

9) Do you recall going to the dental office on the date? *(Note to the interviewer: please specify the date from question 2)*

Yes
 No
 I don't know

10) Did you receive a brochure during that visit to your dental office?

Yes
 No
 I don't know

11) During that dental visit, did you receive any of the following treatments? *(Note to the interviewer: please check all that apply):*

An examination of your teeth and mouth
 X-rays
 Information on how to prevent tooth decay
 Any other treatment to prevent decay
 Had your teeth cleaned
 A dental filling because of active dental decay
 Any other treatment (specify.....)

Note to the interviewer: If the participant received a filling because of active dental decay in the same visit, thank and end the interview.

The next statements refer to the visit in which you received the brochure. For each statement, please indicate how much you agree or disagree. Please respond by saying one of five answers: "Strongly disagree; Disagree; Neither agree nor disagree; Agree; or Strongly agree."

	<i>Strongly disagree</i>	<i>Disagree</i>	<i>Neither disagree, nor agree</i>	<i>Agree</i>	<i>Strongly agree</i>
12. After talking with the dentist, I know condition of my teeth is.					
13. After talking with the dentist, I have a good idea of what changes to expect in my dental health					
14. I felt understood by my dentist.					
15. The dentist was thorough.					
16. I was satisfied with the skill of my dentist.					
17. I felt this dentist accepted me as a person.					
18. The dentist told me all I wanted to know about my dental problems.					
19. I am satisfied with how gentle my dentist was when working in my mouth.					
20. The dentist should make the important dental treatment decisions, not me.					
21. The dentist knew what he was doing during my visit.					
22. In general, the fees that dentists charge are too high.					
23. I try to take my dentist's advice.					
24. I prefer NT rather than fillings to treat tooth decay.					
25. I decide how often I need a check-up, not the dentist.					
26. I am concerned about feeling pain when I go for dental care.					
27. Dentists avoid unnecessary patient expenses.					

	<i>Strongly disagree</i>	<i>Disagree</i>	<i>Neither disagree, nor agree</i>	<i>Agree</i>	<i>Strongly agree</i>
28. I feel free to make decisions about my dental problems.					
29. I am satisfied with NT for my decay.					
30. I avoid going to the dentist because I dislike pain.					
31. Dentists should do more to reduce pain.					
32. If pain were not an issue, I would choose a filling rather than NT for my tooth decay.					
33. If cost were not an issue, I would choose a filling rather than NT for my tooth decay.					
34. I am satisfied with the amount of trust that I can place in my dentist.					
35. I prefer NT for tooth decay despite its home care requirements.					
36. I felt that my dentist understood my concerns.					
37. I understood the treatment options offered.					
38. I believe that NT is as good as fillings for treating early tooth decay.					
39. I will choose the same treatment for early decay on another tooth.					
40. I prefer NT even though it is not a quick fix for my tooth decay.					
41. I will avoid or postpone getting a filling with NT.					

42) Please tell us what you believe about NT.

43) Please tell us how regularly you go to a dentist. Would you say:

- I never go to a dentist
- I go to a dentist when I have a problem or when I know that I need to get something fixed
- I go to a dentist occasionally, whether or not I have a problem
- I go to a dentist regularly

The following questions are related to your personal attributes.

44) What is the highest level of schooling you have completed?

- a) No high school diploma (or GED)
- b) High school diploma (including GED)
- c) More than high school:
 - Attended college
 - College degree
 - Graduate degree

45) Are you of Hispanic or Latino ethnicity :

- Hispanic or Latino
- Not Hispanic or Latino
- Unknown
- Unable to specify

46) What race do you consider yourself:

- American Indian/Alaska Native
- Asian
- Black/African American
- Native Hawaiian/Pacific Islander
- Caucasian
- Other
- Prefer not to specify

47) How old were you at your last birthday? _____

Now we are going to ask a few questions about the content of the brochure that you received during your dental visit. Please select the answer which best describes your opinion.

48) Please tell me what you think about the brochure you received during your visit.

49) How much of the brochure did you read?

- All More than Half Half Less than half None

50) Do you still have the brochure?

- Yes No

Note to the interviewer: If the participant still has the brochure, go to question 53.

51) Did you give the brochure to somebody else?

- Yes No

52) Did you throw the brochure away?

- Yes No

Next, I will read a list of topics. Please indicate your opinion about how much information was provided in each topic and how useful you think this information is.

	a) <i>Do you feel that the information was?</i>					b) <i>How useful is the info?</i>		
	I don't remember	Too much	About right	Too little	None at all	Very useful	Fairly useful	Not so useful
53) The definition of NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
54) The benefits of NT for early decay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
55) Specific directions about how to participate in this treatment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
56) Possible risks of NT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
57) What to do if risks happen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For each of the next statements, please indicate how much you agree or disagree. Please respond by saying one of five answers: “Strongly disagree; Disagree; Neither agree nor disagree; Agree; or Strongly agree.”

	<i>Strongly disagree</i>	<i>Disagree</i>	<i>Neither disagree, nor agree</i>	<i>Agree</i>	<i>Strongly agree</i>
58) The brochure was well organized.					
59) The brochure was easy to read.					
60) The brochure was easy to understand.					
61) The brochure was encouraging in tone.					
62) The brochure was helpful.					
63) The brochure was easy to remember.					

64) Do you have any comments or suggestions about how to improve the brochure?

Note to the interviewer: If nothing added, thank and finish the interview.