

Training Check-list for Dental Clinic Volunteers

Volunteer/Staff Name: _____ **Trained by:** _____

Patient Intake	Date Completed
Seating a patient	
Verification of name, DOB, allergies, current meds	
Vital signs	
Documentation	
Radiographs	
Orientation of X-ray machine	
Orientation of panoramic machine	
Developing x-rays	
Documentation	
Set-Up	
Restoration room & tray set up	
Extraction room & tray set up	
Tray protocols according to dentist	
Hygiene set-up	
Sterilization	
Room clean-up	
Aseptic technique	
Use of ultrasonic machine	
Bagging instruments	
Use of autoclave	
Patient Education	
Post extraction instructions	
Post restoration instructions	
Patient care bags for extractions	
Patient care bags for hygiene	
Patient education for pain management	
Patient education for antibiotic therapy	
Appointments	
Scheduling	
Documentation needed for referrals	
Patient financial information needed for appointments	