

LUMINEERS® SMILE EVALUATION

A simple questionnaire to help you get the smile you've always wanted

Hold a mirror 12"-14" from your face. Smile to show your teeth. Look at your teeth very carefully, then answer the following questions. If you are not happy with the appearance of your teeth, ask your dentist how LUMINEERS can give you a beautiful, white smile.

- 1 Do you like the appearance of your teeth and 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 down 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 about the appearance of your teeth?

- 10 How would you like your teeth to look?

- 11 Would you like to see a photo of how your smile could look with LUMINEERS?
☐ Yes ☐ No

FROM CHIPPED & STAINED...



...TO NO CHIPS & WHITER



FROM STAINED...



...TO WHITER THAN EVER



FROM CHIPPED...



...TO GOOD AS NEW



FROM DISCOLORED...



...TO BEAUTIFULLY WHITE



FROM SMALL...



...TO JUST RIGHT



FROM AN OLD CROWN...



...TO A REVITALIZED SMILE



Bring out your beautiful, white smile today!