

Patient:	Janet Doe	Report Date:	04/17/2017
DOB:	04/01/1970	Study Date:	04/11/2017
Ref. Doctor:	Dr. Bright	Scan Source:	ABC Endodontics
Study Purpose:	Pathology	Dr. Notes:	#10 Dens in Dente

OBSERVATIONS: The maxilla was imaged with a limited field of view (FOV) where only teeth #s 04 to 13 are completely visualized.

REGION OF INTEREST: - Sac-like invaginations are noted in tooth #10 extending from the crown to and area apical to the cementoenamel junction. A large radiolucency is noted apical to tooth #10 measuring approximately 10.1 (H) x 5.0 (D) x 8 (W) mm in its greatest dimension. The posterior border of the lesion has irregular and in some areas an ill-defined appearance. There is erosion of the buccal cortex superior to the apex of the tooth. There are no signs of external root resorption.

DENTITION: - All of the teeth in the in the field of view are present and have fully erupted.
- Cervical abrasion is noted on teeth #s 05, 06 and 12.

ALVEOLAR BONE: - Generalized mild horizontal bone loss is observed.

AIRWAY: - The airway spaces were not included in the FOV.

SINUSES: - The maxillary sinuses are partially visualized.
- There appears to be large polypoid formation in the maxillary sinuses.

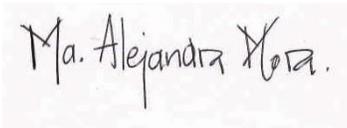
TMJ: - The TMJ complexes were not included in the FOV.

OTHERS: - A palatine torus is present.

IMPRESSIONS

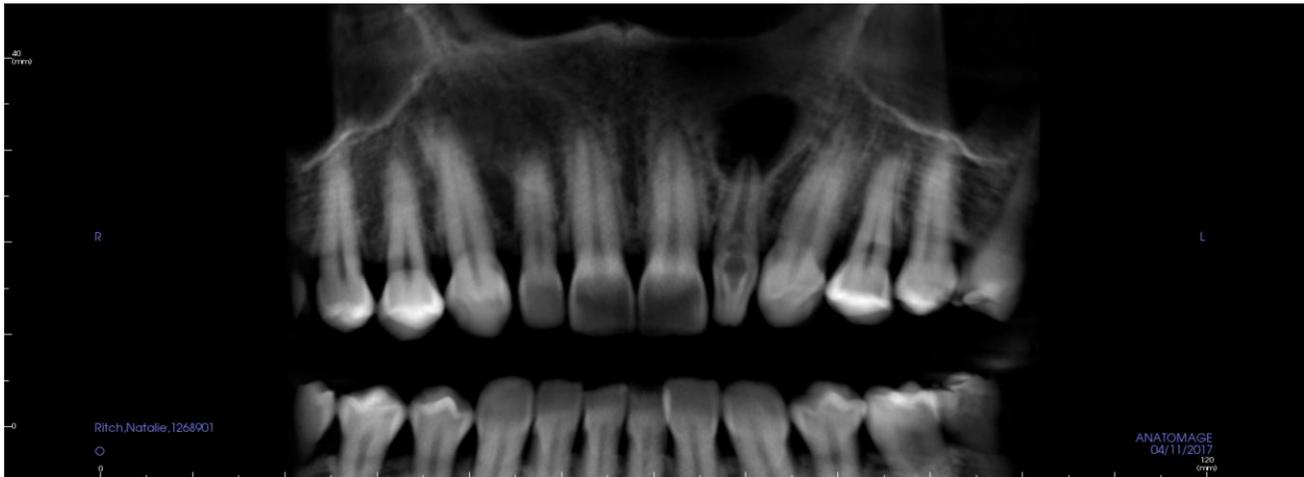
- A dens invaginatus type II and rarefying osteitis which most likely represents a radicular cyst. Due to the ill-defined and irregular borders secondary inflammation is suspected. Histopathological differentiation is recommended.
- Maxillary sinus polyposis. Clinical correlation is recommended.
- After reviewing the anatomical structures included in the scan, no other findings are noted.

Sincerely,

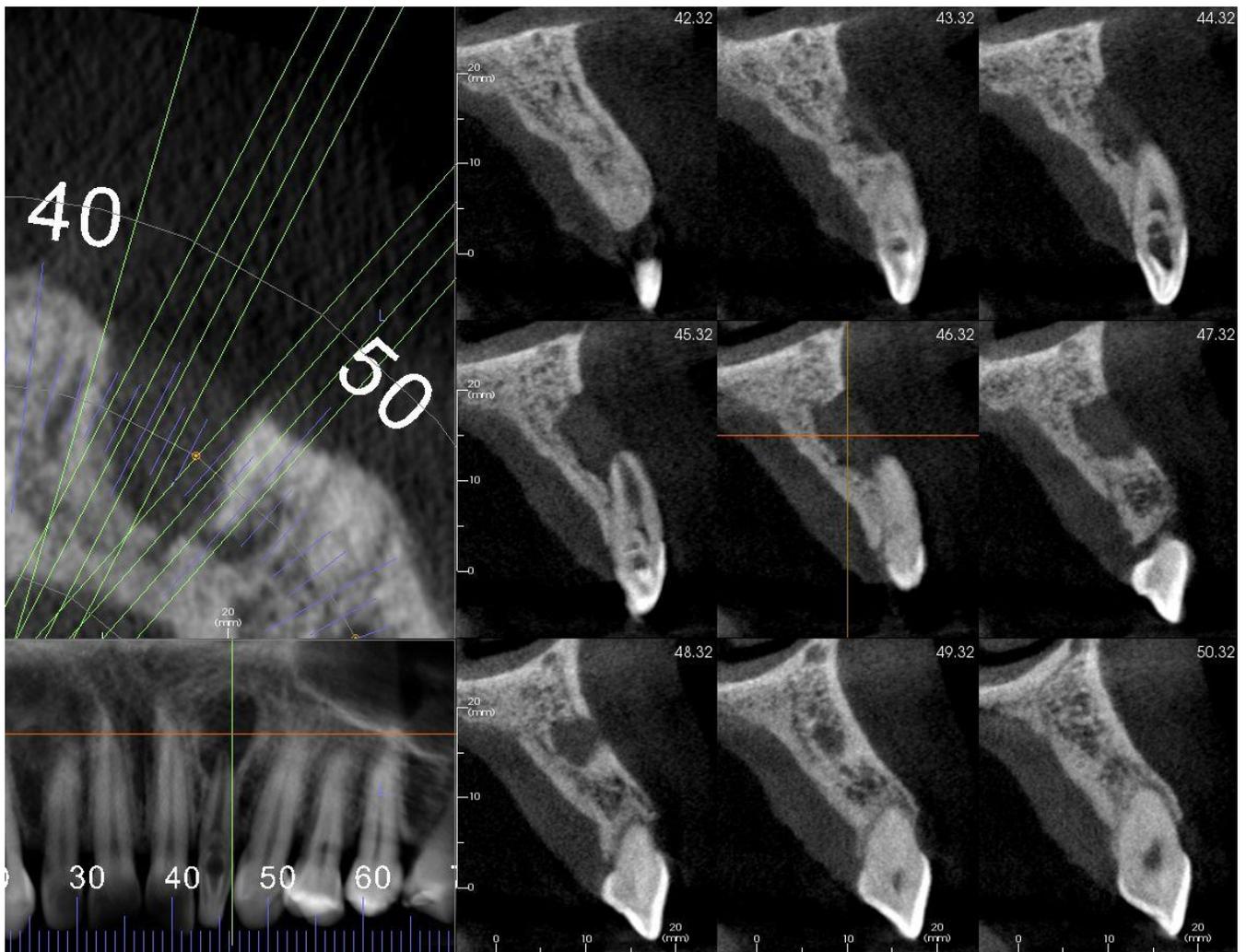


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PANORAMIC IMAGE



TOOTH #10



* The thumbnail images in the report are for reference only.