DENTAL SAFETY TRAINING KIT

CERTIFICATE OF COMPLETION

3 topics addressed:

1. Purpose and Technique of Dental Radiographs
2. Dental Radiation Safety
3. Infection Prevention and Control in Dental Radiology

_____

Student name

has successfully completed the Dental Radiation Safety and Infection Control curriculum

On _____ **From** _____

Date Name of school/organization

_____

Teacher Signature

Realityworks®
Live it. Learn it.™