

Rothwangl Dental Care, PLLC
C. Rothwangl, DDS
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Bedford, NH 03110
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When was your last dental visit? _____

What was that visit for? _____

When was your last dental cleaning? _____

Previous dental office name and contact information:

Do you like your smile? Yes or no

If not, please tell us your concerns:

Any current dental concerns: Yes or no

Any current dental discomfort: Yes or no

We consider a referral from our patients the greatest compliment. Were you referred from an existing patient? If yes, who can we thank for the referral? _____

If not referred by another patient, how did you find our office?

At Rothwangl Dental Care, our mission is to provide the highest quality dental care in an intimate, personable atmosphere. We are dedicated to making every office visit a positive experience by providing the technology, skills, and services tailored to each individual. Our professional team strives to help our patients achieve a lifetime of healthy smiles.
