

# Enhancing Temporomandibular Disorder and Comorbidity Care in the Military Health System

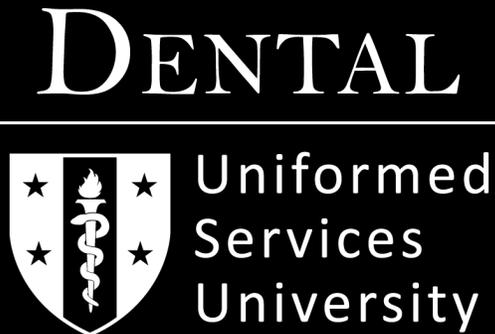
**Navy Cmdr. James Hawkins, D.D.S., M.S., M.Ed.-H.P.E.**

Specialty Leader, Navy Orofacial Pain

Naval Postgraduate Dental School

Bethesda, Md.

17 October 2024



# Presenter

**Navy Cmdr. James Hawkins, D.D.S., M.S., M.Ed.-H.P.E.**

Diplomate, American Board of Orofacial Pain

Diplomate, American Board of Dental Sleep Medicine

Chair, Orofacial Pain Center

Naval Postgraduate Dental School

Naval Medical Leader & Professional Development Command

Associate Professor, Uniformed Services University Postgraduate Dental College

Bethesda, Md.

# Navy Cmdr. James Hawkins, D.D.S., M.S., M.Ed.-H.P.E.



CDR Hawkins currently serves as Chair of the Orofacial Pain Center at the Naval Postgraduate Dental School (NPDS) in Bethesda, Md, as well as the Orofacial Pain Specialty Leader to the Navy Surgeon General. Originally from Columbus, Ohio, he attended Dental School at The Ohio State University, graduating with his Doctor of Dental Surgery (DDS) in 2010. In 2015, CDR Hawkins completed a residency in Orofacial Pain at NPDS and received a Master's Degree in Oral Biology from the Uniformed Services University of the Health Sciences. He next served as the sole Department of Defense Orofacial Pain Specialist in the Southwestern region of the United States while at Naval Medical Center San Diego from 2015-2018. In 2017, he received a certificate in Medical Acupuncture from Helms Medical Institute. Cmdr. Hawkins served as the Program Director for the TriService Orofacial Pain residency program from 2019-2022.

# Disclosures

- Dr. James Hawkins has no relevant financial or non-financial relationships to disclose relating to the content of this activity.
- The views expressed in this presentation are those of the author and do not necessarily reflect the official policy or position of the Department of Defense, nor the U.S. Government.
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# Disclosures (continued)

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# Polling Question 1

What is your field of medicine?

- A. Physician
- B. Dentist
- C. Allied Health Clinician
- D. Other

# Learning Objectives

At the conclusion of this activity, participants will be able to:

1. Summarize how to screen patients for temporomandibular disorders (TMD) and comorbidities.
2. Differentiate TMD diagnostic categories and risk categories.
3. Describe self-care techniques to help rehabilitate TMD.
4. Outline when and how to refer orofacial pain (OFP) and TMD patients.

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# Temporomandibular Disorders

Night  
Guard

Bite  
Adjustment

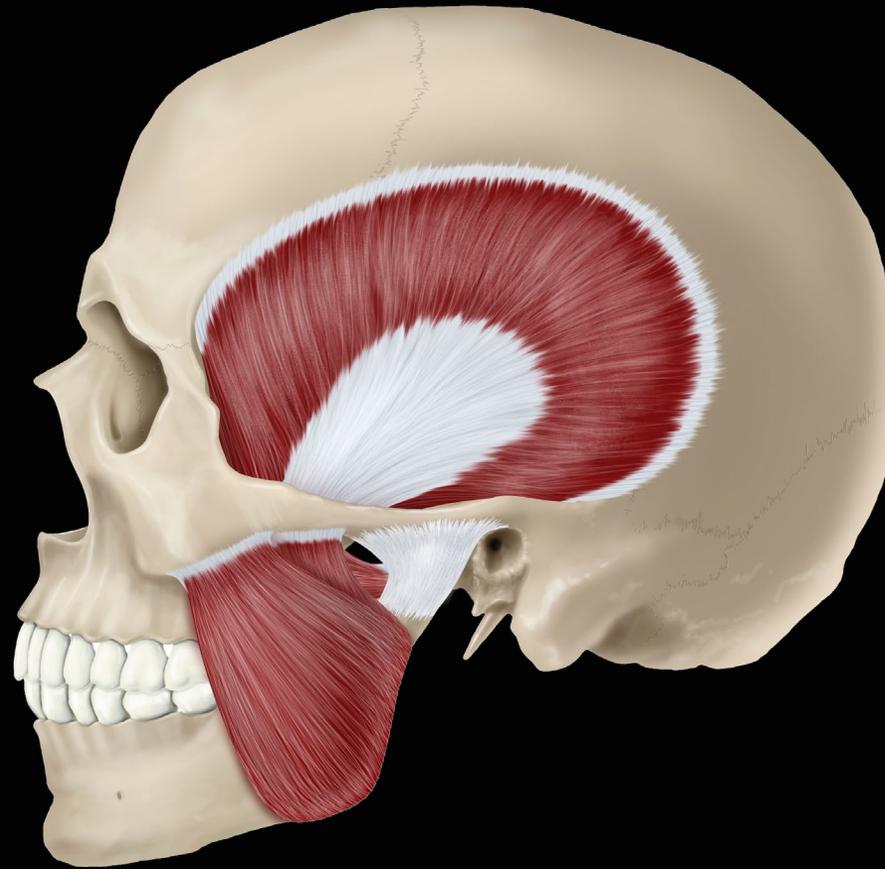


Botox  
or  
surgery

# Temporomandibular Disorders



# Temporomandibular Disorders (TMD)



More than 30 diagnoses

# Polling Question 2

Do you or someone you know have a TMD?

- Yes
- No

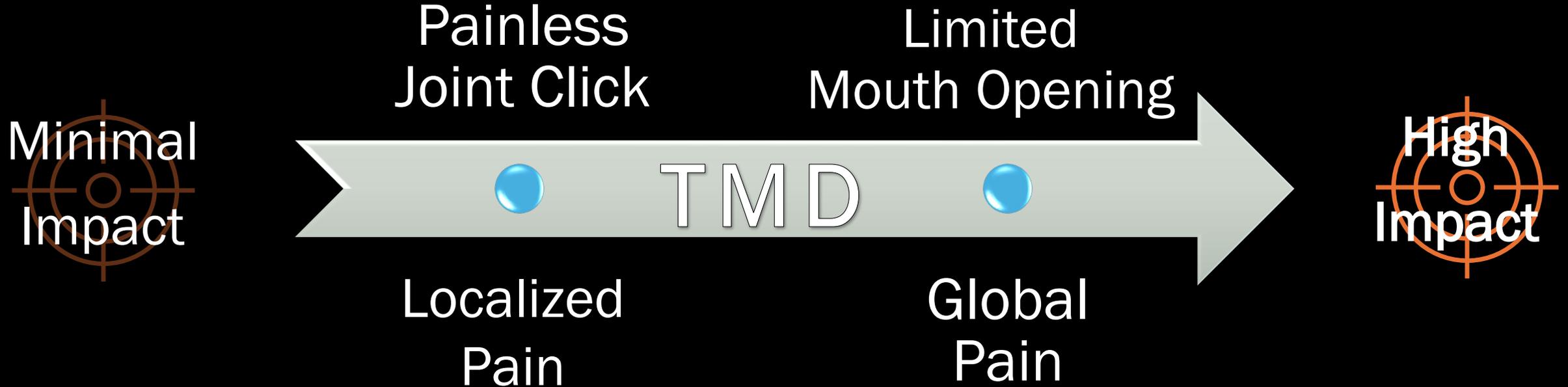
# Prevalence

~Twelve million U.S. adults

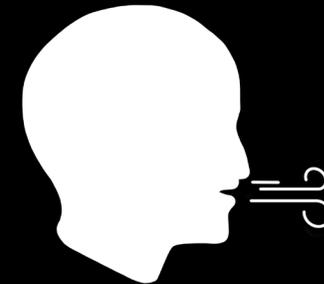
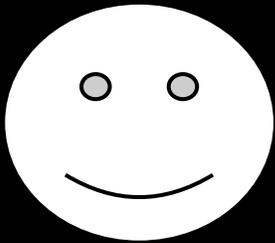
4% annual incidence

19% subclinical symptom incidence

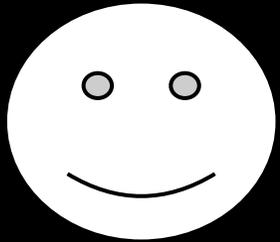
# Impact (1 of 4)



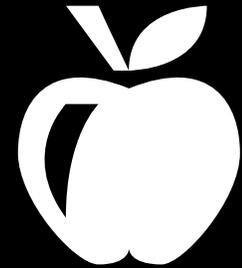
# Impact (2 of 4)



# Impact (3 of 4)



Focus & Concentration

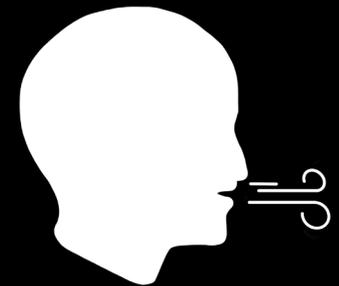


Operational mishaps

Wearing protective gear

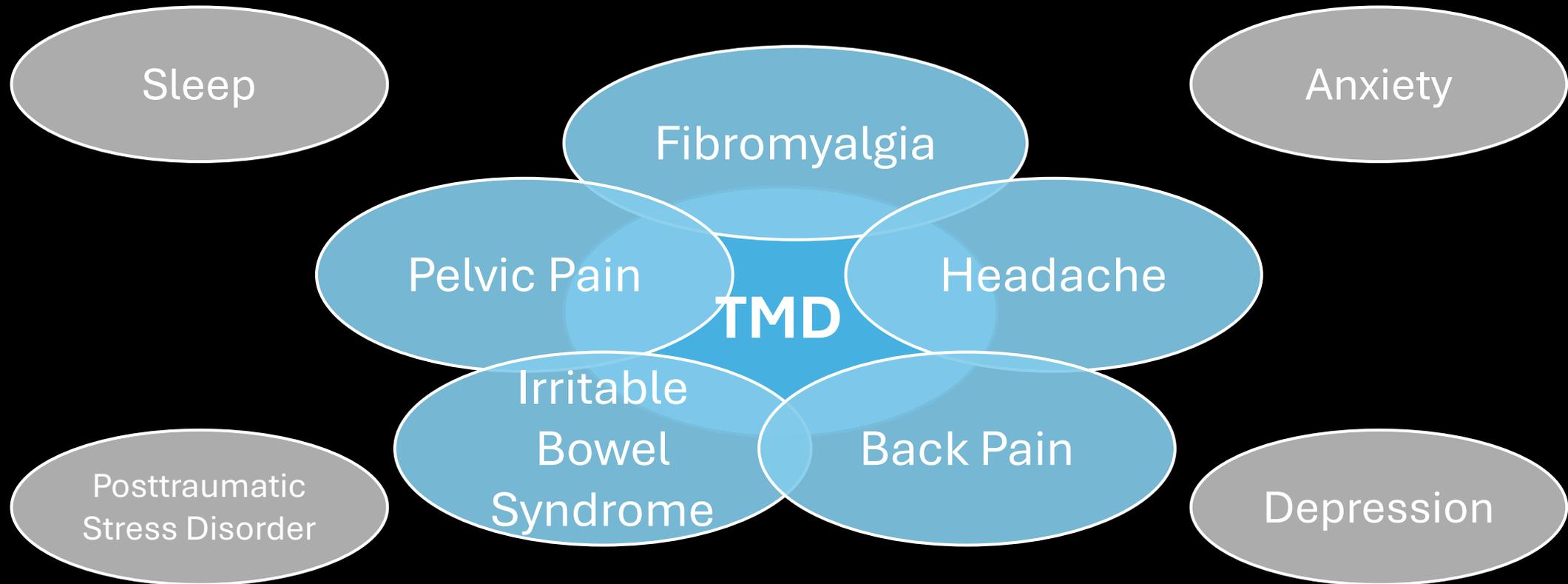


Briefings



Leadership

# Impact (4 of 4)



# Polling Question 3

Have you knowingly evaluated a patient with a TMD in your practice?

- Yes
- No

# Learning Objectives (#1)

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# Screening Your Patients

# Brief TMD Screener

In the last 30 days:

1. Which of the following best describes any pain in your jaw or temple area on either side?
  - No pain
  - Pain comes and goes
  - Pain is always present
  
2. In the last 30 days, have you had pain or stiffness in your jaw on awakening?
  - No
  - Yes

# Brief TMD Screener

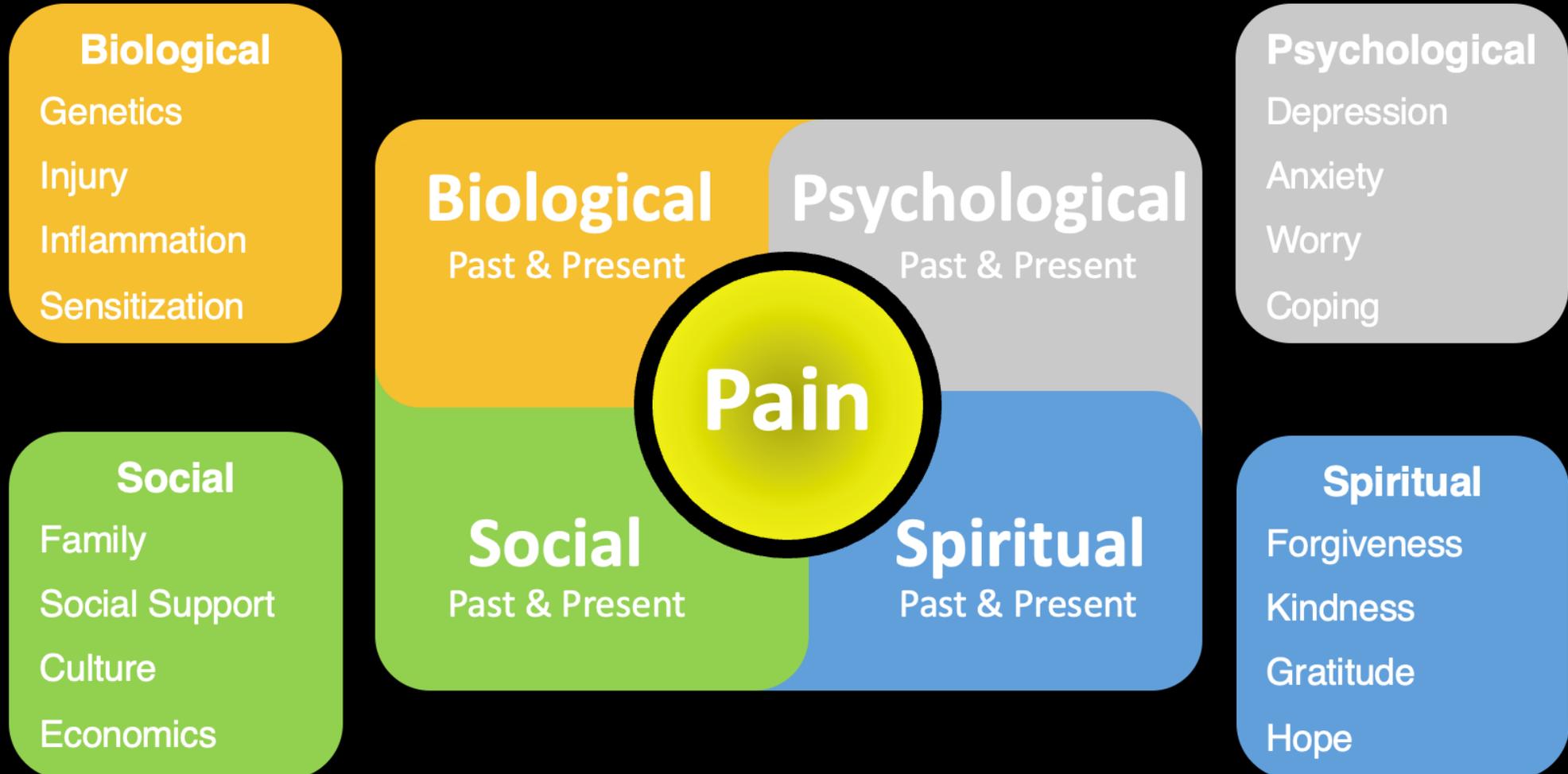
In the last 30 days:

3. Did the following activities change any pain (better or worse) in your jaw or temple area on either side?
- No
  - Yes
- a. Chewing hard or tough food
  - b. Opening your mouth or moving your jaw forward or to the side
  - c. Jaw habits (holding teeth together, clenching/grinding, or chewing gum)
  - d. Other jaw activities such as talking, kissing, or yawning

# TMD Screening



# BioPsychoSocialSpiritual Model



# TMD Impact

E njoyment

G eneral activity

O perational impact

0 1 2 3 4 5 6 7 8 9 10

# TMD Screening Resources



International Network for Orofacial Pain and Related Disorders Methodology  
A Consortium Focused On Clinical Translation Research

<https://ubwp.buffalo.edu/rdc-tmdinternational/>

TMD Symptom Questionnaire

Oral Behaviors Checklist

Jaw Function Limitation Scale

Graded Chronic Pain Scale

Patient Health Questionnaire (Depression)

Generalized Anxiety Disorder (Anxiety)

# TMD Screening Resources

## Sleep

Single-Item Sleep Quality Scale

Epworth Sleepiness Scale

STOP-BANG (OSA risk factors)

During the past seven (7) days, how would you rate your sleep quality?

0 = Terrible

1-3 = Poor

4-6 = Fair

7-9 = Good

10 = Excellent

STOP-BANG: Snoring,  
Tiredness, Observed apnea,  
Pressure, BMI, Age, Neck,  
Gender  
BMI: Body mass index  
OSA: Obstructive Sleep Apnea

# TMD Screening Resources

Sleep

Snoring

BMI

Tiredness

Age

Observed apneas

Neck size

Pressure

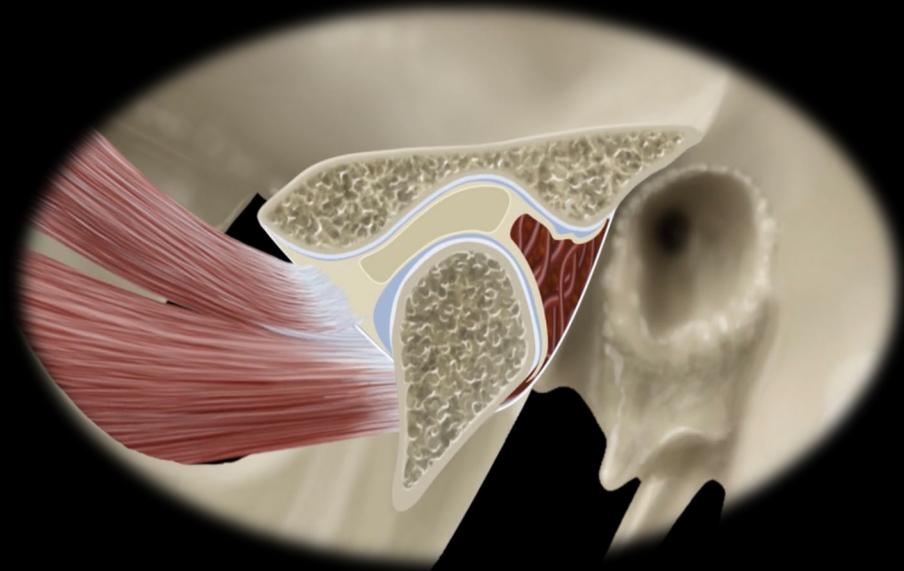
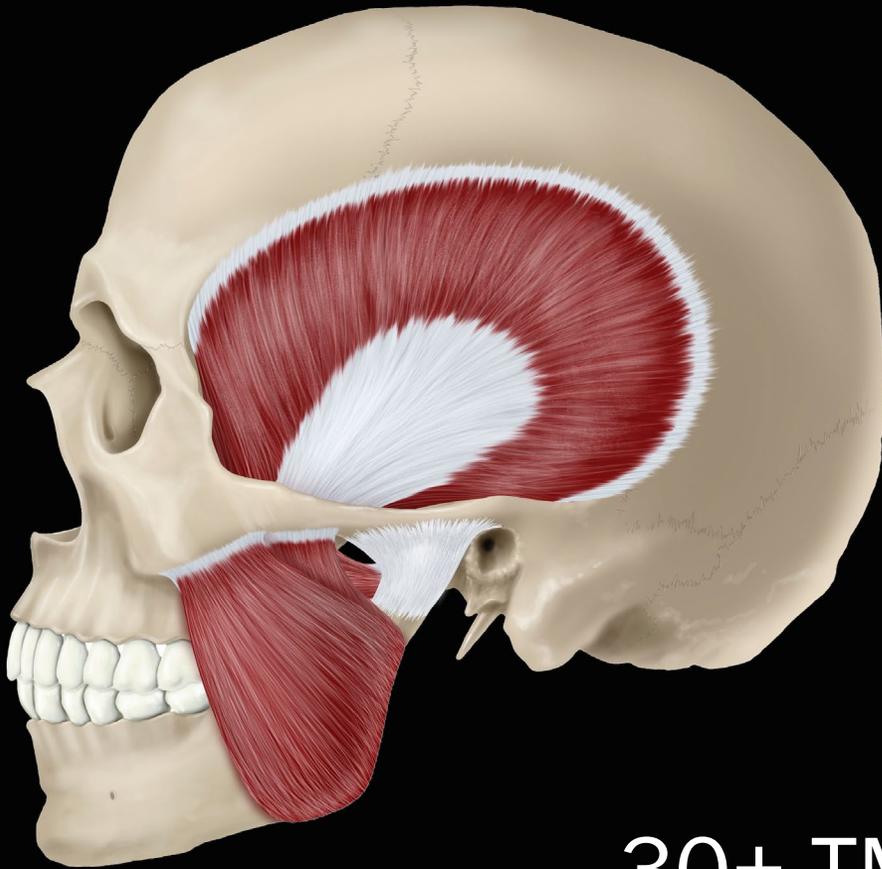
Gender

# Learning Objectives (#2)

At the conclusion of this activity, participants will be able to:

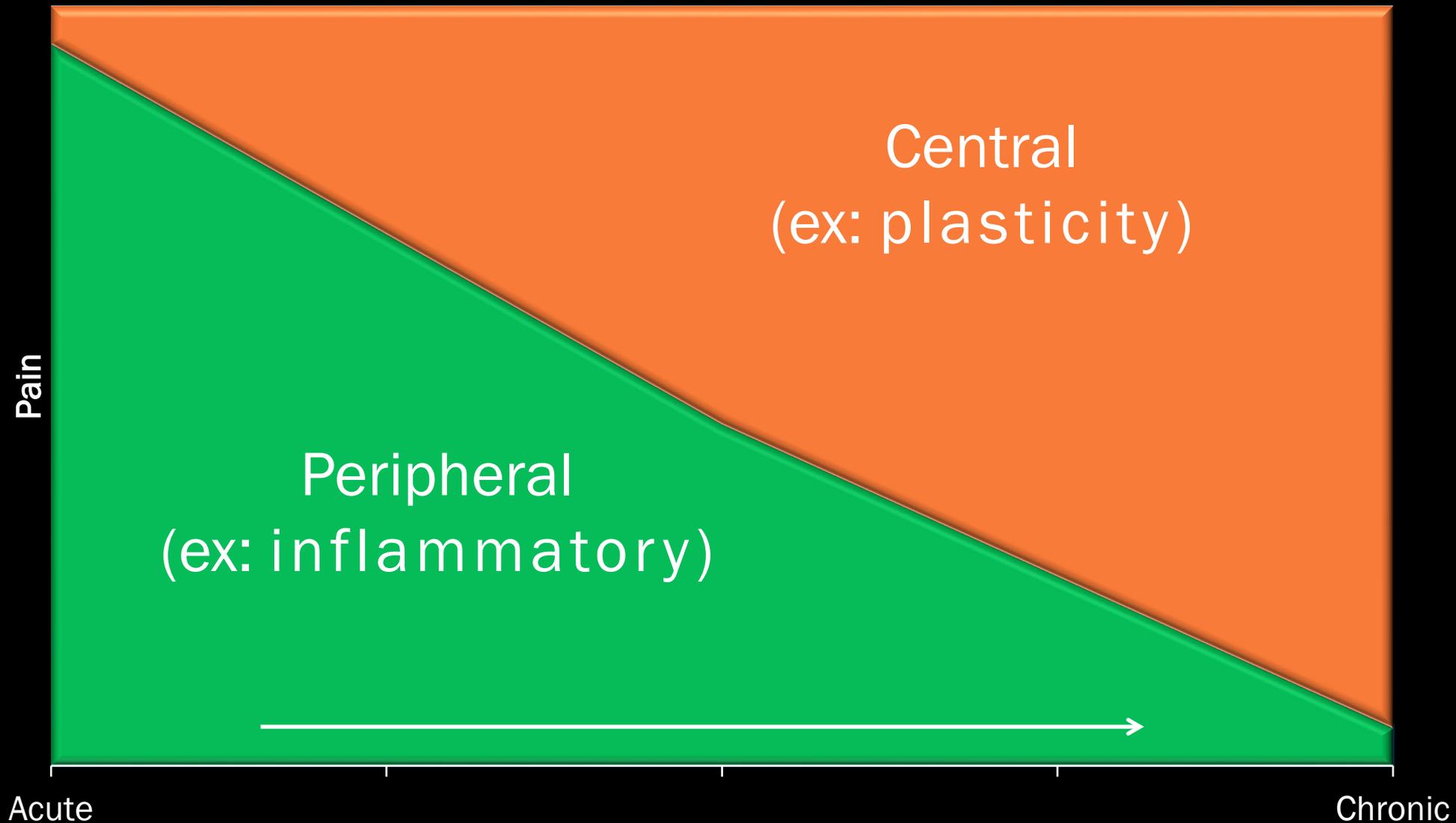
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# Diagnostic Categories



30+ TMD Diagnoses

# Acute or Chronic?



(Hawkins, 2023)

# Local or Widespread?

Myalgia / Temporomandibular  
Joint (TMJ)

Myofascial Pain

Fibromyalgia



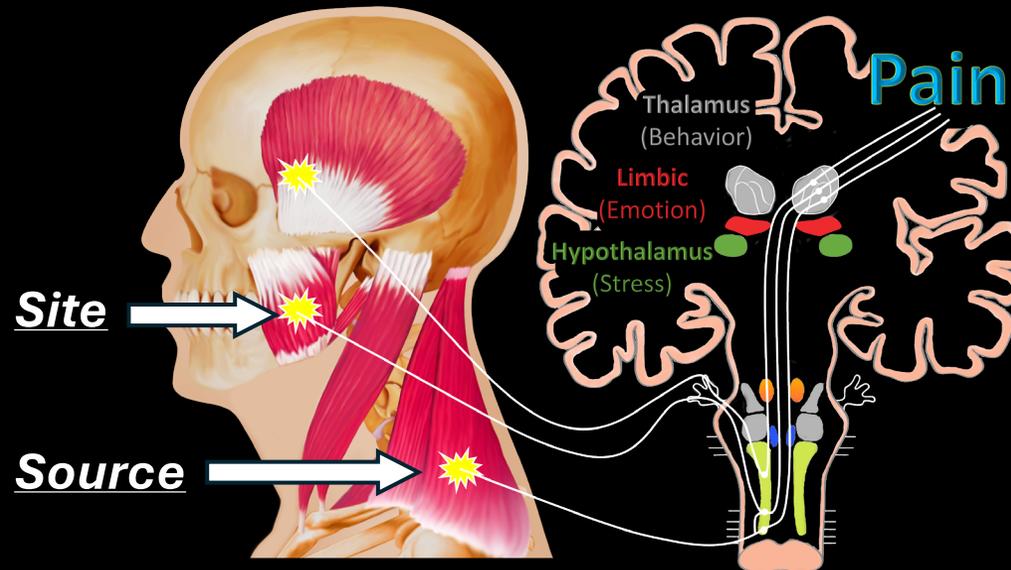
33%

# Local or Widespread?

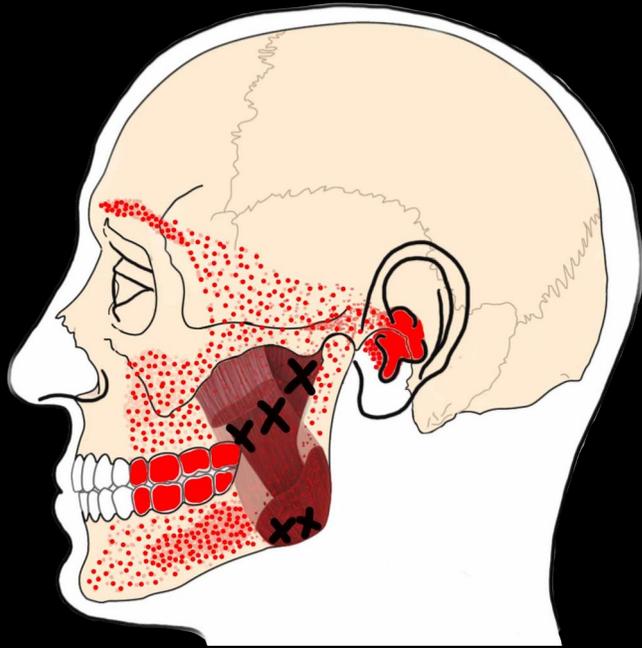
Myalgia

Myofascial Pain

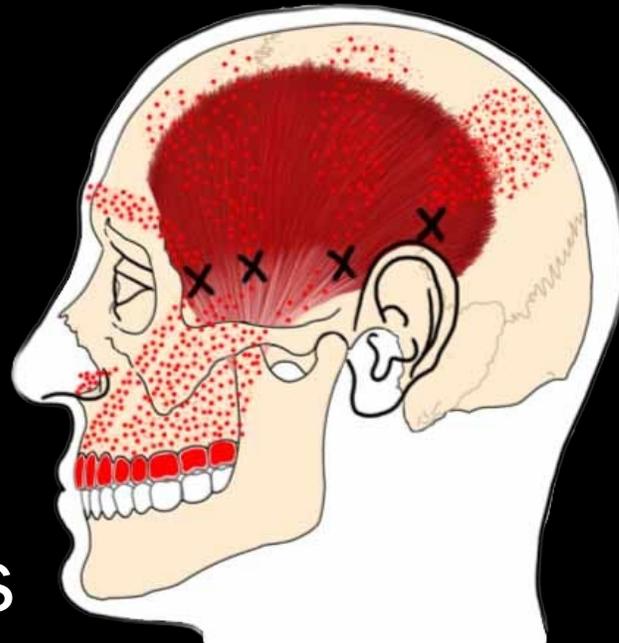
Fibromyalgia



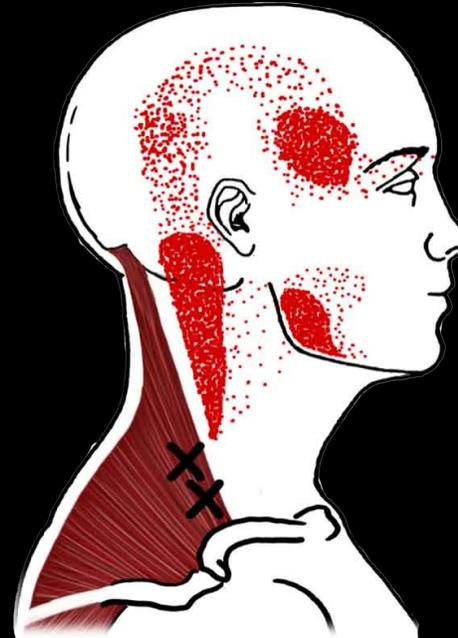
# Myofascial Pain



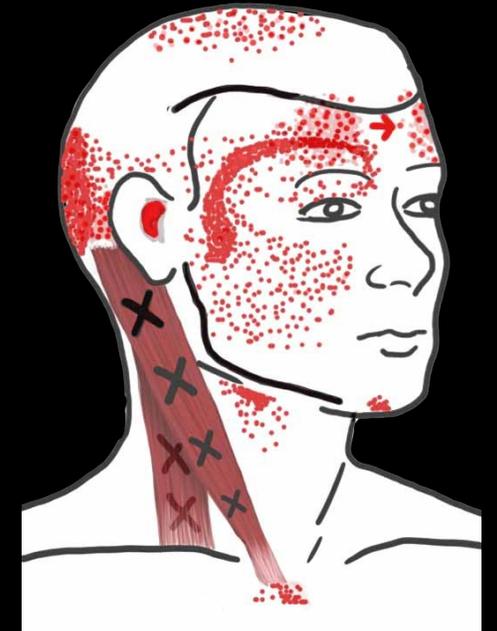
Masseter



Temporalis



Trapezius



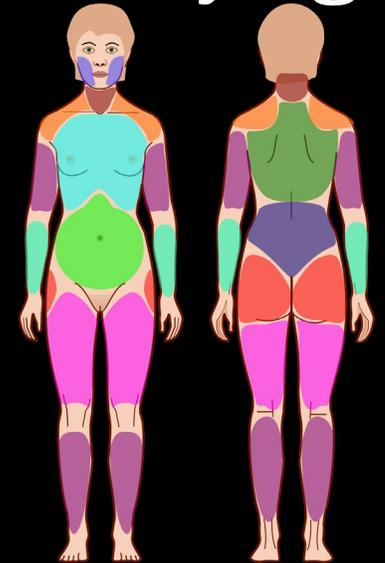
Sternocleido-  
mastoid muscle

# Local or Widespread?

Myalgia

Myofascial Pain

Fibromyalgia



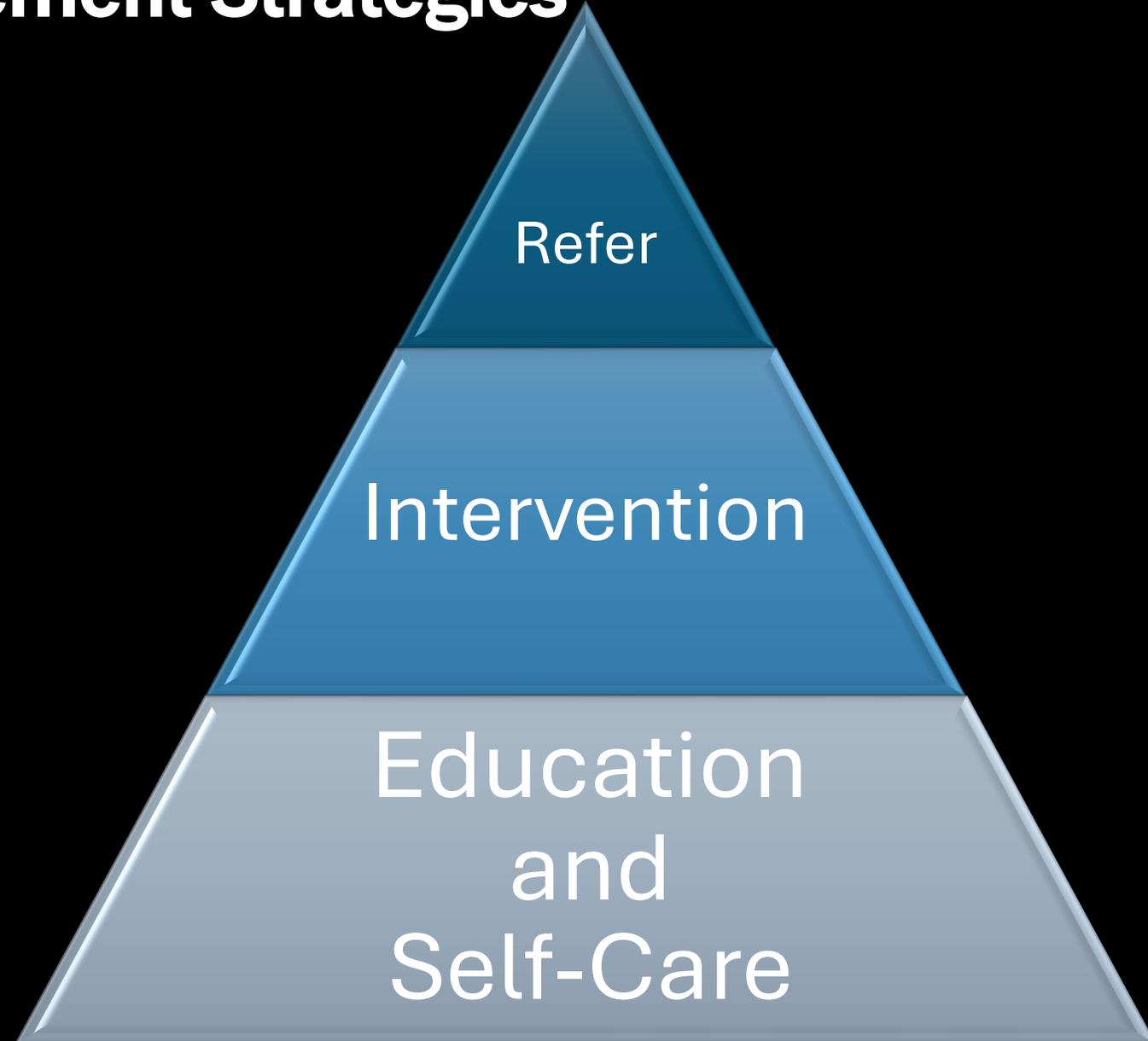
# Learning Objectives (#3)

At the conclusion of this activity, participants will be able to:

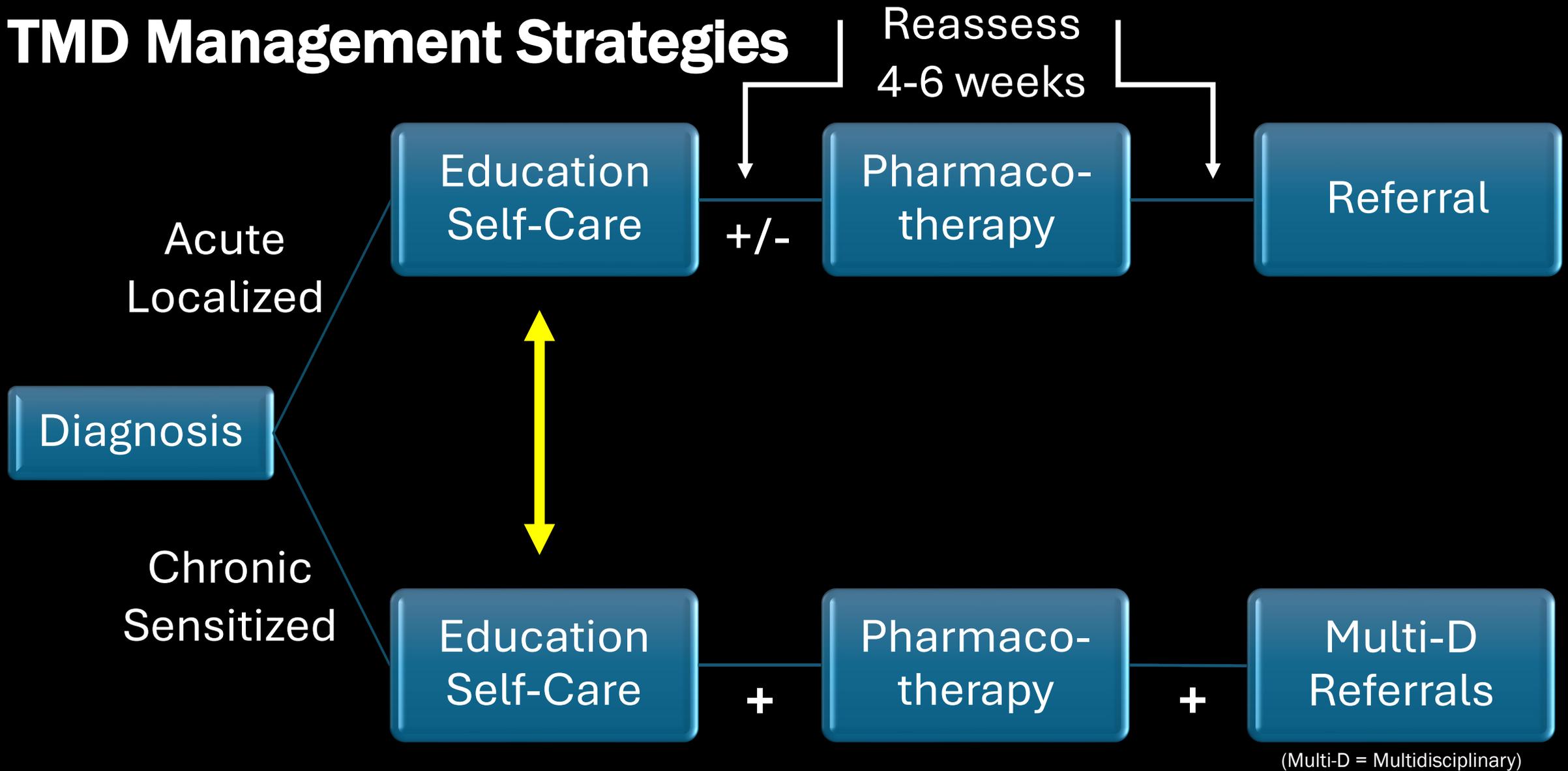
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# **TMD Management Strategies**

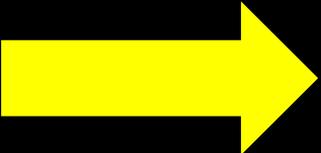
# TMD Management Strategies



# TMD Management Strategies



# Education



This work was prepared as part of official military duties.

**DIAGNOSIS**

**Muscle Pain** **TMJ Disorder**

**RISK FACTORS**

**MANAGEMENT**

- Rehabilitation involves a team approach between you and your doctors
- Referrals to appropriate specialists may be beneficial to your overall care

**Self-Care**

- Healthy lifestyle behaviors & modifying risk factors are very important

Maintain a Position of Rest    Practice Healthy Sleep Hygiene    Healthy Nutrition & Hydration    Minimize Stimulants    Breathe    Exercise

This document reflects the views of the authors and does not reflect the policies of the U.S. Government, Department of Defense, U.S. Navy, or Uniformed Services University of the Health Sciences.

# Self-Care

Position of Rest

Risk Factor Reduction

Improve Blood Flow

Sleep Hygiene

Diet Modification

Breathing

Exercise

# Position of Rest

Teeth Apart

Tongue Relaxed

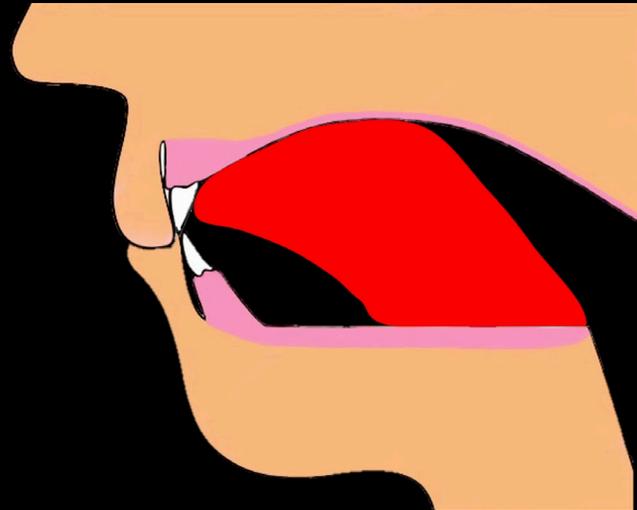
Face Relaxed

# Position of Rest

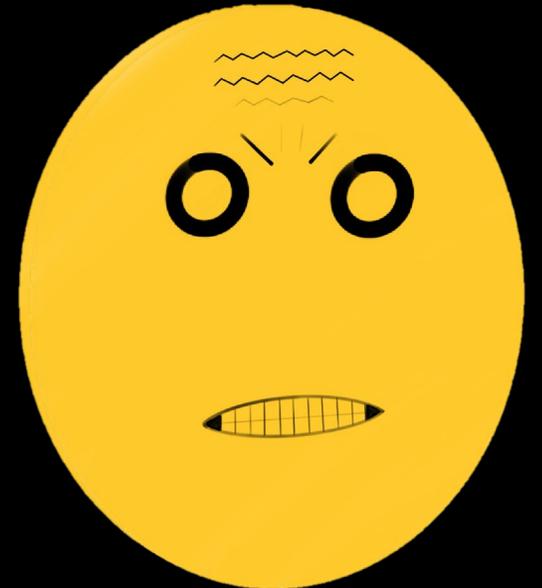
Teeth Apart



Tongue Relaxed



Face Relaxed



# Polling Question 4

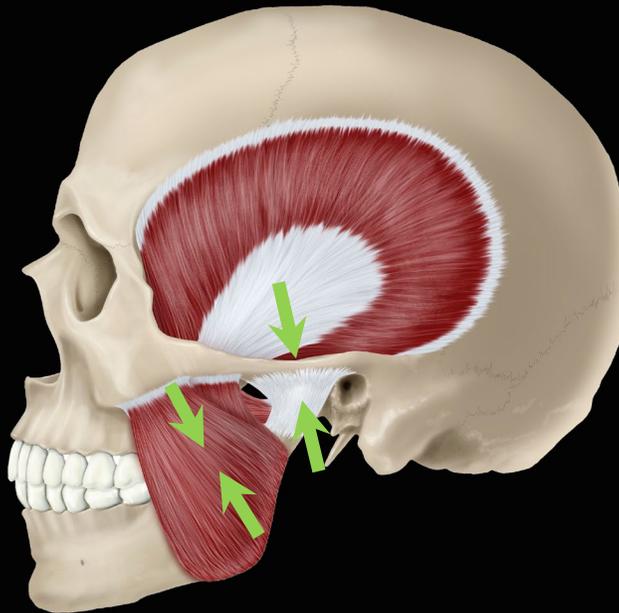
Are your teeth together now?

- Yes
- No

# Position of Rest

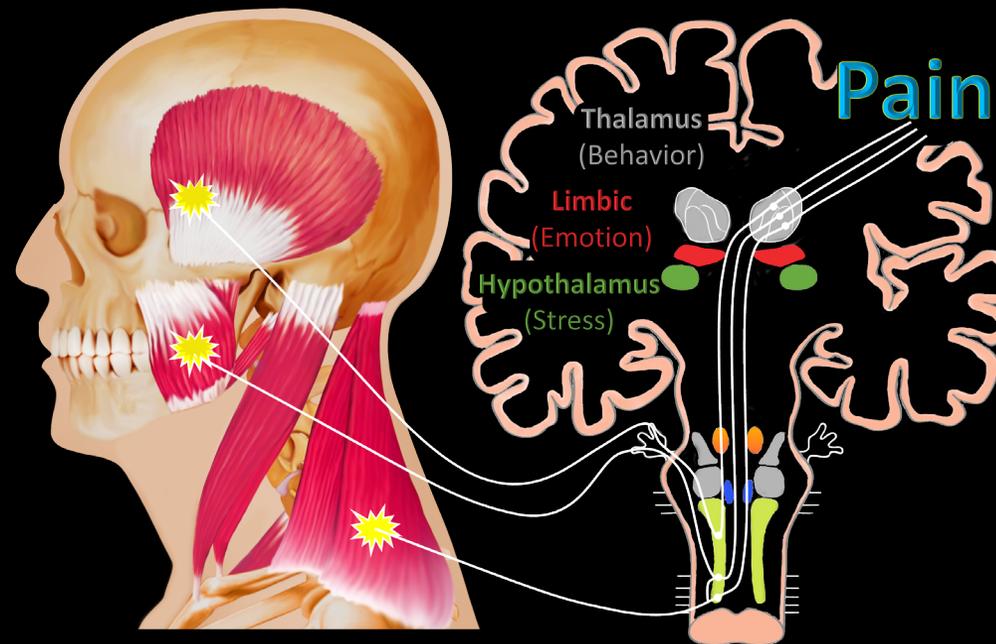
Decrease Masticatory Muscle Overuse

Decrease TMJ Loading



# Position of Rest

Decrease Unhealthy Trigeminal Input



# Oral Habit Modification

Becoming aware of the unhealthy habit

Ask about tooth contact and tongue position

Feel masseter and temporalis muscles

# Oral Habit Modification

Becoming aware of the unhealthy habit

Ask about tooth contact and tongue position

Feel masseter and temporalis muscles

## Why is it important to change

Explain how it affects pain and impairs healing

*Sprinter versus Marathoner*

*Fist*



# Oral Habit Modification

Becoming aware of the unhealthy habit

Ask about tooth contact & tongue position

Feel masseter & temporalis muscles

Why is it important to change

Explain how it affects pain and impairs healing

## Knowing how to change the habit

Teeth slightly apart

Tongue relaxed in the floor of the mouth

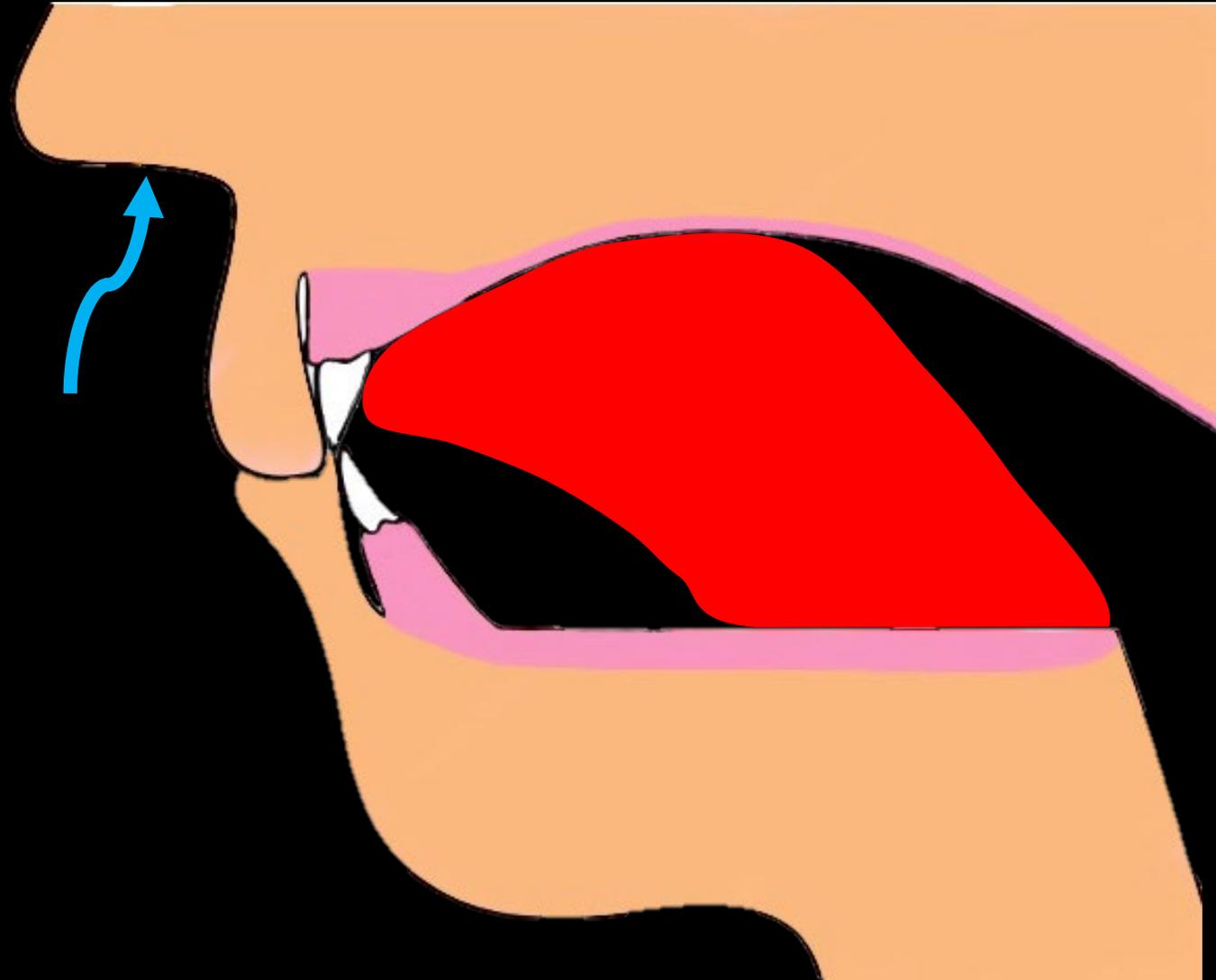
Face relaxed

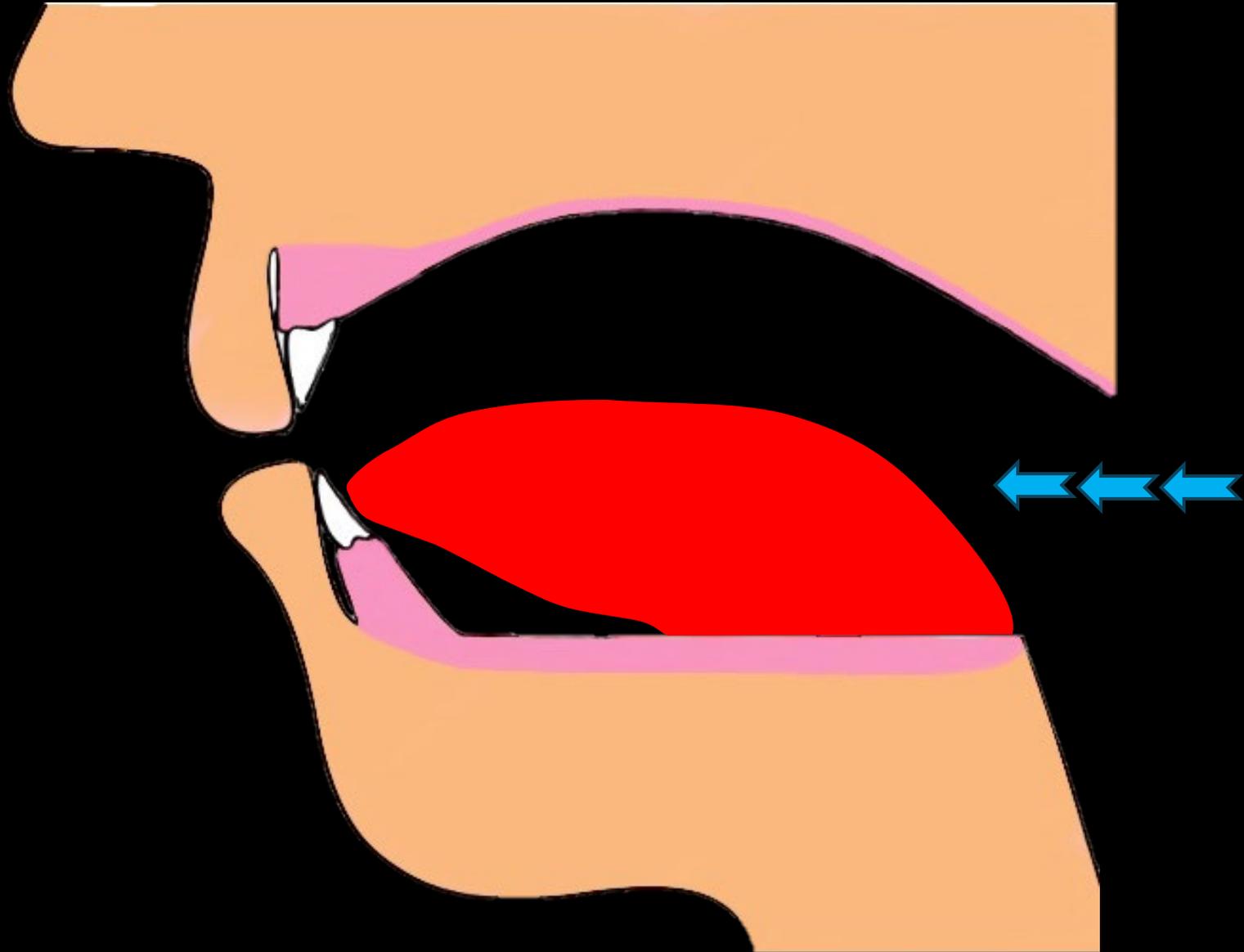


Position

Say “M” or three (3) puffs of air

# Oral Habit Modification





# Position of Rest

## Use a Reminder

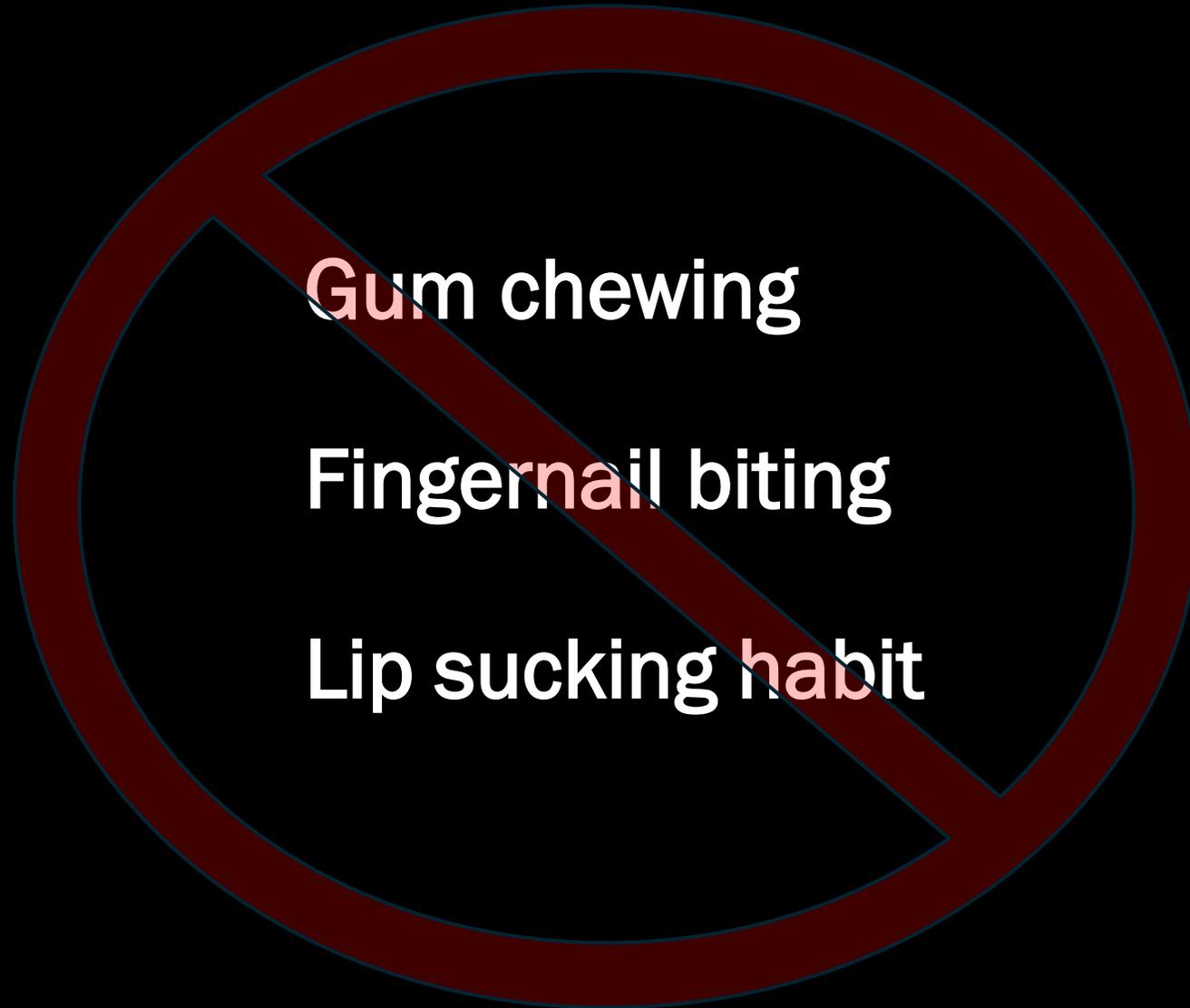
### Reinforce changing the habit

1. Forced rest periods
2. Improve muscle memory (neuroplasticity)

App, timer, sticky note, rubber band, etc.



# Position of Rest



# Self-Care

Position of Rest

Risk Factor Reduction

Improve Blood Flow

Sleep Hygiene

Diet Modification

Breathing

Exercise

# Improve Blood Flow

## Heat

Apply Moist Heat

2-4 times per day

3-5 minutes

## Massage

Gentle Circles

2-4 times per day

1-2 minutes

## Movement

Gentle & Controlled

Open / Side-to-Side

30 seconds per hour

# Self-Care

Position of Rest

Risk Factor Reduction

Improve Blood Flow

Sleep Hygiene

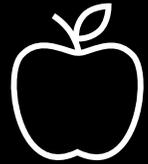
Diet Modification

Breathing

Exercise

# Diet Modification

Softer & smaller bites



Healthy nutrition & hydration



# Self-Care

Position of Rest

Risk Factor Reduction

Improve Blood Flow

Sleep Hygiene

Diet Modification

Breathing

Exercise

# Risk Factor Reduction

Smoking



Caffeine



Alcohol



Medication



# Resources



## TMD SELF-CARE

ALLOWING HEALING TO OCCUR

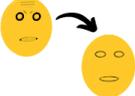


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### REST POSITION



Teeth Apart  
Tongue Relaxed  
Face Relaxed  
Neck & shoulders relaxed



Use a Reminder  

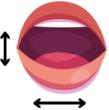
### APPLY HEAT & MASSAGE



Place heat on the painful muscles  
2-4 x per day for 3-5 minutes

Gently massage the muscles

### GENTLE MOVEMENT



Gently move your mouth  
up & down, side to side

Stretch using your fingers,  
but do not increase your pain

Learn to listen to your body

### CAUTION



Be mindful when using your jaw:

- Avoid gum, nail biting, etc
- Minimize aggravating foods
- Avoid stimulants

### TAKE BREAKS



Take a break from your daily tasks:

- Belly breathe
- Go for a walk
- Stretch

# Self-Care

Position of Rest

Risk Factor Reduction

Improve Blood Flow

Sleep Hygiene

Diet Modification

Breathing

Exercise

# Sleep Hygiene

“Strong sleep hygiene means having both a bedroom environment & daily routines that promote consistent, uninterrupted sleep.”

*SleepFoundation.org*



# Sleep Hygiene

## Nighttime

Consistent bed and wake times

Relaxing pre-bedtime routine

Stimulus control

- Light (natural and artificial)

Temperature regulation (65°F)

Don't fight it

Sleep position

## Daytime

Get some sun

Be physically active

Minimize

Caffeine and other stimulants

Alcohol

Late / large meals

Naps

# Self-Care

Position of Rest

Risk Factor Reduction

Improve Blood Flow

Sleep Hygiene

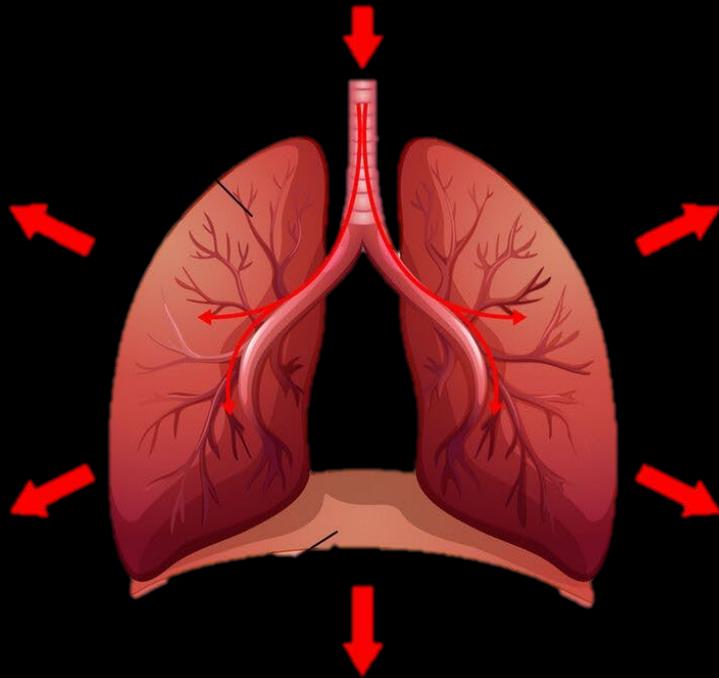
Diet Modification

Breathing

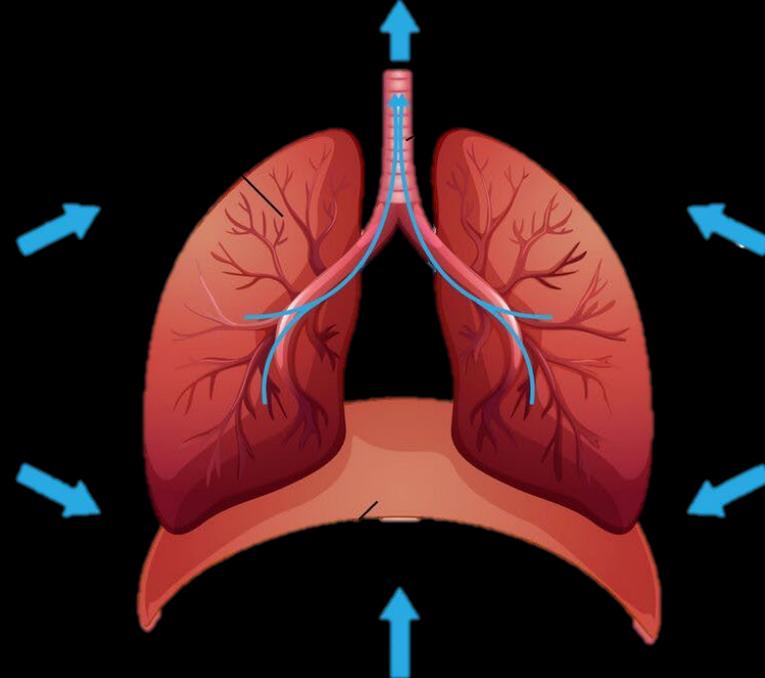
Exercise

# Breathing

Inhalation



Exhalation



Michigan Medicine

# Self-Care

Position of Rest

Risk Factor Reduction

Improve Blood Flow

Sleep Hygiene

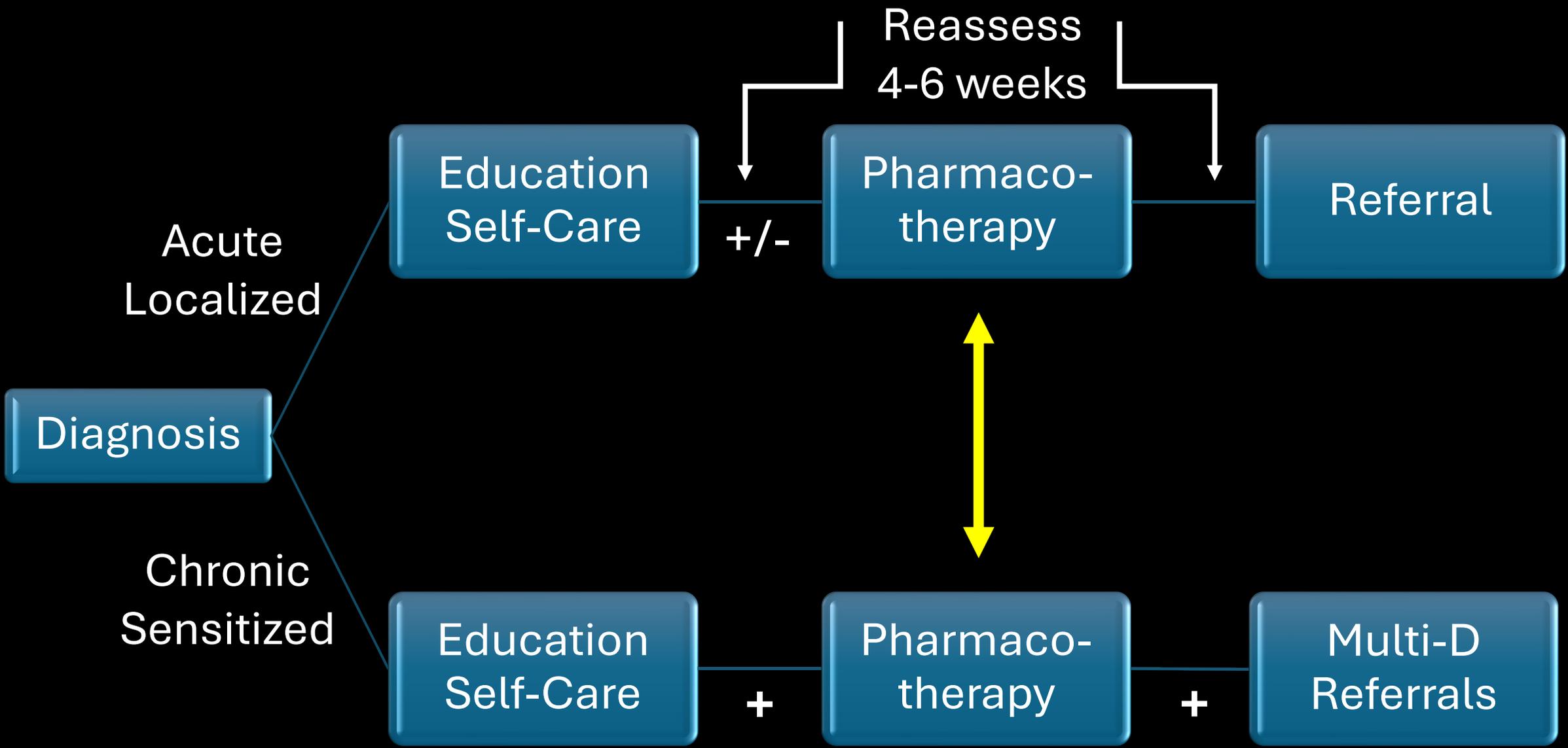
Diet Modification

Breathing

Exercise

# Exercise



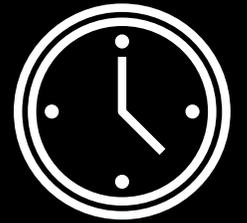


# Acute Localized

## Anti-inflammatories

Nonsteroidal Anti-inflammatories (NSAIDs)

Corticosteroids

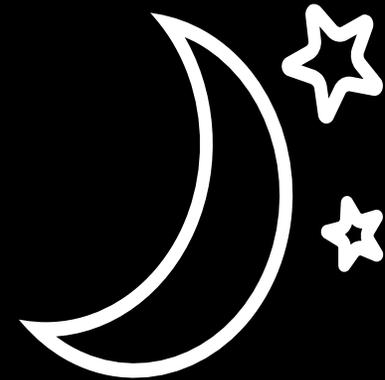
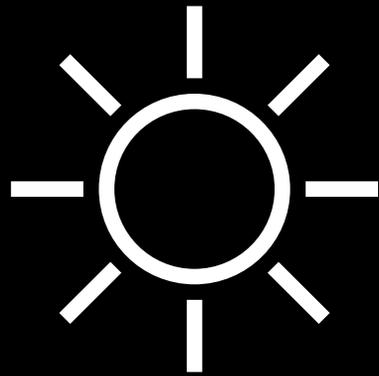


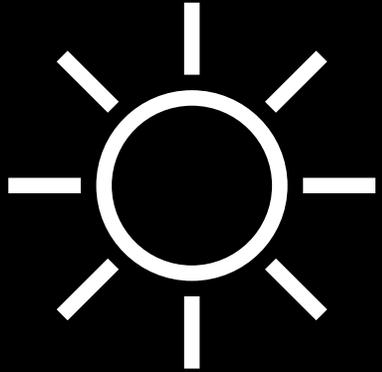
## Analgesics

Alternative: Acetaminophen

Not for long-term use

# Muscle Relaxants

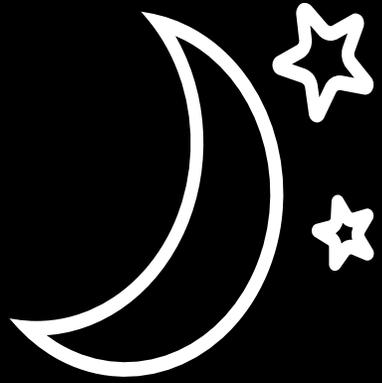




## Muscle Relaxants

Methocarbamol: 500 - 1,500mg two to three (2-3) times per day

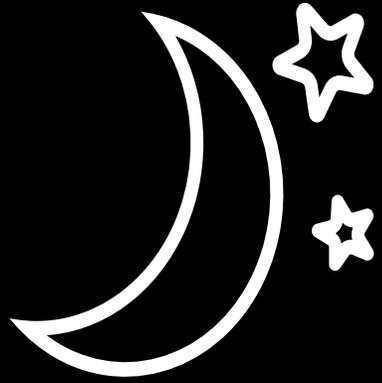
Metaxalone: 800mg three to four (3-4) times per day



## Muscle Relaxants

Cyclobenzaprine: 5 - 10mg two (2) hours before bed

Tizanidine: 2 - 4mg two (2) hours before bed

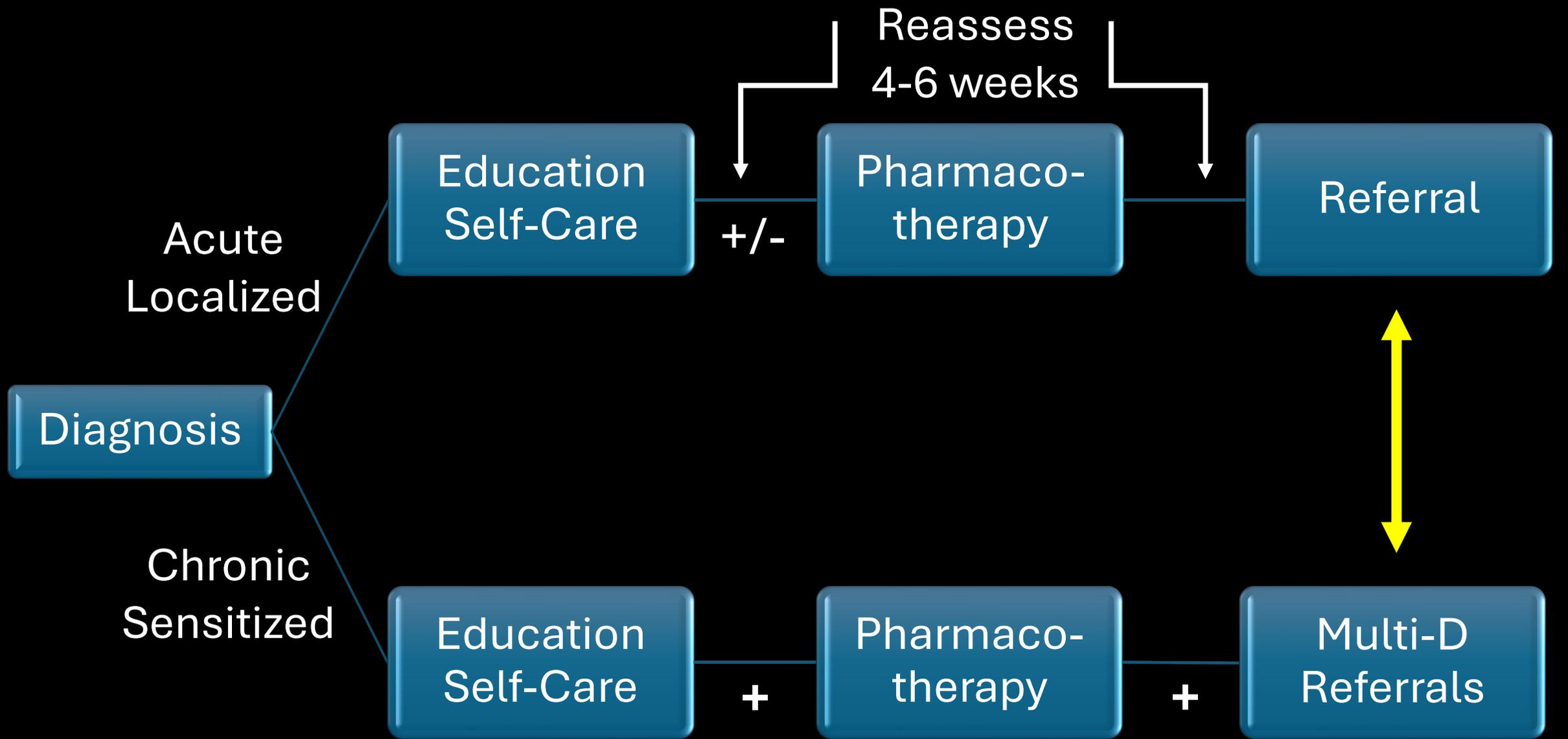


## Others

Tricyclic Antidepressants

Serotonin-Norepinephrine Reuptake Inhibitors

Gabapentinoids



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# Refer

1. Secondary Cause
2. Further Evaluation
3. Multidisciplinary TMD Management

# Refer

Secondary Cause

Further Evaluation

Emergency Room – SNOOP4, Cardiac, etc.

Neurology – Headache, neuralgia / neuropathy

ENT – Ear or throat disorder, salivary gland issue

Rheumatology – Connective tissue / autoimmune

Sleep Medicine – Apnea or other sleep disorder

Dental – Tooth or other intraoral pain

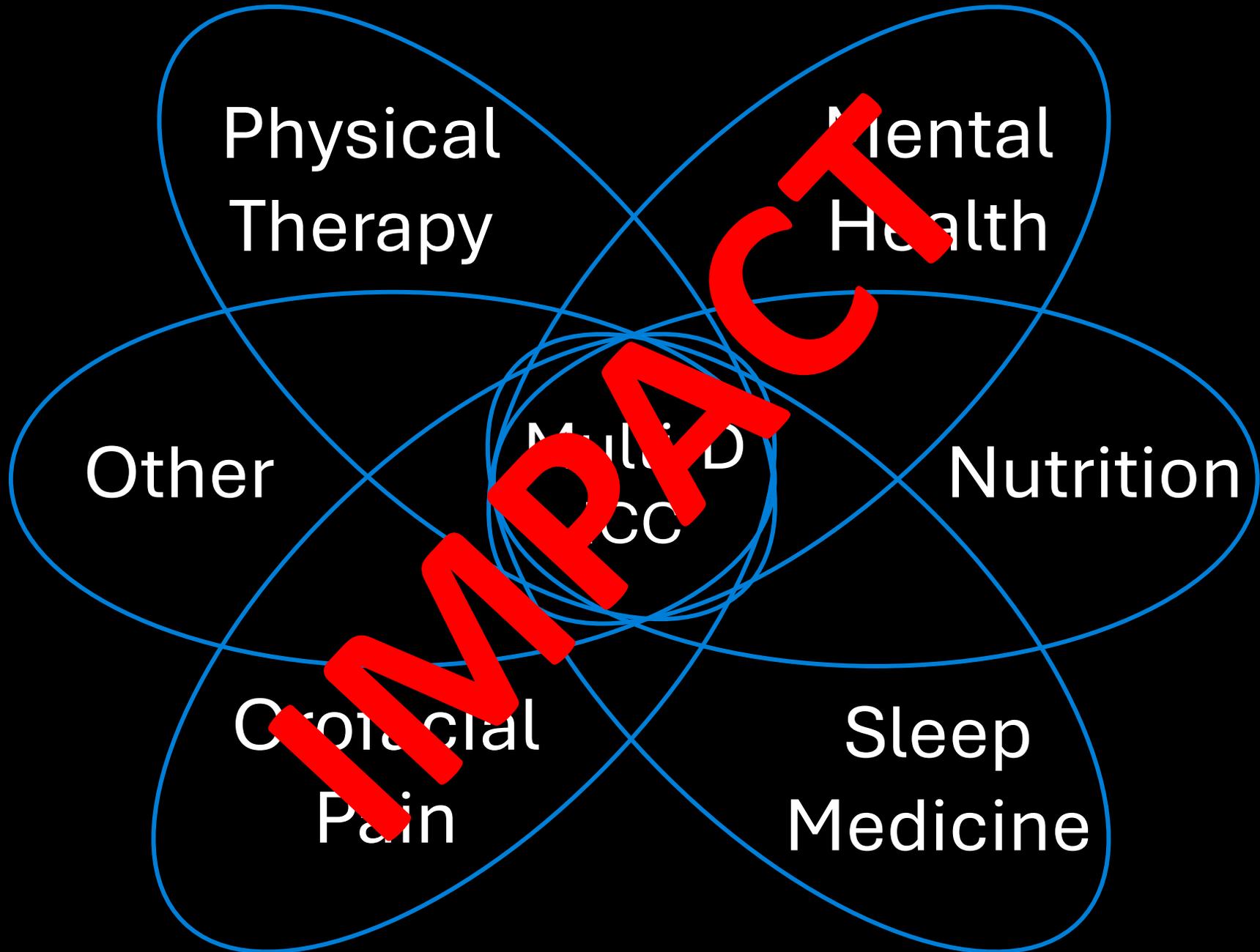
Oral Surgery – Facial trauma, TMJ tumor

SNOOP4: systemic symptoms, neurological signs, onset, older age at onset, and postural component

ENT: ear, nose, and throat

# Refer

1. Secondary Cause
2. Further Evaluation
3. Multidisciplinary TMD Management



(ICC = Initial Care Clinician)

(Hawkins, 2023)

# Referrals to OFP

# OFP locations



Okinawa

# OFP Community

- Eleven (11) practicing Active-Duty providers (one civilian)
  - Seven (7) Navy
  - One (1) Army
  - Three (3) Air Force
- Currently six (6) in training
  - Two (2) Navy
  - Two (2) Air Force
  - Two (2) Army

## Specialty Training in Orofacial Pain

- Primary military training program at Naval Postgraduate Dental School (NPDS)
  - 3-year residency
  - 2-year fellowship

# Referral Processes

## Patient Pools (Dental)

1. Click “communicate”
2. In “To” line select “Pool”, then “Walter Reed NPDS Orofacial Pain”
3. Select “MESSAGING and SCHEDULING” tabs; Add; Ok
4. Refer to Clinic 0067 Walter Reed Orofacial Pain Clinic for .....

## Referral 2.0 (Medical)

1. Dental, Adjunctive Care
2. Refer to Clinic 0067 Walter Reed Orofacial Pain Clinic for .....

1000  
**IMPACT**

# Temporomandibular Disorders Education

For Initial Care Clinicians



## Module 1

### Understanding TMD

- ✓ Prevalence & Impact
- ✓ TMD Anatomy
- ✓ Pain Physiology
- ✓ Comorbidities & Risk Factors

## Module 2

### TMD Assessment

- ✓ TMD Screening
- ✓ TMD History Taking
- ✓ TMD Examination
- ✓ Diagnostic Testing

## Module 3

### TMD Diagnosis

- ✓ Muscle Diagnoses
- ✓ TM Joint Diagnoses
- ✓ TMD Mimickers

## Module 4

### TMD Management

- ✓ First Line Management Strategies
- ✓ TMD Self-Care & Sleep Hygiene
- ✓ Initial Pharmacotherapy
- ✓ Referrals & Multidisciplinary Care

Learn high-value strategies to effectively care for TMD patients in your primary care practice

DHA-US-1342

5-hours CE credit  
Sequential Completion



DHA-US-1342-R

No CE Credit  
Flexible Access

# Learn high-value strategies to effectively care for TMD patients in your primary care practice

**DHA-US-1342**

5-hours CE credit  
Sequential Completion



**DHA-US-1342-R**

No CE Credit  
Flexible Access

Enhancing Temporomandibular Disorders Education for Initial Care  
Clinicians through Interprofessional Education. *MedEdPORTAL*. (In Press)



# TMD Essentials



## History - Relevant Chief Complaint Information

Onset: \_\_\_\_\_ Trauma? Y / N Stressor @ Onset? Y / N

Previous Treatment: \_\_\_\_\_

Impact: Pain (Intensity): \_\_\_/10 Enjoyment (Interference): \_\_\_/10 General Activity (Interference): \_\_\_/10

### Chief Complaint Description

Location	
Character	
Frequency / Duration	
Temporal Pattern	
Intensity	Now: /10 Avg: /10
Aggravating	
Alleviating	
Associated Sx	

Med History / Meds: \_\_\_\_\_

Perpetuating Factors: \_\_\_\_\_

Sleep Difficulties? Y/N \_\_\_\_\_ (Y - Sleep Quality: \_)

Sleep Hygiene: \_\_\_\_\_

Body Pain? Y/N Fibromyalgia, Head, Neck, Stomach, Pelvic, Back, Or

Psych/Social Vulnerability? Y/N \_\_\_\_\_ (Y - PHQ)

Stress Level: (\_\_\_/10) \_\_\_\_\_, Job: \_\_\_\_\_, Fam

Activity Level: \_\_\_\_\_

Oral Parafunction? Y/N Teeth Together Y/N, Tongue to Palate Y/N, I

Hydrated? Y/N, Nutrition: \_\_\_\_\_ Caffe

## Examination

General Appearance: \_\_\_\_\_, Red fl:

### Palpation Pain (Includes discomfort or tenderness)

Muscle	Left	Right	Familiar	Referral (location)
Masseter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Temporalis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Temporal Tendon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TMJ (static/dynamic)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trapezius	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SCM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Jaw Range of Motion

Opening: Comfortable \_\_\_\_\_ mm  
 Unassisted \_\_\_\_\_ mm Painful? Y / N Familiar? Y / N  
 Assisted \_\_\_\_\_ mm Painful? Y / N Familiar? Y / N

Excursive:  
 Protrusive \_\_\_\_\_ mm Painful? Y / N Familiar? Y / N  
 Left \_\_\_\_\_ mm Painful? Y / N Familiar? Y / N  
 Right \_\_\_\_\_ mm Painful? Y / N Familiar? Y / N Location \_\_\_\_\_

### Jaw Opening Pattern

- Straight
- Corrected Deviation ( R / L )
- Uncorrected Deviation ( R / L )

### TMJ Noises

- Click/Pop ( R / L ) Painful ( Y / N ) Familiar ( Y / N )
- Crepitus ( R / L ) Painful ( Y / N ) Familiar ( Y / N )

Cervical Screening Limited Movement (Y/N), Pain (Y/N), Familiar (Y/N) \_\_\_\_\_

Intraoral Screening (Teeth / Gingiva / Other), Recent Dental Work? Y/N \_\_\_\_\_

## Diagnostic Testing

Panoramic \_\_\_\_\_ CT/CBCT \_\_\_\_\_ TMJ MRI \_\_\_\_\_ AT Nerve Block \_\_\_\_\_ Other \_\_\_\_\_

Findings: \_\_\_\_\_

## Diagnoses

Pain Disorder(s)	Notes
<input type="checkbox"/> None	
<input type="checkbox"/> Myalgia (R/L) <input type="checkbox"/> Temporal Tendonitis (R/L) <input type="checkbox"/> Myofascial Pain w/ Referral <input type="checkbox"/> Centrally-Mediated Myalgia	
<input type="checkbox"/> TMJ Arthralgia (R/L)	

TMJ Disorder(s)	Notes
<input type="checkbox"/> None	
<b>Disc Displacement</b> <input type="checkbox"/> w/ Reduction (R/L) <input type="checkbox"/> w/ Red. w/ Intermittent Locking (R/L) <input type="checkbox"/> w/o Red., w/ limited opening (R/L) <input type="checkbox"/> w/o Red., w/o limited opening (R/L)	
<input type="checkbox"/> TMJ Subluxation (R/L)	
<input type="checkbox"/> Degenerative Joint Disease (R/L)	

Notes: \_\_\_\_\_

## Assessment

Prognosis: Good, Guarded, Poor

## Plan

Management Option(s)	Notes and Resources
<input type="checkbox"/> Education	<input type="checkbox"/> Diagnoses <input type="checkbox"/> Physiology & Risk Factors (provide poster handout)
<input type="checkbox"/> Self-Care	<input type="checkbox"/> Habit Awareness Training (provide infographic & video) <input type="checkbox"/> Heat, Massage, Gentle Movement, Diet Modification <input type="checkbox"/> Sleep Hygiene Instruction <input type="checkbox"/> Physical Activity <input type="checkbox"/> Nutrition Modification <input type="checkbox"/> Diaphragmatic Breathing Training
<input type="checkbox"/> Medication	<input type="checkbox"/> Topical Diclofenac (1-2 week trial for TMJ Arthralgia) <input type="checkbox"/> NSAID (1-2 week clock-regulated trial for TMJ Arthralgia) <input type="checkbox"/> Muscle Relaxant(s) (2-4 week trial - medication taken daily) <input type="checkbox"/> Methocarbamol (daytime) <input type="checkbox"/> Cyclobenzaprine (nighttime) <input type="checkbox"/> Tricyclic Antidepressant (3-6 month trial - medication taken daily) <input type="checkbox"/> Amitriptyline (nighttime) <input type="checkbox"/> Nortriptyline (nighttime) <input type="checkbox"/> Gabapentinoid <input type="checkbox"/> Gabapentin (nighttime or t.i.d.)
<input type="checkbox"/> Intervention	
<input type="checkbox"/> Referral	<input type="checkbox"/> Physician (Primary) <input type="checkbox"/> Dentist <input type="checkbox"/> Physical Therapy <input type="checkbox"/> Occupational Therapy <input type="checkbox"/> Mental Health <input type="checkbox"/> Sleep Medicine <input type="checkbox"/> Nutrition <input type="checkbox"/> Orofacial Pain <input type="checkbox"/> Specialty Care - Other _____

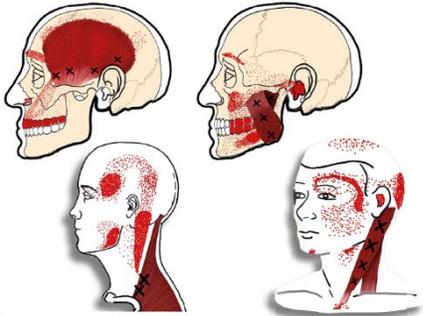
Follow-up Timeline: 1 week, 1 month, Other \_\_\_\_\_

Follow-up Considerations: \_\_\_\_\_

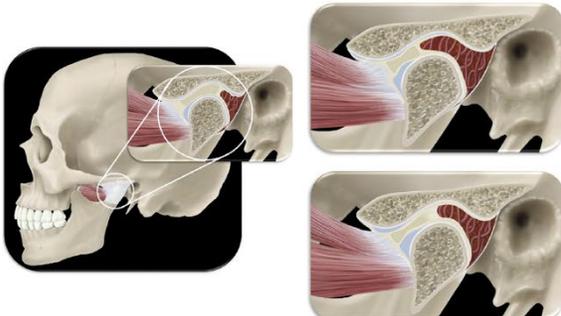
This work was prepared as part of official military duties. This document reflects the views of the authors and does not reflect the policies of the U.S. Government, Department of Defense, U.S. Navy, or Uniformed Services University of the Health Sciences.

# DIAGNOSIS

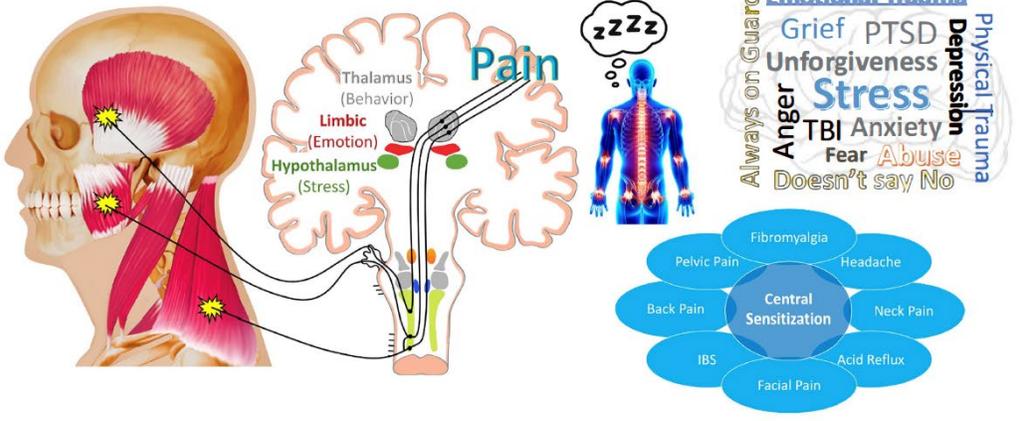
## Muscle Pain



## TMJ Disorder



# RISK FACTORS



# MANAGEMENT

-Rehabilitation involves a team approach between you and your doctors  
 -Referrals to appropriate specialists may be beneficial to your overall care

## Self-Care

-Healthy lifestyle behaviors & modifying risk factors are very important

Maintain a  
Position of Rest

Practice Healthy  
Sleep Hygiene

Healthy Nutrition  
& Hydration

Minimize  
Stimulants

Breathe

Exercise

# TMD SELF-CARE

## ALLOWING HEALING TO OCCUR

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### REST POSITION

**Teeth Apart**  
**Tongue Relaxed**  
**Face Relaxed**  
**Neck & shoulders relaxed**

Use a Reminder

### APPLY HEAT & MASSAGE

Place heat on the painful muscles  
 2-4 x per day for 3-5 minutes

Gently massage the muscles

### GENTLE MOVEMENT

Gently move your mouth  
 up & down, side to side

Stretch using your fingers,  
 but do not increase your pain

Learn to listen to your body

### CAUTION

Be mindful when using your jaw:

- Avoid gum, nail biting, etc
- Minimize aggravating foods
- Avoid stimulants

### TAKE BREAKS

Take a break from your daily tasks:

- Belly breathe
- Go for a walk
- Stretch

*Stop BREATHE & THINK*

# Key Takeaways

- TMD is a common condition that impacts warfighter health and readiness
- Many TMD patients have comorbid mental health, pain, and sleep challenges
- TMD can be quickly screened for in a primary care practice
- Self-management tools can effectively be taught by the initial care clinician

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# Questions

# How to Obtain CE/CME Credits

## 2024 OCT CCSS: Fostering Quality and Excellence in Military-Specific Care

To receive CE/CME credit, you must register by 0800 ET on 18 October 2024, to qualify for the receipt of CE/CME credit or certificate of attendance. Complete the course evaluation and posttest for the session(s) you attended by **11:59 PM ET on Thursday, 31 October 2024**, to receive CE/CME credit or a certificate of attendance.

1. [Log in](#) to your account.
2. Go to the [main event page](#) and select the session you want to complete under the TAKE COURSE tab.
3. On the session page, click TAKE COURSE under the TAKE COURSE tab.
4. Progress through the required course items by clicking START under the Course Progress menu tabs located on the left of the screen or by clicking Start Course at the bottom of the page.
5. Complete the evaluation and pass the posttest with a score of 80% or above to select your credits and download your certificate.

All completed courses and certificates are available in [your account](#). Refer to your [Pending Activities](#) for sessions you have yet to complete. You must complete the required course items by Thursday, 31 October 2024, to receive credit.

Questions? Email DHA J7, CEPO at [dha.ncr.j7.mbx.cepo-cms-support@health.mil](mailto:dha.ncr.j7.mbx.cepo-cms-support@health.mil).

