

## RADIOLOGY SCAN REPORT

Dr. Rebecca Davies BChD MFDS RCS (Eng) MSc DDR RCR  
GDC 72019

Patient Name: [REDACTED]

DOB: [REDACTED]

CBCT maxilla

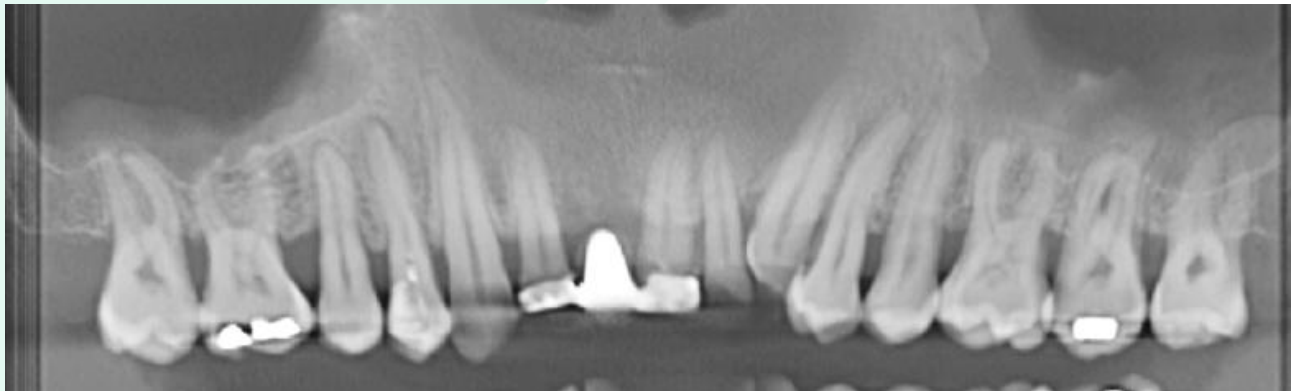
Clinical history / Purpose: UR1 implant planning

Date of scan: 02.06.2025

Referring clinician: Dr Jiten Magan

Report date: 02.06.2025

Findings:



UR8, UR1 are absent. UL8 is erupted vertically into the arch. The teeth generally have advanced periodontal bone loss. Bone loss generally is in the range of 30 to 50%.

UL2 has slightly more bone loss in about of about 70%.

UR4 is a pulpally accessed tooth, it has 2 pulp canals in the 2 fused roots there is an apical lesion buccally which breaches buccal cortical plate, features of apical periodontitis.

No apical pathology considered of endodontic origin elsewhere.

There is a healing extraction socket UR1 and subtle irregular bone noted crestally which could be some bone augmentation material.

No retained roots or features of residual odontogenic disease.

No prominent canalis sinuosis.

The adjacent nasopalatine canal and foramen lie within the range of normal.

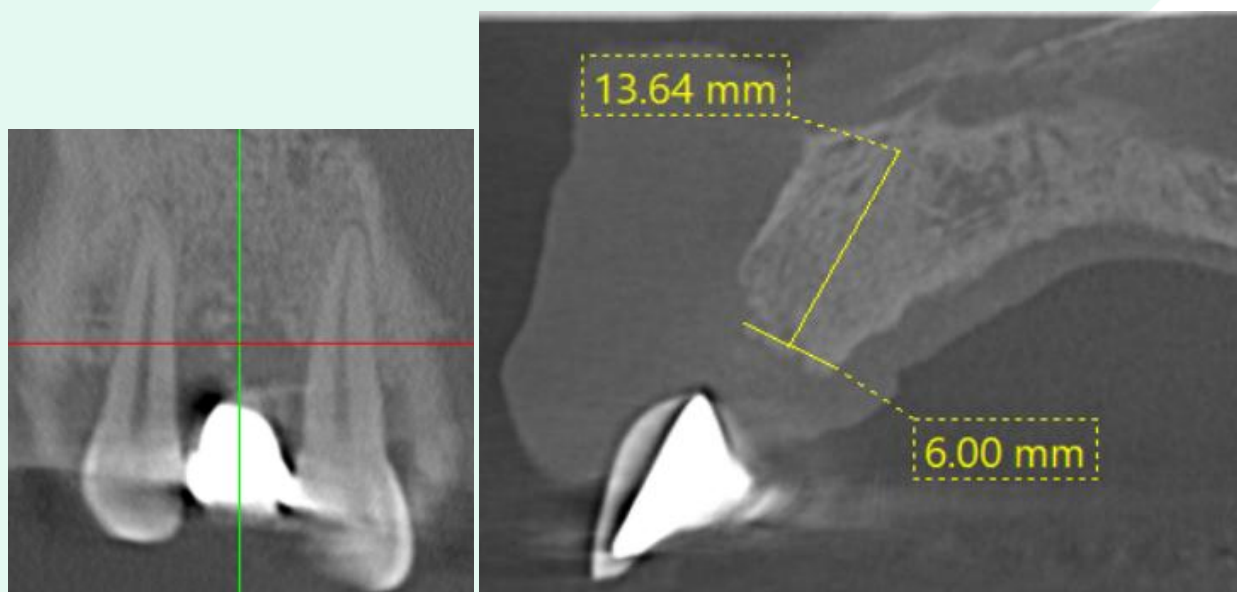
The overlying nasal base is intact.

The left and right maxillary sinus spaces are well-delineated, trivial soft tissue is noted in both sinus floors, no isolated worrying features.

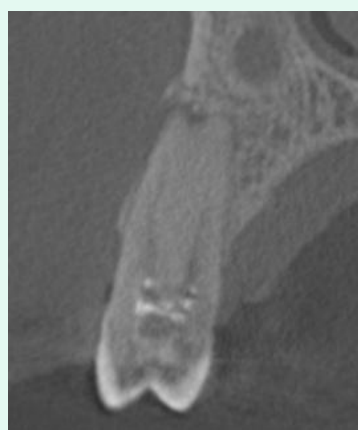
No further finding of note.

**Comment: Apical periodontitis with buccal cortical breach UR4, generalised advanced periodontal bone loss.**

Estimate bone measurements showing mid UR1 site, accurate bone measurements are to be reviewed by the referring clinician with respect to optimal implant planning in the designated sites and angulations of interest.



**UR1 bone measurements**



**Coronal UR4**



**Buccal UR2-7**