



## CONTACT

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## EDUCATION

### Master of Dentistry

Griffith University

2020-2021

### Bachelor of Oral Health and Dental Science with distinction

Griffith University

2017-2019

### John Monash Science School

ATAR 99.65

2013-2015

## LANGUAGES

- English
- Malaysian/Bahasa Indonesia
- Hokkien(Chinese Dialect)

## SKILLS

### PROFESSIONAL DEVELOPMENT

- Invisalign® Go training course
- First Aid and CPR training up to date

### OTHER SKILLS

- Dental photography
- 3D printing and CAD/CAM design
- Well versed in dental software (Titanium and ISOH)

## REFEREES

References available on request

# NAMM CHAN

BORALH (DENT SC) MDENT

## PROFILE

Personable and astute dental graduate that is passionate about educating patients of all backgrounds. Looking for first time employment in a position that requires a dedicated and enthusiastic employee.

## EXPERIENCE

### STUDENT PLACEMENT

#### Southport Health Precinct | June 2021 - Current

- Improved time management skills as I provided emergency treatment to patients in a fast paced environment
- Honed my skills with performing surgical extractions and complex restorative procedures
- Received several compliments from patients about my high quality service

### DENTAL STUDENT

#### Griffith University Dental Clinic | February 2019 - June 2021

- Gained experience and confidence in all aspects of general dentistry
- Maintained a high attention to detail with excellent communication and comprehensive treatment planning skills
- Capitalized on the opportunity to learn and complete complex molar endodontic treatments under the supervision of specialist endodontists

### COMMUNITY INVOLVEMENT

#### Musgrave Hill State School | 2019

- Oral health promotion to preschool children

#### Richstone Plumbing | November 2019

- Assisted with 3D printing and CAD/CAM workflow

#### Academic Tutoring | February 2015 - 2020

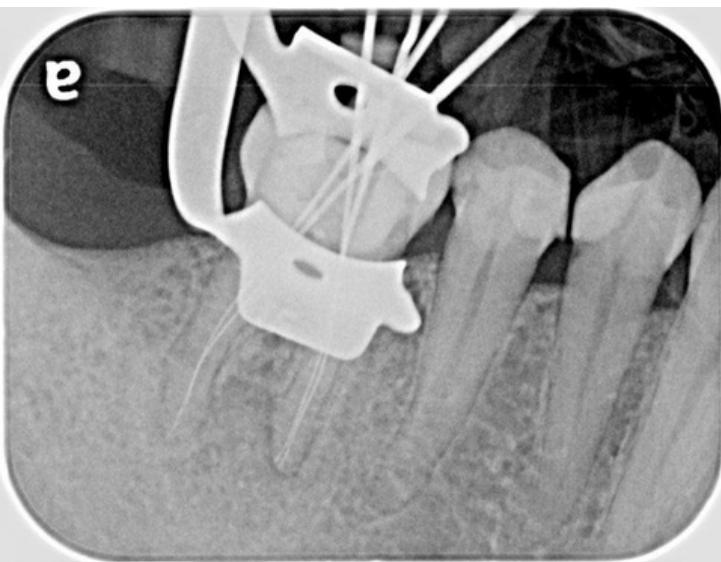
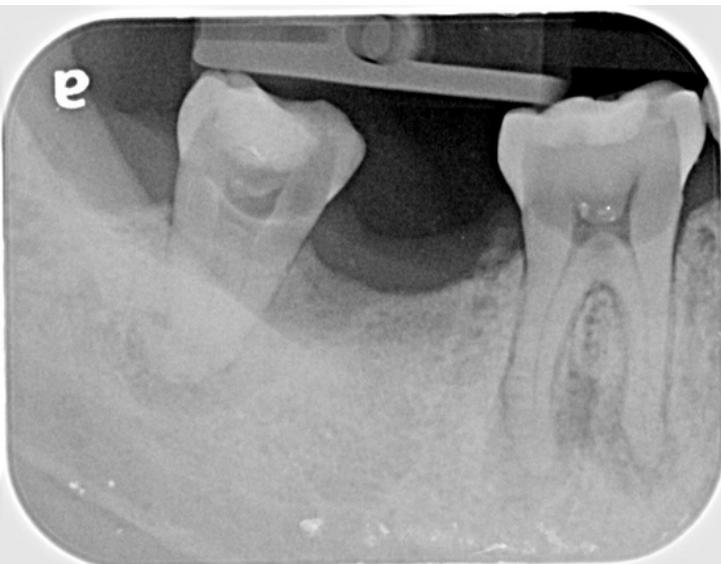
- Provided academic tutoring to high school to university students in a variety of subjects

# CLINICAL EXPERIENCE

All clinical photos and radiographs included with patient's consent

## ENDODONTICS

Completed during clinical placements



46 Irreversible Pulpitis with periapical periodontitis, 4 canals and 4 exits, all canals prepped to Protaper X2, obturated with matched GP with cold lateral condensation of accessory GPs

# CLINICAL EXPERIENCE

## ENDODONTICS

Completed during clinical placements



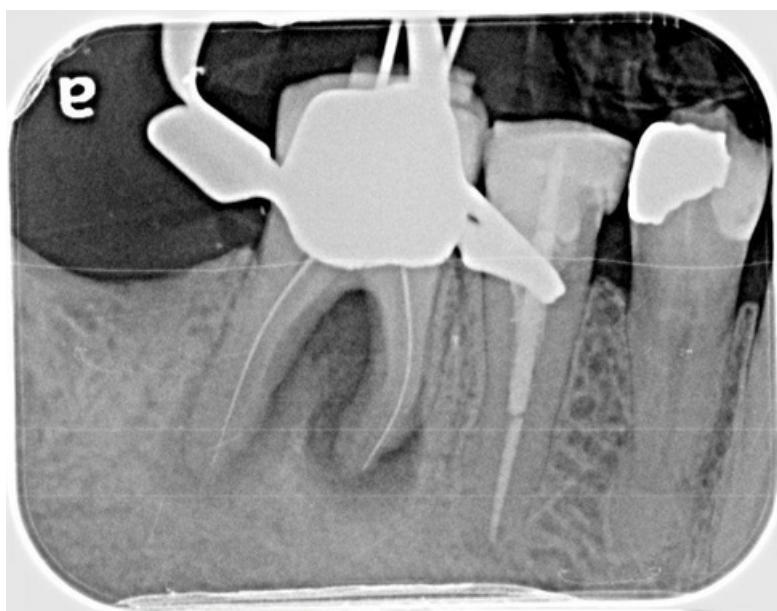
16 Irreversible Pulpitis with periapical periodontitis. Appeared to have calcified canals and pulp stone, 3 canals and 3 exits, DB and MB prepped to Protaper X2, P prepped to Protaper X3, obturated with matched GP with cold lateral condensation of accessory GPs



# CLINICAL EXPERIENCE

## ENDODONTICS

Completed during clinical placements



46 Pulpal necrosis with periapical periodontitis, 3 canals and 3 exits, Access made through existing PFM crown. All canals prepped to Protaper X2, obturated with matched GP with cold lateral condensation of accessory GPs



# CLINICAL EXPERIENCE

## ENDODONTICS

Completed during clinical placements



Previous extirpated 12. Canal prepped to Protaper X3. Obturated with matched GP with cold lateral condensation of accessory GPs

# CLINICAL EXPERIENCE

## PROSTHODONTICS

Completed during clinical placements



Cantilever PFM bridge with 25 pontic and 26 abutment. 25 was previously root treated and restored with a cast post-core crown was extracted due to marginal leakage resulting secondary caries extending to bone level and endodontic failure with periapical periodontitis. 26 was heavily restored with composite. After thorough discussion with the patient, we decided on a cantilever bridge. Supragingival margins were chosen to facilitate easy cleaning and maintenance. The margin was not visible due to low smile line. Distal margin was extended subgingivally due to extension of previous composite restoration. Pt happy with result.

# CLINICAL EXPERIENCE

## PROSTHODONTICS

Completed during clinical placements



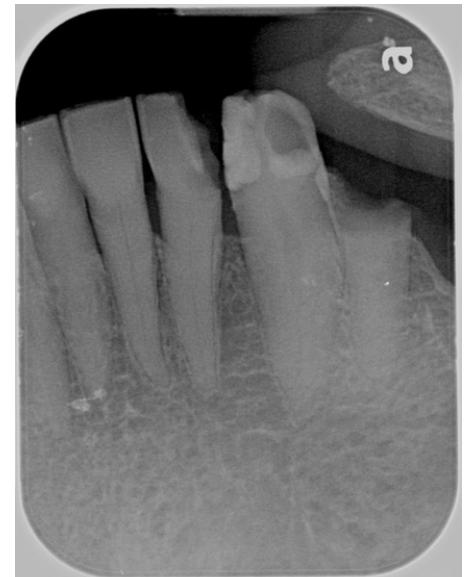
13 was previously root treated and was previously heavily restored. Cast post-core crown was decided upon due to lack of remaining tooth structure and to gain retention from intraradicular space. PFM crown fabricated and cemented to the core.



# CLINICAL EXPERIENCE

## PROSTHODONTICS

Completed during clinical placements



Presented with unretentive full upper denture and gross caries on lower anterior dentition. 48 and 34 extractions referred. Composite restorations done by myself before fabrication of new full upper denture and lower partial chrome cobalt denture



# CLINICAL EXPERIENCE

## COSMETIC DENTISTRY

Completed during clinical placements



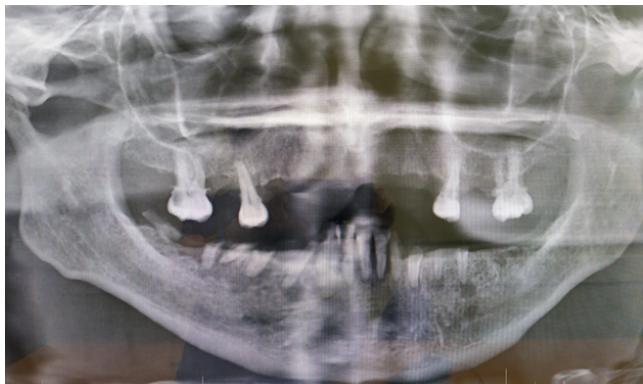
Pt was self conscious with her upper anterior teeth. No prep direct composite veneers placed on 13 to 23. Ensured not in lateral and protrusive excursions. Pt happy with result.



# CLINICAL EXPERIENCE

## ORAL SURGERY + PROSTHODONTICS

Completed during clinical placements



Patient presented with gross caries affecting lower dentition and ill fitting upper partial denture. Pt. had severe dental anxiety and has not received treatment for several decades. We proceeded with a full lower clearance and extraction of 16. Bilateral lingual tori present however pt. refused alveoloplasty for improved lower denture retention. Full lower acrylic denture and transitional upper acrylic denture fabricated due to questionable prognosis of remaining upper dentition. Adequate retention and stability achieved with full lower denture.