

# ACTIVITY PLAN FOR MOUTH AND TEETH CARE

## 1. Schedule a dental appointment!

Identify the dentist's phone number \_\_\_\_\_

Identify possible times and dates \_\_\_\_\_

Identify additional information that you need to gather

---

Call the dentist \_\_\_\_\_

Identify things you want to talk to the dentist about during the appointment

---

Plan a strategy to follow-up after the appointment

a. What needs to be done next? \_\_\_\_\_

## 2. Teeth brushing and flossing log (if needed)

Day of week                  Time                  Activity (brush or floss)

Monday	AM PM	
Tuesday	AM PM	
Wednesday	AM PM	
Thursday	AM PM	
Friday	AM PM	
Saturday	AM PM	
Sunday	AM PM	

### 3. Mouth and face exercise log

Day of week	Exercise	Number	Notes
Monday	Facial Stretching Augmentation		
Tuesday	Facial Stretching Augmentation		
Wednesday	Facial Stretching Augmentation		
Thursday	Facial Stretching Augmentation		
Friday	Facial Stretching Augmentation		
Saturday	Facial Stretching Augmentation		
Sunday	Facial Stretching Augmentation		