

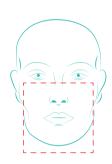
MGUIDE CBCT

10 guidelines for proper CBCT

In order to enable MIS MCENTERS to design the MGUIDE surgical template, please scan the patient according to the following guidelines:

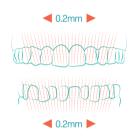
Recommended Field-of-View (FOV) of 12x12cm

Verify that the scan includes the entire jaw. FOV of 8X8 is possible if a 12x12 FOV is not achievable.



Slice Thickness

Minimum
Thickness = 0.2mm



Scanning 3.

5.

The scan must always be performed **without** any type of removable denture or scanning appliance.



Patient must be scanned with opened jaw (2 cm)

You may use a disposable syringe, or a power suction tip.



Use a cotton roll to separate soft tissue from the gingiva.

Position between the cheek and the buccal side of the jaw.



Tongue Position

Maxillary scan - Tongue must contact the floor of the mouth.

Mandibular scan - Tip of tongue must touch the vibrating line at the back of the mouth.



Head Position

The patient's head must be completely stabilized to prevent any motion artifacts.



Maxillary Scan

A maxillary scan must include at least half of the maxillary sinus to the occlusal plane.



Scan-time

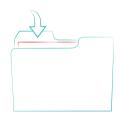
ALARA - As low as reasonably achievable



Exporting Scans

10.

Forward Full DICOM DATA to your MCENRTER via email/ CD/ flash drive.



Recommended Cone Beam Scanners

- i-CAT
- J MORITA 3D Accuitomo 170
- KAVO KaVo 3D eXam
- KODAK K9500
- NEWTOM VGi
- PLANMECA Promax 3D MAX
- SIRONA Galileos Comfort
- SIRONA Galileos Compact
- SOREDEX Scanora 3D
- VATECH Master 3DS
- VATECH PaX-Reve3DS
- VATECH PaX-Teveobo

