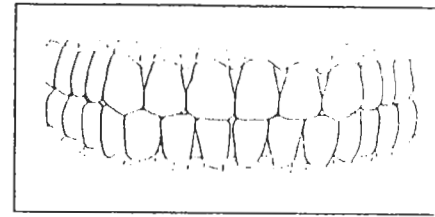


A Simple Quiz To Help You Obtain The Smile You've Always Wanted.

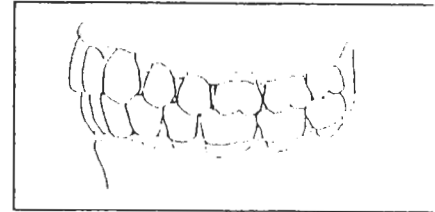
REMBRANDT[®] SMILE EVALUATION

Hold a full face mirror 12" – 14" from your face. Smile to show your teeth; take the time to observe your teeth carefully. Then answer the following questions. (It is helpful to have a friend ask you the questions.)

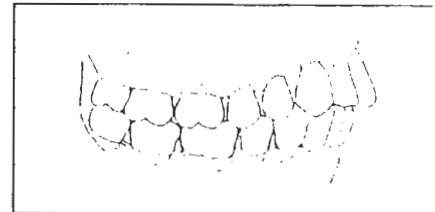
1 Do you like the appearance of your teeth; your smile? Yes No
If not, explain _____



2 Are your teeth all in alignment (straight)? Yes No
If not, explain _____

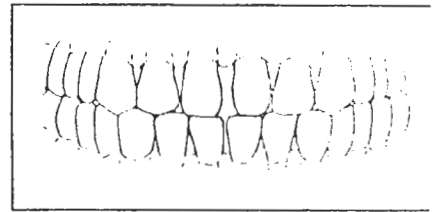


3 Do you have spaces that you don't like? Yes No
If yes, explain _____



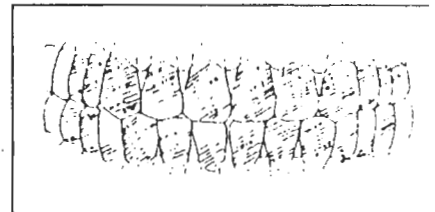
4 Do you like the color of your teeth? Yes No
If not, explain _____

5 Do you like the shape of your teeth? Yes No
If not, explain _____



6 Are your teeth...
chipped? _____ protruding? _____ hidden? _____

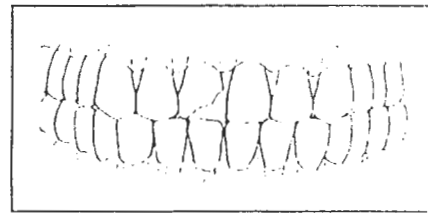
7 Are your teeth wearing on the biting surfaces? Yes No
If yes, explain _____



8 Are there old fillings or dental work you don't like looking at? Yes No
If yes, explain _____

9 What would you like to change the most in the appearance of your teeth?

10 How would you like your teeth to look?



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