Logbook for General Dentists (supervised)

Date: .....

This is to certify that the healthcare practitioner / .....

QID number : .....

is currently working under supervision of Dr / .....

License number: .....

from date: ..... till date: .....

Patient name	File No:	Diagnosis	Procedure	Date of procedure	Supervisor signature	Supervisee Signature

Medical director signature: ..... Facility stamp: .....