TMJ DISABILITY INDEX (TDI)

We are interested in knowing whether you are having any difficulty with the activities listed below because of your jaw problem. Please provide answers for each activity for <u>today</u>.

- 1	. Do you or would you have difficulty with	No Diffi	culty		Som	-		Complet Inability
A	Eating	0	1	2	3	4	5	6
A	Eating chewy foods (steak, bagels, gum)	0	1	2	3	4	5	6
A	Eating hard foods (nuts, carrots, apple, corn-on-the-cob)	0	1	2	3	4	5	6
A	Eating moderately soft foods (fish, noodles, peas)	0	1	2	3	4	5	6
A	Eating soft foods (mashed potatoes, pudding,	0	1	2	3	4	5	6
	creamed corn, porridge)			-				O
A	Eating/drinking liquids (soups, tea, milk)	0	1	2	3	4	5	6
A	Talking or carry on a conversation	0	1	2	3	4	5	6
			- '			-	3	- 0
2.	Do you or would you	None	of		Some of			All of
		the ti				the time		the tin
2	Limit how often you eat	_			_		_	
A	Avoid talking or carrying on a conversation	0	1	2	3	4	5	6
A	Limit how long you eat	0	1	2	3	4	5	6
¥		0	1	2	3	4	5	6
	Change how you communicate (i.e. Gesture, write notes)	0	1	2	3	4	5	6
2	Change the way in which your jaw moves during eating	0	1	2	3	4	5	6
	(i.e. Chewing mostly on one side, avoid biting large foods)							
	Limit how often you talk or carry on a conversation	0	1	2	3	4	5	6
4	in a control out of the control	0	1	2	3	4	5	6
	Avoid eating certain foods	0	1	2	3	4	5	6
1	Change the way in which your jaw moves while talking (i.e. Talk with little/no jaw movement or clenched teeth)	0	1	2	3	4	5	6
3.	Are you satisfied with your ability to	Yes Absolutely			Some			Not at all
					***************************************			at all
A	Talk or carry on a conversation even though you	0	1	2	3	4	5	6
	have a jaw problem							
2	Eat even though you have a jaw problem	0	1	2	3	4	5	6
4.	Do you or would your jaw muscles get tight when	None of		Some of			All of	
		the time			the time	9		the time
-	Talking	0	1	2	3	4	5	6
	Eating	0	1	2	3	4	5	6
							J	U
ign	ature:		Date:					