

- 1) What IS the correct sequence of layers in the surface of the functional zone of the mandibular condyle
1. Articular surface
 2. articular zone
 3. proliferative zine
 4. fibrocartilage zone
 5. calcified cartilage zone
 6. subchondral bone
- a. 1,2,3,4,5,6
b. 2,1,3,4,5,6
c. 4,1,2,3,5,6
d. 2,1,4,3,5,6
e. 1,2,4,3,6,5
- 2) The central retrodiscal area of the TMJ in adults has loose connective tissue and blood vessels.
- a. **True**
b. False
- 3) TMJ is considered a compound joint because the articular disc functions as a nonossified bone
- a. the statement is true but the reason is false
b. the statement is false but the reason is true
c. **both the statement and the reason are true**
d. both the statement and the reason are false
- 4) Which ligament is responsible for dividing the joint into the superior and inferior joint cavities
- a. capsular
b. temporomandibular
c. **discal (collateral)**
d. dicomalleolar
e. sphenomandibular
- 5) The inner surface fo the articular capsule is covered by the :
- a. temporamandibular ligament
b. sphenomandibular ligament
c. **discal ligaments**
d. retrodiscal tissue
e. **synovial membrane**

1. Complete mandibular stabilization appliances are very effective, but in class we identified one major disadvantage, name it and clinically how to prevent the problem

As the splint wears, heavy contact may occur on linguals of maxillary teeth
Appliance must be adjusted more frequently than a maxillary appliance

2. List the disadvantages of a mandibular posterior-only coverage Stabilization Appliance

Must have a second appliance to cover all the teeth to prevent eruption, especially if patient is wearing in more than just when sleeping
Possible intrusion of mandibular posterior teeth

3. What are the major problems with Anterior Repositioning Appliances (use with acute dislocation with reduction and pain after trying a S.A.)

Permanent joint changes
Intrusion of posterior teeth (with a posterior only appliance)
Supra-eruption (with a posterior only appliance)

4. List the 5 theories of why S.A. work and

Decrease Muscle Activity
Alteration of the occlusal condition
Alteration of the condylar position
Increased peripheral input to the CNS
Placebo affect
Cognitive Awareness
Increase in Vertical dimension of Occlusion

5. List the reasons for Occlusal Appliance Therapy

Decrease Parafunctional activity
Treat Muscle hyperactivity
 Local muscle soreness
 Retrodiscitis secondary to trauma
 Reduced force to damaged tissues
Fixed prosthodontics with the treatment position at Centric Relation

6. List the examples given in class lecture for Anterior Deprogrammers without occlusal substructure

Hawley Retainer, Anterior Stop, NTI

7. A patient reports to your office with clicking on opening and closing, with no pain. At what point would you consider surgery to the patient.

Primary treatment is to get rid of pain with a S.A., then go to surgery if quality of life is affected
Only when pain and dysfunction are causing a poor quality of life in the patient and all reversible forms of treatment have been tried and have failed

1. A patient complains of pain in his TMJ's after an auto accident. Your exam reveals bilateral opening and closing clicks, which the patient states happened immediately after the accident. Your recommended treatment is?

Condition-Acute disc dislocation with Reduction
Treatment-Stabilization Appliance

2. Your patient complains of an inability to open wide, with no pain, you measure opening of 25 mm. Your exam also finds that she remembers a time, several years ago, when her joints used to click, but now do not. Your recommended treatment is?

Condition-Chronic displaced disc without reduction
Treatment-Monitor (S.A. only if problem associated with bruxing)

3. You complete a restoration that took you 3 hours to complete because your preceptor went out for coffee. When the patient attempts to close, they can't and are in pain. Your recommended treatment is?

Condition-Spontaneous dislocation
Treatment-Attempt manual reduction

4 and 5. In class last week we discussed 2 major disadvantages in using a soft, "rubbery," "bleaching type" mouth guard for bruxing patients, name them.

Increases bruxing
May intrude teeth

TMD- Dr. Fox
Quiz #3 12 September 2005

1. A patient reports to your office with the following symptoms: Pain on palpation of the left and right temporalis muscle, pain on palpation of right masseter muscle and body temperature of 101 degrees F. Based on last weeks lecture the most likely diagnosis would be? *Vasculitis or Temporal Arteritis*
2. In a video clip Dr. Okeson palpated the patients masseter muscle and described extremely tender localized areas that cause heterotopic pain. These are called *Trigger Points*
3. Scientific literature has not shown that occlusal problems are a primary etiological factor in TMD, but in class we discussed 5 occlusal problems that have strong occlusion/TMD associations. Name 3

Extensive vertical overlap

Reduced overbite (anterior open bite)

>5mm horizontal overlap

Unilateral maxillary posterior lingual crossbite

>5 missing posterior teeth

Name Amy Richter # 552

Quiz 1
September 8, 2003

1. A patient presenting to your office complaining of inability to open their jaw 3 days after third molar removal, may be suffering from injury to

- a) Lateral pterygoid muscle
 b) Temporalis muscle
 c) Lateral TMJ ligament
 d) Mylohyoid muscle

2. What is the functional role of the Lateral TMJ ligament?

- a) Resist downward and forward movement
 b) Resist downward and lateral movement
 c) Resist downward and backward movement
 d) Moves the mandible to the opposite side

3. If a patient suffers an injury to the zygomatic arch there maybe pain in both the temporalis and masseter muscles.

- a) True
 b) False

4. Proprioceptive information is received from which structure associated with jaw movements.

- a) Muscle spindles in muscles of mastication
 b) Sinus mucosal surfaces
 c) Periodontal Ligament
 d) Tongue

- a) 1, 2 and 3
 b) 1 and 3
 c) 2 and 4
 d) 4 only

5. The normal lateral movement of the mandible as measured at the mid line is a range of 9-10mm

6. As described in class, what 2 muscles are extremely commonly involved in temporomandibular disorders
temporalis m. & masseter m.

7. Vasculitis in a TMD patient typically would be seen in what two areas? Facial a.
Temporal artery (headaches) & retroorbital (ophthalmic artery)

8. A patients Maximum intercuspation is determined what structure(s) teeth. and centric relation position is determined by what structure(s) Condyle, articular eminence + fossa + disks

9. What ligament limits extreme protrusive and lateral movements of the TMJ?

stylomandibular ligament

10. Which Lamina, of the Posterior attachment of the Bilaminar Zone, may cause ear symptoms because is it's attachment to the TMJ Superior

10
10

TMD
Quiz 3 (10 Questions)
November 3, 2003

Name Amy Richter
Number SSZ

1. Throbbing, pounding pain is a characteristic of which disorder?
- a. ~~Trigeminal neuralgia~~
 - b. Tension type headache
 - c. Chronic sinus pain
 - d. Vascular headache (migraine or cluster)
 - e. Atypical odontalgia
2. The pain of tension type headache most commonly occurs in which location?
- a. Frontal and temporal - migraines
 - b. Temporal and occipital
 - c. Frontal and retro-orbital - migraines
 - d. Temporal and retro-orbital
 - e. Frontal and occipital
3. Which disorder is associated with an inflammatory etiology and presents with headache, generalized systemic signs and symptoms and masseter and temporal muscle weakness?
- a. Migraine with aura
 - b. Tension type headache
 - c. Acute sinusitis
 - d. Cluster headache
 - e. Temporal arteritis
4. What is the term for the focal neurologic signs and symptoms which precede the development of certain types of migraine headaches?
- a. Prodrome hunger, etc.
 - b. Trigger zones
 - c. Trigger points
 - d. Aura ← visual
 - e. Postdrome
5. Migraine headaches occur more frequently in women; patients with migraine headaches frequently have a family history of migraine headaches.
- a. Both statements are true
 - b. First statement is true; second statement is false
 - c. Both statements are false
 - d. First statement is false; second statement is true

6. Which adjectives best describe the type of pain, which occurs in tension type headaches?

- a. Dull, aching
- b. Sharp, shooting
- c. Burning, lancinating
- d. Throbbing, pulsing

7. What is the relationship between stress and migraines?

- a. ~~Migraines~~ most commonly occur during the stressful episode
- b. ~~Migraines~~ most commonly occur as a prodrome in the anticipation of the stressful episode
- c. Migraines occur most commonly after the stressful episode
- d. There is no well defined relationship between stress and migraines

8. What is the relationship between tricyclic antidepressants and the treatment of headaches?

- a. They are used to treat the depression, which commonly occurs in chronic headaches patients
- b. They are used to treat the anxiety, which frequently accompanies the migraine headache.
- c. They are used because they have an analgesic effect which is independent of the antidepressant effect. (Enant)
- d. The exact relationship between the use of tricyclics and headaches has not been established.

9. Which type of headaches occurs much more frequently in men?

- a. Migraine headache - ♀
- b. Tension-type headache
- c. Sinus headache
- d. Temporal arteritis
- e. Cluster headache

10. Osteoarthritis is part of the normal "wear and tear" phenomenon of aging. The condyle of an osteoarthritic patient generally has a sharpened pencil point appearance due to the remodeling of the bone. rheumatoid arthritis

- a. Both statements are true.
- b. Both statements are false.
- c. The first statement is true; the second statement is false.
- d. The first statement is false; the second statement is true.

8/10 +1

TMD
Quiz (5 questions)
November 17, 2003

Name Amy Richter
Number 552

1. What is the term for the focal neurologic signs and symptoms which precede the development of certain types of migraine headaches?
- a. Prodrome $\leftarrow ?$
 - b. Trigger-zones
 - c. Trigger-points \rightarrow
 - d. Aura \leftarrow
 - e. ~~Postdrome~~ \rightarrow
2. Parafunctional activity could cause local muscle soreness; a stabilization appliance is not the treatment of choice.
- a. Both statements are true
 - b. First statement is true, second statement is false
 - c. Both statements are false
 - d. First statement is false, second statement is true
3. A patient with displaced disc without reduction will have a limited opening which cannot be increased with assistance by the dentist.
- a. True
 - b. False
- muscle \rightarrow can force open*
4. It is important to have canine guidance on a stabilization appliance because it will increase masseter and temporal muscle activity.
- a. True
 - b. False
- \downarrow activity*
5. A patient has disc displacement without reduction on the right side. On opening the mandible, it will deviate to the right side.
- a. True
 - b. False

$\frac{5}{5}$

Quiz - 12-1-07

Amy Richter
552

Match drawings of disc and condyle position



① b

- a. Spontaneous dislocation
- ~~b.~~ Resting closed joint position
- ~~c.~~ Anteriorly dislocated disc with reduction
- ~~d.~~ Anteriorly dislocated disc without reduction
- e. Anterior functional displacement of the disc
- f. Normal position of disc in open position



② c



③ e



④ f



⑤ d

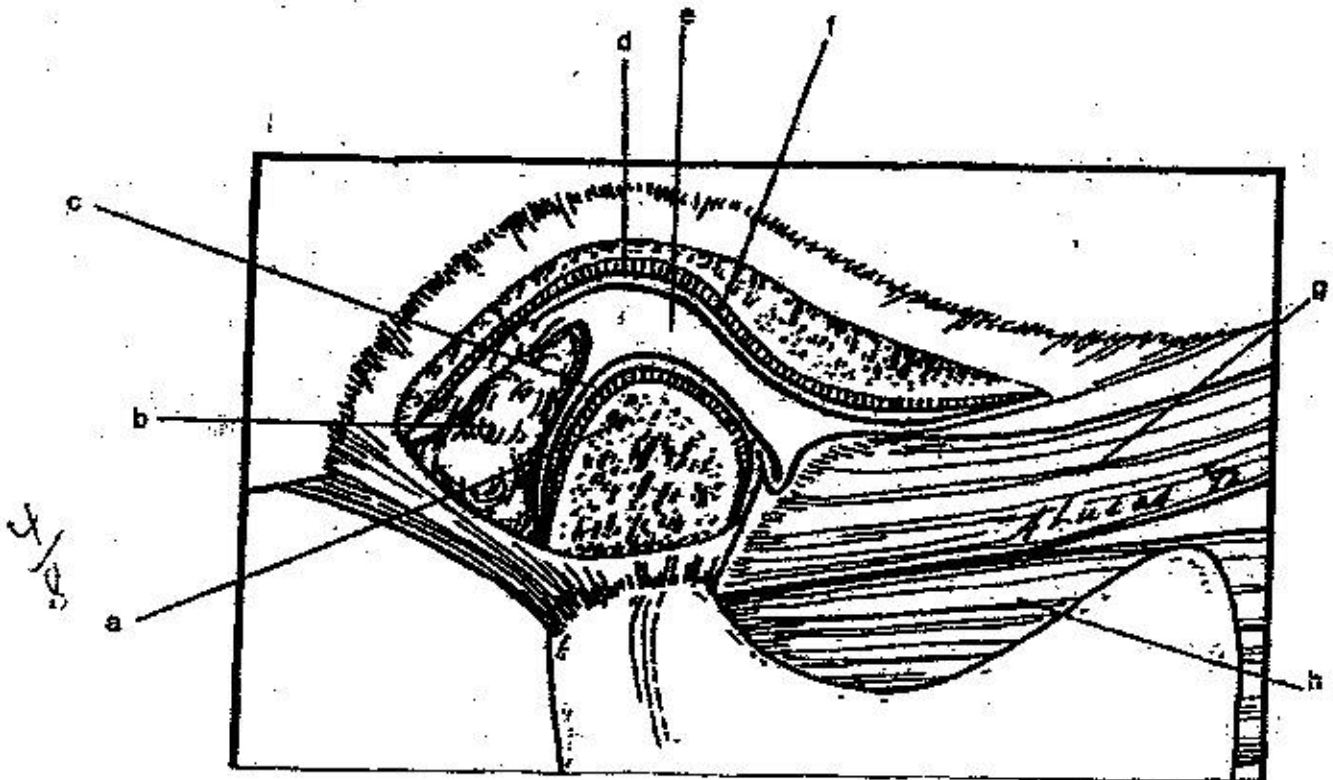
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Name Lisa Austin

TMD Quiz 1
June 2, 2003

Illustration below name the structures.

- A. condyle
- X B. articular disc retrodiscal tissue retrodiscal tissue
- C. inferior space
- D. superior space
- X E. synovial fluid ~~retrodiscal tissue~~ articular disc
- F. articular eminence
- X G. medial ptergoid lateral ptergoid - sup. belly lateral pter superior belly
- X H. lateral ptergoid - inf. belly lateral ptery inferior belly



Name Lisa Austin

TMD Quiz 2
June 4, 2003

1. What are the three guidelines for the clinical examination for TM Disorders?
- vertical opening
 - X lateral movement
 - ~~amount of overbite & overjet~~ amount of overbite & overjet

2. Dr. Fox reviewed 9 questions one should ask a patient when screening for TMD. Briefly state 3 of the questions.

- do you have trouble opening your mouth wide
- do you ^{jaw} make clicking noises upon opening
- do you have pain in your face when waking up?

3. Screening examination includes:

- facial symmetry
- muscle and joint palpation
- jaw movements
- All of the above

4. What is the normal range of lateral movement for an adult starting at the midline?

9-10 mm

5. Mrs. Jones was asked to open her mouth as part of an oral screening exam. She can open less than 30mm. without assistance. This amount of opening is

- within normal range
- less than normal range
- greater than normal range

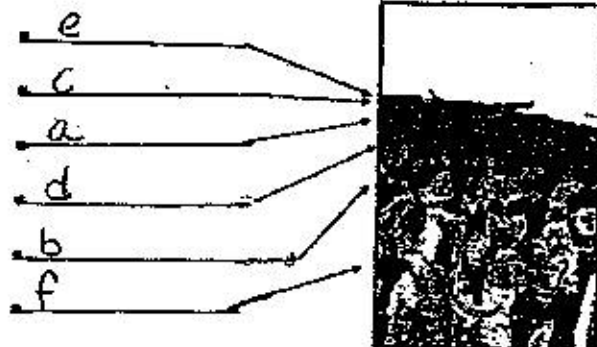
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Name Lisa Austin

TMD Quiz 3

June 9, 2003

- Which of the following ligaments limits protrusion?
 - a. Stylomandibular Ligament
 - b. Sphenomandibular Ligament
 - c. Inner horizontal portion of Temporomandibular Ligament
 - d. Collateral Ligament
- The collateral ligaments attach the medial and lateral borders of the disc to the poles of the condyle.
 - a. True
 - b. False
- The presence of dye in both the superior and inferior joint spaces on an arthrogram is indicative of what condition?
 - a. Disc displacement
 - b. Disc perforation
 - c. Synovitis
 - d. Rheumatoid arthritis
- TMD that is correctly identified should get better within :
 - a. 2 weeks
 - b. 1 month
 - c. 3 month
 - d. 6 month
- Fill in the correct sequence of layers in the functional zone of the mandibular condyle.
 - ~~a.~~ Calcified cartilage zone
 - ~~b.~~ Proliferative zone
 - ~~c.~~ Articular zone
 - ~~d.~~ Fibrocartilage zone
 - ~~e.~~ Articular surface
 - ~~f.~~ Subcondral bone/



X
4/5

Name Lisa Austin

TMD Quiz 4
June 11, 2003

1. Very briefly, describe the main difference between centric relation position and maximum intercuspation.

CR is a jaw position → the most superior anterior position of the condyles in the fossa, while MIP is a tooth position →

2. During normal opening, the condyle translates:

- a. Posteriorly
 b. Anteriorly
c. Doesn't move

where max. & mand. teeth contact each other

The disc:

- a. Rotates posteriorly
b. Rotates anteriorly
c. Stays in place
d. None of the above

3. Define:

Heterotopic Pain: source of pain does not equal

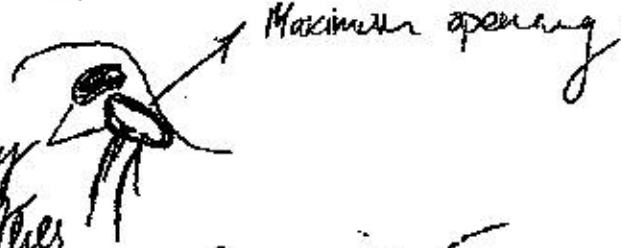
the site of pain - That is the origin of pain and where

4. In a class I situation all mandibular teeth have forces over the long axis of the tooth. The forces on maxillary anteriors and posteriors are horizontal.

It manifests in location are different

- a. True
 b. False

5. Using a sagittal view draw the condyle/disc/fossa when the mandible is in maximum intercuspation and maximum opening. If you use one drawing label maxi intercusp/opening.



They stay together
look at quiz 5

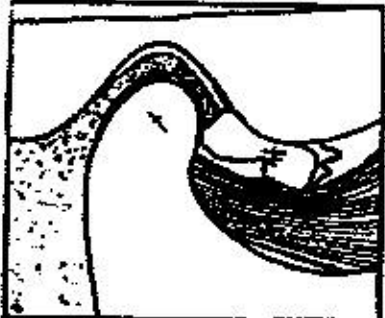
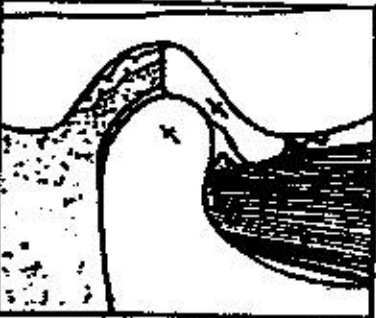
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Student Name: Lisa Austin

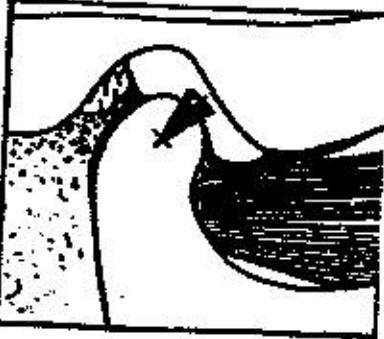
Introduction to TMD
Quiz 5 6-16-03

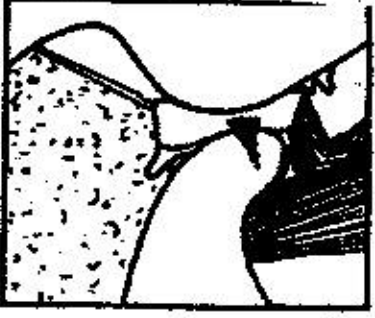
Match drawings of disc:condyle position

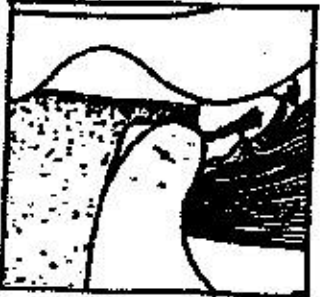
- A. Normal position of disc (in open position) 4
- B. Normal position of disc (in closed position) 3
- D. Functional displacement of disc 2
- E. Functionally dislocated position of disc (in open position) 5
- F. Functionally dislocated position of disc (in closed position) 1

1. F →  

2. D

3. B → 

4. A → 

5. E → 

5/5

Name Lisa Austin

IMD
Quiz 6
June 18, 2003

1. Which of the following is not an example of a primary headache?
 - A Migraine
 - b. Cluster
 - c. Tension type headache
 - d. Sinus headache

2. Most headaches require extensive diagnostic testing to arrive at an accurate diagnosis.
 - a. True
 - b. False

3. Which adjectives best describe the type of pain, which occurs in tension type headaches?
 - a. Dull, aching
 - b. Sharp, shooting
 - c. Burning, lancinating
 - d. Throbbing, pulsing

4. What is the relationship between stress and migraines?
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