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| **Student Name:** |
| Ardit Haxhia |
| **Case abstract** (Provide a brief synopsis of this patient)**:**  |
| The patient is a 68 year old African American female presenting to the clinic for routine periodic oral evaluation. During the appointment, a unilateral firm mass was palpated in the lower right mandible. A panoramic radiograph revealed an opaque, smooth, lobulated mass of homogeneous density overlapping the right posterior mandible. The differential diagnosis is a sialolith or an osteoma, however a CBCT is recommended to provide a definitive diagnosis. Discussed with the patient the possibility of going through the patient’s medical insurance to have CBCT taken with an ENT physician and then sent to the dental school because the patient does not currently have dental insurance. |
| **axiUm Chart:** |
| 685074 |
| **Date of Rounds presentation:** |
| 11/18/2020 |
| **D3 Student:** |
| Matthew Boeker |
| **D2 Student:** |
| Megan Hunjadi |
| **D1 Student:** |
| Claudia VanOpdorp |
| **Medical History:** |
| Includes multiple sclerosis, asthma, history of pulmonary embolism, hypertension, high cholesterol, history of cardiac catheterization, cervical cancer, history of shingles, history of knee pain, former smoker 20+ years ago.Medications: benazepril, doxazocin, apixaban, topiramate, gabapentin, teriflunomide, albuterol, pravastatin, methylphenidate, fluticasone, calcium, and multivitamin  |
| **Dental History:** |
| History of extractions, implants, root canal treatments, crowns, fixed partial dentures, removable partial dentures. Patient wears maxillary RPD. Patient has visited the school for routine care, periodontal and prophylactic maintenance. |
| **Radiographic Findings:** |
| Generalized bone loss. Extensive crown and bridge restorations, implant on #19. Root canal treatments on 5, 6, 14, and 30. Class III restorations on 23, 24, 25, and 26. Bone loss on implant seems to be consistent with previous radiographs. |
| **Clinical Findings:** |
| #21 B root caries, #23 DB recurrent caries, #26 M caries. Abfractions on #21 and #27. Attrition on the lower anteriors.  |
| **Periodontal Findings:** |
| 5mm pocket DL of #5 and mild clinical attachment loss. Moderate plaque and slight supragingival calculus. Adequate attachment besides #30. Cratered papillae on the lower anteriors. |
| **Periodontal Diagnosis:** |
| Stage I, Grade A |
| **Problem List:** |
| Oral pathology, missing teeth, defective restorations, esthetics, caries, tooth wear |
| **Other:** |
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