



RECORD OF EXPERIENCE PORTFOLIO

FLUORIDE VARNISH APPLICATION

SUPERVISED CASE STUDY 1

Date: 02/07/2016

Supervisor name and GDC number:

Dr Gemstone III000



Patient Profile:

Adult female
Patient c/o sensitivity lower right molars
hypersensitive teeth

Treatment required and reason:

22,600ppm F Sodium Fluoride varnish
Aid hypersensitive teeth

OBSERVATIONS BY SUPERVISOR/MENTOR

PATIENT CARE AND COMMUNICATION

STANDARD ACHIEVED

1. Treatment explained to patient
2. Reason for treatment explained to patient
3. Opportunity given to patient to ask questions
4. Consent given by patient
5. Medical/dental history checked
6. Practical application of fluoride varnish
7. Post treatment advice/instructions given to patient

1. Excellent/ Satisfactory/ Unsatisfactory
2. Excellent/ Satisfactory/ Unsatisfactory
3. Excellent/ Satisfactory/ Unsatisfactory
4. Excellent/ Satisfactory/ Unsatisfactory
5. Excellent/ Satisfactory/ Unsatisfactory
6. Excellent/ Satisfactory/ Unsatisfactory
7. Excellent/ Satisfactory/ Unsatisfactory

Supervisor comments:

You clearly explained the treatment to patient and gave good post-treatment instructions. Need to remember to gain consent from patient. Talk to patient throughout the procedure to reassure them.

Supervisor signature:

Student reflective notes/learning experiences:

I felt very nervous throughout the treatment and forgot to ask for consent but thankfully my mentor reminded me. I explained to the patient I was in training. The patient was also nervous but happy for me to proceed. She asked a lot of questions about the benefits of fluoride and my mentor let me speak. I explained Duraphat varnish is clinically proven to be effective against dentine hypersensitivity for approximately 30 days with just one application. I explained to the patient not to brush her teeth or eat food for 4 hours. She also asked me about recommended toothpaste and I explained she should always use toothpaste with 1350-1500 ppm. I also advised her to water down her fresh orange juice which she has every morning. I gave the patient an information leaflet.

FULL NAME Louisa Diamond

GDC NUMBER: 00001111