



Dental Anxiety Desensitization Data Sheet

Name:					Guide	FLI Scale	OBFI Scale				
					C=Completed		1	1			
Date:					CP=Completed with Prompting		2				
					NC=Not Completed		3	3			
Baseline:					V1	V2	V3	FLI=Fear Level Indicated (Scale 1-5)		4	4
					OBFI=Body Fear Indicator (Scale 1-5)		5	5			

Task:	C	CP	NC	FLI	OBFI	Notes:
Enters Clinic Reception						
Greets Receptionist						
Sits in Waiting Room						
Enters Clinic						
Sits in Dental Chair						
Places Hands on Stomach						
Reclines in Chair						
Wears Dental Bib						
Accepts Hygienist Glove and Mask						
Hygienist Position Behind Head						
Light on						
Hygienist Touching Face						
Hygienist Touching Lips						
Hygienist Touch Cheeks and Gums						
Use of Mirror						
Use of Soft Tap to Count Fingers						
Use of Hard Tap to Count Fingers						
Use of Soft Tap to Count Teeth						
Use of Hard Tap to Count Teeth						
Use of water						
Use of suction straw						