

**AAOMP CPC Cases
Cincinnati, OH
May 25, 2016**

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**AAOMP 2016
Clinical Pathology Conference
Case 1**

83 year old male with a large swelling covering most of the palate. Patient reports the swelling has recently increased in size and he started noticing it about one month ago. The lesion is asymptomatic and noted on routine dental exam.



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Case 2

A 17 year old healthy Caucasian female presented for extraction of her third molars. A comprehensive evaluation revealed an asymptomatic radiolucency in the left parasymphiseal region of the mandible.





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A 43 year old male presents on referral for 'trench mouth'. Patient reports bottom front teeth hurt 'really bad'. Pain has been present for two months and the lower front teeth have been mobile for two weeks. Patient denies any current systemic medical conditions and does not take any prescription medications. Past surgical history includes cholecystectomy.

Clinical examination revealed splaying of the facial and lingual gingiva of the mandibular anterior teeth and exposure of the alveolar bone from the mandibular left canine to right canine segment. Swelling extending to the floor of the mouth was noted on the lingual aspect. Surgeon's clinical impression was periodontally hopeless mandibular anterior teeth with possible aggressive periodontitis.





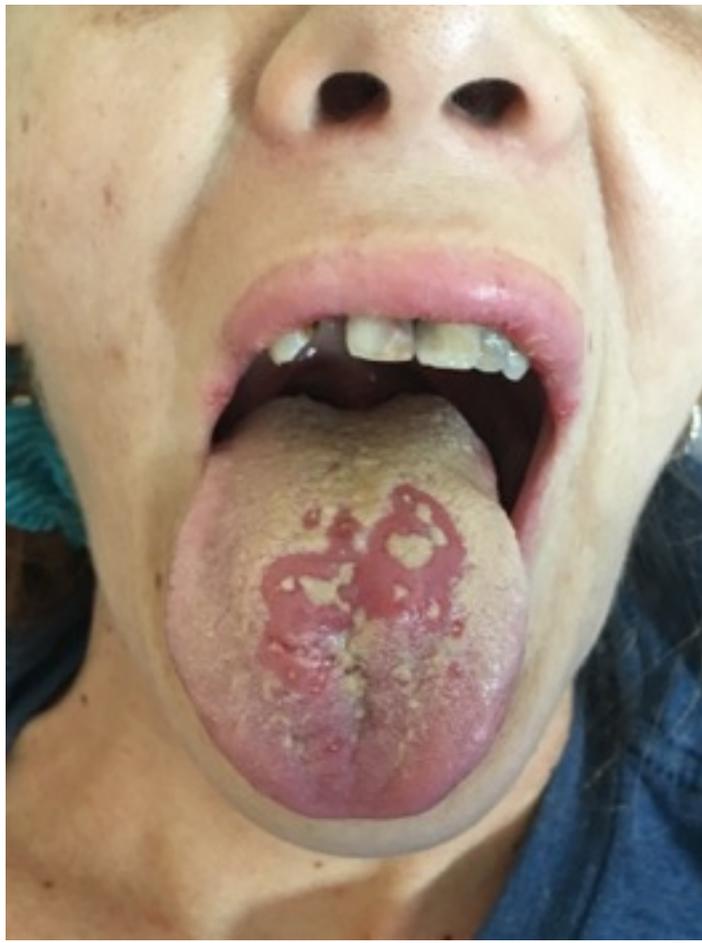
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Case 4

This 39 year old female was admitted to the hospital after a recent episode of Influenza A. Her social history revealed that she is a horticulturist, the mother of two children, and she admits to marijuana use. Her mother is currently receiving treatment for recurrent Non- Hodgkins lymphoma.

The patient presented with fever, hepatosplenomegaly and pancytopenia. She complained of mouth pain. Several days into her hospital stay, a bone marrow biopsy was performed and revealed a hypercellular marrow. Attached are the clinical pictures taken on day 4 of her admission.





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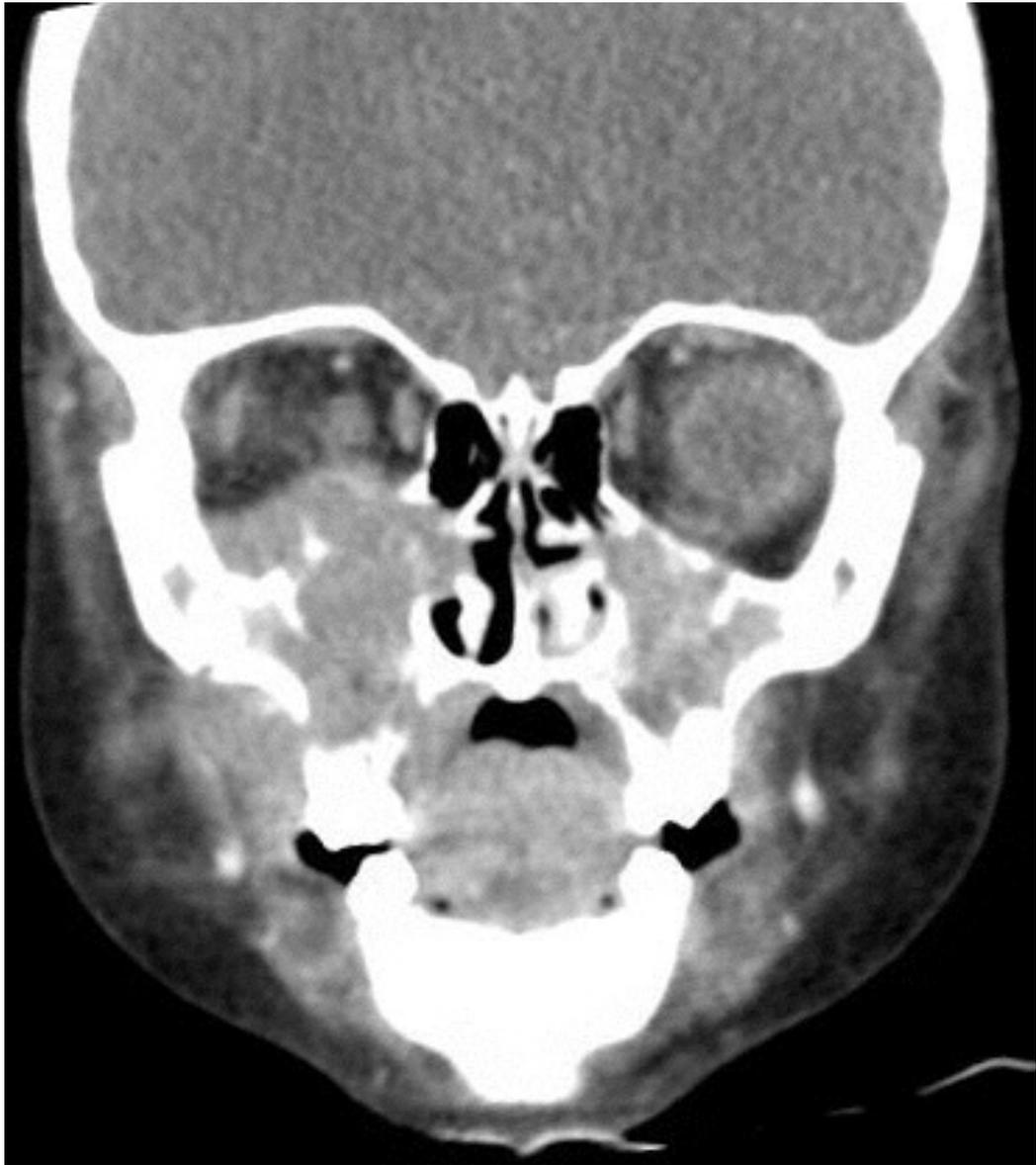
Case 5

A 3 year old Caucasian boy presented with right facial swelling of recent onset. The pediatrician initially prescribed antibiotics without improvement, and within the week was evaluated by a pediatric dentist.

There was fullness in the right maxillary vestibule and mobility of the right maxillary primary molars. A periapical radiograph revealed significant bone loss. The patient was referred to the hospital for further evaluation and CT imaging.







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Case 6

A 48 year old white female presented on referral from her general dentist for evaluation and treatment of a firm swelling of the right posterior mandible over the past month. She also described altered sensations in the right lower lip area that began approximately six months earlier.

Examination revealed a firm submucosal mass in the third molar area of the right mandible. While extensively restored, adjacent teeth appeared normal with no evidence of periodontal or endodontic pathology. The mucosa overlying the mass was intact and normal in appearance. Prior to incisional biopsy, a panoramic radiograph and cbCT imaging of the area were obtained. At the time of biopsy, the tissue was considered relatively avascular and no evidence of suppuration was observed.



