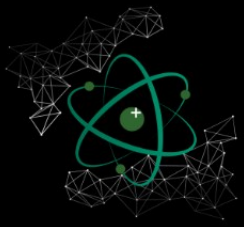


PROTON  
DENTAL  
DESIGN



This document outlines the imaging requirements for submitting cases that require CBCT and intraoral scans.



## General Guidelines

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### Essential Photographs for Smile Design

For optimal esthetic assessment, capture high-quality images in the following views:

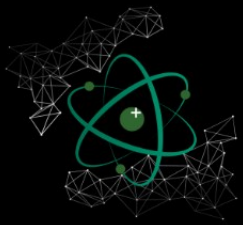
- **Full Smile** – Showcases the patient's natural expression.
- **Exaggerated Smile** – Displays maximum lip and tooth visibility.
- **Retracted Bite** – Provides a clear view of the gum structure and occlusion.
- **Lateral view** – Required to determine position and inclination of anterior teeth.

#### Photography Tips:

- Ensure the patient wears any existing prosthesis during the photoshoot.
- Have the patient maintain direct eye contact with the camera.
- Capture images **before** taking physical impressions to keep lips and gums clean.
- If an **immediate-load provisional** is planned, accurately document the **shade** selection.

### Impressions or Scans:

- Use **full-arch impressions/scans** for the best fabrication of surgical guides.
- For an **immediate removable prosthesis**, include a full **palatal scan** in the impression/scan.
- For fully **edentulous patients**, **fiduciary markers** should be used.
- If **vertical dimension adjustments** are required due to missing posterior support:
  - Capture the digital bite at the **intended vertical dimension**.
  - Alternatively, **order a bite rim**, adjust as needed, and register the centric relation bite using the wax rim.
- Always **verify bite accuracy** post-processing by comparing digital scans to the patient's actual occlusion.



## CBCT Scans

### Patient Positioning for CBCT Scans

For optimal imaging, **for dentate** patients, position the patient with their **mouth open** during the CBCT scan. If available, use the CBCT bite fork to stabilize their bite.

### CBCT Acquisition Guidelines

- Recommended **voxel size**: 250  $\mu\text{m}$  for detailed imaging.
- **Maxillary Arch Scans** – The **Field of View (FOV)** should encompass the **entire maxilla and sinuses**.
- **Mandibular Arch Scans** – Ensure the **FOV** includes the **complete mandible**.
- If scanning **single arches separately**, send individual scans for each surgical arch.
- **Verify scan quality** before patient dismissal to ensure accuracy.

**Important Note:** Avoid submitting CBCT scans composed of multiple stitched images, as they may compromise accuracy.

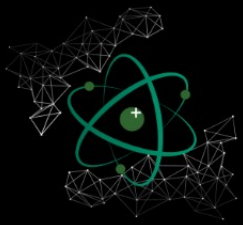
## Specific Guidelines

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Follow the relevant section for your case to ensure accurate digital treatment plans and surgical guides that meet both surgical and aesthetic needs, while minimizing requests for additional details.

### Available Treatment Categories

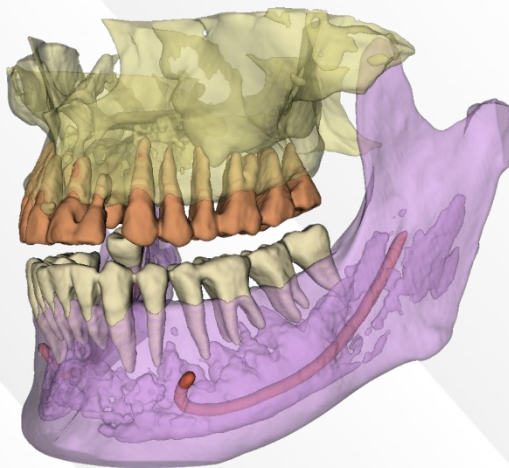
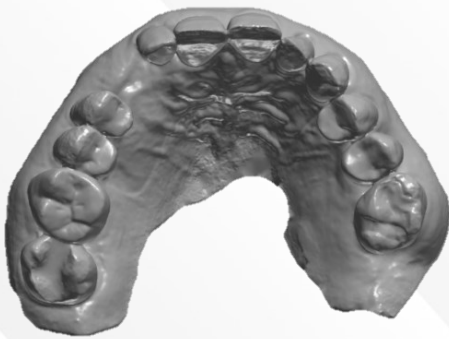
- **Dentate Arch** – Guidance on cases involving full dental arches.
- **Partially Edentulous Arch** – Instructions for cases where some teeth are missing.
- **Edentulous Arch** – Steps for cases where no teeth are present.

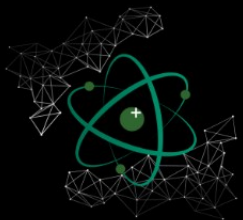


## Dentate Arch

### Impression Tips:

- Verify the bite scan reflects the patient's bite.
- Full-arch impressions/scans provide the best results for surgical guide development.
- Impression/scan of the opposing dentition (non-surgical arch).

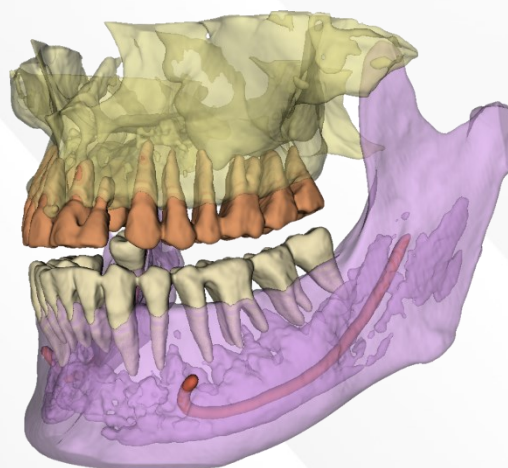


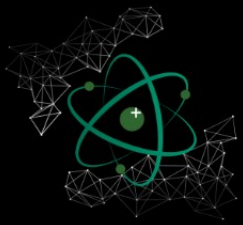


## Partially Edentulous Arch

### Impression Tips:

- Scan without partial denture.
- Scan with partial denture.
- Bite registration with partial denture

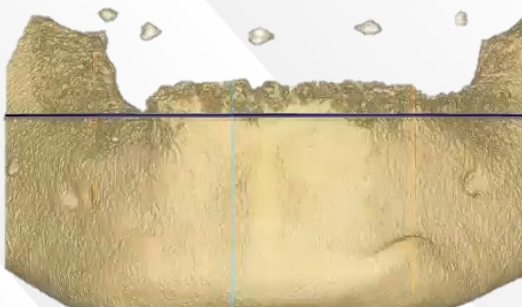


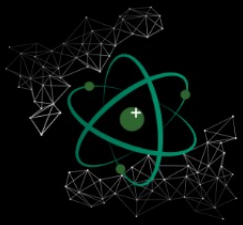


## Edentulous Arch

### Impression Best Practices:

- If the patient wears an **existing prosthesis**, ensure it is **well-fitting** for use as a reference.
- Before recording impressions, **reline the denture** as needed.
- Scan **oral and intaglio surfaces** of the patient's existing prosthesis, 360°.
- For patients **without** an existing **denture**, bite blocks and fiduciary markers are required.
- Take bite registration in **centric relation**





There are two ways to capture the scans for the prosthesis of an edentulous patient, **a) Intraoral Scanner + CBCT** and **b) Dual-Scan CBCT**.

## 1. Prosthesis Scan

### a) Intraoral Scanner + CBCT

- i. Place 5 to 6 CT markers on the prosthesis.
- ii. With your intraoral or tabletop scanner scan both intaglio and oral surfaces (360°).
- iii. Verify scan quality before proceeding to the next step.

### b) Dual-Scan CBCT Scan:

- i. Place 5 to 6 CT markers on the prosthesis.
- ii. Depending on your CBCT scanner you might need to spray the dentures with a radiopaque coating.
- iii. Position the prosthesis on a foam pad or cardboard box within the CBCT scanner.
- iv. Recommended voxel size: 250  $\mu\text{m}$  for optimal accuracy.
- v. Verify scan quality before proceeding to the next step.

## 2. CBCT – Patient Scan:

- Ensure the **CT markers** remain unchanged from the first scan.
- In patients with **full arch dentures** capture the **image in occlusion**.
- Position the patient in an **exaggerated smile** during scanning.
- Recommended **voxel size: 250  $\mu\text{m}$**  for precise imaging.
- **Maxillary Surgical Arch:** The **Field of View (FOV)** must capture the **full maxilla and sinuses**.
- **Mandibular Surgical Arch:** The **FOV** should include the **entire mandible**.
- If scanning **single arches separately**, submit individual scans for each **surgical arch**.
- **Verify scan quality** before dismissing the patient to prevent inaccuracies.