



Name: _____

Date: _____

Functional Score: _____ / 20

Pain Scale Score: _____ / 100

FOR THERAPIST USE ONLY

TMJ FUNCTIONAL TOOL

When your *TMJ* hurts, it may be difficult to do some of the things you normally do.

This list contains sentences that people have used to describe themselves when they have TMJ pain. When you read them, you may find that some stand out because they describe you today. As you read the list, if a sentence does not describe you, then leave the space blank and go on to the next one. **Remember** only check the sentence if you are sure that it describes you today.

- ___ 1. I have chronic headaches.
- ___ 2. I clench or grind my teeth.
- ___ 3. I have throbbing or swishing in the ears or earaches.
- ___ 4. I am under a lot of stress.
- ___ 5. I have clicking or popping of the jaw while eating, talking, singing or yawning.
- ___ 6. I have pain and difficulty in opening my mouth very wide.
- ___ 7. I have shoulder pain and stiffness.
- ___ 8. I have face and neck pain.
- ___ 9. I have tooth pain with no apparent cause such as decay.
- ___ 10. My jaw locks in an open or closed position.
- ___ 11. My jaw hurts when I get up in the morning..
- ___ 12. I had recent a whiplash injury or blow to the head or jaw.
- ___ 13. My hearing is sensitive or I have a hearing loss.
- ___ 14. My back hurts.
- ___ 15. I have difficulty swallowing.
- ___ 16. I have sinus trouble.
- ___ 17. I feel dizzy.
- ___ 18. I have poor coordination.
- ___ 19. I often feel fatigued.
- ___ 20. I have numbness in my arm.

VISUAL ANALOG PAIN SCALE

Make a mark (/) across the line which describes your pain between
“No pain at all” and “Worst pain imaginable.”

No pain at all

Worst pain imaginable
