

Name _____

DATE															
new lesion(s) (w/in 3y)															
rest for caries (3y)															
ext for caries (3y)															
visible plaque															
deep pits/fissures															
saliva reduced/meds															
dry mouth*															
poor restorations															
exposed roots															
ortho appliances															
RPD or bridge															
irregular dental care															
frequent snack (3+)															
high sugar intake															
recreational drugs															
family caries (<6yo)*															
fluoridated water															
toothpaste 1xdaily															
toothpaste 2xdaily															
OTC fluoride rinse															
RX fluoride paste															
Fl Varnish today?															
Chlorhexidine 1w/mo															
MI paste last 6mo															
CARIES RISK LEVEL															

*might be automatic high risk