scientific and clinical knowledge requires throughout the session	Yes	Yes
Competence	Treatment undertaken at a standard that is consistent with the student's level of education	No	Yes
Patient-Centered Care	Provides patient-centered care including through shared decision making	Yes	Yes
Timeliness	Manages time to complete clinical procedures and dental records within the allocated timeframe	Yes	Yes
Patient Communication	Communicates clearly and effectively by adapting verbal and non-verbal communication cues based on cultural, contextual and/or personal factors	Yes	Yes
Staff/Peer Communication	Is respectful towards colleagues and peers. Consults and seeks advice from colleagues/supervisors where appropriate	Yes	Yes
Professional behaviour and ethical conduct	Upholds professional standards of behaviour which includes but is not limited to: being punctual, organised and prepared for appointments, complying with dress code and PPE requirements. Maintains clear and accurate health records	Yes	No
Minimising risk	Complies with OHS and infection control standards. Minimises risks to clients, team members and themselves in practice. Seeks the appropriate approvals to carry out care as per agency requirements.	Yes	Yes

# Form 8: 03-02-2025

## *Role: Support Operator*

### ***SO Feedback***

COE for both patients. First one had complex mx and took a long time to record. LA with adrenaline is contraindicated for patients with muscular dystrophy

### ***SO Edu Feedback***

Student was helpful and attentive. Actively participating during the appointment

### ***SO Edu Name***

Carol Oliveira

# Form 9: 05-02-2025

## Role: Operator

### Patient 1

Details for Patient 1 - Pt.1 Details #1 - Patient 1 - Pt ID: 6228314  
Details for Patient 1 - Pt.1 Details #2 - Patient 1 - Pt Age: 53.0  
Details for Patient 1 - Pt.1 Details #3 - Patient 1 - Visit #: 1  
Details for Patient 1 - Procedure Difficulty - Patient 1: Routine  
Details for Patient 1 - Priority Group - Patient 1: No

### Student Reflection

First patient FTAd, and spent the session assisting other students. Learned that even for anterior lingual restos a clear strip can be helpful as doing the resto free-hand can cause the primer & bond play to be cured interproximally and causing closed contact. Second patient had bad back pain and hence a pillow was provided. I did an exam, full perio chart, FM clean and OHI in one half of the session, which challenged my time-management. I also gained confidence in time-management after this session. Using superfloss under crowns and bridges was challenging because the patient had a lot of salivation. But I learned that drying the crowns and bridges completely before inserting superfloss helpful in preventing softening of the floss.

### Edu Feedback

Well done today completing a straightforward check up and clean with perio chart in 90 mins!

### Entrustment

Lvl 3: Student can be trusted to perform this task with indirect supervision

### Clinical Incident

No

### Edu Name

Abella Huynh

### Evaluation

Key Competency	Marking Checklist	Student	Educator
Knowledge	Demonstrates the scientific and clinical knowledge requires throughout the session	Yes	Yes
Competence	Treatment undertaken at a standard that is consistent with the student's level of education	Yes	Yes
Patient-Centered Care	Provides patient-centered care including through shared decision making	Yes	Yes
Timeliness	Manages time to complete clinical procedures and dental records within the allocated timeframe	Yes	Yes
Patient Communication	Communicates clearly and effectively by adapting verbal and non-verbal communication cues based on cultural, contextual and/or personal factors	Yes	Yes
Staff/Peer Communication	Is respectful towards colleagues and peers. Consults and seeks advice from colleagues/supervisors where appropriate	Yes	Yes
Professional behaviour and ethical conduct	Upholds professional standards of behaviour which includes but is not limited to: being punctual, organised and prepared for appointments, complying with dress code and PPE requirements. Maintains clear and accurate health records	Yes	Yes
Minimising risk	Complies with OHS and infection control standards. Minimises risks to clients, team members and themselves in practice. Seeks the appropriate approvals to carry out care as per agency requirements.	Yes	Yes