

ANALYZE YOUR OWN SMILE

1. Do you have any concerns about your smile?
2. Do you cover your mouth with your hand when you smile or talk?
3. Are some of your teeth darker than the others?
4. Do some of your teeth have white or brown stains?
5. Are you self-conscious about smiling in front of other people?
6. Would you like a whiter, more youthful smile?
7. Do you see and defects in the appearance of your teeth or gums?
8. Are there spaces or gaps between any of your teeth?
9. Are your teeth crowded and difficult to keep clean?
10. If you have crowding or spaces, is it getting worse?
11. Are any of your teeth too long or too short?
12. Are any of your teeth crooked, jagged, worn, or chipped?
13. Do you have old fillings or bonding that are chipped, discolored, misshaped, worn, or otherwise in need of upgrading?
14. Are there dark or grey areas at the bottom of your existing crowns?
15. Do you have missing teeth that you would like replaced?
16. Is the appearance of your smile out of balance from one side to the other?
17. Is there anything else about your smile that you would like to change if it were possible?

If you answered “Yes” to any of these questions, you may want to discuss the various options available to enhance your smile through cosmetic dentistry. Call us for a consultation at (317)882-0227 or email us at IndianapolisDentistry@calmingfears.com