

## SMILE EVALUATION

**If I could change my smile, I would:**

- \*Make my teeth brighter
- \*Make my teeth straighter
- \*Close spaces
- \*Replace black fillings with tooth colored fillings
- \*Repair chipped teeth
- \*Replace missing teeth
- \*Replace old crowns that don't match
- \*Have a smile makeover

**On a scale of 1 to 10, with 10 being the highest rating:**

How important is your dental health to you?

1 2 3 4 5 6 7 8 9 10

Where would you rate your current dental health?

1 2 3 4 5 6 7 8 9 10

How important is a beautiful smile in your life?

1 2 3 4 5 6 7 8 9 10

How would you rate your current smile?

1 2 3 4 5 6 7 8 9 10