Show your teeth you care

Fill in the missing words from the list below to complete the sentences below.

**Dentist, Sugary, Brush, Toothpaste, Drinks, Teeth**

1. ___________ your ___________ last thing at night and at one other time during the day with a fluoride ___________.

2. Cut down on how much and how often you have ___________ foods and ___________.

3. Visit the ___________ regularly, as often as they recommend.

**Answers**

*Brush* your *teeth* last thing at night and at one other time during the day with a fluoride *toothpaste*.

Cut down on how much and how often you have *sugary* foods and *drinks*.

Visit the *dentist* regularly, as often as they recommend.

Visit us online at www.dentalhealth.org

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