



Ref.: Registration Form

Questionnaire:

1. Do the patient's parents have any known allergies?  
Yes/ No
2. Does the child have any known allergies?  
Yes/ No
3. In case the previous question was answered with yes: Which kind of allergy or unfavorable reaction was noticed in the child before?
4. Does your child suffer from one of the following illnesses? Aids/ Asthma/ ADS/ Blood Coagulation Disorder/ Diabetes/ Epilepsy/ Hearing Disorder/ Hepatitis/ Cardiac Illness/ Hepatic Illness/ Leukemia/ Pulmonary Illness/ Muscular Weakness/ Neurodermatitis/ Renal Illness/ Tuberculosis/ Rheumatism/ Tumor/ Other Illnesses
5. Does your child have any other physical or mental handicap?  
Yes/ No
6. In case you answered the previous question with yes: Which kind of handicap?
7. Did your child already have three-day-fever/ measles/ chicken pox/ scarlet fever?
8. Did your child ever undergo anesthesia before?  
Yes/ No
9. Where, when and why was anesthesia administered?
10. Does your child have to take any medication on a regular basis?  
Yes/ No
11. Has your child ever been at the dentist's before?  
Yes/ No
12. Was there anything your child did not like on that occasion?
13. Which is the reason for your seeing us today?

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Questionnaire (Cont'd):

14. Does or did your child drink from the bottle?
15. In case you answered the previous question with yes – which kind of beverages and when?
16. Which kind of fluorides did your child receive? (Fluorette/ fluoride salt/ fluoride gel/ toothpaste)
17. Does your child consume much candy or many sweetened beverages?  
Yes/ No
18. Does your child take a pacifier or does he/ she suck his/ her thumb?  
Yes/ No

Information:

Today, caries is an almost 100% avoidable illness. We would like to help you teaching your child at an early age, why correct tooth care is important and which type of alimentation is healthy for the teeth.

For this reason, our patients attend "tooth brushing class" at the age of 6, for prophylactic reasons. In this class, we will individually discuss optimal tooth care with you and your child. A little practice will be done. If necessary, the teeth will be sealed.

Our practice works with an appointment system. This means that we reserve a particular appointment for your child. If you do come to the appointment we previously agreed upon, we have to charge you a lump sum of 50 Euros. If a dental appointment including anesthesia is not being kept, we even have to charge you 200 Euros. For this reason, please cancel appointments, which cannot be kept, in a timely fashion (i.e. 24 hours in advance), so that our practice can make other plans.

Declaration of Consent:

I have read the information and declare my consent.

I also agree that my child will receive the necessary treatment, which was previously discussed.

Date:

Signature: