

Date:
Patient: IC Patient
Date of Birth:

Gender:
ID:
Referred by: Dr. Implant Provider

DIAGNOSTIC OBJECTIVE:

General Evaluation with planned implant sites #5, 8, 9, 11.

RADIOGRAPHIC FINDINGS:

The listed structures are reviewed and evaluated for bilateral symmetry, configuration, cortical outline, medullary space, and patent sinuses/airways. Evaluation of the CBCT anatomical volume is intended as an overall review for pathology and abnormalities. All viewed structures determined to have no significant findings are reported as no abnormalities detected.

Dentoalveolar Structures:

- There is a significant bony defect in the #11 apical area. The planned implant sites #5, 8, 9, 11 have a thin and continuous cortical outline with an intact alveolar crest. The internal trabecular bone pattern is otherwise within normal limits.

Paranasal Sinuses and Nasal Cavity:

- Nasal Cavity: partially visualized with slight deviation of the nasal septum to the left.
- Maxillary sinuses: soft tissue thickening on the floor of the left maxillary sinus, suggestive of mild mucositis.

Airway:

- No soft tissue constriction is noted.

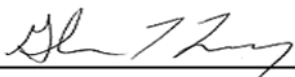
IMPRESSIONS AND RECOMMENDATIONS:

All viewed structures were determined to have no significant findings and are reported as **no abnormalities detected except:**

- The defect in the #11 area is most likely a due to prior periapical pathology in this area. The area of planned implant sites #5, 8, 9, 11 are otherwise free of abnormalities with no radiographic contraindication for implant placement with treatment in the #11 defect area as needed.
- Mild mucositis of the left maxillary sinus: No action is required in the absence of symptoms.

Soft tissue assessment is limited by CBCT modality. Evaluation is limited to the capability of CBCT imaging and any further assessment of dental related conditions is best performed by conventional dental radiography. This is a consultative report only and is not intended to be a definitive diagnosis or treatment plan. For further information please feel free to contact us at: 866 977 2228.

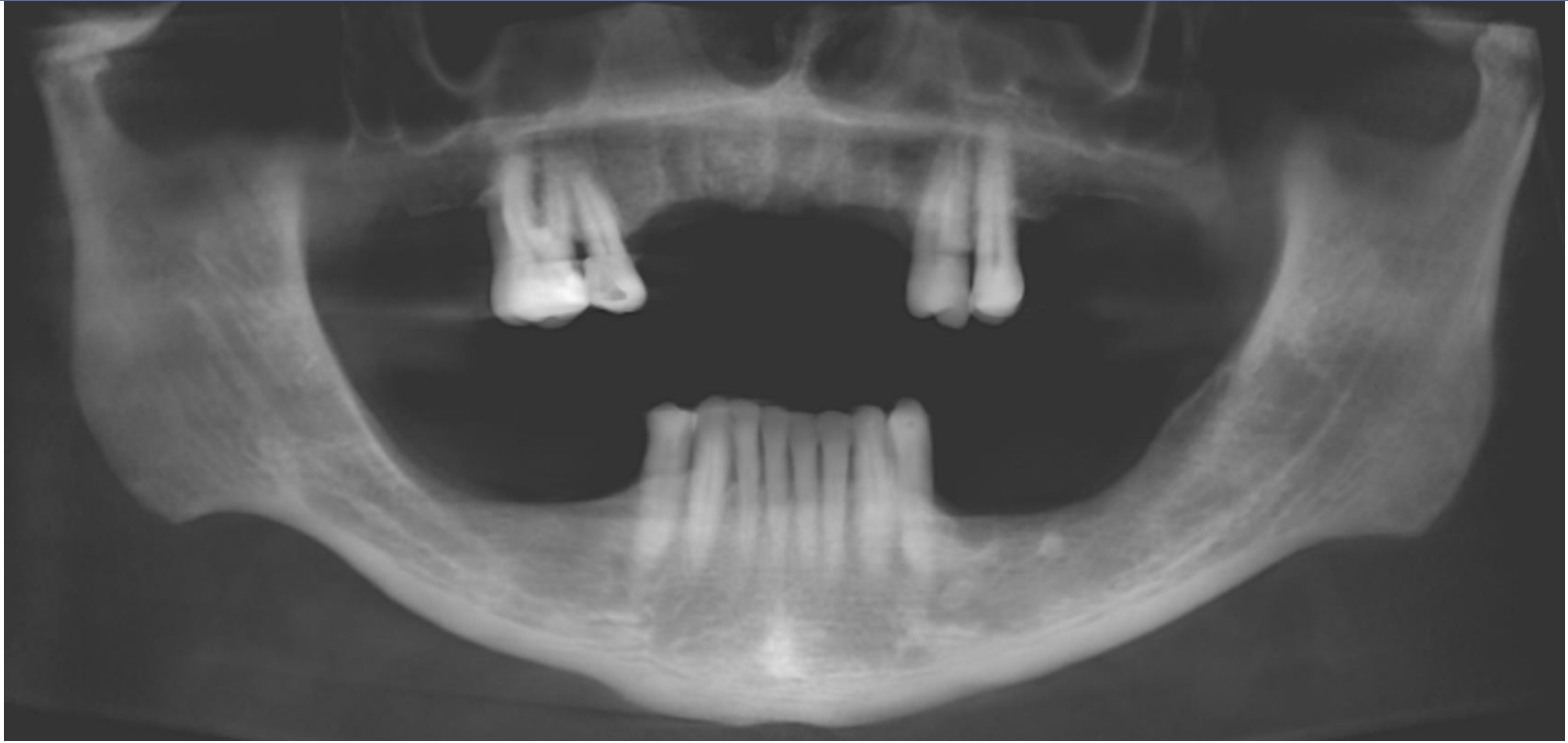
Thank you for the referral of this patient and the opportunity to serve your practice.



Glenn Terry DDS, MDS
Oral & Maxillofacial Radiologist

THE FOLLOWING ARE THUMBNAIL VIEWS OF IMAGES FROM THE ACQUIRED DATA



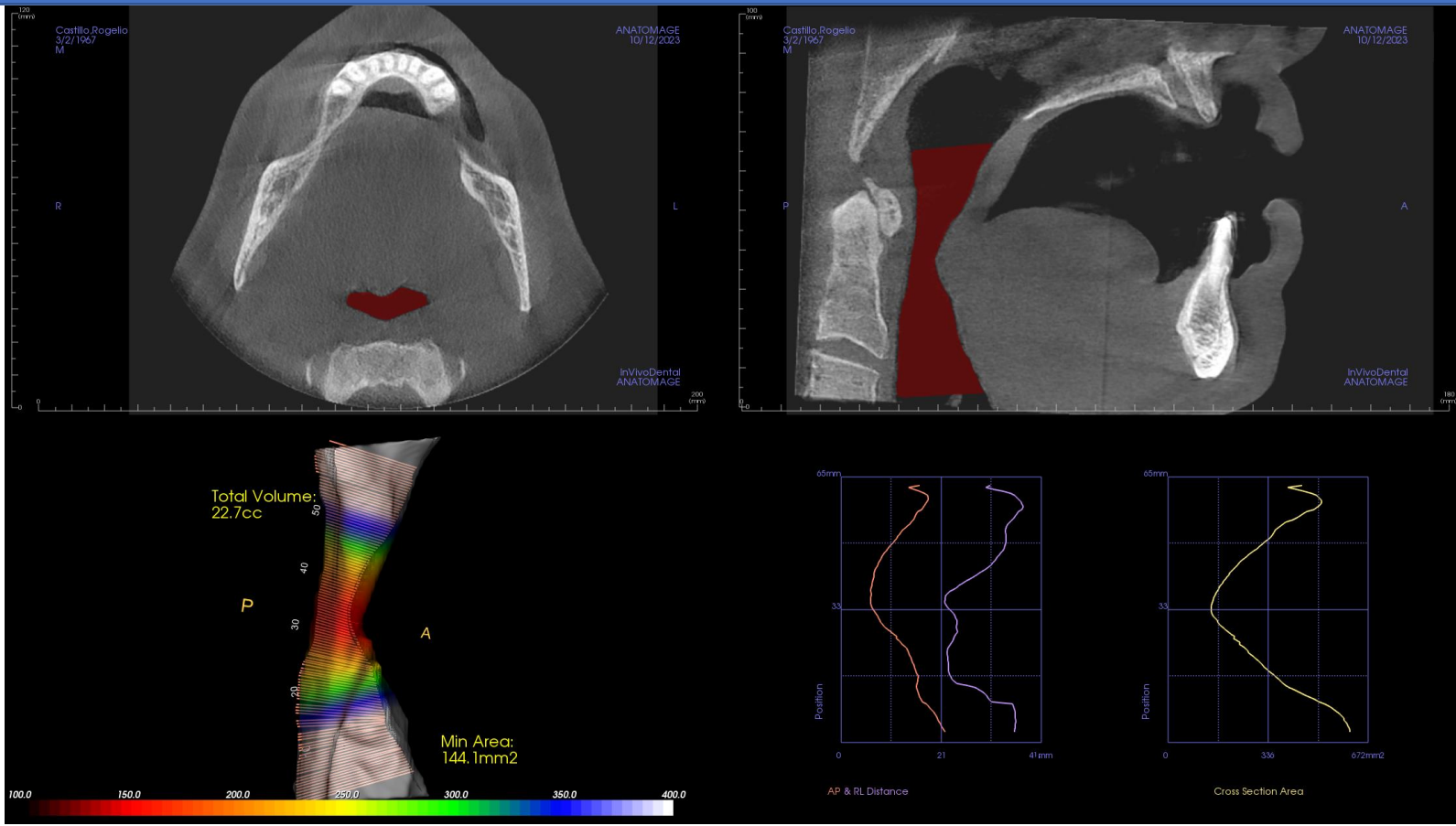


Reconstructed Panoramic View

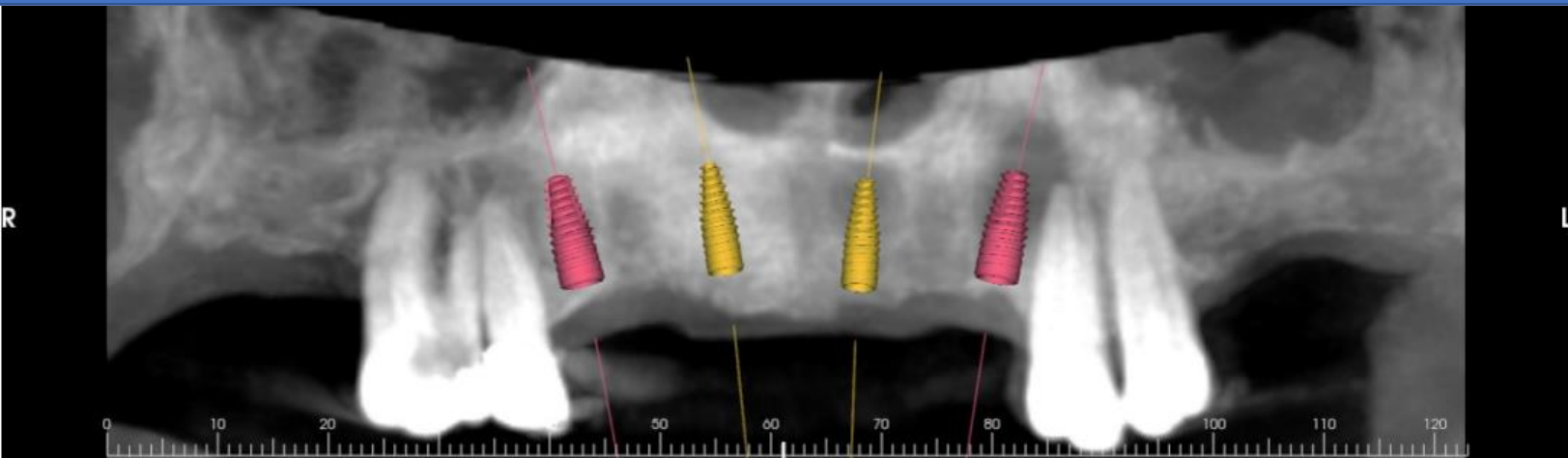


Coronal view of the maxillary sinuses

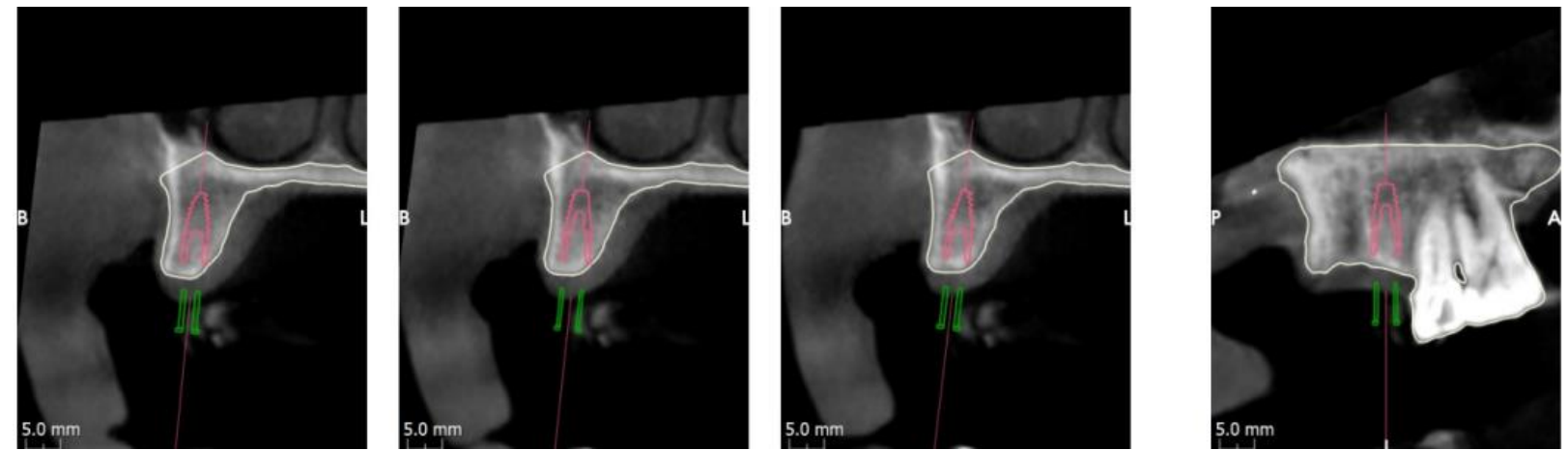




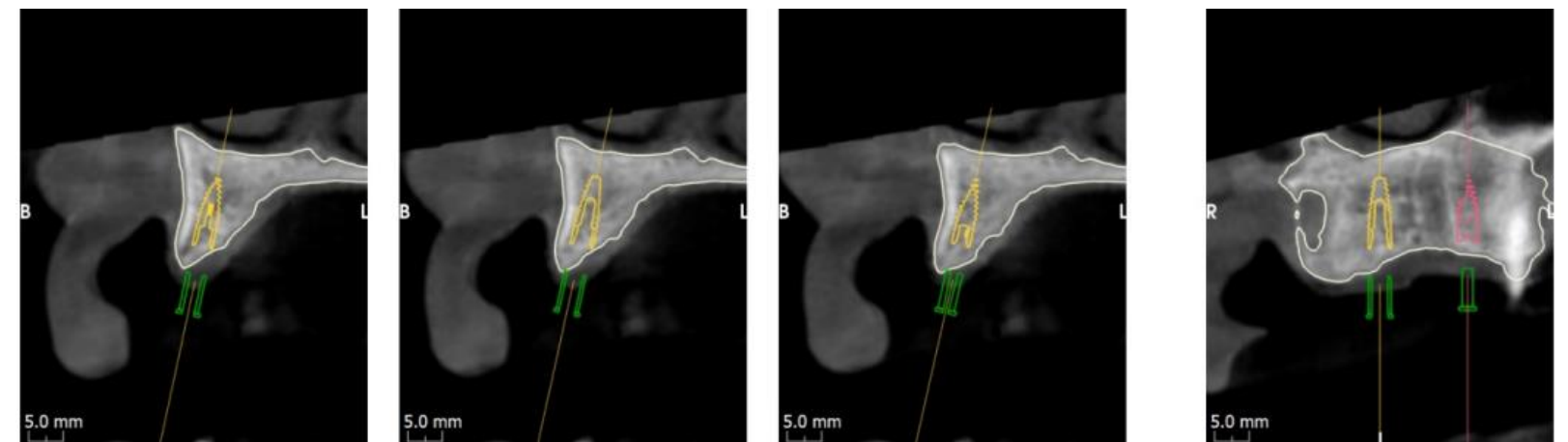
Airway images



Reconstructed Maxillary View

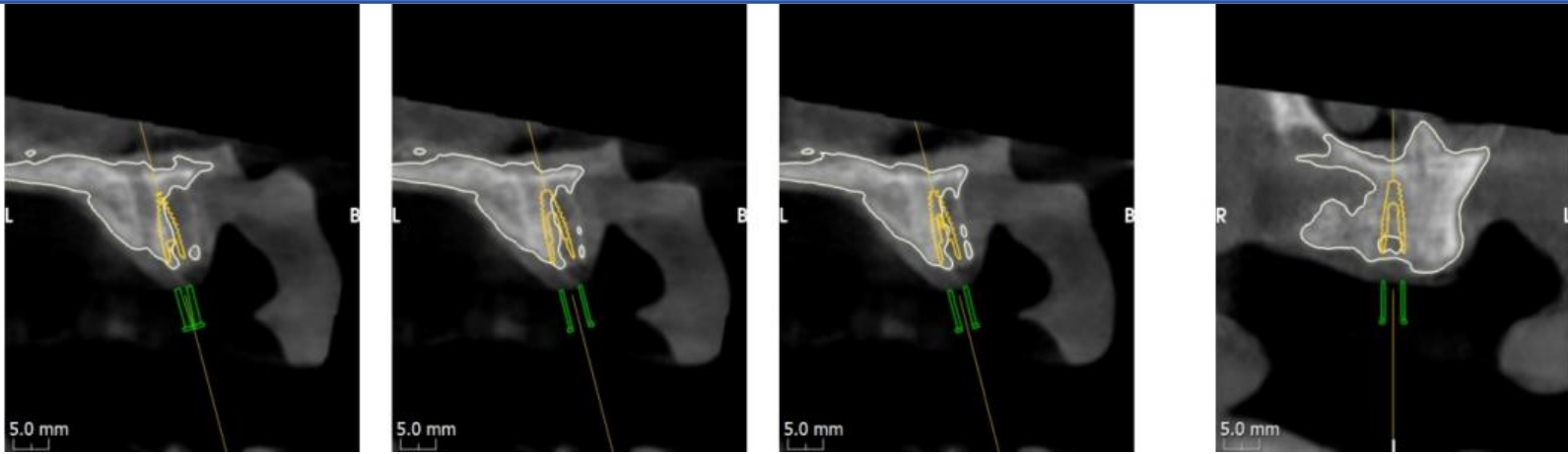


Cross-sections in the area of #5



Cross-sections in the area of #8





Cross-sections in the area of #9



Cross-sections in the area of #11

