

Patient Name	: Mr.JOGI	Visit No	: CHA250043591
Age/Gender	: 48 Y/M	Registration ON	: 11/Mar/2025 09:52AM
Lab No	: 10140886	Sample Collected ON	: 11/Mar/2025 09:52AM
Referred By	: Dr.MH KHAN **	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 11/Mar/2025 02:15PM

CBCT FULL SCAN

SCAN TYPE: CBCT of Upper and Lower Jaw

CLINICAL NOTES: Evaluation of Upper and Lower Jaws. History of swelling in the left maxilla. Pain on opening and closing the mouth

GENERAL OBSERVATIONS

DENTAL FINDINGS:

Missing teeth: 18, 28, 48 are missing.

Implants: No implants are present.

Caries: Diffuse radiolucency involving dentin wrt 44 maybe suggestive of dental caries.

Diffuse radiolucency involving dentin wrt 45 maybe suggestive of dental caries.

Diffuse radiolucency involving enamel, dentin and approaching pulp on the distal aspect of 46 maybe suggestive of dental caries.

Attrition: There is generalized mild – moderate attrition

Fractured crown: Loss of crown structure involving enamel and dentin wrt 12, 13, 17, 21 maybe suggestive of crown fracture

Restorations: No restorations are placed.

Endodontics: No teeth are endodontically treated.

Apical pathology: There is mild widening of PDL at the periapex of 21, 24

Periodontology: There is mild loss in surrounding alveolar bone height

Third Molars: 18, 28, 48 are missing. 38 is supraerupted

Other Findings: There is evidence of bone remodelling in the 48 region which maybe suggestive of a healing extraction socket. of root stump wrt 48.

TMJ: The TMJ are not seen in the field of view.

MAXILLARY SINUSES: The cortical outlines of the maxillary sinuses are intact bilaterally.

A non corticated radiopacity suggestive of fluid levels is seen in the lower half of the left maxillary sinus.

A non corticated dome shaped radiopacity is seen on the floor and anterior wall of the right maxillary sinus.

The osteomeatal complex is patent on the right side and cannot be visualized on the left side.

NASAL CAVITY: The nasal turbinates and septum appear to be covered by a thick layer of mucous. It is even causing narrowing of the right nasal cavity.

CALCIFICATIONS: No abnormal calcifications are noted within the field of view.



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IMPRESSIONS

1. Diffuse radiolucencies involving enamel and dentin wrt 44, 45, 46 maybe suggestive of dental caries
2. Loss of crown structure involving enamel and dentin wrt 12, 13, 17, 21 maybe suggestive of crown fracture
3. Mild widening of PDL at the periapex of 21, 24 maybe suggestive of apical periodontitis
4. Bone remodelling in the 48 region maybe suggestive of healing extraction socket. There is also evidence of RS wrt 48 region (Adv. IOPAR)
5. Radiopacity involving the lower half of left maxillary sinus maybe suggestive of acute or chronic maxillary sinusitis.
Dome shaped radiopacity seen on the floor of the right maxillary sinus maybe suggestive of retention cyst/mucocoele.
Evaluation by an Otorhinolaryngologist is advised

Sincerely,

Dravid Devaiah

Dr. Dravid Devaiah, BDS, MDS
(Oral and Maxillofacial Radiologist)

PLEASE NOTE: The information and recommendations are based on the provided history, imaging rationale and volumetric data set and is meant for consultation purposes only. Cone beam CT has certain limitations in visualizing soft tissue structures, assessing fine bone detail, and detecting caries. Diagnosis, medical advice, and treatment are ultimately the responsibility of the treating physician or dentist.

For any further details regarding the report or any other report-related queries, please contact me at +91 7760065671.

CHARAK

*** End Of Report ***

