

**WOMEN'S INTERAGENCY HIV STUDY
ORAL PROTOCOL - FORM OP06
TOOTH COUNT**

ID LABEL HERE --->

| | | | | | | |
|---|---|-----|---|---------|---|-----|
| _ | - | _ _ | - | _ _ _ _ | - | _ _ |
|---|---|-----|---|---------|---|-----|

VISIT #:

___ ___

VERSION DATE:

10/01/98

FORM COMPLETED BY:

___ ___ ___

DATE OF PROCEDURE

___ ___ / ___ ___ / ___ ___

1. Is participant edentulous?

YES..... 1

**(SKIP TO FORM OP15 -DO NOT COMPLETE
FORMS OP7 - OP14)**

NO 2

2. Tooth count:

a. Upper

| | |
|---|---|
| _ | _ |
|---|---|

b. Lower

| | |
|---|---|
| _ | _ |
|---|---|

3. Number of occluding pairs:

| | |
|---|---|
| _ | _ |
|---|---|

4. Does patient present with ≥ 10 natural teeth?

YES..... 1

NO 2 **(CODE AS "5" AT 5)**

5. Random quadrant(s) selected (one upper and one lower:)

UPPER LEFT 1

UPPER RIGHT 2

LOWER LEFT 3

LOWER RIGHT 4

Less than 10 natural teeth 5