

PATIENT INFORMATION**Name:** JOHNATHAN DOE**Gender:** Male**Date of Birth:** 22 Sep, 2009

The patient was referred for TMJ, performed on 01 Nov, 2024 by miles.dale+er@gmail.com.

FINDING(s)**Nasal Cavity:**

1. The lateral walls of the nasal cavity are missing in the middle turbinate region consistent with previous sinonasal surgery.
2. There is an anomaly of the left middle turbinate called concha bullosa.

Temporomandibular Joints:

1. There is a loose body in the joint space of the right TMJ complex.
2. There is a loose body in the joint space of the left TMJ complex.

Cervical Spine and Osseous Structures:

1. There is a loose body in the atlantoaxial junction.

Airway:

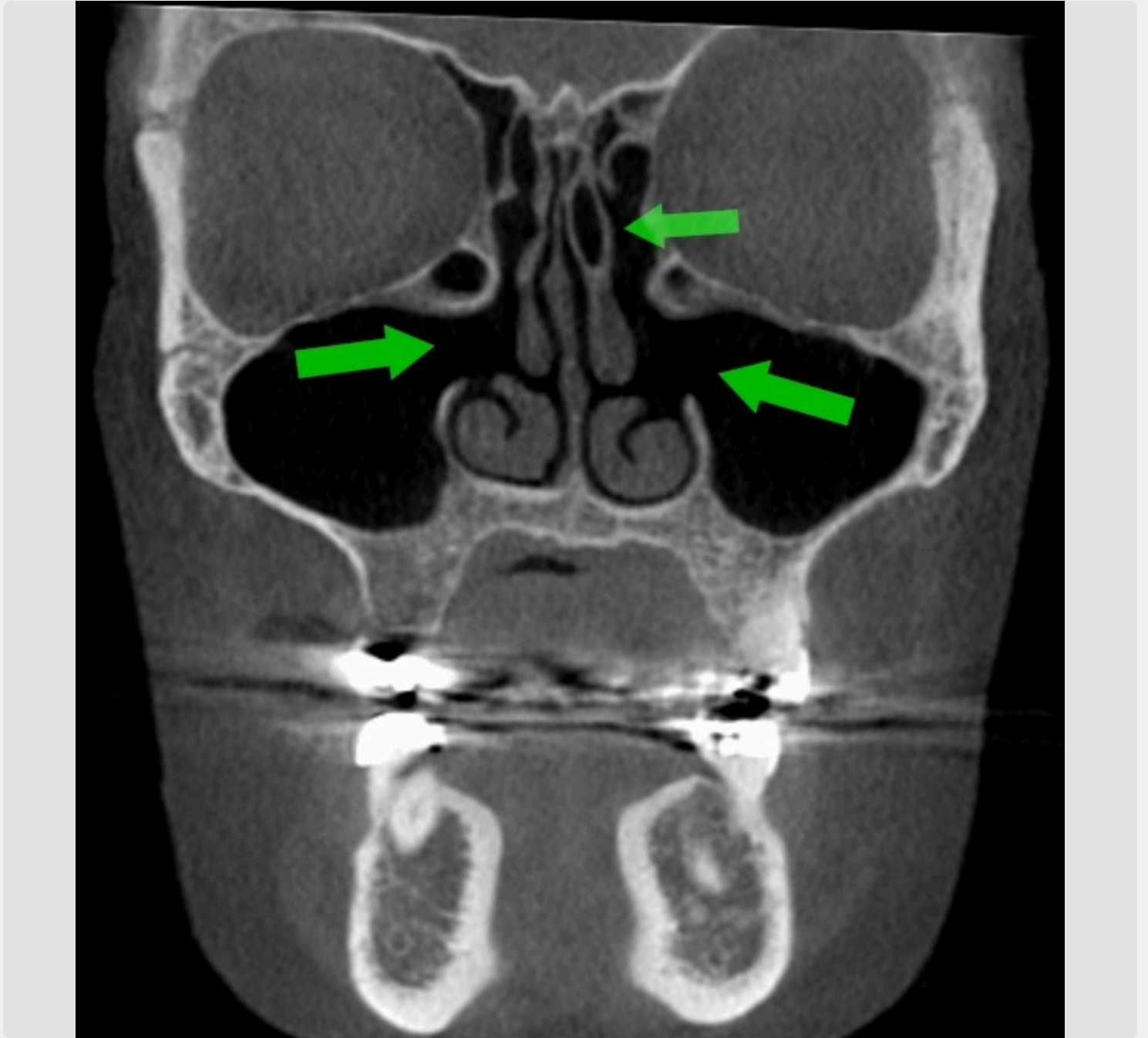
1. The oropharyngeal airway is narrowed.

Dental Findings:

1. There are small mandibular tori.



Dr. Dale Miles

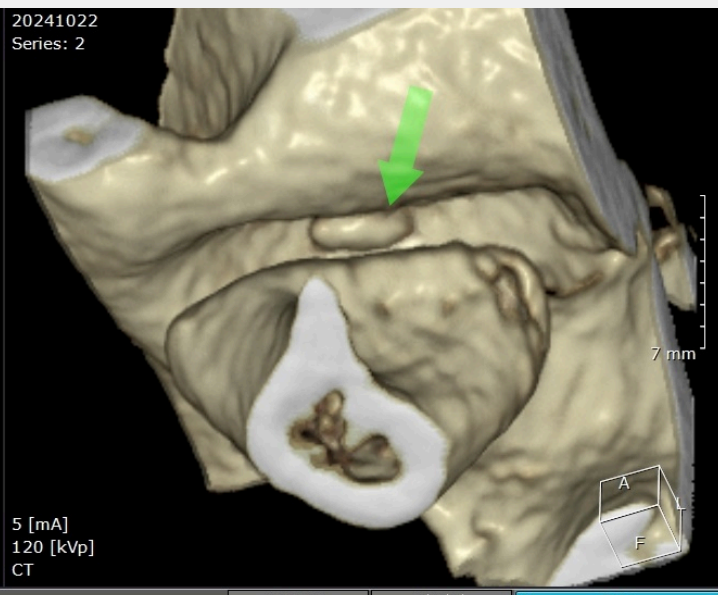
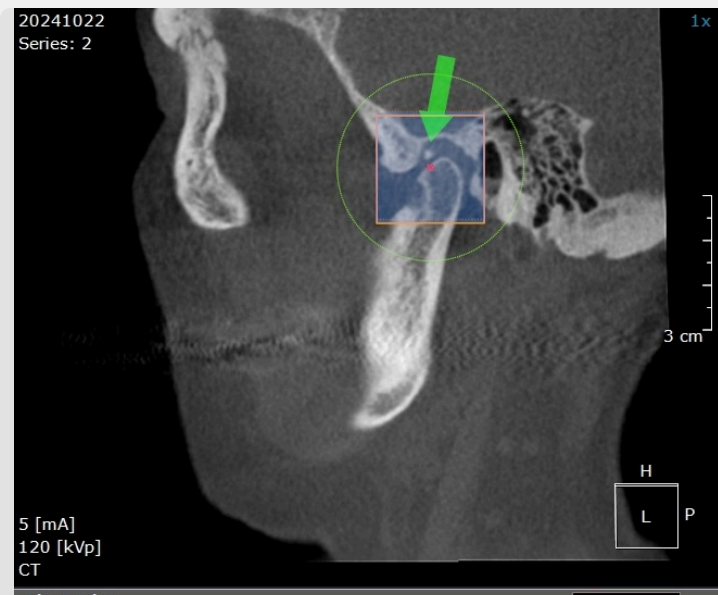


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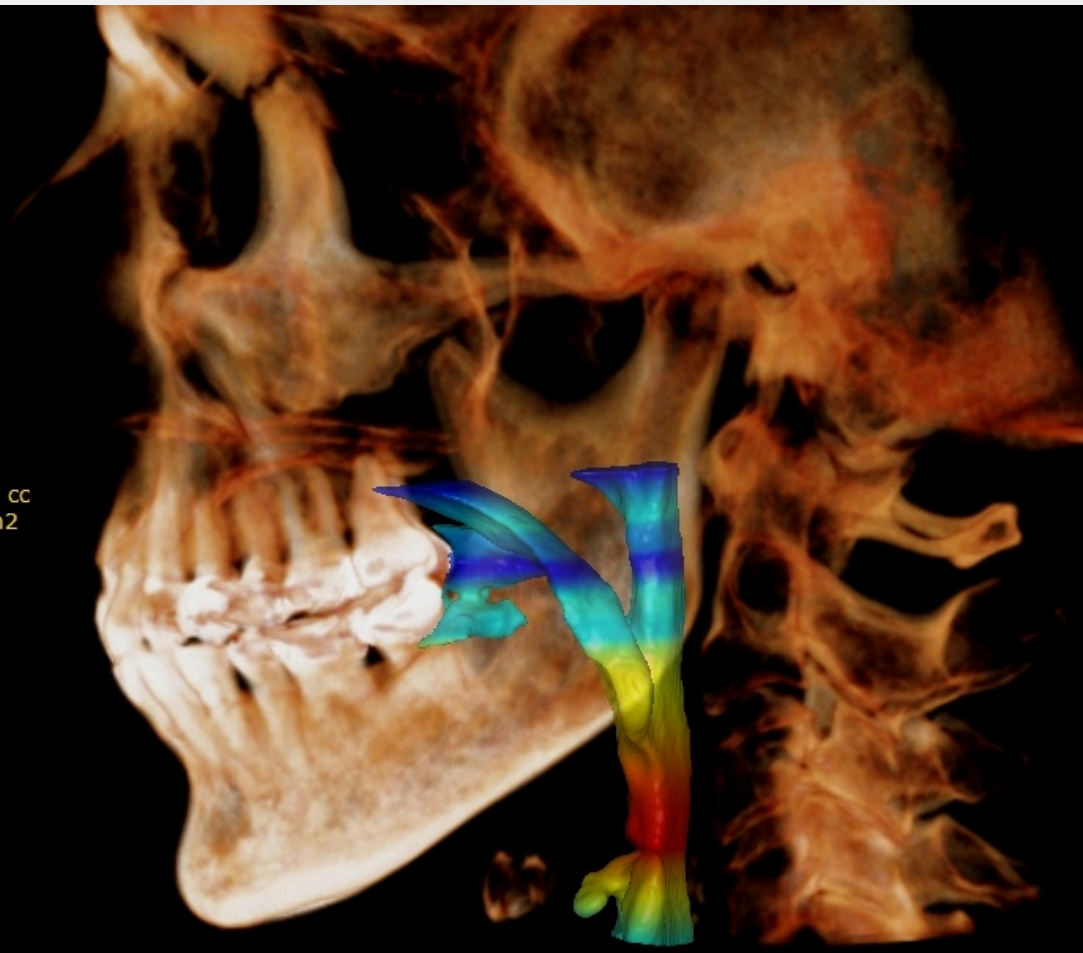
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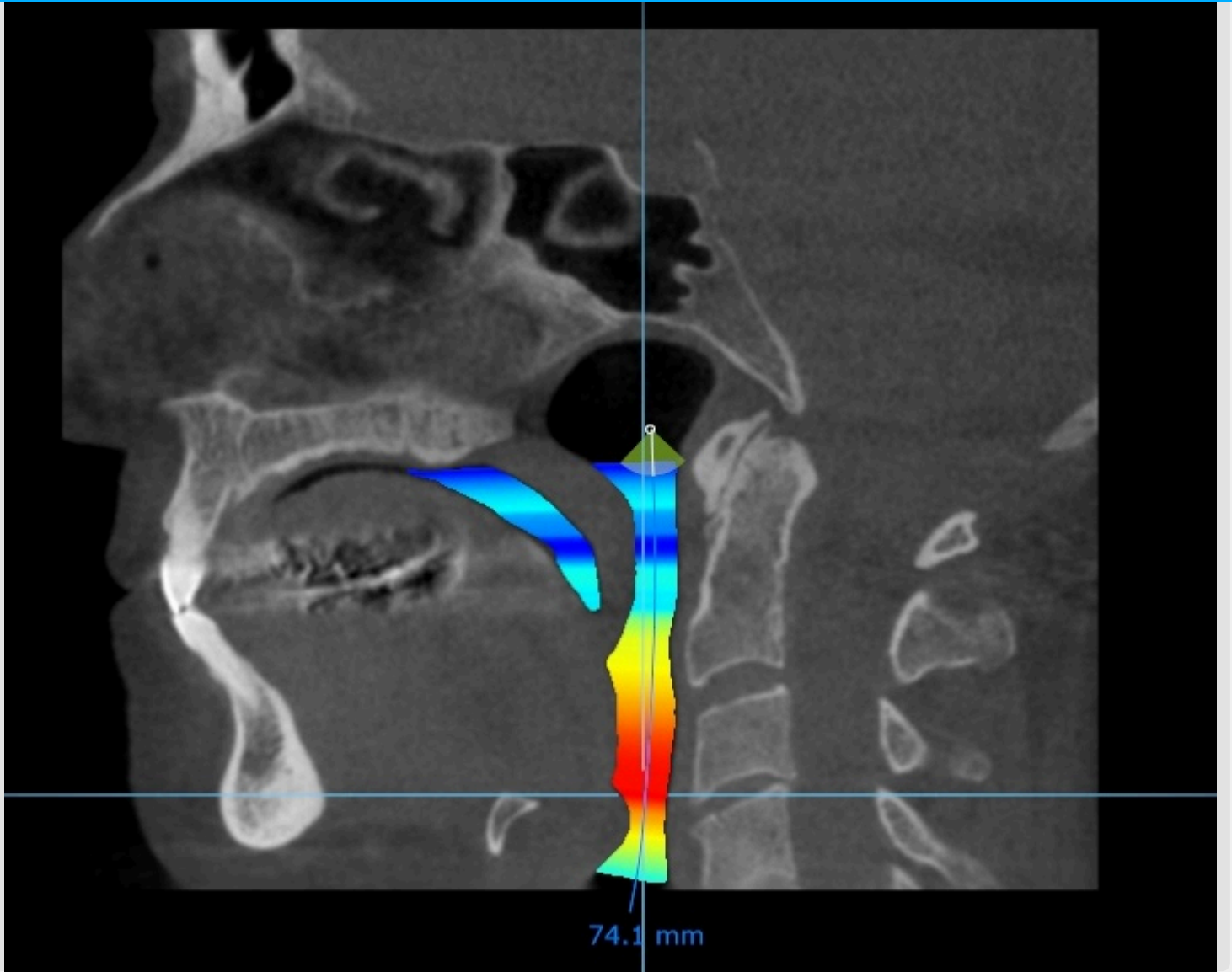
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Series: 2

Total Volume : 14.31 cc
Min Area : 85.80 mm2

5 [mA]





74.1 mm

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CITATIONS

Concha Bullosa

Aeration of the middle turbinate, termed "concha bullosa," is a common anatomical variant of intranasal anatomy. Of 320 patients evaluated for sinus disease with coronal CT, 34% had concha bullosa on at least one side. The overall incidence of inflammatory disease in the ostiomeatal complex in these symptomatic patients was not different between those with and without concha bullosa. However, there were many cases in which an abnormally large middle turbinate appeared to obstruct the ostiomeatal complex causing secondary infection of the ethmoid, frontal, and maxillary sinuses. Obstruction of drainage of the concha bullosa itself can lead to mucocele formation. Furthermore, the presence of a concha bullosa has important implications for the technique of endoscopic surgery used in the management of the sinus disease.

: [Concha bullosa: CT evaluation - PubMed \(nih.gov\)](#).

Loose body of the TMJ

Osteochondral loose bodies are an uncommon finding in the temporomandibular joint (TMJ), but occur relatively frequently in large joints such as the knee, elbow, hip, wrist, and ankle. Loose joint bodies can be divided in three groups: 1) synovial chondromatosis; 2) osteochondral fracture fragments and; 3) cases of degenerative arthritis or avascular necrosis. The most common clinical features of loose joint bodies are pain, swelling, joint noise and impaired joint movements. A case of loose joint bodies of the temporomandibular joint is presented. The pantomograph and lateral cephalograph revealed several irregularly shaped, variably sized radiopaque structures in the region of the right temporomandibular joint. CT and MR scans confirmed the initial diagnosis. The dimensions of the loose joint bodies varied from 1-2 to 5-6 mm. In this patient, the loose joint bodies may have been secondary to osteoarthritis, may have preceded and caused the degenerative changes, or may be only a coincidental finding.

Ercoli C, Boncan RB, Tallents RH, Macher DJ. Clin Orthod Res. 1998 Aug;1(1):62-7.

: [Loose joint bodies of the temporomandibular joint: a case report - Ercoli - 1998 - Clinical Orthodontics and Research - Wiley Online Library](#)