iTero scan review and troubleshooting for the lab

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Why are the iTero restorative tools important

Prep separation tool

When your Dr. clicks
on the prep separation tool
from their scanner view screen,
it will show them the defined area
of each prep. It is important
for each prep to have
it's own space. If a portion of
a prep is overlapping an adjacent
prep, the Dr. must use the
+ and – tab on the tool to
reduce the area or add to the area.

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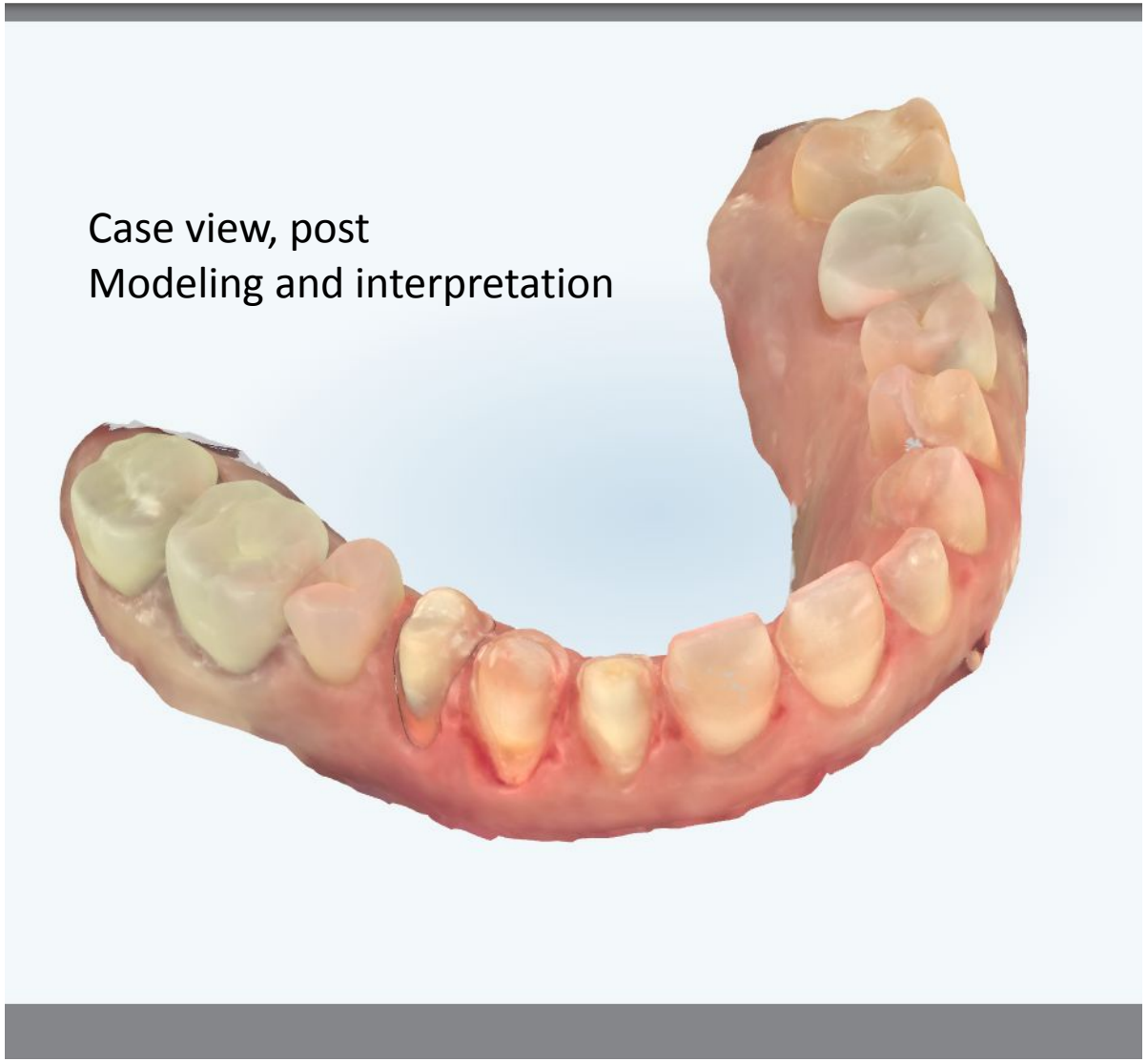
Prep separation lines-

If the lines are not corrected the lab view can be distorted and the case will need to be submitted to modeling for correction.



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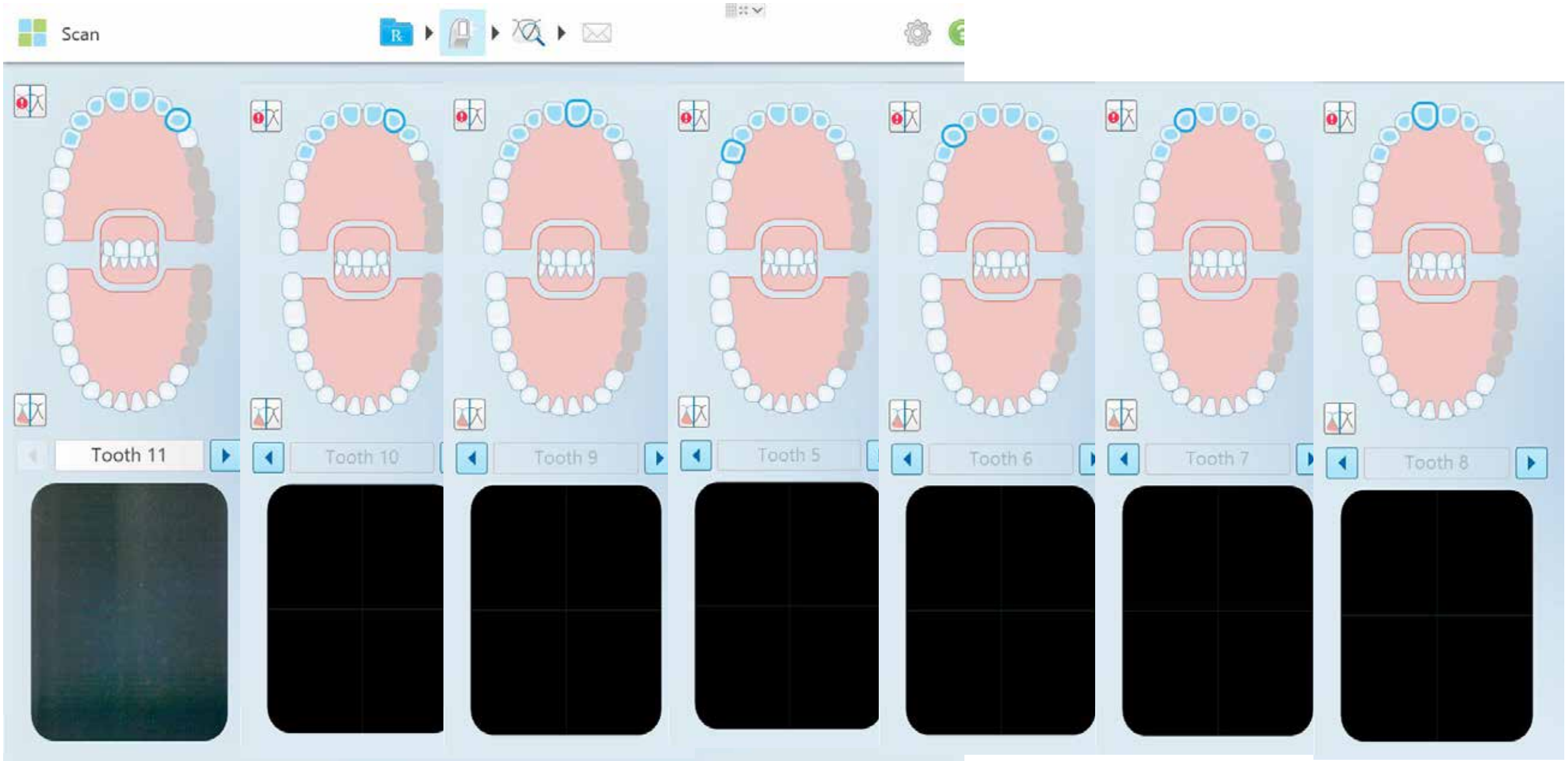
Scanning sequence is very important. The scanner will ask the Dr to move posterior to anterior, breaking at midline.



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Scanning sequence

If scan is taken out of order the arch pieces will not stitch properly and case will have to be sent to modeling for correction.

Lab's view upon receipt. Upper arch is missing and it cannot be selected

When opened with the iTero lab Software the upper arch was available but distorted

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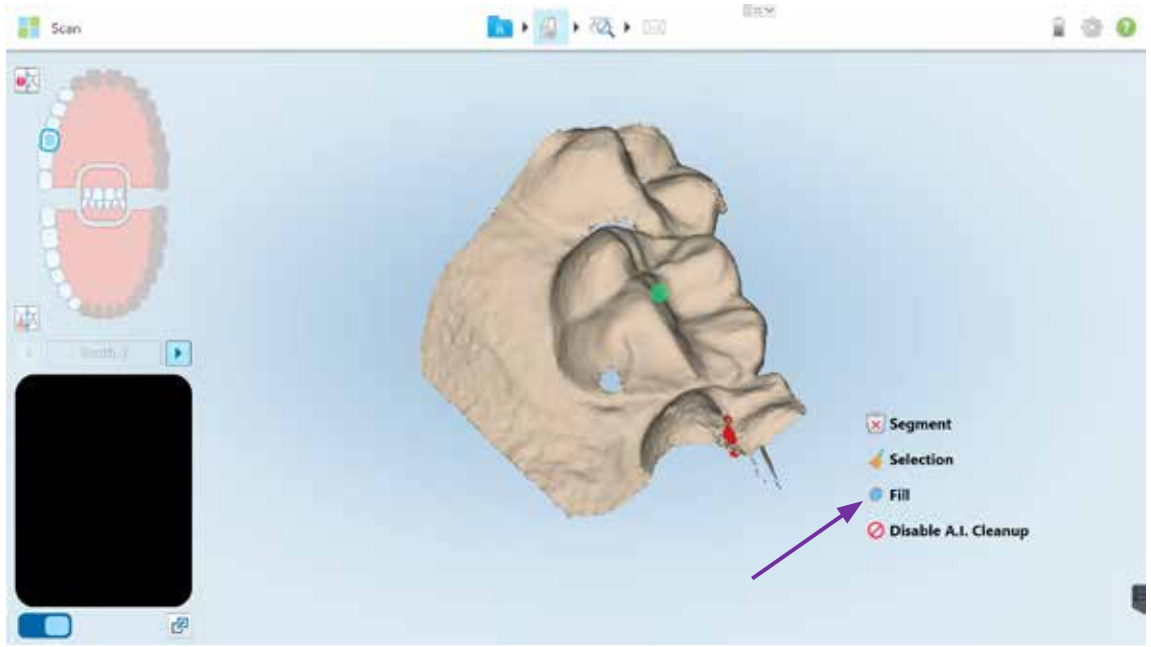
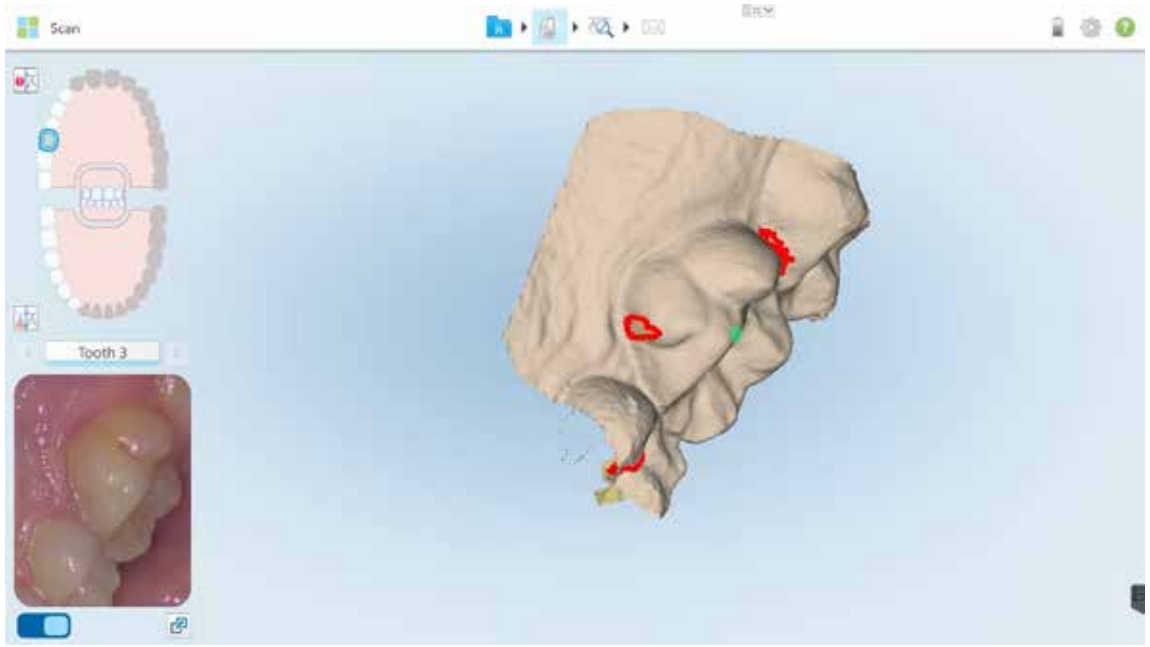
Over scanning concerns

It is important to capture the prep scan quickly and efficiently. We recommend that your Dr scans the prep for no longer than 7 to 9 seconds. If the entire prep was not captured in that amount of time the Dr will need to hold their finger down on the scanning screen and select the ‘Fill tool’. This tool will allow the Dr to add additional information to the prep without over scanning. Over scanning may lead to changes on the prep as the Dr continues to scan, such as increased moisture and it may also cause overlap of excess scan information, leading to an unreadable scan at the lab.

Fill tool





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An example of margin deterioration while scanning too long.

Scan at 5 seconds in

Clean margin

Scan at 13 seconds in

Moisture begins to obstruct margin

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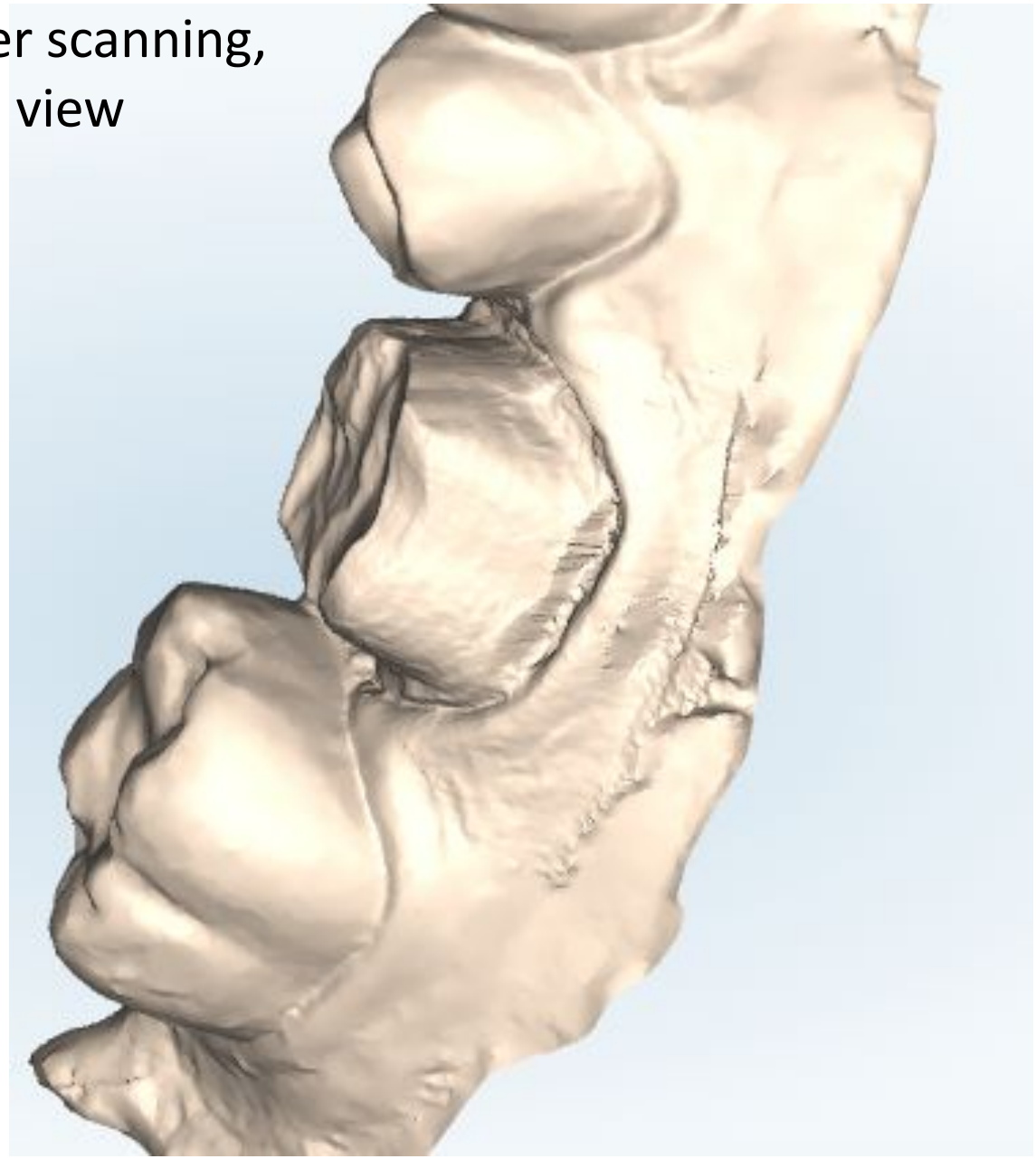
Over scanning,
Lab view



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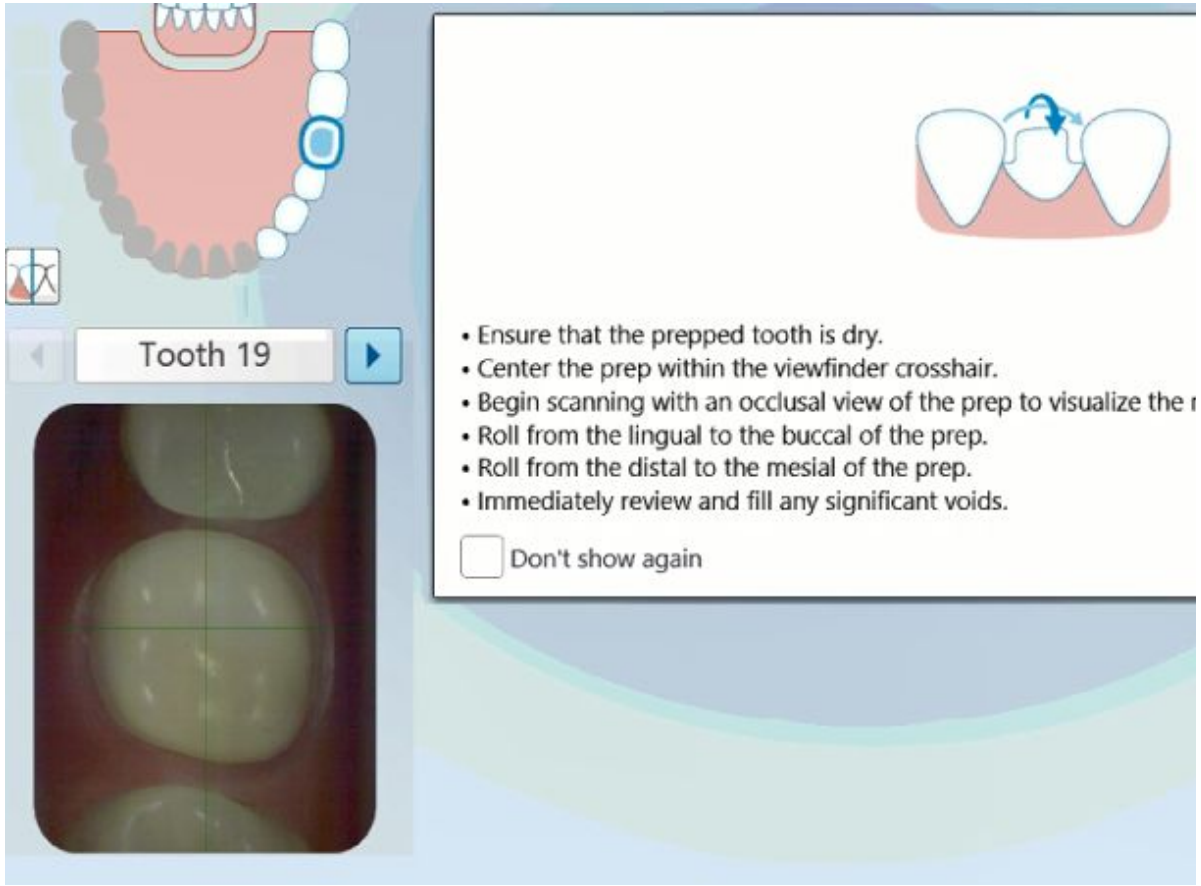
Angulation matters



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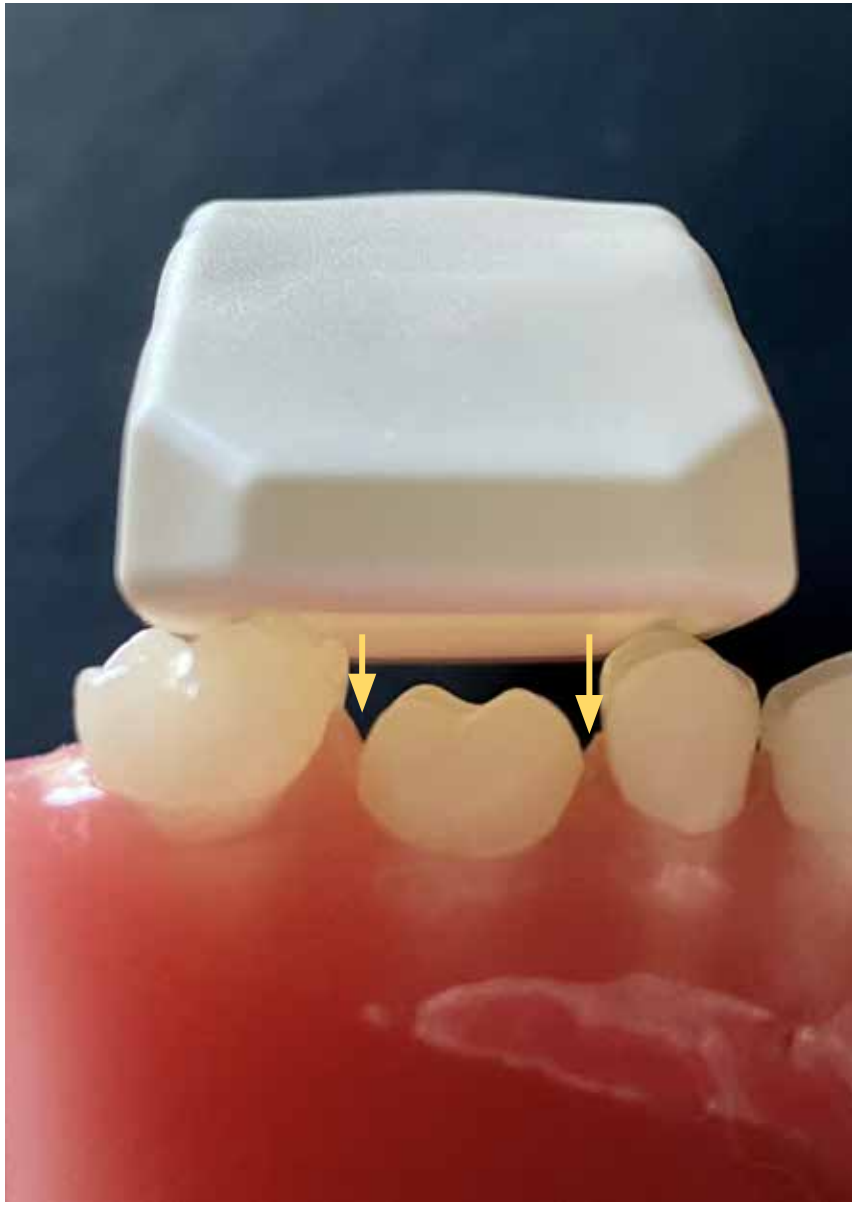

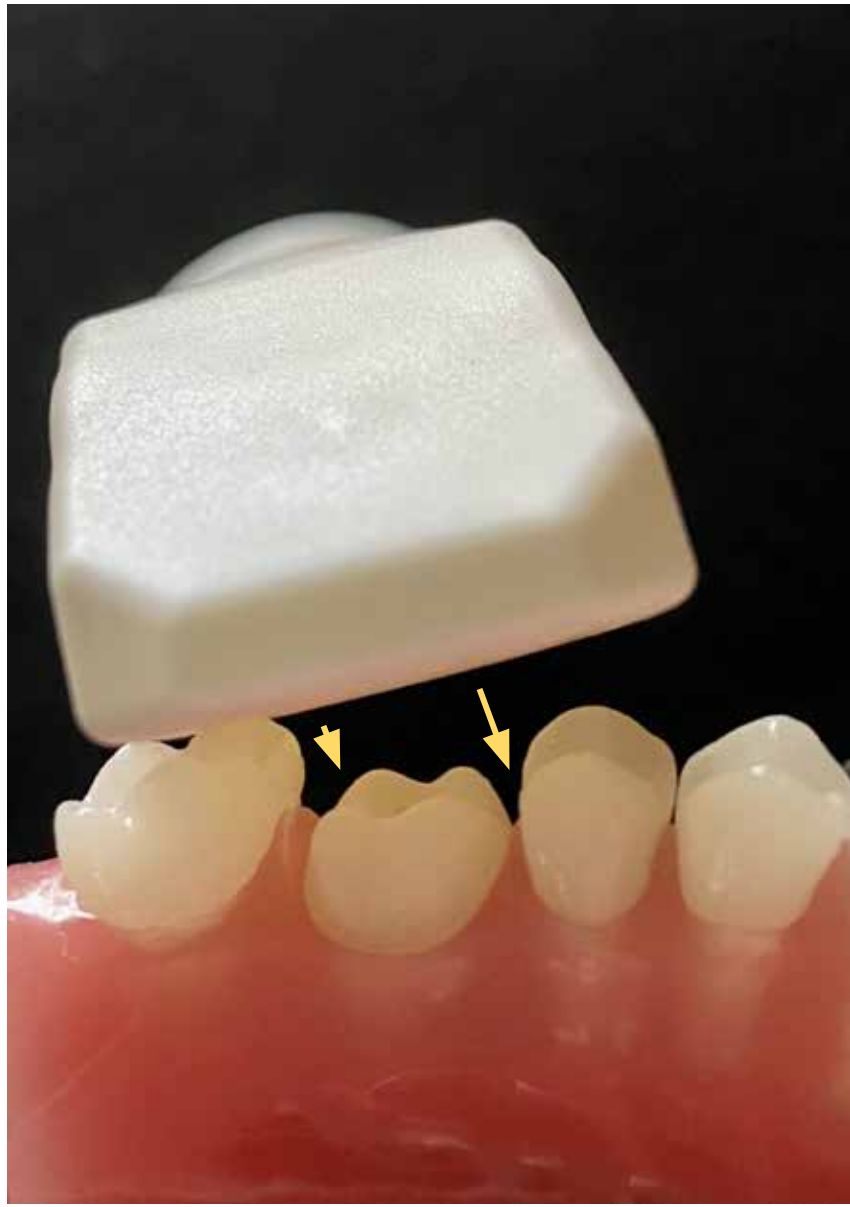

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Top angle vs side angle

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Don’t ‘selfie’ your crowns

Skewed

Reality

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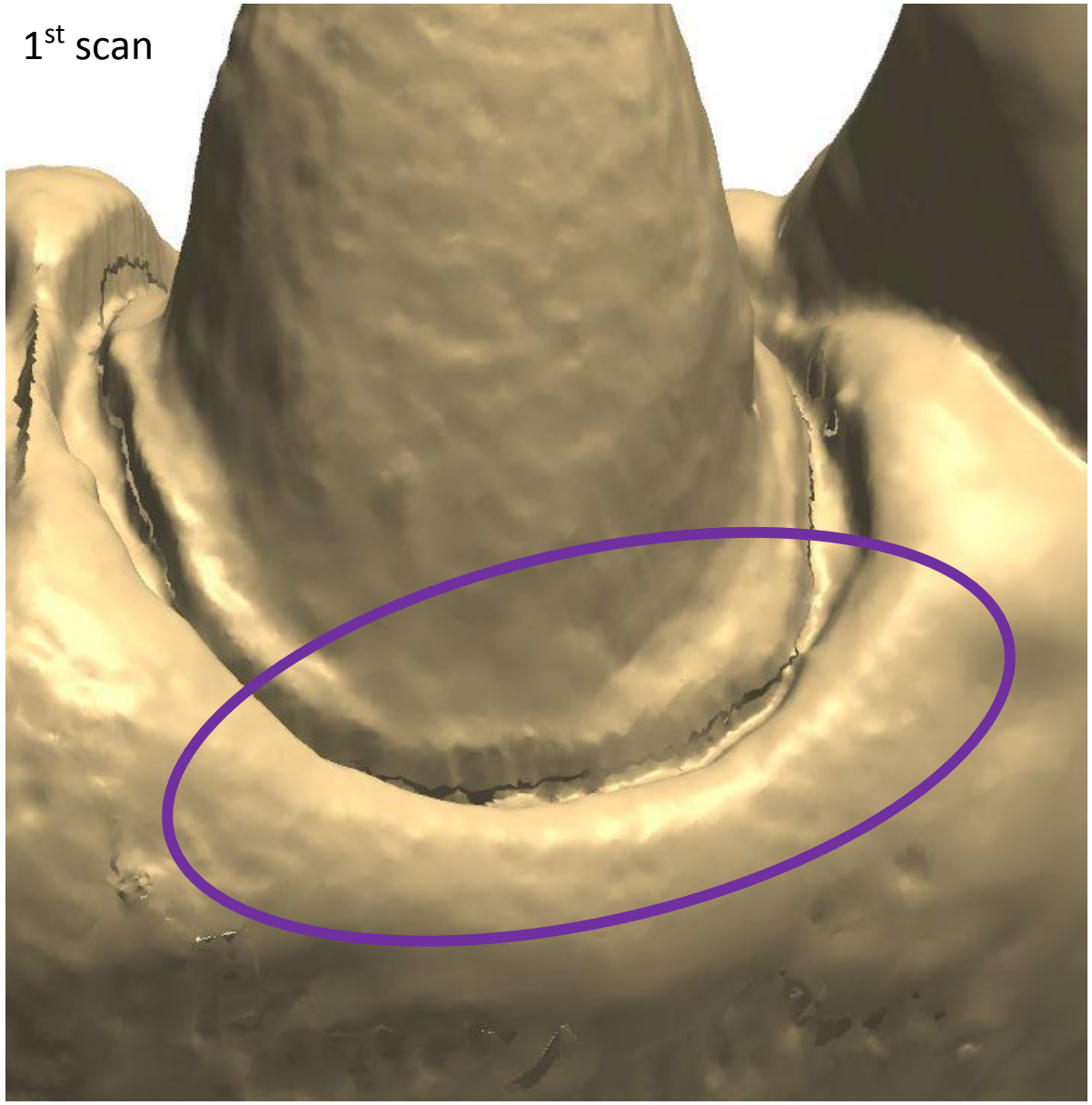
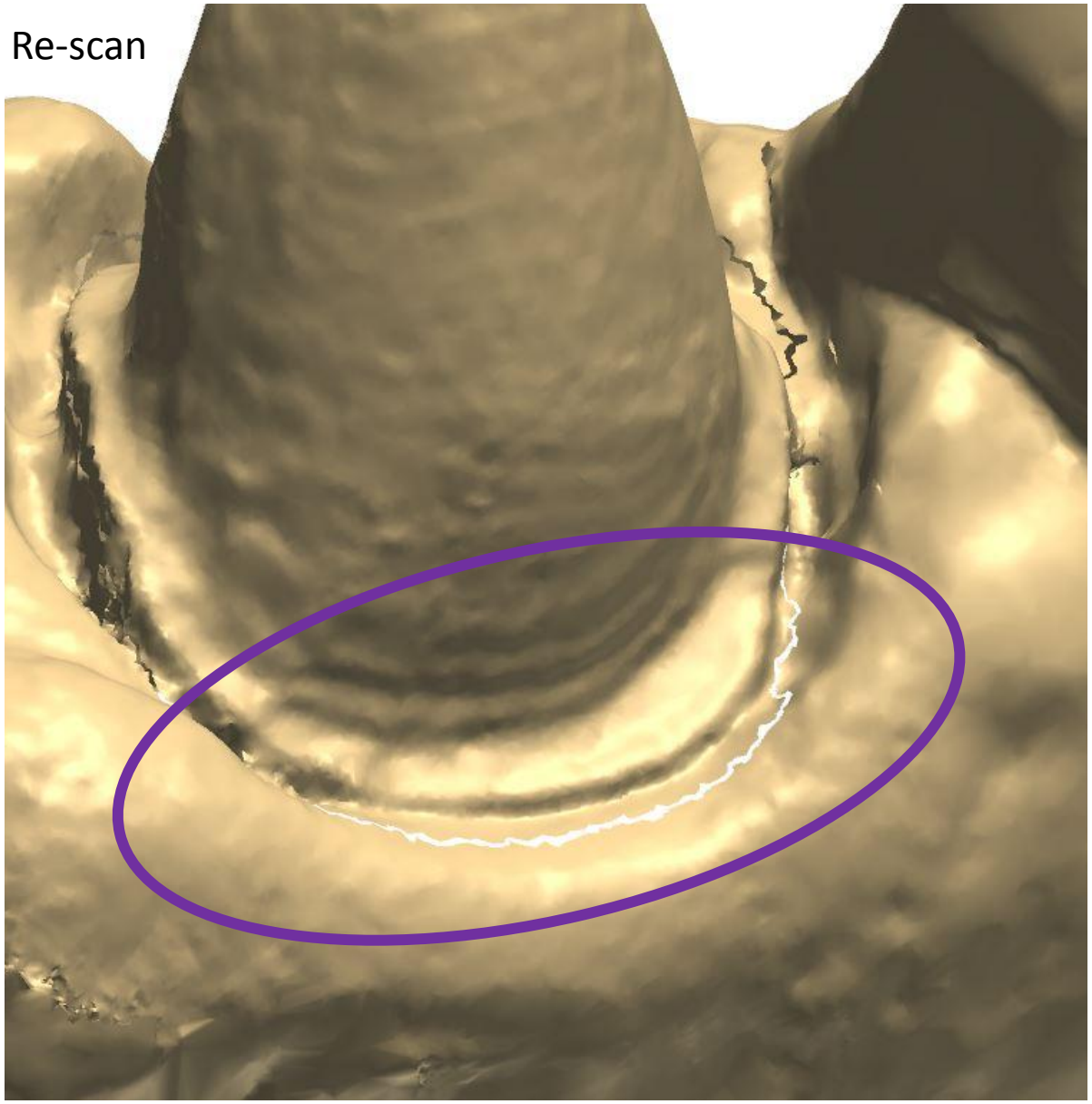
Blurred margin line based on inaccurate wand angulation

1st scan



Re-scan



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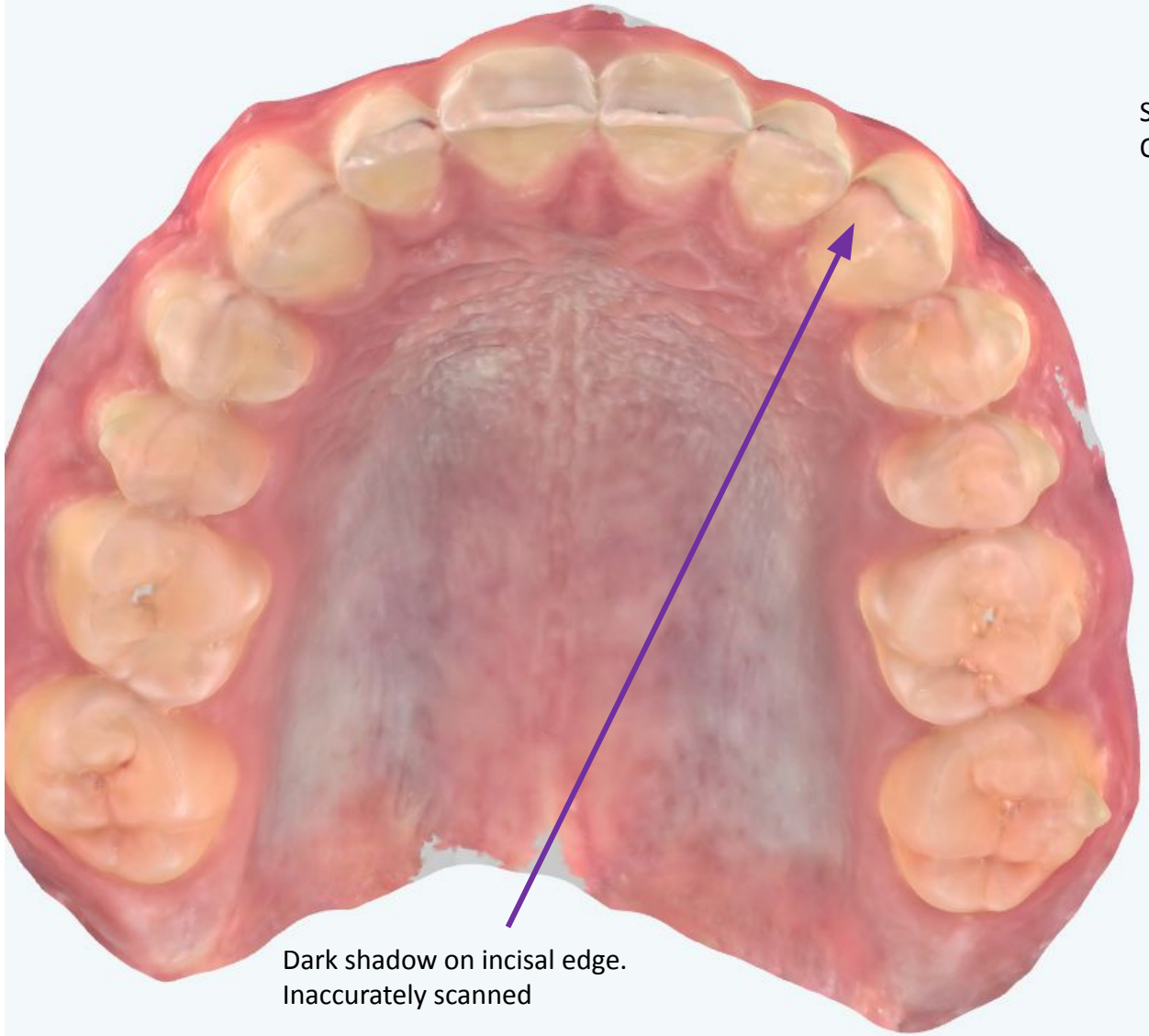
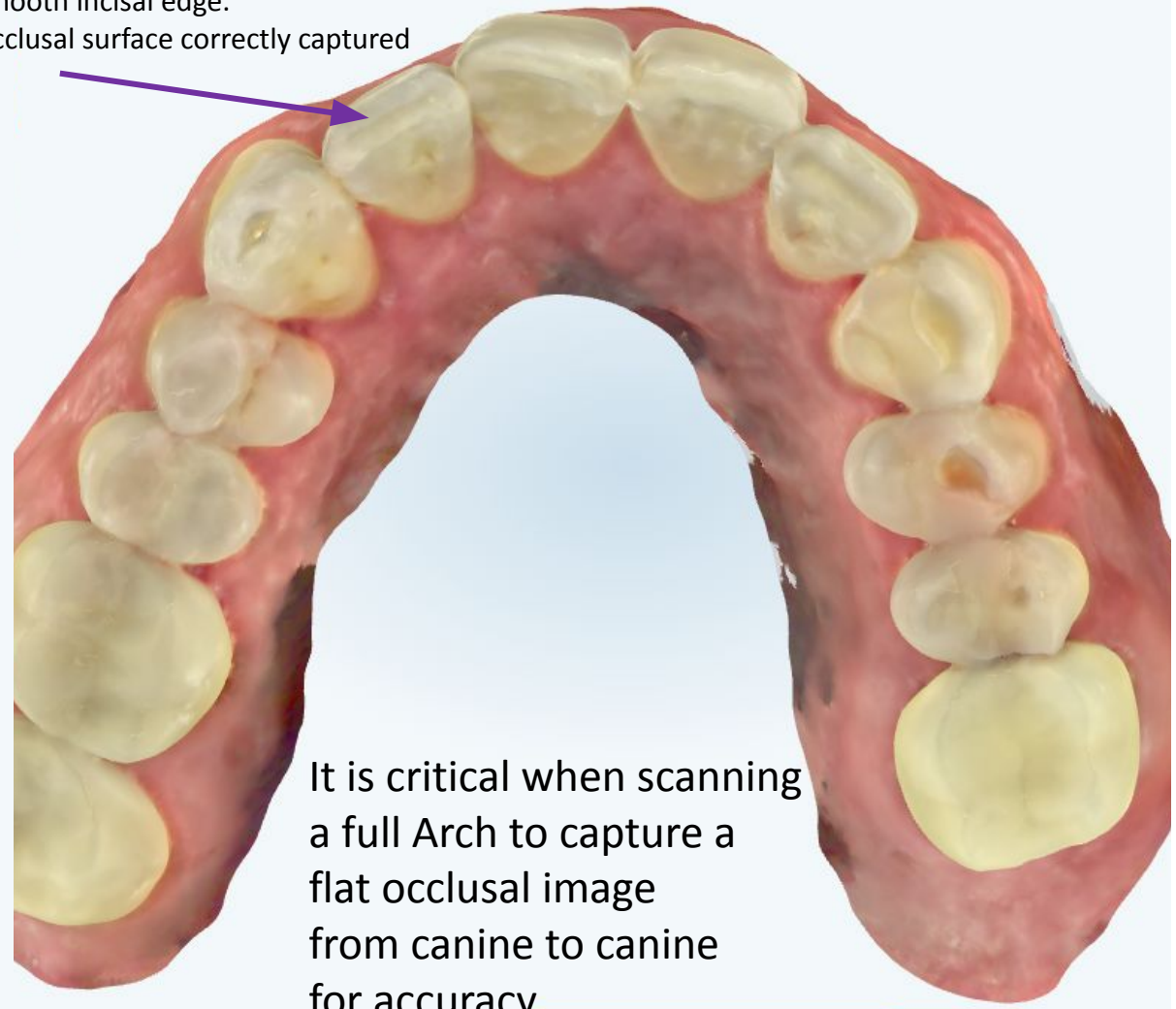
Proper capture of the incisal edge



Dark shadow on incisal edge.
Inaccurately scanned

Smooth incisal edge.
Occlusal surface correctly captured



It is critical when scanning a full Arch to capture a flat occlusal image from canine to canine for accuracy

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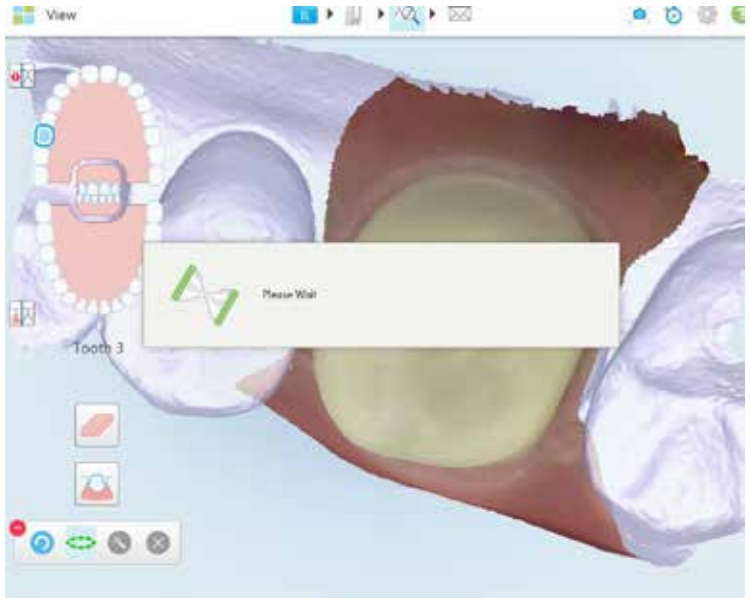
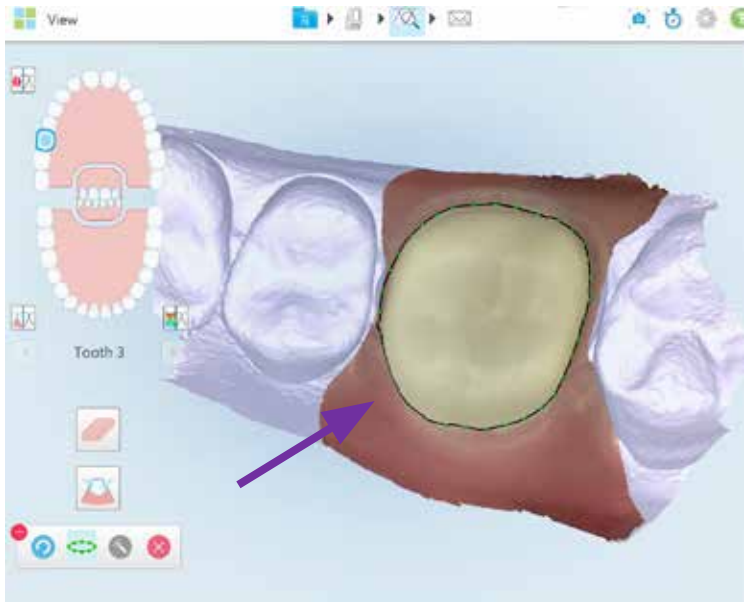
Margin marking tool, how to add and delete

Click the margin marking tool
to add an automatic margin





Once the margin has been detected
a black line with green dots will appear

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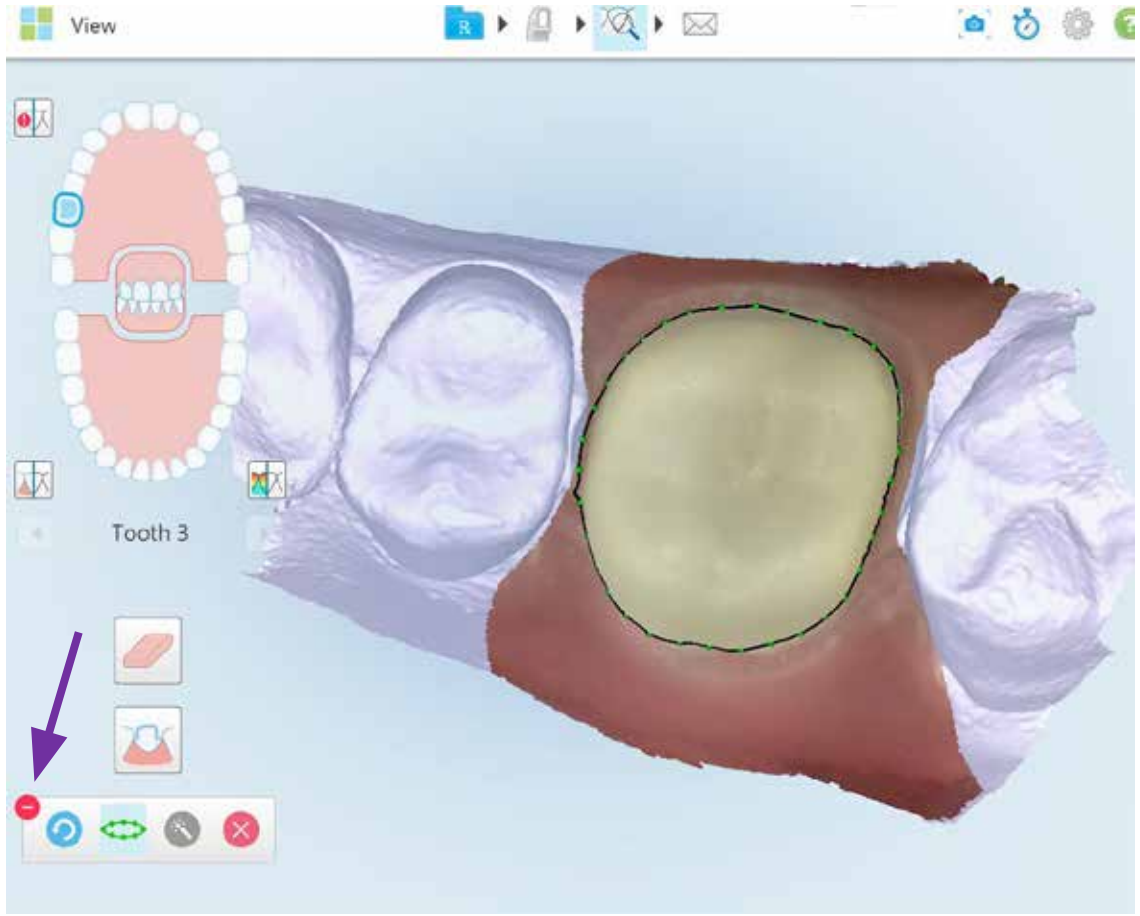

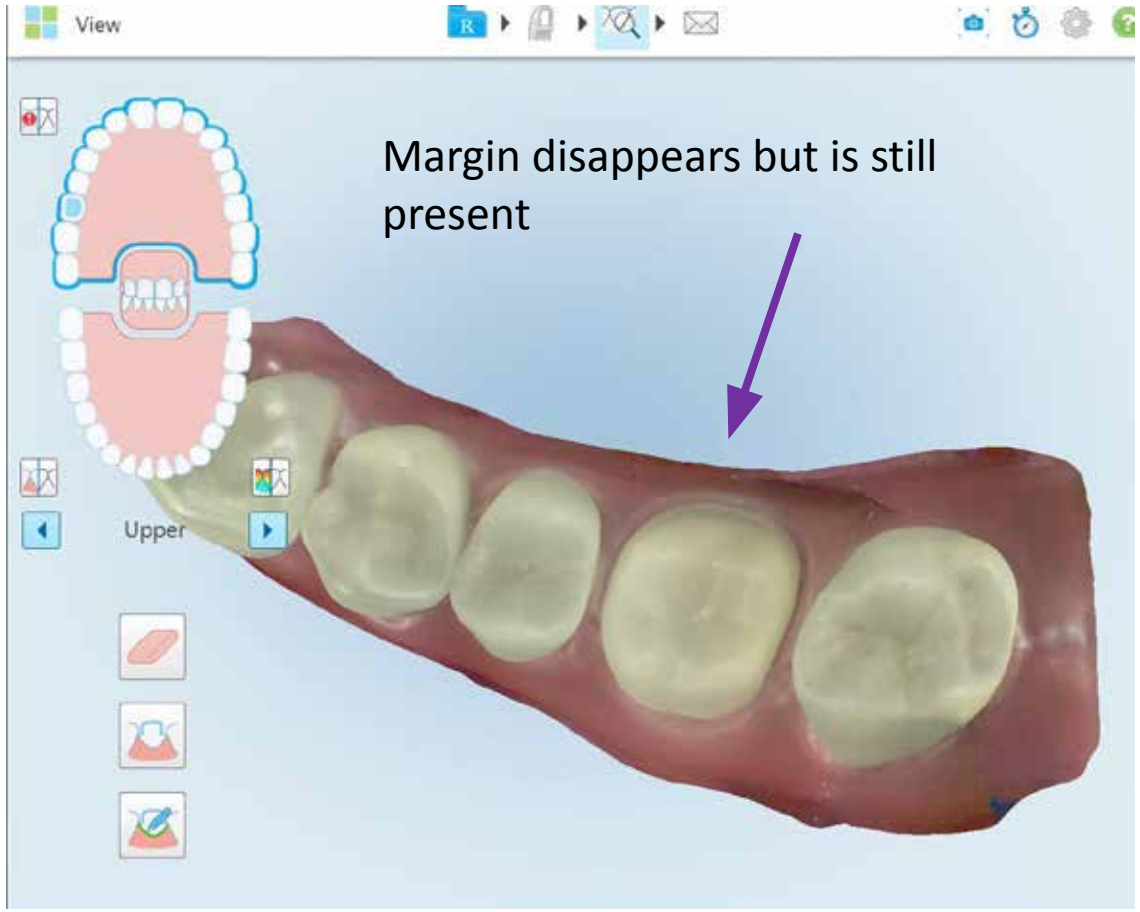

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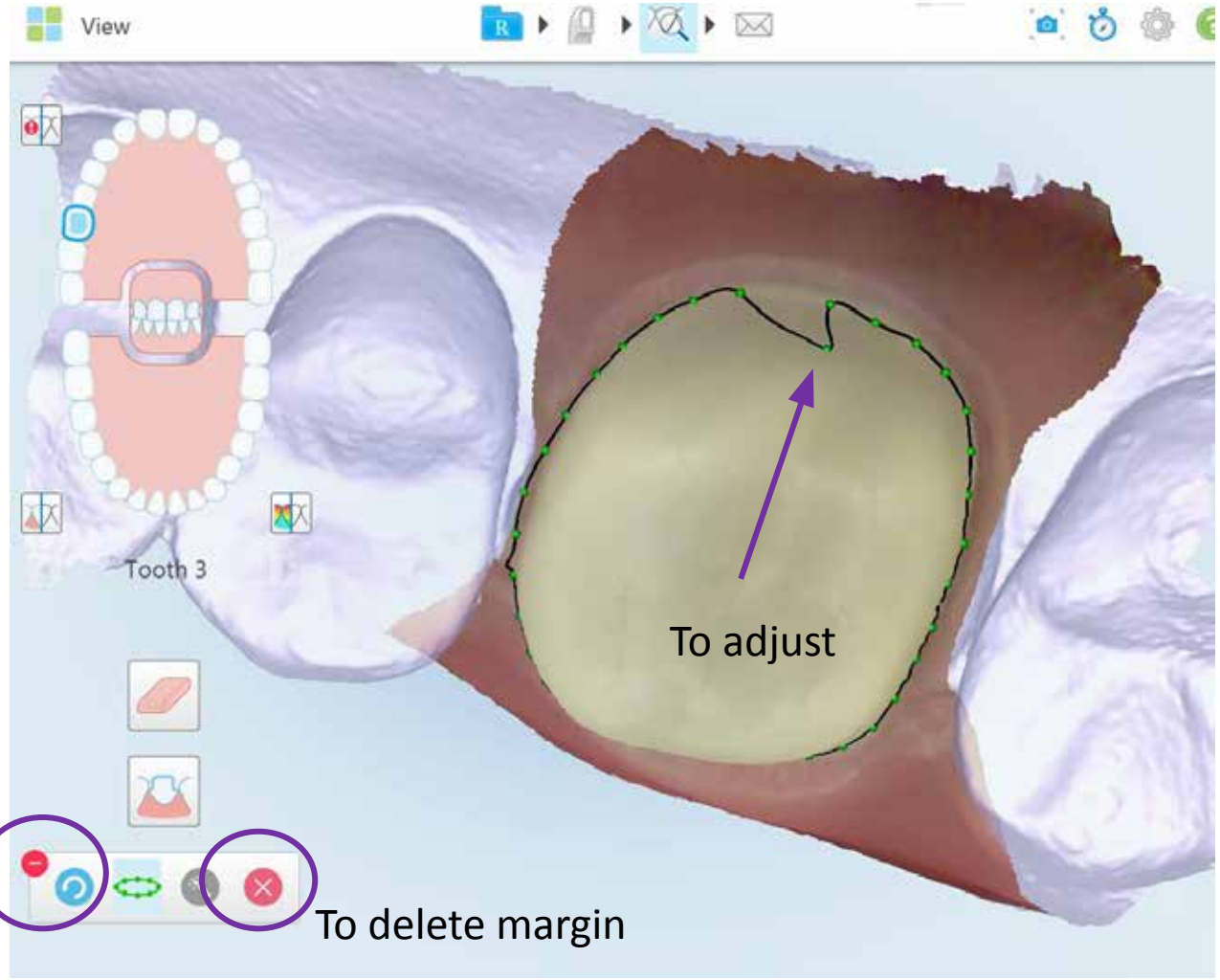

You can adjust the margin by moving the green dots. If you exit from this screen by clicking the red minus sign, the margin stays on the prep and will be sent to the lab or modeling. You will not see the margin once outside of the icon but it remains. To delete the margin, click on the red X. We are working on a warning system to notify the Drs that they are sending a margin.

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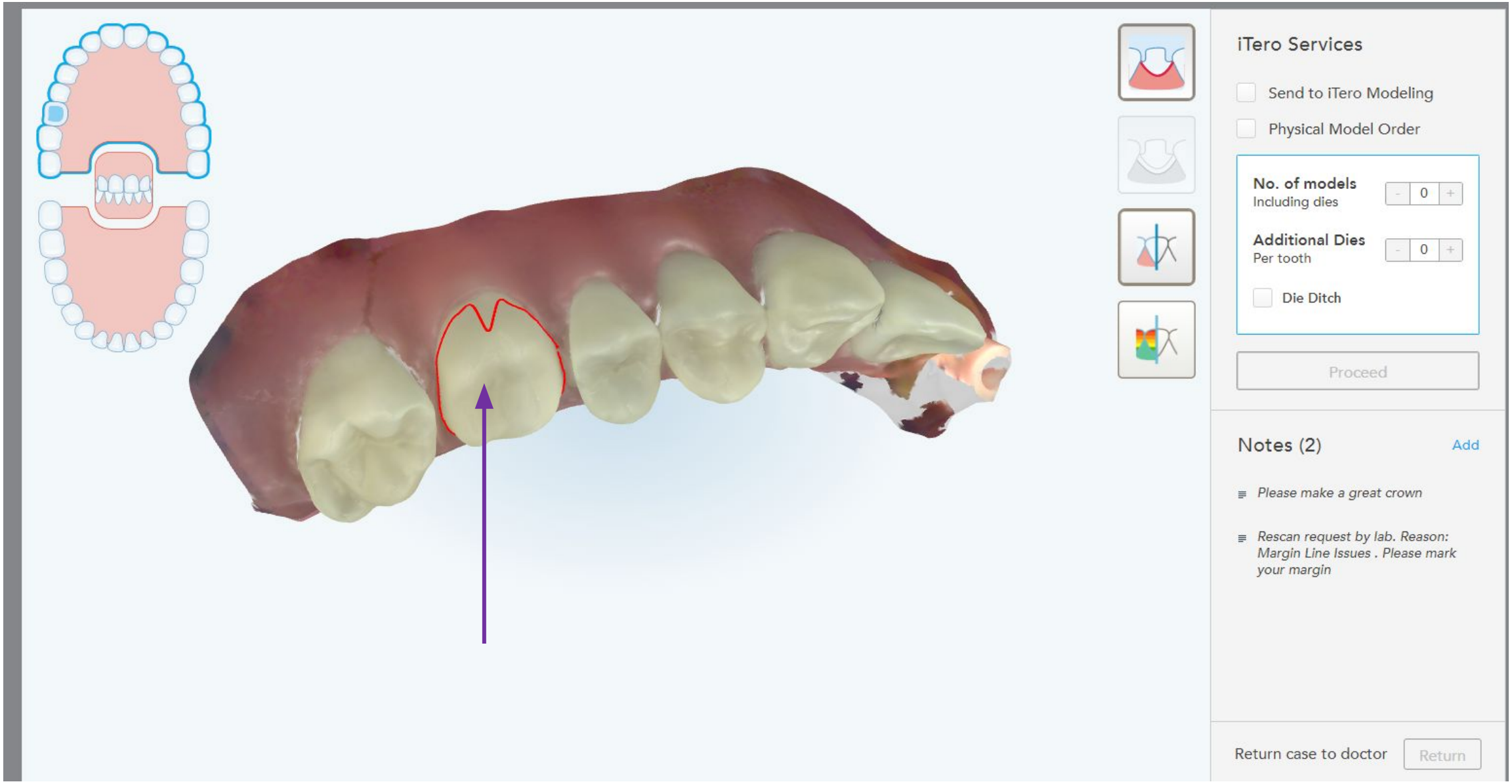
Example of a bad margin marked or looked at by office and sent to lab



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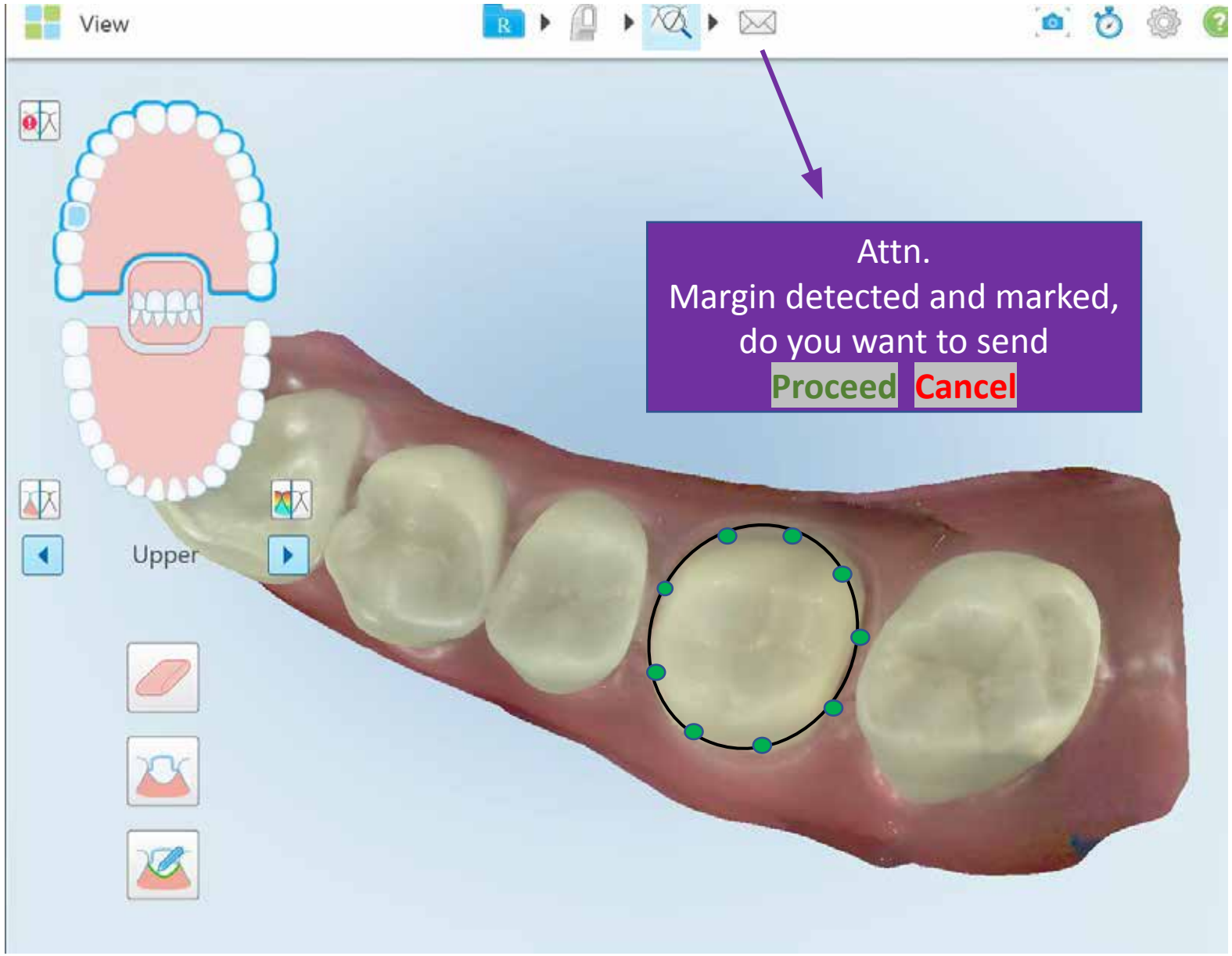
Future updates for margin marking:

We will update the margin marking application to keep the margin visible if the red minus is clicked and we will add a warning for the Dr. prior to sending case.

We are also working to improve the accuracy of the margin marking AI.



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