CHARLES ASHLEY MANN, DDS
AND ASSOCIATES
Family and Cosmetic Dentistry
www.smilemann.com

Denture - Patient Questionnaire

Patient Name (Printed): _____

Date: _____

1. What is your age?

☐ 18-24 ☐ 35-44 ☐ 55-64 ☐ 75 or older
☐ 25-34 ☐ 45-54 ☐ 65-74

2. Approximately how long have you worn your current denture?

☐ Less than one year ☐ 8-10 years
☐ 1-4 years ☐ 11-15 years
☐ 5-7 years ☐ Over 15 years

3. In general, how do you feel about your denture?

☐ I am quite pleased with my denture.
☐ I am somewhat pleased with my denture.
☐ I don't really care for my denture but I tolerate it.
☐ I don't care for my denture at all and rarely wear it, if ever.

4. What do you like about your denture (select as many answers that apply):

☐ My denture helps me to chew my food better.
☐ My denture improves my smile.
☐ My denture feels very natural.
☐ There is nothing I really like about my denture.
☐ Other(please specify)

_____

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5. Which, if any, problems are you experiencing with your denture (select as many answers that apply):
   - ☐ My denture moves when I chew my food.
   - ☐ I am embarrassed to remove my denture at night, or at other times.
   - ☐ I don't particularly care for the way my denture looks.
   - ☐ Food gets trapped beneath my denture.
   - ☐ I am not experiencing problems associated with my denture.
   - ☐ Other (please specify)

   _____

6. Do you generally wear your denture to bed at night?
   ☐ Yes ☐ No

7. How much longer do you expect your denture to look, fit and function well?
   - ☐ Less than 5 years
   - ☐ 5 to 10 years
   - ☐ 11 to 15 years
   - ☐ 16 to 20 years or more
   - ☐ I am not sure.
   - ☐ I am no longer pleased with my denture(s).

8. Do you use some form of denture adhesive with your denture (Poligrip, Fixadent, etc)?
   ☐ Yes ☐ No
   If Yes, which brand or product do you use? _____

9. How familiar are you with dental implants?
   - ☐ Very familiar
   - ☐ Somewhat familiar
   - ☐ Not familiar at all

10. Would you like to attend the dental implant discussion in person or virtual?
    - ☐ In person
    - ☐ Virtual