Chesterland Family Dental Care

MUSCULO-OCCLUSAL SIGNS AND SYMPTOMS

NAME: _____ DATE: _____

Symptoms: Please check any or all that apply to you

1. __ Headaches
2. __ TMJ pain (L or R)
3. __ TMJ noise (L or R)
4. __ Pain in ears (L or R)
5. __ Pain around eyes (L or R)
6. __ Pain in neck
7. __ Pain in shoulders
8. __ Pain in forehead
9. __ Pain in temples (L or R)
10. __ Dizziness
11. __ Ringing in ears (L or R)
12. __ Loose teeth
13. __ Clenching/bruxing
14. __ Sensitive teeth
15. __ Difficulty chewing
16. __ Difficulty swallowing
17. __ Limited opening
18. __ Loud snoring
19. __ Clicking/popping in jaw
20. __ Ear congestion
21. __ Tingling in fingertips
22. __ Upset stomach

Signs: To be filled out by Doctor or Hygienist

1. __ Crowded lower anteriors
2. __ Wear of lower anterior teeth
3. __ Lingual inclination of lower anteriors
4. __ Bicuspid drop off
5. __ Depressed curve of spee
6. __ Lingual inclination of upper anteriors
7. __ Lingually tipped lower posteriors
8. __ Narrow mandibular arch
9. __ Narrow maxillary arch
10. __ Midline discrepancy
11. __ Tooth mobility
12. __ Flared upper anterior teeth
13. __ Facets
14. __ Abfractions
15. __ Locked upper buccal cusps
16. __ Fractured cusps
17. __ Chipped anterior teeth
18. __ Loss of molars
19. __ Cross bite
20. __ Anterior open bite
21. __ Tongue thrust
22. __ Scalloping of tongue
23. __ Gingival inflammation
24. __ Facial asymmetry
25. __ Chelitis
26. __ Abnormal lip posture
27. __ Deep mentalis crease
28. __ Mandibular Torticollis
29. __ Cervical Torticollis
30. __ Forward head posture
31. __ Speech abnormalities

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