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# **Cone Beam Computed Tomography Report**

Patient Name: Doe, John Patient ID: 000001
Patient DOB: 01/01/2006 Patient Gender: M

Referring Provider: Dr. Broctoon Image Date: 10/09/2020

Purpose of Exam: Evaluate radiolucent lesion on teeth #5-8 region also associated with crown of impacted tooth #6

Scan Details: J Morita 3D Accuitomo 170; 40mm X 40mm; Resolution: 0.078mm; 90kVp; 5mA; 17.5sec; CTDIvol: 4.57mGy

Report Date: 10/09/2020

## **Region of Interest**

• There is a lytic lesion of the anterior right maxilla measuring 13 mm x 12 mm in the axial orientation and extending from the palatal aspect of tooth #5 to the incisive foramen. The lesion has well defined, thickly corticated borders with areas of endosteal scalloping giving it a lobulated appearance. There is no clear evidence of internal hyperdensities, nor is there evidence of tooth root resorption. The ectopic impaction of #6 is most likely related to the lesion. Slight palatal expansion is evident, with marked thinning yet no perforation of the cortical bone in this area. There is a perforation of the buccal cortical bone adjacent to tooth #6 which appears to be from the gubernacular canal and not resultant from the lesion. The lesion approximates, but does not involve the border of the incisive canal. It is worth mentioning that the tooth follicle associated with #6 appears to be partially associated with the lesion.

## **Paradental Bone and Dentition**

- Partial volume doesn't allow visualization of complete dentition.
- Retained tooth #C.
- Tooth #6 impacted, with dilaceration of root structure and ectopically positioned with crown tipped mesially and root tipped distally.
- Tooth #7 shows partial obliteration of the canal space. In addition, there is a lytic lesion apical to the tooth root that appears to be of separate origin from the region of interest. The mesial extent of the lesion approximates the apex of tooth #8.

#### Right Maxillary Sinus/Nasal Fossa

No significant findings

## Soft-Tissue

· No significant findings.

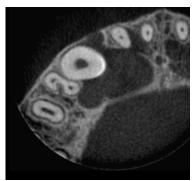
#### **Impression**

- The presentation of the lesion affecting the anterior right maxilla is most consistent with an odontogenic cyst or benign tumor.
   The lesion appears non-aggressive/non-infiltrative. The differential diagnosis for this lesion includes the following, in order of likelihood
  - Odontogenic Keratocyst most likely diagnosis based on appearance, patient age and frequency of occurrence.
  - Dentigerous Cyst Less likely based on general appearance including scalloped borders; although the lesion location, patient age and frequency fit nicely.
  - Adenomatoid Odontogenic tumor Least likely based on relative rarity, scalloping and lack of internal hyperdensities.
     The demographic and location do correlate with this lesion.
- Tooth #7 shows a lytic lesion separate from the main lesion of interest. This most likely represents rarefying osteitis associated with a periapical granuloma. It is possible tooth #7 has suffered trauma in the past, explaining the partial canal space obliteration; or obliteration and subsequent rarefying osteitis is sequelae from the lesion of interest. Treat accordingly.

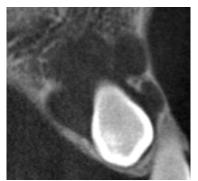




Rendered panoramic view of the region of interest.







Axial, coronal and sagittal slices of the region of interest. Notice the lytic nature, without evidence of internal hyperdensities as well as the lobulated nature of the lesion.



Area of buccal perforation

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