



Passage House Dental Care

modern dentistry for all

Smile Questionnaire

Name:
Date of Birth:

Please tick the relevant boxes

	Yes	No
Would you like your teeth to look whiter or brighter?		
Have you any teeth you think are unsightly, badly shaped or out of line?		
Do you have spaces that you don't like?		
Do you have any old or stained fillings that show when you smile?		
Do you have any old crowns that now do not match your other teeth or have black lines at the gums?		
Are your teeth stained or are your gums red and swollen?		
Do you have any missing teeth that you would like replacing to improve your smile and your bite?		
Do you have an old worn denture that looks false?		

If there any other aspects of your dental care you wish to discuss then please do ask your dentist. We will always give you an honest professional opinion and work together in getting the right treatment plan to suit your needs.

If there is any other information you may require please contact us by phone or via email :
info@passagehousedental.co.uk

Further information about treatment and services can be found at:
www.passagehousedental.co.uk