



World Health Organization

Oral Health Assessment Form

for Adults, 2013

(1)	Leave blank	(4)	(5)	Year	Month	Day	(10)	(11)	Identification No.	(14)	Orig/Dupl	(15)	(16)	Examiner	(17)
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
General information:															
Sex 1=M, 2=F															
Date of birth															
Age in years															
(Name)															
Ethnic group (27) <input type="text"/> (28)															
Other group (29) <input type="text"/> (30)															
Years in school (31) <input type="text"/> (32)															
Occupation <input type="text"/> (33)															
Community (geographical location) (34) <input type="text"/> (35)															
Location Urban (1) Periurban (2) Rural (3) <input type="text"/> (36)															
Other data (37) <input type="text"/> (38)															
Other data (39) <input type="text"/> (40)															
Other data (41) <input type="text"/> (42)															
Extra-oral examination (43) <input type="text"/> (44)															
Dentition status															
Permanent teeth															
Status															
0 = Sound															
1 = Caries															
2 = Filled w/caries															
3 = Filled, no caries															
4 = Missing due to caries															
5 = Missing for any other reason															
6 = Fissure sealant															
7 = Fixed dental prosthesis/crown abutment, veneer, implant															
8 = Unerupted															
9 = Not recorded															
Periodontal status (CPI Modified)															
Gingival bleeding															
Score															
0 = Absence of condition															
1 = Presence of condition															
9 = Tooth excluded															
X = Tooth not present															
Pocket															
Score															
0 = Absence of condition															
1 = Pocket 4–5 mm															
2 = Pocket 6 mm or more															
9 = Tooth excluded															
X = Tooth not present															



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Loss of attachment Severity 0 = 0–3 mm 1 = 4–5 mm Cemento-enamel junction (CEJ) within black band 2 = 6–8 mm CEJ between upper limit of black band and 8.5 mm ring 3 = 9–11 mm CEJ between 8.5 mm and 11.5 mm ring 4 = 12 mm or more CEJ beyond 11.5 mm ring X = Excluded sextant 9 = Not recorded * Not recorded under 15 years of age	Index teeth <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> 17/16 (173) <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> </div> <div style="text-align: center;"> 11 (176) <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> </div> <div style="text-align: center;"> 26/27 (175) <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> </div> </div> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> 47/46 (176) <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> </div> <div style="text-align: center;"> 31 (178) <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> </div> <div style="text-align: center;"> 36/37 (178) <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> </div> </div>	Enamel fluorosis <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> (179) Severity 0 = Normal 1 = Questionable 2 = Very mild 3 = Mild 4 = Moderate 5 = Severe 8 = Excluded (crown, restoration, "bracket") 9 = Not recorded (unerupted tooth)
Dental erosion Severity <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> (180) 0 = No sign of erosion 1 = Enamel lesion 2 = Dentinal lesion 3 = Pulp involvement Number of teeth affected (181) <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> (182)	Dental trauma Status <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> (183) 0 = No sign of injury 1 = Treated injury 2 = Enamel fracture only 3 = Enamel and dentine fracture 4 = Pulp involvement 5 = Missing tooth due to trauma 6 = Other damage 9 = Excluded tooth Number of teeth affected (184) <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> (185)	
Oral mucosal lesions <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> (186) <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> (187) <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> (188) </div> <div style="width: 45%;"> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> (189) <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> (190) <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> (191) </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Condition 0 = No abnormal condition 1 = Malignant tumour (oral cancer) 2 = Leukoplakia 3 = Lichen planus 4 = Ulceration (aphthous, herpetic, traumatic) 5 = Acute necrotizing ulcerative gingivitis (ANUG) 6 = Candidiasis 7 = Abscess 8 = Other condition (specify if possible) 9 = Not recorded </div> <div style="width: 45%;"> Location 0 = Vermillion border 1 = Commissures 2 = Lips 3 = Sulci 4 = Buccal mucosa 5 = Floor of the mouth 6 = Tongue 7 = Hard and/or soft palate 8 = Alveolar ridges/gingiva 9 = Not recorded </div> </div>		Denture(s) <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> Upper <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> (192) </div> <div style="text-align: center;"> Lower <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> (193) </div> </div> Status 0 = No denture 1 = Partial denture 2 = Complete denture 9 = Not recorded
Intervention urgency <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> (194) 0 = No treatment needed 1 = Preventive or routine treatment needed 2 = Prompt treatment (including scaling) needed 3 = Immediate (urgent) treatment needed due to pain or infection of dental and/or oral origin 4 = Referred for comprehensive evaluation or medical/dental treatment (systemic condition)		