

Dental Health – Learner Self-Reflection – CLB 4–5

Name: _____ Date: _____

After this lesson I feel ready to...

brush my teeth twice a day.	Yes	No	I already do this
visit a dental clinic.	Yes	No	I already do this
floss my teeth.	Yes	No	I already do this
put a little toothpaste on my toothbrush.	Yes	No	I already do this
change my toothbrush every 3 months or after an illness.	Yes	No	I already do this
limit my intake of sugary food and drinks.	Yes	No	I already do this
remember to clean all over each of my teeth.	Yes	No	I already do this