

COMPARISON OF THE EFFECTIVENESS OF DIFFERENT EDUCATIONAL METHODS IN DEVELOPING ORAL HYGIENE HABITS IN CHILDREN

PATIENT ASSESSMENT QUESTIONNAIRE FORM

Education Group:

Case No.:

Name Surname:

Date of Birth:

Gender:

Phone No.:

Initial DMFT / dmft Score:

DMFT: dmft:

DMFS: dmfs:

Initial Plaque Index (Silness and Löe):

Plaque Index Score:

0: No plaque at the gingival region.

1: A thin plaque film is observed at the gingival margin, only detectable with a probe.

2: A moderate plaque film is observed at the gingival margin, visible to the eye, but no plaque in the approximal area.

3: A significant plaque film is observed at the gingival margin, filling the interdental spaces.

Initial Gingival Index (Silness and Löe):

Gingival Index Score:

0: Normal gingiva.

1: Mild inflammation; slight color change, slight swelling, no bleeding upon probing.

2: Moderate inflammation; redness, swelling, and shine, bleeding upon probing.

3: Severe inflammation; significant redness and swelling, ulceration, spontaneous bleeding.

DENTITION:

Primary dentition () Mixed dentition () Permanent dentition ()

SURVEY 1

How often does your child brush their teeth?

- Twice a day
- Once a day
- Irregularly
- Does not brush

Which oral care products does your child use? (Check all that apply)

- Toothpaste
- Dental floss
- Mouthwash

What type of toothbrush does your child use?

- Manual
- Automatic
- Both manual and automatic

Does your child's gums bleed while brushing?

- Yes
- No

Does your child have bad breath?

- Yes
- No

Which toothpaste does your child use?

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When was your child's toothbrush last changed?

- 1 month ago
- 3 months ago
- 6 months ago
- Never changed

How long does your child brush their teeth?

- 2 minutes
- Less than 2 minutes
- Irregular

Do you need to remind your child to brush their teeth?

- Yes, they do not brush unless reminded.
- No, they brush without needing a reminder.

Do you help your child with toothbrushing?

- Yes
- No

Is your child willing to brush their teeth?

- Yes, they enjoy and are eager to brush their teeth.
- No, they dislike brushing and resist.

Control Plaque Index (Silness and Loe):

Plaque Index Score:

0: No plaque at the gingival region.

1: A thin plaque film is observed at the gingival margin, only detectable with a probe.

2: A moderate plaque film is observed at the gingival margin, visible to the eye, but no plaque in the approximal area.

3: A significant plaque film is observed at the gingival margin, filling the interdental spaces.

Control Gingival Index (Silness and Loe):

Gingival Index Score:

0: Normal gingiva.

1: Mild inflammation; slight color change, slight swelling, no bleeding upon probing.

2: Moderate inflammation; redness, swelling, and shine, bleeding upon probing.

3: Severe inflammation; significant redness and swelling, ulceration, spontaneous bleeding.

SURVEY 2

How often does your child brush their teeth?

- Twice a day
- Once a day
- Irregularly
- Does not brush

Which oral care products does your child use? (Check all that apply)

- Toothpaste
- Dental floss
- Mouthwash

What type of toothbrush does your child use?

- Manual
- Automatic
- Both manual and automatic

Does your child's gums bleed while brushing?

- Yes
- No

Does your child have bad breath?

- Yes
- No

Which toothpaste does your child use?

.....

When was your child's toothbrush last changed?

- 1 month ago
- 3 months ago
- 6 months ago
- Never changed

How long does your child brush their teeth?

- 2 minutes
- Less than 2 minutes
- Irregular

Do you need to remind your child to brush their teeth?

- Yes, they do not brush unless reminded.
- No, they brush without needing a reminder.

Do you help your child with toothbrushing?

- Yes
- No

Is your child willing to brush their teeth?

- Yes, they enjoy and are eager to brush their teeth.
- No, they dislike brushing and resist.

Patient Satisfaction Survey: (To be completed by the child's parent/guardian at the end of the first month to evaluate satisfaction with the chosen educational method.)

(1-Strongly Agree 2-Agree 3-Neutral 4-Disagree 5-Strongly Disagree)

I believe the education provided increased my child's oral hygiene motivation.

(1) (2) (3) (4) (5)

I believe the education provided improved my child's oral hygiene habits.

(1) (2) (3) (4) (5)

Thanks to this education, my child brushes their teeth without our assistance.

(1) (2) (3) (4) (5)

I would recommend this education to other families.

(1) (2) (3) (4) (5)