

Date	ntion [		Iden	tificatio	n num	number														
ตำบล			อำเภ	ອ			จังหว่	วัด				Lc	cation	type [						
น้ำหนัก.	กก.	ส่วนสู	۹		.ซม.	อายุ(เ	ดือน)			เพศ		ศาสนา		การ	รศึกษา					
0,	าาษณ์: ให้ถา																			
	ก่อนมาศูนย์/โ													บ/ตอบไม่ไ						
2. เช้านี้ '	หนูแปรงฟันเฮ	วงหรือใค	รแปรงใ	ห้ (ตอง	ปได้ >	1 ข้อ)	$\square^1$ แบ	ไรงเอง	[	² แม่∕	ผู้ปกคร	เองแปร	งให้ 🗆	<sup>3</sup> ไม่ตอ	บ/ตอบไม่ไ					
3. หนูอยู่	หนูแปรงฟันเอ ที่บ้าน กินนม ดูดนมจากขวด	รสอะไร			$\square^1$ หา	$\square^2$ เป	รี้ยว	[	$oxed{]}^3$ จืด		] <sup>4</sup> ไม่กิเ	ı [	<sup>15</sup> ไม่ตอ	บ/ตอบไม่ไ						
4. หนูยังเ	ภูดนมจากขวด	าหรือไม่			$\Box^1$ ใช่	}	่ □²ไม่	ใช่	[	่ ⊒³ ไม่ต	อบ/ตอ	บไม่ได้	77	·						
5. หนูเคย	ู้ ปวดฟันมากจ	จนเคี้ยวข้	้าว/ขนเ	มไม่ได้ต	ามปกเ	่ม (ถามเ	ฉพาะ .	5 ปี) [	$\sqsupset^1$ เคย		]² ไม่เค	181 <u> </u>	]³ ไม่ตอ	บ/ตอบไม่ไ						
	ON STATUS										0	0								
				55	54	53	52	51	61	62	63	64	65							
			16	15	14	13	12	11	21	22	23	24	25	26						
C	rown								70	X										
т	reatment							- (	7											
								9												
				85	84	83	82	81	71	72	73	74	75							
			46	45	44	43	42	<b>Q</b> 41	31	32	33	34	35	36						
C	rown																			
Tı	reatment				1															
Primary	Permanent	тооть	H STA	TUS	6				TRE	ATME	NT									
Α	0	Sound			\ '				0 = None											
Н	K	White o	pacity w	ith roug	gh surfa	се			P = Preventive, caries arresting care											
N	Р	Showing	g of ena	mel bre	akdowi	n or den	tine sha	adows		F = F	issure	sealant								
В	1		cavity ex	_	j into d	entine		R = Preventive resin restoration												
С	2		vith deca	•			(000)	1 = One surface fillings												
D	3 6		o decay , as a re			el crown	(SSC)					more su or any r	rface fil	lings						
E -	5	)	, as a re , any otl									•	estoratio	on						
F	6	·	sealant																	
G	7	Bridge a	abutment	t, specia	al crown	or vene	er			6 = 1	Need for	r other o	care (Sp	ecify)						
-	8	Unerup	ted tooth	า						9 = 1	Not reco	orded								
Т	Т	Trauma	(fractur	e)																
-	9	Not rec	orded																	
PLAQUE IN																				
0 = No	plaque					55E	3 5	51B	65B	7										
	que covering									4										
	que covering																			
	que covering	> 2/3 of	the too	th surfa	ice	3 7	′1B	75B												
9 = No	t recorded																			
OTHER CO	NDITIONS																			



Date/		2560	Exai	miner		Dup	Duplication													
GENERAL	INFO	RMAT	ON	Age		Ge	ender		Religio	on 🗌	Education Location type									
						Status														
DENTITION	J STA	τιις ΔΙ	ND TE	PEATM	IENT N	JEED														
DENTITION	IOIA	100 A		55	54	53	52	51	61	62	63	64	65							
	18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28				
Crown	8		- 10		<del>.</del>				<u></u> -						) = 1	8				
													O							
Treatment	9												10	,		9				
				85	84	83	82	81	71	72	73	74	4 75							
	48	47	46	45	44	43	42	41	31	32	33	34	35	36	37	38				
Crown	8										9	)				8				
Treatment	9								7	0	2					9				
Primary	Pai	rmaner	nt T	ООТН	STAT	2115	8	TREA	TMEN	т										
A	1 6	0			OIAI	00		, 6			•									
Н		K	Sound 0 = None  White opacity with rough surface P = Preventive, caries arresting																	
N		P Showing of enamel breakdown or dentine shadows F = Fissure sealant													ng care					
В		1			vity exte				e resin ı	restorati	on									
С		2			h decay	1	\ `				1 = On	ne surfa	ce filling	gs						
D		3	Fi	illed, no	decay						2 = Tw	2 = Two or more surface fillings								
E		4	М	lissing,	as a res	ult of ca	aries				3 = Crown for any reason									
-		5	М	lissing, a	any othe	er reaso	n				4 = Pulp care and restoration									
F		6	F	issure s	ealant						5 = Extraction									
G		D	В	ridge ab	outment,	special	crown	or vene	er	6 = Need for other care (Specify)										
-	C	8		nerupte							9 = No	t record	ded							
T			,	•	fracture)	)														
-		0	N	ot recor	ded															
DENTAL F	LUOR	osis			GIN	GIVAL	BLEE	DING	SCORE	S (MO	DIFIED	<b>)</b> )								
0 = Normal					0 = 1	Absent	of cond	ition					16	11	2	6				
1 = Question	nable				1 = 1	Bleedin	g													
2 = Very mil	nild 2 = Calculus																			
3 = Mild					5 = 0	Calculus	s with b	leeding					46	31	3	6				
4 = Moderat	te				9 = 1	Not reco	orded													
5 = Severe																				
9 = Not reco	orded																			
OTHER OF	NIDIT	ONO																		



Date/		2560	Exar	niner		Dup	lication	n 🗌	Ident	ificatio	n num	_[							
GENERAL	INFOF	RMATI	ON	Age		Ge	nder		Religio	on 🗌	Edi	ucatior	n 🗌 L	_ocatio	n type				
DENTITION	N STA	TUS A	ND TR	EATM	ENT N	IEED													
				55	54	53	52	51	61	62	63	64	65						
	18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28			
Crown														0,					
Treatment																			
				85	0.4	02	82	81	71	72	73	74	75	5					
	48	47	46	45	84 44	83 43	62 42	41	31	32	33	74 34	75 35	36	37	38			
Crown		"							T .	<u> </u>	300	7	<u> </u>						
Treatment												)							
Treatment																			
Primary	Permanent TOOTH STATUS TREATMENT																		
Α	0 Sound 0 = None																		
Н	K		White opacity with rough surface P = Preventive, caries arresting care																
N	Р		Showing of enamel breakdown or dentine shadows F = Fissure sealant																
В	1		Visible cavity extending into dentine R = Preventive resin restoration																
С	2			with d	-	. 9							ace fillin	_					
D	3			no dec		H'								face filli	ngs				
E	4				result		es.				3 = Crown for any reason 4 = Pulp care and restoration								
-	5				other re	eason					4 = Pulp care and restoration 5 = Extraction								
F G	6 7			re seala	nent, sp	ooial or	own or	voncor	,		<ul><li>5 = Extraction</li><li>6 = Need for other care (Specify)</li></ul>								
-	8			pted to		eciai ci	OWII OI	veneer				ot recor		are (Spe	sciry)				
Т	F			na (frac							0 110	7. 10001	aoa						
-	9	ah		` ecorded	-														
•	,//,	0 >	,																
GINGIVAL	BLEE	DING S	CORE	S (MO	DIFIED	))													
0 = Abs	sent of	condition	on						16	11	26								
1 = Ble	eding																		
2 = Ca	lculus																		
5 = Cal		with ble	eding					<u> </u>	46	31	36								
9 = No	t record	ded																	
OTHER CO	ONDITI	ONS																	



The 8<sup>th</sup> National Oral Health Survey, Thailand 2017

Date/	mine	er		Du	plica	atior	n 🗌	lder	ntificat	tion number									
GENERAL	INFOF	RMATIO	ON	Age	e 🗌		G	end	ler		Religi	on $\square$		Locati	on type				
Capacity of			`						ng	3 =	Loss)								
DENTITIO									•	44	0.4	00	00	0.4	0.5	00	07	00	
ſ	18	17	16	1	5	14	13	12	2 	11	21	22	23	24	25	26	27	28	
Crown																			
Root																10			
Treatment																	)		
	48	47	46	45	<b>i</b>	44	43	4	12	41	31	32	33	34	35	36	37	38	
Crown														0	70				
Root													. 6						
Treatment																			
CINCIVAL BLEEDING SCORES (MODIFIED) AND DOCKET SCORES (MODIFIED)																			
GINGIVAL BLEEDING SCORES (MODIFIED) AND POCKET SCORES (MODIFIED)																			
GINGIVAL BLEEDING SCORES POCKET SCORES 17/16 11 26/27															27				
0 = Healthy			0 =	Abs	send	ce of c	onditio	n		В				В					
1 = Bleeding	I = Bleeding									4-5 m	ım.	Р				Р			
2 = Calculus							2 =	Pod	cket	6 mm	ı. or mo	В				В			
5 = Calculus	with b	leeding					9 =	Not	rec	corded		Р				P			
9 = Not reco	rded						~ Y									31	36/3	<b></b> 37	
PROSTHETI	C STA	TUS				PRO	STHE	ETIC	NE	ED									
0 = No prosth	esis	Upp	er		1	0 = N	lo pro	sthe	sis r	needed		Upp	er		P	osterio	r occlus	sal pair	
1 = Bridge		Lowe	er	9	1	1 = N	leed f	or or	ne-u	nit pros	sthesis	Lowe	er						
2 = More than	one b	ridge	_	V		2 = N	leed f	or m	ulti-ı	unit pro	osthesis		Right Left						
3 = Partial de	nture	6				3 = 1	leed f	or fu	ll pro	osthesi	is (repla	acemen	t of all t	eeth)					
4 = Both bridg	ge(s) ar	nd partia	al dent	ure(s	)	4 = N	leed t	o rep	oair	dentur	е								
5 = Full remov	vable d	enture				9 = 1	lot red	corde	ed										
6 = Coping wi	th com	plete de	enture																
9 = Not record														1					
ORAL LESIC																	H WEA	١R	
Clinical co	naition	1			LOC	ation				V =	Code Vermilli	for location bord			Occlusa		h affecte	<sub>2d</sub>	
White lesion	on	Ī	/ C	L	S	В Б	Т	Р	G		Commi		1		Incisal:	i oi ieeli	ii allecte	<b>u</b>	
Red lesion		\	/ C	L	S	В Б	Т	Р	G	s =	Sulci /	vestibul	Э			r of teet	h affecte	ed 🔲 📗	
Red & Wh	ite lesio	n \	/ C	L	S	B F	Т	Р	G	F =	Buccal Floor of	f mouth	ı		Cervica	l area:			
Ulceration		\	/ C	L	S	В Б	Т	Р	G		Tongue Hard aı		oft pala	te	Numbe	r of teet	h affecte	;d 🔲 🗌	
Nodule / m	nass	١	V C L S B F T P G P = Hard and / or soft palate G = Alveolar ridges / gingiva																

OTHER CONDITIONS



Date/2560 Examiner Duplication Identification number Duplication Duplication Location type																							
GENERAL	INFOF	RMATI	ON		Ą	ge			G	ende	er		Relig	ion 🗌	L	ocatio	n type						
Capacity of	f old ac	dults:		(1 =	= Sta	ble	2 :	= De	eclin	ing	3	= Los	s)										
	ORAL DRYNESS CONDITION  Symptom: เมื่อทานอาหารที่แห้ง ท่านต้องดื่มน้ำตามทันทีบ่อยครั้งเพื่อช่วยกลืนหรือไม่																						
DENTITION	N STA	TUS AI	ND .	TRE	ATM	IEN	IT N	EED	)									2) (	2				
	18	17	1	6	15		14	1	3	12		11	21	22	23	24	25	26	27	28			
Crown																		Y					
Root																							
Treatment																							
48 47 46 45 44 43 42 41 31 32 33 34 35 36															37	38							
Crown	70	71			70			Τ		72		71	<u> </u>	<u> </u>	33		- 55		- J,				
Root														, (		,							
Treatment														6	O								
GINGIVAL BLEEDING SCORES (MODIFIED) AND POCKET SCORES (MODIFIED)																							
GINGIVAL BLEEDING SCORES POCKET SCORES 17/16 11 26/27																							
0 = Healthy 0 = Absence of condition B																В							
1 = Bleeding															Р								
2 = Calculus							ocket			or m	ore					В					В		
5 = Calculus	with bl	leeding			9 =	= No	ot re	cord	ed	\						Р					Р		
9 = Not reco	rded							V		<b>&gt;</b>							47/46 31 36/37						
PROSTHET	TIC ST	ATUS					F _ ر	PRO	STH	İETI	C N	NEED					7						
0 = No pros	sthesis		Upp	er			C	= 1	No p	rostl	hes	sis nee	eded		Upper			Р	oster	ior occ	lusal pair <u>—</u>		
1 = Bridge			Lov	ver			) 1	= 1	Need	d for	on	e-unit	prostł	nesis	Lower								
2 = More th	an one	e bridg	e	\		V	2	2 = 1	Veed	d for	mι	ulti-uni	t pros	thesis			_		R	ight Le	ft		
3 = Partial	denture	9	1		V		3	8 = 1	Need	d for	ful	l prost	thesis	(replac	ement c	of all te	eth)						
4 = Both br	idge(s)	and p	artia	al de	entur	e(s)	) 4	l = 1	Veed	d to	rep	air de	nture										
5 = Full ren	novable	e dentu	ire				ç	1 = 0	Not r	ecoi	rde	d											
6 = Coping	with co	omplet	e de	entu	re																		
9 = Not rec	orded																						
ORAL LES	IONS																	TOC	N HTC	VEAR			
Clinical	conditio	on				Lo	catio	n					Code	e for lo	cation		Occlu	ısal:					
☐ Normal												١/ -	- \/orr-	ء م مااان	ordor		Numl	ber of te	eth affe	ected			
☐ White les	ion		٧	С	L	s	В	F	Т	Р	G	C =	= Comi	illion bo missure	s		Incisal:						
☐ Red lesio	n		٧	С	L	s	В	F	Т	Р	G		•	vermill				ber of te		ected			
☐ Red & W	hite les	ion	٧	С	L	s	В	F	Т	Р	G	В=	= Bucc	al mucc	osa		Cervical area:  Number of teeth affected						
Ulceration	Ulceration V C L S B F T P G T = Tongue													inumi	per of te	ະແາ aπe	ecied						
☐ Nodule /	mass		V	С	L	S	В	F	т	Р	G				or soft pa ges / ging								