

Dentures**Date****DF1****Appraiser**

Competency	Achieved	Comments
MH checked if appropriate		
2.5 Consent (FP17)		
2.5 Verbal		
2.6 NHS/PVT		
11.1 Treatment Plan		
11.2 Prep teeth if necessary		
11.1 Impressions		
11.4 Registration		
11.4 Try-in		
11.4 Fit		
11.5 Communicate with lab/lab slip		
Miscellaneous: Posture Cross Infection Control Time Keeping/Management		
Advice for wearing dentures		
Record Keeping		
Patient & Family		
1 Communication Eg Explanation to patient of procedure Eg Explanation of limitations of dentures		
2 Inspire confidence		
3 Clear, concise questions		
11 Listening/body language		
5 Respect/dignity/confidentiality		
Clinical Team and Peers		
1 Overall Teamwork		
2 Interaction/team		
3 Management/team		
5 Communication		
Patient		
1 Compassionate care		
2 Ethical decisions		
3 Respect/choice		
4 Honesty/confidentiality		
9 Cost/benefit		
Leadership		
7 Accept/give feedback		