

**Quick statistics**

Survey 433945 'Carnicom Institute MRP Symptom Survey [short version]'

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**Results****Survey 433945**

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Number of records in this query:	971
Total records in survey:	971
Percentage of total:	100.00%

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## Field summary for MouthRanking [1]

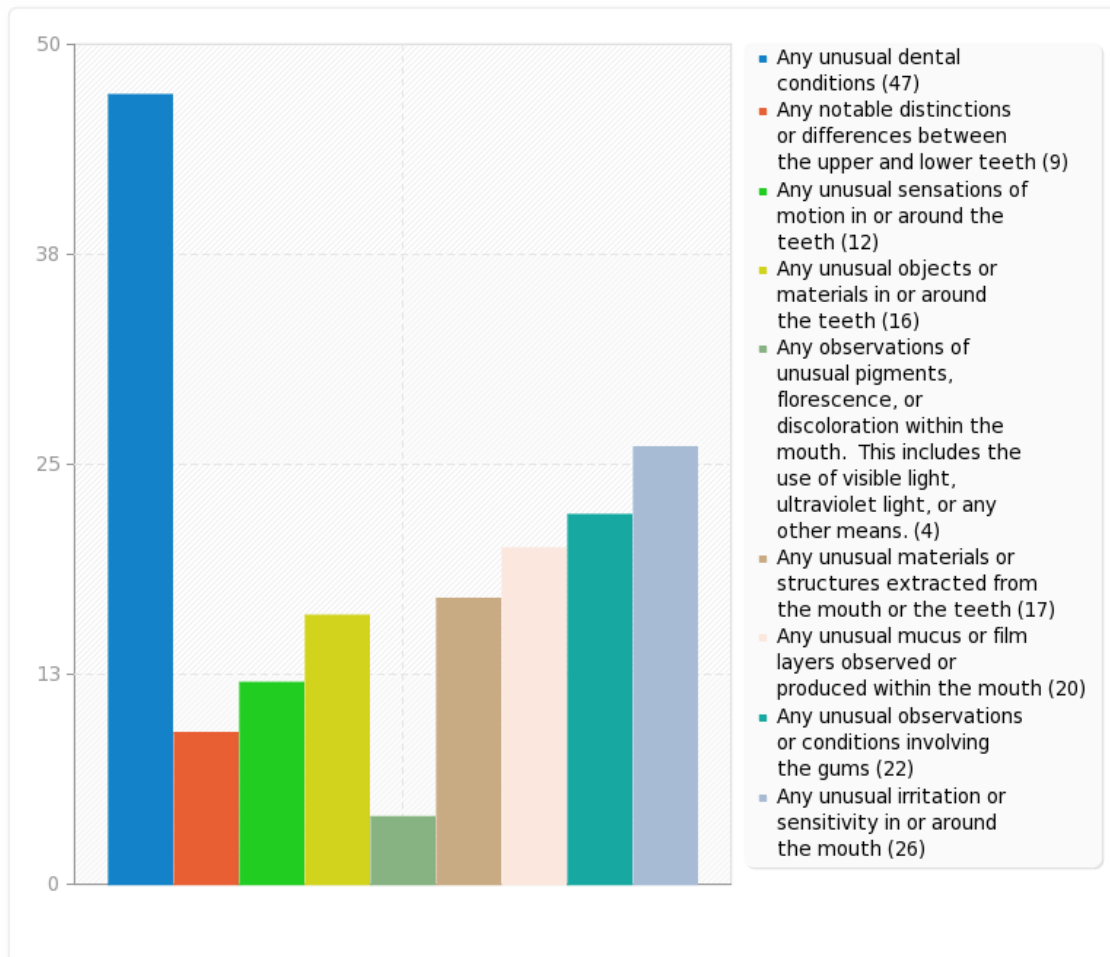
Do you have any of the following symptoms? Only move the symptoms that you are experiencing. Items can be reordered or moved around as needed.[Ranking 1]

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Answer	Count	Percentage
Any unusual dental conditions (1)	47	27.17%
Any notable distinctions or differences between the upper and lower teeth (2)	9	5.20%
Any unusual sensations of motion in or around the teeth (3)	12	6.94%
Any unusual objects or materials in or around the teeth (4)	16	9.25%
Any observations of unusual pigments, floescence, or discoloration within the mouth. This includes the use of visible light, ultraviolet light, or any other means. (5)	4	2.31%
Any unusual materials or structures extracted from the mouth or the teeth (6)	17	9.83%
Any unusual mucus or film layers observed or produced within the mouth (7)	20	11.56%
Any unusual observations or conditions involving the gums (8)	22	12.72%
Any unusual irritation or sensitivity in or around the mouth (9)	26	15.03%

### Field summary for MouthRanking [1]

Do you have any of the following symptoms? Only move the symptoms that you are experiencing. Items can be reordered or moved around as needed.[Ranking 1]



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## Field summary for Tonsils

Have you had your tonsils removed?

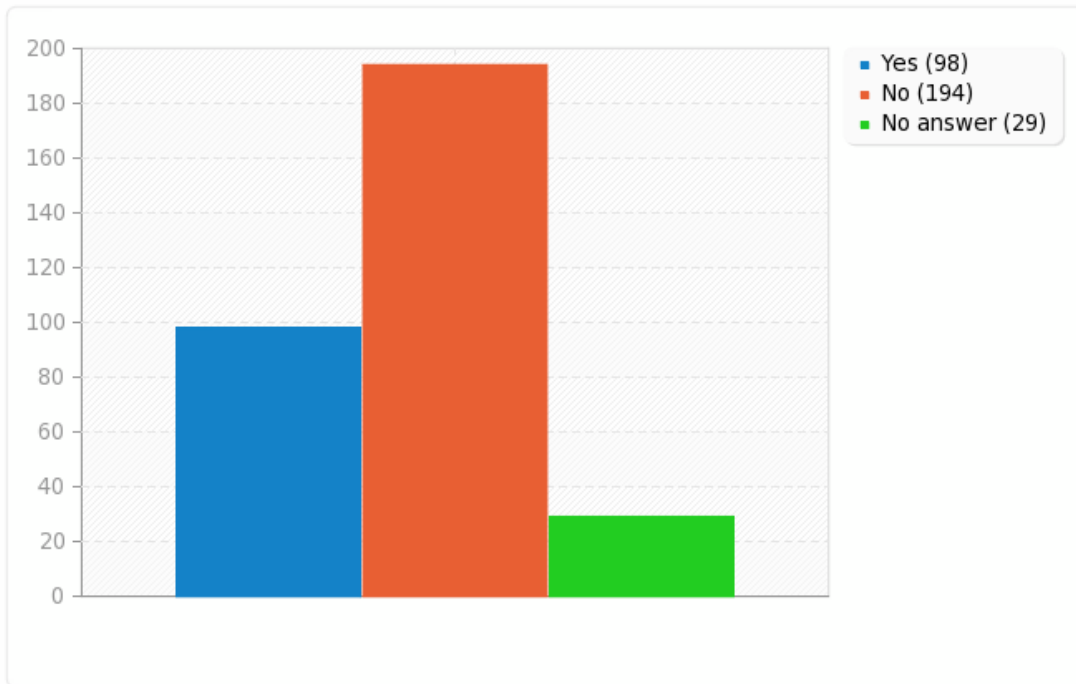
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<b>Answer</b>	<b>Count</b>	<b>Percentage</b>
Yes (Y)	98	30.53%
No (N)	194	60.44%
No answer	29	9.03%

### Field summary for Tonsils

Have you had your tonsils removed?

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**Field summary for MouthConditions**

Do you have any known, identified, or diagnosed conditions involving the mouth or throat?

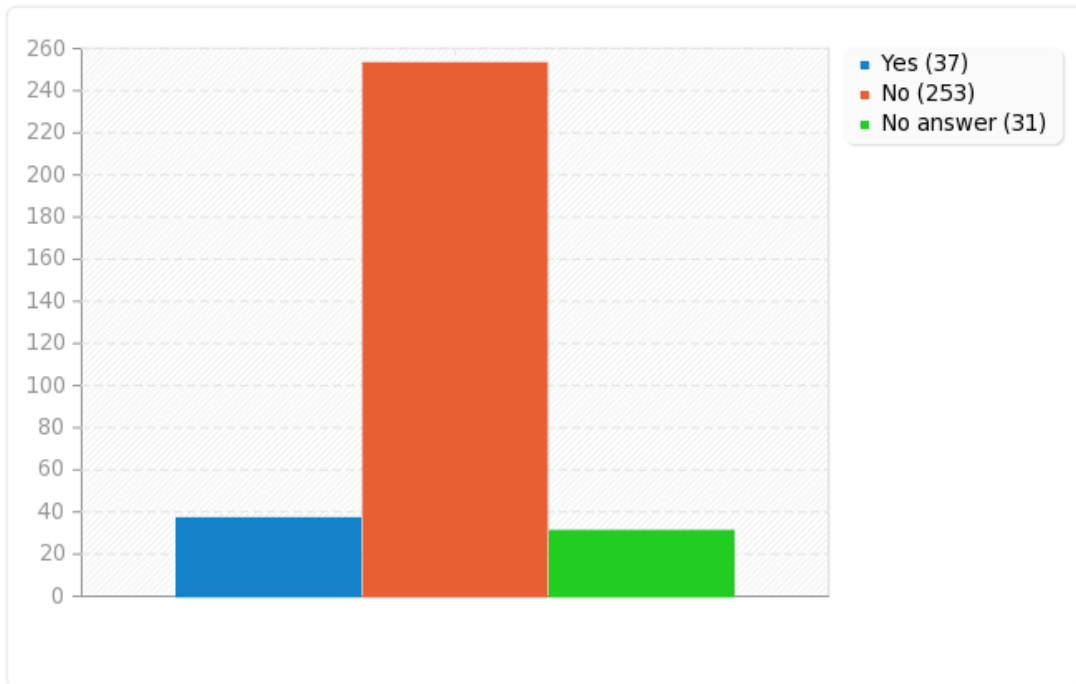
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<b>Answer</b>	<b>Count</b>	<b>Percentage</b>
Yes (Y)	37	11.53%
No (N)	253	78.82%
No answer	31	9.66%

### Field summary for MouthConditions

Do you have any known, identified, or diagnosed conditions involving the mouth or throat?

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**Field summary for MouthTreatment**

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Have you ever been treated by anyone for any of the listed symptoms?

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<b>Answer</b>	<b>Count</b>	<b>Percentage</b>
Yes (Y)	49	15.26%
No (N)	233	72.59%
No answer	39	12.15%



### Field summary for MouthTreatment

Have you ever been treated by anyone for any of the listed symptoms?

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