*ADD HEADING*

**SCAN REPORT**

| **PATIENT NAME:KAMALA^66YRS F [OPG]3D[25]**  **AGE/GENDER:0 /** | **AREA AND TYPE OF STUDY : Lower left second premolar** | **Date: 2024-01-12** |
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| **Referred By:00** | **Resolution : 150 microns** | **Exposure Parameters: 120 KV , 8.00 ma** |

**Axial, sagittal and coronal sections were obtained, and lateral sections along the arch were made and assessed to make the following report…**

**Findings:**

***Canals traced:***

***Posterior superior alveolar canal in the left posterior maxilla in the lateral walls of maxillary sinuses parallel to the floor.***

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**DIMENSIONS OF BONE IN 17 to 27 REGION:**

* Slice number 1 to 27 distomesially represents right molar region,
* Slice number 28 to 37 distomesially represents right premolar region,
* Slice number 38 to 63 distomesially/ mesiodistally represents anterior (canine to canine) region,
* Slice number 64 to 73 mesiodistally represents left premolar region,
* Slice number 74 to 100 mesiodistally represents left molar region.

All the sections and measurements are made 1 mm apart from each other**.**

| **24 REGIONS** | | |
| --- | --- | --- |
| **Length varies from**  **The height of the bone is measured from the crest to the mandibular canal.** | **Buccolingual width at 2mm, 6mm and 10mms from the crest.**  **The buccolingual width is measured from the buccal cortical plate to the lingual cortical plate at 2, 6 & 10mms from the crest.** | **Bone quality** |
| **24 REGION**  **[slice 64 to 68]** | ***Crestal bone: is thick, round and well formed.***  ***Buccal bone: is thin/thick and intact.***  ***Lingual bone: is thin/thick and intact.***  ***Cancellous bone: shows moderately dense/fine trabecular pattern.***  ***D1***  ***D2***  ***D3*** |  |
| 00mm to 00mm | **At 2mm: 0mm to 0mm**  **6mm: 0mm to 00mm**  **10mm: 0mm to 00mm** |  |
| ***The length is around 00mm from the crest to the incisive branch and is 00mm from the crest to the lower border of the mandible/mandibular canal.***  ***Shows good/ moderate/ deficient/ severely deficient bone length.***  ***We could see incisive branch in this region which is traced measured.***  ***The ridge is straight/slopes towards buccal/lingual aspect and shows no undercut.*** | ***The width is around 0mm close to the crest and this gradually increases as we go apically.***  ***Shows good/ moderate/ deficient/ severely deficient buccolingual width.*** |  |

| **25 REGIONS** | | |
| --- | --- | --- |
| **Length varies from**  **The height of the bone is measured from the crest to the mandibular canal.** | **Buccolingual width at 2mm, 6mm and 10mms from the crest.**  **The buccolingual width is measured from the buccal cortical plate to the lingual cortical plate at 2, 6 & 10mms from the crest.** | **Bone quality** |
| **25 REGION**  **[slice 69 to 73]** | ***Crestal bone: is thick, round and well formed.***  ***Buccal bone: is thin/thick and intact.***  ***Lingual bone: is thin/thick and intact.***  ***Cancellous bone: shows moderately dense/fine trabecular pattern.***  ***D1***  ***D2***  ***D3*** |  |
| 00mm to 00mm | **At 2mm: 0mm to 0mm**  **6mm: 0mm to 00mm**  **10mm: 0mm to 00mm** |  |
| ***The length is around 00mm from the crest to the incisive branch and is 00mm from the crest to the lower border of the mandible/mandibular canal.***  ***Shows good/ moderate/ deficient/ severely deficient bone length.***  ***We could see incisive branch in this region which is traced measured.***  ***The ridge is straight/slopes towards buccal/lingual aspect and shows no undercut.*** | ***The width is around 0mm close to the crest and this gradually increases as we go apically.***  ***Shows good/ moderate/ deficient/ severely deficient buccolingual width.*** |  |

| **26 REGIONS** | | |
| --- | --- | --- |
| **Length varies from**  **The height of the bone is measured from the crest to the mandibular canal.** | **Buccolingual width at 2mm, 6mm and 10mms from the crest.**  **The buccolingual width is measured from the buccal cortical plate to the lingual cortical plate at 2, 6 & 10mms from the crest.** | **Bone quality** |
| **26 REGION**  **[slice 74 to 82]** | ***Crestal bone: is thick, round and well formed.***  ***Buccal bone: is thin/thick and intact.***  ***Lingual bone: is thin/thick and intact.***  ***Cancellous bone: shows moderately dense/fine trabecular pattern.***  ***D1***  ***D2***  ***D3*** |  |
| 00mm to 00mm | **At 2mm: 0mm to 0mm**  **6mm: 0mm to 00mm**  **10mm: 0mm to 00mm** |  |
| ***The length is around 00mm from the crest to the incisive branch and is 00mm from the crest to the lower border of the mandible/mandibular canal.***  ***Shows good/ moderate/ deficient/ severely deficient bone length.***  ***We could see incisive branch in this region which is traced measured.***  ***The ridge is straight/slopes towards buccal/lingual aspect and shows no undercut.*** | ***The width is around 0mm close to the crest and this gradually increases as we go apically.***  ***Shows good/ moderate/ deficient/ severely deficient buccolingual width.*** |  |

¬ There is no evidence of bony pathology.

¬ The mesiodistal distance between 00 and 00 are 00mm, 00mm and 00mm at the level of CROWN, CEJ and MIDDLE 3RD of root respectively.

**Radiologic impression:**

¬ Completely/Partially edentulous mandible.

¬ Chronic generalized/localized periodontitis.

¬ Deficient/Sufficient bone dimension and good quality of bone of implant placement.

| **VIRTUAL IMPLANT** |
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| A virtual implant is placed from Nobel Biocare company based on the length and width of the bone available, this is just to give an idea and should not be consider final. |

| VIRTUAL IMPLANT | LENGTH | HEAD DIAMETER | APICAL DIAMETER | ANY REMARKS |
| --- | --- | --- | --- | --- |
| V1 |  |  |  |  |
| V2 |  |  |  |  |
| V3 |  |  |  |  |
|  |  |  |  |  |

**DISCLAIMER:**

***The radiographic findings must be correlated with clinical findings and appropriate diagnostic tests. This is a consultative report only and is not intended to be a definitive diagnosis or treatment plan. Above report cannot be used for medico-legal purpose.***

***Thank you for the referral of this patient and the opportunity to serve your practice.***