

# Apple Tree Dental Data Dictionary

## **Table of Contents**

| DEMOGRAPHIC     | 2            |
|-----------------|--------------|
| LOCATION        | 3            |
| MEDICAL HISTORY | 4            |
| PROVIDER        | <del>(</del> |
| APPOINTMENT     |              |
| PROCEDURE       |              |
|                 |              |
| DENTITION       |              |
| PERIO CHARTING  |              |
| ORAL EXAM FORM  | 11           |

#### Demographic

| Source         | Data    | Variable    | Variable name        | Format      | Variable Value   | Variable Description   | Comments                       |
|----------------|---------|-------------|----------------------|-------------|--|--|--------------------------------|
|                | type    | category    |                      |             |  |  |                                |
| Open<br>Dental | Patient | Demographic | Research ID          | Numerical   | Unique patient ID number.  | ID number used for research purposes only, not their medical record number. Unique to each research data set.                            |                                |
| Open<br>Dental | Patient | Demographic | Age                  | Numerical   | Actual age at last appointment or 90 if age is 90 or older (de-identified data set).   | Patient's age at their last appointment.   |                                |
| Open<br>Dental | Patient | Demographic | Status               | Categorical | 0=Active, 2=Inactive, 5=Deceased   | Variable indicates the status of the patient as active, inactive or deceased.  |                                |
| Open<br>Dental | Patient | Demographic | Gender               | Categorical | 0=Male, 1=Female, 2=Unknown, 3=Other   | Patient's gender.  |                                |
| Open<br>Dental | Patient | Demographic | Zip Code             | Text        | Zip Code   | Patient's residence zip code (first 3 digits). Full zip code only available for LDS data requests.                                       |                                |
| Open<br>Dental | Patient | Demographic | Guarantor            | Boolean     | 0=No guarantor (Self), 1=Guarantor (Financial Contact)   | Represents if someone other than the patient is the financial contact (guarantor).   |                                |
| Open<br>Dental | Patient | Demographic | Responsible<br>Party | Boolean     | 0=Self Responsibile, 1=Has Responsible Party   | Represents if someone other than the patient makes treatment decisions (responsible party).  |                                |
| Open<br>Dental | Patient | Demographic | Primary<br>Language  | Categorical | (American Sign Language) American Sign Language, (ara) Arabic, (bos) Bosnian (Latin), (Cantonese) Cantonese, (zho) Chinese, (eng) English, (fra) French, (deu) German, (heb) Hebrew, (hin) Hindi, (hmn) Hmong, (ita) Italian, (jpn) Japanese, (khm) Khmer, (kor) Korean, (kur) Kurdish, (lao) Lao, (Mandarin) Mandarin, (nep) Nepali, (fas) Persian, (por) Portuguese, (ron) Romanian, (rus) Russian, (slk) Slovak, (som) Somali, (spa) Spanish, (swa) Swahili, (tur) Turkish, (ukr) Ukranian, (urd) Urdu, (vie) Vietnamese, Declined to Specify | Patient's primary language. Self-reported.   | Standardize<br>by US<br>census |
| Open<br>Dental | Patient | Demographic | NH Admit Date        | Date        |  | Date of patient's admission to the nursing home. Only applicable for nursing home residents. Year only (YYYY) for deidentified data set. |                                |
| Open<br>Dental | Patient | Demographic | Race                 | Text        | BLACK OR AFRICAN AMERICAN,<br>AMERICAN INDIAN OR ALASKA<br>NATIVE, ASIAN, NATIVE HAWAIIAN<br>OR OTHER PACIFIC ISLANDER,<br>OTHER RACE, WHITE, DECLINED<br>RACE. Multiple races separated by a<br>comma.  | Patient's race. Self-reported.   | Standardize<br>by US<br>census |
| Open<br>Dental | Patient | Demographic | Ethnicity            | Categorical | HISPANIC OR LATINO, NOT HISPANIC OR LATINO, DECLINED ETHNICITY   | Patient's ethnicity. Self-reported   | Standardize<br>by US<br>census |
| Open<br>Dental | Patient | Demographic | Insurance 1 Type     | Categorical | 0=N/A (no insurance),<br>1=Commercial_Insurance, 2=SelfPay,<br>4=PPO, 17=Medicaid, 21=Veterans   | Patient's primary insurance type at the last appointment.  |                                |

#### **Demographic (Continued)**

| Source | Data    | Variable    | Variable name | Format      | Variable Value                         | Variable Description                               | Comments |
|--------|---------|-------------|---------------|-------------|--|--|----------|
|        | type    | category    |               |             |  |  |          |
| Open   | Patient | Demographic | Insurance 1   | Categorical | 1=Medicaid Adult, 3=MnCare Adult,      | Patient's primary insurance subtype at the time of |          |
| Dental |         |             | SubType       |             | 6=MHCP Adult Discount, 7=Affordable    | the last appointment.                              |          |
|        |         |             |               |             | Plan (Sliding Fee), 8=Incurred Medical |  |          |
|        |         |             |               |             | Expenses), 10=Nursing Home, 11=Winona  |  |          |
|        |         |             |               |             | Community Foundation                   |  |          |
| Open   | Patient | Demographic | Insurance 2   | Categorical | 0=N/A (no insurance),                  | Patient's secondary insurance type at the last     |          |
| Dental |         |             | Type          |             | 1=Commercial_Insurance, 2=SelfPay,     | appointment.                                       |          |
|        |         |             |               |             | 4=PPO, 17=Medicaid, 21=Veterans        |  |          |
| Open   | Patient | Demographic | Insurance 2   | Categorical | 1=Medicaid Adult, 3=MnCare Adult,      | Patient's secondary insurance subtype at the time  |          |
| Dental |         |             | SubType       |             | 6=MHCP Adult Discount, 7=Affordable    | of the last appointment.                           |          |
|        |         |             |               |             | Plan (Sliding Fee), 8=Incurred Medical |  |          |
|        |         |             |               |             | Expenses), 10=Nursing Home, 11=Winona  |  |          |
|        |         |             |               |             | Community Foundation                   |  |          |

#### Location

| Source         | Data type | Variable category | Variable name    | Format      | Variable Value   | Variable Description   | Comments |
|----------------|-----------|-------------------|------------------|-------------|--|--|----------|
| Open<br>Dental | Patient   | Location          | Center ID        | Categorical | 1=Rochester, 2=Hawley, 3=Fergus Falls,<br>4=Madelia, 5=Coon Rapids, 6=Mounds<br>View, 7=Little Falls, 8=Fairmont, 10=New<br>Brighton                   | Apple Tree Center location   |          |
| Open<br>Dental | Patient   | Location          | Facility ID      | Numerical   | Unique facility id number  | Facility where treatment is provided (mobile site or clinic)   |          |
| Open<br>Dental | Patient   | Location          | Facility type    | Categorical | Assisted Living, Group Home, Head Start,<br>Hospital, Nursing Home, Nursing Home<br>and Assisted Living, Outpatient Clinic,<br>Other, Outreach, School | Type of facility where treatment is provided   |          |
| Open<br>Dental | Patient   | Location          | Place of service | Categorical | 0=Office, 3=OutpatHospital,<br>4=SkilledNursFacility, 6=OtherLocation,<br>7=MobileUnit, 8=School,<br>15=TelehealthOutsideHome,<br>16=TelehealthInHome  | Default place of service to be used on an insurance claim form based on Facility type.   |          |
| Open<br>Dental | Patient   | Location          | Zip Code         | Text        | Zip Code   | Zip code (first 3 digits) of the facility where treatment is provided. For some facilities (i.e. nursing home) it is also the patient's residence. Full zip code only available for LDS data requests. |          |

#### **Medical History**

| Source         | Data type | Variable                             | Variable name                  | Format      | Variable Value  | Variable Description  | Comments |
|----------------|-----------|--------------------------------------|--------------------------------|-------------|---|---|----------|
|                |           | category                             |                                |             |   |   |          |
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | Tobacco<br>Assessment<br>Code  | Character   |   | SNOMED CT Code of the tobacco assessments self reported by the patient.   |          |
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | Tobacco Assessment Description | Text        |   | Description of the associated SNOMED CT Code (of the tobacco assessments) self reported by the patient.                     |          |
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | Disease Status                 | Categorical | 0=Active, 1=Resolved, 2=Inactive  | Indicates if the disease status is actice, resolved or inactive.  |          |
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | DateStart                      | Date        |   | Date that the disease is dagnosed as self-reported by the patient. Often blank/unknown.                                     |          |
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | DateStop                       | Date        |   | Date that the disease was set resolved or inactive and self-reported by the patient. If still active, no value is assigned. |          |
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | diseasename                    | Text        |   | Name of the disease (medical diagnosis) that is self-reported by the patient  |          |
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | ICD9Code                       | Character   |   | ICD 9 Code of the disease diagnoses self reported by the patient.   |          |
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | ICD9<br>Description            | Text        |   | Description of the associated ICD 9 code self reported by the patient   |          |
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | ICD10Code                      | Character   |   | ICD 10 Code of the disease diagnoses self reported by the patient.  |          |
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | ICD10<br>Description           | Text        |   | Description of the associated ICD 10 code self reported by the patient  |          |
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | SNOMEDCode                     | Character   |   | SNOMED CT Code of the disease diagnoses self reported by the patient.   |          |
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | SNOMED<br>Description          | Text        |   | Description of the associated SNOMED CT code self reported by the patient   |          |
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | Allergy                        | Categorical | 1= Other; 2: Penicillin; 3: ASA; 4:<br>NSAIDs; 5: Sulfa; 6: Latex; 7: Codeine; 8:<br>NKDA; 9: Amoxicillin; 10: Peanuts; 11:<br>Bee Sting; 12: Nickel; 13: Red Dye; 15:<br>Hay Fever; 16: Nuts; 17: Glutens; 18: Ace<br>Inhibitors; 19: House Dust; 20: Statins; 21:<br>Local Anesthetic | Allergies self-reported by the patient.   |          |

## **Medical History (Continued)**

| Source         | Data type | Variable                             | Variable name                    | Format      | Variable Value   | Variable Description   | Comments |
|----------------|-----------|--------------------------------------|----------------------------------|-------------|--|--|----------|
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | Premed                           | Categorical | 1=Premed needed, 0=No Premed   | Premed (ABX) needed before dental appointments.  |          |
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | Medication<br>Name               | Text        |  | Name (usually Brand Name) of the medication that the patient is currently taking (self-reported).  |          |
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | RxCui                            | Numerical   |  | The RxCUI is a unique identifier that is assigned to an individual drug entity in RxNorm and used to relate to all things associated with that drug.                                   |          |
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | Generic Name                     | Text        |  | Generic name of the medication that the patient is currently taking (self-reported).   |          |
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | Medication<br>Start Date         | Date        |  | Medication start date is populated automatically when ePrescribing, but often missing or an estimate for self-reported medications.  |          |
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | Medication<br>Stop Date          | Date        |  | Medication stop date is populated automatically when ePrescribing, but often missing or an estimate for self-reported medications.   |          |
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | Prescribed by Apple Tree Dentist | Boolean     | 1= Apple Tree dentist prescribed; 0= Self reported medication                  | Self reported medications and medications prescribed by an Apple Tree dentist are differentiated by this variable  |          |
| Open<br>Dental | Patient   | Self- reported<br>medical<br>history | Provider                         | Numerical   |  | Provider is populated automatically when ePrescribing, but not for self-reported medications.  |          |
| Open<br>Dental | Patient   | Medical<br>history                   | BP Systolic                      | Numerical   |  | Systolic blood pressure reading as taken and recorded by the clinician.  |          |
| Open<br>Dental | Patient   | Medical<br>history                   | BP Diastolic                     | Numerical   |  | Diastolic blood pressure reading as taken and recorded by the clinician  |          |
| Open<br>Dental | Patient   | Medical<br>history                   | Pulse                            | Numerical   |  | Pulse as taken and recorded by the clinician.  |          |
| Open<br>Dental | Patient   | Medical<br>history                   | BP Date Taken                    | Date        |  | Date that the blood pressure was taken.  |          |
| Open<br>Dental | Patient   | Medical<br>history                   | BP Days                          | Numerical   | # of days between the blood pressure date and the patient's first appointment. | Include this variable for LDS and de-identified data sets where only the year of service is included for BP Date Taken, for chronological ordering and length of time between reading. |          |

#### Provider

| Source          | Data type | Variable category | Variable name      | Format      | Variable Value  | Variable Description   | Comments |
|-----------------|-----------|-------------------|--------------------|-------------|---|--|----------|
| Open<br>Dental  | Provider  | Provider Details  | Provider ID        | Numerical   | Provider ID number  | Providers can have multiple ID numbers for different centers and care settings.  |          |
| Open<br>Dental  | Provider  | Provider Details  | Custom ID          | Numerical   | One custom ID per individual provider   | Unique ID number used to identify individual providers that have multiple Provider ID records (i.e. for different clinics or mobile program)                                   |          |
| Open<br>Dental  | Provider  | Provider Details  | IsSecondary        | Boolean     | 0=Primary Provider, 1=Secondary Provider  | 1 indicates the provider is a hygienist, dual licensed dental therapist or restorative expanded function assistant. Dentists and Advanced Dental Therapists have a value of 0. |          |
| Open<br>Dental  | Provider  | Provider Details  | Center ID          | Categorical | 0=All, 1=Rochester, 2=Hawley, 3=Fergus<br>Falls, 4=Madelia, 5=Coon Rapids, 6=Mounds<br>View, 7=Little Falls, 8=Fairmont, 10=New<br>Brighton   | All (0) is a provider record used for all center locations (i.e. Teledentistry). Otherwise providers have multiple records for each location where they provide services.      |          |
| Open<br>Dental  | Provider  | Provider Details  | Care setting       | Categorical | All, Mobile, Clinic   | Providers have different records for services provided through the mobile program vs the out-patient clinic.   |          |
| Open<br>Dental  | Provider  | Provider Details  | Provider<br>type   | Categorical | Dentist, Advanced Dental Therapist, Dental Therapist, Dual-licensed Advanced Dental Therapist, Dual-licensed Dental Therapist, Hygienist, Restorative Expanded Functions (REF) Assistant, Restorative Exanded Functions (REF) Hygienist, Licensed Dental Assistant (pedo chair) | Rendering provider type  |          |
| Open<br>Dental  | Provider  | Provider Details  | Provider specialty | Categorical | General Dentist, Hygienist, Endodontics, Pediatric, Perio, Prosth, Ortho, Denturist, Surgery, Assistant, Dental Therapist, Advanced Dental Therapist, LabTech, Pathology, PublicHealth, Radiology   | Rendering provider specialty.  |          |
| ADP/ HR<br>Data | Provider  | Provider Details  | Graduation<br>Year | Date        |   | Rendering provider graduation year (from highest licensure)  |          |
| ADP/ HR<br>Data | Provider  | Provider Details  | Birth Year         | Date        |   |  |          |
| ADP/ HR<br>Data | Provider  | Provider Details  | Gender             | Categorical | Male, Female, Other   |  |          |
| ADP/ HR<br>Data | Provider  | Provider Details  | Race               |             | White, Black or African American, Asian,<br>Hispanic or Latino, Native Hawaiian or Other<br>Pacific Islander, Two or more races   |  |          |

## Appointment

| Source         | Data    | Variable    | Variable               | Format      | Variable Value   | Variable Description   | Comments |
|----------------|---------|-------------|------------------------|-------------|--|--|----------|
| 0              | type    | category    | name                   | NI. 1       | II.  |  |          |
| Open<br>Dental | Patient | Appointment | Appointment<br>Number  | Numerical   | Unique appointment number  |  |          |
| Open<br>Dental | Patient | Appointment | Appointment<br>Status  | Categorical | 1=Scheduled, 2=Complete, 6=Planned   | This variable provides the different statuses of<br>an appointment. Planned appointments are used<br>for tracking and scheduling a patient's next<br>appointment and treatment needed.                 |          |
| Open<br>Dental | Patient | Appointment | Appt Date              | Date        |  | This is Date of Service of the appointments (completed or scheduled). Most of the procedures are tied to this DOS. For LDS and de-identified data sets, only include year of service                   |          |
| Open<br>Dental | Patient | Appointment | Appt Days              | Numerical   | # of days between this appointment and the patient's first appointment in the data sampling time frame.  | Include this variable for LDS and de-identified data sets where only the year of service is included for Appt Date, for chronological ordering and length of time between appointments.                |          |
| Open<br>Dental | Patient | Appointment | Center ID              | Categorical | 1=Rochester, 2=Hawley, 3=Fergus Falls,<br>4=Madelia, 5=Coon Rapids, 6=Mounds View,<br>7=Little Falls, 8=Fairmont, 10=New Brighton  | Apple Tree Center under which the appointment was scheduled.   |          |
| Open<br>Dental | Patient | Appointment | Scheduled<br>Time      | Numerical   | # of minutes the appointment was scheduled for.  | # of minutes the appointment was scheduled<br>for, based on the quantity of time increments<br>(length(appointment.pattern)*5)   |          |
| Open<br>Dental | Patient | Appointment | Chair Time             | Numerical   | # of minutes in the chair, if 0 both dates weren't recorded correctly.   | # of minutes the patient was in the dental chair, based on Time Seated and Time Dismissed time stamps.   |          |
| Open<br>Dental | Patient | Appointment | Primary<br>provider    | Numerical   | Provider ID for the main provider.   | Primary provider on the appointment. This is usually a dentist or advanced dental therapist, but can also be a hygienist or dental therapist for collaborative practice or hygiene only appointments.  |          |
| Open<br>Dental | Patient | Appointment | Secondary<br>provider  | Numerical   | Provider ID for the secondary (hygiene/DT) provider.   | Secondary provider on the appointment. This is usually a hygienist, dual licensed dental therapist or REF assistant. Blank if only seen by a dentist or Advanced Dental Therapist (not dual licensed). |          |
| Open<br>Dental | Patient | Appointment | Is Secondary           | Boolean     | 0=Primary Provider, 1=Secondary Provider   | If true, then the secondary provider is the main provider for the appointment. (i.e. a hygiene appointment)  |          |
| Open<br>Dental | Patient | Appointment | Insurance 1<br>Type    | Categorical | 0=N/A (no insurance), 1=Commercial_Insurance, 2=SelfPay, 4=PPO, 17=Medicaid, 21=Veterans   | Patient's primary insurance type at the time of the appointment.   |          |
| Open<br>Dental | Patient | Appointment | Insurance 1<br>SubType | Categorical | 1=Medicaid Adult, 3=MnCare Adult, 6=MHCP<br>Adult Discount, 7=Affordable Plan (Sliding Fee),<br>8=Incurred Medical Expenses), 10=Nursing<br>Home, 11=Winona Community Foundation | Patient's primary insurance subtype at the time of the appointment.  |          |
| Open<br>Dental | Patient | Appointment | Insurance 2<br>Type    | Categorical | 0=N/A (no insurance), 1=Commercial_Insurance, 2=SelfPay, 4=PPO, 17=Medicaid, 21=Veterans   | Patient's secondary insurance type at the time of the appointment.   |          |

#### **Appointment (Continued)**

| Source         | Data    | Variable    | Variable               | Format      | Variable Value   | Variable Description  | Comments |
|----------------|---------|-------------|------------------------|-------------|--|---|----------|
|                | type    | category    | name                   |             |  |   |          |
| Open<br>Dental | Patient | Appointment | Insurance 2<br>SubType | Categorical | 1=Medicaid Adult, 3=MnCare Adult, 6=MHCP<br>Adult Discount, 7=Affordable Plan (Sliding Fee),<br>8=Incurred Medical Expenses), 10=Nursing | Patient's secondary insurance subtype at the time of the appointment. |          |
|                |         |             |                        |             | Home, 11=Winona Community Foundation   |   |          |

#### Procedure

| Source         | Data type | Variable category | Variable name          | Format      | Variable Value   | Variable Description  | Comments |
|----------------|-----------|-------------------|------------------------|-------------|--|---|----------|
| Open<br>Dental | Patient   | Procedure         | Appointment<br>Number  | Numerical   | Unique appointment number or 0   | Appointment number for completed and treatment planned (scheduled) procedures. Not all procedures are linked to an appointment (i.e. products sold, mail in denture repairs, store and forward teledentistry exams).  |          |
| Open<br>Dental | Patient   | Procedure         | Planned Appt<br>Number | Numerical   | Unique appointment number or 0   | Planned appointment number for treatment planned and completed procedures. Not all procedures are linked to a planned appointment (i.e. procedures added at the time of service)  |          |
| Open<br>Dental | Patient   | Procedure         | Procedure<br>Date      | Date        |  | This is Date of Service of the procedure (completed or scheduled). For LDS and deidentified data sets, only include year of service,  |          |
| Open<br>Dental | Patient   | Procedure         | Procedure<br>Days      | Numerical   | # of days between the procedure date and the patient's first appointment in the data sampling time frame.        | Include this variable for LDS and de-identified data sets where only the year of service is included for Procedure Date, for chronological ordering and length of time between procedures.  |          |
| Open<br>Dental | Patient   | Procedure         | Status                 | Categorical | 1=Treatment Plan, 2=Complete, 4=Existing Other Provider, 5=Referred Out, 7=Condition, 8=Treatment Plan inactive. | Treatment Planned (1): For work that is recommended, but not complete yet. Complete (2): The work is done and shows in the patient's account. Existing-Other Prov (4): Procedure was done by another provider, either before the patient came to your practice, or because they were referred out for treatment. Referred Out (5): Procedure the patient needs, but that will be done at another office. Once the work has been completed, the status of the procedure is changed to EO.  Condition (7): Chart caries and other conditions as a separate step in order to see them on the Graphical Tooth Chart.  Treatment Planned Inactive (8): Procedures that are not part of an active treatment plan. |          |

#### **Procedure (Continued)**

| Source         | Data type | Variable category | Variable name      | Format      | Variable Value  | Variable Description  | Comments |
|----------------|-----------|-------------------|--------------------|-------------|---|---|----------|
| Open<br>Dental | Patient   | Procedure         | Procedure<br>Code  | Text        | An ADA CDT Code, ADA CDT Code plus an extra letter at the end for custom code tracking or NXXXX for non-ADA codes.  | ADA CDT procedure code as well as custom ATD procedure codes.   |          |
| Open<br>Dental | Patient   | Procedure         | Description        | Text        |   | Text description of the procedure code, either from the ADA or custom.  |          |
| Open<br>Dental | Patient   | Procedure         | Abbreviation       | Text        | ATDCode, typically 3 characters, maximum of 28 characters   | Internal custom abbreviation for a procedure (e.g. RE=Recall Exam/D0120)  |          |
| Open<br>Dental | Patient   | Procedure         | Category           | Categorical | Diagnostic, Preventive, Restorative, REF,<br>Endodontic, Periodontic, Dentures, Implants,<br>Crown & Bridge, Oral Surgery, Orthodontic,<br>Adjunctive, Conditions, Miscellaneous, Rarely<br>Used, Medical, Obsolete | Used to group procedure codes into categories. Similar to ADA Categories but customizable.  |          |
| Open<br>Dental | Patient   | Procedure         | TreatArea          | Categorical | 0= None, 1= Surf, 2= Tooth, 3= Mouth, 4= Quad, 5= Sextant, 6= Arch, 7= ToothRange   | Specifies the area of the oral cavity for the procedure as required for insurance billing.  |          |
| Open<br>Dental | Patient   | Procedure         | Surfaces           | Text        | One or more surfaces (M,I,O,D,B,L,F,V), quadrant (UL, LL, UR, LR), arch (U, L)  | The tooth surface or area of the oral cavity for the procedure.   |          |
| Open<br>Dental | Patient   | Procedure         | Tooth              | Text        | May be blank, otherwise 1-32, 51-82, A-T, or AS-TS.   | The tooth number for the procedure. 1-32 for permanent teeth, A-T for primary teeth.  Permanent supernumerary tooth numbers add 50 to the tooth number (tooth 1 = 51). Primary supernumerary tooth numbers add an S (tooth A = AS).   |          |
| Open<br>Dental | Patient   | Procedure         | Tooth Range        | Text        | May be blank, otherwise is series of toothnumbers (1-32 or A-T) separated by commas.  | Typically used for partial dentures and space maintainers.  |          |
| Open<br>Dental | Patient   | Procedure         | Diagnosis          | Text        | Dental diagnosis description.   | Primary dental diagnosis for the procedure planned or completed. These are Apple Tree custom diagnosis, not a standardized ICD-10 or SNOMED diagnosis.  |          |
| Open<br>Dental | Patient   | Procedure         | Prognosis          | Categorical | blank, Good, Fair, Poor, Questionable   | Provider specified prognosis of the recommended treatment.  |          |
| Open<br>Dental | Patient   | Procedure         | Priority           | Categorical | Visit number (1-20) for procedures on a treatment plan. Other values include Wait, Low, Next, Recmend, Declined.  | Provider assessed priority of the treatment proposed. Used to group procedures into visits (1-20), 1 being the highest priority.  |          |
| Open<br>Dental | Patient   | Procedure         | Procedure provider | Numerical   | Provider ID for the procedure code  | Treating provider id number.  |          |
| Open<br>Dental | Patient   | Procedure         | Place of service   | Categorical | 0=Office, 3=OutpatHospital,<br>4=SkilledNursFacility, 6=OtherLocation,<br>7=MobileUnit, 8=School,<br>15=TelehealthOutsideHome,<br>16=TelehealthInHome   | Place of service indicated on an insurance claim form. Initially set based on the default Facility place of service, but can modified by the user when treatment is provided in another setting (i.e. office, telehealth) while creating the claim. For self pay (no claim) it remains the default. |          |
| Open<br>Dental | Patient   | Procedure         | Prosthesis         | Categorical | Blank=No, I=Initial, R=Replacement  | Provider assessed status of the prosthsis if applicable.  |          |

## **Procedure (Continued)**

| Source         | Data type | Variable  | Variable    | Format      | Variable Value  | Variable Description  | Comments |
|----------------|-----------|-----------|-------------|-------------|---|---|----------|
|                |           | category  | name        |             |   |   |          |
| Open<br>Dental | Patient   | Procedure | Center ID   | Categorical | 1=Rochester, 2=Hawley, 3=Fergus Falls,<br>4=Madelia, 5=Coon Rapids, 6=Mounds View,<br>7=Little Falls, 8=Fairmont, 10=New Brighton | Apple Tree Center the procedure was assigned to (where completed or treatment planned). |          |
| Open<br>Dental | Patient   | Procedure | Facility ID | Numerical   | Unique facility id number   | Facility the patient was assigned to at the time of procedure (mobile site or clinic).  |          |

#### **Dentition**

| Source         | Data type | Variable category | Variable name   | Format      | Variable Value  | Variable Description  | Comments |
|----------------|-----------|-------------------|-----------------|-------------|---|---|----------|
| Open<br>Dental | Patient   | ToothInitial      | ToothInitialNum | Numerical   | 1-32  | Unique number associated to a specific tooth.   |          |
| Open<br>Dental | Patient   | ToothInitial      | ReasearchID     | Numerical   | Research ID number  | ID number used for research purposes only, not their medical record number. Unique to each research data set. |          |
| Open<br>Dental | Patient   | ToothInitial      | ToothNum        | Text        | 1-32, A-Z   |   |          |
| Open<br>Dental | Patient   | ToothInitial      | InitialType     | Categorical | 0=Missing, 1=Hidden, 2=Primary,<br>3=ShiftM (mesial mm), 4=ShiftO<br>(occlusal/incisal mm), 5=ShiftB (buccal<br>mm), 6=Rotate (clockwise), 7=TipM<br>(mesial degrees), 8=TipB (buccal<br>degrees), 9=Drawing, 10=Text | Status of the tooth's condition.  |          |
| Open<br>Dental | Patient   | ToothInitial      | Movement        | Numerical   |   | This measurement represents a shift in mm or a rotation/tip in degrees.                                       |          |

#### **Perio Charting**

| Source         | Data type               | Variable category | Variable name | Format      | Variable Value  | Variable Description   | Comments |
|----------------|-------------------------|-------------------|---------------|-------------|---|--|----------|
| Open<br>Dental | Periodontal<br>Charting | Periomeasure      | SequenceType  | Categorical | Mobility: 0; Furcation: 1; GingMargin: 2-AKA recession; 3-MucoGingivalJunction; Probing: 4; SkipTooth: 5; Bleeding: 6; CAL: 7.  | Specifies what is being measured.  |          |
| Open<br>Dental | Periodontal<br>Charting | Periomeasure      | IntTooth      | Numerical   | Valid values are 1-32. Every measurement must be associated with a tooth.   | Number assigned to a specific tooth for identification purposes.                       |          |
| Open<br>Dental | Periodontal<br>Charting | Periomeasure      | ToothValue    | Numerical   | Valid values for all surfaces are 0 through 19, or -1 to represent no measurement taken.  | This is used when the measurement does not apply to a surface(mobility and skiptooth). |          |
| Open<br>Dental | Periodontal<br>Charting | Periomeasure      | MBvalue       | Numerical   | -1 represents no measurement. Values of 100+ represent negative values (only used for Gingival Margins). e.g. To use a value of 105, subtract it from 100. (100 - 105 = -5) | Mesial Buccal surface value  |          |

## **Perio Charting (Continued)**

| Source | Data type   | Variable     | Variable name | Format    | Variable Value | Variable Description          | Comments |
|--------|-------------|--------------|---------------|-----------|----------------|-------------------------------|----------|
|        |             | category     |               |           |                |                               |          |
| Open   | Periodontal | Periomeasure | Bvalue        | Numerical |                | Buccal surface value          |          |
| Dental | Charting    |              |               |           |                |                               |          |
| Open   | Periodontal | Periomeasure | DBvalue       | Numerical |                | Distal Buccal surface value.  |          |
| Dental | Charting    |              |               |           |                |                               |          |
| Open   | Periodontal | Periomeasure | MLvalue       | Numerical |                | Mesial Lingual surface value. |          |
| Dental | Charting    |              |               |           |                |                               |          |
| Open   | Periodontal | Periomeasure | Lvalue        | Numerical |                | Lingual surface value.        |          |
| Dental | Charting    |              |               |           |                |                               |          |
| Open   | Periodontal | Periomeasure | DLvalue       | Numerical |                | Distal Lingual surface value. |          |
| Dental | Charting    |              |               |           |                |                               |          |
| Open   | Periodontal | Perioexam    | ExamDate      | Date      |                | Date of exam.                 |          |
| Dental | Charting    |              |               |           |                |                               |          |

#### **Oral Exam Form**

| Source         | Data Type                          | Variable<br>Abbreviation | Variable<br>Name                      | Format   | Variable Value                | Variable Description   | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|------------------------------------|--------------------------|---------------------------------------|----------|-------------------------------|--|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds |                          | Exam Date                             | Date     |                               | This is the date of the recall or initial exam associated with this form data. For LDS and de-identified data sets, only include year of service |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | IE                       | Initial Exam                          | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population   |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | RE                       | Recall Exam                           | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population   |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | EOWNL                    | Extra-oral<br>Exam: WNL               | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population   |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | FLES                     | Extra-oral<br>Exam: Facial<br>Lesions | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population   |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | LN                       | Extra-oral Exam: Enlarged Lymph Nodes | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population   |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | THY                      | Extra-oral Exam: Thyroid Concerns     | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population   |                            |                                  |                           |                                 |

| Source         | Data Type                          | Variable<br>Abbreviation | Variable<br>Name                         | Format   | Variable Value                | Variable Description                                       | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|------------------------------------|--------------------------|--|----------|-------------------------------|--|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam Form- Adult & Peds       | EOOther                  | Extra-oral<br>Exam: Other<br>(see notes) | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | TMJWNL                   | TMJ Exam<br>WNL                          | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | LO                       | TMJ Exam<br>Limited<br>Opening           | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | MP                       | TMJ Exam<br>Myofacial<br>Pain            | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | RPOP                     | TMJ Exam<br>Right<br>Popping             | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | RCRE                     | TMJ Exam<br>Right<br>Crepitus            | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | RCLI                     | TMJ Exam<br>Right<br>Clicking            | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | RDEV                     | TMJ Exam<br>Right<br>Deviation           | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | RTEN                     | TMJ Exam<br>Right<br>Tenderness          | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | RPAI                     | TMJ Exam<br>Right Pain                   | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | RASY                     | TMJ Exam<br>Right<br>Asymptomati         | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | LPOP                     | TMJ Exam<br>Left Popping                 | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | LCRE                     | TMJ Exam<br>Left Crepitus                | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | LCLI                     | TMJ Exam<br>Left Clicking                | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |

| Source         | Data Type                          | Variable<br>Abbreviation | Variable<br>Name                         | Format   | Variable Value                | Variable Description                                       | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|------------------------------------|--------------------------|--|----------|-------------------------------|--|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam Form- Adult & Peds       | LDEV                     | TMJ Exam<br>Left<br>Deviation            | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | LTEN                     | TMJ Exam<br>Left<br>Tenderness           | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | LPAI                     | TMJ Exam<br>Left Pain                    | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | LASY                     | TMJ Exam<br>Left<br>Asymptomati          | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | IOWNL                    | Intra-oral<br>Exam WNL                   | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | MLES                     | Intra-oral<br>Exam<br>Mucosal<br>Lesions | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | EXO                      | Intra-oral<br>Exam<br>Exostoses          | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           | 9/21/2018                       |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | EPU                      | Intra-oral<br>Exam Epulis                | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           | 9/21/2018                       |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | CAN                      | Intra-oral<br>Exam<br>Candidiasis        | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | IRN                      | Incisor<br>Relationship:<br>Normal       | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  | 11/8/2012                 |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | IRE2E                    | Incisor<br>Relationship:<br>Edge to Edge | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  | 9/5/2019                  |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | OVJ                      | Incisor<br>Relationship:<br>Overjet      | Text     | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  | 11/8/2012                 |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | OVB                      | Incisor<br>Relationship:<br>Overbite     | Text     | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  | 11/8/2012                 |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | OPB                      | Incisor<br>Relationship:<br>Openbite     | Text     | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  | 11/8/2012                 |                                 |

| Source         | Data Type                          | Variable<br>Abbreviation | Variable<br>Name  | Format   | Variable Value                | Variable Description                                       | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|------------------------------------|--------------------------|---|----------|-------------------------------|--|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam Form- Adult & Peds       | PE1                      | AAP<br>Casetype:<br>(PE1) Ging                                    | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            | 7/18/2019                        |                           | 7/18/2019                       |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | PE2                      | AAP<br>Casetype:<br>(PE2) Early                                   | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            | 7/18/2019                        |                           | 7/18/2019                       |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | PE3                      | AAP<br>Casetype:<br>(PE3) Mod.                                    | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            | 7/18/2019                        |                           | 7/18/2019                       |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | PE4                      | AAP<br>Casetype:<br>(PE4) Adv.                                    | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            | 7/18/2019                        |                           | 7/18/2019                       |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | UPC                      | Periodontal Exam: Patient Unable to Tolerate Periodontal Charting | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           | 8/27/2019                       |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | PEHealthy                | Periodontal Exam: Healthy Gingival Tissues                        | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 9/18/2019                  |                                  | 9/18/2019                 |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | PEGing                   | Periodontal<br>Exam:<br>Gingivitis                                | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 9/18/2019                  |                                  | 9/18/2019                 |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | PES1                     | Periodontal<br>Exam: AAP<br>Stage I                               | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to adult population                    | 6/24/2019                  |                                  | N/A                       |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | PES2                     | Periodontal<br>Exam: AAP<br>Stage II                              | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to adult population                    | 6/24/2019                  |                                  | N/A                       |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | PES3                     | Periodontal<br>Exam: AAP<br>Stage III                             | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to adult population                    | 6/24/2019                  |                                  | N/A                       |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | PES4                     | Periodontal<br>Exam: AAP<br>Stage IV                              | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to adult population                    | 6/24/2019                  |                                  | N/A                       |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | PEGA                     | Periodontal<br>Exam: Grade<br>A                                   | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to adult population                    | 6/24/2019                  |                                  | N/A                       |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | PEGB                     | Periodontal<br>Exam: Grade<br>B                                   | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to adult population                    | 6/24/2019                  |                                  | N/A                       |                                 |

| Source         | Data Type                          | Variable<br>Abbreviation | Variable<br>Name                                     | Format   | Variable Value                | Variable Description                                       | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|------------------------------------|--------------------------|--|----------|-------------------------------|--|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam Form- Adult & Peds       | PEGC                     | Periodontal<br>Exam: Grade<br>C                      | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to adult population                    | 6/24/2019                  |                                  | N/A                       |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | DOCI                     | Daily Oral Care Findings: Independent                | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | DOCS                     | Daily Oral<br>Care<br>Findings:<br>Supervised        | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | DOCD                     | Daily Oral<br>Care<br>Findings:<br>Dependent         | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | DOCU                     | Daily Oral<br>Care<br>Findings:<br>Unknown           | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | EDOCE                    | Effectiveness<br>of Daily Oral<br>Care:<br>Excellent | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | EDOCV                    | Effectiveness<br>of Daily Oral<br>Care: Very<br>Good | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | EDOCG                    | Effectiveness<br>of Daily Oral<br>Care: Good         | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | EDOCF                    | Effectiveness<br>of Daily Oral<br>Care: Fair         | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | EDOCP                    | Effectiveness<br>of Daily Oral<br>Care: Poor         | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | DEBNO                    | Oral<br>Hygiene:<br>Food Debris:<br>None             | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | DEBS                     | Oral<br>Hygiene:<br>Food Debris:<br>Slight           | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |

| Source         | Data Type                          | Variable<br>Abbreviation | Variable<br>Name                          | Format   | Variable Value                | Variable Description                                       | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|------------------------------------|--------------------------|---|----------|-------------------------------|--|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam Form- Adult & Peds       | DEBM                     | Oral Hygiene: Food Debris: Mod.           | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | DEBH                     | Oral<br>Hygiene:<br>Food Debris:<br>Heavy | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | PLQNO                    | Oral<br>Hygiene:<br>Plaque: None          | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | PLQS                     | Oral<br>Hygiene:<br>Plaque: Slight        | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | PLQM                     | Oral<br>Hygiene:<br>Plaque: Mod.          | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | PLQH                     | Oral<br>Hygiene:<br>Plaque:<br>Heavy      | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | CALNO                    | Oral<br>Hygiene:<br>Calculus:<br>None     | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | CALS                     | Oral<br>Hygiene:<br>Calculus:<br>Slight   | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | CALM                     | Oral<br>Hygiene:<br>Calculus:<br>Mod.     | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | CALH                     | Oral<br>Hygiene:<br>Calculus:<br>Heavy    | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | STANO                    | Oral<br>Hygiene:<br>Staining:<br>None     | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  | 9/5/2018                  |                                 |

| Source         | Data Type                          | Variable<br>Abbreviation | Variable<br>Name                        | Format   | Variable Value                | Variable Description                                       | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|------------------------------------|--------------------------|---|----------|-------------------------------|--|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | STAS                     | Oral<br>Hygiene:<br>Staining:<br>Slight | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | STAM                     | Oral<br>Hygiene:<br>Staining:<br>Mod.   | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | STAH                     | Oral<br>Hygiene:<br>Staining:<br>Heavy  | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | BLENO                    | Oral<br>Hygiene:<br>Bleeding:<br>None   | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | BLES                     | Oral<br>Hygiene:<br>Bleeding:<br>Slight | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | BLEM                     | Oral<br>Hygiene:<br>Bleeding:<br>Mod.   | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | BLEH                     | Oral<br>Hygiene:<br>Bleeding:<br>Heavy  | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | B1X                      | Brushes:<br>1x/day                      | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | B2X                      | Brushes:<br>2x/day                      | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | BOCC                     | Brushes:<br>Occasionally                | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | BNEV                     | Brushes:<br>Never                       | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | BOther                   | Brushes:<br>Other                       | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            | 9/21/2018                        |                           | 9/21/2018                       |

| Source         | Data Type                          | Variable<br>Abbreviation | Variable<br>Name  | Format   | Variable Value                | Variable Description                                       | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|------------------------------------|--------------------------|---|----------|-------------------------------|--|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam Form- Adult & Peds       | BOther2                  | Brushes:<br>Other (text)                                | Text     | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            | 9/21/2018                        |                           | 9/21/2018                       |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | F1X                      | Flosses:<br>Daily                                       | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | F2OR3WEE<br>K            | Flosses: 2-<br>3x/week                                  | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | FOCC                     | Flosses:<br>Occasionally                                | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | FNEV                     | Flosses:<br>Never                                       | Checkbox |                               | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | PUNA                     | Patient is unable to: N/A                               | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | UCN                      | Patient is unable to: Communicate Needs                 | Checkbox |                               | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | UDC                      | Patient is<br>unable to:<br>Transfer to<br>Dental Chair | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | UFD                      | Patient is<br>unable to:<br>Follow<br>Directions        | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | UHH                      | Patient is<br>unable to:<br>Hold Head<br>Still          | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | URH                      | Patient is unable to: Recline Head                      | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | UOC                      | Patient is unable to: Open & Close Mouth                | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |

| Source         | Data Type                          | Variable<br>Abbreviation | Variable<br>Name  | Format   | Variable Value                | Variable Description                                       | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|------------------------------------|--------------------------|---|----------|-------------------------------|--|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | UXR                      | Patient is<br>unable to:<br>Tolerate<br>Dental<br>Radiographs | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | USN                      | Patient is<br>unable to:<br>Swallow<br>Normally               | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | UCE                      | Patient is unable to: Cooperate for Full Exam                 | Checkbox |                               | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | ETTNA                    | Extra Treatment Time: N/A                                     | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | TW                       | Extra Treatment Time: Treated in Wheelchair                   | Checkbox |                               | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | FSS                      | Extra Treatment Time: Frequent Stops & Starts                 | Checkbox |                               | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | SED                      | Extra Treatment Time: Oral Sedation                           | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | ВМ                       | Extra Treatment Time: Communicati on/Behavior Management      | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | SIX                      | Extra Treatment Time: Six Handed Dentistry                    | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |

| Source         | Data Type                          | Variable<br>Abbreviation | Variable<br>Name  | Format   | Variable Value                | Variable Description                                       | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|------------------------------------|--------------------------|---|----------|-------------------------------|--|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam Form- Adult & Peds       | SPH                      | Extra Treatment Time: SPH Activity  | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | GR                       | Extra Treatment Time: Gentle Hand & Head Holding/Supp ort                   | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | GRBY                     | Extra Treatment Time: Gentle Hand & Head Holding/Supp ort By                | Text     | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | OPSI                     | Extra Treatment Time: Other Protective Stabilization Intervention           | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | OPSIDESC                 | Extra Treatment Time: Other Protective Stabilization Intervention Describe: | Text     | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | TOBN                     | Tobacco Use:<br>No  | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            | 9/21/2018                        |                           | 9/21/2018                       |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | TOBY                     | Tobacco Use:<br>Yes   | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            | 9/21/2018                        |                           | 9/21/2018                       |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | QREFN                    | Call it Quits<br>Referral: No   | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            | 9/21/2018                        |                           | 9/21/2018                       |
| Open<br>Dental | Oral Exam Form- Adult & Peds       | QREFY                    | Call it Quits<br>Referral: Yes  | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            | 9/21/2018                        |                           | 9/21/2018                       |
| Open<br>Dental | Oral Exam<br>Form- Adult<br>& Peds | TOBNotes                 | Tobacco Use:<br>Notes   | Text     |                               | Variable applicable to both pediatric and adult population |                            | 9/21/2018                        |                           | 9/21/2018                       |

| Source         | Data Type                           | Variable<br>Abbreviation | Variable<br>Name                                       | Format   | Variable Value                           | Variable Description   | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|-------------------------------------|--------------------------|--|----------|--|--|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam<br>Form- Adults           | PSRS1                    | Perio Screening & Recording: Sextant 1                 | Text     | 0= Checked/ 1=<br>Not checked            | Only applicable to adult population  | 3/14/2014                  | 9/21/2018                        | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults           | PSRS2                    | Perio<br>Screening &<br>Recording:<br>Sextant 2        | Text     | 0= Checked/ 1=<br>Not checked            | Only applicable to adult population  | 3/14/2014                  | 9/21/2018                        | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults           | PSRS3                    | Perio<br>Screening &<br>Recording:<br>Sextant 3        | Text     | 0= Checked/ 1=<br>Not checked            | Only applicable to adult population  | 3/14/2014                  | 9/21/2018                        | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults           | PSRS4                    | Perio<br>Screening &<br>Recording:<br>Sextant 4        | Text     | 0= Checked/ 1=<br>Not checked            | Only applicable to adult population  | 3/14/2014                  | 9/21/2018                        | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults           | PSRS5                    | Perio<br>Screening &<br>Recording:<br>Sextant 5        | Text     | 0= Checked/ 1=<br>Not checked            | Only applicable to adult population  | 3/14/2014                  | 9/21/2018                        | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults           | PSRS6                    | Perio<br>Screening &<br>Recording:<br>Sextant 6        | Text     | 0= Checked/ 1=<br>Not checked            | Only applicable to adult population  | 3/14/2014                  | 9/21/2018                        | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults           | PENA                     | Periodontal<br>Exam: N/A -<br>Edentulous/R<br>oot Tips | Checkbox | 0= Checked/ 1=<br>Not checked            | Variable applicable to both pediatric and adult population                   | 6/21/2018                  |                                  | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adults           | XER                      | Intra-oral<br>Exam<br>Xerostomia                       | Checkbox | 0= Checked/ 1=<br>Not checked            | Only applicable to adult population  |                            |                                  | N/A                       | N/A                             |
| Open           | Oral Exam                           | IOOther                  | Intra-oral   | Checkbox | 0= Checked/ 1=                           | Variable applicable to both pediatric and                                    |                            |                                  |                           |                                 |
| Open Dental    | Form- Adults Oral Exam Form- Adults | OCSNEG                   | Exam Other Oral Cancer Screening Negative              | Checkbox | Not checked  0= Checked/ 1=  Not checked | adult population  Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adults           | OCSREV                   | Oral Cancer<br>Screening<br>Reveals (see<br>notes)     | Checkbox | 0= Checked/ 1=<br>Not checked            | Variable applicable to both pediatric and adult population                   |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adults           | C1                       | Occlusion:<br>Class I                                  | Checkbox | 0= Checked/ 1=<br>Not checked            | Only applicable to adult population  |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults           | C2                       | Occlusion:<br>Class II                                 | Checkbox | 0= Checked/ 1=<br>Not checked            | Only applicable to adult population  |                            |                                  | N/A                       | N/A                             |

| Source         | Data Type                 | Variable<br>Abbreviation | Variable<br>Name   | Format   | Variable Value                | Variable Description                                       | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|---------------------------|--------------------------|--|----------|-------------------------------|--|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam<br>Form- Adults | C3                       | Occlusion:<br>Class III  | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population                        |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | OCLWNL                   | Occlusion:<br>WNL  | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population                        |                            | 9/21/2018                        | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | OCLOB                    | Occlusion:<br>Openbite   | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population                        |                            | 9/21/2018                        | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | OCLEI                    | Occlusion:<br>Excursive<br>Interfaces                                | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population                        |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | OCLMT                    | Occlusion:<br>Malpositione<br>d Teeth                                | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population                        |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | OCLCRWD                  | Occlusion:<br>Crowding   | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population                        | 6/21/2018                  |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | CBNONE                   | Occlusion:<br>Crossbite<br>None                                      | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population                        |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | CBDESC                   | Occlusion:<br>Crossbite<br>Description                               | Text     | 0= Checked/ 1=<br>Not checked | Only applicable to adult population                        |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | ORTHOY                   | Ortho<br>Referral: Yes   | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adults | ORTHON                   | Ortho<br>Referral: No  | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adults | ORTHOTXIP                | Ortho Referral: Tx in Progress                                       | Checkbox | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population | 6/21/2018                  |                                  | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adults | OENotes                  | Oral Exam<br>Notes   | Text     | 0= Checked/ 1=<br>Not checked | Variable applicable to both pediatric and adult population |                            |                                  |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Adults | PELocal                  | Periodontal<br>Exam:<br>Localized                                    | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population                        | 9/18/2019                  |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | PEGeneral                | Periodontal<br>Exam:<br>Generalized                                  | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population                        | 9/18/2019                  |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | PEMolarIncis<br>or       | Periodontal<br>Exam:<br>Molar/Incisor<br>Pattern                     | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population                        | 9/18/2019                  |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | ОНІ                      | Oral Hygiene<br>Instruction<br>provided to pt<br>and/or<br>caregiver | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population                        | 3/14/2014                  |                                  | N/A                       | N/A                             |

| Source         | Data Type                 | Variable<br>Abbreviation | Variable<br>Name                           | Format   | Variable Value                | Variable Description                | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|---------------------------|--------------------------|--|----------|-------------------------------|-------------------------------------|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam<br>Form- Adults | NODENT                   | No<br>Prostheses                           | Checkbox |                               | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | NOUP                     | Upper Unit:<br>None                        | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UF                       | Upper Unit:<br>Full Denture                | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UPA                      | Upper Unit:<br>Acrylic<br>Partial          | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UPM                      | Upper Unit:<br>Metal Partial               | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | NOLOW                    | Lower Unit:<br>None                        | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LF                       | Lower Unit:<br>Full Denture                | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LPA                      | Lower Unit:<br>Acrylic<br>Partial          | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LPM                      | Lower Unit:<br>Metal Partial               | Checkbox |                               | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | DDNO                     | Denture<br>Deposits:<br>None               | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population | 6/21/2018                  |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | DDS                      | Denture Deposits: Slight                   | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | DDM                      | Denture Deposits: Moderate                 | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | DDH                      | Denture<br>Deposits:<br>Heavy              | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | PFNONE                   | Patient<br>Factors: None                   | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | DAN                      | Patient Factors: Dent. Assist. Needed      | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | DRD                      | Patient Factors: Doesn't Remove Denture(s) | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |

| Source         | Data Type                 | Variable<br>Abbreviation | Variable<br>Name   | Format   | Variable Value                | Variable Description                | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|---------------------------|--------------------------|--|----------|-------------------------------|-------------------------------------|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam<br>Form- Adults | OUA                      | Patient Factors: Over-use of Adhesive                          | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | DBP                      | Patient Factors: Dent. Behavior Prob.                          | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | PAWNL                    | Prosthetic<br>Articulation:<br>WNL                             | Checkbox |                               | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | OCC                      | Prosthetic<br>Articulation:<br>Poor<br>Occlusion               | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | OVD                      | Prosthetic<br>Articulation:<br>Open Vertical<br>Dimension      | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | CVD                      | Prosthetic<br>Articulation:<br>Closed<br>Vertical<br>Dimension | Checkbox |                               | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UUNASSES                 | Upper Unit:<br>Unable to<br>assess                             | Checkbox |                               | Only applicable to adult population | 6/21/2018                  |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | IDUY                     | ID Upper<br>Denture: Yes                                       | Checkbox |                               | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | IDUN                     | ID Upper<br>Denture: No  | Checkbox |                               | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UYRN                     | Upper Unit:<br>Year New  | Text     | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UYRR                     | Upper Unit:<br>Year Relined                                    | Text     | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LDU                      | Upper Unit:<br>Lost Denture                                    | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | IUU                      | Upper Unit:<br>Infrequent<br>Use                               | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UWU                      | Upper Unit:<br>Unsatisfied<br>With Unit                        | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |

| Source         | Data Type                 | Variable<br>Abbreviation | Variable<br>Name                        | Format   | Variable Value                | Variable Description                | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|---------------------------|--------------------------|---|----------|-------------------------------|-------------------------------------|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam<br>Form- Adults | URWNL                    | Upper Ridge:<br>WNL                     | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UBL                      | Upper Ridge:<br>Bone Loss               | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UDS                      | Upper Ridge:<br>Denture<br>Sores        | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UT                       | Upper Ridge:<br>Torus                   | Checkbox |                               | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LTU                      | Upper Ridge:<br>Lg.<br>Tuberosity       | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | PHY                      | Upper Ridge:<br>P. Hyperpl.             | Checkbox |                               | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UFWNL                    | Upper Unit<br>Function:<br>WNL          | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | URET                     | Upper Unit Function: Poor Retention     | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | USTA                     | Upper Unit Function: Poor Stability     | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UEST                     | Upper Unit Function: Poor Esthetics     | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UDWNL                    | Upper Unit<br>Design: WNL               | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UBU                      | Upper Unit Design: Bord. Underex.       | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UBO                      | Upper Unit Design: Bord. Overextend.    | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | PDI                      | Upper Unit<br>Design: Post<br>Dam Inad. | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UOPI                     | Upper Unit Design: Occ. Plane Inad.     | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |

| Source         | Data Type                 | Variable<br>Abbreviation | Variable<br>Name                                  | Format   | Variable Value                | Variable Description                | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|---------------------------|--------------------------|---|----------|-------------------------------|-------------------------------------|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam<br>Form- Adults | PL                       | Upper Unit<br>Design:<br>Palatal Lift             | Checkbox |                               | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UCWNL                    | Upper Unit<br>Condition:<br>WNL                   | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UAT                      | Upper Unit<br>Condition:<br>Abraded<br>Teeth      | Checkbox |                               | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UDB                      | Upper Unit<br>Condition:<br>Denture<br>Break      | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UFDT                     | Upper Unit<br>Condition:<br>Fract. Dent.<br>Tooth | Checkbox |                               | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UMDT                     | Upper Unit<br>Condition:<br>Miss. Dent.<br>Tooth  | Checkbox |                               | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UBCL                     | Upper Unit<br>Condition:<br>Broken Clasp          | Checkbox |                               | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UWB                      | Upper Unit<br>Condition:<br>Weak Base             | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UBF                      | Upper Unit<br>Condition:<br>Bent Frame            | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LUNASSES                 | Lower Unit:<br>Unable to<br>assess                | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population | 6/21/2018                  |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | IDLY                     | ID Lower<br>Denture: Yes                          | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | IDLN                     | ID Lower<br>Denture: No                           | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LYRR                     | Lower Unit:<br>Year New                           | Text     |                               | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LYRN                     | Lower Unit:<br>Year Relined                       | Text     |                               | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LDL                      | Lower Unit:<br>Lost Denture                       | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |

| Source         | Data Type                 | Variable<br>Abbreviation | Variable<br>Name                             | Format   | Variable Value                | Variable Description                | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|---------------------------|--------------------------|--|----------|-------------------------------|-------------------------------------|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam<br>Form- Adults | IUL                      | Lower Unit:<br>Infrequent<br>Use             | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | UWL                      | Lower Unit:<br>Unsatisfied<br>With Unit      | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LRWNL                    | Lower Ridge:<br>WNL                          | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LBL                      | Lower Ridge:<br>Bone Loss                    | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LRDS                     | Lower Ridge:<br>Denture<br>Sores             | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LT                       | Lower Ridge:<br>Torus                        | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | MNP                      | Lower Ridge:<br>M. Nerve<br>Prob.            | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | TON                      | Lower Ridge:<br>Tongue Prob.                 | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LFWNL                    | Lower Unit<br>Function:<br>WNL               | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LRET                     | Lower Unit<br>Function:<br>Poor<br>Retention | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LSTA                     | Lower Unit<br>Function:<br>Poor Stability    | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LEST                     | Lower Unit<br>Function:<br>Poor<br>Esthetics | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LDWNL                    | Lower Unit<br>Design: WNL                    | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LBU                      | Lower Unit<br>Design: Bord.<br>Underex.      | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LBO                      | Lower Unit<br>Design: Bord.<br>Overextend.   | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population |                            |                                  | N/A                       | N/A                             |

| Source         | Data Type                 | Variable<br>Abbreviation | Variable<br>Name                                      | Format   | Variable Value                | Variable Description                    | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|---------------------------|--------------------------|---|----------|-------------------------------|---|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam<br>Form- Adults | LOPI                     | Lower Unit<br>Design: Occ.<br>Plane Inad.             | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population     |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LCWNL                    | Lower Unit<br>Condition:<br>WNL                       | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population     |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LAT                      | Lower Unit<br>Condition:<br>Abraded<br>Teeth          | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population     |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LDB                      | Lower Unit<br>Condition:<br>Denture<br>Break          | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population     |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LFDT                     | Lower Unit<br>Condition:<br>Fract. Dent.<br>Tooth     | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population     |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LMDT                     | Lower Unit<br>Condition:<br>Miss. Dent.<br>Tooth      | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population     |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LBCL                     | Lower Unit<br>Condition:<br>Broken Clasp              | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population     |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LWB                      | Lower Unit<br>Condition:<br>Weak Base                 | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population     |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Adults | LBF                      | Lower Unit<br>Condition:<br>Bent Frame                | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to adult population     |                            |                                  | N/A                       | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Peds   | FAC                      | Intra-oral Exam Frenum Attachment Concern (see notes) | Checkbox |                               | Only applicable to pediatric population | N/A                        | N/A                              | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds   | EDNEG                    | Enamel Defects: Negative                              | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 7/19/2019                 |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds   | EDATTR                   | Enamel Defects: Attrition                             | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 7/19/2019                 |                                 |

| Source         | Data Type               | Variable<br>Abbreviation | Variable<br>Name                                   | Format   | Variable Value                | Variable Description                    | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|-------------------------|--------------------------|--|----------|-------------------------------|---|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam<br>Form- Peds | EDEROS                   | Enamel Defects: Erosion                            | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 7/19/2019                 |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | EDHYPO                   | Enamel Defects: Hypoplasia                         | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 7/19/2019                 |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | EDMODFL                  | Enamel Defects: Moderate Fluorosis                 | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 7/19/2019                 |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | EDSEVFL                  | Enamel Defects: Severe Fluorosis                   | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 7/19/2019                 |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | EDOTHER                  | Enamel Defects: Other (see notes)                  | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 7/19/2019                 |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | PEOther                  | Periodontal<br>Exam: Other                         | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 9/18/2019                 |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | PEOtherNote              | Periodontal<br>Exam: Other<br>Note                 | Text     |                               | Only applicable to pediatric population | N/A                        | N/A                              | 9/18/2019                 |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | CRLOW                    | Caries Risk:<br>Low                                | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 7/19/2019                 | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Peds | CRMOD                    | Caries Risk:<br>Moderate                           | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 7/19/2019                 | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Peds | CRHIGH                   | Caries Risk:<br>High                               | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 7/19/2019                 | N/A                             |
| Open<br>Dental | Oral Exam<br>Form- Peds | OEUNABLE                 | Occlusion,<br>Eruption:<br>Unable to<br>Assess     | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | CLR                      | Molar<br>Relationship<br>Permanent:<br>Right Class | Text     | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | CLL                      | Molar<br>Relationship<br>Permanent:<br>Left Class  | Text     | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |

| Source         | Data Type               | Variable<br>Abbreviation | Variable<br>Name   | Format   | Variable Value                | Variable Description                    | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|-------------------------|--------------------------|--|----------|-------------------------------|---|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam<br>Form- Peds | RUNE                     | Molar<br>Relationship<br>Permanent:<br>Right<br>Unerupted  | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | LUNE                     | Molar<br>Relationship<br>Permanent:<br>Left<br>Unerupted   | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | RETE                     | Molar<br>Relationship<br>Permanent:<br>Right End to<br>End | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | LETE                     | Molar<br>Relationship<br>Permanent:<br>Left End to<br>End  | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | RSTR                     | Molar<br>Relationship<br>Primary:<br>Right Straight        | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           | 9/21/2018                       |
| Open<br>Dental | Oral Exam<br>Form- Peds | LSTRL                    | Molar<br>Relationship<br>Primary: Left<br>Straight         | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           | 9/21/2018                       |
| Open<br>Dental | Oral Exam<br>Form- Peds | RE2E                     | Molar<br>Relationship<br>Primary:<br>Right End to<br>End   | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | LE2E                     | Molar<br>Relationship<br>Primary: Left<br>End to End       | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | RMS                      | Molar<br>Relationship<br>Primary:<br>Right Mesial<br>Step  | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |

| Source         | Data Type               | Variable<br>Abbreviation | Variable<br>Name  | Format   | Variable Value                | Variable Description                    | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|-------------------------|--------------------------|---|----------|-------------------------------|---|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam<br>Form- Peds | LMS                      | Molar<br>Relationship<br>Primary: Left<br>Mesial Step     | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | RDS                      | Molar<br>Relationship<br>Primary:<br>Right Distal<br>Step | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | LDS                      | Molar<br>Relationship<br>Primary: Left<br>Distal Step     | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | CRR                      | Canine<br>Relationship<br>Class Right                     | Text     | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | CRL                      | Canine<br>Relationship<br>Class Left                      | Text     | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | MLN                      | Midline:<br>Normal  | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | MLD                      | Midline:<br>Deviates                                      | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | MAXR                     | Midline:<br>Maxilla Right                                 | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           | 9/21/2018                       |
| Open<br>Dental | Oral Exam<br>Form- Peds | MAXL                     | Midline:<br>Maxilla Left                                  | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           | 9/21/2018                       |
| Open<br>Dental | Oral Exam<br>Form- Peds | MAXMM                    | Midline:<br>Maxilla (mm)                                  | Text     | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           | 9/21/2018                       |
| Open<br>Dental | Oral Exam<br>Form- Peds | MANR                     | Midline:<br>Mandible<br>Right                             | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           | 9/21/2018                       |
| Open<br>Dental | Oral Exam<br>Form- Peds | MANL                     | Midline:<br>Mandible<br>Left                              | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           | 9/21/2018                       |
| Open<br>Dental | Oral Exam<br>Form- Peds | MANMM                    | Midline:<br>Mandible<br>(mm)                              | Text     | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           | 9/21/2018                       |
| Open<br>Dental | Oral Exam<br>Form- Peds | MCBR                     | Crossbite<br>Molar/Pre-<br>Molar: Right                   | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | MCBL                     | Crossbite<br>Molar/Pre-<br>Molar: Left                    | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 9/5/2018                  |                                 |

| Source         | Data Type               | Variable<br>Abbreviation | Variable<br>Name                              | Format   | Variable Value                | Variable Description                    | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|-------------------------|--------------------------|---|----------|-------------------------------|---|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam<br>Form- Peds | ACBY                     | Crossbite<br>Anterior: Yes                    | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 7/19/2019                 |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | ACBN                     | Crossbite<br>Anterior: No                     | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 7/19/2019                 |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | MANSY                    | Crossbite<br>Mand./Funct.<br>Shift: Yes       | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | MANSN                    | Crossbite Mand./Funct. Shift: No              | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | RSHIFT                   | Mandibular<br>Shift Right                     | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           | 9/21/2018                       |
| Open<br>Dental | Oral Exam<br>Form- Peds | LSHIFT                   | Mandibular<br>Shift Left                      | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           | 9/21/2018                       |
| Open<br>Dental | Oral Exam<br>Form- Peds | ASHIFT                   | Mandibular<br>Shift Ant.                      | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           | 9/21/2018                       |
| Open<br>Dental | Oral Exam<br>Form- Peds | SHIFTMM                  | Mandibular<br>Shift (mm)                      | Text     | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           | 9/21/2018                       |
| Open<br>Dental | Oral Exam<br>Form- Peds | ICB                      | Incisor<br>Relationship:<br>Crossbite<br>(mm) | Text     | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 9/21/2018                 | 7/19/2019                       |
| Open<br>Dental | Oral Exam<br>Form- Peds | MAXAD                    | Arch Length:<br>Maxilla<br>Adequate           | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | MAXIN                    | Arch Length:<br>Maxilla<br>Inadequate         | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | MANAD                    | Arch Length:<br>Mandible<br>Adequate          | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | MANIN                    | Arch Length:<br>Mandible<br>Inadequate        | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | ERNORM                   | Eruption Sequence and Timing: Normal          | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | ERDESC                   | Eruption Sequence and Timing: Describe        | Text     | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | CBNONE                   | Crossbite:<br>None                            | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           | 4/14/2021                       |

| Source         | Data Type               | Variable<br>Abbreviation | Variable<br>Name                         | Format   | Variable Value                | Variable Description                    | Date<br>Added<br>for Adult | Date<br>Removed<br>from<br>Adult | Date<br>Added<br>for Pedo | Date<br>Removed<br>from<br>Pedo |
|----------------|-------------------------|--------------------------|--|----------|-------------------------------|---|----------------------------|----------------------------------|---------------------------|---------------------------------|
| Open<br>Dental | Oral Exam<br>Form- Peds | CBDESC                   | Crossbite: Describe                      | Text     | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           | 4/14/2021                       |
| Open<br>Dental | Oral Exam<br>Form- Peds | OHNORM                   | Oral Habits:<br>None                     | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | OHTHUMB                  | Oral Habits:<br>Thumb/Finge<br>r Sucking | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 7/19/2019                 |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | OHPACIF                  | Oral Habits:<br>Pacifier                 | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 7/19/2019                 |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | OHTONGUE                 | Oral Habits:<br>Tongue<br>Thrust         | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 7/19/2019                 |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | OHGRIND                  | Oral Habits:<br>Grinding                 | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 7/19/2019                 |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | OHNAIL                   | Oral Habits:<br>Nail biting              | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 7/19/2019                 |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | OHOTHER                  | Oral Habits:<br>Other                    | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 7/19/2019                 |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | OHDESC                   | Oral Habits: Other Description           | Text     | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | SUPNA                    | Supernumerar<br>y Teeth: N/A             | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | SUPNotes                 | Supernumerar<br>y Teeth:<br>Notes        | Text     | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | CMTNA                    | Congenitally<br>Missing<br>Teeth: N/A    | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | CMTNotes                 | Congenitally Missing Teeth: Notes        | Text     | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              | 9/5/2018                  |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | EENA                     | Ectopic<br>Eruption:<br>N/A              | Checkbox | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | EENotes                  | Ectopic<br>Eruption:<br>Notes            | Text     | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | OANOM                    | Other<br>Anomalies                       | Text     | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |
| Open<br>Dental | Oral Exam<br>Form- Peds | FPNotes                  | Additional<br>Findings                   | Text     | 0= Checked/ 1=<br>Not checked | Only applicable to pediatric population | N/A                        | N/A                              |                           |                                 |