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ORIGINAL ARTICALE

VARIATIONS IN SELF-CONFIDENCE LEVELS AMONG UNDERGRADUATE DENTAL STUDENTS AND INTERNS AT QASSIM UNIVERSITY IN REMOVABLE PROSTHODONTIC TREATMENT : A CROSS-SECTIONAL STUDY

Rawan Abdullah Suliman AlRethia[1], Ibrahim Abdulrahman AlBaqami [2]

[1]Assistant professor, Department of Prosthetic Dental Sciences, College of Dentistry, Qassim University Saudi Arabia E-mail: ra.alrethia@qu.edu.sa

[2]Dental intern, College of Dentistry, Qassim University Saudi Arabia

Corresponding author: Dr. Rawan Abdullah Suliman AlRethia Assistant professor, Department of Prosthetic Dental Sciences, College of Dentistry, Qassim University Saudi Arabia E-mail: ra.alrethia@qu.edu.sa

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ABSTRACT

Background: To assess the self-confidence of 4th and 5th year undergraduate dental students and interns at Qassim University when performing removable prosthodontic procedures, as well as their perceptions of the quality of prosthodontic education.

Materials and Methods: A Cross-Sectional Study. An electronic questionnaireconducted among the participants.Participants completed a questionnaire regarding theirselfconfidence preforming removable prosthodontic procedures independently and the quality of prosthodontic education.

Results:A total of 70 students participated. Most students reported high confidence in performing basic removable prosthodontic procedures. However, confidence declined for more complex tasks, such as achieving accurate jaw relation records without supervision. Interns showed significantly higher confidence levels than 4th- and 5th-year students ($p < 0.05$). Additionally, students who rated the quality of their prosthodontic education as high were significantly more likely to report higher confidence levels in clinical performance ($p < 0.001$).

Conclusion: Undergraduate dental students and interns at Qassim University showed high selfconfidence in basic removable prosthodontic procedures, but less confidence in complex tasks like recording jaw relations. Confidence increased with academic level and was strongly linked to students' perception of education quality. Enhancing clinical training and focusing on advanced skills early can help build stronger clinical confidence in future practitioners.

Keywords*:*Prosthodontic , Education , Confidence , Complete denture , Partial denture

INTRODUCTION

In recent decades, socioeconomic and health circumstances have significantly improved, leading to an increase in average life expectancy in developed nations.[1,2] In this case, tooth loss is still a prevalent age-related consequence, despite the emergence of more conservative dental techniques.[2,3] Although the Saudi population is expected to follow this trend, it is doubtful that the condition of being edentulous or partially dentulous would go away.[4] According to a study done in the southern region of Saudi Arabia on 1779 people between the ages of 35 and 74, 50% of them required dental prostheses.[5] To evaluate the state of dental prosthetics and the prosthodontic needs of elderly patients, a second study was carried out in the northern part of Saudi Arabia. They discovered that almost 70% of the 286 edentulous patients needed prosthodontic therapy.[6] The removable denture (RD) continues to be a key component of treatment options for tooth replacement.Since RD is less intrusive, less expensive, reversible, and appropriate in the event of any modifications, future dental losses, or other anatomical changes, it really serves as the first choice in many circumstances.[7] Therefore, for the foreseeable future, clinical skills for removable dentures and training for dental undergraduates to provide the best prostheses will be necessary.[7,8] The mechanical and biological aspects of a removable prosthesis's implementation are crucial to its success.[9] In addition to increasing the likelihood of patient acceptance, effective prostheses reduce the likelihood that dental conditions like caries or periodontal disease would develop in the abutment teeth. In order to satisfy patients' requests and preserve their oral health and well-being, dental graduates should feel confident making dental prosthesis. For undergraduate dental schools in Saudi Arabia, the Saudi Commission for Health Specialties (SCFHS) establishes the list of necessary competences and supplies the curriculum framework. Undergraduates must pass the Saudi Dental

Licensure Examination (SDLE) during their internship year in order to be licensed to practice dentistry in Saudi Arabia. The significant removable prosthodontics components [10] are part of the SCFHS-mandated test. Even though didactic education can teach students the basics of a subject, it won't provide them with the confidence they need to properly apply the skill in actual clinical settings. In order to provide students a solid understanding of both academic knowledge and clinical abilities, teaching them how to do removable prosthodontics necessitates practice and demonstration, much like other clinical dental procedures. The abilities of undergraduate students to execute removable prosthodontic treatments has not been extensively studied. According to earlier research done in dental schools in the UK and Europe, undergraduates are very confident in their ability to perform the majority of clinical removable prosthodontic procedures and treatments.[7,8] Students who participate in clinical demonstrations have better levels of confidence than those who just get theoretical instruction, according to a different study that described how variations in teaching approaches and educational standards may affect confidence.[11] Research indicates that the implementation of a student-centered, small-group, problem-based learning (PBL) approach has produced practitioners of a greater standard than those who were taught exclusively using traditional teaching methods. PBL is a relatively new addition to the teaching methodology, having been introduced to clinical dentistry education.[12] Relying in oneself, and specifically on one's capacity to carry out operations successfully or at least suitably with less supervision, is what it means to be confident.Furthermore, prior studies in the field of dentistry education have revealed that male dental students are more confident in their ability to perform prosthodontic dental procedures.[11] The need for courses to be periodically evaluated to guarantee viability and credibility does not apply to removable prosthodontics. Additionally, the primary target group for higher education programs is graduating dental students; for this reason, it is crucial to monitor and modify dental curriculum to guarantee a suitable balance of theory and clinical instruction. The results of this study will be used to guide the development and review of a course curriculum for removable prosthodontics. In addition to making sure that graduates have fulfilled all course-mandated learning objectives, dental education providers must also equip them to be competent, self-assured, and prepared for internship training. Generally speaking, years 3-5 address dental prosthetic education. Pre-clinical and clinical training are combined in the Dentistry College of Qassim University's standardized removable prosthodontics course. The following three curriculum sections include education in removable prosthodontics: Preclinical removable prosthodontics (BDS program, third year) Problem-based learning (PBL) sessions, practical sessions, tutorials, theoretical lectures, and basic laboratory skills for removable partial and total denture treatments are all included. Clinical removable prosthodontics (BDS program, fourth and fifth years). It covers laboratory techniques for dentures through theoretical lectures, tutorials, chairside teaching, and hands-on sessions. Additionally, under supervision, students work together in small groups to accomplish basic complete and partial denture treatments. To be eligible for graduation, students must have managed a minimum of three patients in year 4 necessitating a prosthesis, including at least two requiring removable partial dentures and one requiring complete dentures. Additionally, they must have treated at least five patients in year 5 who required a prosthesis, with a minimum of four needing removable partial dentures and one needing complete dentures, plus one special case, such as an overdenture, single denture, immediate denture, or flat ridge case.

MATERIAL AND METHOD

The study was conducted among all 4th and 5th year dental students and dental interns enrolled in BDS program at Qassim University for the year 2024-2025 and it was approved by the committee of research ethics of Qassim University with approval number:25-33-12 at April 16 in 2024. The participants were selected based on the following inclusion and exclusion criteria. Inclusion Criteria were all of the 4^{th},5^{th} year students and interns enrolled in BDS program at Qassim University for year 2024-2025 invited to complete an electronic questionnaire on voluntary basis. And the exclusion Criteriawerestudents who are not enrolled in $4^{th}$and 5^{th} year or who have dropped or frozen their semester were excluded from the study. All the participants were given a questionnaire to be filled through Google form and they were informed about the aim and methodology of the study.

Data Analysis

A total of 70 participants without any biasfilled the form and data are obtained by Google form data were collected, reviewed then analyzed by using Statistical Package for the Social Sciences (SPSS) software, version 27 (IBM Corp., Armonk, NY, USA). Descriptive statistics were used to summarize participant demographics, including gender, academic year. Frequencies and percentages were used for categorical variables, while means and standard deviations were calculated for continuous variables. For questionnaire-based assessments using Likert scale items, participants' responses were classified according

to predefined cutoff points. Confidence levels in performing removable partial and complete denture procedures were assessed using a 5-point Likert scale (ranging from “Totally confident” to “Not confident”). Based on cumulative scores across items, self-confidence levels were categorized into were categorized as low (1–2), moderate (3), and high (4–5). Similarly, students’ perception of the quality of removable prosthodontic education was also measured using 5-point Likert scale (ranging from "very good" to "Bad"). Perception scores were categorized as low (1–2), moderate (3), and high (4–5). Inferential statistical tests were applied to determine associations between demographic variables (such as gender and academic year) with students' confidence level and perception. Pearson’s chi-square test and Fisher’s exact testwere used for categorical variables, depending on the distribution of data. Statistical significance was considered atp-values less than 0.05.

This manuscript adheres to the STROBE guidelines.[13]

RESULTS

The study sample consisted of 70 participants, with a predominance of males (47; 67.1%) compared to females (23; 32.9%). Regarding academic distribution, participants were relatively equally distributed across academic years. Fourth-year students represented 24 (34.3%) of the sample, while both fifth-year students and interns accounted for 23 (32.9%), each.As for students' confidence in prosthodontic treatment, Table 1 shows that the majority of undergraduate dental students and interns demonstrated a high level of self-confidence in performing removable prosthodontic procedures, particularly in complete denture (CD) and removable partial denture (RPD) treatments. For RPD tasks, a substantial proportion reported being either very confident or confident, such as selecting artificial teeth (84.3%), performing diagnostic appointments (80.0%), and assessing fit and stability (81.4%). Similarly, confidence remained high in complete denture procedures, with over 80% feeling confident in areas like diagnostic appointments (85.7%), impression material selection (72.9%), and identifying patient concerns during follow-up (71.5%). However, relatively lower confidence was noted in tasks requiring more advanced clinical skills , such as achieving jaw relation records without supervision, with only 47.1% and 40.0% of respondents feeling very or totally confident in RPD and CD cases, respectively. These findings suggest that while foundational skills are well-developed, more complex procedures may require additional training and supervised experience to build student confidence.

Table 1. Self-Confidence Levels Among Undergraduate Dental Students and Interns at Qassim University in Removable Prosthodontic Treatment (n=70)

Confidence in clinical operations	Not confident		Little confident		Confident		Very confident		Totally confident	
	n	%	n	%	n	%	n	%	n	%
Removable partial denture										
Carrying out diagnostic appointments for removable partial denture patients, including patient evaluation and treatment planning	0	0.0%	1	1.4%	13	18.6%	15	21.4%	41	58.6%
Balancing functional and aesthetic requirements for the patients when planning an RPD case	1	1.4%	9	12.9%	20	28.6%	16	22.9%	24	34.3%
Choosing the appropriate impression technique and material for RPD cases	1	1.4%	7	10.0%	15	21.4%	26	37.1%	21	30.0%
Selecting the appropriate tray and recording the necessary anatomical landmarks during the primary impression for RPD cases	0	0.0%	2	2.9%	15	21.4%	23	32.9%	30	42.9%
Achieving a stable jaw	1	1.4%	13	18.6%	23	32.9%	22	31.4%	11	15.7%

relation record for RPD cases without supervision										
Capturing the necessary landmarks during border molding and secondary impressions for RPD cases	0	0.0%	11	15.7%	19	27.1%	21	30.0%	19	27.1%
Establishing occlusal relationships in RPD cases	0	0.0%	7	10.0%	18	25.7%	21	30.0%	24	34.3%
Selecting the appropriate shape and shade of artificial teeth that best align with the patient's natural dentition in RPD cases	0	0.0%	1	1.4%	10	14.3%	23	32.9%	36	51.4%
Assessing the fit and stability of the RPD and providing post-operative instructions to the patient	0	0.0%	1	1.4%	12	17.1%	17	24.3%	40	57.1%
Identifying and addressing patient concerns during follow-up appointments for RPD	1	1.4%	2	2.9%	14	20.0%	20	28.6%	33	47.1%
Complete denture										
Carrying out diagnostic appointments for complete denture patients, including patient evaluation and treatment planning	0	0.0%	2	2.9%	8	11.4%	24	34.3%	36	51.4%
Balancing functional and aesthetic requirements when planning A CD case	1	1.4%	3	4.3%	14	20.0%	21	30.0%	31	44.3%
Choosing the appropriate impression technique and material for CD cases	0	0.0%	3	4.3%	16	22.9%	14	20.0%	37	52.9%
Selecting an appropriate tray and recording the necessary anatomical landmarks during the primary impression for CD cases	0	0.0%	8	11.4%	14	20.0%	18	25.7%	30	42.9%
Achieving a stable jaw relation record for CD cases without supervision	3	4.3%	20	28.6%	19	27.1%	15	21.4%	13	18.6%
Capturing the necessary landmarks during border molding and secondary impressions for CD cases	1	1.4%	6	8.6%	20	28.6%	19	27.1%	24	34.3%
Establishing occlusal relationships in CD cases	2	2.9%	5	7.1%	23	32.9%	13	18.6%	27	38.6%
Selecting the appropriate shape and shade of artificial teeth that best align with the patient's natural dentition in CD cases	1	1.4%	1	1.4%	14	20.0%	21	30.0%	33	47.1%
Assessing the fit and stability of the CD and providing post-operative	0	0.0%	5	7.1%	12	17.1%	22	31.4%	31	44.3%

instructions to the patient										
Identifying and addressing patient concerns during follow-up appointments for CD	1	1.4%	3	4.3%	16	22.9%	16	22.9%	34	48.6%

Figure1 illustrates the overall self-confidence levels of undergraduate dental students and interns in performing removable prosthodontic procedures. The majority of participants reported a high level of confidence in both removable partial denture (RPD) and complete denture (CD) treatments. Specifically, 72.9% of students expressed high confidence in RPD procedures, while 68.6% felt highly confident in CD-related tasks. In contrast, 27.1% and 31.4% reported moderate confidence in RPD and CD treatments, respectively.

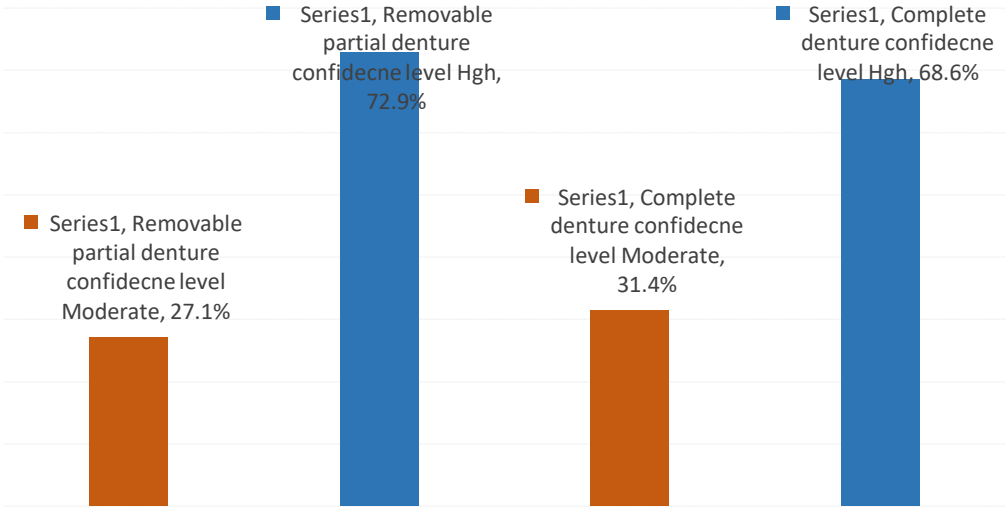

Figure 1. The overall Self-Confidence Levels Among Undergraduate Dental Students and Interns at Qassim University in Removable Prosthodontic Treatment (n=70)

Table 2 shows students' and interns' perceptions of the quality of removable prosthodontic education at Qassim University. Overall, the responses reflect a positive evaluation across various educational components. A large proportion of participants rated the course content and curriculum as either good (27.1%) or very good (40.0%). Similarly, classroom theoretical lectures were favorably rated, with 71.4% of students selecting good or very good. The clinical training component, which includes direct chair-side instruction, also received strong approval, with 71.4% rating it as good or very good. When evaluating learning resources such as handouts and videos, 75.7% of students gave a positive rating (good or very good). While pre-clinical lab sessions received a slightly more mixed response, they were still largely seen as adequate, with 50% rating them good or very good. Finally, faculty performance stood out as a particularly strong area, with over 82% of respondents rating it as good or very good.Concerning the overall perceived quality of removable prosthodontic education among dental students and interns at Qassim University. The majority of participants (65.7%) rated the quality as high, while 28.6% considered it moderate. Only a small portion (5.7%) perceived the educational quality as low.

Table 3 presentsthe association between students' gender, academic year, and their perceived quality of removable prosthodontic education with their self-confidence levels in performing Removable Partial Denture (RPD) and Complete Denture (CD) procedures. Although gender differences in self-confidence levels were not statistically significant for either RPD ($p = .477$) and CD ($p = .222$), a higher proportion of female students reported high confidence in both procedures compared to their male counterparts. However, the academic year showed statistically significant association with confidence levels in both RPD ($p = .001$) and CD ($p = .012$) procedures. Specifically, a greater proportion of interns exhibited high selfconfidence (95.7% for RPD and 78.3% for CD), compared to 5th- and 4th-year students. Furthermore, perceived quality of removable prosthodontic education was significantly associated with students' confidence levels for both RPD and CD ($p = .001$ for both). Students who rated the education quality as "high" demonstrated significantly higher confidence (91.3% in RPD and 84.8% in CD), whereas those who rated it as "low" had predominantly moderate or low confidence levels.

Table 2. Dental students and interns perceived quality of removable prosthodontic education at Qassim University in Removable Prosthodontic Treatment (n=70)

Perception items	Bad		Mediocre		Sufficient		Good		Very good	
	n	%	n	%	n	%	n	%	n	%
How would you rate the quality and comprehensiveness of the course and curriculum contents, including the list of topics and components in the removable prosthodontics teaching methods	3	4.3%	2	2.9%	18	25.7%	19	27.1%	28	40.0%
What is your assessment of the classroom theoretical lectures	1	1.4%	4	5.7%	15	21.4%	24	34.3%	26	37.1%
How would you evaluate the pre-clinical classes (teaching of technical and practical skills in the lab)	6	8.6%	13	18.6%	16	22.9%	21	30.0%	14	20.0%
What is your opinion of clinical training, including direct chair-side instructing in clinical settings with the patients	2	2.9%	4	5.7%	14	20.0%	25	35.7%	25	35.7%
What do you think about learning resources, including lecture handouts, additional reading materials, and Educational videos	3	4.3%	3	4.3%	11	15.7%	27	38.6%	26	37.1%
How would you judge a teacher's performance in removable prosthodontic education	1	1.4%	2	2.9%	9	12.9%	25	35.7%	33	47.1%

Table 3. Association Between Gender, Academic Year, Perceived Quality of Education, and Self-Confidence in Removable Partial and Complete Denture Procedures Among Dental Students and Interns

Category	RPD		CD	
	Moderate	High	Moderate	High
	n (%)	n (%)	n (%)	n (%)
Gender				
Male	14 (29.8%)	33 (70.2%)	17 (36.2%)	30 (63.8%)
Female	5 (21.7%)	18 (78.3%)	5 (21.7%)	18 (78.3%)
p-value	.477		.222	

Academic Year				
4th Year	14 (58.3%)	10 (41.7%)	13 (54.2%)	11 (45.8%)
5th Year	4 (17.4%)	19 (82.6%)	4 (17.4%)	19 (82.6%)
Intern	1 (4.3%)	22 (95.7%)	5 (21.7%)	18 (78.3%)
p-value	.001*		.012*	
Perceived Quality of Removable Prosthodontic Education				
Low	3 (75.0%)	1 (25.0%)	4 (100.0%)	0 (0.0%)
Moderate	12 (60.0%)	8 (40.0%)	11 (55.0%)	9 (45.0%)
High	4 (8.7%)	42 (91.3%)	7 (15.2%)	39 (84.8%)
p-value	.001*^		.001*^	

P: Pearson X^2 test ^; Exact probability test
** P < 0.05 (significant)*

Table 4 illustrates the association between gender, academic year, and the perceived quality of removable prosthodontic education among dental students and interns. Among male students, 63.8% rated the quality of education as high, 29.8% as moderate, and 6.4% as low. Female students showed a slightly higher perception of quality, with 69.6% rating it as high, 26.1% as moderate, and only 4.3% as low. However, the difference between genders was not statistically significant (p = .877). Regarding academic year, 54.2% of 4th-year students perceived the education quality as high, compared to 65.2% of 5th-year students and 78.3% of interns. Moderate perception was most common among 4th-year students (37.5%), followed by 5th-year students (34.8%), and least among interns (13.0%). Low perception was reported by 8.3% of 4th-year students and 8.7% of interns, while none of the 5th-year students rated the education quality as low. Although interns generally reported a higher level of perceived quality, the differences across academic years did not reach statistical significance (p = .205).

Table 4. Association Between Gender, Academic Year, and Perceived Quality of Removable Prosthodontic Education Among Dental Students and Interns

Factors	**Perceived quality of removable prosthodontic education**						**p-value**
	Low		**Moderate**		**High**		
	No	**%**	**No**	**%**	**No**	**%**	
Gender							
Male	3	6.4%	14	29.8%	30	63.8%	.877
Female	1	4.3%	6	26.1%	16	69.6%	
Academic year							
4th year	2	8.3%	9	37.5%	13	54.2%	.205^
5th year	0	0.0%	8	34.8%	15	65.2%	
Intern	2	8.7%	3	13.0%	18	78.3%	

P: Pearson X^2 test ^; Exact probability test
** P < 0.05 (significant)*

DISCUSSION

Our study revealed that self-confidence levels among dental students at Qassim University significantly increased with progress in education, dental interns demonstrating the highest confidence in both removable partial and complete denture procedures. This pattern became particularly apparent in more complex tasks such as jaw relation recording, where confidence levels among junior students remained comparatively lower. These findings may be explained by the progressive increase in clinical exposure and supervision across academic years, which naturally enhances skill and confidence. The lower confidence in complex tasks like jaw relation recording among juniors likely reflects limited early experience and the technical difficulty of such procedures. These findings align with those of Puryer et al,[7] who reported a statistically significant increase in undergraduate dental students' confidence as they advanced through their academic years ($P < .001$). Their study also observed a rise in the number of removable denture cases treated with each academic year, supporting the idea that clinical exposure directly contributes to building confidence along with Al-Koky*et al* study [14] that provided additional evidence that repeating a procedure enhances not only students' performance efficacy but also their confidence. Furthermore, students who considered the quality of prosthodontic education as high exhibited substantially greater confidence in their clinical performance, the influence of educational experience on clinical self-assurance. This could be explained by differences in how students engage with and perceive the same educational experience. While all students were exposed to similar teaching, those who viewed the instruction as more structured or helpful may have been more motivated, attentive. Although our study did not find a statistically significant difference in self-confidence levels between male and female students, a slightly higher proportion of female participants reported high confidence in both removable partial and complete denture procedures.This could be explained by the fact that both male and female students receive equal clinical training and educational support throughout the program, which may minimize gender related differences in confidence levels. This contrasts with the findings of Sampaio-Fernandeset al.[8] who reported that female students were significantly less confident and more reliant on instructors compared to their males. Similarly, a study conducted in the UK by Al-Kokyet al.[14] found that male students demonstrated higher confidence levels across all clinical procedures. while participants in our study expressed high satisfaction with overall prosthodontic education particularly with faculty performance and clinical teaching preclinical lab sessions received comparatively lower ratings. A similar result was found inSharka R. et al.[15] This could be explained by the fact that preclinical lab sessions, while essential for foundational skills, often lack the realism and direct patient interaction found in clinical settings. The limited hands-on complexity, repetitive nature of tasks, and less dynamic teaching approaches may contribute to students perceiving these sessions as less engaging or impactful compared to clinical training. Overall findings in our study suggest the need to enhance early clinical exposure and improve preclinical instruction, particularly in complex procedures where confidence remains low among junior students. Emphasizing structured supervision and supportive teaching approaches may help build stronger clinical self-assurance. However, the study has certain limitations. It was conducted at a single institution, which may affect the generalizability of the results. Additionally, the cross-sectional design limits insights into how confidence develops longitudinally. Unmeasured factors such as personality traits or prior informal clinical experience may also have influenced students' responses.

CONCLUSION

Undergraduate dental students and interns at Qassim University showed high self-confidence in basic removable prosthodontic procedures, but less confidence in complex tasks like recording jaw relations. Confidence increased with academic level and was strongly linked to students' perception of education quality. Enhancing clinical training and focusing on advanced skills early can help build stronger clinical confidence in future practitioners.

DECLARATION

Ethics approval and consent to participate

Not applicable.

Consent for publication

Not applicable.

Competing interests

The authors declare no conflict of interest.

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LIST OF ABBREVIATIONS

RPD = Removable Partial Denture

CD = Complete Denture