

PATIENT: Bruin Bear
DATE OF BIRTH: 2-2-1993
EXAM DATE: 1-1-2022
REFERRED BY: Dr. UCLA

Clinical Indications

Comprehensive evaluation

Radiographic Examination

CBCT, both jaws with cranium

Image Quality

Optimal for diagnosis

Radiographic findings:**Dentition/Skeletal:**

- Teeth nos. 1, 5, 12, 16, 17, 25 and 32 are missing.
- The PDL space surrounding the root of tooth no. 4 is symmetrically wide.
- Trabecular bone at the apices of teeth nos. 8 and 9 is radiolucent. The trabecular bone around the mandibular incisors is partly radiolucent. Both these areas likely represent anatomic variation.
- The lamina dura and PDL space around the roots of the other maxillary and mandibular teeth are intact and regular.
- The patient has a straight facial profile and a normal maxillary incisor overjet and overbite.

TMJs:

- Right condyle:
 - Partly flattened with focally sclerotic borders.
 - The superior aspect of the condyle is irregular with probable erosion of the anterosuperior surface.
 - The condyle is seated in a retruded position within the glenoid fossa.
- Left Condyle:
 - Partly flattened with focally sclerotic borders.
 - Minimal anterior osteophyte formation is noted of the left condyle.

Airway:

- Normal oropharyngeal airway with a minimum cross-sectional area of ~189 mm².

Paranasal Sinuses:

- The paranasal sinuses are well-aerated and normal.

Other findings:

- Circumferential calcifications are noted within the cavernous segments of the internal carotid artery.
- An intracranial radiopacity is noted along the sagittal midline, consistent with calcification of the pineal gland. This is a physiologic calcification, generally with no clinical significance.

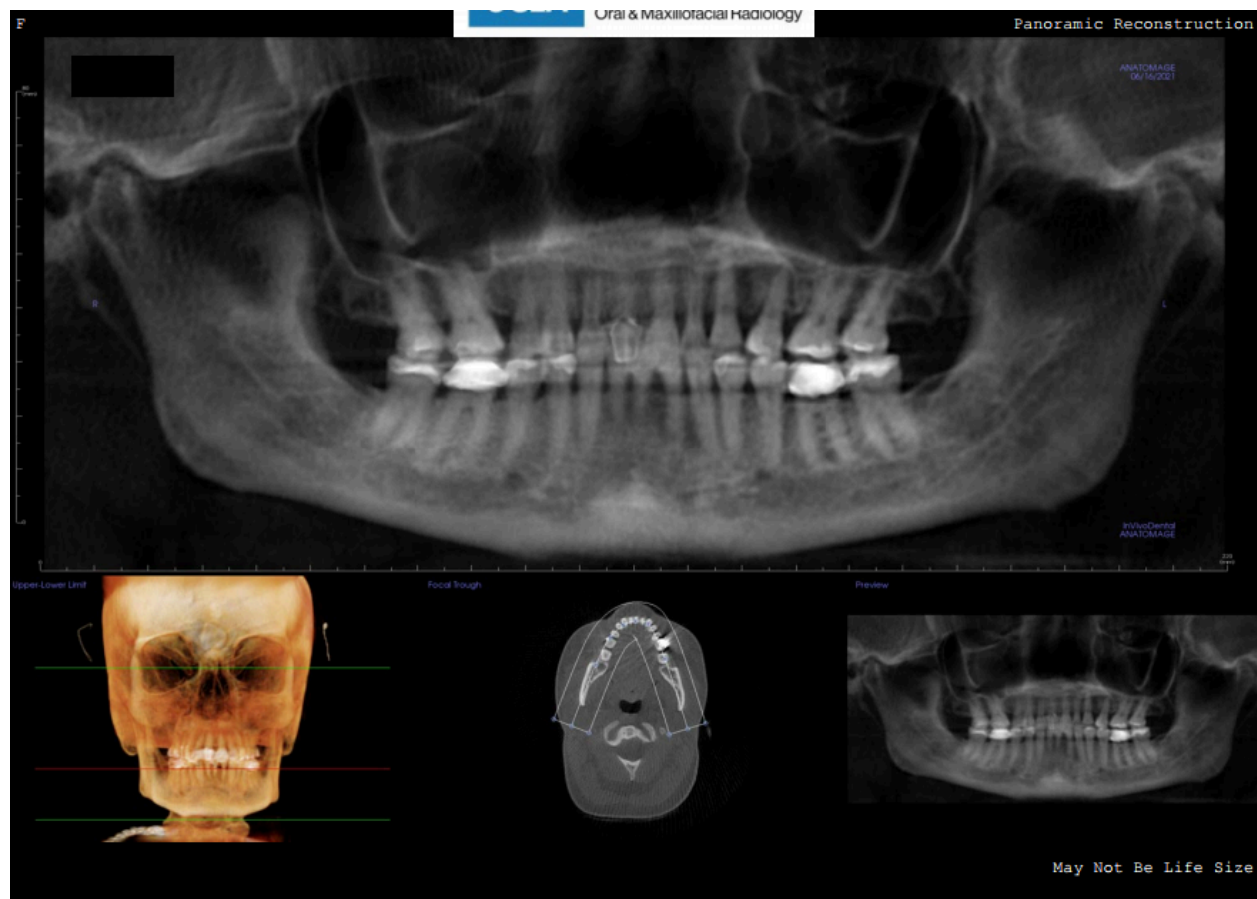
Impression:

1. Tooth no. 5: symmetrical PDL space widening likely due to an increase in occlusal forces.
2. TMJs:
 - a. Minimal osteoarthritic changes of the right and left TMJs.
 - b. Retruded position of the right condylar head with narrowing of the interarticular joint space, suggestive of internal derangement of the articular disc.
 - c. Correlation with patient symptoms of TMJ pain and/or dysfunction is recommended.
3. Calcifications within the cavernous segments of the internal carotid artery. Correlation with patient history of atherosclerosis is recommended.

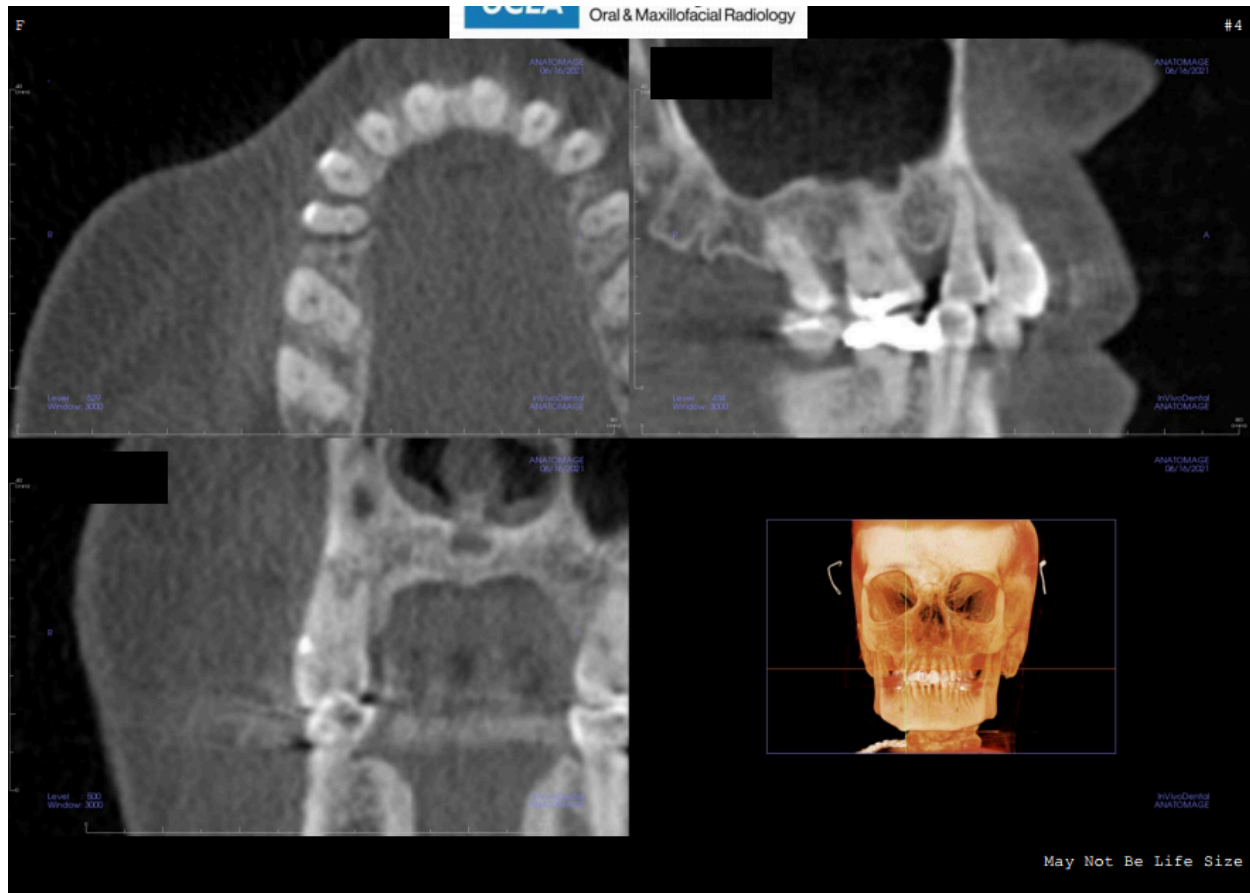
Electronically signed by Dr. Ava Zaboli on 7-30-2025

----- Images Are Provided Below -----

Panoramic Reconstruction



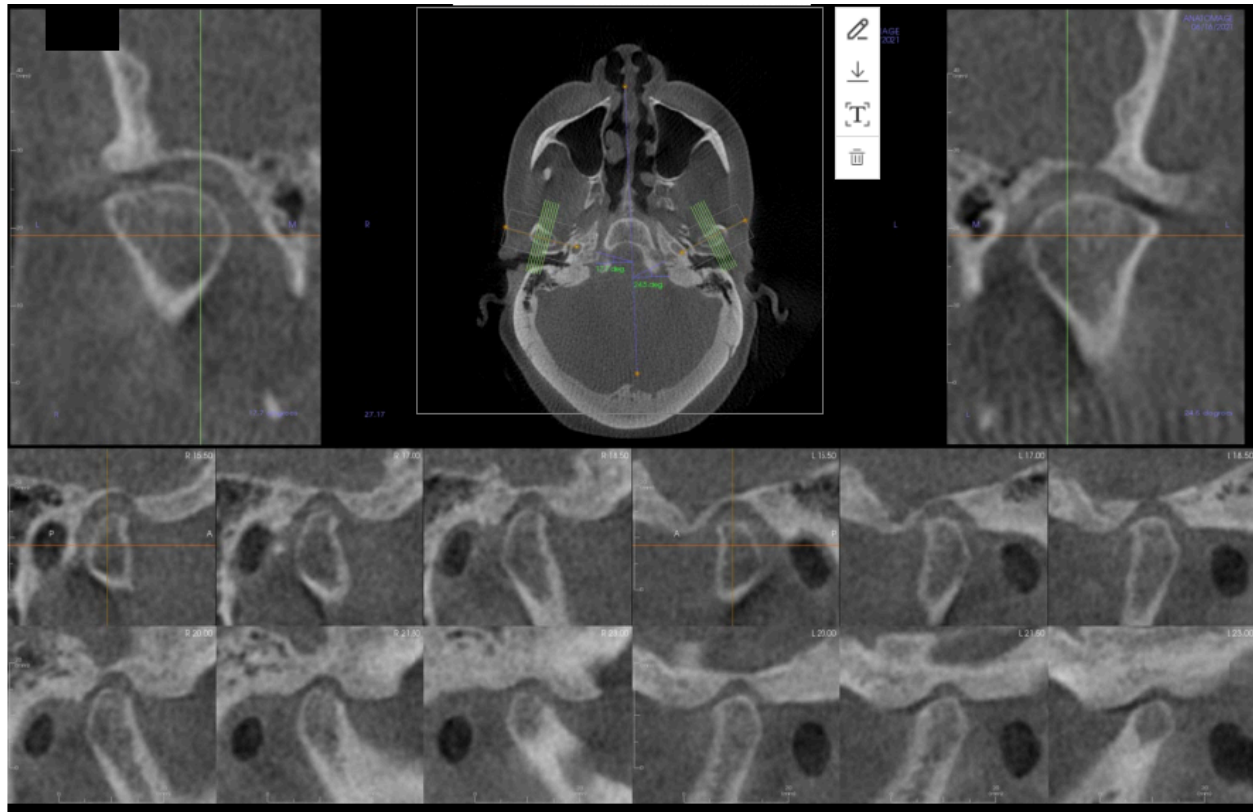
Tooth no. 4



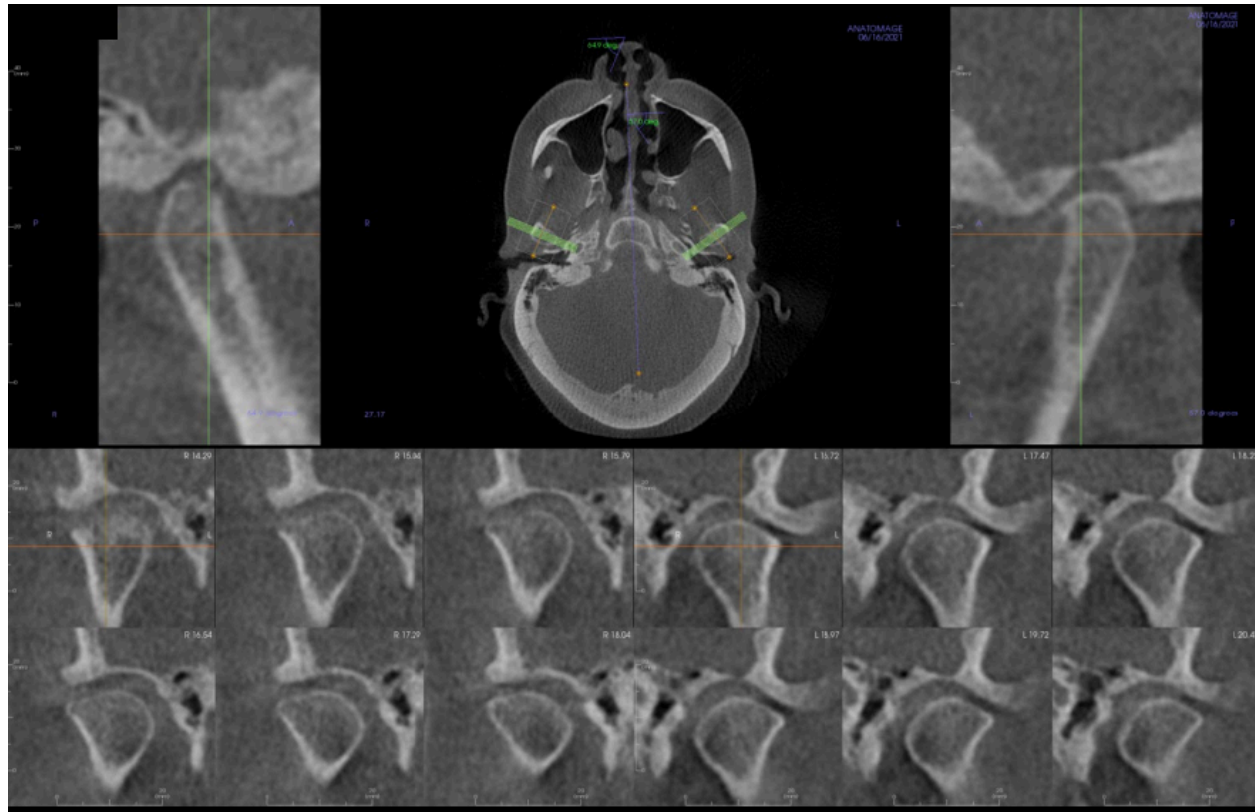
Lateral Cephalometric



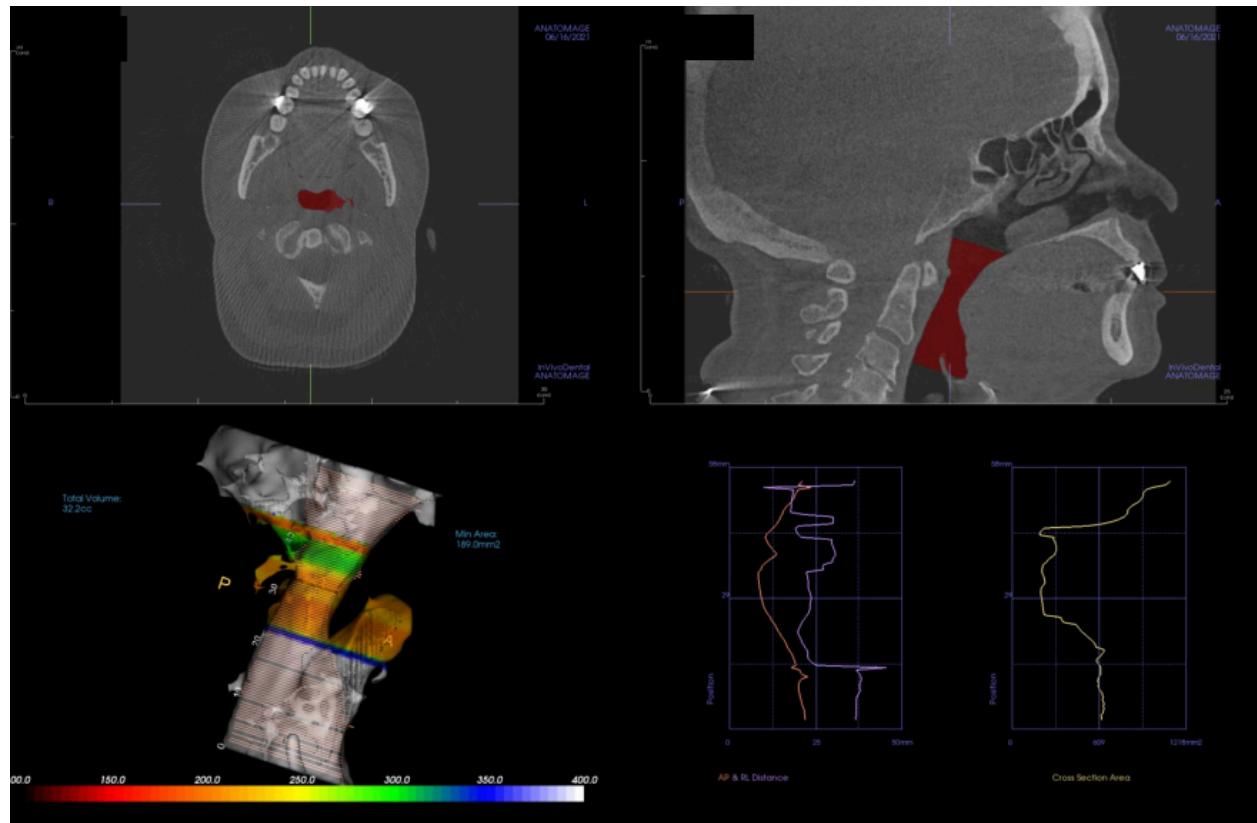
TMJ-lateral sections



TMJs - coronal sections



Airway



Volume Render

