FACULTY OF DENTISTRY
STUDY PROGRAM 0911.1 STOMATOLOGY
DEPARTMENT OF ORTHOPEDIC DENTISTRY 'ILARION POSTOLACHI'

APPROVED
at the meeting of the Commission for Quality Assurance and Curriculum Evaluation faculty of Dentistry
Minutes no .1 of 02.09.2020

President, dr. med., univ.
Stepco Elena

APPROVED
at the meeting of the Faculty Council of Dentistry
Minutes no 2 of 30.09.2020

Dean of the Faculty, dr. st.med., conf.univ.
Solomon Oleg

APPROVED
at the meeting of the Department of Orthopedic Dentistry "Ilarion Postolachi ,,
Minutes No. 1 of 24.08.2020
Head of the chair, dr. Med., Univ.
Solomon Oleg

CURRICULUM

DISCIPLINE **PARTIAL REMOVABLE DENTURES**

Integrated studies

Type of course: **Compulsory course**

Chișinău, 2020

I. PRELIMINATIONS

Prosthodontic dentistry represents a fundamental field of modern dentistry witch after graduation will be materialized as prosthodontist specialist. During studies prosthodontic dentistry will support father specialist to learn how to provide dental prosthetic treatment. Will help to use in all day practice new methods of diagnosis, way of using biomaterials, new technologies of prosthodontic treatment and form concept of prophylaxes in dental pathology.

Discipline objectives- teaching theoretical and practical skills of dentists capable for success rehabilitation of patients with dental disorders. This way, study of prosthodontic dentistry it's an important field that will help future dentist to manage prosthodontic treatment.

Limba de predare: Română, Engleză;

Teaching languages: Romanian, English.

Beneficiaries: IV year dental students

II. ADMINISTRATION

Discipline code		S.07.O.078	
Dicipline name		Partial removable dentures	
Responsable for subject		O. Solomon, PhD, Chief of the Department N. Cojuhari, PhD, assoc.prof. V. Gututui, PhD, assoc.prof.	
Year	IV	Semester	VII
Numbers of hours			90
Lectures	24	Practical lesons	42
Lesons	18	Individual work	6
Evaluation form	C	Credit numbers	3

III. OBJECTIVES FORMED INSIDE DESCIPLINES

-lerned and understand level

-known of medical etics and deontology

-

- known of professional terms

- known profilaxy methods of dental desises
- known etiologi and evolution of dental disises

: skills level
- known of pacients ivestigation methods in prosthodontic departments
- known of modern materials aplied in prosthodontic dentistry
- known of tretment methods in prosthodontic dentistry
- known of emergency methods
- be able to analize clinical examitations cards in prostodontic dentisrtry
- be able to analize paradlinical examination cars
- known the diagnosis of dento maxilar desisses
- known of indications for prosthodontic treatments
- known the plan of tretment formulation
- known of clasical and modern metods of prosthodontic tretment
- known of clinical steos in fixed prosthodontic dentistry

▪ : integration level:
- evaluate stomatognat sistem disorders
- determine consecvinses of prosthodontic tretment
- to present abilities in therapeuticat pediatric and OMF surgery.
- to present abilities and knoledge for faculty subjects (such as interanl medicine , dermatologi, neurology, morfopatology fisiopatology, hystology...)
- be able to evaluate and sefl evaluate knoledge ic prostodontis field
- be capable to learn and impliment in every day practice new posibilities in prosthodontic field

IV. PRECONDITIONS

The partial edentation may be defined as the absence from 1 to 13-15 teeth on the dento-alveolar arch. The extended partial edentation - absence more than 6 teeth on one jaw.

Ethiological factors theoreticaly can be divided into hereditary and obtained factors.

Examination of the patients with extended partial edentation includes subjective and objective examination. Subjective examination includes more often meeting complains of the patients on pain, alveolar hyperestesia, functional disorders, static and dynamic misbalance of stomatognat system. Objective examination of the patients with partial edentation includes extra oral and intraoral examination. Prosthetic field in partial edentation consists from all elements of stomatognat system that are in contact with partial removable denture: remained teeth, residual alveolar process, hard palate, mucousa of the oral cavity.

Partial edentation treatment is presented by partial removable dentures acrylic of metal skeletized.

V. Subject of discipline and hours repartition

Nr.	Thems	Hours			
		lectures	*lessons*	*practical*	*individual*
1.	Extended partial edentation. Clinic. Examination of patients. Components of orthopedic field. Psychological preparation of patients for prosthetic treatment with Partial Removable Acrylic Denture (PRAD).	3	-	-	1
2.	Indications and contraindications to prosthetic treatment with PRAD. Preparation of oral cavity for prosthetic treatment with PRAD. Components of PRAD. Kinds of PRAD. Getting impressions.	3	-	-	1
3.	Definition of central occlusion depending on clinical situations.	3	-	-	1
4.	Testing design of PRAD. Possible mistakes and methods of their removing.	3	-	-	1
5.	The insertion stage of treatment. Technique of correction of basis of artificial denture and occlusal relationships. Processes of adaptation and rebasing PRAD.	3	-	-	1
6.	Indications to prosthetic treatment of partial edentation with Partial Removable Skeletized Denture (PRSD). Stages of manufacturing. Taking impressions. Surveying.	3	-	-	1
7.	Peculiarities of PRSD planning at partial edentation I-IVclass by Kenedy. Testing metal skeleton of PRSD. Definition of central occlusion depending on clinical situation.	3	-	-	-
8.	The trial stage of treatment. Imposing PRSD in the oral cavity (the insertion stage of treatment). Correction of PRSD. Rebasing the PRSD.	3	-	-	-
9.	Partial extended edentation (large defects of dental arch). Examination of patients. Component parts of diagnosis. Indications to prosthetic treatment of partial edentation with Partial Removable Dentures.	-	1.5	3.5	-
10.	Indications to prosthetic treatment of partial extended edentation with Partial Removable Dentures. Technique of getting impressions. Clinical laboratory stages of Partial Removable Acrylic Denture (PRAD) manufacturing.	-	1.5	3.5	-
11.	Definition of central occlusion or central jaws relationships at prosthetic treatment of partial edentation with PRAD.	-	1.5	3.5	-
12.	Methods of fixation and stabilization of PRAD.	-	1.5	3.5	-
13.	Checking design (waxen composition) of PRAD (The trial stage of treatment). Insertion stage of	-	1.5	3.5	-

	treatment or imposing denture in the oral cavity. Correction.				
14.	Partial Removable Skeletized Denture (PRSD). Constructive elements. Dental-periodontal, mucosal-bone and combined support.	-	1.5	3.5	-
15.	Indications and contraindications to prosthetic treatment of partial extended edentation with PRSD.	-	1.5	3.5	-
16.	Clinical-laboratory stages of PRSD manufacturing. Surveying.	-	1.5	3.5	-
17.	Particularities of designing the Partial Removable Skeletized Denture (PRSD) at I-IV class of partial edentation by Kennedy.	-	1.5	3.5	-
18.	Clinical picture at subtotal edentation and particularities of prosthetic treatment with PRSD with application of special systems.	-	1.5	3.5	-
19.	Testing the metal frame of PRSD in the oral cavity.	-	1.5	3.5	-
20.	Testing the PRSD. Imposing the PRSD in the oral cavity.	-	1.5	3.5	-
Total		24	18	42	6

VI. OBJECTIVES AND IT`S COMPONENTS.

COMPONENTS	OBJECTIVES
Partial extended edentation. Patient's examination. Component parts of the diagnosis. The indications to prosthetic treatment of partial extended edentation with Partial Removable Acrylic Prosthesis (PRAP).	
Ethiology of partial edentation. Subjective examination of the patients with partial edentation. Objective examination of the patients with partial edentation Para-clinical examination of the patient with partial edentation. Clinical manifest of partial edentation. Classification of partial edentation by Kennedy, Costa, Kennedy-Applegate, Gavrilov. Characteristic of the dental-parodontal bear complex that provide denture support.	• To know Ethiology of partial edentation. • To know Subjective examination of the patients with partial edentation. • To know Objective examination of the patients with partial edentation • To know Para-clinical examination of the patient with partial edentation. • To know Clinical manifest of partial edentation. • To know Classification of partial edentation by Kennedy, Costa, Kennedy-Applegate, Gavrilov. • To know Characteristic of the dental-parodontal bear complex that provide denture support. • To know Classification of mucousa by

COMPONENTS	OBJECTIVES
Classification of mucousa by Supple, Luind. Classification of bone support at maxilla byLejoyeux. Classification of bone support at the mandible by Lejoyeux. Argumentation of joint tmj disorders. Argumentation of muscles disorders. Indications for partial removable prosthesis manufacturing. Peculiarities (particularityes) of prosthetic field preparation to prosthetic treatment with partial removable prosthesis.	Supple, Luind • To know clasificarea suportului osos după Lejoyeux la maxilă. • To know Classification of bone support at the mandible by Lejoyeux. • Argumentation of joint tmj disorders. • Argumentation of muscles disorders. • To know Indications for partial removable prosthesis manufacturing. • To know Peculiarities (particularityes) of prosthetic field preparation to prosthetic treatment with partial removable prosthesis.
Indications to prosthetic treatment of partial extended edentation with Partial Removable Acrylic Prosthesis (PRAP). Technique of getting impressions. Clinical-laboratory stages of Partial Removable Acrylic Denture (PRAD) manufacturing.	
Partial removable prosthesis types. Indications to partial removable acrylic prosthesis manufacturing. Contraindications to partial removable acrylic prosthesis manufacturing. Biomecanics of partial removable acrylic prosthesis. Component parts of partial removable acrylic prosthesis. Characteristics. Requirements to support teeth. Limits of removable prosthesis on the maxilla Limits of removable prosthesis on the maxilla Constructive peculiarities of removable acrylic prosthesis by Kemeny. Constructive peculiarities of removable acrylic prosthesis by Itighin Methods of getting impressions at removable acrylic prosthesis manufacturing, steps of getting impressions.	• To know Partial removable prosthesis types. • To know Indications to partial removable acrylic prosthesis manufacturing. • To know Contraindications to partial removable acrylic prosthesis manufacturing. • To know Biomecanics of partial removable acrylic prosthesis. • To know Component parts of partial removable acrylic prosthesis. Characteristics. • To know Requirements to support teeth • To know limits of removable prosthesis on the maxilla • To know limits of removable prosthesis on the mandible • To know Constructive peculiarities of removable acrylic prosthesis by Kemeny. To know Constructive peculiarities of removable acrylic prosthesis by Itighin • To know Methods of getting impressions at removable acrylic prosthesis manufacturing, steps of getting impressions • To know Possible complications during

COMPONENTS	OBJECTIVES
Possible complications during taking impressions and their manages.	taking impressions and their maintains
Name clinical stages of PRAD manufacturing.	• To know clinical stages of PRAD manufacturing.
Name technical stages of PRAD manufacturing.	• To know technical stages of PRAD manufacturing.
Definition of central relationships at prosthetic treatment with PRAD	
Central relation signs and their practical value. Classification of partial edentation depending on clinical situation in intermaxilar correlation Determination of intermaxilar correlation in case of stabil occlusion (first clinical situation). Determination of intermaxilar correlation in case of instabil occlusion (second clinical situation). Determination of intermaxilar correlation in case of absence of occlusion (third clinic situation). Consecutivity of determination and registration of intermaxilar centric relationships Metods of vertical occlusal dimension determination	• To know Central relation signs and their practical value • To know Classification of partial edentation depending on clinical situation in intermaxilar correlation • To know Determination of intermaxilar correlation in case of stabil occlusion (first clinical situation). • To know Determination of intermaxilar correlation in case of instabil occlusion (second clinical situation). • To know Determination of intermaxilar correlation in case of absence of occlusion (third clinic situation). • To know Consecutivity of determination and registration of intermaxilar centric relationships To know Metods of vertical occlusal dimension determination.
Methods of fixation and stabilization of PRAD	
Enumerate stabilising and supporting elements of partial removable acrylic denture. Requirements to metal clasp made of wire. Clasps line? Its practical value. Components of clasps and its position Difference between Jackson and Adams clasps. Indications to telescopic clasps manufacturing. The position of clasp elements with regard to supporting tooth and prosthetic base	• To know elements of stabilising and supporting partial removable acrylic denture. • To know Requirements to metal clasp made of wire. • To know How to choose the clasps line? Its practical value. • To know Components of clasps and its position • To know differences between Jackson and Adams clasps. • To know Indications to telescopic clasps manufacturing. The position of clasp elements with regard to supporting tooth

COMPONENTS	OBJECTIVES
Dolder system and indications to its manufacturing Byomecanics of partial removable acrylic prosthesis	and prosthetic base • To know Dolder system and indications to its manufacturing • To know Byomecanics of partial removable acrylic prosthesis
Checking the design (wax component) of Partial Removable Acrylic Prosthesis (the trial stage of treatment). Imposing the PRAP (the insertion stage of treatment). Correction.	
COMPONENTS	OBJECTIVES
Stages of wax component probe and purpose of its making. Qualitative determination of dental-dental contacts in position of central occlusion. Cheking of pfiziognomic aspect. Checking of phonetic aspect. Requirements to clasps Try in stages. Individualization of the base of PRAD to prosthetic field. Individualization of the clusps of PRAD to support teeth. Tools. Individualization of occlusion. Tools.	• To know Stages of wax component probe and purpose of its making. • To know determination of dental-dental contacts in position of central occlusion • To know cheking of pfiziognomic aspect. • To know checking of phonetic aspect. • To know requirements to clasps. • To know Try in stages. • To know Individualization of the base of PRAD to prosthetic field. • To know Individualization of the clusps of PRAD to support teeth. Tools. • To know Individualization of occlusion. Tools.
Skeletized partial removable prosthesis (PRSP). Constructive elements. Dental-periodontal, mucosal-bone and combined support.	
Dizavantages of partial removable acrilic dentures. Advantages of partial removable skeletized prothesis. Name component parts of Partial Removable	Dizavantages of partial removable acrilic dentures. Advantages of partial removable skeletized prothesis. • To know component parts of Partial

COMPONENTS	OBJECTIVES
Skeletized denture Saddles of skeletized prosthesis. Varieties. Function. Main Connectors. Varieties. Function. Secondary Conectors. Clasification. Dental support elements Disjunctive elements of maintaining, support and stability. Varieties. Biomechanic of Partial Removable Sheletized Prosthesis.	Removable Skeletized denture • To know Saddles of skeletized prosthesis. Varieties. Function. • To know Main Connectors. Varieties. Function. • Tok now Secondary Conectors. Clasification. • To know Dental support elements. • To know Disjunctive elements of maintaining, support and stability. Varieties. • To know Biomechanic of Partial Removable Sheletized Prosthesis.

Indications and contra-indications to prosthetic treatment of partial extended edentation with Partial Removable Skeletized Dentures.

COMPONENTS	OBJECTIVES
Indications to Partial Removable Skeletized Prosthesis manufacturing Enumerate varieties of Partial Removable Skeletized Prosthesis construction. Dizavantages of Partial Removable Skeletized Prosthesis made by soldering method. Position of the clasps elements on the support teeth. Order of placing elements of the attacement on the support teeth and on the saddles of Partial Removable Skeletized Prosthesis Continuous clasp play the principal role of Main Connector Antibasculant elements of Partial Removable Skeletized Prosthesis . Placing. Getting impressions at Partial Removable Skeletized Prosthesis manufacturing. Varieties.	• To know Indications to Partial Removable Skeletized Prosthesis manufacturing • To know Enumerate varieties of Partial Removable Skeletized Prosthesis construction. • To know Dizavantages of Partial Removable Skeletized Prosthesis made by soldering method. • To know Position of the clasps elements on the support teeth. • To know Order of placing elements of the attacement on the support teeth and on the saddles of Partial Removable Skeletized Prosthesis • To know when Continuous clasp play the principal role of Main Connector • To know Antibasculant elements of Partial Removable Skeletized Prosthesis . Placing. • To know impressions steps at Partial Removable Skeletized Prosthesis manufacturing. Varieties. •

Clinical-laboratory stages of Partial Removable Skeletized Prosthesis manufacturing. Surveying.

COMPONENTS	OBJECTIVES
Enumerate clinical steps of Partial Removable Skeletized Prosthesis manufacturing without making artificial crowns on the supporting teeth. Enumerate laboratory steps of Partial Removable Skeletized Prosthesis manufacturing without making artificial crowns on the supporting teeth. Enumerate clinical steps of partial removable skeletized prosthesis manufacturing with making artificial crowns on the supporting teeth Enumerate laboratory steps of partial removable skeletized prosthesis manufacturing with making artificial crowns on the supporting teeth. Particularities of support teeth preparation and formation the palce for clasp elements placing. Surveying. Free method. Enumerate way (path) of insertion and dezinsertion of Partial Removable Skeletized Denture.	• To know clinical steps of Partial Removable Skeletized Prosthesis manufacturing without making artificial crowns on the supporting teeth. • To know laboratory steps of Partial Removable Skeletized Prosthesis manufacturing without making artificial crowns on the supporting teeth. • To know clinical steps of partial removable skeletized prosthesis manufacturing with making artificial crowns on the supporting teeth • To know Enumerate laboratory steps of partial removable skeletized prosthesis manufacturing with making artificial crowns on the supporting teeth. • To know Particularities of support teeth preparation and formation the palce for clasp elements placing. • To know Surveying. Free method. • To know way (path) of insertion and dezinsertion of Partial Removable Skeletized Denture.
Particularities of designing the Partial Removable Skeletized Prosthesis at I - IV class of partial edentation by Kennedy.	
Essence of morpho-pathological analysis of prosthetic field elements. Biomecanics of PRSD at bilateral terminal edentation. Particularities of usage of Disjunctive elements in biterminal edentation. uniterminal edentation are antibasculants use.	• To know Essence of morpho-pathological analysis of prosthetic field elements. • To know Biomecanics of PRSD at bilateral terminal edentation. • To know Particularities of usage of Disjunctive elements in biterminal edentation • To know when uniterminal edentation are antibasculants use
Particularities of usage of Disjunctive elements in	• To know Particularities of usage of Disjunctive elements in biterminal

COMPONENTS	OBJECTIVES
biterminal edentation. Biomechanics of Partial Removable Skeletized Prosthesis in I –IV class by Kennedy. Particularities of planing Partial Removable Scheletized Prosthesis in uniterminal edentation	edentation. • To know Biomechanics of Partial Removable Skeletized Prosthesis in I –IV class by Kennedy. • To know Particularities of planing Partial Removable Scheletized Prosthesis in uniterminal edentation
Clinical picture at subtotal edentation and particularities of prosthetic treatment with Partial Removable Skeletized Prosthesis with application of special systems.	
COMPONENTS	OBJECTIVES
Ethiology and clinical picture of subtotal edentation. Indications to usage of Dolder-Rumpel system. Component elements of Dolder-Rumpel system. Clinical-laboratory stages at skeletized prosthesis manufacturing using Dolder-Rumpel system. Indications to PRSD on attachments manufacturing. Types of attchements ased in PRSD. Biomechanics of PRSD fixed on attachements.	• To know Ethiology and clinical picture of subtotal edentation. • To know Indications to usage of Dolder-Rumpel system. • To know Component elements of Dolder-Rumpel system. • To know Clinical-laboratory stages at skeletized prosthesis manufacturing using Dolder-Rumpel system. • To know Indications to PRSD on attachments manufacturing. • To know Types of attchements ased in PRSD. • To know Biomechanics of PRSD fixed on attachements.
Testing the metal frame of Partial Removable Skeletized dentures in the oral cavity.	
Testing the metal framework of Partial Removable Skeletized Prosthesis in articulator. Requirements. Testing the metal framework of Partial Removable Skeletized Prosthesis on prosthetic field in the oral cavity. Path of insertion and desinsertion of PRSD.	• To know testing the metal framework of Partial Removable Skeletized Prosthesis in articulator. • To know testing the metal framework of Partial Removable Skeletized Prosthesis on prosthetic field in the oral cavity. • To know path of insertion and desinsertion of PRSD.

COMPONENTS	OBJECTIVES
Clinical requirements elements of metal framework of Partial Removablşe Skeletized Denture. Possible mistakes at metal framework of PRSP manufacturing and the metods of their correcting. Determination of central occlusion with metal framework in the oral cavity. Testing the PRSP in the oral cavity. Indications and methods of correction the base of PRSP and occlusal relationships.	• To know Clinical requirements elements of metal framework of Partial Removablşe Skeletized Denture. • To know possible mistakes at metal framework of PRSP manufacturing and the metods of their correcting. • To know Determination of central occlusion with metal framework in the oral cavity. • To know Testing the PRSP in the oral cavity • To know Indications and methods of correction the base of PRSP and occlusal relationships.

VI. PROFESSIONAL COMPETENCES (PC) AND TRANSVERSAL (TC) COMPETENCES AND STUDY FINDINGS

✓ PROFESSIONAL COMPETENCIES (SPECIFIC) (PC)

CP 1. Identifying and using concepts, principles and theories in professional activities.

CP 2. Thorough knowledge, understanding and operation with theoretical knowledge and basic practical methods.

CP 3. Good knowledge and practical application of the knowledge in relation to the patient, taking into account the age and character of the person, the specificity of the pathology and the patient's experiences with the doctors in order to ensure prosthetic compliance.

CP 4: Completing the medical histories of the patients, conducting the clinical examination and elaborating the indications for the type of para-clinical examination, according to clinical case with their argumentation. Determining options for establishing the diagnosis and treatment plan.

CP 5: Knowledge and simulation of the clinical and para-clinical examination of patients with pathologies in oro-maxilo-facial area; evaluation of para-clinical examination data.

CP 6: Demonstration and application of knowledge gained in the clinical and para-clinical examination of the patient. Promoting the principles of tolerance and compassion towards patients.

✓ Transversal competencies (CT)

CT1. Application of efficient working rules, manifestation of a responsible attitude towards the scientific and didactic field, for optimal and creative valorisation of their own potential in specific situations, observing the principles and norms of professional ethics;

CT2. Ensure effective deployment and effective engagement in team activities.

CT3. Identifying opportunities for continuous training and efficient use of learning resources and techniques for their own development.

✓ **Study finalizations**

At finalization of the course the student will be able to:

- To know: the components of a successful prosthetic act;
- To know the qualities and optimal behavior for the successful practice of medicine.
- To formulate optimal decisions in rendering patient aid in critical situations;

VII. THE STUDENT'S INDIVIDUAL WORK

Nr.	The expected product	Implementation strategies	Evaluation criterias	Term of execution
1.	Working with information sources	Systematically workin the library and mediate. Exploring the current electronic sources on the topic under discussion	1. Quality of formed judgments, logical thinking, flexibility. 2. The quality of the systematization of the informational material obtained through its own activity.	During the semester
2.	Report	Analysis of relevant sources on the topic of the paper. Analysis, systematization and synthesis of information on the proposed theme. Compilation of the report in accordance with the requirements in force and presentation to the chair.	1. The quality of systematization and analysis of the informational material obtained through its own activity. 2. Concordance of information with the proposed theme.	During the semester
3.	Case study analysis	Choice and description of the case study Analysis of the causes of the issues raised in the case study. Prognosis of the investigated case. Deduction of the expected outcome of the case.	1. Analysis, synthesis, generalization of data obtained through own investigation. 2. Formation of an algorithm of knowledge based on the obtained conclusions.	During the semester

METHODOLOGICAL SUGGESTIONS FOR TEACHING-LEARNING-EVALUATION

- ***Used Teaching and learning methods***

The discipline of orthopedic dentistry is taught in the classical manner, using new methods. It provides support for lectures and practical papers in the clinic. The lectures are supported by theoretical course and practical lessons approved by order of the rector. In the lectures, new teaching methods are used with the exposition of the obtained achievements in the field and the demonstration of the didactic materials with the mutlimedia technique. At the works the students participate in the clinical reception of the patients, prepare the observation history, the scale of the practical works is recorded in the student daily. From modern methods, current control tests, clinical situations presented by study models and orthopantomograms are used. At the department of self-study students prepare papers and/or prepare schemes, casts.

- ***Methods of assessment*** *(including an indication how the final grade is calculated)*

- **Current:** Current checks during seminars and practical papers, 5 totals in writing and/or as test-control. For individual work done during the semester, the student is evaluated, the grade being included in totals. At the end of the semester, based on the mares from the totalisations, the average annual score is calculated.
- **Final:** The course ends with a colloquium. The note at the colloquium is based on the annual average score. Notes 5 and above are equivalent to "attested", which will be passed to the notes book. The average annual score will be expressed in numbers according to the scoring scale indicated in the table.

Modality to round up the grades at the evaluation steps

Intermediate note grid (annual average, grades from the exam stages)	National scoring system	Equivalent ECTS
1,00-3,00	2	F
3,01-4,99	4	FX
5,00	5	E
5,01-5,50	5,5	
5,51-6,0	6	
6,01-6,50	6,5	D
6,51-7,00	7	
7,01-7,50	7,5	C
7,51-8,00	8	
8,01-8,50	8,5	B
8,51-8,00	9	
9,01-9,50	9,5	A

9,51-10,0	**10**	

I. RECOMMENDED BIBLIOGRAPHY:

A. Obligatory:

1. Postolachi I. şi colab. "Protetica dentară". Chişinău 1993.
2. Bîrsa Gh., Postolachi I. "Tehnici de confecţionare a protezelor dentare". Chişinău 1994.
3. Prelegeri

B. Additional

1. Копейкин В.Н. «Ортопедическая стоматология». М., 2001
Rîndaşu I. Proteze dentare. V.I. Bucureşti, Ed.Medicală, 2000