



YOUR INITIAL EVALUATION

THE FOLLOWING WILL BE COMPLETED DURING YOUR INITIAL EVALUATION:

- REVIEW YOUR MEDICAL AND DENTAL HISTORY
- CLARIFYING YOUR CONCERNS, EXPECTATIONS AND/OR PROBLEMS
- ORAL CANCER EXAMINATION
- DENTAL EXAMINATION EVALUATING CONDITION OF TEETH AND/OR RESTORATIONS
- PERIODONTAL EXAMINATION:
 - PROBING DEPTHS AROUND EACH TOOTH
 - CONDITION (QUALITY AND QUANTITY) OF GUM TISSUE ATTACHMENT
 - SIGNS OF MOBILITY
 - RELATIONSHIP OF CURRENT RESTORATIONS TO GUM LEVELS
- TEMPOROMANDIBULAR JOINT EXAMINATION
 - PALPATION (PRESSING WITH FINGER TIPS)
 - RANGE OF MOTIONS TESTS
 - AUSCULTATION (LISTENING) DURING FUNCTION
 - ORTHOPEDIC LOAD TESTING
- MUSCLE EXAMINATION
 - PALPATION (PRESSING) OF ALL MUSCLE GROUPS BOTH WITHIN AND OUTSIDE THE MOUTH
- OCCLUSAL (BITE) EXAMINATION
 - RELATIONSHIP OF UPPER AND LOWER TEETH WHEN JAW IS RELAXED
 - RELATIONSHIP OF TEETH WHEN JAW MOVES RIGHT, LEFT, AND FORWARD
- RADIOGRAPHS
 - BITEWINGS
 - PANORAMIC SHOWING ENTIRE UPPER AND LOWER JAW
- DIAGNOSTIC STUDY CASTS
 - TWO SETS, EITHER ORIGINALS OR DUPLICATES
 - ESTHETIC AND FUNCTIONAL TRANSFER RECORD (FACEBOW)
 - BITE RECORDS
- PHOTOGRAPHS – PURPOSE: TO EVALUATE ESTHETICS AND CONDITION OF TEETH AND GUMS (DIAGNOSIS)
 - FULL SERIES
 - SELECTED VIEWS

DR. STEPHENS WILL TAKE THE TIME TO EVALUATE ALL THE ABOVE INFORMATION CAREFULLY, CONSULT WITH ANY SPECIALISTS, IF INDICATED, MAKE A SPECIFIC DIAGNOSIS FOR YOUR CURRENT CONDITION AND DESIGN A BLUEPRINT FOR YOUR CARE WITH THE DIAGNOSTIC CASTS. AN INDIVIDUALIZED LONG-TERM TREATMENT PROGRAM WILL BE DESIGNED AND DISCUSSED WITH YOU FULLY AT A FUTURE APPOINTMENT. ABOVE ALL, WE WANT YOU TO BE INFORMED AND INVOLVED AND FEEL THAT THE DECISIONS YOU MAKE ARE IN YOUR BEST INTEREST.

DR. STEPHENS AND STAFF