

— THE ULTIMATE — **ORTHODONTIC SCREENING CHECKLIST**

1. PATIENT HISTORY (1 min)

- Medical History
- Dental History

2. CLASSIFICATION (3 mins)

- Dental Classification
- Temporomandibular Joints
- Facial Survey
- Myofunctional

3. PATIENT MOTIVATION (3 mins)

- Chief Complaint
- Patient's Perception of Protrusion
- Treatment Preferences