

# THE DENTAL SEDATIONIST

PLEASE INDICATE BY INSERTING 'X' IN THE APPROPRIATE BOX

1. If you went to your Dentist for TREATMENT TOMORROW, how would you feel?

Not Anxious       Slightly Anxious       Fairly Anxious       Very Anxious       Extremely Anxious

2. If you were sitting in the WAITING ROOM (waiting for treatment), how would you feel?

Not Anxious       Slightly Anxious       Fairly Anxious       Very Anxious       Extremely Anxious

3. If you were about to have a TOOTH DRILLED, how would you feel?

Not Anxious       Slightly Anxious       Fairly Anxious       Very Anxious       Extremely Anxious

4. If you were about to have your TEETH SCALED AND POLISHED, how would you feel?

Not Anxious       Slightly Anxious       Fairly Anxious       Very Anxious       Extremely Anxious

5. If you were about to have a LOCAL ANAESTHETIC INJECTION in your gum, above an upper back tooth, how would you feel?

Not Anxious       Slightly Anxious       Fairly Anxious       Very Anxious       Extremely Anxious

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**Instructions for scoring (remove this section below before copying for use with patients)**

*The Modified Dental Anxiety Scale.* Each item scored as follows:

Not anxious                =     1  
Slightly anxious        =     2  
Fairly anxious            =     3  
Very anxious              =     4  
Extremely anxious       =     5

Total score is a sum of all five items, range 5 to 25: Cut off is 19 or above which indicates a highly dentally anxious patient, possibly dentally phobic