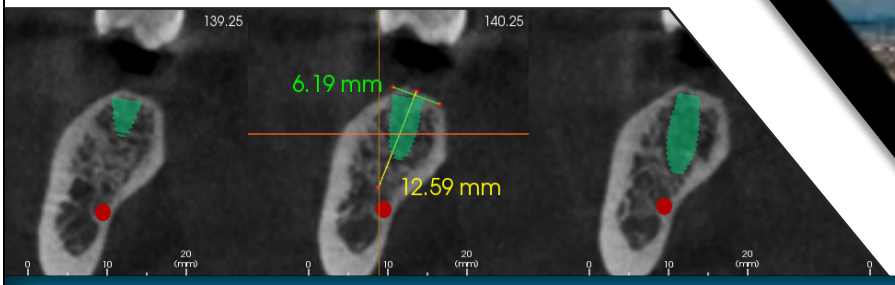
#122, S. M. Narayana Nagar,
Anna Nagar west Ext.,
Chennai - 600101

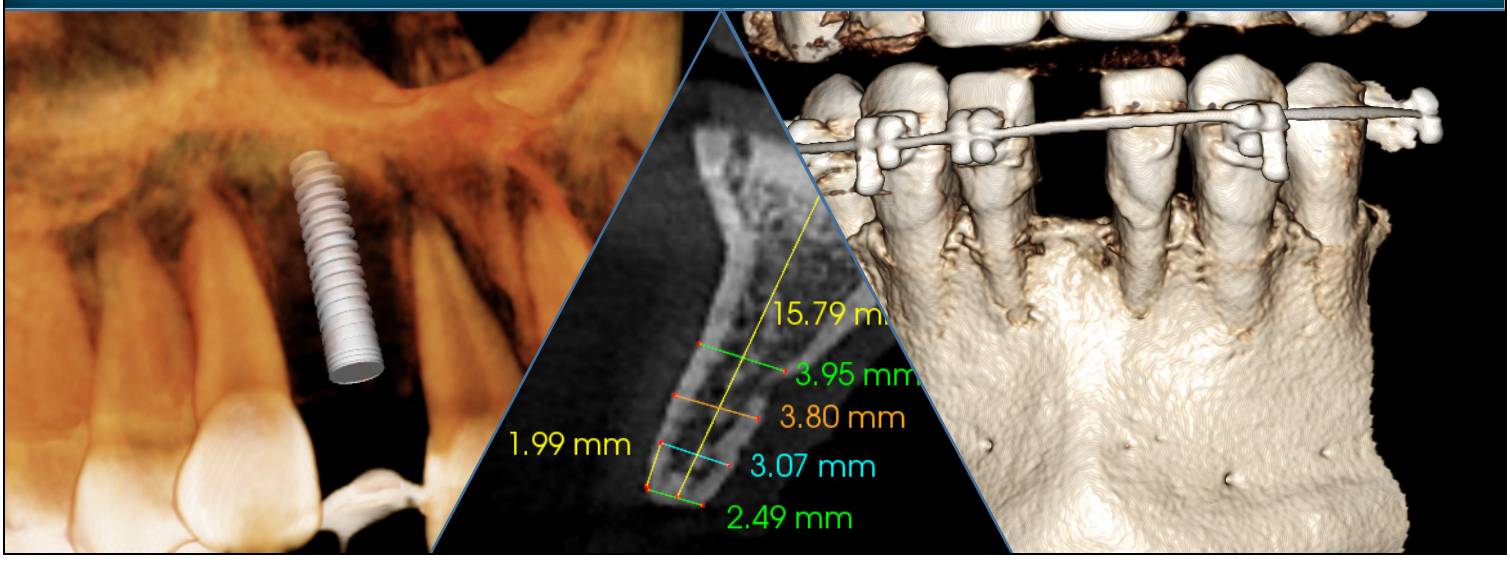
Ph: 2625 0756, 2656 0757

REPORTED BY: Dr. ANU SUSHANTH. A

CBCT REPORT



MODERN LAB & X-RAYS



Modern Lab & X-Rays

CONE BEAM CT REPORT

Patient information

Name: Rajasekar	**Age: 28**	**Sex: Male**
Scan Date: 19.05.2022	**Report date: 20.05.2022**	
Referred by: Dr. Ramesh Selvam	**Scan Indication: Implant site assessment**	

Clinical Comments/Indications for Scan:

The scan was performed to evaluate the bone quality and quantity available for implant treatment plan in Maxilla and Mandible.

Clinical details provided: Nil

Radiographic Examination:

Cone-beam CT volumetric scan obtained with the Carestream CS 9600 scanner and the diagnostic images are of adequate quality to give a conscious radiographic diagnosis.

Observations:

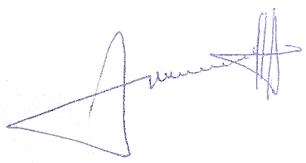
Region of Interest: Mandible

Maxilla: the alveolar process of the edentulous regions of the anterior maxilla is demonstrating adequate bone dimension to sustain multiple conventional implants. the regions of 11 12 and 22 is demonstrating slight labial inclination to the ridge. the bone in the maxilla can be categorised as D3 type.

Mandible: we can observe fixation device with screws embedded into the bone at the anterior edentulous mandibular region, significantly reducing the viable bone height at these regions. the bone in the anterior mandible can be categorised as D2 type.

Kindly go through the illustrations to understand the ridge anatomy properly

Case reported by:



Dr Anu Sushanth. A. (MDS, Asso Prof, HOD, Dept of OMR, Educare Institute of Dental Sciences)

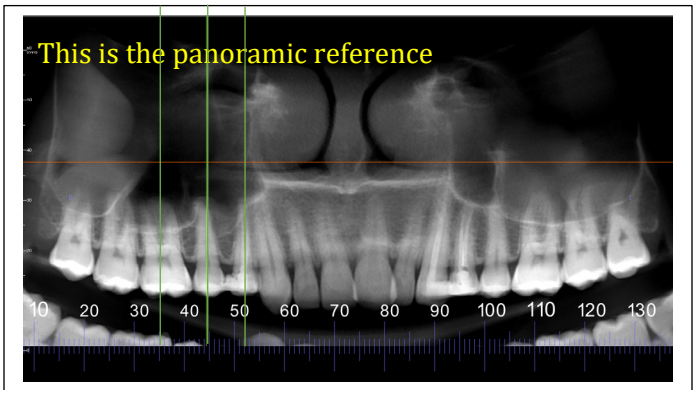
Consultant Radiologist

Modern Scans. Chennai.

Ph: 9995371754 (please contact for any queries)

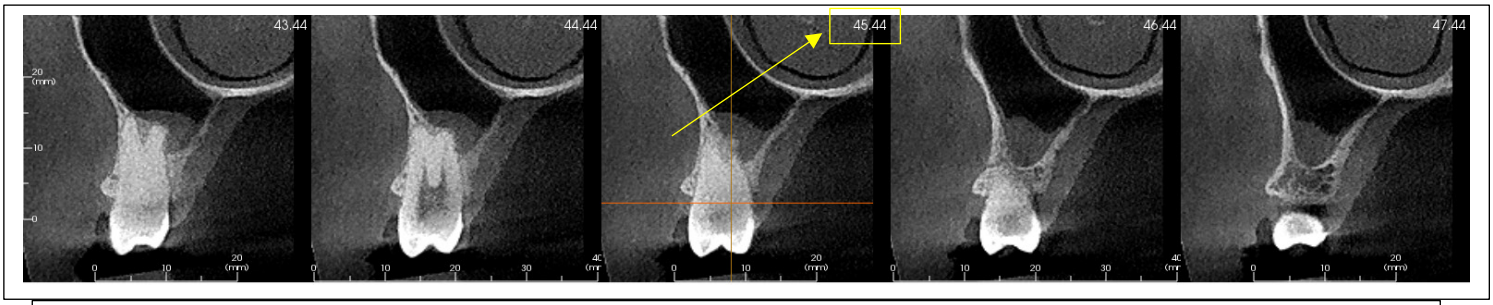
HOW TO READ THIS REPORT

1. Reference images



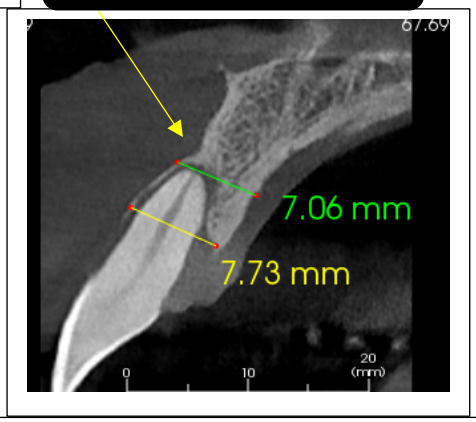
Panoramic reference has vertical reference lines, which corresponds the cross sections at the region of interest

2. Cross sections

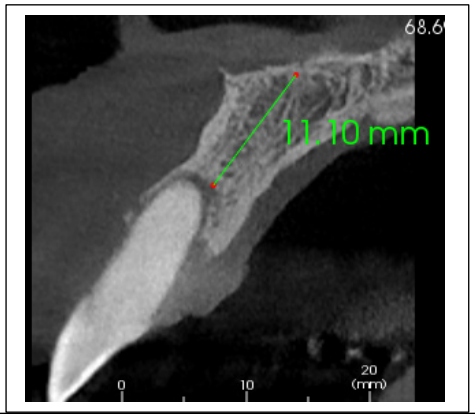


Multiple cross sections will be made with a specific inter-slice interval. And at the cross section which is representative of the implant site will be marked with vertical reference marker and the corresponding section will studied for the dimensions of the ridge.

3. Measurements



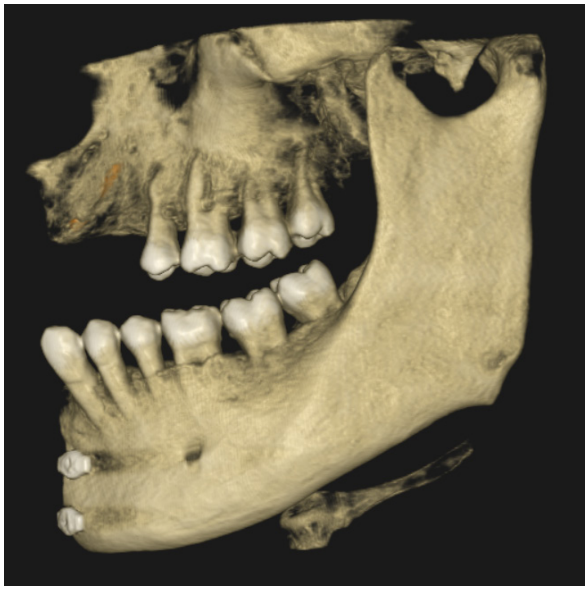
These horizontal measurements represents the bucco-lingual (thickness of ridge) measures of the ridge



This vertical measurement represents the height of the ridge

ILLUSTRATIVE IMAGES OF THE PRESENT STUDY

Lateral view



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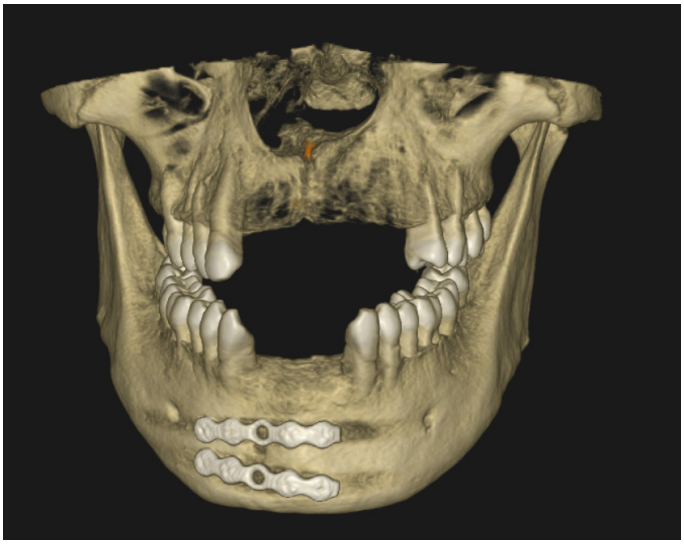
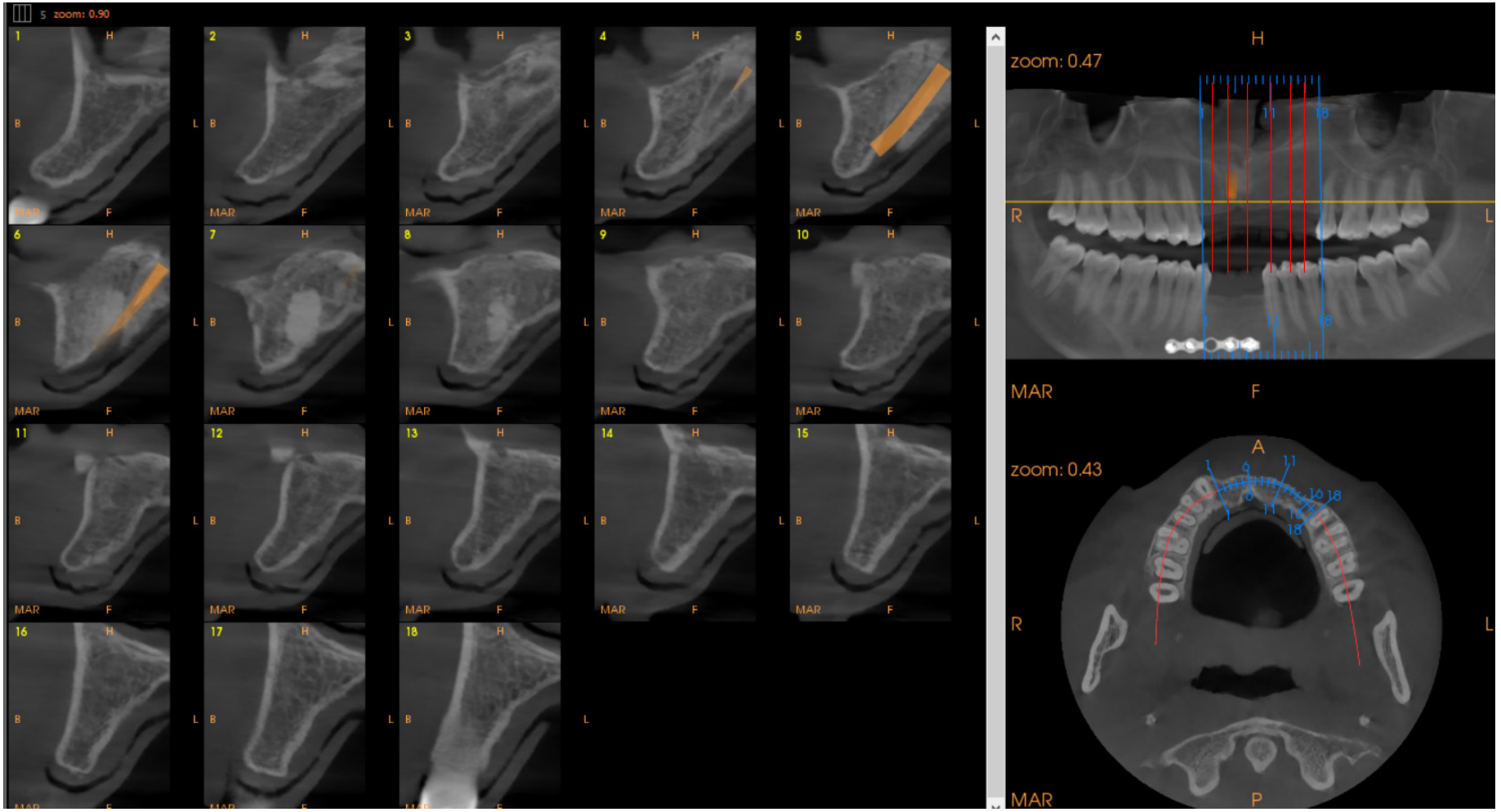
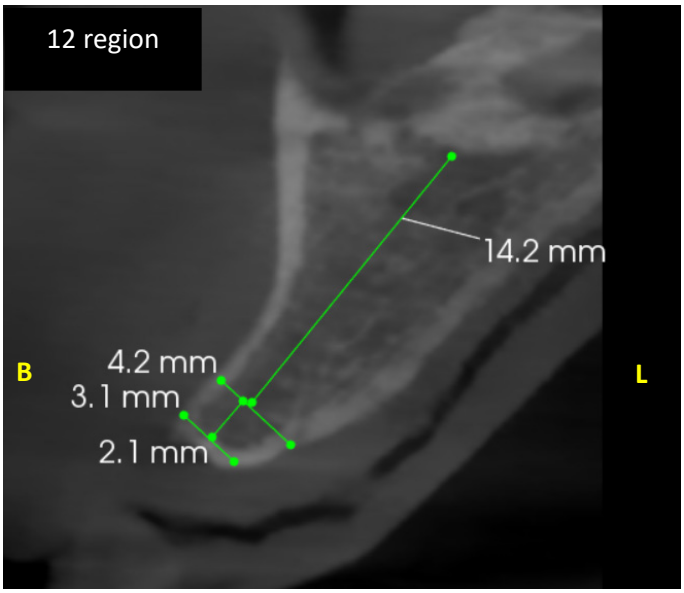


Occlusal view

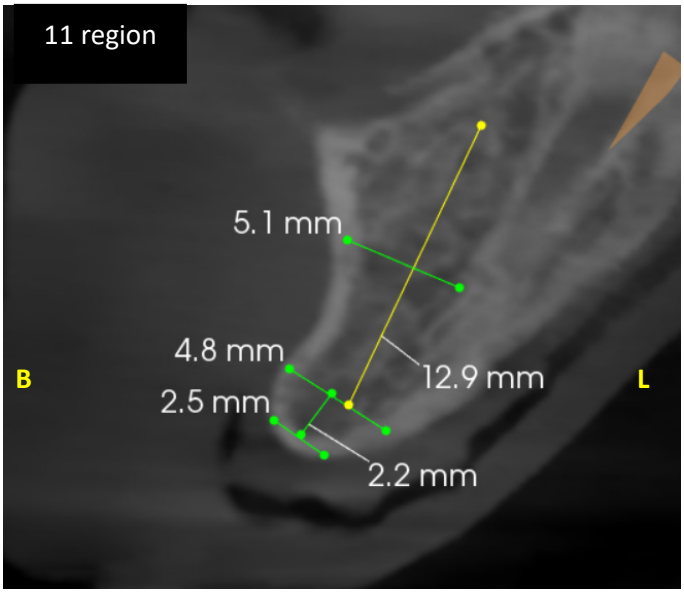
Planned sections at mandible



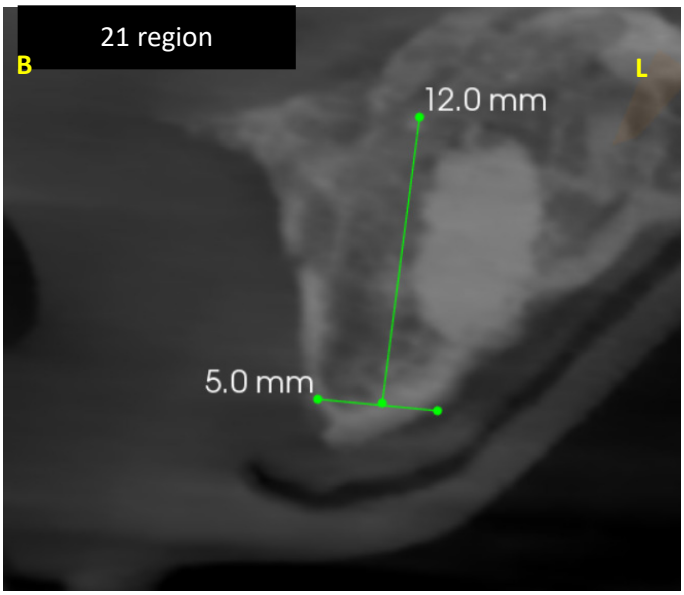
The red markers represents the representative slices for the position of the implants. Enlarged images of these sites are measured are illustrated in the following section…



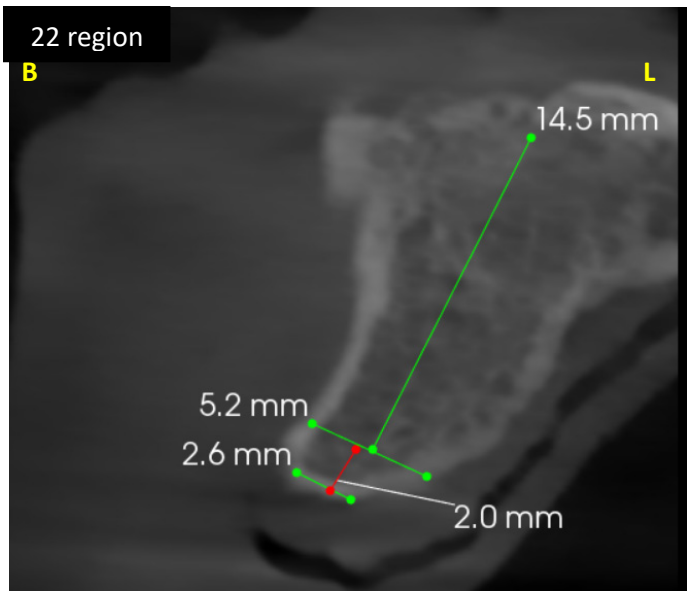
The bone at this site is D3 type.



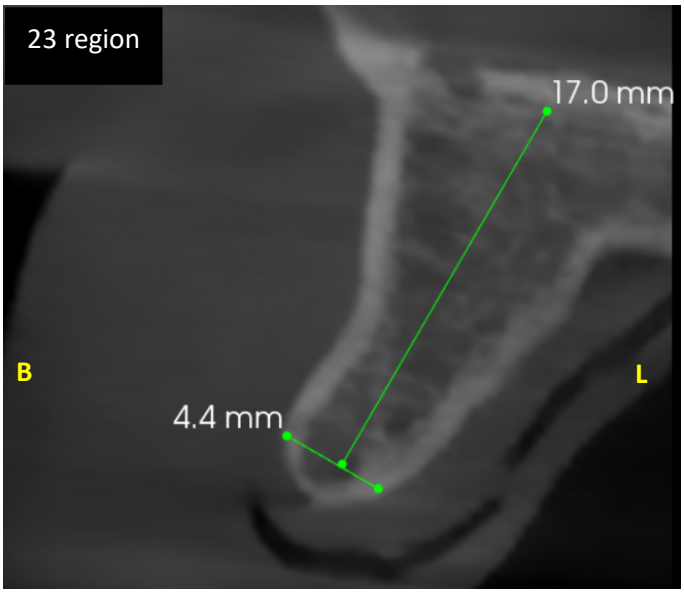
The bone at this site is D3 type. Since the incisive canal is located posterior to this implant site, the path of insertion should be slightly in the labial direction.

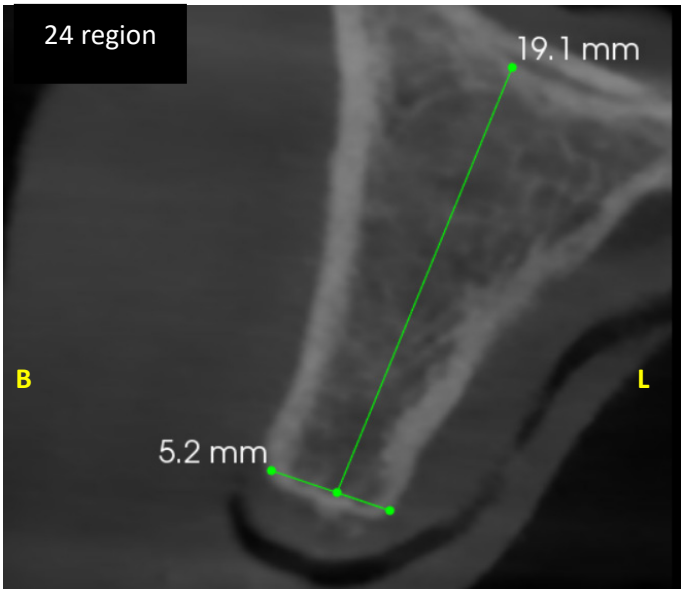


The bone at this site is D3 type. There is a radiodense shadow located at this site which is possibly idiopathic osteosclerosi



The bone at this site is D3 type. there is a slightly labially inclined but has adequate bone dimension to sustain implant





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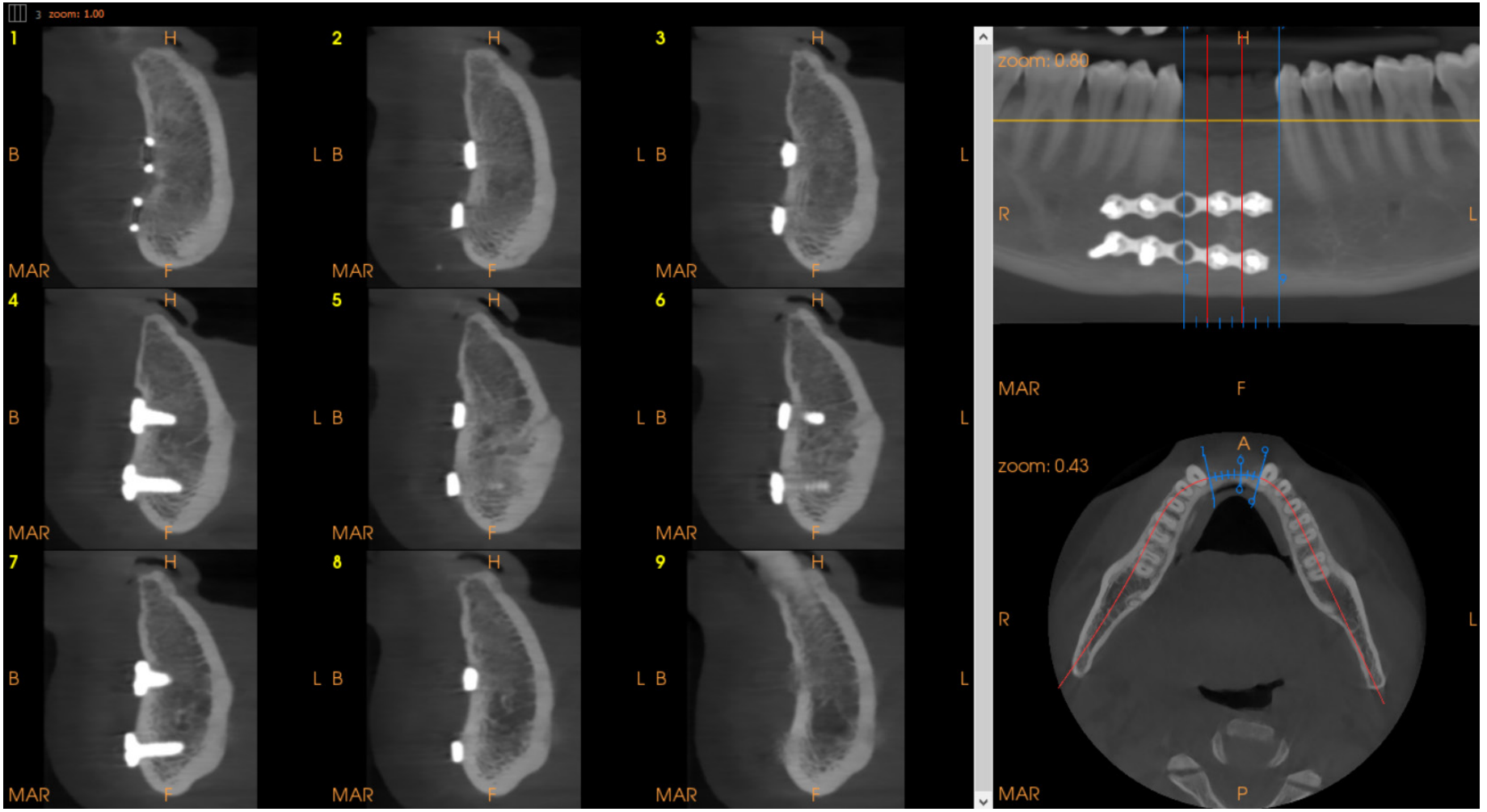
Planned sections at mandible



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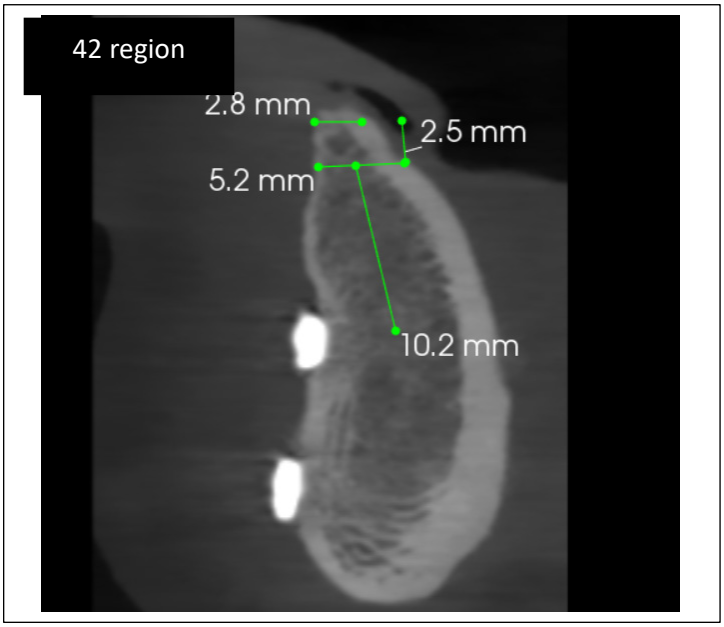

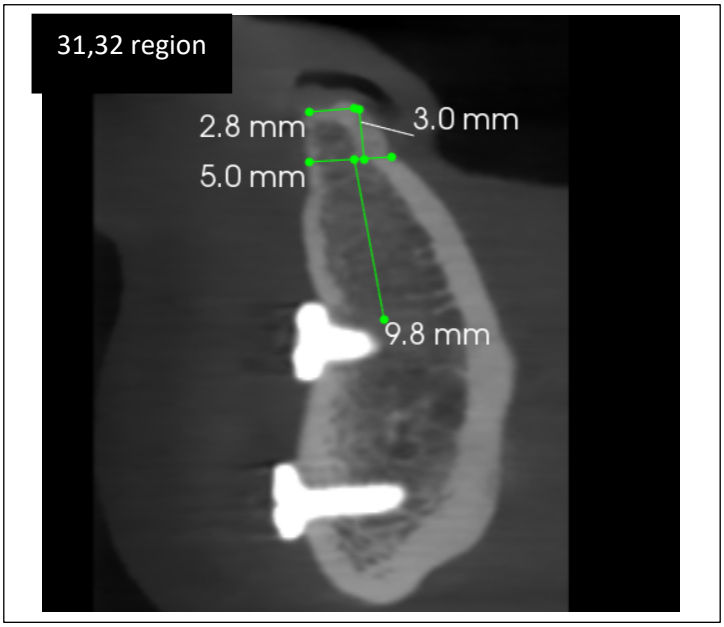

The bone at this site is D3 type. There is an usable bone height of 10 mm at this site

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End of report