

## Other

How did you initially hear about us?  
(Please choose only one)

Newspaper

Which one?

A Patient Recommendation

Who?

Internet

Where?

Our Website

Google

Facebook

Directory

Sign Outside

Word of Mouth

Other:

Where?



Dr Owain Dimmick BDS Hons (Wales)

Dr Eleri Marks BDS Hons (Cardiff)

Dr Georgina Jones BDS Hons (Cardiff)

## Dental Health Form

Name:

Date of Birth:

## Dental History

1. When was the last time you had a dental check up?

2. Are you anxious about visiting the dentist?

If **YES**, any reason in particular?

Y

N

3. Do you have any problems with your teeth that you are aware of?

If **YES**, please give details

Y

N

4. Do you like the appearance of your teeth?

If **NO**, why?

Y

N

## Oral Hygiene

1. How often do you brush your teeth?

2. Do you use a manual brush or electric toothbrush?

 Electric Manual

3. Which toothpaste do you use?

4. Do you use mouthwash?  Y  N

If **YES**, which brand?

And how often?

 Daily Every Few Days As Required

5. Do you use dental floss?  Y  N

If **YES**, how often?

 Daily Every Few Days As Required

6. Do you use interdental brushes?  Y  N

If **YES**, how often?

 Daily Every Few Days As Required

7. Do your gums often bleed with brushing?  Y  N

8. Do you chew sugar free gum?  Y  N

If **YES**, how often?

 Daily Every Few Days As Required

## Diet

1. How often do you drink fizzy drinks, energy drinks, squash or fruit juices (including sugar free drinks)?

 Several Times A Day Daily Every Few Days Never

2. How often do you eat sweets, toffees, chocolate or mints?

 Several Times A Day Daily Every Few Days Never

3. Do you have sugar in tea or coffee?  Y  N

If **YES**, how often?

 Several Times A Day Daily Every Few Days Never

4. How often do you eat fruit or dried fruit?

 Several Times A Day Daily Every Few Days Never

## Mobility

As we have surgeries upstairs and downstairs, please let us know if you are unable to easily go upstairs so that we can book you into an appropriate surgery for your appointments.

Are you able to easily walk up stairs?  Y  N