

Patient: Jane Doe
DOB: 10/27/1980
Report Date: 01/11/2017
Study Date: 01/09/2017
Ref. Doctor: Dr. Jones
Scan Source: Jones Periodontics
Study Purpose: Implant
Pathology
General Review
Dr. Notes: Please indicate where nerve is in relation to the roots of #16 sinus #17, #32 in relation to IAN. Thank you.

OBSERVATIONS

DENTITION: Tooth #1 is missing.

SINUSES: Visualized section of paranasal sinuses is clear with no radiographic signs of bone pathology noted. Ostiomeatal complexes are patent.

AIRWAY: -Nasal septum has an "S" shape.
-Airway outline is within normal limits at the level of the nasopharynx and oropharynx.

C-SPINE: No radiographic signs of bone pathology noted in visualized aspect of cervical vertebrae.

TMJ: -TMJs condylar heads have moderately flattened and corticated outlines. No radiographic signs of bone pathology noted.
-Radiographic signs of mild and stable degenerative joint disease DJD were noted in the left TMJ.

ALVEOLAR BONE: Dense bone island noted apical to #20. No action is suggested as these entities have a limited growth potential.

OTHER: There is a small midline intracranial calcification, consistent with calcified pineal gland. This is a common finding in adults and has no clinical significance.

IMPRESSIONS -#16 has 1 conical root. Apex is in contact with sinus floor. Tooth is tilted mesially.
-Tooth #17 has 2 roots. Tooth has a mesio-angular direction. Roots apices are not in contact with the IAN canal superior aspect.
-Tooth #32 has 2 roots. Tooth has a mesio-angular direction. Roots apices are not in contact with the IAN canal superior aspect.

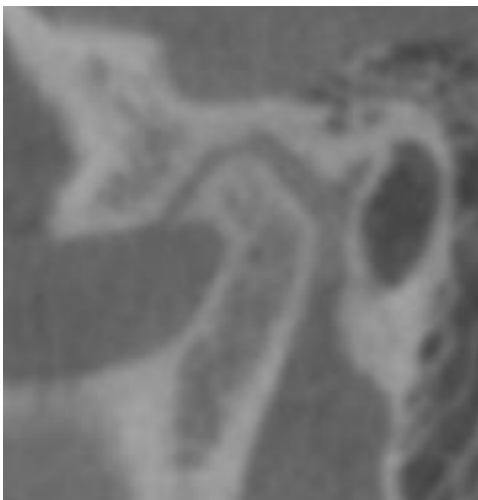
Sincerely,



Boulos Bechara, DDS, MS
Diplomate, American Board of Oral and Maxillofacial Radiology



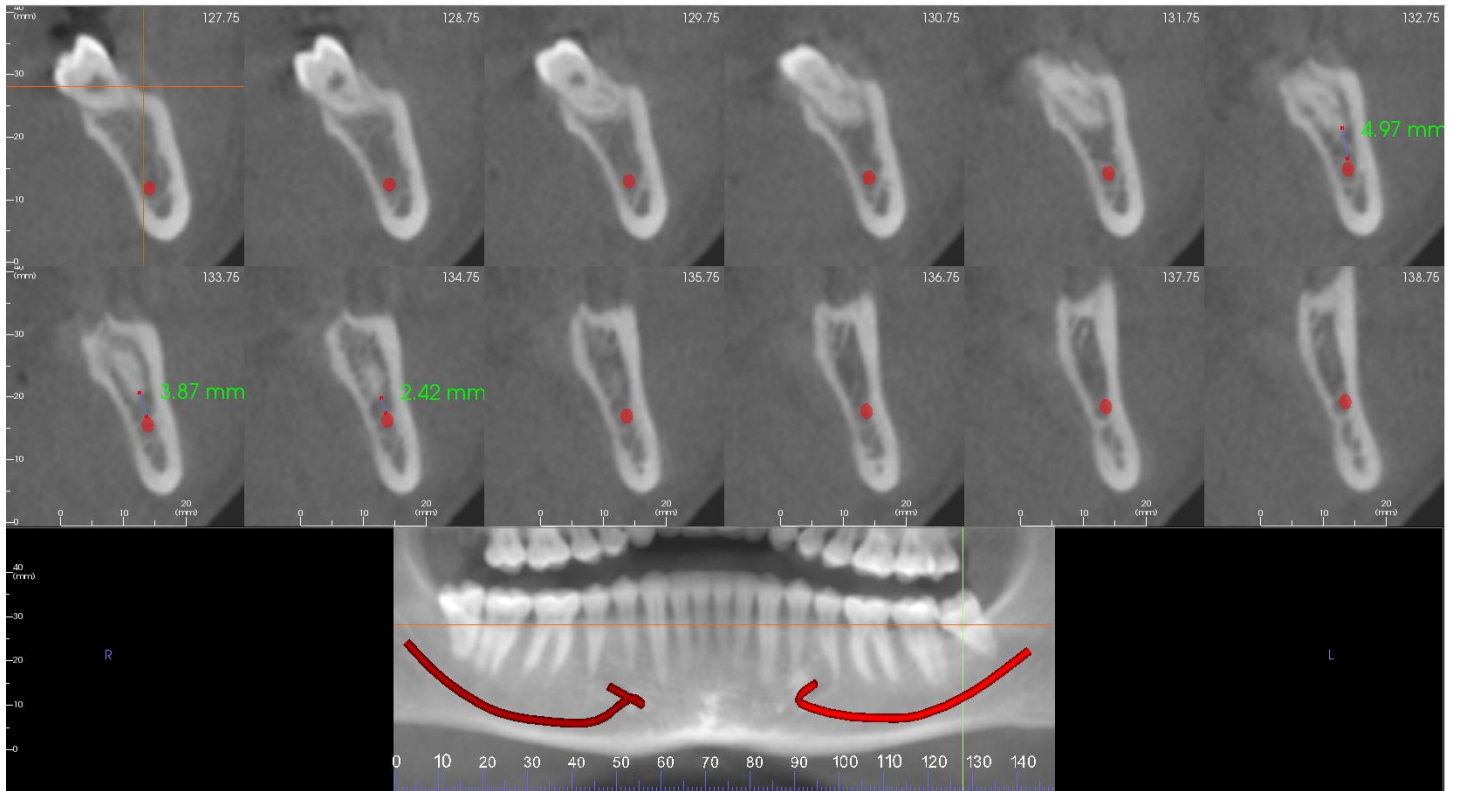
Panoramic reconstruction



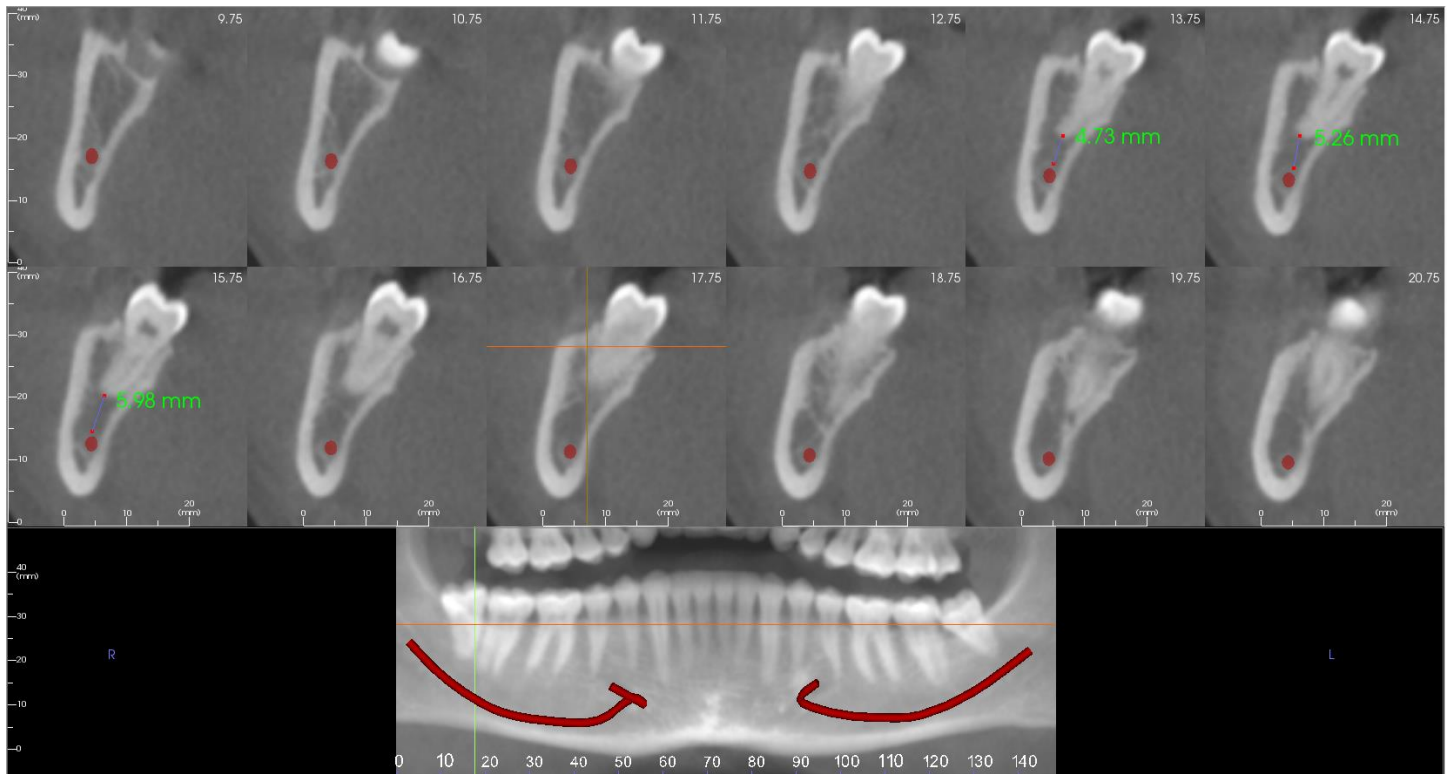
Left TMJ



#16



#17 (1mm increments between cross sections)



#32 (1mm increments between cross sections)