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CRA FORM	First name:	Last name:	Date:
Adults and Children Age 6+			

Due to new research on cavities and what causes them, we are moving toward a standard of care that can offer earlier detection and treatment. Please fill out the "Patient Use" section of this form to the best of your ability. These items will be discussed with your dental professional during your appointment today.

	screening test today to the bacterial infection t	hat	no			yes	
If diagnosed at risk for interested in discussing	r cavities today, would yong treatment options?	ou be	no	ma	ybe	yes	
lf needed, are you will habits?	ling to modify your dieta	ry	Not an option		ld, but want to	Sure	
ISK FACTORS							
l notice plaque build-ı	up on my teeth.		no	***************************************		yes	
I take medications dai	ly. (#)		no	*******************************	4	yes	
I suffer from dry mout	h at times during the day	y.	no			yes	
I drink things other the times daily (other than	an milk or water more th n with meals).	an 2	no			yes	
I like to snack 1-3 time	l like to snack 1-3 times daily between meals.		no	no		yes	
l have oral appliances	present.		no			yes	
Do any of these other (check all that apply) Frequent tobacco	health concerns apply to	you?	no			yes	
Acid reflux	Bulimia						
☐ Diabetes	☐ Sjogren's Syndr	ome					
DISEASE INDICATOR		rome	no			Ves	
DISEASE INDICATOR Visible Cavitations		rome	no			yes	
DISEASE INDICATOR		rome			Total Control	yes	
DISEASE INDICATOR Visible Cavitations Radiographic Lesions		ome	no			***************************************	
DISEASE INDICATOR Visible Cavitations Radiographic Lesions White Spot Lesions	RS	ome	no			yes yes	
Visible Cavitations Radiographic Lesions White Spot Lesions Cavity in Last 3 Years	RS	ome	no			yes yes	
Visible Cavitations Radiographic Lesions White Spot Lesions Cavity in Last 3 Years	RS EE ssessment	ome	no no no			yes yes yes high	
Visible Cavitations Radiographic Lesions White Spot Lesions Cavity in Last 3 Years SIOFILM CHALLENG CariScreen Bacterial A	RS EE ssessment	rome	no no no			yes yes yes high	
Visible Cavitations Radiographic Lesions White Spot Lesions Cavity in Last 3 Years BIOFILM CHALLENG CariScreen Bacterial A	RS EE ssessment	ome	no no low <150			yes yes yes high ≥1501	
Visible Cavitations Radiographic Lesions White Spot Lesions Cavity in Last 3 Years IOFILM CHALLENG CariScreen Bacterial A ASSESSMENT SI Risk Factors Disease Indicators	RS EE ssessment	ome	no no no low <150			yes yes yes high ≥1501 yes	
Visible Cavitations Radiographic Lesions White Spot Lesions Cavity in Last 3 Years BIOFILM CHALLENG CariScreen Bacterial A ASSESSMENT SI Risk Factors Disease Indicators Biofilm Challenge	SE SSESSMENT UMMARY Ifer information above to		low no no low	0		yes yes yes high ≥1501 yes yes	
Visible Cavitations Radiographic Lesions White Spot Lesions Cavity in Last 3 Years BIOFILM CHALLENG CariScreen Bacterial A ASSESSMENT SI Risk Factors Disease Indicators Biofilm Challenge DIAGNOSIS Trans N Y Risk Factors	Sessment UMMARY Ifer information above to	boxes b	no no no no low elow to determine	o e risk. Y □ Risk Factors		yes yes yes high >1501 yes yes high	
PISEASE INDICATOR Visible Cavitations Radiographic Lesions White Spot Lesions Cavity in Last 3 Years BIOFILM CHALLENG CariScreen Bacterial A ASSESSMENT SI Risk Factors Disease Indicators Biofilm Challenge DIAGNOSIS Trans N Y Risk Factors Disease Indicators Disease Indicators DISEASE Indicators	ssessment JMMARY fer information above to N Y Risk Factors Disease Indicators L H	boxes b N Y I Risk Disc	no no no low elow to determine a Factors ease Indicators	o e risk. Y □ Risk Factors □ Disease Indi	cators L	yes yes yes high ≥1501 yes yes high Y □ Risk Factors □ Disease Indicators H	
Visible Cavitations Radiographic Lesions White Spot Lesions Cavity in Last 3 Years HOFILM CHALLENG CariScreen Bacterial A ASSESSMENT SI Risk Factors Disease Indicators Biofilm Challenge DIAGNOSIS Trans N Y Risk Factors Disease Indicators	Sessment UMMARY Ifer information above to N Y Risk Factors Disease Indicators	boxes b N Y Risk Disc L H Biot	no no no no low elow to determine a Factors ease Indicators	e risk. Y □ Risk Factors □ Disease Indi	cators L lenge	yes yes yes yes high ≥1501 yes yes high Y □ Risk Factors □ Disease Indicators	

PATENT-PENDING