



TMJ Evaluation Form

Patient Name:	<input type="text"/>	Date:	<input type="text"/>
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Chief Complaint

Maximum Opening: (45 mm average)

Vertical Dimension: 18 mm +/- 2 mm

Mark all signs that the patient presents below:

TMJ Joint Sound:

Right Joint: Click Pop Crepitus

Left Joint: Click Pop Crepitus

Deviation:

To the Right Upon Opening Upon Closing

To the Left Upon Opening Upon Closing

S Curve Upon Opening Upon Closing

Occlusal Wear:

Severe Moderate Slight None

Cheek Bites:

Severe Moderate Slight None

Abfractions:

Severe Moderate Slight None

Mandibular Tori:

Right Left Bilateral

