New Patient Form



Information provided is strictly confidential and will be held within the practice under the terms of the General Data Protection Regulation of May 2018

What is the main reason for contacting the practice?

Minimal intervention is about keeping your mouth healthy for life, rather than damage limitation and repair. It is suitable for everyone at any age. Please answer the following questions so we can work together to try and keep your teeth and mouth healthy.

Is there anything you are not happy with your teet	th or mouth?		
Have you any particular anxieties regarding denta	 al treatment?		
<u> </u>			
	YES	SOMETIMES	NO
Do you use a fluoride toothpaste?			
Do you use an electric toothbrush?			
Do you clean between your teeth daily?			
Do you brush twice a day or more?			
Do you have sugar in your tea/coffee?			
Do you have a "sweet tooth"?			
Do you eat snacks between meals?			
Have you ever had chemotherapy or radiotherapy?			
Do you have a persistently dry mouth?			
Do you have sensitive teeth?			

How did you hear about us?

Do you drink fizzy drinks?