GOVT DENTAL COLLEGE AND HOSPITAL, AHMEDABAD
&
NATIONAL INSTITUTE OF OCCUPATIONAL HEALTH, AHMEDABAD.

SALIVARY IMMUNOGLOBULIN A: STUDY OF TOBACCO HABITERS.

PROFORMA

ID NO :

PART I: PERSONAL INFORMATION.

OPD CASE NUMBER:

NAME :

ADDRESS:

PHONE NUMBER :

Date of examination :

Age in years :

Monthly Personal Income :

Monthly family Income :

Total family members :

Educational Level :

1. Undergraduate studies continuing.
2. Graduate
3. Post Graduate
4. Professional
5. Others (specify)
Occupation:

1. Govt Desk work
2. Govt Officer
3. Private Desk work
4. Private Executive/Marketing/Management.
5. Own Business
6. Professional
7. Others (specify)

PART II: INTRA - ORAL EXAMINATION.

Oral Hygiene Status:

1. Good
2. Fair
3. Poor
4. Very Poor

Periodontal Pockets:

1. Yes (overall)
2. Yes (localised)
3. No

Gingival Lesions:

Oral Mucosal Lesions:

Site:
Size:
Colour:
Contour:
Texture:
Degree of severity:

PART III: SMOKING HISTORY.

a. Cig. Smoking. 1. Yes 2. No
b. Age at Initiation:
c. Duration of habit:
d. Frequency of habit:
e. Motivation to quit:
   1. High
   2. Average
   3. Low
   4. No
EX - SMOKER.

a. Cig. Smoking     1. Yes   2. No
b. Age at Initiation  Yrs.
c. Age at quitting    Yrs.
d. Abstinence period   Yrs.
e. Duration of habit   Yrs.
f. Frequency of habit  Number/day.

PART - IV : TOBACCO CHEWING HISTORY.

a. Commercially available pouches:
   1. Yes   2. No.

b. Age at Initiation:

c. Site of Placement:
   1. Mandibular Incisal Region.
   2. Right Premolar Region.
   3. Left Premolar Region.
   4. Right Molar Region.
   5. Left Molar Region.

d. Duration   Yrs.
e. Frequency   /day.
f. No. of chews per pouch :
g. No. of minutes each chew is usually had in mouth :
h. Overnight usage
   1. Yes   2. No
i. Motivation to Quit:
   1. High
   2. Average
   3. Low
   4. No

EX - CHEWER.

a. Commercially available pouches:
   1. Yes   2. No.

b. Age at Initiation:

c. Age at Quitting:

d. Abstinence Period:
e. Site of Placement:
   1. Mandibular Incisal Region.
   2. Right Premolar Region.
   3. Left Premolar Region.
   4. Right Molar Region.
   5. Left Molar Region.
   6. Non-Specific.

f. Duration: Yrs.

g. Frequency: /day.

h. No. of chews per pouch:

i. No. of minutes each chew is usually held in mouth:

j. Overnight usage: 1. Yes. 2. No:

PART - VI S-IgA RESULTS

a. Initial: mg%.

b. 1st Follow up: mg%.

c. 2nd Follow up: mg%.

REMARKS: