New “scanbody” image catalogue introduced

A new “scanbody” image catalogue will be introduced with the CEREC SW 4.5.1 service pack. This will change the workflow of the scanning process for implants compared with previous CEREC SW 4.x versions.

What will change?
In order to record the position of the implant, ScanPost or TiBase must be recorded in the “scanbody” image catalogue. Ideally, the “lower jaw/upper jaw” image catalogue should no longer contain a scanbody. The “gingiva mask” image catalogue is no longer required for new cases. The gingiva information is taken directly from the “lower jaw/upper jaw” image catalogue.

What will this improve?
It eliminates problems that occasionally occur during bite registration caused by an excessively high ScanPost.

In the design phase, the ScanPost does not protrude through the created design and the ScanPost does not have to be manually cut out of the virtual model.

Recommended procedure
1. Start by scanning the jaw (without ScanPost or TiBase).
2. Then scan the antagonist and take a buccal scan in the terminal occlusion position.
3. Insert the ScanPost or TiBase for the scan. During this time, the models can already be calculated.
4. Now scan the ScanPost, ensuring that you scan part of the adjacent dentition in order to allow for a match with the preparation scan.

Note: We advise against scanning the entire situation with ScanPost or TiBase and then copying this information into the missing “scanbody” or “lower jaw/upper jaw” image catalogue. Otherwise the improvements described above will not work.

You still have the option of using scanned areas of the gingiva as an emergence profile for the abutment. For this purpose, it is not essential to have scans in the gingiva mask image catalogue. This information is taken directly from the jaw scan.

Importing cases from previous CEREC SW versions
Implant cases can be imported from previous software versions. It is not necessary to make any changes or to move scans to other image catalogues.