



DENTAL HEALTH QUESTIONNAIRE FOR CHILDREN OVER 5

A child's dental health is affected by many different things; 3 most important to developing teeth are:

- 1) Home dental care (brushing, flossing and the use of fluorides)
- 2) Habits relating to the mouth or teeth
- 3) Your child's diet

To help us better evaluate your child's dental health please answer the following questions honestly and to the best of your ability:

HOME DENTAL CARE

1. Does your child brush his/her own teeth? YES NO
a. How often? _____times/day _____times/week
2. Do you brush your child's teeth for them? YES NO
a. How often? _____times/day _____times/week
3. How much toothpaste does your child use? PEA SIZE AMT ENTIRE BRISTLE LENGTH
4. Does he/she swallow the toothpaste? YES NO
5. Does your child floss his/her teeth? YES NO
a. How often? _____times/day _____times/week
6. Does your child take fluoride drops or tablets? YES NO
a. If YES, at what age did he/she start taking them? _____
b. Is he/she still taking them? YES NO
7. Has your child ever lived in a fluoridated area? YES NO UNSURE
8. Does your child use a fluoride mouthwash? YES NO UNSURE
a. How often? _____times/day _____times/week
b. Brand name? _____
9. Has your child received fluoride treatments at a dental office? YES NO UNSURE
10. Anything else you would like to add about the care of your child's teeth at home?
