Thomas R. McDonald D.M.D.

FACIAL PAIN-T.M.J.-OCCLUSAL EXAMINATION

Patient_____Date_____

Chief Concern_____
_____

CLINICAL EXAMINATION

MUSCLE PALPATION
Note degree of tenderness
0=NONE   1=MILD   2=MODERATE   3=VERY

RIGHT   LEFT

COMMENTS_____
_____

LOAD TEST OF JOINTS
SIGNS OF T/T

MANIPULATION TO CR_____

LOAD TEST ROTATION_____

LOAD TEST TRANSLATION_____

RANGE OF MOTION

0mm

R ————————————— L
          0

50mm

NORM=10mm

NORM=40mm

DOPPLER EXAMINATION

RIGHT		LEFT
0 1 2 3	MEDIAL POLE CREPITIS	**0 1 2 3**
0 1 2 3	LATERAL POLE CREPITIS	**0 1 2 3**
_____mm	OPENING CLICK	_____mm
_____mm	CLOSING CLICK	_____mm
Y N	LIGAMENT HYPEREMIA	Y N
Y N	ADHESIONS	Y N

0=NONE 1=MILD 2=MODERATE 3=COARSE
COMMENTS_____
_____

PANORAMIC FILM

◯PATHOSIS_____

◯DEVIATED SEPTUM_____

◯SINUS IRREGULARITY_____

COMMENTS_____

_____

OCCLUSAL EXAMINATION

◯DIAGNOSTIC CASTS ◯ MOUNTED IN CR ◯ FACEBOW

◯EXCESSIVE WEAR_____

◯TOOTH HYPERMOBILITY_____

◯ FRACTURED TEETH_____

◯ SENSITIVE TEETH_____

FACIAL PAIN-TMJ-OCCLUSION
DIAGNOSTIC FINDINGS

PIPER CLASSIFICATION-TMJ

R	L	STAGE 1	STRUCTURALLY INTACT TMJ
R	L	STAGE 2	INTERMITTENT CLICK
R	L	STAGE 3a	CHRONIC LATERAL POLE CLICK
R	L	STAGE 3b	CHRONIC LATERAL POLE LOCK
R	L	STAGE 4a	CHRONIC MEDIAL POLE CLICK
R	L	STAGE 4b	CHRONIC MEDIAL POLE LOCK
R	L	STAGE 5a	PERFORATION WITH ACUTE DEGENERATIVE JOINT DISEASE
R	L	STAGE 5b	PERFORATION WITH CHRONIC DEGENERATIVE JOINT DISEASE

DAWSON CLASSIFICATION-OCCLUSION

	TYPE I	MAXIMUM INTERCUSPATION OCCURS IN HARMONY WITH A VERIFIABLE CR
	TYPE IA	MAXIMUM INTERCUSPATION OCCURS IN HARMONY WITH ADAPTED CENTRIC POSTURE
	TYPE II	CONDYLES MUST DISPLACE FROM A VERIFIED CR FOR MAXIMUM INTERCUSPATION TO OCCUR
	TYPE IIA	CONDYLES MUST DISPLACE FROM ADAPTED CENTRIC POSTURE FOR MAXIMUM INTERCUSPATION TO UCCUR
	TYPE III	CENTRIC RELATION OR ADAPTED CENTRIC POSTURE CANNOT BE VERIFIED
	TYPE IV	OCCLUSAL RELATIONSHIP IS IN A STAGE OF PROGERSSIVE DISORDER BECAUSE OF PATHOLOGICALLY UNSTABLE AND PROGRESSIVE DEFORMATION OF THE TMJs

OCCLUSAL ANALYSIS
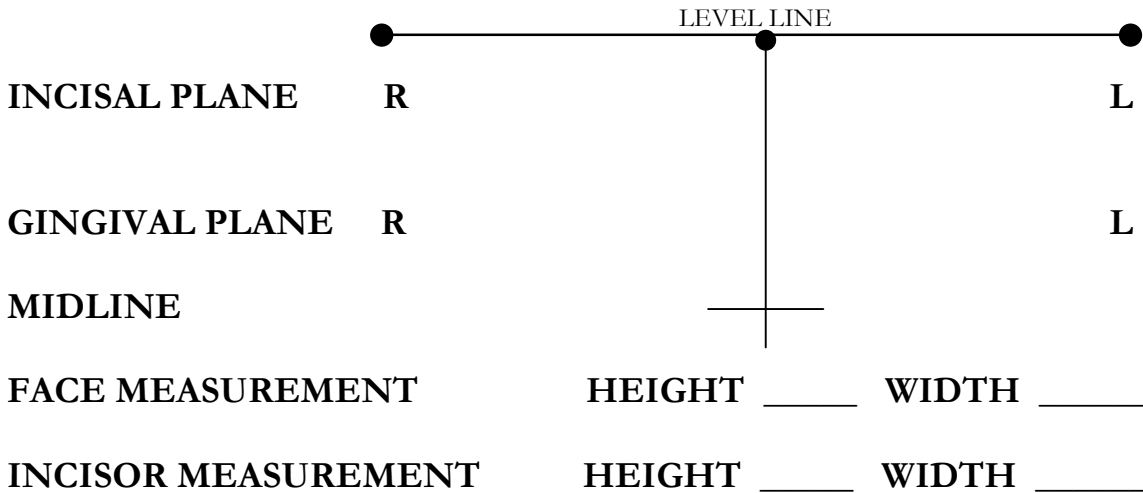
| MOUNTED CASTS |

INITIAL CONTACT CR _____

SLIDE _____

ANTERIOR CONTACT IN CENTRIC RELATION (Y) (N)

INCISAL WEAR   0=NONE M=MODERATE S=SEVERE

6	7	8	9	10	11	22	23	24	25	26	27

ANTERIOR CONTACT WITHOUT POSTERIOR TEETH _____

_____

ESTHETIC ANALYSIS

LEVEL LINE

INCISAL PLANE   R   L

GINGIVAL PLANE   R   L

MIDLINE

FACE MEASUREMENT   HEIGHT _____ WIDTH _____

INCISOR MEASUREMENT   HEIGHT _____ WIDTH _____

EQUILIBRATION

1		8	
2		9	
3		10	
4		11	
5		12	
6		13	
7		14	

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