

Initial Dental Visit Worksheet

Please use this worksheet in whatever way is helpful for you. When you come in we have allotted time to talk with you personally about your medical and dental histories as well as what desires and needs you have. We hope that you find this worksheet helpful in organizing your thoughts. **Please bring this worksheet with you for your initial visit.**

1. What would you like for us to make sure we pay special attention to at your initial appointment?
2. What changes, if any, have you noticed recently with your teeth or mouth?
3. What concerns or fears do you have about your dental health or about your initial visit to our practice? We use some new relaxation techniques which are truly remarkable.
4. Have you ever thought about long term goals in regard to the health of your mouth or wellness in general? What do you do intentionally on a regular basis to keep healthy?
5. On a Scale of 1 - 10 with 10 being excellent, where would you rate your current dental health? Where would you want to be and WHY?
6. What else would you like us to know about you in order to serve you well?