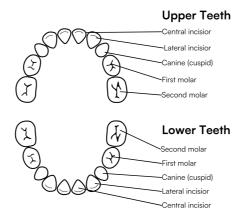
## **Baby Teeth Fall Out Chart**

Patient's Name:	Date
Patient's Name:	Da

Date of Birth: Gender:



**Upper Teeth** 

Tooth Name	Timeline of Loss	Have they fallen out/shed? Yes/No
Central Incisors	6 to 7 years old	
Lateral Incisors	7 to 8 years old	
First Molars	9 to 11 years old	
Canine	10 to 12 years old	
Second Molars	10 to 12 yeras old	

## **Lower Teeth**

Tooth Name	Timeline of Loss	Have they fallen out/shed? Yes/No
Central Incisors	6 to 7 years old	
Lateral Incisors	7 to 8 years old	
First Molars	9 to11 years old	
Canine	9 to 12 years old	
Second Molars	10 to 12 years old	

Referring Physician's Name:		

**Additional Notes:**