SCANNING MISTAKES THAT COST TIME

+ HOW TO FIX THEM

A FREE GUIDE

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SCANNING MISTAKES THAT COST TIME

AND HOW TO FIX THEM

A poor scan isn't just a minor inconvenience; it ripples through the workflow, causing remake delays, wasted chair time, and frustration for both doctor and patient. Here are the top scanning pitfalls and the best practices that separate consistent success from constant rework.

01. DISTORTED SCANS (AI FILL ARTIFACTS)

Modern scanners often use AI correction features to smooth missing areas or fill gaps automatically. While it looks impressive, it can create invisible distortions that ruin fit precision — especially around band seats, pontics, or areas with gingival overlap.

FIX: Turn off AI or "smart fill" features for all appliance scans. Capture the true surface data, even if it looks rougher. Real data is always better than "pretty" but inaccurate models.

02. MISSING THE FULL PALATAL VAULT

This is one of the most common causes of seat issues on retainers, expanders, and fixed appliances. Many teams stop scanning once they've covered the occlusal table — missing the posterior palate or undercuts.

FIX: Scan the entire palatal vault, from molar to molar, and include the posterior border toward the vibrating line. If acrylic will touch it, it must be scanned.

03. INCOMPLETE ARCH CAPTURE

Sometimes the scan looks complete — until you try to seat the appliance and discover the 6s or 7s were cropped short. The result? Misaligned occlusion or appliances that "rock."

FIX: Always include the distal of the 6s (and 7s when present). Rotate the 3D model before submitting to confirm full coverage and visible contact points.

04. MISSING PRESCRIPTION CONTEXTS

A flawless scan still fails if we don't know what you're trying to accomplish. Missing band types, pontic shades, or lack of reference photos forces the lab to guess — and guessing on medical devices is never acceptable.

FIX: Specify band type and material preferences. Include photos for shade matching or appliance-specific details. Use the latest ODL Rx templates — every field exists to eliminate back-and-forth.

05. NEGLECTING SCANNER CALIBRATION

Even the best scanners drift over time, introducing millimeter-scale distortions that only show up once a device fails to seat.

FIX: Follow your manufacturer's calibration schedule religiously. We recommend a quick test scan of a model every month — if the STL looks warped, recalibrate before scanning patients.