SANDQUIST DENTISTRY
LAS VEGAS SINCE 1968

702-734-0776
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Myofunctional Therapy Self-Assessment

Where your tongue rests, how you swallow, and whether you breathe through your nose. Ten questions. Check anything that sounds like you.

A conversation starter, not a diagnosis. The number at the end only tells you how much there is to talk about. Plenty of people check a few boxes and need nothing done. Bring it to your next visit.

Breathing

- ☐ My mouth is often open, or I breathe through it.
- ☐ My nose feels blocked a lot of the time.

Tongue and lips

- ☐ My tongue rests low, or against my front teeth.
- ☐ Keeping my lips closed takes effort.
- ☐ My tongue pushes forward against my teeth when I swallow.

Sleep and jaw

- ☐ I snore, or I have been told I do.
- ☐ I wake up tired even after enough sleep.
- ☐ I grind or clench my teeth at night.
- ☐ I catch myself clenching during the day.

My teeth

- ☐ My teeth have shifted or gaps have opened, with or without braces.

Total checked: _____ of 10

0 to 2	Probably not the main thing going on. Still mention anything that genuinely bothers you.
3 to 4	Worth raising at your visit, so someone can look properly rather than guess.
5 or more	Worth a specific conversation. Bring this sheet and ask for Dr. Lee-Mirzayan.

Questions? Call 702-734-0776 · Ask for Dr. Lee-Mirzayan, DDS, Certified Myofunctional Therapist
2650 Lake Sahara Dr., #160, Las Vegas, NV 89117 · Mon & Tue 7-12, 1-5 · Wed 7-12, 1-3 · Thu 7-12, 1-4

Question areas adapted from the Nordic Orofacial Test-Screening (Bakke M, et al. Swed Dent J. 2007;31(2):75-84). Not that instrument, not itself validated, and not a substitute for an exam or a sleep study. Also online at lasvegasdentistry.com/myofunctional-self-assessment/