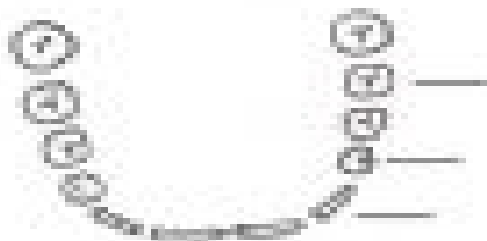


Name: _____

Dental History Information

Figure A.

Number the 1 through 17 spaces.



How many spaces in this arch have a tooth? _____

Label each tooth in your DC-MOT mouth with words provided.