WHAT'S YOUR CARIES RISK?

A quick survey for discussion with your dental professional

Name

TO KEEP YOUR DENTAL DECAY RISK LOW, YOUR DENTAL PROFESSIONAL NEEDS SOME INFORMATION

Please answer the questions below

1. How often do you brush your teeth?

1 x a day

2 x a day

More often

2. How long do you brush?

Less than 1 minute

1-2 minutes

Longer

3. What toothpaste do you use?

Non fluoride toothpaste

Regular strength toothpaste with 1000-1450 ppm fluoride

High fluoride toothpaste with 5000 ppm

Other fluoride toothpaste

4. How often do you use dental floss?

1 x a day

1 x a week

Less than 1 x a week

5. How often do you visit your dentist?

1 x a year or less

2 x a year

More than 2 x a year

6. How often do you snack in between meals?

1-3 x a day

4-6 x a day

More than 6 x a day

7. Which of the following do you snack on at least 3 times a week?

Soft drinks

Chocolate/sweets

Fruit

Sweetened Yogurt

Cookies/cakes

Tea or coffee with sugar

8. Do you currently have or have you ever had ...?

Orthodontic brackets

Cancer

Diabetes

Sensitive teeth

9. What medications are you currently taking?



CLINICAL EVALUATION

To be completed by your dental professional

Past experience of tooth decay or enamel lesions

Visible build-up of dental plaque

Appliances e.g. braces, restorations or other devices that increase plaque retention

Reduced salivary flow/

dry mouth

Severe tooth destruction with inflammation and /or tooth infection (abscess)

Gingival recession

Previous restorations

Exposed root surfaces

Your risk group:



High

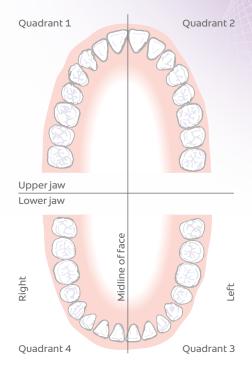


Medium



Low

Existing caries lesions:



Recommendations for you:

Brush at least 2 times a day with a fluoride toothpaste

Decrease number of snacks

Use a fluoride mouthwash daily

Use dental floss or an interdental brush daily

Change your toothbrush every 3 months

Use an Electric Toothbrush

Use a high fluoride toothpaste