THIS STEP-BY-STEP PATIENT SCREENING GUIDE
WILL HELP YOU IDENTIFY APPROPRIATE PATIENTS
TO TREAT AS WELL AS IDENTIFY THOSE WHO
SHOULD BE REFERRED OUT OF THE PRACTICE.

THE KEY TO MAKING THIS CRITICAL DECISION IS
COMMUNICATION WITH THE PATIENT AND YOUR
CLINICAL EXAM.

WE HAVE INCLUDED TOOLS THAT WILL HELP YOU.

The questionnaire and the exam record are featured in this guide with an explanation of
when and how to use them. They coordinate with two additional tools in the guide called, the
TMJ Findings Worksheet and the TMJ Screening Results Reference Table.

Also included in this guide are instructions that coordinate with the screening exam record
on muscle palpation, evaluating joint sounds, and load testing with a Lucia Jig.

CASE EXAMPLES

The shaded boxes throughout the guide feature examples of two patients who have reported
symptoms during a routine exam. For each step, the examples show the patient’s responses
to the questionnaire screening exam results, and TMJ Findings Worksheet information. The
last section discusses the findings and possible treatment plans for both patients.

CUSTOMIZE PATIENT-SPECIFIC TOOLS

- Patient Questionnaire
- Screening Exam Record
- TMJ Findings Worksheet

Customize with your practice name, address, and logo. Download these tools
at GreatLakesDentalTech.com

At any time during your
review of this guide or
throughout evaluation or
treatment planning, feel
free to contact a splint
support specialist at
800.828.7626 with
any questions.
BY INCORPORATING A ROUTINE QUESTIONNAIRE AND EXAM INTO PATIENT VISITS, YOU WILL BECOME INCREASINGLY MORE AWARE OF POTENTIAL TMD SYMPTOMS AND SIGNS. EITHER THE PATIENT WILL TALK ABOUT SYMPTOMS SUCH AS HEADACHES OR MUSCLE SORENESS OR YOU MAY NOTICE OCCLUSAL SIGNS SUCH AS EXCESS WEAR OR FRACTURES.

THE FIRST STEP IS THE PATIENT QUESTIONNAIRE WHICH CAN BE COMPLETED IN JUST A FEW MINUTES BY THE PATIENT. IT IS AN IDEAL TOOL TO USE CHAIRSIDE TO DISCUSS SYMPTOMS IN MORE DETAIL WITH THE PATIENT.

‘YES’ OR ‘NO’ RESPONSES
The questionnaire is designed for simple ‘yes’ or ‘no’ responses. This makes it easy for the patient to respond and allows you to immediately focus on any red flag responses such as ‘injury to the jaw or face’ or ‘having been previously treated by a TMJ specialist’.

The responses from the questionnaire will be transferred to the TMJ Findings Worksheet for further evaluation along with the results of the screening exam.
AN EXISTING PATIENT, MARY, HAS BEEN SCHEDULED FOR A TMJ SCREENING VISIT.

At her last routine exam, Mary complained of frequent headaches and you thought you saw some occlusal wear on the anterior teeth.

From her questionnaire, you can see that she did indicate headaches in the late afternoon, tender jaw muscles, and some teeth that are sore, aching, and uncomfortable. Also note, Mary indicated that she has not received an injury to the face and has never been treated by a TMJ specialist before.

During the exam, special attention should be given to assessing occlusal stability, muscle palpation, and load testing.

These responses will be transferred to Mary’s TMJ Findings Worksheet (Page 9).

A NEW PATIENT, BOB, HAS BEEN SCHEDULED FOR A TMJ SCREENING VISIT.

During Bob’s initial exam, he complained of frequent headaches and you thought you saw some occlusal wear on the anterior teeth.

From his questionnaire, you can see that he did indicate headaches upon awakening, tender jaw muscles, and some teeth that are sore, aching, and uncomfortable. Also note, Bob indicated that he noticed some noise in his joints.

Chairside, Bob mentioned that his wife could hear a click in his right joint.

During the exam, special attention should be given to assessing occlusal stability, muscle palpation, evaluating joint sounds, and load testing.

These responses will be transferred to Bob’s TMJ Findings Worksheet (Page 9).
Following a review of the patient questionnaire, the screening exam will provide you with the information you need to decide how to treat your patient. Record your results on the screening exam record.

The exam will consist of:

A. Occlusal Assessment
   You are looking for any signs of occlusal instability which can cause occluso-muscle imbalance. These signs include worn, broken, or loose teeth, occlusal disease, hypermobility, excessive wear, tooth migration, or cusp fractures.

B. Jaw Opening
   You are trying to determine if the patient has full range of motion and if not, how much range of motion they do have. Disposable range of motion scales make this evaluation simple and quick.

   **Normal range of motion:**
   - **Wide:** 40-50mm
   - **Lateral & Protrusive:** 7-15mm

   You can also use the range of motion scales to determine if the patient deviates at full opening to the right or to the left as well as in protrusion.
C. MUSCLE PALPATION

Palpation of the masticatory muscles is part of a standard screening exam for temporomandibular disorders. Muscle tenderness is almost always present if a muscle is overworked in an uncoordinated manner. The instructions include palpation of the medial (internal) pterygoid, the superficial masseter, the temporalis, and the lateral (external) pterygoid muscles. Any positive response is recorded as a single “yes” in Column 1 of the TMJ Findings Worksheet.

D. JOINT SOUNDS

A normal joint is quiet. You are listening for any sounds during joint movement that may indicate an intracapsular disorder. While the patient is opening, you are listening for crepitus which sounds like grating or scratching, and you are also listening for popping and clicking; both when the patient is only open slightly and when the patient is only open wide. Any positive response is recorded as a single “yes” in Column 1 of the TMJ Findings Worksheet.

E. LOAD TESTING

Load testing with the Lucia Jig will help you determine whether an intracapsular structural disorder is or is not a source of pain. The Lucia Jig de-programs the muscle by separating the posterior teeth which allows the lateral pterygoid to release, seating the condyles in the most superior position.

Note: Instructions for muscle palpation, evaluating joint sounds, and load testing are included in this guide and are available at GreatLakesDentalTech.com
# SCREENING EXAM RECORD

**RECORD RESULTS ON THE TMJ FINDINGS WORKSHEET**

<table>
<thead>
<tr>
<th>(YOUR LETTERHEAD)</th>
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<tbody>
<tr>
<td><strong>TMJ Screening Exam Record</strong></td>
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<tr>
<td><strong>Date:</strong> 11/12</td>
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<tr>
<td><strong>YES</strong></td>
</tr>
</tbody>
</table>

A) Signs of Occlusal Instability (worn, broken, or loose teeth)

B) Jaw Opening

Upon full opening, does the patient deviate to the right?

Upon full opening, does the patient deviate to the left?

C) Masticatory Muscle Palpation

Are any of the following muscles sore or tender when palpated?

- Medial (internal) Pterygoid
- Masseter
- Temporalis
- Lateral (external) Pterygoid

D) Evaluating Joint Sounds

**Right Joint**

Is there crepitus when the patient opens slightly (on rotation)?

Is there crepitus when the patient only opens wide (translation)?

Is there a click when the patient opens slightly (on rotation)?

Is there a click when the patient only opens wide (translation)?

**Left Joint**

Is there crepitus when the patient opens slightly (on rotation)?

Is there crepitus when the patient only opens wide (translation)?

Is there a click when the patient opens slightly (on rotation)?

Is there a click when the patient only opens wide (translation)??

E) Lucia Jig Load Test for Tenderness

Did the Lucia Jig load test result in any tension or tenderness?

The next step: Transfer the information from the patient questionnaire and the exam record to the TMJ Findings Worksheet.
ONCE COMPLETED, THE TMJ FINDINGS WORKSHEET WILL REVEAL A SPECIFIC COURSE OF ACTION AND YOU CAN BEGIN TO TREATMENT PLAN FOR YOUR PATIENT.

THE TABLE IS EASY TO USE.

STEP 1
Record all "YES" responses in COLUMN 1 from the patient questionnaire and the screening exam worksheet.

<table>
<thead>
<tr>
<th>Question</th>
<th>COLUMN 1</th>
<th>COLUMN 2</th>
<th>COLUMN 3</th>
<th>COLUMN 4</th>
<th>COLUMN 5</th>
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</thead>
<tbody>
<tr>
<td>1 Awakening Headache</td>
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<td>2 Afternoon Headache</td>
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<tr>
<td>3 Jaw Muscle Soreness</td>
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<tr>
<td>4 Joint Soreness</td>
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<tr>
<td>5 Injury</td>
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<tr>
<td>6 Joint Click</td>
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<tr>
<td>7 Locking Joints</td>
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<tr>
<td>7 Sensitive/Sore Teeth</td>
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<tr>
<td>8 Splint or Nightguard</td>
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<tr>
<td>9 Medication(s)</td>
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<tr>
<td>10 TMJ Specialist</td>
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</tbody>
</table>

STEP 2
For all "YES" responses, place a check mark in the associated shaded box to the right in Columns 2-5. There’s only one shaded box per row.
INTERPRETING THE TABLE

Columns 2 through 5 are organized from the least to the most treatment options. **Read left to right, the first check mark indicates the appropriate course of action.**

- Start with Column 2. If there is even one check mark in Column 2, consider referring the patient to a TMJ specialist.

- Provided there are no check marks in Column 2, one check mark in Column 3 indicates a Full Contact splint w/anterior guidance.

- If there are no check marks in Columns 2 or 3, but a check mark in Column 4, either a Full Contact or Flat Plane splint is indicated.

- If there are no check marks in Columns 2, 3, or 4, but a check mark in Column 5, either a Full Contact, Flat Plane, or deprogrammer is indicated.

After you have determined the appropriate course of action to take, you can use the TMJ Screening Results Reference Table to further evaluate possible causes and learn more about appliance and treatment options.

REFER TO THE SPLINT APPLIANCE SELECTION GUIDE TO CHOOSE THE APPROPRIATE FULL CONTACT SPLINT WITH ANTERIOR GUIDANCE, FLAT PLANE SPLINT, OR DEPROGRAMMER.
INTERPRETING THE RESULTS FOR MARY

After transferring all the "YES" answers, onto the worksheet and completing the table, you can now assess the results.

Reading left to right across the table, the first check mark to the left appears in Column 4 which indicates a Flat Plane splint or Full Contact splint with anterior guidance.

See Page 10 for more discussion about Mary's case.

INTERPRETING THE RESULTS FOR BOB

After transferring all the "YES" answers, onto the worksheet and completing the table, you can now assess the results.

Reading left to right across the table, the first check mark to the left appears in Column 2 which indicates that Bob should be referred to a specialist.

See Page 10 for more discussion about Bob's case.
**CASE DISCUSSION & POSSIBLE TREATMENT PLANS**

**FROM MARY’S RESPONSES TO THE QUESTIONNAIRE AND THE EXAM FINDINGS,** it appears that Mary has an **occluso-muscle imbalance** that’s causing facial pain. However, she does have stable joints which makes her a treatable patient.

The fact that she suffers from afternoon headaches and the exam revealed **occlusal instability** indicates that Mary may be clenching and/or grinding during the day. A full coverage splint is indicated to be worn full time. (Since the patient would need full-time wear, a deprogrammer is contra-indicated.).

A **full contact splint with anterior guidance or a flat plane splint** would best suit Mary’s needs.

**NOTE:** Often, when patients need to wear a splint full time, many find it easier to function in a lower splint.

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<table>
<thead>
<tr>
<th>Question</th>
<th>Mark ‘YES’ Here</th>
<th>Refer</th>
<th>Full Contact with anterior guidance</th>
<th>Full Contact w/ guide, Flat Plane</th>
<th>Full Contact w/ guide, Flat Plane, or Deprogrammer</th>
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</thead>
<tbody>
<tr>
<td>Awakening Headache</td>
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<td>Afternoon Headache</td>
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<td>Jaw Muscle Soreness</td>
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<td>Joint Soreness</td>
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<tr>
<td>Injury</td>
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<td>Joint Click</td>
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<td>Locking Joints</td>
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<td>Sensitivity/Back Teeth</td>
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<td>Medication(s)</td>
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<td>Occlusal Instability</td>
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<td>Jaw Opening-Right</td>
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<td>Jaw Opening-Protrusion</td>
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<td>Muscle Palsiation</td>
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<td>Crepitus open slightly</td>
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<td>Click open slightly</td>
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<td>Click open wide</td>
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<tr>
<td>Pain on Load Testing</td>
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</tbody>
</table>

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**FROM BOB’S RESPONSES TO THE QUESTIONNAIRE AND THE EXAM FINDINGS,** it appears that Bob has an **occluso-muscle imbalance** that may be contributing to his pain. However, the exam also revealed certain signs of a possible internal derangement such as **crepitus upon opening slightly** and **a click upon opening slightly** which can also be contributing to the pain Bob is reporting.

The fact that Bob experienced tension upon load testing also indicates a **potential problem in the joint** including disc displacement or other intracapsular problem.

Bob’s case is more complex and requires additional evaluation. Many general dentists choose to refer patients like Bob to a **specialist**.
STEP-BY-STEP
PATIENT SCREENING
GUIDE