Patient Name:
Patient DOB:
It would be appreciated if you could complete this survey/diary following your child's adenoidectomy.
I am interested to find out the incidence of halitosis (bad breath) and pain following the procedure.

Please put a cross on the line scales below, based on your perception of the child's pain and breath odour

Your help in completing this survey is very much appreciated. Thank you.

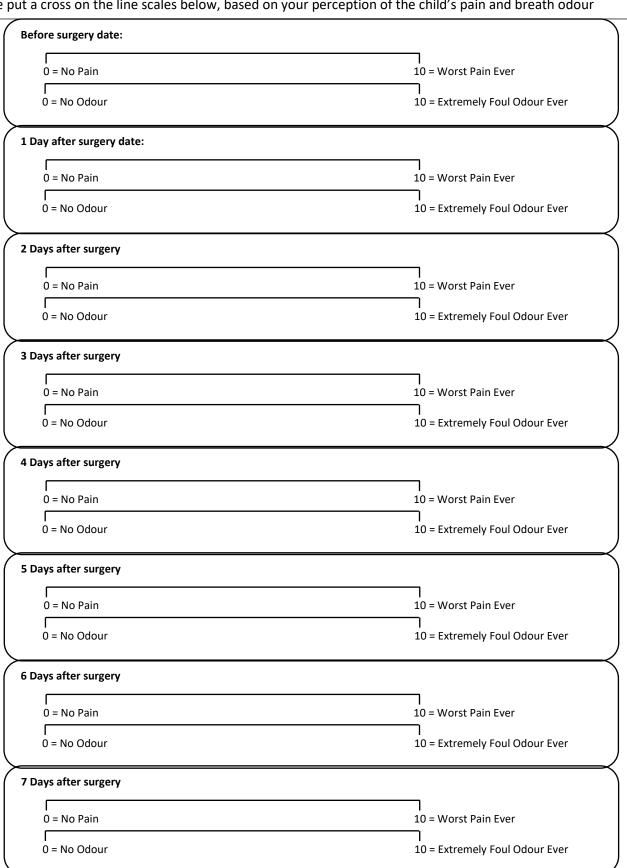


Figure S1. Sample of the diary and VAS.