

**Patient:**           **Patient Name**  
**DOB:**             10/19/1900

**Ref. Doctor:**     Dr. Doctor

**Scan Source:**    **Your Imaging Center**  
**Study:**           CBCT  
**Study Date:**     01/15/2013  
**Report Date:**    01/23/2013  
**Study Purpose:**  Impaction/Localization

**Dr. Notes:**

---

**OBSERVATIONS**

**DENTAL FINDINGS:** All teeth are present. Developing follicles of third molars are seen in all quadrants. **Tooth #6** is vertically impacted with the crown angled slightly mesially and the root directed distally. The tooth is distally displaced in the alveolar bone such that its crown is in the inter-radicular region of #4, 5 and positioned buccal to them. The apical third of the root has a mesial curvature. The roots of #5 are mesially displaced while those of #4 are distally displaced; no evidence of external resorption is however noted. Deciduous tooth C is retained. **Tooth #11** is horizontally impacted with the crown minimally inferior and palatal relative to the root. The crown is in close proximity to the apex of #10; however no evidence of resorption is noted. The cervical aspect of the crown is palatal to the apex of the buccal root of #12. The follicular sac measures 2.5mm in the maximum dimension; this is at the upper limit of normal. The mandible is not completely visualized in the scan.

**TMJs:** Not completely visualized in the scan.

**SINUSES:** Not completely visualized in the scan. Mucosal thickening is noted on the floor of the maxillary sinuses; this is within normal limits. The ostiomeatal complex is beyond the scan periphery.

**NOSE:** No abnormalities detected in the visualized portion.

**AIRWAY:** The dimensions of the airway, posterior to the soft palate and tongue, are within normal limits. Enlargement of the adenoids and the palatine tonsils is noted; airway patency in the nasopharynx and the oropharynx is however not compromised. Tonsillar enlargement is a common finding in children and they tend to gradually regress after age 12.

**IMPRESSIONS**

- Findings on impacted teeth #6, 11 are as described. The PDL space on both teeth is preserved; suggestive of no ankylosis.
- Radiographic findings in the remainder of the CBCT scan are within normal limits; soft tissue evaluation is limited by the CBCT modality.

Sincerely,

Dr. OMR  
Dip., American Board of Oral & Maxillofacial Radiology



Panoramic Reconstruction



Right lateral view



Frontal view



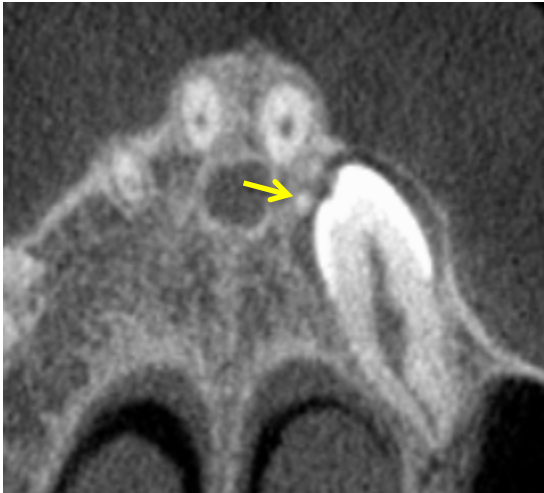
Left lateral view



Tooth #6 – Sagittal view



Tooth #6 – Coronal view  
Note buccal position to #4



Axial view – Tooth #11  
Arrow points to apex of #10