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Age 19

Referred By Dr , her DDS of record

ii- Patient's Chief Concern (CC): Jaw popping and pain since 12 y/o

Summary:

Jaw wiggle to open.

R4a large disc anterior lateral dislocation

L4a large disc due lateral dislocation.

Both joints are mechanically unstable

Parafunctional grinding

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Problem List

Hyperesthesia . Central issue or overactive sympathetic nervous system R20.3

Severe Myalgia TMJ and neck muscles M79.1

Severe Arthralgia

Facial Pain R51.9

Mechanically dysfunctional jaw movements

Closed Lock, Jaw Cartilage, Intermittent, Mechanically dysfunctional M24.30

Complex Click

Jaw wiggle to open

Loud click vibrations

Moderate muscle bracing

Not able to stabilize disc with cranial distortion

Inability to efficiently chew due to TMJ disc biomechanics M99.80

Parafunctional Bruxing G47.63

Clenching

Grinding laterally and protrusively

Worn teeth #6,7,8,9, 22-27

Disharmonious Muscle Contraction Pattern, TMJ muscles. Occlusal Muscle Disharmony R29.898

Favorable List

Good muscle inhibition with anterior tooth contact Jaw click vibration was less with anterior stop

TMJ Imaging

CBCT 1-7-25

CBCT Scan Summary: Slight hypercalcification of both condyles in areas of load indicative of parafunction. Both condyles are distalized indicative of disc dislocation.

Swollen nasal tissue

Pulp Stones in teeth #3,14,15,18,31. Possible decay tooth #2.

Working Diagnosis: TMJ damage. Mechanically compromised Temporomandibular Joints.

Parafunctional grinding of teeth.

Recommendations:

xlear nasal spray.

Sleep airway screening

Bitewing radiograph of Upper right molars, evaluate for caries tooth #2

MRI of the TMJ.

MRI 1-7-25

MRI Scan Summary:

Both Right and Left Temporomandibular Joint disc are dislocated. Both recapture on opening.

R4a large disc anterior lateral dislocation

L4a large disc due lateral dislocation.

Working Diagnosis: Both joints are mechanically compromised.

Recommendations: Trial of parafunctional night guard to see if decreasing sleep bruxing can help joints function better in daytime.

<u>Co Therapist</u>		1
Referred by Dr		l
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Continue periodic dental cleanings with your current dentist.

Advise Dr Droter prior to any dental work.

BioPak Summary

JVA: Complex click both Right and Left, consistent.

Right click vibration follow by two left vibrations.

Slow velocity TMJ movement, deviated path.

EMG: Masseters not relaxing

EMG: Masseters strong on clenching, Good Muscle inhibition with anterior only tooth contact.

EMG: Muscle chewing pattern abnormal w/ Temporalis dominate

The above conditions are medical, and treatment of these conditions are medically necessary to restore and maintain quality of life.

Prognosis: Good with treatment, but having multiple sources of pain and dysfunction with duration longer than 3 weeks can be challenging.



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01/07/2025	Treatment Sequence/ Action Plan
	Black Type = needs done Green Type = Done Orange Type = No longer needed Red Type= Important
Goal of Treatment:	Smoother jaw opening. Quieter jaw clicking without pain
Limitations/Obstacle	es/Variables: Both joints "wobble".
Sleep airway screer	Prior to or During Phase 1
	After facial pain has resolved can also try Enovid Nasal spray of Upper right molars, evaluate for caries tooth #2 leeds Filling.
Dr Taylor to do filling	g #2 mesial, will need to adjust arm of Brux PAS night guard to fit new filling.
Goal: Decrease Pai Brux-PAS night Cold Laser The "Somebody" CE Hot/Cold/Hot 2-	Phase 1 n in the Temporomandibular Joints and muscles guard with lower essix. Some daytime wear rapies BD balm 3-5x a day 3x a day or as needed n exercises: forward and back, left and right, open close.
Occlusal adjustmen	Possible Phase 2
TMJ Rehabilitation of Atlas Therapy with A	Possible Treatment Needed orthotic Atlas Orthogonist Dr Marc Schwartz ous system is still hyperactive, will need to reevaluate.
Case Complete-	estimate time of treatment is 6 months

Future Dental needs:

Continue periodic dental cleanings with your current dentist.

Dr Droter should be consulted prior to any future dental work that will change your bite.

Occlusal (bite) Harmony Maintenance by Dr. Droter, Yearly Reevaluation