

Please handle me with care!

Please check the the statements that concern you or describe your situation.

- I haven't been to the dentist for a long time, and I'm worried about what you will say about my teeth and my oral hygiene.
- My teeth are very sensitive.
- Pain relief is a top priority for me.
- I get very anxious about injections.
- I feel uncomfortable in a dental chair (or I have an extreme problem with lying down).
- I gag easily.
- I hate the noise of dental instruments.
- Please tell me about my treatment options and the ways these can be carried out.
- I need to know that you will stop when I give a preagreed "stop" signal during treatment.
- It would help me if you could explain to me what you are doing and why.
- I have health problems that we need to discuss.
- There are other issues I'd like to talk about that aren't covered on this form.
