

## SCREENING FORM

For Patients with Head, Neck and Facial Pain  
& Sleep-Related Breathing Disorders/Apnea

- Primary headaches or migraines
- Snoring/Sleep Apnea
- Disturbed, restless sleeping
- CPAP Intolerance
- Daytime drowsiness
- Attention deficit in children
- Earaches, stuffiness or ringing
- Neck, shoulder, back pain or stiffness
- Dizziness
- Pain or soreness in TM joints
- Clicking or grating sounds in TM joints
- Limited mouth opening
- Locking jaw (opened or closed)
- Facial or undiagnosed teeth pain
- Difficulty swallowing

When your patients experience one or more of these symptoms, they should have a thorough evaluation by a dentist trained in TM and Sleep. We will be happy to assist you in diagnosis and treatment for possible Craniomandibular, Temporomandibular or Sleep-Related Breathing Disorders/Apnea.

### Patient Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

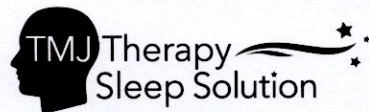
### Referred by:

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Date: \_\_\_\_\_ Fax: \_\_\_\_\_

Exam  2<sup>nd</sup> Opinion  Send Report  Call Me



## TMJ THERAPY SLEEP SOLUTION

**Farshid Ariz, D.M.D.**

Board Certified in  
ABCP, ABCDSM, ABDSM

11633 San Vicente Blvd #216  
Los Angeles, CA 90049

Phone: (310) 826-3399  
Fax: (310) 826-5077

contact@tmjtherapysleepsolution.com  
www.tmjtherapysleepsolution.com

### Instructions:

Email, Mail, or Fax a copy to  
TMJ Therapy Sleep Solution