Temporomandibular Pain Disorder Screening Instrument

1. In the last 30 days, on average, how long did any pain in your jaw or temple area on either side last?
   a. No pain
   b. Pain comes and goes
   c. Pain is always present

2. In the last 30 days, have you had pain or stiffness in your jaw on awakening?
   a. No
   b. Yes

3. In the last 30 days, did the following activities change any pain (that is, make it better or make it worse) in your jaw or temple area on either side?

   A. Chewing hard or tough food
      a. No
      b. Yes

   B. Opening your mouth or moving your jaw forward or to the side
      a. No
      b. Yes

   C. Jaw habits such as holding teeth together, clenching, grinding or chewing gum
      a. No
      b. Yes

   D. Other jaw activities such as talking, kissing or yawning
      a. No
      b. Yes