# REPORT

**EMI Inc.**
**2030 W. First St., Suite E**
**Fort Myers, Florida 33901**
**admin@emiinterp.com**



**Patient:** XXXXX XXXXXXXX
**Date of Birth:** XX/XX/XXXX
**Patient ID:** XXXXXX
**Referring Practitioner:** XXXXXX
**Reported By:** Darren Wright MD

**Scan Date:** 2/8/2012
**Report Ref:** XXXXXX
**Report Type:** ROI
**Thermographer:** sanne lodahl CCT

**All normal protocols were observed**

HISTORY AND SUBJECTIVE COMPLAINTS:

since september 2011 client elevated temperature about 38 , just by walking in 30 minnutes and get dizzy
october 2011 reveals thermography sinusitis and dental problems in the left side, 2 teeths removed on the left mandible due to periodontitis and client start antibiotic treatment for both sinus and tooth.
after treatment remainselevated temperature and no improvement
all blodtest are normal

THERMOGRAPHIC INTERPRETATION:

HEAD AND NECK:
Mild thermal changes are noted as compared to 10/6/2011. The previous myofascial hyperthermia noted over the forehead muscles has resolved. Hyperthermia persists over the left TMJ, but is slightly less prominent in appearance as compared to the previous study. Hyperthermia is noted along the right lower corner and left upper corner of the mouth, continuing to suggest possible dental/gingival inflammation in these areas. Clinical correlation is needed. There are no thermal findings to indicate current significant sinus, thyroid or carotid artery dysfunction.

Myofascial hyperthermia is still noted along the posterolateral neck on either side. No radicular patterns are noted.

FOLLOW-UP:
Suggest clinical correlation of thermal findings with patient's history and symptoms.

PROCEDURE:
This patient was examined with digital infrared thermal imaging to determine if asymmetrical thermal findings indicate abnormal physiology.

Thermography is a physiologic test which demonstrates thermal patterns in skin temperature that may be normal or which may indicate pain, injury, disease or other abnormality. If abnormal heat patterns are identified relating to a specific region of interest or function, clinical correlation and further investigation may be necessary to assist your health care provider in diagnosis and treatment.

Thermal imaging is an adjunctive test which contributes to the process of differential diagnosis, and is not independently diagnostic of pathology.

PROTOCOLS:
The thermographer certifies that this exam was conducted under standard and clinically acceptable protocols.

PATIENT HISTORY:
The interpretation represents objective descriptions of thermal patterns. Clinical significance of such patterns is interpreted in relation to and limited by the patient data and history provided.

**MD**

REPORTING:
Results are reported by certified thermologists. Results are determined by studying the varying patterns and temperature differentials as recorded in the thermal images.

NORMAL FINDINGS:
Normal findings are diffuse thermal patterns with good symmetry between similar regions on both sides of the body. Comparative imaging may identify specific asymmetries that have remained stable and unchanged over time and therefore regarded as normal.

ABNORMAL FINDINGS:
Abnormal findings may be localized areas of hyperthermia or hypothermia, or thermal asymmetry between similar regions on both sides of the body with temperature differentials of more than 1° C. There may be vascular patterns that suggest pathology. Comparative imaging may identify specific changes or new asymmetries that warrant further investigation.

COLD STRESS:
If a cold stress test was performed to evaluate the sympathetic response to a suspicious thermal pattern, the results are interpreted as follows:

Positive:
A positive result will demonstrate no thermal change to the suspicious pattern and concurrent normal physiologic responses in other areas of the body, particularly the contralateral parallel region.

Negative:
A negative result will demonstrate normal physiologic thermal responses in all areas of the body including the suspicious pattern.

Results of cold stress testing should not be considered conclusive or diagnostic.

The referring health care provider should contact the EMI administrator with any questions relating to this interpretive report.

This Report is intended for use by trained health providers to assist in evaluation, diagnosis, and treatment. It is not intended for use by individuals for self-evaluation or self-diagnosis. This Report does not provide a diagnosis of illness, disease or other condition.

Electronic Medical Interpretation

# THERMOGRAMS

**Patient:** XXXXX XXXXXXXX
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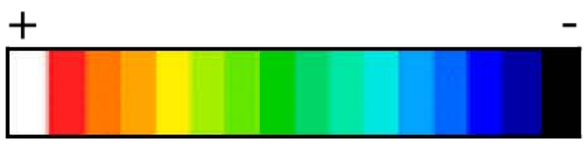
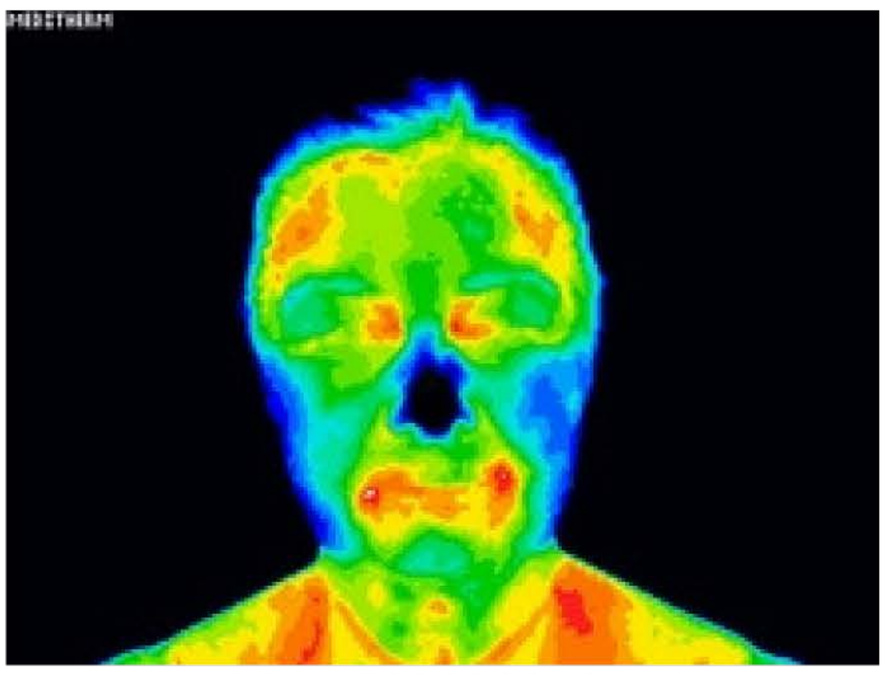


thermograms @ standard 8° C color range



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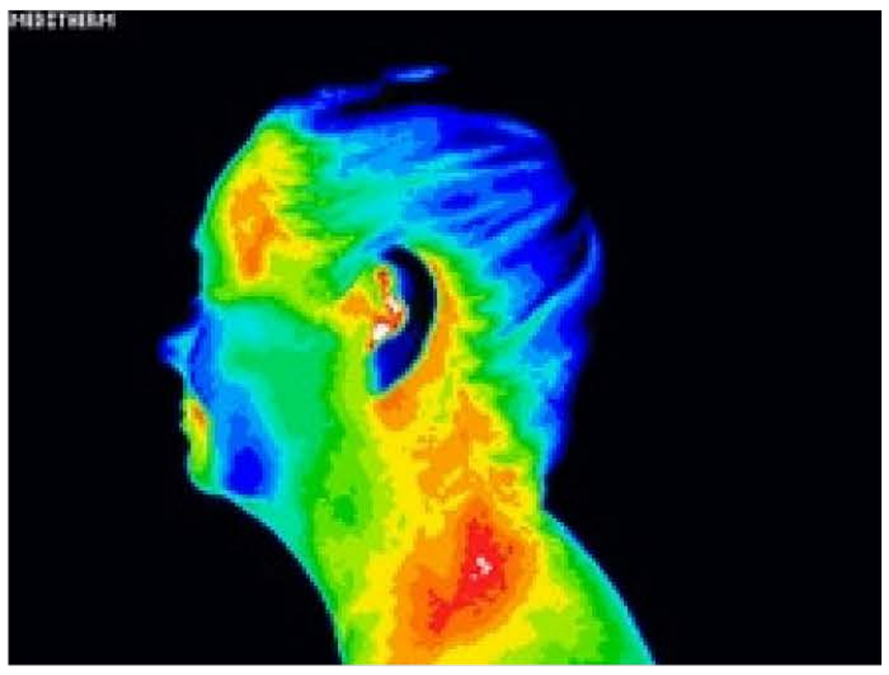

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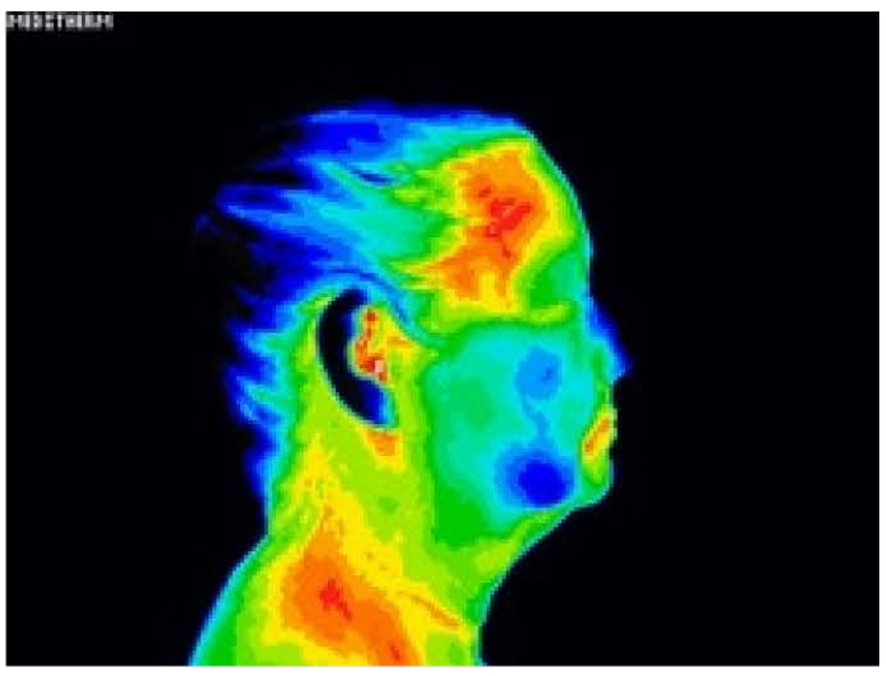

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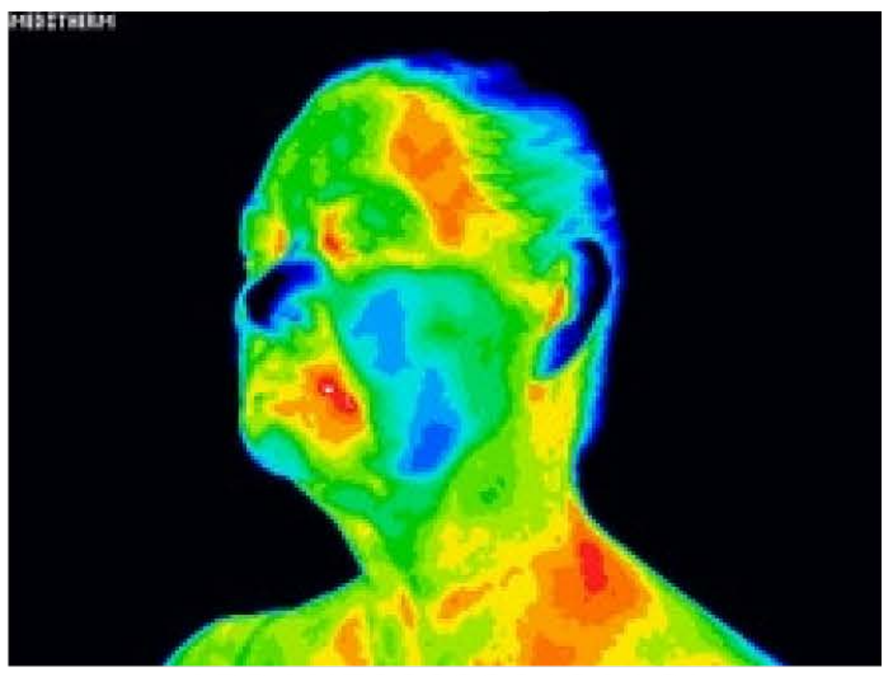

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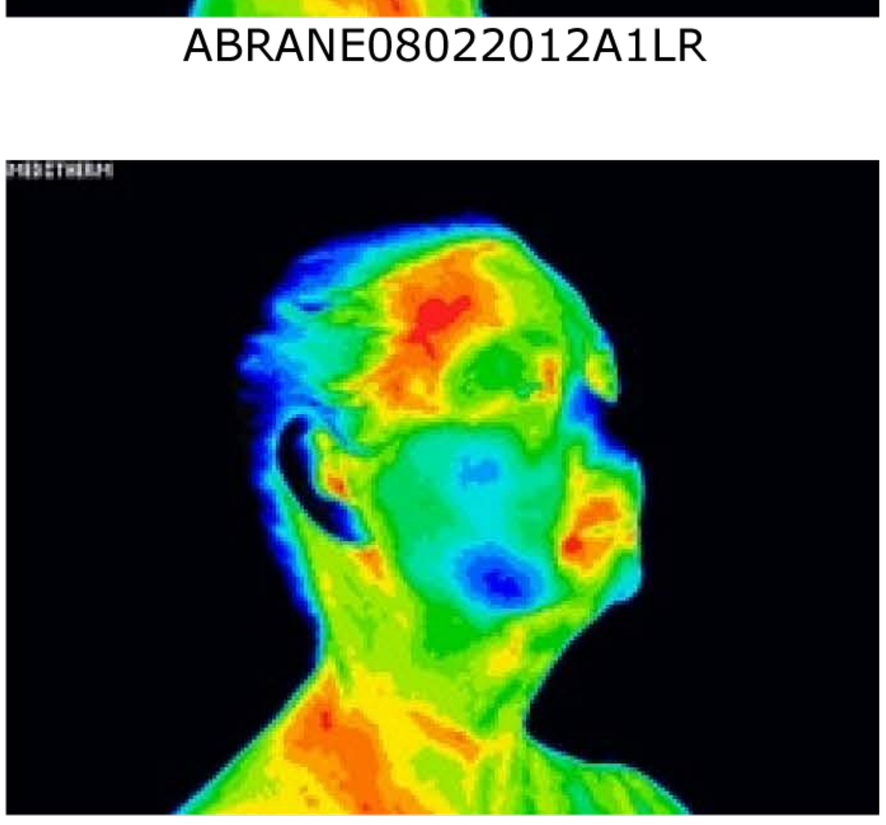

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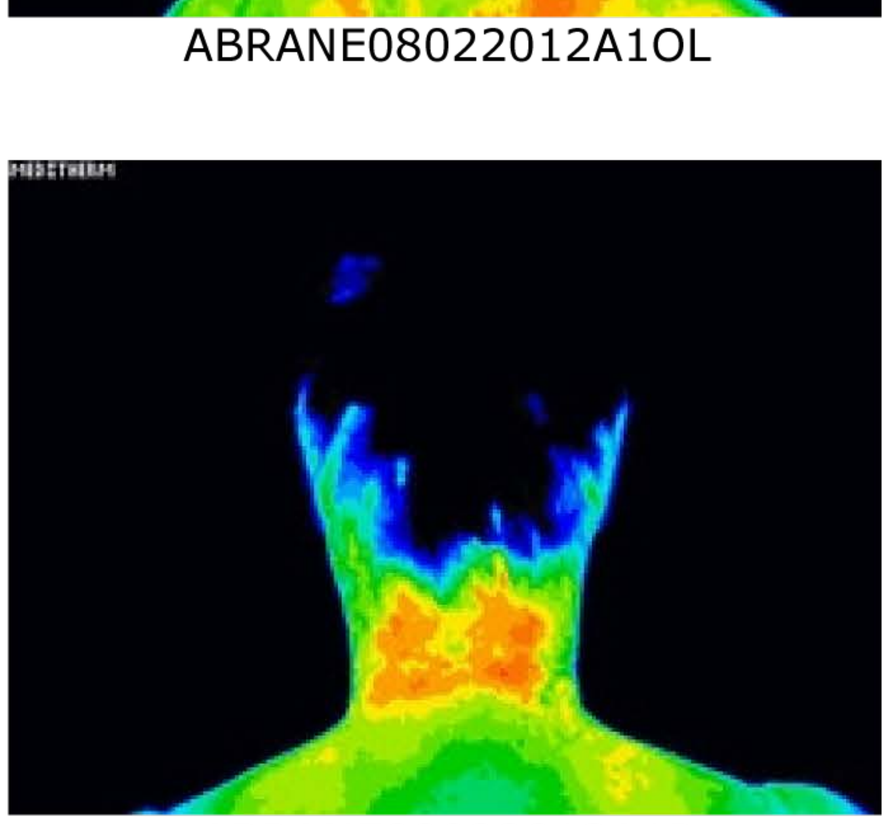

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