



## Grounding Caption

This localization caption provides multi-dimensional spatial analysis of anatomical structures and pathological findings for this panoramic dental X-ray image, including:

Teeth visibility with center points (total: 30):

```
[
  {"point_2d": [1144, 625], "tooth_id": '36', "score": 0.96},
  {"point_2d": [665, 636], "tooth_id": '45', "score": 0.94},
  {"point_2d": [1220, 612], "tooth_id": '37', "score": 0.94},
  {"point_2d": [748, 410], "tooth_id": '13', "score": 0.93},
  {"point_2d": [431, 384], "tooth_id": '18', "score": 0.93},
  {"point_2d": [1296, 587], "tooth_id": '38', "score": 0.93},
  {"point_2d": [647, 388], "tooth_id": '15', "score": 0.92},
  {"point_2d": [591, 618], "tooth_id": '46', "score": 0.92},
  {"point_2d": [1027, 642], "tooth_id": '34', "score": 0.92},
  {"point_2d": [1077, 648], "tooth_id": '35', "score": 0.91},
  {"point_2d": [583, 392], "tooth_id": '16', "score": 0.91},
  {"point_2d": [421, 567], "tooth_id": '48', "score": 0.91},
  {"point_2d": [1230, 401], "tooth_id": '27', "score": 0.91},
  {"point_2d": [987, 657], "tooth_id": '33', "score": 0.9},
  {"point_2d": [504, 387], "tooth_id": '17', "score": 0.9},
  {"point_2d": [508, 608], "tooth_id": '47', "score": 0.9},
  {"point_2d": [910, 420], "tooth_id": '21', "score": 0.89},
  {"point_2d": [904, 635], "tooth_id": '31', "score": 0.89},
  {"point_2d": [964, 424], "tooth_id": '22', "score": 0.89},
  {"point_2d": [771, 639], "tooth_id": '43', "score": 0.89},
  {"point_2d": [1155, 414], "tooth_id": '26', "score": 0.89},
  {"point_2d": [1294, 397], "tooth_id": '28', "score": 0.88},
  {"point_2d": [1047, 430], "tooth_id": '24', "score": 0.87},
  {"point_2d": [711, 634], "tooth_id": '44', "score": 0.87},
  {"point_2d": [807, 417], "tooth_id": '12', "score": 0.86},
  {"point_2d": [1011, 413], "tooth_id": '23', "score": 0.85},
  {"point_2d": [825, 634], "tooth_id": '42', "score": 0.85},
  {"point_2d": [855, 415], "tooth_id": '11', "score": 0.85},
  {"point_2d": [861, 633], "tooth_id": '41', "score": 0.82},
  {"point_2d": [940, 639], "tooth_id": '32', "score": 0.82}
]
```

Wisdom teeth detection (total: 4):

```
[
  {"box_2d": [388, 310, 474, 457], "tooth_id": '18', 'is_impacted': false, 'score': 0.93},
  {"box_2d": [1252, 508, 1341, 666], "tooth_id": '38', 'is_impacted': false, 'score': 0.93},
  {"box_2d": [359, 485, 484, 649], "tooth_id": '48', 'is_impacted': false, 'score': 0.91},
  {"box_2d": [1261, 318, 1326, 476], "tooth_id": '28', 'is_impacted': false, 'score': 0.88}
]
```

Dental Pathological Findings (total: 1):

```
[
  {"box_2d": [767, 332, 876, 511], "tooth_id": '12', 'label': 'calculus', 'score': 0.36}
]
```

Historical Treatments (total: 0):

```
[ ]
```

# Medical Report

## Teeth-Specific Observations

### 1. General Condition

A total of 30 teeth are visualized within the panoramic image. All four wisdom teeth (FDI #18, #28, #38, #48) are present and non-impacted, with normal anatomical positioning. No evidence of missing or supernumerary teeth is observed.

### 2. Pathological Findings

Areas of concern noted for **calculus** on **#12 (upper right lateral incisor)**. The finding appears localized to the root or interproximal surfaces, though further clinical correlation is recommended to confirm. No other pathological lesions, caries, or periapical radiolucencies are evident.

### 3. Historical Interventions

No restorative treatments, root canal therapy, crowns, or implants are detected in the current examination.

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## Clinical Summary & Recommendations

### 1. Priority Concerns

- **Areas of concern for calculus** on **#12**. While not definitively confirmed radiographically, this finding warrants immediate attention for professional debridement and assessment.

### 2. Preventive Measures

- Reinforce biofilm control strategies, including interdental flossing and antimicrobial mouth rinses.
- Educate on plaque removal techniques, emphasizing high-risk areas such as the upper anterior teeth.

### 3. Follow-up Protocol

- Schedule a **6-month recall** for scaling and reassessment of calculus on #12.
  - Consider referral to a periodontist if clinical evaluation confirms significant subgingival calculus or early periodontal involvement.
  - Maintain routine panoramic imaging every 3–5 years for monitoring wisdom teeth and systemic screening.
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\*Report generated using FDI tooth numbering system.\*