

### Clinical examination data sheet

Patient Serial no:

Group: A/B

Age:

Gender: F/M

Occupation:

Factors	High	Normal
How Frequently do you brush your teeth?	>2	1
How long do your brush your teeth?	>4 min	2-3 min
Technique of brushing your teeth?	Horizontal	Bass
What type of tooth brush do you use?	Hard	Medium/ Soft
How often you consume citrus fruits /drinks /carbonated drinks		

Type of occlusal scheme

Occlusal scheme	Canine guided	Group function
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