

WEEKLY DENTAL HYGIENE TRACKER

Name:

Week Of:

| DAY | MORNING | EVENING | FLOSS |
|-----------|---------|---------|-------|
| Monday | | | |
| Tuesday | | | |
| Wednesday | | | |
| Thursday | | | |
| Friday | | | |
| Saturday | | | |
| Sunday | | | |

Notes / Goals:

Remember to brush for 2 minutes and replace your toothbrush every 3 months.