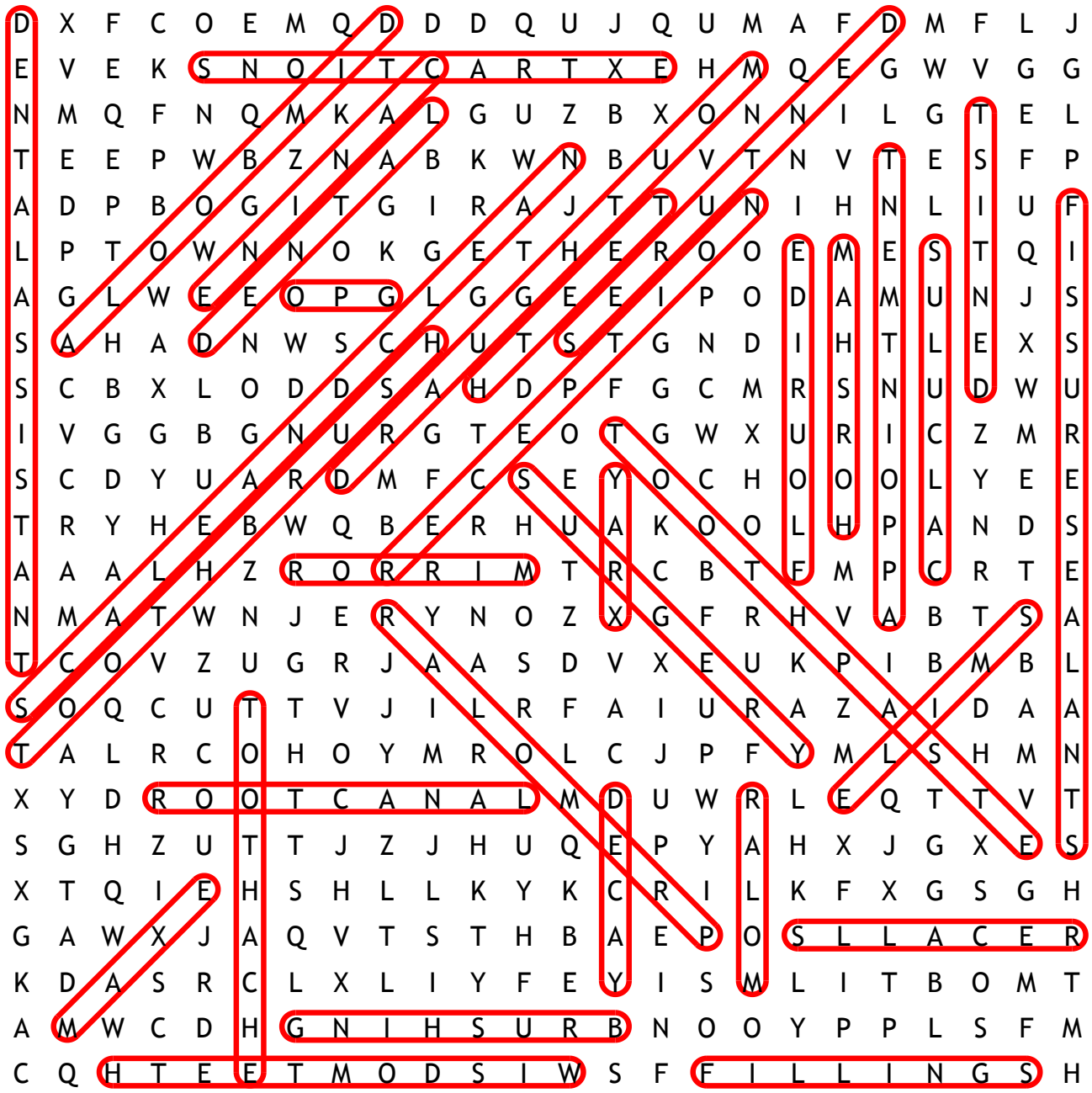
Name: _____ Date: _____

Dental



Dental Assistant
Extractions
Toothpaste
Brushing
Surgery
Dental
Xray

Fissure Sealants
Tooth Ache
Reception
Dentures
Horsham
Decay
Exam

Scale And Clean
Root Canal
Premolar
Flouride
Dentist
Molar
OPG

Wisdom Teeth
Mouthguard
Dimboola
Fillings
Canine
Smile

Appointment
Toothbrush
Calculus
Recalls
Mirror
Teeth