

# Early Orthodontic Warning Signs Checklist

*Ages 2 and Up | Bring to Your Child's Appointment*

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*This guide is for informational purposes only and does not replace professional assessment.*

**Important — If your toddler's baby teeth have no gaps between them, seek assessment now.**

Baby teeth should be spaced apart to make room for adult teeth which are 60% larger. Crowded baby teeth are a sign the jaw is already underdeveloped.

## 1. Ages 2–4 | Jaw Foundations & Airway

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*The earliest — and most powerful — window. Signs here should never be dismissed as 'too young to worry about.'*

- Baby teeth are crowded or overlapping
- No visible gaps or spacing between baby teeth
- Very high, narrow, or vaulted palate
- Mouth breathing at rest or during sleep
- Open mouth posture — lips not resting together naturally
- Snoring, grinding, or restless sleep
- Frequent night waking
- Tongue resting low or pushing forward rather than against the palate
- Thumb sucking or finger sucking (especially past age 2)
- Prolonged pacifier or bottle use (past age 2)
- Persistent dribbling past toddler age
- Recessed or underdeveloped chin profile
- History of tongue tie (even if released)
- Speech sounds not developing as expected
- Difficulty chewing solid foods

## 2. Ages 5–6 | Pre-School Window

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*The last easy window before adult teeth arrive. Make space now.*

- Crowded baby teeth, no spacing
- Teeth overlapping or rotated
- Crossbite (upper teeth inside lower)
- Jaw shifts to one side when biting
- Underbite (lower jaw in front of upper)
- Mouth breathing continues
- Teeth grinding (bruxism)
- Persistent thumb/tongue habit
- Difficulty with certain speech sounds
- Difficulty chewing certain foods

## 3. Ages 7–10 | Mixed Dentition

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*Adult teeth arriving. Structural issues become clearly visible now.*

- Crowding as permanent teeth erupt
- 'Shark teeth' (adult tooth behind baby tooth)
- Significant overjet or underbite
- Narrow dental arch (pointed, not round)
- Permanent teeth erupting in wrong position
- Facial or jaw asymmetry
- Persistent mouth breathing
- Dental crowding with baby teeth still present
- Jaw clicking or discomfort
- Speech or swallowing concerns

## 4. Ages 11+ | Full Orthodontic Review

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*Growth slowing. Correction replaces guidance.*

- Full permanent dentition assessment
- Crowding, bite, and alignment issues
- Airway and breathing evaluation
- Phase 2 braces or aligners

## 5. At Any Age | Breathing & Sleep Signs

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*Mouth breathing drives most orthodontic problems. Check at every age.*

- Mouth breathing during the day
- Open mouth at rest (lips not together)
- Snoring or noisy breathing during sleep
- Restless sleep or frequent night waking
- Teeth grinding at night
- Dark circles despite adequate sleep
- Difficulty concentrating or hyperactivity
- Bed wetting past typical age
- Chronic nasal congestion (no illness)
- Behaviour changes without clear cause

## 6. Questions to Bring to Your Consultation

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- My child is [age] — are we within the window where early treatment can make a difference?
- Are the issues I'm seeing related to the teeth, the jaw, the airway, or habits?
- Is my child's jaw developing at a normal width for their age?
- Does my child have adequate space for their adult teeth?
- What happens to development if we wait 6–12 months?
- Is mouth breathing contributing to this, and how do we address it?
- Do you work with myofunctional therapists or physiotherapists as part of care?
- What would early treatment involve, and what is my role as a parent?