

## Assess your risk of dental disease

If you answer YES to ANY of the following questions, you or your child may be at an increased risk for dental disease. Bring this form to your dentist and discuss how you can work together to reduce your risk.



I eat or drink sugary snacks every day.  Eating lots of high-sugar food and beverages is the main cause of tooth decay. Bacteria in the mouth convert sugars into acids that cause tooth decay. As the amount of sugar increases, more acids attack the teeth. To lower your risk, replace sugary treats with fresh fruit and vegetables, and drink water instead of soda pop or juice.	□ YES	□ NO
I take prescription or over-the-counter medications.  Give your dentist a list of all medications and supplements you take as many medications can cause changes in your mouth. The most common drug side effect is dry mouth, which increases your risk for cavities. If you have dry mouth from taking a medication, your dentist might recommend more frequent visits, a special mouth rinse, or high-fluoride toothpaste.	□ YES	□ NO
I smoke cigarettes, a pipe or cigars, or I chew tobacco.  A high percentage of people who develop oral cancer are tobacco users. Smoking and chewing tobacco are also connected to periodontal (gum) disease and tooth decay. Regular dental check-ups are important to check for signs of oral cancer, gum disease, and tooth decay. Plus, your dentist can help you kick the tobacco habit.	□ YES	□ NO
I've had a cavity in the last three years.  If you have a history of tooth decay, you may be at risk for future cavities. Good home care is important—start with daily brushing and flossing. See your dentist regularly, and ask your dentist or dental hygienist to help you set up a personal dental care program.	□ YES	□ NO
I have diabetes. Diabetics are at higher risk for tooth decay and periodontal (gum) disease. You may need two or more cleaning visits each year to maintain your oral health. Good home care such as daily brushing, flossing and rinsing with mouthwash will help reduce your risk of cavities and gum disease. Ask your dentist what level of care is best for you.	□ YES	□ NO
I had periodontal (gum) surgery.  Surgical removal of gum tissue can expose the roots of the teeth, putting the weaker root surface at increased risk for cavities. Talk to your dentist about special care following gum surgery.	□ YES	□ NO
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I live in a community that does not have fluoride in the water supply. Fluoridation of community water supplies is a proven and effective way to prevent tooth decay. If your community does not have fluoridated water or if you have a well, talk to your dentist about your fluoride needs.	☐ YES	□ NO
I give my baby a bottle of milk or juice when I put her to bed.  Using formula, milk, juice, or other sugary drinks in the bedtime or naptime bottle puts your child at risk for baby bottle tooth decay. While your child is sleeping, the fluids stay in the mouth and around the teeth, creating acid-producing bacteria that cause tooth decay. Schedule your baby's first dental visit when the first tooth comes in or by age one, and talk to your dentist about other ways to prevent tooth decay.	☐ YES	□ NO
I take medication to prevent osteoporosis (bone thinning). You should check with your doctor before having dental treatment. One of the drugs (generic name bisphophonate) used to treat osteoporosis has a rare but serious side effect. It may cause osteonecrosis of the jaw (ONJ), a condition that involves severe loss or destruction of the jawbone. ONJ may occur in patients who have had extractions, implants, or oral surgery that exposed the jawbone.	□ YES	□ NO
I have a heart condition.  Tell your dentist about all your health problems even if you don't think they might affect your oral health. People who have certain heart conditions may be at risk for a potentially deadly heart infection—infective endocarditis. The American Heart Association says that good oral health reduces this risk factor. After consulting with your physician, your dentist might recommend more frequent cleanings.	☐ YES	□ NO
I have had or will have head and neck radiation treatment.  Radiation exposure usually causes salivary glands to slow down or stop making saliva. The result is extreme dry mouth and high risk for cavities. Redness and irritation inside the mouth are also common. Before you start your treatment, go to your dentist for a complete check-up. Ask your dentist to consult with your oncologist. Your dentist may recommend a saliva substitute, removal of diseased teeth, or fluoride treatments.	☐ YES	□ NO
One of the following applies to me: undergoing chemotherapy; HIV positive status; organ transplant; stem cell (bone marrow) transplant.  These conditions suppress your immune system and decrease your body's natural ability to fight infection. Studies show that a clean, healthy mouth contributes to overall health, so your dentist may recommend that you have your teeth cleaned more frequently. Dental cleaning removes harmful bacteria that could cause infections in people with lowered resistance.	□ YES	□NO
I have an eating disorder, such as bulimia (self-induced vomiting after eating). Eating disorders can damage your teeth, as stomach acids erode the tooth enamel. As the enamel wears down, teeth become sensitive and the risk of decay increases. Teeth usually require extensive repair when the medical condition is under control.	□ YES	□NO
Please note: Many dental benefit coverage options are available. Contact your personnel office or dental benefit carrier to check the covered services on your plan. To avoid misunderstandings, ask your dentist how much you will have to pay for the recommended treatment.		