

# Oral Health Professional Cancer Control Survey

1. 1. When you perform a comprehensive oral health exam on your patients or an initial exam, do you perform an intra-oral and extra-oral cancer screening exam?				
			Response Percent	Response Count
Yes, always		81.2%	56	
Yes, occasionally		14.5%	10	
No		4.3%	3	
I don't perform oral cancer exams		0.0%	0	
Other (please specify)			1	
			<b>answered question</b>	<b>69</b>
			<b>skipped question</b>	<b>2</b>

2. Comments:				
			Response Count	
			5	
			<b>answered question</b>	<b>5</b>
			<b>skipped question</b>	<b>66</b>

**3. 2. If you perform an oral cancer screening, do you tell your patient you are doing an oral cancer screening and what you are looking for?**

		Response Percent	Response Count
Yes, always		44.3%	31
Yes, occasionally		44.3%	31
No		10.0%	7
I don't perform oral cancer exams		1.4%	1
		Other (please specify)	0
		<b>answered question</b>	<b>70</b>
		<b>skipped question</b>	<b>1</b>


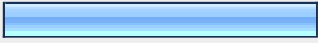
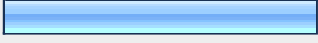
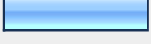
**4. Comments:**

		Response Count
		2
		<b>answered question</b>
		<b>2</b>
		<b>skipped question</b>
		<b>69</b>

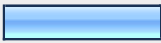
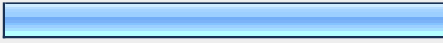
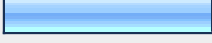
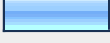
**5. 3. Do you or your staff provide your patients with oral cancer information on what changes to look for in and on the lips, mouth, face, etc. which may need further examination by a health professional/dentist?**

		Response Percent	Response Count
Yes, always		18.2%	12
Yes, occasionally		51.5%	34
No		30.3%	20
		Other (please specify)	1
		<b>answered question</b>	<b>66</b>
		<b>skipped question</b>	<b>5</b>

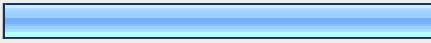

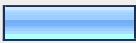

6. Comments:		Response Count
		2
	<i>answered question</i>	2
	<i>skipped question</i>	69

7. 4. How often do you or your staff provide information about the signs and symptoms of oral cancers to your patients who use tobacco?			
		Response Percent	Response Count
We <b>never</b> or <b>rarely</b> provide oral cancer information to our patients who use tobacco.		15.7%	11
We <b>occasionally</b> provide oral cancer information to our patients who use tobacco.		34.3%	24
We <b>often</b> or <b>very often</b> provide oral cancer information to our patients who use tobacco.		34.3%	24
We <b>always</b> provide oral cancer information to our patients who use tobacco.		15.7%	11
		<i>answered question</i>	70
		<i>skipped question</i>	1

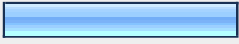

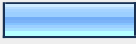

**8. 5. Regardless of a patient's tobacco-use status, how often do you or your staff provide information about the signs and symptoms of oral cancers?**

		Response Percent	Response Count
We <b>never</b> or <b>rarely</b> provide oral cancer information to our patients who use tobacco.		17.1%	12
<b>We occasionally provide oral cancer information to our patients who use tobacco.</b>		48.6%	34
We <b>often</b> or <b>very often</b> provide oral cancer information to our patients who use tobacco.		22.9%	16
We <b>always</b> provide oral cancer information to our patients who use tobacco.		11.4%	8
		<b>answered question</b>	<b>70</b>
		<b>skipped question</b>	<b>1</b>



**9. 6. Have you or your staff ever provided information about the Idaho QuitLine and/or the QuitNet or referred your patients who use tobacco products to those resources?**

		Response Percent	Response Count
<b>We never or rarely provide information or referral to the QuitLine/QuitNet to our patients who use tobacco products.</b>		47.1%	33
We <b>occasionally</b> provide information or referral to the QuitLine/QuitNet to our patients who use tobacco products.		37.1%	26
We <b>often</b> or <b>very often</b> provide information or referral to the QuitLine/QuitNet to our patients who use tobacco products.		14.3%	10
We <b>always</b> provide information or referral to the QuitLine/QuitNet to our patients who use tobacco products.		1.4%	1
		<b>answered question</b>	<b>70</b>

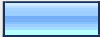



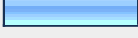
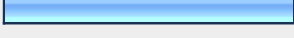
## 10. 7. How many patients with oral cancer have you identified during your practice?

		Response Percent	Response Count
None		25.7%	18
1-3		57.1%	40
4-10		14.3%	10
More than 10		2.9%	2
		<b>answered question</b>	<b>70</b>
		<b>skipped question</b>	<b>1</b>






## 11. 8. Are you and your staff aware of the heightened risk of developing oral cancer when a patient uses tobacco and/or alcohol?

		Response Percent	Response Count
Yes		97.1%	68
No		2.9%	2
		<b>answered question</b>	<b>70</b>
		<b>skipped question</b>	<b>1</b>

**12. 9. If you are a dentist, how long have you been in practice?**

		Response Percent	Response Count
I am not a dentist		10.1%	7
Less than a year		2.9%	2
1-3 years		11.6%	8
4-10 years		29.0%	20
11-15 years		14.5%	10
<b>More than 15 years</b>		<b>31.9%</b>	<b>22</b>
		<b><i>answered question</i></b>	<b>69</b>
		<b><i>skipped question</i></b>	<b>2</b>

**13. 10. If you are a dental hygienist, how long have you been in practice?**

		Response Percent	Response Count
<b>I am not a dental hygienist</b>		<b>83.0%</b>	<b>39</b>
Less than a year		0.0%	0
1-3 years		2.1%	1
4-10 years		8.5%	4
11-15 years		4.3%	2
More than 15 years		2.1%	1
		<b><i>answered question</i></b>	<b>47</b>
		<b><i>skipped question</i></b>	<b>24</b>

14. 11. At what age do you like to have a child in for their first dental appointment?				
		Response Average	Response Total	Response Count
Years of Age:		2.56	179	70
			<i>answered question</i>	70
			<i>skipped question</i>	1

15. 12. Are you using or placing fluoride varnish on your patients teeth?				
		Response Percent	Response Count	
Yes, always		33.8%	23	
Yes, occasionally		42.6%	29	
No		23.5%	16	
Other (please specify)			7	
			<i>answered question</i>	68
			<i>skipped question</i>	3

16. Comments:		Response Count	
		8	
		<i>answered question</i>	8
		<i>skipped question</i>	63

17. Number Requested		Response Count	
		60	
		<i>answered question</i>	60
		<i>skipped question</i>	11

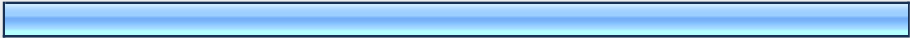
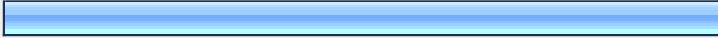





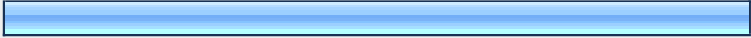

18. Number Requested		Response Count
		58
	<i>answered question</i>	58
	<i>skipped question</i>	13

19. Number Requested		Response Count
		60
	<i>answered question</i>	60
	<i>skipped question</i>	11

20. Number Requested		Response Count
		62
	<i>answered question</i>	62
	<i>skipped question</i>	9

21. Number Requested		Response Count
		44
	<i>answered question</i>	44
	<i>skipped question</i>	27

22. Number Requested		
		Response Count
		36
	<i>answered question</i>	<b>36</b>
	<i>skipped question</i>	<b>35</b>

23. Please provide the following information if you are requesting any materials:			
		Response Percent	Response Count
<b>Name:</b>		100.0%	62
Organization/Office:		79.0%	49
<b>Address:</b>		100.0%	62
Address 2:		21.0%	13
<b>City/Town:</b>		100.0%	62
<b>State:</b>		100.0%	62
<b>ZIP/Postal Code:</b>		100.0%	62
Email Address:		82.3%	51
Phone Number:		95.2%	59
		<i>answered question</i>	<b>62</b>
		<i>skipped question</i>	<b>9</b>