



*Dept. of Public Health Dentistry*

# **SURVEY PROCEDURES**

By. Dr. Parth Pandya

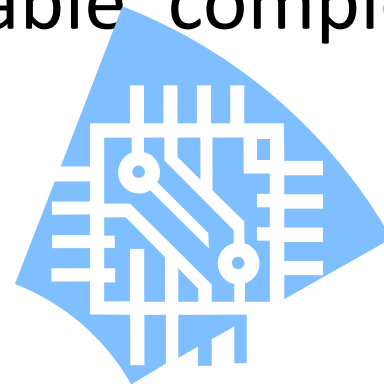


IS AN INVESTIGATION IN WHICH  
INFORMATION  
IS SYSTEMATICALLY COLLECTED  
BUT IN WHICH  
EXPERIMENTAL METHOD IS NOT  
USED

Most easily defined negatively as a  
“Non-Experimental investigation”

# Advantages of survey

- Provides new information
- To calculate rates, indices
- To study associations & correlations
- To find out about facilities needed
- A systematic survey is reliable complete & accurate



# uses of survey

- Monitor trends in oral health & disease
- Policy development
- Programme evaluation
- Assessment of dental needs
- Providing visibility for dental issues

# Methods of data collection

- Health interview survey: ( face to face survey)
- Health examination survey: doctors/auxillaries
- Health records survey
- Questionnaire survey (mailed, telephone, face to face)

open ended questions

Closed questions: 2 types

A] Likert scale (summative)...agree/disagree/ strongly agree/ strongly disagree

B] Guttman scale (cumulative) ...agree or disagree

# Basic Oral Health Surveys

- Defined as survey to collect the basic information about oral disease status & treatment needs that is needed for planning or monitoring oral health care programmes.
- OBJECTIVES
  - A] to provide a full picture of oral health status & needs of a population
  - B] subsequently, to monitor changes in disease levels or patterns

# TYPES OF SURVEY

**DESCRIPTIVE**

**ANALYTIC**

**CROSS SECTIONAL**

**LONGITUDINAL**

CROSS SECTIONAL

LONGITUDINAL

# CROSS SECTIONAL METHOD



# LONGITUDINAL

SAME PERSONS ARE  
EXAMINED/INVESTIGATED  
OVER A PERIOD OF TIME

# OBJECTIVES

- INITIALLY, FULL PICTURE OF ORAL HEALTH STATUS AND NEEDS OF POPULATION
- SUBSEQUENTLY, TO MONITOR CHANGE IN DISEASE LEVEL OR PATTERNS
- TO EVALUATE EFFECTIVENESS OF HEALTH SERVICES BEING PROVIDED

# SPECIAL CHARACTERISTICS OF ORAL DISEASES

- AGE RELATED
- EXIST IN ALL POPULATION VARYING ONLY IN SEVERITY AND PREVALENCE
- DENTAL CARIES IS IRREVERSIBLE
- Extensive documentation has already carried out

# PATHFINDER SURVEY

- MOST **PRACTICAL, ECONOMICAL** SURVEY SAMPLING METHODOLOGY IS CALLED PATHFINDER SURVEY.
- IS A STRATIFIED CLUSTER SAMPLING TECHNIQUE, WHICH AIMS TO INCLUDE THE MOST IMPORTANT POPULATION SUBGROUPS LIKELY TO HAVE DIFFERENT DISEASE LEVELS & APPROPRIATE NO. OF SUBJECTS IN SPECIFIC INDEX AGE GROUPS IN ANY ONE LOCATION.
- RELEVANT INFORMATION FOR PLANNING IS OBTAINED AT MINIMAL EXPENSES

# PATHFINDER SURVEY SUITABLE FOR

- OVERALL PREVALENCE OF COMMON ORAL DISEASE.
- VARIATION OF DISEASE IN POPULATION
- TO PROVIDE INFO ABOUT SEVERITY AND PROGRESSION OF DISEASE.

# TYPES OF PATHFINDER SURVEY

## ▶ PILOT

- ▶ MOST IMP SUBGROUPS & 1-2 INDEX AGE GRPS.
- ▶ MINIMUM DATA PROVIDED FOR PLANNING
- ▶ ADDITIONAL DATA HAS TO BE COLLECTED

## ▶ NATIONAL

- ▶ 3 INDEX AGE GROUPS
- ▶ INCLUDES ALL IMPORTANT SUBGROUPS

# INDEX AGE AND AGE GROUPS

- 5 YRS = CHANGING LEVELS OF CARIES OVER A SHORTER TIME SPAN IN PRIMARY THAN PERM.
- 12 YRS = ALL PERM. HAVE ERUPTED.
- 15 YRS = FOR CARIES PREVALANCE & ASSESSMENT OF PERIO DISEASE INDICATORS.
- 35-44 YRS = FOR MONITORING THE SEVERITY OF CARIES & PERIO DISEASE AND GENERAL EFFECTS OF CARE.
- 65-74 YRS = FOR PLANNING APPROPRIATE CARE & MONITORING GENERAL EFFECTS OF CARE.

# NUMBER OF SUBJECTS

DEPENDING UPON PREVALENCE AND SEVERITY OF DISEASE

- 25-50/INDEX AGE GROUPS IF DISEASE LEVELS ARE ESTEEMED TO BE LOW OR VERY LOW.
- 40-50/INDEX AGE GROUPS IF DISEASE LEVELS ARE ESTEEMED TO BE MODERATE OR HIGH.

# NATIONAL PATHFINDER SURVEY EXAMPLE

## URBAN

- 4 SITES IN **CAPITAL CITY**

4\*25 SUBJECTS=100 SUBJECTS

2 SITES IN EACH OF 2 LARGE **CITIES**

2\*2\*25 SUBJECTS =100 SUBJECTS

## RURAL

1 SITE EACH IN 4 VILLAGES OF DIFFERENT REGION

4\*25 SUBJECTS =100 SUBJECTS

TOTAL = 12 SITES \* 25 SUBJECTS = 300

IF THIS CLUSTER DISTRIBUTION IS APPLIED TO 4 INDEX AGES, TOTAL  
SAMPLE IS = 4\*300 = 1200

>20% CHILD FREE FROM CARIES-CARIES  
PREVELANCE IS low

5-20% CARIES FREE -moderate

<5% CARIES FREE-high PREVELANCE

# Null Hypothesis

- ▶ The first step in testing of hypothesis.
- ▶ It asserts that there is no real difference in the samples(s) and the population in the particular matter under consideration and the difference found is accidental & arises out of sampling variations
- ▶ E.g. no difference in DMF score of rural & urban children
- ▶ If null hypothesis is rejected, alternative hypothesis is laid: there is a difference between 2 groups being compared

# Calibration

- Objective:
  - uniform interpretation, understanding & application by all examiners
    - Each examiner can examine consistently
- To ensure this each examiner is trained for 2 days and calibrated for 2-3 days
- All members of survey team should examine in a consistent manner otherwise there is wrong interpretation or important points maybe missed

# Kappa statistic

Kappa value	interpretation
1	Total agreement
>0.8	Good agreement
0.6-0.8	Substantial agreement
0.4-0.6	Moderate disagreement

- Used to calculate intra and inter examiner reproducibility
- Compares agreement against that which might be expected by chance
- +1 (perfect agreement), 0 (no agreement above that expected by chance), -1 (complete disagreement)

# STEPS IN SURVEY

1. ESTABLISHING THE OBJECTIVE
2. DESIGNING THE INVESTIGATION
3. SELECTING THE SAMPLE
4. CONDUCTING THE EXAMINATION
5. ANALYSING THE DATA
6. DRAWING THE CONCLUSION
7. PUBLISHING THE RESULT

# ESTABLISHING THE OBJECTIVE

## 1. ESTABLISHING THE OBJECTIVE

- WHAT IS TO BE MEASURED?
- OBJECTIVES CAN EITHER BE STATED IN THE FORM OF A HYPOTHESIS TO BE TESTED OR DISEASE TO BE MEASURED.
- STARTING POINT OF STUDY-NULL HYPOTHESIS WHICH STATES THAT THERE IS NO DIFFERENCE BETWEEN THE GROUPS.

## 2.DESIGNING THE INVESTIGATION

▶ A) DESCRIPTIVE

▶ B) ANALYTICAL

2 MAIN SUBDIVISIONS OF EACH ARE CROSS-SECTIONAL & LONGITUDINAL STUDY.

▶ METHODS OF STUDY

TWO TYPES

1. CASE CONTROL (RETROSPECTIVE OR BACKWARD)

2. COHORT (PROSPECTIVE OR FORWARD)

# 3.SELECTING THE SAMPLE

- SELF SELECTED(VOLUNTEERS)
- RANDOM
- CLUSTER
- STRATIFIED RANDOM
- MULTISTAGE SAMPLING

## 4.CONDUCTING THE EXAMINATION

- A. OBTAINING APPROVAL FROM AUTHORITIES
- B. BUDGETING
- C. SCHEDULING
- D. EMERGENCY CARE AND REFERREL
- E. VALIDITY AND RELIABILITY
- F. PERSONNEL & ORGANIZATION
- G. INSTRUMENTS & SUPPLIES
- H. EXAMINATIONNA AREA
- I. METHODS OF EXAMINATION, CRITERIA FOR DIAGNOSIS, INDICES.

# E. VALIDITY AND RELIABILITY

- VALIDITY-OF A TEST IS ITS ABILITY TO MEASURE WHAT IS INTENDED TO MEASURE
- RELIABILITY-OF S TEST IS ITS ABILITY TO GIVE TO GIVE THE SAME RESULTS IF REPEATED.
- STANDARIZATION

# **I.METHODS OF EXAMINATION**

## **(Dunning's classification)**

- 1. Type-1= EXTENSIVE USING MIRROR/EXPLORER, GOOD ILLUMINATION, LAB INVESTIGATION/FULL MOUTH RADIOGRAPH/STUDY CAST**
- 2. Type-2= LIMITED, MIRROR/EXPLORER, GOOD ILLUMINATION, BITE-WING XRAYS**
- 3. Type-3 =MIRROR/EXPLORER EXAMINATION , GOOD ILLUMINATION**
- 4. Type-4 = SCREENING WITH TONGUE DEPRESSOR, AVAILABLE ILLUMINATION**

# 5.ANALYSING THE DATA

- COMPUTER ANALYSIS
- TABULATION
- GRAPHICAL PRESENTATION

# 6.DRAWING THE CONCLUSION

- SPECIFICALLY RELATED TO INVESTIGATION  
DONE

# 7.PUBLISHING THE REPORT

## A.STATEMENT AND PURPOSE OF SURVEY

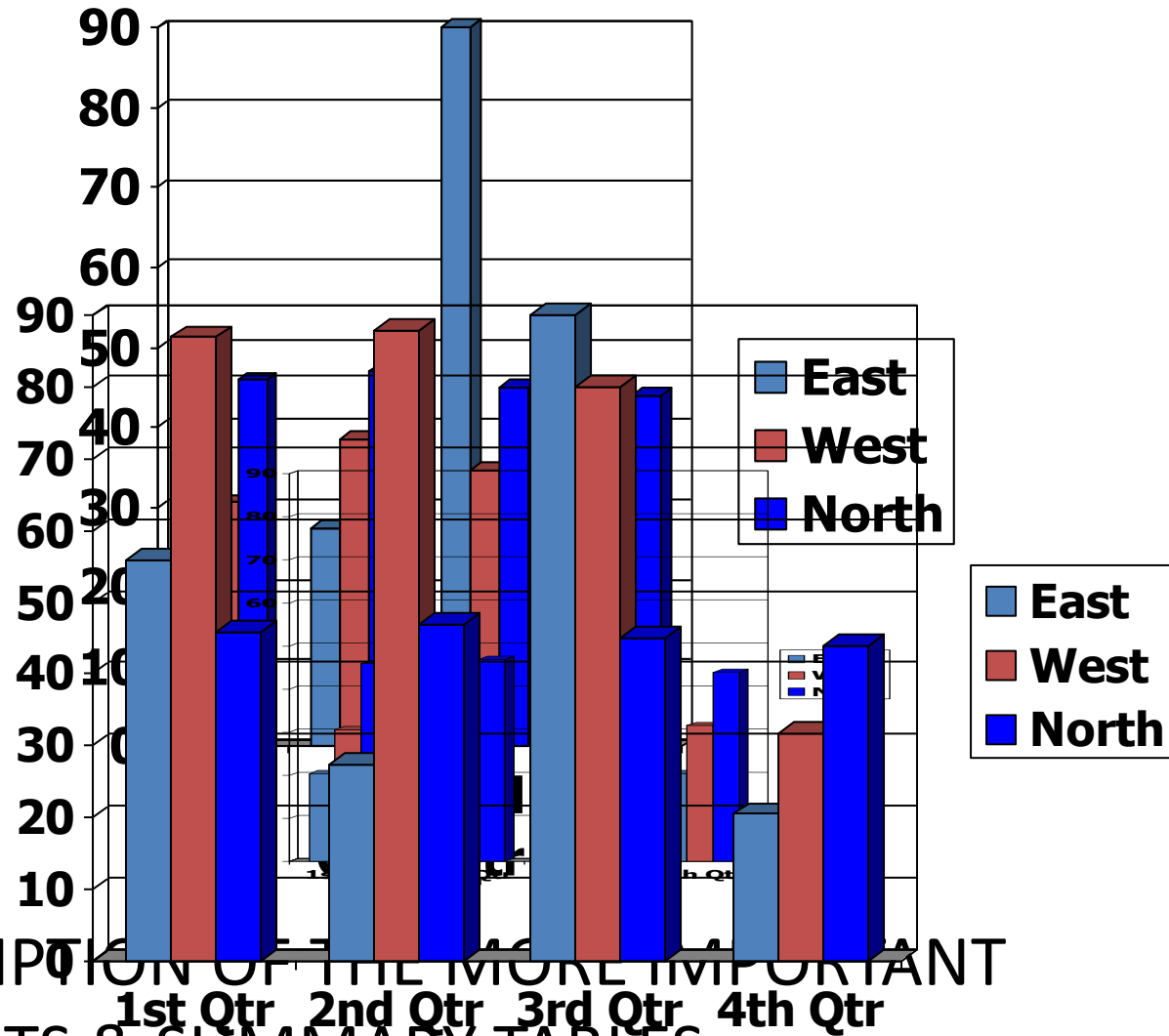
DESCRIPTION OF AIMS

EXPECTED WAYS IN WHICH RESULT WILL BE USED

## B.MATERIAL AND METHODS

- AREA AND POPULATION
- SAMPLING METHOD
- STATISTICAL ANALYSIS
- COST
- RELIABILITY

- C. RESULTS



A SHORT DESCRIPTION OF THE MORE IMPORTANT RESULTS & SUMMARY TABLES

## D.DISCUSSION AND CONCLUSION

- COMPARISON WITH PREVIOUS SURVEY
- TREATMENT NEED AND APPROACHES

## E.SUMMARY OR ABSTRACT

- OBJECTIVE OF STUDY
- NUMBER OF PEOPLE EXAMINED
- UNUSUAL RESULTS/UNEXPECTED RESULTS ARE MENTIONED

SURVEYING IS FAR MORE THAN COLLECTING & ARRAYING OF FACTS. IT IS A TASK THROUGH PARTICIPATION IN WHICH MANY KEY PEOPLE IN COMMUNITY BECOME AWARE OF THE DENTAL NEEDS OF COMMUNITY AND WHAT CAN BE DONE ABOUT THEM.

# WHO ORAL HEALTH ASSESSMENT FORM (1997)

Leave blank

Year Month

Day

Identification number

Examiner

Original/ duplicate

(1)     (4)

(5)     (8)

(9)   (10)

(11)     (14)

(15)

(16)

## GENERAL INFORMATION

Name .....

Date of birth

year Month  
(17)     (20)

Occupation

(25)

Geographical location

(26)   (27)

Location type:

(28)

1 = Urban

2 = Periurban

3 = Rural

Age in years

(21)   (22)

Sex (M=1, F=2)

(23)

Ethnic group

(24)

**OTHER DATA** (specify and provide codes)

.....  (29)

.....  (30)

**CONTRAINDICATION TO EXAMINATION**

Reason .....  (31)

..... 0 = No

1 = Yes

## CLINICAL ASSESSMENT

### EXTRA - ORAL EXAMINATION

0 = Normal extra-oral appearance

1 = Ulceration, sores, erosions, fissures  
(head, neck, limbs)

2 = Ulceration, sores, erosions, fissures  
(nose, cheeks, chin)

3 = Ulceration, sores, erosions, fissures  
(commissures)  (32)

4 = Ulceration, sores, erosions, fissures  
(vermillion border)

5 = Cancrum oris

6 = Abnormalities of upper and lower lips

7 = Enlarged lymph nodes ( head, neck )

8 = Other swellings of face and jaws

9 = Not recorded

### TEMPOMANDIBULAR JOINT ASSESMENT

#### SYMPTOMS

0 = No

1 = Yes

9 = Not recorded

(33)

#### SIGNS

0 = No

1 = Yes

9 = Not recorded

Clicking  (34)

Tenderness  
(on palpation )  (35)

Reduced jaw mobility  
( <30 mm opening )  (36)

## ORAL MUCOSA

### CONDITION

- 0 = No abnormal condition
- 1 = Malignant tumour (oral cancer)
- 2 = Leukoplakia
- 3 = Lichen planus
- 4 = Ulceration (aphthous, herpetic, traumatic)
- 5 = Acute necrotizing gingivitis
- 6 = Candidiasis
- 7 = Abscess
- 8 = Other condition (specify it possible)
- 9 = Not recorded

(37)   (40)

(38)   (41)

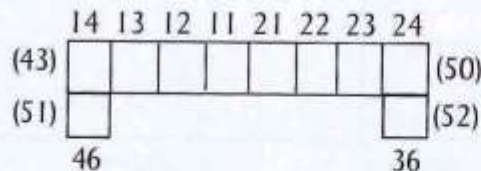
(39)   (42)

### LOCATION

- 0 = Vermilion border
- 1 = Commissures
- 2 = Lips
- 3 = Sulci
- 4 = Buccal mucosa
- 5 = Floor of mouth
- 6 = Tongue
- 7 = Hard and/or soft palate
- 8 = Alveolar ridges/ gingiva
- 9 = Not recorded

### ENAMEL OPACITIES / HYPOPLASIA

- Permanent teeth
- 0 = Normal
  - 1 = Demarcated opacity
  - 2 = Diffuse opacity
  - 3 = Hypoplasia
  - 4 = Other defects
  - 5 = Demarcated and diffuse opacities
  - 6 = Demarcated opacity and hypoplasia
  - 7 = Diffuse opacity and hypoplasia
  - 8 = All three conditions
  - 9 = Not recorded



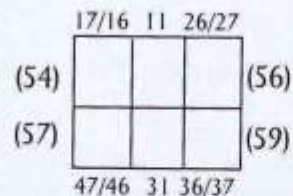
### DENTAL FLUOROSIS

- 0 = Normal
- 1 = Questionable
- 2 = Very mild
- 3 = Mild
- 4 = Moderate
- 5 = Severe
- 8 = Excluded
- 9 = Not recorded

(53)

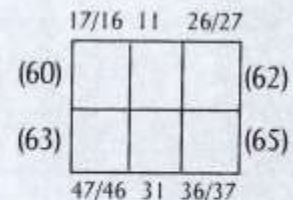
### community periodontal INDEX (CPI)

- 0 = Healthy
- 1 = Bleeding
- 2 = Calculus
- 3\* = Pocket 4-5 mm (Black band on probe partially visible)
- 4\* = Pocket 6 mm or more (Black band on probe not visible)
- X = Excluded sextant
- 9 = not recorded



### LOSS OF ATTACHMENT\*

- 0 = 0-3 mm
- 1 = 4-5 mm (cemento-enamel junction (CEJ) within black band)
- 2 = 6-8 mm (CEJ between upper limit of black band and 8.5mm ring)
- 3 = 9-11 mm (GEJ between 8.5- mm and 11.5-mm rings)
- 4 = 12 mm or more ( GEJ beyond 11.5-mm ring )
- X = Excluded sextant
- 9 = Not recorded



\*Not recorded under 15 years of age

\* Not recorded under 15 years of age



**DENTOFACIAL ANOMALIES**

**DENTITION**

(166)   (167)

Missing incisor, canine and premolar teeth --- maxillary and mandibular --- enter number of teeth

**SPACE**

(168)

Crowding in the incisal segments:

- 0 = No crowding
- 1 = One segment crowded
- 2 = Two segment crowded

(169)

Spacing in the incisal segments:

- 0 = No spacing
- 1 = One segment spaced
- 2 = Two segments spaced

(170)

Diastema in mm

(171)

Largest anterior maxillary irregularity in mm

(172)

Largest anterior mandibular irregularity in mm

**OCCLUSION**

(173)

Anterior maxillary overjet in mm

(174)

Anterior mandibular Overjet in mm

(175)

Vertical anterior openbite in mm

(176)

Antero- posterior molar reation

- 0 = Normal
- 1 = Half cusp
- 2 = Full cusp

**NEED FOR IMMEDIATE CARE AND REFERRAL**

Life- threatening condition

(177)

Pain or infection

(178)

Other condition ( Specify ).....

(179)

- 0 = Absent
- 1 = Present
- 9 = Not recorded

Referral

- 0 = No
- 1 = Yes
- 9 = Not recorded

(180)

**NOTES**



**World Health Organization**  
Oral Health Assessment Form for Adults, 2013

<p><b>Loss of attachment</b></p> <p><b>Severity</b></p> <p>0 = 0-3 mm          1 = 4-5 mm    Cemento-enamel junction (CEJ) within black band          2 = 6-8 mm    CEJ between upper limit of black band and 8.5 mm ring          3 = 9-11 mm    CEJ between 8.5 mm and 11.5 mm ring          4 = 12 mm or more    CEJ beyond 11.5 mm ring          X = Excluded sextant          9 = Not recorded</p> <p>* Not recorded under 15 years of age</p>	<p align="center"><b>Index teeth</b></p> <table style="margin: auto; border-collapse: collapse;"> <tr> <td style="text-align: center;">17/16</td> <td style="text-align: center;">11</td> <td style="text-align: center;">26/27</td> </tr> <tr> <td style="text-align: center;">(177) <input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">(175) <input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;">(176) <input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">(178) <input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;">47/46</td> <td style="text-align: center;">31</td> <td style="text-align: center;">36/37</td> </tr> </table>	17/16	11	26/27	(177) <input type="checkbox"/>	<input type="checkbox"/>	(175) <input type="checkbox"/>	(176) <input type="checkbox"/>	<input type="checkbox"/>	(178) <input type="checkbox"/>	47/46	31	36/37	<p><b>Enamel fluorosis</b> <input type="checkbox"/> (179)</p> <p><b>Severity</b></p> <p>0 = Normal          1 = Questionable          2 = Very mild          3 = Mild          4 = Moderate          5 = Severe          8 = Excluded (crown, restoration, "bracket")          9 = Not recorded (unerupted tooth)</p>
17/16	11	26/27												
(177) <input type="checkbox"/>	<input type="checkbox"/>	(175) <input type="checkbox"/>												
(176) <input type="checkbox"/>	<input type="checkbox"/>	(178) <input type="checkbox"/>												
47/46	31	36/37												
<p><b>Dental erosion</b></p> <p><b>Severity</b> <input type="checkbox"/> (180)</p> <p>0 = No sign of erosion          1 = Enamel lesion          2 = Dentinal lesion          3 = Pulp involvement</p> <p><b>Number of teeth affected</b></p> <p>(181) <input type="checkbox"/> <input type="checkbox"/> (182)</p>	<p><b>Dental trauma</b></p> <p><b>Status</b> <input type="checkbox"/> (183)</p> <p>0 = No sign of injury          1 = Treated injury          2 = Enamel fracture only          3 = Enamel and dentine fracture          4 = Pulp involvement          5 = Missing tooth due to trauma          6 = Other damage          9 = Excluded tooth</p> <p><b>Number of teeth affected</b></p> <p>(184) <input type="checkbox"/> <input type="checkbox"/> (185)</p>													
<p><b>Oral mucosal lesions</b></p> <p><input type="checkbox"/> (186)</p> <p><input type="checkbox"/> (187)</p> <p><input type="checkbox"/> (188)</p> <p><b>Condition</b></p> <p>0 = No abnormal condition          1 = Malignant tumour (oral cancer)          2 = Leukoplakia          3 = Lichen planus          4 = Ulceration (aphthous, herpetic, traumatic)          5 = Acute necrotizing ulcerative gingivitis (ANUG)          6 = Candidiasis          7 = Abscess          8 = Other condition (specify if possible)          9 = Not recorded</p>	<p><input type="checkbox"/> (189)</p> <p><input type="checkbox"/> (190)</p> <p><input type="checkbox"/> (191)</p> <p><b>Location</b></p> <p>0 = Vermillion border          1 = Commissures          2 = Lips          3 = Sulci          4 = Buccal mucosa          5 = Floor of the mouth          6 = Tongue          7 = Hard and/or soft palate          8 = Alveolar ridges/gingiva          9 = Not recorded</p>	<p><b>Denture(s)</b></p> <p align="center"><b>Upper</b>      <b>Lower</b></p> <p align="center"><input type="checkbox"/> (192)      <input type="checkbox"/> (193)</p> <p><b>Status</b></p> <p>0 = No denture          1 = Partial denture          2 = Complete denture          9 = Not recorded</p>												
<p><b>Intervention urgency</b> <input type="checkbox"/> (194)</p> <p>0 = No treatment needed          1 = Preventive or routine treatment needed          2 = Prompt treatment (including scaling) needed          3 = Immediate (urgent) treatment needed due to pain or infection of dental and/or oral origin          4 = Referred for comprehensive evaluation or medical/dental treatment (systemic condition)</p>														



## World Health Organization

### Oral Health Assessment Form for Adults, 2013

#### Annex 1

	Leave blank		Year	Month	Day		Identification No.	Orig/Dupl	Examiner
(1)	<input type="text"/>	(4)	<input type="text"/>	<input type="text"/>	<input type="text"/>	(10)	<input type="text"/>	<input type="text"/>	(17)
(5)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(11)	<input type="text"/>	<input type="text"/>	(16)
<b>General information:</b>			<b>Sex</b> 1=M, 2=F		<b>Date of birth</b>			<b>Age in years</b>	
_____ (Name)			<input type="text"/>	(18)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Ethnic group</b> (27)		<input type="text"/>	<input type="text"/>	(28)	<b>Other group</b> (29)		<input type="text"/>	<input type="text"/>	(30)
<b>Years in school</b> (31)			<input type="text"/>	<input type="text"/>	(32)	<b>Occupation</b>		<input type="text"/>	(33)
<b>Community</b> (geographical location)			<input type="text"/>	<input type="text"/>	(34)	<b>Location</b> Urban (1)		<input type="text"/>	(35)
<b>Other data</b> _____			<input type="text"/>	<input type="text"/>	(37)	<b>Other data</b> _____		<input type="text"/>	(38)
<b>Other data</b> _____			<input type="text"/>	<input type="text"/>	(41)	<b>Other data</b> _____		<input type="text"/>	(40)
<b>Other data</b> _____			<input type="text"/>	<input type="text"/>	(42)	<b>Extra-oral examination</b> _____		<input type="text"/>	(43)
<b>Other data</b> _____			<input type="text"/>	<input type="text"/>	(44)	<b>Other data</b> _____		<input type="text"/>	(44)

<p><b>Dentition status</b></p> <table style="width: 100%; text-align: center;"> <tr> <td></td> <td>18</td><td>17</td><td>16</td><td>15</td><td>14</td><td>13</td><td>12</td><td>11</td> <td>21</td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td><td>28</td> <td></td> </tr> <tr> <td>Crown (45)</td> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> <td>(60)</td> </tr> <tr> <td>Root (61)</td> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> <td>(76)</td> </tr> <tr> <td>Crown (77)</td> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> <td>(92)</td> </tr> <tr> <td>Root (93)</td> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> <td>(108)</td> </tr> <tr> <td></td> <td>48</td><td>47</td><td>46</td><td>45</td><td>44</td><td>43</td><td>42</td><td>41</td> <td>31</td><td>32</td><td>33</td><td>34</td><td>35</td><td>36</td><td>37</td><td>38</td> <td></td> </tr> </table>		18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28		Crown (45)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(60)	Root (61)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(76)	Crown (77)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(92)	Root (93)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(108)		48	47	46	45	44	43	42	41	31	32	33	34	35	36	37	38		<p><b>Permanent teeth</b></p> <p><b>Status</b></p> <ul style="list-style-type: none"> <li>0 = Sound</li> <li>1 = Caries</li> <li>2 = Filled w/caries</li> <li>3 = Filled, no caries</li> <li>4 = Missing due to caries</li> <li>5 = Missing for any another reason</li> <li>6 = Fissure sealant</li> <li>7 = Fixed dental prosthesis/crown abutment, veneer, implant</li> <li>8 = Unerupted</li> <li>9 = Not recorded</li> </ul>
	18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28																																																																																													
Crown (45)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(60)																																																																																												
Root (61)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(76)																																																																																												
Crown (77)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(92)																																																																																												
Root (93)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(108)																																																																																												
	48	47	46	45	44	43	42	41	31	32	33	34	35	36	37	38																																																																																													
<p><b>Periodontal status (CPI Modified)</b></p> <table style="width: 100%; text-align: center;"> <tr> <td></td> <td>18</td><td>17</td><td>16</td><td>15</td><td>14</td><td>13</td><td>12</td><td>11</td> <td>21</td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td><td>28</td> <td></td> </tr> <tr> <td>Bleeding (109)</td> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> <td>(124)</td> </tr> <tr> <td>Pocket (125)</td> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> <td>(140)</td> </tr> <tr> <td>Bleeding (141)</td> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> <td>(156)</td> </tr> <tr> <td>Pocket (157)</td> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> <td>(172)</td> </tr> <tr> <td></td> <td>48</td><td>47</td><td>46</td><td>45</td><td>44</td><td>43</td><td>42</td><td>41</td> <td>31</td><td>32</td><td>33</td><td>34</td><td>35</td><td>36</td><td>37</td><td>38</td> <td></td> </tr> </table>		18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28		Bleeding (109)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(124)	Pocket (125)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(140)	Bleeding (141)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(156)	Pocket (157)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(172)		48	47	46	45	44	43	42	41	31	32	33	34	35	36	37	38		<p><b>Gingival bleeding</b></p> <p><b>Score</b></p> <ul style="list-style-type: none"> <li>0 = Absence of condition</li> <li>1 = Presence of condition</li> <li>9 = Tooth excluded</li> <li>X = Tooth not present</li> </ul> <p><b>Pocket</b></p> <p><b>Score</b></p> <ul style="list-style-type: none"> <li>0 = Absence of condition</li> <li>1 = Pocket 4-5 mm</li> <li>2 = Pocket 6 mm or more</li> <li>9 = Tooth excluded</li> <li>X = Tooth not present</li> </ul>
	18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28																																																																																													
Bleeding (109)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(124)																																																																																												
Pocket (125)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(140)																																																																																												
Bleeding (141)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(156)																																																																																												
Pocket (157)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(172)																																																																																												
	48	47	46	45	44	43	42	41	31	32	33	34	35	36	37	38																																																																																													

# QUESTIONS ASKED ?

1. HOW WILL YOU CARRY OUT A SURVEY IN YOUR CITY FOR PREVALENCE OF ORAL CANCER/PERIODONTAL DISEASE/DENTAL CARIES?
2. DEFINE A SURVEY. DESCRIBE STEPS IN DETAIL.
3. PATHFINDER SURVEY
4. PILOT PATHFINDER SURVEY
5. INDEX AGE GROUP (VIVA)
6. NULL HYPOTHESIS
7. Types of examination ( dunning's classification)
8. What is calibration?

