Just saw a video of this on YouTube. Pretty unbelievable how quick it is!
Anyone seen it in real life? Opinions?

I did see one in real life at a digital-scanning day put on by Schein. It is quick and easy but they aren’t shipping yet. Just had the iTero rep in, and the new scanner from them seems as fast but has better software. And the iTero is less up front. I’m still wondering if I can get one of my labs to buy me one.

In my hands, scan speed is 95 percent user controlled. I can scan an upper right second bicuspid crown in about 20 seconds. A lower left second molar with a fat tongue and thick neck... my worst nightmare.

Brad, I don’t find that statement to be true; obviously, the operator makes a big difference. For example, when I first got the NEVO, it was still taking 3–5 minutes for a prep scan. Now it is more like a minute.

However, with the old E4D, no matter how skilled you were, it was 3–5 minutes. Same with CEREC old models versus Omnicam: the technology made faster scanning much different.

The hardest part for me with the NEVO is contacts. Not sure if this is difficult with other scanners as well.

Videos of the TRIOS 3 show it blowing around an arch in, like, 10 seconds; that is impossible with the NEVO or Omnicam. However, I am wondering if anyone has actually tried the TRIOS 3 in real life, because I wonder if this 10-second capture gets fine margins and contacts and such, or just a crappy model that would equal crappy restorations.

OK, then let me rephrase: In my work, the limiting factor in speed and quality is ME.

With any scanner, the tough bit is getting below the height of contour for the proximal contacts. So when you see demos flying around a model of intact teeth, you’ve got to take that with a grain of salt. Brad is right: Some cases are just easier to scan than others, just like some teeth are easier to prep than others—all about the access. Upper bi is super easy, really quick to scan. Lower molar with a big tongue and uncooperative patient will take longer. Of course those patients are also the ones that I had more missed impressions on with PVS, as well.

Exactly, Mike. When we see those 22-second full arch scans, they are typically intact arches. It’s those proximals with tilted teeth and all that take time and repeated efforts.
One other thing I catch myself doing—and wasting time in the effort—is getting data filled in proximally that isn’t important. All that stuff below the contact just isn’t needed. But I know sometimes I want the model to look right and keep scanning to make things perfect.

I have had a TRIOS 3Shape for almost two years. There is a learning curve with the scanner. Most of the time we take an impression plus the scan. Initially they rejected 30 percent of our scans at Glidewell Lab for one reason or another. Many times the bite was not set right. We would get an email a week or so after sending the scan that the lab needed a new scan.

Keep in mind that there is a $3,500 yearly fee for the scanner.

We do not do very well on anterior teeth using the scanner. Molars generally are fine to do. We do not attempt to do any posterior scans on people who have a limited opening. Second molars with deep distal margins are not done with the scanner.

I would say that using a scanner adds about eight minutes to the procedure. It is not a time-saver. We are getting better and better using the TRIOS.

The lab work is generally good from the scans. I have had the occlusion 2mm high once in awhile. I think that has been reduced with the software up-dates.

We did see a TRIOS with very fast software a number of months ago. Biolase was or is the distributor for the TRIOS. We have requested this fast soft-ware update and we have not received it to date.

I hope this helps understanding the disadvantages of the TRIOS scanner.

Very interesting insight, Dr. Brown. Are you on the new, quicker color software? Any idea if this will help?

We have a 3Shape pod. Got it in February 2014, and we still learn...

Scanning is definitely NOT faster than the old impression, but accuracy is superb. Difficulty is (as already stated by others) getting prox surfaces well, scanning lower molars due to tongue and in some cases (anterior deep bites) to get occlusion right.

Since we got the system, it’s gotten faster and more accurate. It doesn’t lose focus as much as it did before, although this may also be our skills that evolved. Full color is excellent, but we rarely use the built-in shade measure as it often differs from our eyes, choosing a more gray/cold shade than what we want (if we see A3, scanner often sees C3). “Live” bite registration is really cool, but in my opinion, you need more data than the bare minimum to put upper and lower together—even minute discrepancies can give problems with crown height.

When we got the TRIOS, we also got the PlanMill from Planmeca, so we scan, design and produce our own e.max crowns and small bridges. If you take your time learning the design process, you can control everything and make beautiful work. If not, just use the auto function and you’ll be OK. Auto has im-proved greatly with the last iterations, but it still can’t design a crown with a missing neighbor.

When we plan it right, we prep and deliver within two hours. Sometimes less, but we prefer not to stress.

And now, the benefits, which mean more to me than I expected:

• Same-day delivery means the world to patients. Not having to deal with provisionals and being done same day makes the decision to get the crown made much easier. Patient acceptance with crowns is up a lot. I don’t have the figures, but I’d say up 30 percent.
• Staff love it. My clinical assistant does the scan with one of my hygienists; they

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shade-measure together. I just check final scans.

- My FD or one of the hygienists designs the crowns; I just check margins and design.
- My FD or my hygienists paints and glazes. They’re so good that I no longer check this.
- When the patient gets back, I control and seat the crown (in my country, hygienists can’t do this), and explain which team members took part in the treatment. They love that we team up like that; last week, I had a retired big-time boss of a large company tell me that was expert management and leadership.
- We have at least three different people who can manage every step of production, so we don’t plan this—we just use whoever’s available.
- No more temps (unless we seat another day).

All in all, it takes me about one hour’s work to do a crown. My staff does the rest in the middle of the other work. But they are on fixed salary, not production-based. ■

vomer6
Member Since: 10/15/03
Post: 25 of 43

I agree that all of us want a scanner that is clearly cost-effective, easy to use and of course without powder. I have use my 6-year-old iTero with very few problems; however, now Cadent has decided that it is at the end of its life and will no longer support it if I need parts unless they happen to still have some left. OK, that’s one problem, but I can still use it until it breaks? … Maybe, because there are no more software updates, either. And they will not support any used transfers, so if you have an iTero, it’s now worthless on the secondary market.

I have heard some about S-Ray and its new ultrasonic scanner. From what I found out it will be under $10,000 and without any big fees. I assume that since it is ultrasonic in nature, water/blood won’t matter? If that is so, then it sounds perfect. What has anyone else heard about this? ■

OCT 28 2015

aldenes
Member Since: 02/02/04
Post: 26 of 43

I have a question. I am interested in purchasing an older cart model (in new condition) such as yours. What is the yearly fee for the scan? I just need it to export the .stl file. Do you have to pay a monthly fee to do that? It’s kind of like having to pay a fee to send emails or watch YouTube, after you have already spent money to buy a computer. ■

OCT 28 2015

acbdds
Member Since: 08/26/13
Post: 31 of 43

3Shape is giving $5,000 trade-in credit for iTero till the end of the year. I got my TRIOS 3 from Biodenta in Gaithersburg, Maryland. ■

DEC 10 2015

I have three locations and have the 3M True Definition scanners in each office. At the time I got a screaming deal since the wand was getting upgraded soon, and we got a few. Paid less than $10k per scanner; $350 per month for data on the first one and $199 for the others. Full features that include Invisalign scans, implant scans, .stl export and easy transfer to labs via the connection center.

TRIOS is great, but pricey IMHO. The autoclaveable tip is said to have a lifespan of 10 cycles and cost $300, BTW.

I have demoed all the scanners and used CEREC, PlanScan, but love my 3M. I do a lot of zirconia so I don’t get too jazzed about making all my crowns. And when I send a digital file to Albensi Lab in Pennsylvania it can come back in 72 hours for $85 for the crown and it’s perfect, with great anatomy.

Just my 2 cents. ■

DEC 14 2015

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We got the latest 3Shape TRIOS (third-generation) in July. We did two days of training with Biodenta and switched, cold turkey. I only treat TMD/sleep so it’s been full-arch scans for appliances. We got the pod and got a cart from Schein to put it on.

We are down to about 3–3.5 minutes per arch; sometimes 2 minutes. The anterior teeth can be tough at times. I have only had to revert to alginites for edentulous cases, multiple missing teeth and very mesially tipped teeth into an edentulous space.

My staff loves it as it saves them from pouring 100+ models a month. When you factor in pouring and trimming time it does save some there, but truly, patients love it.

I was told a new software version is coming out in the next few months that increases speed even more—“insane/Tesla mode,” they say.

Overall very happy with 3Shape TRIOS, and Biodenta Customer Support is awesome. Ask for Will or Misha to train you.

We purchased the TRIOS from Biolase. The warranty is one year and you can get an additional warranty for two years. After three years we lost all warranty protection. They will not warrant the TRIOS after the three years.

The yearly cost is $3,500 for TRIOS.

We are on a list to upgrade to the “fast” software. There does not seem to be a charge for the new software. We have been waiting six months or so for the upgrade.

The new wand is a lot smaller and with the new software will be much better. But if an existing user like myself wants to upgrade, they give you $5,000 credit and charge the $35,000 again. We hope to upgrade the software only and keep the older wand. The wand does have two fairly large cracks on the side. Since I am out of warranty they will not help in any way.

Scanning, in my hands, does take considerably longer, time-wise, than taking an impression. I would guess that on average we spend an additional 10 minutes scanning. There is waiting time while the scan is trimmed and made ready to take the bite.

I just wanted to give everyone some things to think about. Good luck.

We have four of them, the TRIOS 3 cameras. They sure are nice. They are fast, but not near as fast as the marketing videos show. Full arch, about two minutes. PlanScan is about as fast at little over two minutes. Omnicam is just under two minutes, in my hands. Have about 100 cases so far with the TRIOS 3. They have all been slam-dunks.

I tried the new TRIOS 3D unit this past Friday. I am very impressed. Acquisition is fast and the user interface is fairly simple and intuitive. When the case comes back I will provide more definitive feedback. I am seriously considering purchasing this product.