

# iTero™

Insight



# iTero™

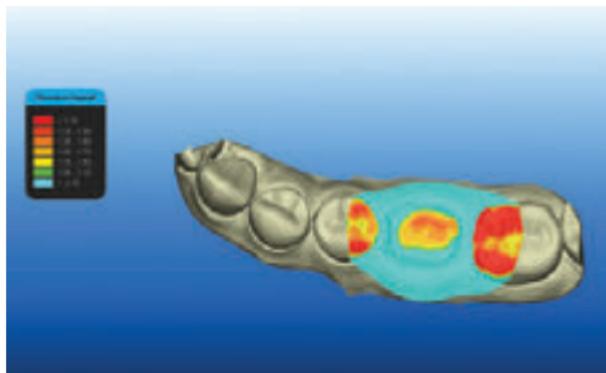
## Insight

The following set of cards has been crafted to help you get the most from your Align iTero system. From the most efficient ways to use the eraser tool, effective scanning for implants to the nuances of interproximal scanning for Invisalign® treatment – each card contains valuable information that will help you scan with ease and efficiency. We encourage you to read each card in its entirety...and then refer back to them as needed.

# Using the Eraser Tool for Occlusal Reduction

**ONSITE CHALLENGE**—Updating your scan after additional occlusal reduction is performed.

**INSIGHT SOLUTION**—Aggressive use of the eraser tool, followed immediately by a second scan, makes updating the image fast and easy.

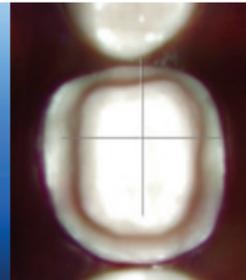
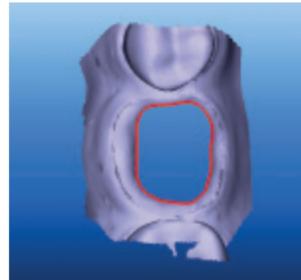
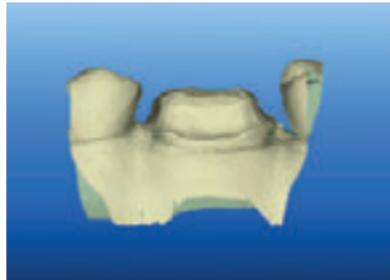


# Using the Eraser Tool for Occlusal Reduction

## INSIDER INTELLIGENCE

### The Addition of Subtraction

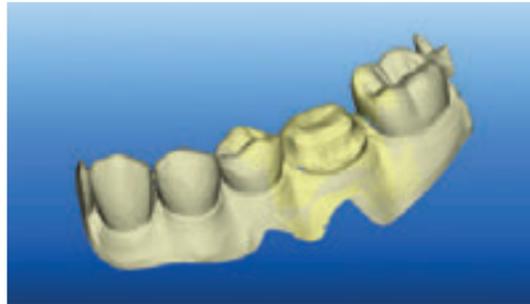
After an occlusal reduction to the teeth has been made, identify the area within the scan. Select the eraser tool and highlight a little more than you removed in vivo. Press 'mark' and review your selection. Now either click 'scan to fill' onscreen, or 'scan' with the left foot pedal. Now press the right pedal to scan. Now check for omissions, which you can fix with the 'add scan' on the left foot pedal.



# Using the Eraser Tool for Preparation and Margin Adjustments

**ONSITE CHALLENGE**—Updating the scan after tooth prep, making adjustments to the margin and correcting for conflicting data.

**INSIGHT SOLUTION**—The eraser tool allows you to make highly-targeted corrections—across any area of the oral scan—with ease and efficiency.

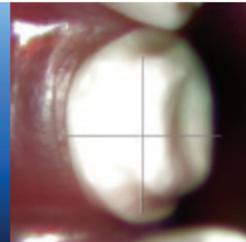
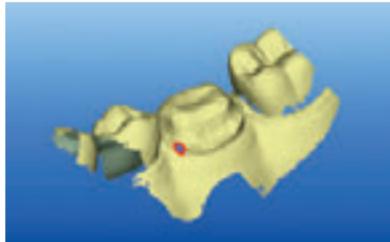


# Using the Eraser Tool for Preparation and Margin Adjustments

## INSIDER INTELLIGENCE

### Targeting Perfection

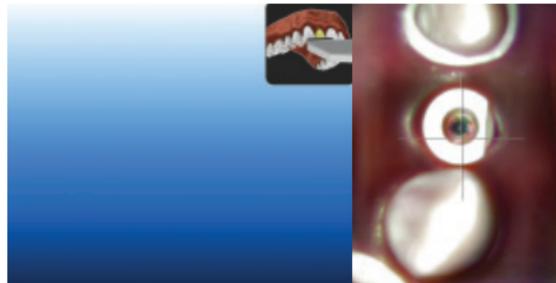
From moisture readings and tissue variations to post reduction changes and adjustments at the margin, the eraser tool offers point and click perfection. To update a scan, select the eraser tool. Remove a little more area than is necessary. Press mark and confirm the removal. Click 'scan to fill' onscreen or 'scan' with the left foot pedal. Now press the right pedal to scan. The iTero will now automatically stitch in the new area scanned.



# Scanning for Implants – Capturing Adjacent Anatomy

**ONSITE CHALLENGE**—With their perfectly round and/or perfectly flat surfaces, scan bodies can wreak havoc on images when scanning for implants.

**INSIGHT SOLUTION**—Capturing an abundance of anatomy adjacent to scan body will help the iTero successfully identify, assemble and stitch a scan.



# Scanning for Implants – Capturing Adjacent Anatomy

---

## INSIDER INTELLIGENCE

### Good Neighbors Make for Good Scans

Because scan bodies are precision engineered, they have many perfectly flat, perfectly round and identical surfaces. Unfortunately this precision can complicate the scanning process, and the system may have difficulty differentiating between old and new scans. The way around this is to include more of the adjacent anatomy when capturing scan bodies in the mouth. This simple step helps the scan assembler better identify scan bodies and place them in their correct position.

# Scanning for Implants – Taking Bite Scans Away from the Implant Area

**ONSITE CHALLENGE**—Getting an accurate bite scan when a scan body prevents the natural closing of the mouth.

**INSIGHT SOLUTION**—Simply remove the scan body and scan the bite in a different area. The iTero software will automatically incorporate it into the model.



Ensure the implant site is not visible in the bite scan.

# Scanning for Implants – Taking Bite Scans Away from the Implant Area

## INSIDER INTELLIGENCE

### Ordering Take Out

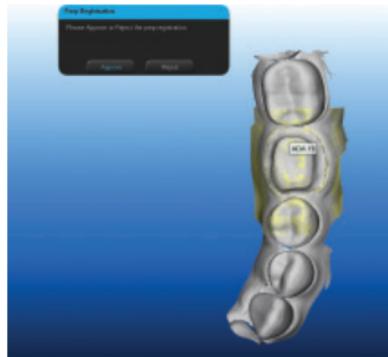
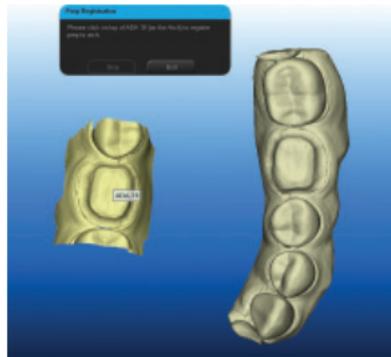
Scan bodies are usually longer than the patients' other teeth. Thus with the scan body in place, the patient may not be able to close their mouth naturally to take the bite scan. Fortunately with the iTero, all you need to do is remove the scan body, ask the patient to bite down normally, and then scan a different area. iTero will then capture the bite accurately and will incorporate this data into the model.



# Scanning for Implants – Repositioning the Scan Body or Preparation

**ONSITE CHALLENGE**—Repositioning a scan body that does not register to the model.

**INSIGHT SOLUTION**—Simply follow the on-screen prompts to place the scan body in its correct position.



# Scanning for Implants – Repositioning the Scan Body or Preparation

---

## INSIDER INTELLIGENCE

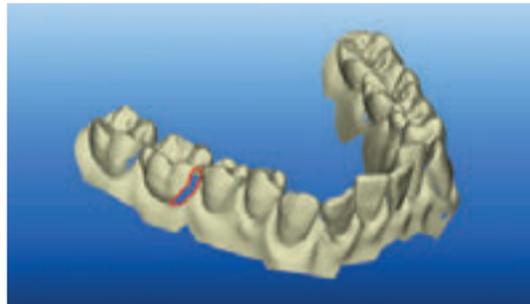
### Coming Up Aces with Two of a Kind

Occasionally when using a scan body—and particularly when two (or more) scan bodies are used—the system will have difficulties identifying and differentiating between them. Rather than guessing where they go, the system empowers you to manually place them within the digital environment. To do so, the system separates the scan body from the primary scan. You simply left click on the scan body, then click again on the area in where it belongs.

# Invisalign® Scanning

**ONSITE CHALLENGE**—Effectively capturing the mesial and distal interproximal areas when performing scans for Invisalign.

**INSIGHT SOLUTION**—Use a rocking motion when scanning. Start in the back and go up to capture a distal view, and then down to capture mesial view. Repeat this pattern throughout the entire scan.



# Invisalign® Scanning

## INSIDER INTELLIGENCE

### Interproximal Construction

When doing a scan for an orthodontic treatment like Invisalign, it's essential to get the interproximal regions perfect. To assure you're capturing the proper content, use a rocking motion as you progress thru the arches. Start on the lower left side of the most distal molar, go to a buccal side and *lift up* on the cord to capture a distal view, then move forward and grab a mesial view *by dropping* the cord of both the first and second molars. Repeat this procedure across both arches.



Lift the cord end of the wand to capture the distal-buccal view.



Moving one tooth forward, drop the cord end of the wand to capture the mesial-buccal view.



Angle the wand to capture the distal-lingual view.

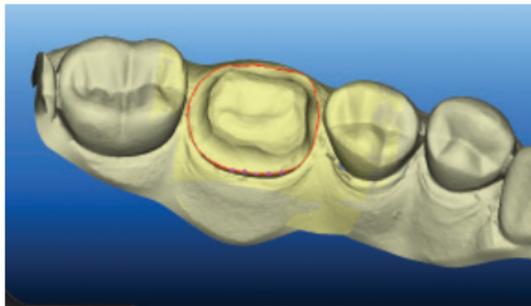


Moving one tooth forward, twist the wand to capture the mesial-lingual view.

## Marking the Margin

**ONSITE CHALLENGE**—Marking the margin of a prepped tooth or area.

**INSIGHT SOLUTION**—Utilize the new “mark my margin” tool, then confirm and adjust your work before including it in the information you send to the lab.



# Marking the Margin

## INSIDER INTELLIGENCE

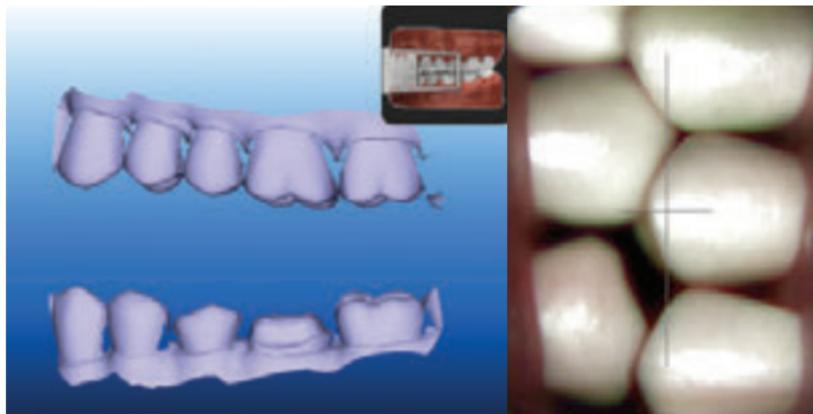
### Eliminating the Margin of Error

Although just two percent of doctors prefer to mark their margins, the ability to do so is present if needed. First highlight the tooth you have prepped. Now review the highlighted section in your high resolution scans. If acceptable, you will see that the 'edit button' is enabled, and you can see the margin line on the tooth. If it's not what you want, reset it and use the pencil, or the control points mode to redo the margin. It's important that the margin line is crisp prior to marking, and that there isn't any tissue overlapping the margin.

# Taking the Bite Scan

**ONSITE CHALLENGE**—To get the occlusion to finish correctly, getting an accurate bite scan is essential.

**INSIGHT SOLUTION**—Using the façade of arches as a guide will ensure optimal results.



# Taking the Bite Scan

---

## INSIDER INTELLIGENCE

### Make the Bite Right

When taking the bite scan, have the patient open their mouth. Choose an area where the scanner can capture an even amount of the upper and lower. When moving the scanner, it is important not to apply pressure on the patient's gums. You will then place the wand against the façade of the arches. From there, watch the left window as 'building the arch' appears. At this point, stay focused on the yellow areas, then overlay the anatomy for stitching.

# Managing Unregistered Scans

**ONSITE CHALLENGE**—An unregistered scan shows up in the upper left hand side of the on-screen display.

**INSIGHT SOLUTION**—There are two ways you can deal with an unregistered scan. You can undo the scan and rescan, or you can associate the scan.



# Managing Unregistered Scans

## INSIDER INTELLIGENCE

### Taking the “Un” Out of Unregistered Scans

Whether it's a matter of improper wand placement during the scan, or some variance within the oral environment, sometimes scans will show up surrounded in red in the upper left hand side of the display. You have two options for dealing with these unregistered scans. You can either use the onscreen menu to undo the scan and then simply recapture the image or you can use the 'Add Scans' mode to add scans to correlate the unregistered scans back into the rest of the model (by creating overlap between the model and the unregistered scans).

# Disinfection and Maintenance of Hardware

**ONSITE CHALLENGE**—Maintaining a clean and sterile work environment – including the iTero hardware (keyboard, mouse, monitor and wand parts).

**INSIGHT SOLUTION**—Traditional cleaning methods can be used. Please see reverse side of card for specific information.



# Disinfection and Maintenance of Hardware

## INSIDER INTELLIGENCE

It's Time to Come Clean

Keyboard – can be disinfected with wipes or via the use of a barrier sheet.

Mouse – easily fits inside of the bag that the wand sleeve is in. You can also use a barrier sheet.

Monitor – can be cleaned as designated by manufacturer.

Sleeves – disposable and/or you can use a cotton roll “wet” to clean while scanning.

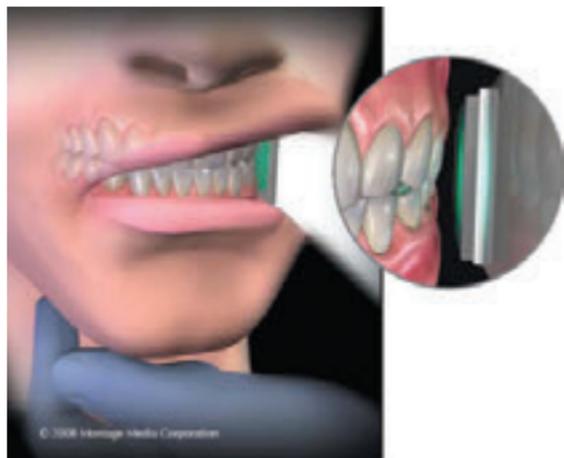
Optic lens – can only be cleaned with the micro-fiber cloth; always use protective cover.

*PLEASE NOTE – the cord to the wand may become entangled during cleaning. Make sure to correct this as the cord contains fiber optics.*

# General Scanning

**ONSITE CHALLENGE**—Scanning like a rock star.

**INSIGHT SOLUTION**—The insider tips and tricks on the opposite side of this card will help you scan like a seasoned professional.



# General Scanning

## INSIDER INTELLIGENCE

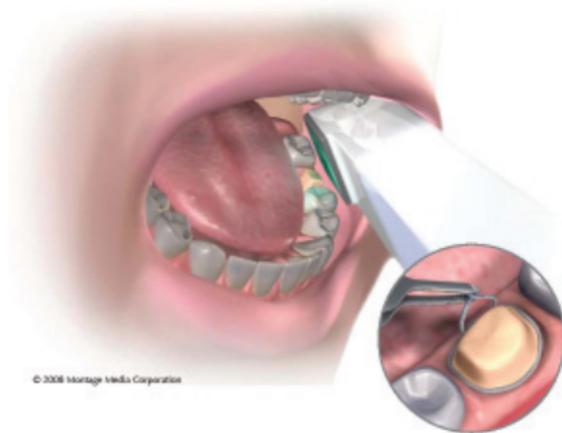
### Scan with a Plan

- The opposing arch can be scanned while waiting for the anesthetic to take effect.
- **The objective of scanning the opposing arch is to collect the occlusal/incisal surface of the opposing prepped area which is important in the fabrication of the final restorations.**
- Complete scanning of the buccal/facial wall is important to scanning an accurate bite. Prep tooth/teeth should have clear margins, free of tissue and fluid. It's best to add scans during the prep segment or use the eraser tool to make adjustments to the preparation during the final review.
- You can use the patient's lower arch to support the wand for rest and use the patient's chin for stabilization.

# Preemptive Solutions

**ONSITE CHALLENGE**—Addressing potential challenges before they occur.

**INSIGHT SOLUTION**—Two cards worth of insider tips, tricks and intel to optimize your performance.



© 2008 Montage Media Corporation

# Preemptive Solutions

## INSIDER INTELLIGENCE

Itemized iTero Intel

**Potential Situation:** Cannot scan lingually without interference from the tongue.

**Preventive Insight:** Change wand position to perpendicular using it to shield tongue.

**Potential Situation:** Problems stabilizing the wand.

**Preventive Insight:** Have patient gently close their mouth on the wand tip.

**Potential Situation:** When taking palatal/lingual scans, the lip keeps showing up in the scan.

**Preventive Insight:** Go more gingival to eliminate the lip in the background.

**Potential Situation:** When taking the bite scan the image does not capture.

**Preventive Insight:** Make sure there is enough anatomy of the buccal wall in the area scanning. Make sure you are capturing the bite on the accurate side of the arch.

**Potential Situation:** Scans are not stitching.

**Preventive Insight:** Take an additional scan on the occlusal/incisal edge.

**Potential Situation:** Scan won't capture the distal of the third molar.

**Preventive Insight:** Take an 'anchor scan' on the occlusal, then capture this area with additional scans adapting to areas of palatal and buccal regions. Having the patient close will allow for more availability to this area on the maxilla.

**Potential Situation:** The wrong side of the arch was scanned, charting was done in correctly.

**Preventive Insight:** Use the rescan bar to select the arch scanned, approve rescan and then go back to the Rx to make corrections.

**Potential Situation:** There is a small obstruction at my margin line.

**Preventive Insight:** Use the eraser tool and fill in the area. Note that it's important to make sure tissue is retracted.