Caries Risk Assessment Form

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Patient Name:		Date:
High Risk Factors ☐ 3 or more carious lesions/restorations	future cavities may include, Moderate Risk Factors Active caries in previous 12 months	but are not limited to: Drug/alcohol abuse
in last 36 months ☐ Teeth missing due to caries in last 36 months	 ☐ High titers of cariogenic bacteria ☐ Active orthodontic treatment (fixed or removable) ☐ Poor family dental health ☐ Genetic abnormality of teeth 	 □ Numerous multi-surface restorations □ Eating disorders □ Presence of exposed root surfaces □ Restoration overhangs and open margin □ Prolonged nursing (bottle or breast) □ Developmental or acquired enamel defect □ Other
☐ Cariogenic diet (frequent high sugar and acidic food/drinks)		
□ Xerostomia (medication, radiation, disease induced)□ Chemo/radiation therapy		
☐ Physical or mental disability which prevents proper oral health care	☐ Suboptimal fluoride exposure ☐ Irregular professional dental care	
Diagnosis Low Risk = no factors checked Moderate Risk = only moderate High Risk = at least one condition		
Proposed treatment for im	proved prognosis:	