



**Patient's Name:**

**Date of Birth:**

**Date of imaging study:**

**Date of Report:** 08/14/2025

**Requesting practice:**

**Purpose of the study:** Endodontics

**Relevant Notes and History:** Please evaluate the upper left posterior due to recent history of a dull pressure sensitivity that seemed to localize to the #13/14 area

**Pertinent Medical, dental history and any relevant medications:**

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**Radiographic Technique:**

- The provided imaging study is a small FOV CBCT volume of the left maxillary dental arch.
- The scan was reoriented and visualized using Invivo 3D software.

**Dento-alveolar and Osseous Structures:**

- In the left maxillary arch, #10-15 are visualized, #9 and mandibular teeth are partially captured.
- #12-14: coronal restorations, endodontically treated, no direct radiographic signs of fracture/perforation:
  - #12: Two canals which merge into one in the apical aspect with obturation up to the radiographic apex, slight apical PDL space widening is noted.
  - #13: One canal, root appears blunted at the apex, obturation up to the apical most aspect.
  - #14: Three roots, obturation in MB root appears buccally offset, which suggests presence of unfilled MB-2 canal which is not clearly visualized, slight apical PDL space widening with the MB root.

**Nasal Cavity:**

- Visualized left maxillary sinus shows mild peripheral mucosal thickening with intact portrayed borders.

**Paranasal Sinuses:**

- Minimally visualized in the imaging study, captured aspects appear clear with intact portrayed borders.



**Radiographic Impression and Recommendations:**

- #12-14: Previously endodontically treated, negative for direct radiographic signs of fracture/perforation, and clinical evaluation suggested for any signs of recurrent caries:
  - #12 and #14: Resolving vs persistent apical periodontitis, possible unfilled MB-2 canal with #14, correlate with treatment history and active clinical findings.
  - #13: negative for radiographic signs of apical osseous pathology

Thank you for the opportunity to serve your practice,

Sincerely,

**Mayank Pahadia (BDS, MDS, MS)**

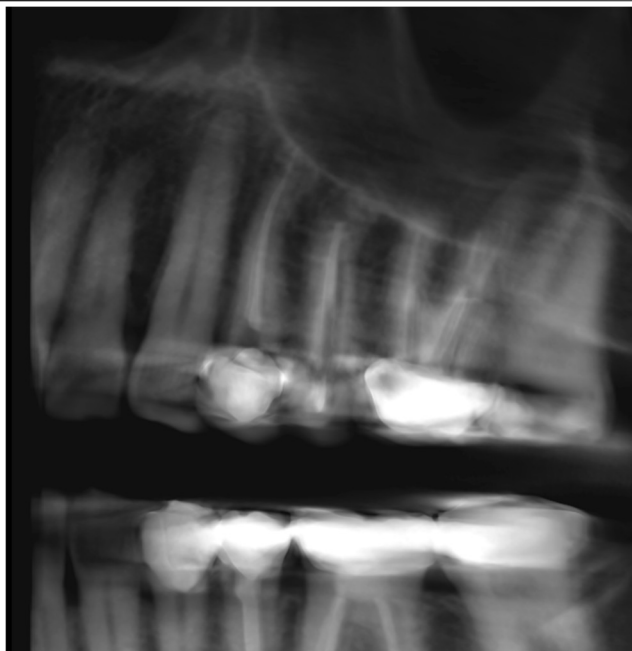
Diplomate, American Board of Oral and Maxillofacial Radiology

Consultant Oral and Maxillofacial Radiologist

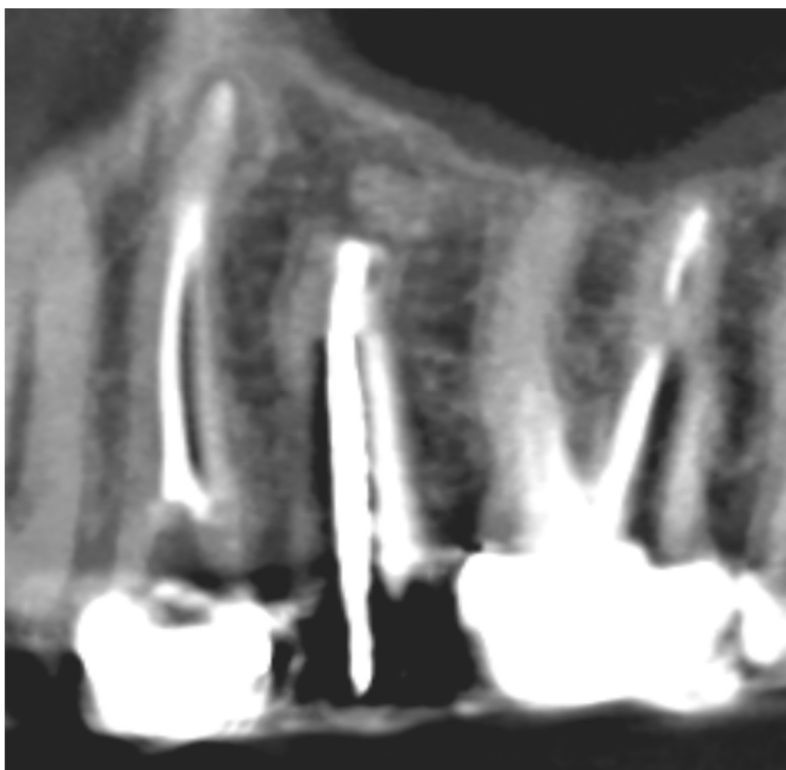
Contact: (904) 430 5010

***Disclaimers:***

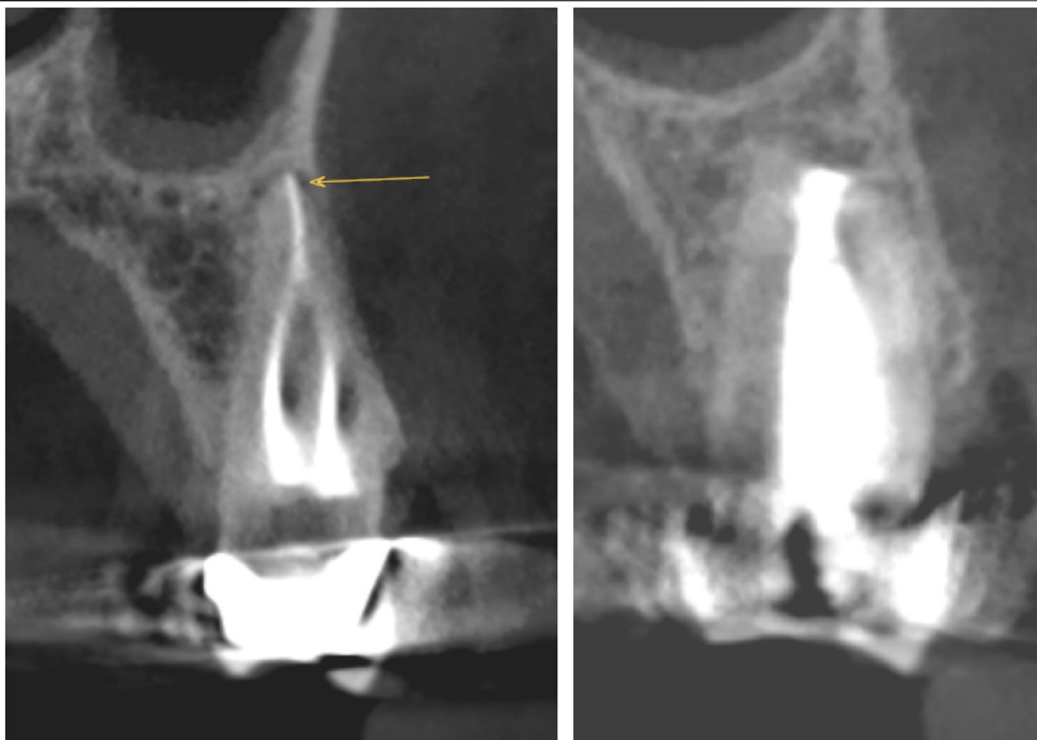
- *Please note that measurements should not be made from any attached images. These are representative slices for reference.*
- *This is a consultative report only and is not intended to be a definitive diagnosis or treatment plan.*



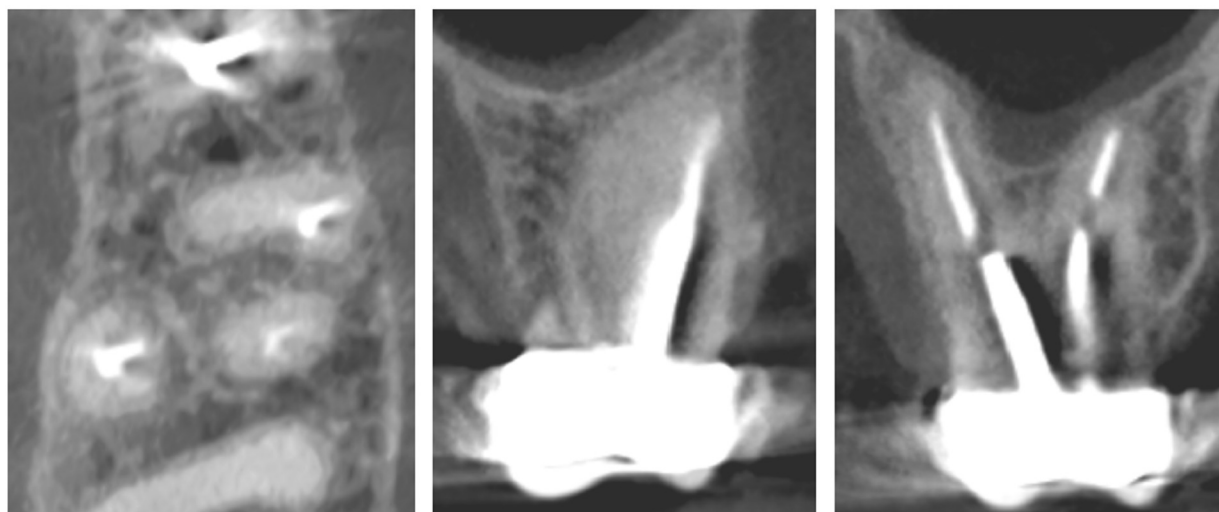
Panoramic reconstruction



#12-14 (sagittal view)



#12 and #13 (coronal views)



#14 (axial and coronal views of MB, P and DB roots)