



# My Smile

## **I would like my smile better if I could...**

- ☐ Make my teeth brighter
- ☐ Make my teeth straighter
- ☐ Close the spaces
- ☐ Replace metal fillings with tooth coloured fillings
- ☐ Repair chipped teeth
- ☐ Replace missing teeth
- ☐ Replace my old crowns
- ☐ Have a complete smile makeover

## **Concerns I have with my smile...**

- ☐ My teeth are sensitive to hot and cold
- ☐ My teeth are sensitive to sweet/sugary foods
- ☐ I have teeth or fillings that are breaking
- ☐ I have jaw joint pain
- ☐ I grind or clench my teeth at night
- ☐ I have bleeding or swollen gums
- ☐ Some teeth are loose or shifting
- ☐ I have bad breath

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