

Review of Scans



John R. Droter, DDS
4000 Mitchellville Rd., #330B
Bowie, MD 20716
301-805-9400
drjr@mac.com

Name **Al Ko**
11/29/2011

Age **27**

Diagnostic Codes **715.2 Osteoarthritis**

Radiographic Diagnosis of the TMJ

Right TMJ

MRI

Disc Piper **5b** Amorphous Disc/ Old Injury

Condyle **Small Size**

T2 **--**

Teeth Together MR **Yes**

CT

Condyle **Small condylar size** **Altered shape** **HyperCa++**
Milled In **Cortex intact**

Teeth Together CT **??**

Stability **Fair Structural Stability** **CR Load Superior**

Left TMJ

MRI

Disc Piper **4b** Amorphous Disc/ Old Injury

Condyle **Small Size**

T2 **++** **Retrodiscal Tissue**

CT

Condyle **Small condylar size** **Altered shape** **Cortex intact**
Down Eminence

Stability **Structurally Questionable**

CT Neck

Atlas **Appears Centered** **Nice alignment C2,3,4**
Styloid Process **Normal** mm Atlas Ponticus Posterior **None**

Summary and Recommendations

Note: CBCT 11-2011. Childhood retrognathia. Age 14 orthognathic surgery relapsed. Age 20 orthognathic surgery relapsed.
MR/CT Scan Summary: R5b, L4a. Both joints appear to be old injuries.
Left TMJ Inflamed retrodiscal tissue.
Not able to see bone superior left TMJ fossa. May be artifact from CBCT
Restricted airway.
Differential Diagnosis Inflamed tissue in joint: OA, TIBR, RhA
Differential Diagnosis Anterior open bite: Genetic, Childhood airway/Tongue not in palate, childhood TMJ damage to growth center, Post puberty AVN, TIBR after AVN, TIBR after orthognathic.
Working Diagnosis: Inflamed tissue of unknown origin in left TMJ. Left TMJ slight tenderness on palpation. Severe malocclusion, anterior open bite. Right TMJ appears hypercalcified and well adapted after significant damage.
Recommendations: Mobic 7.5mg for 8 weeks.
Complete exam- determine sequence of events that lead to malocclusion. Determine treatment options to correct malocclusion.
Country Life Buffered Vitamin C Time Release 500mg with 100mg bioflavonoids
Take 2 tablets AM, 2 tablets PM
Glucosamine- Enzymatic Therapy Glucosamine 500mg
Take 3 tablets AM

Piper Disc Classification

- | | |
|----|---|
| 1 | Normal |
| 2- | Stretched/ torn ligaments
Normal Disc position |
| 3a | Partial Disc subluxation
Disc reduces on opening |
| 3b | Partial Disc subluxation
Disc Non-Reducing |
| 4a | Full Disc Dislocation
Disc reduces on opening |
| 4b | Full Disc Dislocation
Disc Non-Reducing |
| 5a | Bone to bone contact
Still adapting |
| 5b | Bone to bone contact
Adapted |

Abbreviations

- | | |
|-----|--------------------------|
| AVN | Avascular Necrosis |
| Dx | Diagnosis |
| OA | Osteoarthritis |
| OMD | Occlusal Muscle Disorder |
| RhA | Rheumatoid Arthritis |
| Tx | Treatment |