

Smile Analysis Questionnaire

"The Shortest distance between two people is a smile."
- Mark Twain

Do you feel uncomfortable or self-conscious about your smile?
 Yes No

Do you cover your mouth when you talk or smile?
 Yes No

Are your teeth in alignment (straight)?
 Yes No

Do you wish your teeth were whiter?
 Yes No

Do you like the shape of your teeth?
 Yes No

Are your teeth chipped?
 Yes No

Can you see dark restorations in your teeth that bother you?
 Yes No

Are there old crowns, bridges or fillings that you don't like the appearance of?
 Yes No

If the office offered Botox or Juvederm, would you be interested?
 Yes No

What would you like your smile to look like?
