



360Imaging® LLC.

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Requirements for Full Arch Provisional Case

Edentulous Patients

1) Files to be sent Via 360courier: (by Surgeon)

- Dual Scan Files: (for more details on the dual scan please check page 3)
 - Scan of Denture with markers (following special settings if needed)
 - Scan of Patient wearing Denture with markers (normal settings)

A blue rectangular graphic with a large blue checkmark in the top left corner. The title "Checklist for Dual Scans" is at the top. Below it are five items, each with an unchecked checkbox. A blue triangle points to the right at the bottom right of the graphic.

Checklist for Dual Scans

- Patient for Scan
- Patient's Existing Denture, a Duplicate Denture or a Clear Acrylic Scanning Appliance
- SureMark CT Scan Markers: Radiopaque (Non-metallic) Glass Beaded Stickers
- FutarBite Registration: Radiolucent Bite Registration Material (will not show in scan)
- Chairside Hard Reline (if needed)



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- Intra Oral Scans:
 - Patient without denture (must have full vestibule and palate definition)
 - Patient wearing denture (must have full vestibule and palate definition)
 - Opposing arch scan
 - Centric Bite

- Diagnostic Photos and Profile Photos
 - (Lip Line at Rest, Normal Smile Line, High Smile Line)
 - (i.e. - Mid-Line, Incisal Edge Position, Shade & Tooth Shape)

2) Items to be sent by the Restorative Dentist in the case of not having an Intra Oral Scanner: (to be sent to the lab making the provisional)

- PVS Impression/ Cast:
 - Patient With Denture (showing full vestibule and palate)
 - Patient Without Denture (showing full vestibule and palate)
 - Centric Bite
 - Opposing Arch (showing full vestibule and palate)

For assistance with the laboratory or the 360courier order upload please contact us or email us on the below details.

Phone: 866 360 6622 toll free

Email: support@360imaging.com

Dual Scan Protocol Process

What is a Dual Scan & Why is it Used?

A dual scan is a process where a patient's existing denture, a duplicate denture or a clear acrylic scanning appliance is scanned in a CBCT unit with radiopaque markers and then the same marked denture is scanned in the patient's mouth. Thus, you have 2 scans, or a Dual (2) Scan Protocol.

The Dual Scan Protocol is used for patient's that are fully edentulous and the desired surgical guide is mucosa / tissue supported. This process of scanning allows the doctor to see the patient's anatomy during planning, which would otherwise not be visible.

Setting Up for the Dual Scan:

1. Start with a clear acrylic appliance (variation in composition can yield scatter in the image of the appliance; avoid this as much as possible). A well fitted denture with low radiopacity is acceptable as well.
2. Check the fit of the appliance.
3. Do a hard reline if necessary.
4. Dry the appliance prior to adhering markers. The markers should not move after application.
5. Mark the appliance with 6 markers for either a partial or full arch appliance.
6. Cut the markers if necessary so that they will fit on the appliance.
7. Place markers randomly on the appliance:
 - a. Mesial / Distal
 - b. Superior / Inferior
 - c. Buccal / Lingual
8. Ensure there are NO markers on the intaglio (soft-tissue) surface.



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Taking the Dual Scan:

1. Scan the appliance first.
2. Position the appliance just as it sits in the patient's mouth on a foam or Styrofoam block.
3. Scan the appliance at 80KVP and 2ma if you are using a Carestream unit. On ICAT, Sirona, Vatech or any other unit, continue to use the same patient morphology.
4. Confirm that all markers are clearly visible in the scan of the appliance.
5. Prepare a bite registration if the patient is wearing a full arch appliance to ensure that the appliance is seated correctly.
6. Scan the patient.
 - a. Use normal implant planning protocols and the largest field of view.
 - b. Ask the patient to bite firm on the bite registration to blanch the gums.
7. Confirm that all the markers are visible in the patient scan and the appliance is seated properly.