## Diagnostic Criteria for Temporomandibular Disorders

## Demographics

| 1. | What is your current marital status?   |                                     |
|----|--|-------------------------------------|
|    | Married Living as m  | arried Divorced                     |
|    | Separated Widowed  | Never married                       |
| 2. | What is your ethnicity?  |                                     |
|    | Hispanic or Latino   | ic or Latino                        |
| 3. | What is your race? Mark all that apply.  | American Indian or Alaska Native    |
|    |  | Asian                               |
|    |  | Black or African American           |
|    |  | Native Hawaiian or Other Pacific    |
|    |  | White                               |
| 4. | What is the highest grade or level of schooling that you have completed?   | Through high school                 |
|    |  | Some college                        |
|    |  | College graduate                    |
|    |  | Professional or Post-graduate level |
| 5. | What is your family's current annual<br>household income? Please include all<br>sources of income for all family members<br>such as wages, salaries, investments, etc. | \$0 - \$19,999                      |
|    |  | \$20,000 - \$39,999                 |
|    |  | \$40,000 - \$59,999                 |
|    |  | \$60,000 - \$79,999                 |
|    |  | \$80,000 - \$99,999                 |
|    |  | \$100,000 - \$149,999               |
|    |  | \$150,000 or higher                 |

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