



Guidance document for processing PM-JAY packages

Ankylosis of TMJ

Procedures covered: 1

Specialty: Oral & Maxillofacial Surgery

Package name	Procedure name	HBP 1.0 code	HBP 2.0 code	Package price (INR)
TMJ Ankylosis of each side under GA	Release /Reconstruction of TMJ Ankylosis of each side under GA	S1600004	SM003A	15,000 + Implant cost

ALOS: 3 Days

Minimum qualification of the treating doctor:

Essential: MDS (Oral Maxillofacial surgery)

Special empanelment criteria/linkage to empanelment module: None

Disclaimer:

For monitoring and administering the claim management process of **Ankylosis of TMJ**, NHA shall be following these guidelines. this document has been prepared for guidance of processing team and transaction management system of AB PM-JAY for the claims of procedures mentioned above. The hospitals can also refer to this document so that they have the insight on how the claims will be processed. However, this document doesn't provide any guidance on clinical, surgical and therapeutic management of patient. In that respect the hospitals and physicians/surgeons may refer to other relevant material as per the extant professional norms.

PART I: GUIDELINES FOR CLINICIANS AND HEALTHCARE PROVIDERS

1.1 Objective:

The purpose of this section is to act as a guidance & a clinical decision support tool for the clinicians in deciding the line of treatment, plan clinical management of patient and decide referral of cases to the appropriate level of care (as required) for treatment of patients under PMJAY and selection of corresponding Health Benefit Package.

It will also serve as a tool for hospitals to determine and submit the mandatory documents required for claiming reimbursement of health benefit package under PMJAY.

1.2 Clinical key pointers:

Proceed for Surgery only if diagnosis made is backed by clinical signs, symptoms, examination & radiological imaging.

Fixation of Jaw: It is surgical procedure performed for fixation of fracture.

Fracture is defined as a break in structural and natural continuity of bone

Mandibular Fracture: is fracture involved in jaw/mandible. The type of mandibular fracture can be such as: Simple, compound/open, comminuted, greenstick, pathologic, multiple, impacted etc.



Treatment protocol of these fracture done in hospital can be:

- Restoration of bone fragments
- Reduction of Occlusion: Reduction (Open, Closed)
- Fixation
- Immobilization (Arch bars, SS Wires, Cap Splints, IMF screws, external fixators)

Causes:

- Fall -7%
- Trauma (Direct blow/ Kick to the Body)
- Contact Sport- 3%
- Industrial Accident-10%
- Vehicular accidents-43%
- Diseases (osteomyelitis, metabolic disorder, or tumors)
- Interpersonal violence, Assault -34%
- Pathological Fracture- unconfirmed
- Impacted tooth

Symptoms:

- Extreme Pain and Salivation.
- Swelling
- Difficulty in Swallowing, skin discoloration, Visible jaw deformity, difficulty in breathing, nosebleed,
- Laceration inside and outside of Oral Maxillo facial region
- Malocclusion (improper meshing of the upper and lower jaw and teeth)
- Echymosis in oral cavity
- Mobility/ step in bone fragments
- Anesthesia/paresthesia
- Facial asymmetry

Examination:

- **INTRAORAL Examination:** Inspection, Palpation, Percussion, Auscultation (Routine examination)
- **EXTRA ORAL Examination:** Inspection of face, check for presence of edema, ecchymosis, deformity, facial symmetry.
Inspect for CSF leak or bleeding areas, dried blood clots scabs
Inspect for associated soft tissue injury.
Inspect Coleman's sign (lingual hematoma), Step deformity (shoulder defects),
Mobility of teeth.
Paralysis of lips/ tongue.

Investigations:

Following investigation can be done based on Surgeon's prescription. (either one or more than one in 2 planes of the affected part)

- **X-ray:** Panoramic Tomography (OPG) showing fracture e.g. Angle fracture, displaced right/left sub condylar fracture etc. and PA X-ray Mandible, Occlusal x ray
- **X-Ray** mandible lateral Oblique, Posterior anterior view for Mandible Fracture
- **CBCT/CT:** Cone Beam computed Tomography/ computed Tomography of fractured mandible for multiple fracture fragments. 3D CT

Indications for TMJ Ankylosis:

➤ **Closed Reduction:**

- Non-Displaced favorable fracture
- Grossly comminuted fracture
- Significant loss of overlying soft tissue
- Edentulous mandibular fractures
- Mandibular fracture in children
- Coronoid Fracture
- Condylar fracture

Contraindications:

Fixation of jaw/TM joint fixation of both jaws are contraindicated for patients with compromised pulmonary function with severe asthma or severe COPD, poorly controlled seizures, psychiatric and neurological disorders, severe nausea or eating disorder.

Complications:

- Residual functional Disturbances
- Malunion/Improper alignment of fracture/ Cosmetic Deformity- facial deformity/asymmetry /malocclusion: 0-0.4%
- Infection related to fracture: 0.4%- 32%. Infection such as cellulitis, fistulas, abscess formation, osteomyelitis, necrotizing fasciitis
- Nonunion: failure of fracture
- Nerve injury: improper use of drill, screws leading neuropraxias/temporary facial nerve loss.
- Scar
- Tooth mobility

1.3 Mandatory documents- For healthcare providers

Following documents should be uploaded by the concerned hospital staff at the time of pre-authorization and claims submission:

Mandatory document	Ankylosis of TMJ
i. At the time of Pre-authorization	
a. Clinical notes (detailing signs, symptoms, examination findings, clinical photographs (intraoral & extraoral) indications for doing the procedure & advise for admission)	Yes
b. X-ray: of the affected part in 2 planes <ul style="list-style-type: none"> Lateral oblique/OPG/PA Mandible. CBCT/ CT/OPG 	Yes
ii. At the time of claim submission	
a. Indoor case papers & Consent (informed written)	Yes
b. Procedure note/ operative note & Anesthesia notes	Yes
c. Is the barcode of Implant(s) used submitted?	Yes

Optional Document	Ankylosis of TMJ
I. At the time of Pre-authorization	
a. Document required such as for Investigation of Fixation of TMJ Ankylosis: <ul style="list-style-type: none"> CBCT: Cone Beam computed Tomography of fractured mandible for multiple fracture fragments. 	Yes

PART II: GUIDELINES FOR PROCESSING TEAM

PART III: GUIDELINES FOR IT

3.1 Objective: To enable setting up of cross check mechanisms/rule engines within the IT platform (TMS) to ensure compliance with STGs and to prevent fraud / abuse of the Health Benefit Package.

3.2 Below mentioned are the scenarios where a provision would be built in TMS for pop-ups:

- Did the signs, symptoms, examination, and X-ray confirm the presence of fracture of jaw or TM joint ankylosis? Yes

Till the time the functionality is being developed, the processing doctors shall check the above manually.

References:

- Management of Mandibular Fracture :
<https://www.slideshare.net/lovetshering/management-of-mandibular-fractures-74737170>
- Management of Mandibular Fracture by Ambrish Bhagol:
<https://www.intechopen.com/books/a-textbook-of-advanced-oral-and-maxillofacial-surgery/management-of-mandibular-fractures>



- iii. Open Reduction and Internal Fixation of Mandibular Fracture
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4593909/>
- iv. Fracture of Mandibles and the possible methods of internal Fixation:
<https://link.springer.com/article/10.1007/BF00302685>
- v. Resident manual of Trauma, to the Face, Head, Neck -1st Edition (2012):
<https://www.semanticscholar.org/paper/Resident-Manual-of-Trauma-to-the-Face-%2C-Head-%2C-and-Edition/fb6590c3df10ab5cb632da766096cd17f88fd44f>
- vi. Textbook of Oral and Maxillofacial Surgery By Dr.Neelima Anil Malik-3rd Edition:
https://www.academia.edu/37335369/Textbook_of_Oral_and_Maxillofacial_Surgery_3rd_ed_2012_pdf
- vii. Textbook of Oral and Maxillofacial Surgery By Dr.Neelima Anil Malik-4th Edition