

Dear Colleague,

Thank you for your participation in the network study “Decision Aids for the Management of Suspicious Occlusal Caries Lesions”.

In the subsequent pages you will be presented with a series of clinical cases that include photos and descriptions of a patient’s tooth. For each case you will be asked how likely it is that the suspicious area extends into dentin. We are studying the influence that these 3 or 4 factors have on dentists’ decisions. You will see the same tooth several times but each time the risk factors or clinical findings will be different. Please review each tooth/case with its unique combination of factors and then choose your *preferred* recommendation for the treatment of the suspicious area. We prefer that you complete the cases in one sitting.

In all cases, these are new patients who plan on becoming patients in your office for regular care in the future. The patients have no complaints, no relevant medical history, and are in your office today for an initial exam. Each patient has been assigned a risk category based on a combination of commonly used risk factors including age, caries history, oral hygiene, etc. The surface of the tooth has been assigned a texture category based on the feel of a probe on the occlusal surface. The radiograph(s) you have available indicates no evidence of caries into dentin. The occlusal surface has no previous restoration or sealant and has no symptoms of sensitivity to sweets, cold, air, etc. The tooth has been air dried for approximately 5 seconds.

Following the case presentation you will be presented with a Post Study Questionnaire that will ask for your feedback on the general conduct of the study and use of the devices (if you were in the device arm).

Our pretesting suggests that it will only take between 10 and 20 minutes total to complete all of the cases and about 5 minutes to complete the Post Study Questionnaire for which you or your practice organization will receive \$75 as compensation. However, if you are unable to complete them in one sitting, you do have the option to save and continue at another time. We ask that you complete the task within 7 days of receiving this request.

Your participation and responses will remain confidential. Only authorized study personnel will have access to data. All information will be stored in a secure manner. **Your information will not be sold, used for any reason other than research, released to any insurance company, or released to any other similar interest.** Information from this questionnaire and other network studies that you complete or have completed, may be linked using your assigned practitioner ID number. This will allow us to see how characteristics from each study might be related to each other.

Results may be published for scientific purposes, but your identity will not be revealed. Only statistical summaries will be presented. The University of Alabama at Birmingham (UAB) Institutional Review Board (IRB) maintains the authority to inspect completed questionnaires to ensure compliance with IRB procedures. If you have any additional questions, please contact your [Regional Coordinator](#).

If you have questions about your rights as a research participant, you may contact the UAB IRB at (205) 934-3789 or (800) 822-8816. Press option #1 for the operator and request extension 4-3789 (M-F, 8:00 AM - 5:00 PM Central Time).



This is a sample questionnaire. Please do not complete this questionnaire

Final

With regards,
Gregg Gilbert, DDS, MBA, FAAHD, FICD
National Network Director
The National Dental Practice-Based Research Network

Instructions

The following instructions will help you complete this exercise.

- For each scenario designate how likely it is that the suspicious area extends into dentin by moving the slider to the desired position on the scale between not at all likely and very likely. **The slider must be moved (even if back to 0) in order to indicate a response.**
- You will then choose your preferred recommendation for the treatment of the suspicious area. You can only choose one recommendation.
- **You will also be presented with a slider as part of the Post Study Questionnaire.** The slider must be moved (even if back to 0) in order to indicate a response.
- **Use the “Forward” and “Back” buttons within the survey to move forward and backward throughout the survey. DO NOT use the forward and back arrows at the top left corner of your internet browser screen.**
- On occasion, if you forget to answer a question or provide an answer that is invalid, you may see a message highlighted in yellow that provides information on how to fix the problem.
- Press the “Save and Continue Later” button if you wish to save your answers and complete the survey at a later time.
- The survey will “time out” after 30 minutes of no activity. The next time you log in, you will be returned to the last screen you were on.
- You can come back to the survey either by returning to:
 - The link sent previously by email. You will automatically return to the last screen you were on; or
 - www.SOCLstudy.com/Post Study Vignette and re-enter the same code you used when starting the survey. You will automatically return to the last screen you were on.
- **We recommend that you do not use a small mobile device (cellular phone or tablet) to complete this questionnaire.**
- We recommend that **you use the same computer** that was used to complete the survey at the beginning of the study.
- Feel free to adjust the angle of the computer to get the best view of the photo, similar to a clinical setting.



Figure 1.

You consider this patient to be at **low** risk for caries. Upon examination, the suspicious areas feel **smooth**.

How likely is it that this suspicious area extends into dentin?

Not at all likely

Very likely

Which of the following treatments would be your *preferred* recommendation for this suspicious area (please choose one)?

- No treatment today, follow the patient regularly
- Preventive treatment: OHI, in-office fluoride varnish or gel; non-prescription fluoride; prescription for fluoride rinse/paste; or chlorhexidine treatment
- Sealant or unfilled resin (tooth structure **not** altered)
- Sealant (minimal drilling or air abrasion)
- Preventive resin (minimal drilling or air abrasion)
- Direct restoration(amalgam or composite)
- Other treatment (please specify)_____



Figure 2.

You consider this patient to be at **low** risk for caries. Upon examination, the suspicious areas feel **rough**.

How likely is it that this suspicious area extends into dentin?

Not at all likely

Very likely

Which of the following treatments would be your *preferred* recommendation for this suspicious area (please choose one)?

- No treatment today, follow the patient regularly
- Preventive treatment: OHI, in-office fluoride varnish or gel; non-prescription fluoride; prescription for fluoride rinse/paste; or chlorhexidine treatment
- Sealant or unfilled resin (tooth structure **not** altered)
- Sealant (minimal drilling or air abrasion)
- Preventive resin (minimal drilling or air abrasion)
- Direct restoration (amalgam or composite)
- Other treatment (please specify) _____



Figure 3.

You consider this patient to be at ***elevated*** risk for caries. Upon examination, the suspicious areas feel ***smooth***.

How likely is it that this suspicious area extends into dentin?

Not at all likely

Very likely

Which of the following treatments would be your *preferred* recommendation for this suspicious area (please choose one)?

- No treatment today, follow the patient regularly
- Preventive treatment: OHI, in-office fluoride varnish or gel; non-prescription fluoride; prescription for fluoride rinse/paste; or chlorhexidine treatment
- Sealant or unfilled resin (tooth structure **not** altered)
- Sealant (minimal drilling or air abrasion)
- Preventive resin (minimal drilling or air abrasion)
- Direct restoration (amalgam or composite)
- Other treatment (please specify) _____



Figure 4.

You consider this patient to be at ***elevated*** risk for caries. Upon examination, the suspicious areas feel ***rough***.

How likely is it that this suspicious area extends into dentin?

Not at all likely

Very likely

Which of the following treatments would be your *preferred* recommendation for this suspicious area (please choose one)?

- No treatment today, follow the patient regularly
- Preventive treatment: OHI, in-office fluoride varnish or gel; non-prescription fluoride; prescription for fluoride rinse/paste; or chlorhexidine treatment
- Sealant or unfilled resin (tooth structure **not** altered)
- Sealant (minimal drilling or air abrasion)
- Preventive resin (minimal drilling or air abrasion)
- Direct restoration(amalgam or composite)
- Other treatment (please specify)_____



Figure 5.

You consider this patient to be at **low** risk for caries. Upon examination, the suspicious areas feel **smooth**.

How likely is it that this suspicious area extends into dentin?

Not at all likely

Very likely

Which of the following treatments would be your *preferred* recommendation for this suspicious area (please choose one)?

- No treatment today, follow the patient regularly
- Preventive treatment: OHI, in-office fluoride varnish or gel; non-prescription fluoride; prescription for fluoride rinse/paste; or chlorhexidine treatment
- Sealant or unfilled resin (tooth structure **not** altered)
- Sealant (minimal drilling or air abrasion)
- Preventive resin (minimal drilling or air abrasion)
- Direct restoration (amalgam or composite)
- Other treatment (please specify) _____



Figure 6.

You consider this patient to be at **low** risk for caries. Upon examination, the suspicious areas feel **rough**.

How likely is it that this suspicious area extends into dentin?

Not at all likely

Very likely

Which of the following treatments would be your *preferred* recommendation for this suspicious area (please choose one)?

- No treatment today, follow the patient regularly
- Preventive treatment: OHI, in-office fluoride varnish or gel; non-prescription fluoride; prescription for fluoride rinse/paste; or chlorhexidine treatment
- Sealant or unfilled resin (tooth structure **not** altered)
- Sealant (minimal drilling or air abrasion)
- Preventive resin (minimal drilling or air abrasion)
- Direct restoration(amalgam or composite)
- Other treatment (please specify)_____



Figure 7.

You consider this patient to be at ***elevated*** risk for caries. Upon examination, the suspicious areas feel ***smooth***.

How likely is it that this suspicious area extends into dentin?

Not at all likely

Very likely

Which of the following treatments would be your ***preferred*** recommendation for this suspicious area (please choose one)?

- No treatment today, follow the patient regularly
- Preventive treatment: OHI, in-office fluoride varnish or gel; non-prescription fluoride; prescription for fluoride rinse/paste; or chlorhexidine treatment
- Sealant or unfilled resin (tooth structure **not** altered)
- Sealant (minimal drilling or air abrasion)
- Preventive resin (minimal drilling or air abrasion)
- Direct restoration(amalgam or composite)
- Other treatment (please specify)_____



Figure 8.

You consider this patient to be at ***elevated*** risk for caries. Upon examination, the suspicious areas feel ***rough***.

How likely is it that this suspicious area extends into dentin?

Not at all likely

Very likely

Which of the following treatments would be your ***preferred*** recommendation for this suspicious area (please choose one)?

- No treatment today, follow the patient regularly
- Preventive treatment: OHI, in-office fluoride varnish or gel; non-prescription fluoride; prescription for fluoride rinse/paste; or chlorhexidine treatment
- Sealant or unfilled resin (tooth structure **not** altered)
- Sealant (minimal drilling or air abrasion)
- Preventive resin (minimal drilling or air abrasion)
- Direct restoration(amalgam or composite)
- Other treatment (please specify)_____



Figure 9.

You consider this patient to be at **low** risk for caries. Upon examination, the suspicious areas feel **smooth**.

How likely is it that this suspicious area extends into dentin?

Not at all likely

Very likely

Which of the following treatments would be your *preferred* recommendation for this suspicious area (please choose one)?

- No treatment today, follow the patient regularly
- Preventive treatment: OHI, in-office fluoride varnish or gel; non-prescription fluoride; prescription for fluoride rinse/paste; or chlorhexidine treatment
- Sealant or unfilled resin (tooth structure **not** altered)
- Sealant (minimal drilling or air abrasion)
- Preventive resin (minimal drilling or air abrasion)
- Direct restoration(amalgam or composite)
- Other treatment (please specify)_____



Figure 10.

You consider this patient to be at **low** risk for caries. Upon examination, the suspicious areas feel **rough**.

How likely is it that this suspicious area extends into dentin?

Not at all likely

Very likely

Which of the following treatments would be your *preferred* recommendation for this suspicious area (please choose one)?

- No treatment today, follow the patient regularly
- Preventive treatment: OHI, in-office fluoride varnish or gel; non-prescription fluoride; prescription for fluoride rinse/paste; or chlorhexidine treatment
- Sealant or unfilled resin (tooth structure **not** altered)
- Sealant (minimal drilling or air abrasion)
- Preventive resin (minimal drilling or air abrasion)
- Direct restoration(amalgam or composite)
- Other treatment (please specify)_____



Figure 11.

You consider this patient to be at ***elevated*** risk for caries. Upon examination, the suspicious areas feel ***smooth***.

How likely is it that this suspicious area extends into dentin?

Not at all likely

Very likely

Which of the following treatments would be your *preferred* recommendation for this suspicious area (please choose one)?

- No treatment today, follow the patient regularly
- Preventive treatment: OHI, in-office fluoride varnish or gel; non-prescription fluoride; prescription for fluoride rinse/paste; or chlorhexidine treatment
- Sealant or unfilled resin (tooth structure **not** altered)
- Sealant (minimal drilling or air abrasion)
- Preventive resin (minimal drilling or air abrasion)
- Direct restoration(amalgam or composite)
- Other treatment (please specify)_____



Figure 12.

You consider this patient to be at ***elevated*** risk for caries. Upon examination, the suspicious areas feel ***rough***.

How likely is it that this suspicious area extends into dentin?

Not at all likely

Very likely

Which of the following treatments would be your *preferred* recommendation for this suspicious area (please choose one)?

- No treatment today, follow the patient regularly
- Preventive treatment: OHI, in-office fluoride varnish or gel; non-prescription fluoride; prescription for fluoride rinse/paste; or chlorhexidine treatment
- Sealant or unfilled resin (tooth structure **not** altered)
- Sealant (minimal drilling or air abrasion)
- Preventive resin (minimal drilling or air abrasion)
- Direct restoration(amalgam or composite)
- Other treatment (please specify)_____



Figure 13.

You consider this patient to be at **low** risk for caries. Upon examination, the suspicious areas feel **smooth**.

How likely is it that this suspicious area extends into dentin?

Not at all likely

Very likely

Which of the following treatments would be your *preferred* recommendation for this suspicious area (please choose one)?

- No treatment today, follow the patient regularly
- Preventive treatment: OHI, in-office fluoride varnish or gel; non-prescription fluoride; prescription for fluoride rinse/paste; or chlorhexidine treatment
- Sealant or unfilled resin (tooth structure **not** altered)
- Sealant (minimal drilling or air abrasion)
- Preventive resin (minimal drilling or air abrasion)
- Direct restoration(amalgam or composite)
- Other treatment (please specify)_____



Figure 14.

You consider this patient to be at **low** risk for caries. Upon examination, the suspicious areas feel **rough**.

How likely is it that this suspicious area extends into dentin?

Not at all likely

Very likely

Which of the following treatments would be your *preferred* recommendation for this suspicious area (please choose one)?

- No treatment today, follow the patient regularly
- Preventive treatment: OHI, in-office fluoride varnish or gel; non-prescription fluoride; prescription for fluoride rinse/paste; or chlorhexidine treatment
- Sealant or unfilled resin (tooth structure **not** altered)
- Sealant (minimal drilling or air abrasion)
- Preventive resin (minimal drilling or air abrasion)
- Direct restoration (amalgam or composite)
- Other treatment (please specify) _____



Figure 15.

You consider this patient to be at ***elevated*** risk for caries. Upon examination, the suspicious areas feel ***smooth***.

How likely is it that this suspicious area extends into dentin?

Not at all likely

Very likely

Which of the following treatments would be your *preferred* recommendation for this suspicious area (please choose one)?

- No treatment today, follow the patient regularly
- Preventive treatment: OHI, in-office fluoride varnish or gel; non-prescription fluoride; prescription for fluoride rinse/paste; or chlorhexidine treatment
- Sealant or unfilled resin (tooth structure **not** altered)
- Sealant (minimal drilling or air abrasion)
- Preventive resin (minimal drilling or air abrasion)
- Direct restoration(amalgam or composite)
- Other treatment (please specify)_____



Figure 16.

You consider this patient to be at ***elevated*** risk for caries. Upon examination, the suspicious areas feel ***rough***.

How likely is it that this suspicious area extends into dentin?

Not at all likely

Very likely

Which of the following treatments would be your *preferred* recommendation for this suspicious area (please choose one)?

- No treatment today, follow the patient regularly
- Preventive treatment: OHI, in-office fluoride varnish or gel; non-prescription fluoride; prescription for fluoride rinse/paste; or chlorhexidine treatment
- Sealant or unfilled resin (tooth structure **not** altered)
- Sealant (minimal drilling or air abrasion)
- Preventive resin (minimal drilling or air abrasion)
- Direct restoration(amalgam or composite)
- Other treatment (please specify)_____