

# EDENTULOUS CBCT DUAL SCAN PROTOCOL FOR GUIDED IMPLANT PLANNING

Dear Doctor / X-Ray Lab Technician: The following details are required for completing the CT scan with our implant planning software. If you have any questions after reading, please contact Phil Ulrich at 316-263-1007 prior to completing the scan(s). Consult tech support for your specific scanner with questions about settings for the procedure; each system varies and they will know best how to provide an excellent scan!

**The Dual Scan protocol, as the name implies, requires TWO CBCT scans.** To ensure success, it is imperative that your patient has a well-fitting denture. If it does not fit well, it **MUST** be relined!!

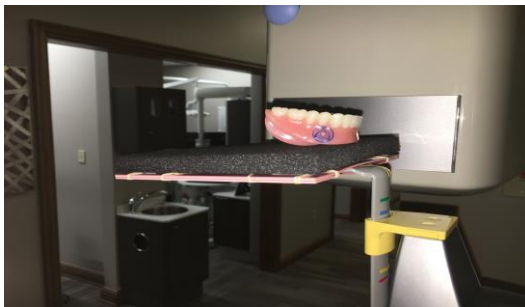
**1. FIRST, scan the patient's denture with x-ray markers.**

Utilize six – nine Suremark™ radiographic stickers positioned in a staggered axial pattern, sub-gingival (in the pink) and on both the buccal and lingual side of the denture.



Be sure to orientate the denture according to the occlusion (i.e. Maxillary teeth oriented down or Mandibular teeth oriented up) and rest the denture on a foam block so it is not in direct contact with the CBCT platform. Finally, and it goes without saying, be sure the capture the entire denture in the CBCT field of view.

Note the settings: **MUST BE SET ON CHILD WHEN SCANNING PROSTHESIS.**



- The **second CBCT scan** will be of the patient wearing the denture with the x-ray markers. Do not remove or adjust the x-ray markers as positioned in CBCT Scan #1! It is highly recommended that the patient wears a bite registration during the CBCT scan to ensure an intimate fit of the denture to the soft tissue and to separate the teeth. Cotton rolls are acceptable as well. Finally, be sure to capture the entire arch of interest in the CBCT scan.
- Provide the dicom data sets for both the patient and appliance (2 sets of dicom data) on a CD or thumb drive. If a dual arch case, there will be 3 sets of dicom data.

Please mail a copy of the CD or thumb drive to:

ADL Dental Laboratory  
P.O. Box 34188  
4413 Poplar Level Rd.  
Louisville, KY 40213  
800-456-1292

[Chris@adldental.com](mailto:Chris@adldental.com)

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