

## Oral health

### CORE: Oral health

The next questions ask about your oral health status and related behaviours.

Question		Response	Code
1	How many natural teeth do you have?	No natural teeth 1 <i>If no natural teeth, go to O4</i> 1 to 9 teeth 2 10 to 19 teeth 3 20 teeth or more 4 Don't know 77	O1
2	How would you describe the state of your teeth?	Excellent 1 Very Good 2 Good 3 Average 4 Poor 5 Very Poor 6 Don't Know 77	O2
3	How would you describe the state of your gums?	Excellent 1 Very Good 2 Good 3 Average 4 Poor 5 Very Poor 6 Don't know 77	O3
4	Do you have any removable dentures?	Yes 1 No 2 <i>If No, go to O6</i>	O4
Which of the following removable dentures do you have? (RECORD FOR EACH)			
5	An upper jaw denture	Yes 1 No 2	O5a
	A lower jaw denture	Yes 1 No 2	O5b
6	During the past 12 months, did your teeth or mouth cause any pain or discomfort?	Yes 1 No 2	O6
7	How long has it been since you last saw a dentist?	Less than 6 months 1 6-12 months 2 More than 1 year but less than 2 years 3 2 or more years but less than 5 years 4 5 or more years 5 Never received dental care 6 <i>If Never, go to O9</i>	O7
8	What was the main reason for your last visit to the dentist?	Consultation / advice 1 Pain or trouble with teeth, gums or mouth 2 Treatment / Follow-up treatment 3 Routine check-up treatment 4 Other 5 <i>If Other, go to O8other</i>	O8
		Other (please specify) <input type="text"/>	O8other

