ORAL HEALTH – OHQ
New Target Group: 18+

OHQ.011 Now I have some questions about the condition of your teeth and gums.

How would you describe the condition of (your/SP’s) teeth? Would you say . . .

excellent, ....................................................... 11
very good, ..................................................... 12
good, .......................................................... 13
fair, or .......................................................... 14
poor? ........................................................... 15
REFUSED ..................................................... 7
DON’T KNOW ............................................... 9

OHQ.620 How often during the last year {have you/has SP} had painful aching anywhere in {your/his/her} mouth?
Would you say . . .

HAND CARD OHQ1

Very often, ..................................................... 1
Fairly often, .................................................. 2
Occasionally, ................................................. 3
Hardly ever, or ............................................... 4
Never? .......................................................... 5
REFUSED ..................................................... 7
DON’T KNOW ............................................... 9

OHQ.630 How often during the last year {have you/has SP} felt that life in general was less satisfying because of problems with {your/his/her} teeth, mouth or dentures? Would you say . . .

HAND CARD OHQ1

Very often, ..................................................... 1
Fairly often, .................................................. 2
Occasionally, ................................................. 3
Hardly ever, or ............................................... 4
Never? .......................................................... 5
REFUSED ..................................................... 7
DON’T KNOW ............................................... 9
OHQ.640  How often during the last year (have you/has SP) had difficulty doing (your/his/her) usual jobs or attending school because of problems with (your/his/her) teeth, mouth or dentures? Would you say . . .

HAND CARD OHQ1

Very often, .....................................................  1
Fairly often, ...................................................  2
Occasionally, ..................................................  3
Hardly ever, or ...............................................  4
Never? ..........................................................  5
REFUSED .....................................................  7
DON'T KNOW ..................................................  9

OHQ.650  How often during the last year (has your/has SP’s) sense of taste been affected by problems with (your/his/her) teeth, mouth or dentures? Would you say . . .

HAND CARD OHQ1

Very often, .....................................................  1
Fairly often, ...................................................  2
Occasionally, ..................................................  3
Hardly ever, or ...............................................  4
Never? ..........................................................  5
REFUSED .....................................................  7
DON'T KNOW ..................................................  9

OHQ.660  How often during the last year (have you/has SP) avoided particular foods because of problems with (your/his/her) teeth, mouth or dentures? Would you say . . .

HAND CARD OHQ1

Very often, .....................................................  1
Fairly often, ...................................................  2
Occasionally, ..................................................  3
Hardly ever, or ...............................................  4
Never? ..........................................................  5
REFUSED .....................................................  7
DON'T KNOW ..................................................  9

OHQ.670  How often during the last year (have you/has SP) found it uncomfortable to eat any food because of problems with (your/his/her) teeth, mouth or dentures? Would you say . . .

HAND CARD OHQ1

Very often, .....................................................  1
Fairly often, ...................................................  2
Occasionally, ..................................................  3
Hardly ever, or ...............................................  4
Never? ..........................................................  5
REFUSED .....................................................  7
DON'T KNOW ..................................................  9
How often during the last year have you been self-conscious or embarrassed because of your teeth, mouth or dentures? Would you say . . .

HAND CARD OHQ1

Very often, ..................................................... 1
Fairly often, .................................................... 2
Occasionally, ................................................. 3
Hardly ever, or ............................................... 4
Never? ........................................................... 5
REFUSED ..................................................... 7
DON'T KNOW ............................................... 9