

Patient: Sample Patient
Date of Birth: 05/01/1950

Report Date: 04/18/2023
Study Date: 04/13/2023

Ref. Doctor:
Study Purpose: Implant
Dr. Notes: #8

Scan Source:
Imaging Exam: Conebeam CT Volumetric Scan

Radiologist Note: Measurements in this report are approximations only and do not indicate exact implant site(s). Exact implant site(s) and corresponding alveolar measurements to be verified by the referring clinician.

OBSERVATIONS

DENTITION: Heavily restored, partially edentulous dentition with generalized periodontal bone loss
#8 site: Grafting material/woven bone in remodeling extraction socket; alveolar dimensions are well-maintained; osseous rarefaction from endodontically treated #7 extends to superior aspect of the grafting material and communicates with the nasopalatine canal
Endodontically treated #7: Periapical region of low density extends to superior aspect of missing #8 and communicates with the nasopalatine canal; generalized widening of PDL space
#11: Moth-eaten appearance at distal aspect extends into the root, surrounding the pulp canal with extension of resorbing tissues into apical 3rd of root; apical PDL space remains intact

SINUSES: Trace mucoperiosteal thickening in right maxillary sinus
Paranasal sinuses are otherwise well-aerated where imaged

NASAL CAVITY: Leftward deviation of nasal septum with bone spur; this is a common finding

IMPRESSIONS

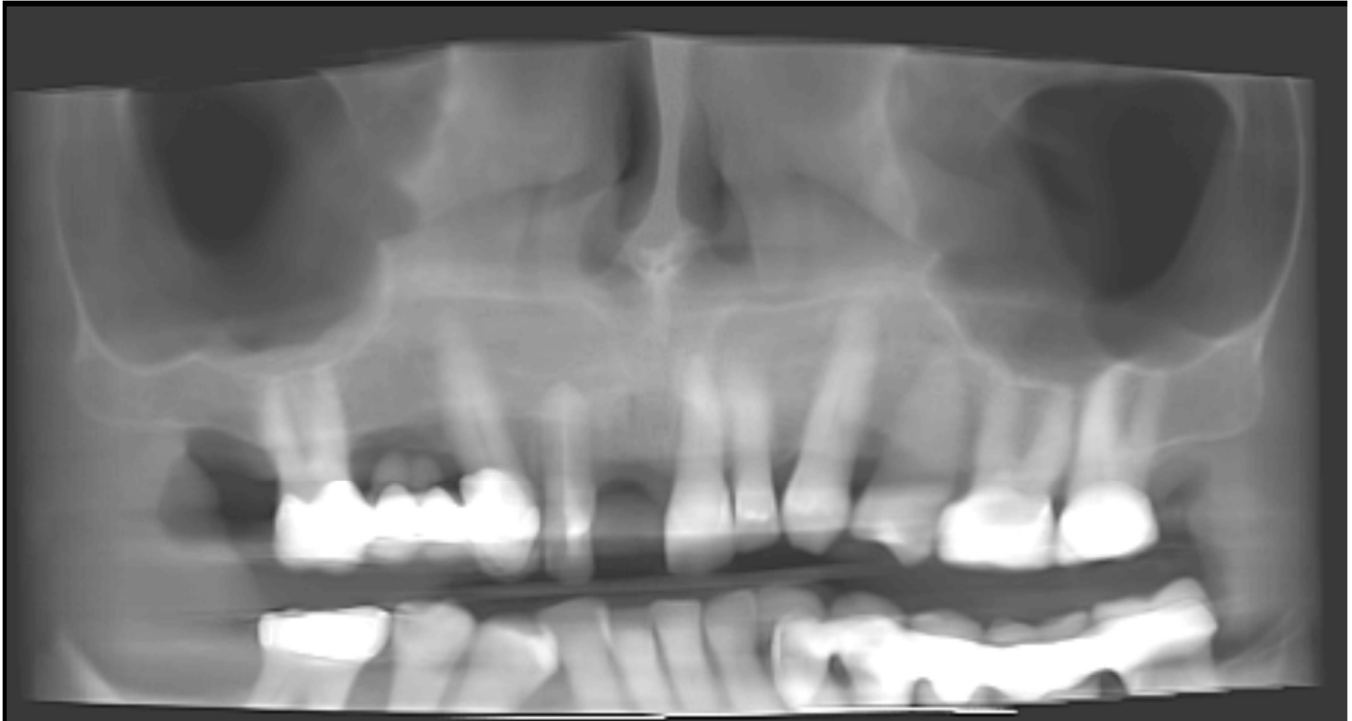
1. #8 site: Ongoing socket remodeling with well-maintained alveolar dimensions. Resolution of the odontogenic apical inflammation associated with endodontically treated #7 is recommended prior to implant placement as the osseous rarefaction extends to superior aspect of the socket which may result in retrograde peri-implantitis.
2. Endodontically treated #7: Persistent vs less likely resolving periapical periodontitis extends to superior aspect of missing #8 and communicates with the nasopalatine canal; correlation with history and clinical findings is recommended.
3. #11: External invasive resorption (a.k.a. invasive cervical resorption) class III.
4. Sinuses: Negligible inflammation in right maxillary sinus with no additional management indicated.

Cone Beam CT images are suboptimal for caries detection, visualization of soft tissue structures and assessment of fine bone detail. Images in this report are provided for illustrative purposes only; they are not of diagnostic quality nor scaled for direct measurement. Thank you for requesting this consultation regarding your patient.

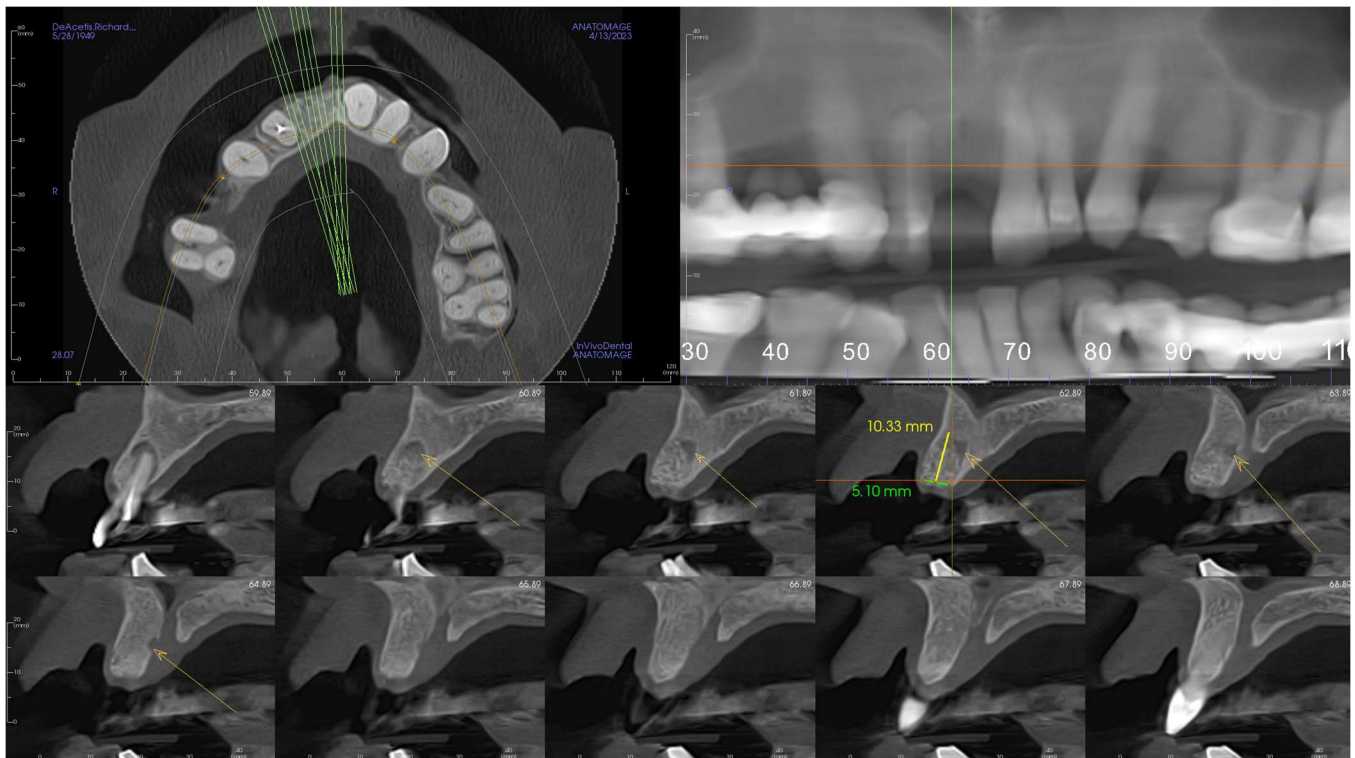
Sincerely,

Nick Shuff, DMD
Oral and Maxillofacial Radiologist

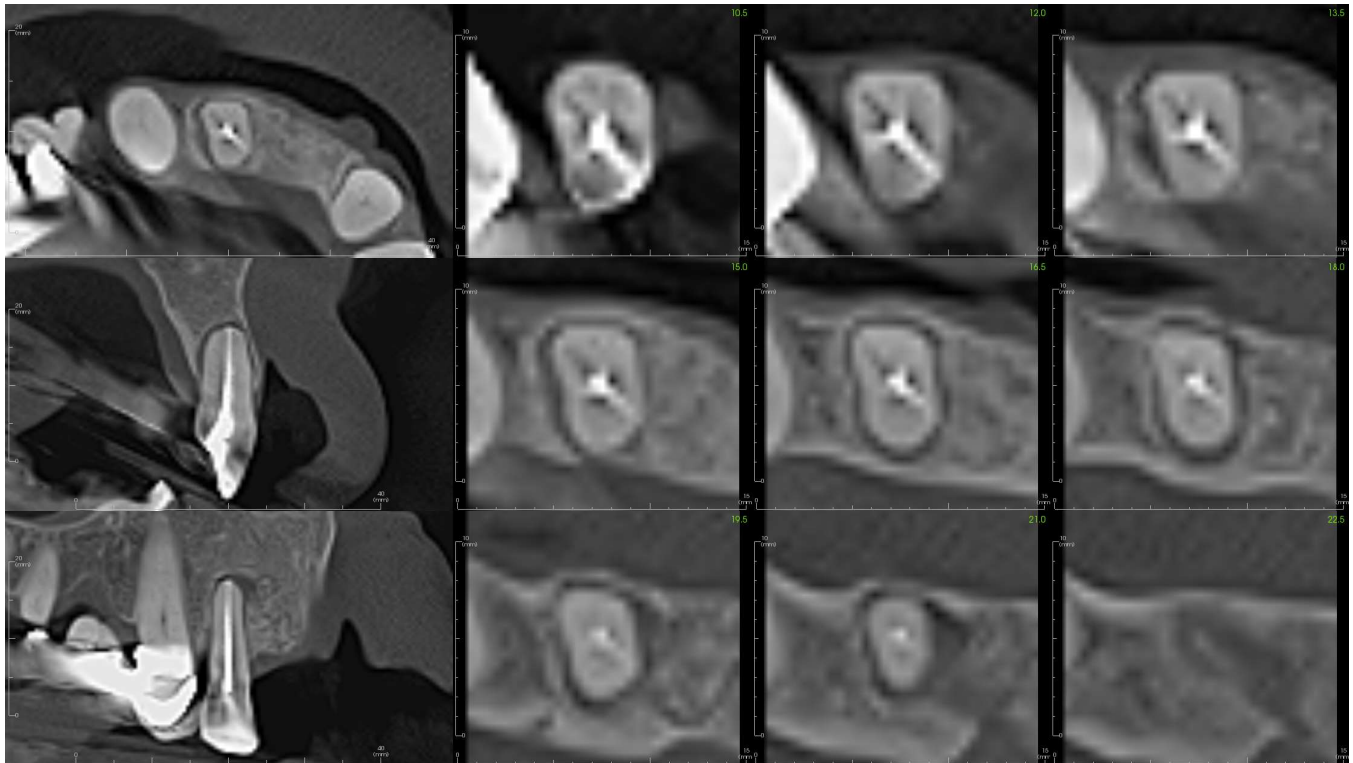
Panoramic Reconstruction:



#8 site, cross-sectional views:



Endodontically treated #7, axial Endo series



#11, axial Endo series:

