

Covell Family Dental
Andrew Kim, DDS
GETTING TO KNOW YOU...

Patient Name _____

Date _____

Our promise is to provide you with a dental experience that meets or exceeds your expectations in a caring, comfortable, and professional atmosphere. We will provide care to achieve and maintain your oral health and dental function, help prevent future dental problems, and create beautiful smiles.

To help us serve your dental needs best, we would like to know more about you. Please take a moment to complete the following questions:

What do you expect from your visit with us today?

What is most important to you about your dental health?

In your opinion, what is the present condition of your mouth?

Are you dissatisfied with your teeth and/or their appearance? What would you enhance about your smile?

Are there foods you enjoy but cannot eat due to discomfort with your teeth?

Are you aware there are medical conditions related to dental disease?

What do you know about periodontal disease?

What has been your overall experience in other dental offices?

On a scale of 1 to 10 (1 = lowest) how much anxiety do you experience with dental treatment?
How do you handle this anxiety?

Has fear or cost ever prevented you from getting the dental treatment you need? Y____ N____

What "quality" of dentistry do you want us to focus on at this time? Please circle:

- A) Minimal treatment B) Only treatment covered by insurance C) All treatment that is needed

Should you be in need of treatment, at what point do you want to get started? Please circle:

- A) When it hurts B) When it breaks C) When it is recommended to prevent further deterioration

Please feel free to let us know how we can help make this your best dental experience.

Thank you for taking the time to provide us with your opinions.