

Oral Health Questionnaire

Child name :

Gender : Male Female

Place and date of birth:

Class and School:

Caregiver :

Contact number (for further follow-up):

The educational level of the parents who live with the child:

	Father	Mother
Primary or lower	<input type="checkbox"/>	<input type="checkbox"/>
Secondary	<input type="checkbox"/>	<input type="checkbox"/>
College or higher	<input type="checkbox"/>	<input type="checkbox"/>

How often does your child brush his/her teeth?

- Never / irregularly
- Once a day
- Twice a day
- Three times a day or more

Part A: Dietary habit of your child

- 1) How often does your child have soft drinks?
 - 6, 7 times a week or more (almost every day or more)
 - 3 times a week (alternate days)
 - Once a week
 - Less than once a week / never
- 2) How often does your child have citric tea / drinks containing lemon?
 - 6, 7 times a week or more (almost every day or more)
 - 3 times a week (alternate days)
 - Once a week
 - Less than once a week / never
- 3) How often does your child drink fruit juice?
 - 6, 7 times a week or more (almost every day or more)
 - 3 times a week (alternate days)
 - Once a week
 - Less than once a week / never
- 4) How often does your child have vitamin C supplement drinks?
 - 6, 7 times a week or more (almost every day or more)
 - 3 times a week (alternate days)
 - Once a week
 - Less than once a week / never

- 5) How often does your child have chewing gum?
- 6, 7 times a week or more (almost every day or more)
 - 3 times a week (alternate days)
 - Once a week
 - Less than once a week / never

Pert B: Parent's oral health knowledge

	Yes	No	Don't know
1) The causes of dental decay include:			
a) Too much consumption of candies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Unclean teeth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Tooth worms attack	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) "Hot air"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Preventions of tooth decay include:			
a) Using miswak	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Gargle with salted water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Use of fluoridated toothpaste	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Decrease frequency of sugar consumption	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Effects of fluoride to teeth include:			
a) No effect	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Prevent tooth decay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Tooth whitening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Prevent periodontal disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Which of the following food can cause tooth decay?			
a) Soft drinks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Ice-cream	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Cheese	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Peanuts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5) The causes of gum bleeding include:			
a) Unclean teeth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) It is a normal phenomenon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6) Methods to prevent periodontal disease include:			
a) Tooth brushing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Saline mouth-rinsing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Regular scaling (professional tooth cleaning)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>