

# EXAMINATION • DIAGNOSIS • TREATMENT PLAN

PATIENT \_\_\_\_\_ DATE \_\_\_\_\_

CHIEF COMPLAINT \_\_\_\_\_

## 020. FACIAL AND AIRWAY EVALUATION

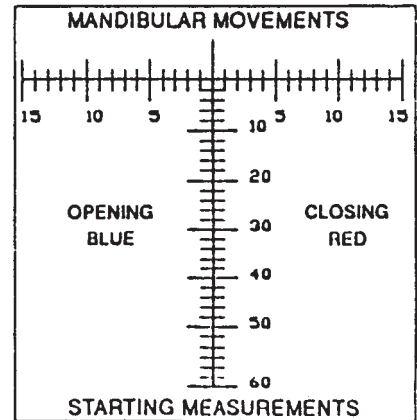
**Development:** 1  Symmetric 2  Long 3  Asymmetric \_\_\_\_\_ 4  Chin Scar  
**Gingival Display:** 5  WNL 6  Deficient 7  Yes \_\_\_\_\_ mm exposed **Cosmetic Line (38±4)** \_\_\_\_\_  
**Lip Posture:** 8  Closed 9  Open 10  Lower lip behind upper incisor  
**Airway:** 11  WNL 12  Chronic Congestion  
**History of:** 13  Snoring 14  Ear Problems 15  Speech Problems  
 16  Allergies 17  Mouth Breathing 18  Gagging  
**Tonsils & Adenoids:** 19  Normal 20  Problematic 21  Refer for ENT/Allergy evaluation to Dr. \_\_\_\_\_  
**Upper Midline:** 22  Normal 23  Right \_\_\_\_\_ mm 24  Left \_\_\_\_\_ mm **Naso-labial Angle:** 25  I 26  II 27  III  
**Harmful Habit Hx:** 28  \_\_\_\_\_ **Facial esthetics** in "AS IF" position: 29  Worse 30  Better  
**Lip Outline:** Pleasing: 31  U 32  L Retrusive: 33  U 34  L Protrusive: 35  U 36  L

## 021. TMJ AND CERVICAL EVALUATION

**Pain:** 1  Negative 2  R Lateral 3  L Lateral 4  Protrusive 5  Opening  
**Tenderness to Palpation:** 6  Negative 7  R TMJ Lateral 8  L TMJ Lateral 9  R TMJ Post. 10  L TMJ Post.  
**Opening (add overbite):** 11  Normal 12  Maximum unstrained \_\_\_\_\_ mm 13  Maximum strained \_\_\_\_\_ mm  
**Deflection:** 14  Negative 15  Opening to Right \_\_\_\_\_ mm 16  Opening to Left \_\_\_\_\_ mm  
 17  Closing to Right \_\_\_\_\_ mm 18  Closing to Left \_\_\_\_\_ mm  
**I - M Click:** 19  No TMJ Sounds  
**Opening** **Closing** **R Lateral** **L Lateral** **Protrusive**  
 20  None 23  None 26  None 29  None 32  None  
 21  R at \_\_\_\_\_ mm 24  R at \_\_\_\_\_ mm 27  R TMJ 30  R TMJ 33  R TMJ  
 22  L at \_\_\_\_\_ mm 25  L at \_\_\_\_\_ mm 28  L TMJ 31  L TMJ 34  L TMJ  
**Relieved w/ Protrusion:** 35  Relieved with \_\_\_\_\_ mm Protrusion 36  Unable to relieve with Protrusion  
**Restriction:** 37  Negative  
 38  R less than 8 mm \_\_\_\_\_ 39  L less than 8 mm \_\_\_\_\_ 40  Prot less than 6 mm \_\_\_\_\_

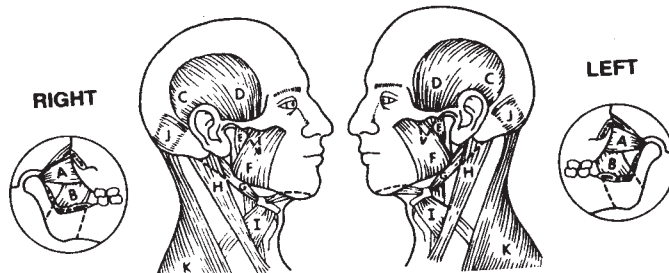
Rx TMJ X-ray: 41  Tomogram 42  Transcranial

**Range of Motion:** **WNL** **Abn** **WNL** **Abn**  
**Flexion** 43  44  **Rotation** 49  50   
**Extension** 45  46  **Cervical Sound** 51  52   
**Side Bending** 47  48



## 022. EXTRAORAL AND INTRAORAL MUSCLE EXAMINATION

1  Negative  
**R L**  
 2  3  Medial Pterygoid (B) \_\_\_\_\_  
 4  5  Posterior Temporal (C) \_\_\_\_\_  
 6  7  Anterior Temporal (D) \_\_\_\_\_  
 8  9  Deep Masseter (E) \_\_\_\_\_  
 10  11  Superficial Masseter (F) \_\_\_\_\_  
 12  13  Digastric (G) \_\_\_\_\_  
 14  15  Cervical (ant) \_\_\_\_\_  
 16  17  Cervical (post) \_\_\_\_\_  
 18  19  Sternomastoid (H) \_\_\_\_\_  
 20  21  Hyoid Area (I) \_\_\_\_\_  
 22  23  Occipital Area (J) \_\_\_\_\_  
 24  25  Trapezius (neck) (K) \_\_\_\_\_  
 26  27  Trapezius (shoulder) \_\_\_\_\_  
 28  29  Trapezius (mid-back) \_\_\_\_\_



### Intraoral

30  31  Lateral Pterygoid (A) \_\_\_\_\_  
 32  33  Temporalis Tendon Insertion \_\_\_\_\_  
 34  35  Mylohyoid \_\_\_\_\_  
 36  Refer for Physical Therapy Rx \_\_\_\_\_  
 37  Refer for Biofeedback Rx \_\_\_\_\_

**023. INTRAORAL SOFT TISSUE AND DENTAL EXAMINATION**

**Oral Hygiene:** 1  E 2  G 3  F 4  P 5  VP  
**Soft Tissues:** 6  WNL 7  Palpable Masses: \_\_\_\_\_ 8  Other Lesions/Changes: \_\_\_\_\_  
**Periodontal:** 9  WNL 10  Type I (Gingivitis): \_\_\_\_\_ 11  Type II (3-4mm): \_\_\_\_\_  
12  Type III (4-6mm): \_\_\_\_\_ 13  Type IV (6+mm): \_\_\_\_\_  
14  Bleeding on probing: \_\_\_\_\_ 15  Recession: \_\_\_\_\_ 16  Thin Labial Tissue: \_\_\_\_\_  
17  Mobility: \_\_\_\_\_ 18  Furcation: \_\_\_\_\_ 19  Mucogingival Problems: \_\_\_\_\_  
**Tx Needed:** 20  CC (Prophy) 21  PT (RP) 22  SPT 23  Perio Referral: \_\_\_\_\_ 24  No Hyg in this office  
**Torus:** 25  None 26  Mandibular 27  Palatal  
**Tonsils:** 28  Normal 29  Moderate 30  Large  
**Caries:** 31  WNL 32  \_\_\_\_\_ Def. Fillings: 33  \_\_\_\_\_ 34  Will need Crowns: \_\_\_\_\_  
**Enamel Cracks:** 35  \_\_\_\_\_ **Decalcification/Stain:** 36  \_\_\_\_\_ **Ankylosis:** 37  \_\_\_\_\_  
**Fractured Teeth:** 38  \_\_\_\_\_ **Pits and Fissures:** 39  \_\_\_\_\_ **Cervical Erosion:** 40  \_\_\_\_\_

**024. MYOFUNCTIONAL EVALUATION**

1  Normal  
**Tongue Thrust:** 2  Anterior Unilateral: 3  R 4  L 5  Bilateral 6  Other \_\_\_\_\_  
**Tongue:** 7  Normal 8  Large 9  Scalloped 10  Short Ling.Frenum 11  Restricted  
**Mentalis:** 12  Normal 13  Hypertonic (dimpled) 14  Pronounced size and sulcus 15  Swallow facial grimace  
**Lips/upper:** 16  Normal 17  Hypertonic 18  Flaccid 19  Short  
**Lips/lower:** 20  Normal 21  Hypertonic 22  Flaccid  
**Hard Palate:** 23  Normal 24  High 25  Low & Flat 26  Asymmetrical  
**Tongue posture:** 27  Normal 28  Low 29  Between Teeth 30  Against upper/lower teeth  
**Masseter Contraction:** **Left:** 31  Normal 32  Strong 33  Weak **Right:** 34  Normal 35  Strong 36  Weak  
**Muscle Attach:** 37  Labial frenum heavy 38  Referral to Periodontist or Surgeon 39  Possible referral for MFT

**025. DENTAL FINDINGS FROM CASTS IN OCCLUSION (Hand-held)**

**Overjet:** 1  Acceptable 2  Moderate \_\_\_\_\_ mm 3  Severe \_\_\_\_\_ mm 4  Edge to Edge 5  Class III  
**Overbite:** 6  Acceptable **Anterior:** 7  Closed/Mod \_\_\_\_\_ % 8  Severe \_\_\_\_\_ % 9  Open  
**Posterior:** 10  Right Open 11  Left Open 12  Bilateral Open  
**Crossbite (tooth #):** 13  None 14  Anterior \_\_\_\_\_ 15  Right Post. \_\_\_\_\_ 16  Left Post. \_\_\_\_\_ 17  Bilateral  
**Buccal Crossbite:** 18  None 19  Right \_\_\_\_\_ 20  Left \_\_\_\_\_ 21  Bilateral  
**Midlines:** 22  Coincident **Upper:** 23  Normal 24  Right \_\_\_\_\_ mm 25  Left \_\_\_\_\_ mm  
**Lower:** 26  Normal 27  Right \_\_\_\_\_ mm 28  Left \_\_\_\_\_ mm  
**ArchForm: Normal:** 29  Upper 30  Lower 31  Both  
**Upper:** 32  Constricted 33  Enlarged 34  Asymmetrical 35  Due to retained E  
**Lower:** 36  Constricted 37  Enlarged 38  Asymmetrical 39  Due to retained E  
**Alignment: Normal:** 40  Upper 41  Lower 42  Both  
**Crowding: Upper:** 43  Slight (1-2mm) \_\_\_\_\_ 44  Mod. (3-5mm) \_\_\_\_\_ 45  Severe (>6mm) \_\_\_\_\_ 46  Spaced  
**Lower:** 47  Slight (1-2mm) \_\_\_\_\_ 48  Mod. (3-5mm) \_\_\_\_\_ 49  Severe (>6mm) \_\_\_\_\_ 50  Spaced  
**Rotation:** 51  Teeth # \_\_\_\_\_ **Tipped Teeth:** 52  Teeth # \_\_\_\_\_  
**Depressed:** 53  Teeth # \_\_\_\_\_ **Wear Facets:** 54  Teeth # \_\_\_\_\_  
**Tooth Size Discrepancy:** 55 Large  Teeth # \_\_\_\_\_ 56 Small  Teeth # \_\_\_\_\_  
**Curve of Spee:** 57  Normal 58  Flat 59  Moderate 60  Excessive 61  Stepped 62  Reverse

**026. GNATHOLOGICAL FINDINGS FROM CASTS MOUNTED IN CENTRIC RELATION**

- C.R. Coincidence:** 1  Yes 2  No
- Displacement:** 3  Vertically \_\_\_\_\_mm 4  Anteriorly \_\_\_\_\_mm  
 5  Right \_\_\_\_\_mm 6  Left \_\_\_\_\_mm
- Centric Prematurities:** 7  None 8  Teeth # \_\_\_\_\_
- R. Lat. Prematurities:** 9  None 10  Teeth # \_\_\_\_\_
- L. Lat. Prematurities:** 11  None 12  Teeth # \_\_\_\_\_
- Asymmetries (acc. Kernott):** 13  None
- Occlusal Plane Slope:** (F1-F6, R&L) 14  Right Side High \_\_\_\_\_mm 15  Left Side High \_\_\_\_\_mm
- Occlusal Plane Cant:** (F3-F3, F6-F6) 16  Right Side Low \_\_\_\_\_mm 17  Left Side Low \_\_\_\_\_mm
- Forward Slant:** (A3-A3, A6-A6) 18  Upper Right Side \_\_\_\_\_mm 19  Upper Left Side \_\_\_\_\_mm  
 20  Lower Right Side \_\_\_\_\_mm 21  Lower Left Side \_\_\_\_\_mm
- Shift (Collapse):** (S6, S3 and Pont's) 22  Maxilla Left \_\_\_\_\_mm 23  Maxilla Right \_\_\_\_\_mm  
 24  Mandible Left \_\_\_\_\_mm 25  Mandible Right \_\_\_\_\_mm

**027. RADIOGRAPHIC FINDINGS**

**Widened Periodontal Space**

- 1  None 2  Slight \_\_\_\_\_ 3  Moderate \_\_\_\_\_ 4  Severe \_\_\_\_\_

**Root Considerations:**

- 5  Short Roots \_\_\_\_\_ 6  Dilacerated Roots \_\_\_\_\_ 7  Conical Roots \_\_\_\_\_

**Miscellaneous Response:**

- 8  None 9  Hypercementosis \_\_\_\_\_ 10  Osteosclerosis \_\_\_\_\_  
 11  Root Resorption \_\_\_\_\_ 12  Pulpal Calcification \_\_\_\_\_

**Alveolar Bone Loss:**

- 13  None 14  Slight \_\_\_\_\_ 15  Moderate \_\_\_\_\_ 16  Severe \_\_\_\_\_ 17  Very Severe \_\_\_\_\_  
 18  Horizontal \_\_\_\_\_ 19  Vertical \_\_\_\_\_  
 20  Irregular \_\_\_\_\_ 21  Infra Bony \_\_\_\_\_ 22  Furcation \_\_\_\_\_

**Other:**

- 23  Caries \_\_\_\_\_ 24  Supernumerary Teeth \_\_\_\_\_ 25  Root Morphology Abnormal \_\_\_\_\_  
 26  Apical Involvements 27  Unerupted Teeth \_\_\_\_\_ 28  Root Canal Filling \_\_\_\_\_  
 29  Cysts \_\_\_\_\_ 30  Missing \_\_\_\_\_ 31  Pulpotomies \_\_\_\_\_  
 32  Irregular Eruption Pattern \_\_\_\_\_ 33  Impacted Teeth \_\_\_\_\_ 34  Bridge \_\_\_\_\_  
 35  Overhangs \_\_\_\_\_ 36  Open Contacts \_\_\_\_\_ 37  Poor Contacts \_\_\_\_\_ 38  Extruded \_\_\_\_\_  
 39  Open Margin \_\_\_\_\_

**Eruption Pattern:**

- 40  Normal 41  Early 42  Late

**TMJ Xray:**

- 43  Transcranial 44  Tomo 45  Panograph
- Normal: 46  Right 47  Left
- Anterior Displacement: 48  Right 49  Left Osteoarthritic Change: 62  Right 63  Left
- Posterior Displacement: 50  Right 51  Left Sclerosis: 64  Right 65  Left
- Superior Displacement: 52  Right 53  Left Osteoporosis: 66  Right 67  Left
- Inferior Displacement: 54  Right 55  Left Flattened Condyle: 68  Right 69  Left
- Loss of Motion: 56  Right 57  Left Flattened Eminence: 70  Right 71  Left
- Subluxation: 58  Right 59  Left Fossa Depth, Shallow: 72  Right 73  Left
- Dislocation: 60  Right 61  Left Lipping of Condyle Head: 74  Right 75  Left



028. CEPHALOMETRIC FINDINGS

- Horizontal Skeletal Pattern: 1  Class I 2  Class II (T) 3  Class III (T)
- Vertical Skeletal Pattern: 4  Neutral 5  Open Bite (T) 6  Deep Bite (T)
- Face Height: 7  Lower Ant Short 8  Lower Ant Long 9  Short Ramus 10  Long Ramus
- Growth Direction: 11  Neutral 12  Clockwise 13  Counterclockwise
- Maxilla Length: 14  Normal 15  Long 16  Short
- Maxilla to Cranium: 17  Normal 18  Anterior 19  Posterior
- Mandible Length: 20  Normal 21  Long 22  Short
- Mandible to Cranium: 23  Normal 24  Anterior 25  Posterior
- Upper Incisor Angulation: 26  Acceptable 27  Procumbent 28  Upright 29  Ling inclined
- Upper Incisor Vertical Position: 30  Acceptable 31  Long 32  Short
- Lower Incisor Angulation: 33  Acceptable 34  Procumbent 35  Upright 36  Ling inclined
- Lower Incisor Vertical Position: 37  Acceptable 38  High 39  Low
- Chin Button: (Po-NB 2-5mm) 40  Average 41  Large 42  Small
- Naso-Labial Angle: 43  Acceptable 44  Obtuse 45  Acute
- Airway: **Lateral** 46  Enlarged Adenoids (space <6mm)\_\_\_\_\_ 47  Tonsils (space <10mm)\_\_\_\_\_
- A - P** 48  Turb. Enlargement  R  L  Both 49  Septal Deviation  R  L  Both

029. CLASSIFICATION / DIAGNOSIS

- Phase:  I  II  Primary  Early Mixed  Late Mixed  Early Permanent  Permanent
- Skeletal:  Class I  Class II  Class III  Open Bite  Deep Bite  Tendency
- Dental: **Molar Class**  I  II  III Division  1  2  Open Bite  Deep Bite
- Subdivision:  R  L
- Cuspid Class**  I  II  III Subdivision:  R  L
- Overjet:  mild  mod  severe
- Crossbite: Anterior  U  L Posterior  R  L  Bilateral  Skeletal  Dental
- Alignment:  Spaced  Crowded  Mutilated  Asymmetrical **Midline Off:**  U  L
- Type:  Limited  Extraction  Non-Extraction
- Profile (E line):  Straight  Convex  Concave  Double Protrusion

030. TREATMENT RECOMMENDATIONS AND OBJECTIVES

040. PROBABLE APPLIANCES AND RETAINERS

050. TREATMENT PLAN SEQUENCE

060. COMMENTS

065. RECOMMENDATIONS FOR PREVENTION OF CAVITIES AND GUM DISEASE

070. FEE: 1  PHASE I \_\_\_\_\_ 2  PHASE II \_\_\_\_\_ MONTHS \_\_\_\_\_

3  EXTRA APPLIANCE FEES: RETAINER(S) \_\_\_\_\_ 4  OTHER \_\_\_\_\_