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SOLUTIONS
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CEREC in the Modern Practice

CEREC Integration Guide

Powered by International CEREC Mentors

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CEREC integration guide – powered by International CEREC mentors

Many dentists wonder whether, and specifically how, they can successfully integrate CEREC into their own practice. How will this change my practice procedures? What exactly will I need in order to use CEREC? Which organizational aspects do I need to consider? For some practices, all of these aspects combined represent uncharted territory, and it might feel too risky.

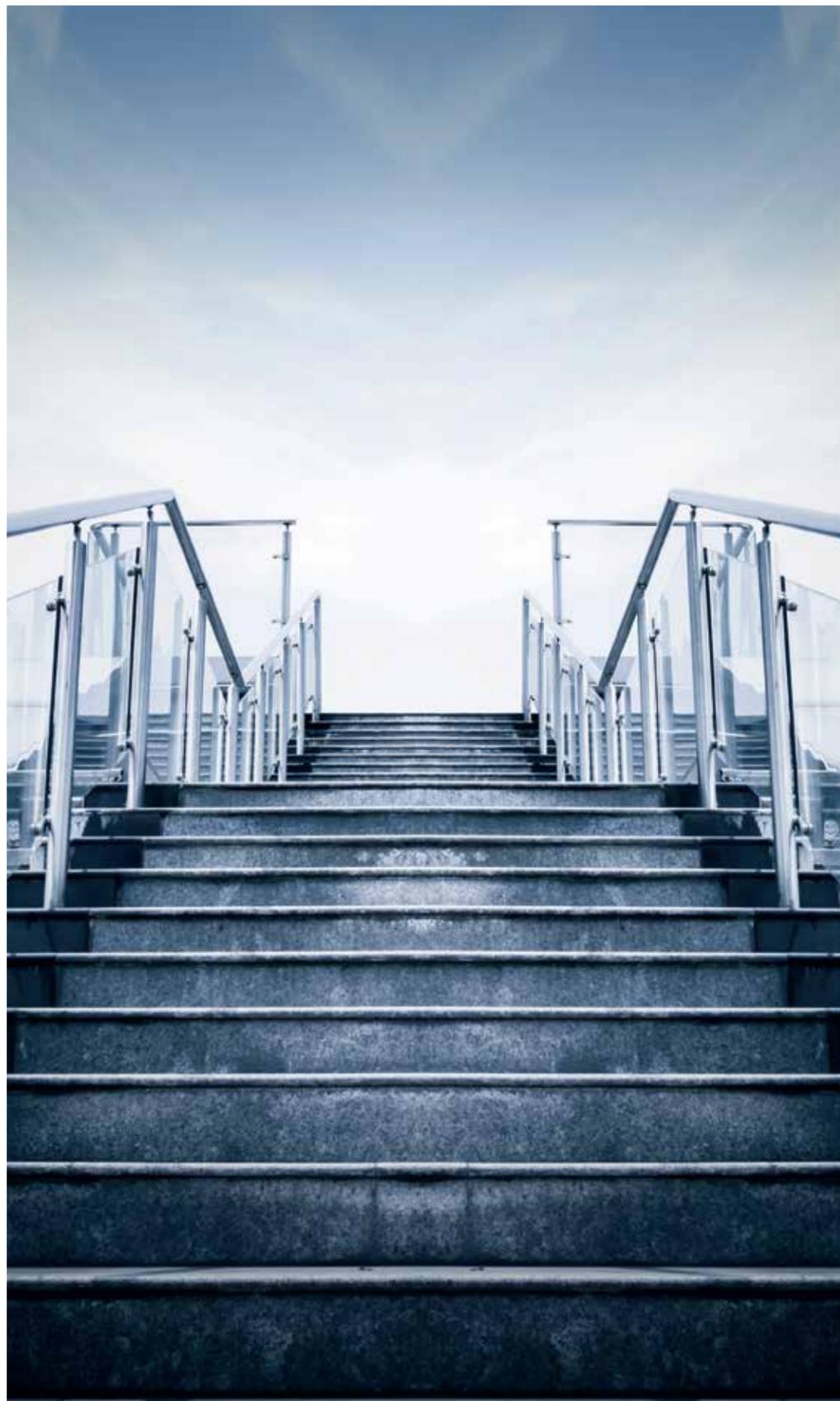
If you make the transition one step at a time rather than all at once, it may be much easier than you thought.

Our integration guide provides illustrations of these steps that are easy to follow—from installing the device in your practice to planning for long-term financial success with CEREC.

This guide is based on the combined experience of International CEREC users who have already served as “CEREC mentors” for several years. It is designed to assist newcomers to quickly and seamlessly integrate CEREC into their practice procedures.

This guide is intended to show you not only WHAT you can do to successfully integrate CEREC into your practice, but more importantly HOW to accomplish this. Therefore, this guide will first address some theoretical aspects to give you a basic understanding of important features. Then we will give you some hands-on tools, such as different checklists, that will help you implement what you’ve learned in your practice right away.

The following overview outlines what exactly to expect as you successfully integrate your CEREC system, as well as how to master each of these points. The following pages will outline how to master each of these points.



All the information and tools presented in this guide have been compiled and are easily accessible at my.cerec.com. They are easy to download with just a few clicks.

Achieve success in just 4 steps

Step 1:

How to become a CEREC expert in no time at all



Understanding and internalizing the process



Attending courses and advanced training



Mastering the tools



Understanding the materials

Step 2:

How to get your practice CEREC ready



Training your practice team



Scheduling



Business and Practice Management



Patient Marketing

Step 3:

How to make your first patient procedure a complete success



Personal tips from users



Treatment protocol



Guide for assistants

Step 4:

How to secure and expand your success with CEREC long-term



Integration flowchart



Clinical possibilities



Cleaning and maintenance

How CEREC will become an integral part of your practice procedures

Due to their tight schedules, colleagues sometimes hesitate to integrate CEREC into their practice because they fear that they won't be able to accommodate longer appointments. However, they often overlook the fact that not all steps require the dentist to be present, and many tasks during a CEREC session can be performed by assistants. This means that preventive care, patient consultations or short procedures can be provided simultaneously. Generally, it is not necessary to completely change your usual practice procedures; you can still delegate the same tasks as before, especially during pre- and post-procedure and impressions.

Fitting a patient with a CEREC posterior tooth crown typically takes less time than the two sessions required for a conventionally manufactured lab crown, and it is more economical for the practice.

If you already have established procedures with all-ceramic restorations in your practice, integrating CEREC into your current practice procedures will be quite easy. In that case, only the scan and manufacture of the restoration will be new to you, and the need for a temporary restoration and second appointment will be eliminated. Of course, you can also create CEREC restorations over several sessions—just like lab restorations—and integrate CEREC into your practice procedures this way. Many practices have successfully established this option in their procedures, and have seen financial benefit as a result (for more information, see pgs. 9-11).



What does a typical CEREC session look like?



Example: Claudia Scholz

Which tasks can be legally delegated to practice assistants?



Please check your local regulations. E.g.: In Germany, a dentist may delegate certain tasks to practice assistants if they are sufficiently qualified. However, practice assistants may only work on a patient under a dentist's supervision or direction. Tasks that may be delegated include intraoral anatomic impressions as well as the selection of impression spoons, material preparation and material processing.

If these conditions (§ 1 sec. 5 and 6) are met, there is no reason not to delegate conventional molding of anatomic impressions and comparable tasks, especially considering the dentist regularly verifies and supervises the qualifications of the specific assistant and performs a final inspection.

Delegate heavily or do everything yourself – This is what other mentors do:

Ariane Schmidt, DDS:

"I actually only started delegating 1-2 years ago. But that is mainly because I really enjoy doing all the work. My trained assistants can perform the scan on their own, but I prefer to scan the preparation myself, especially a stump. Since there is no negative and the digital scan can be enlarged with the software, it is easier for us to check the scan for correctness."

Hermann Loos:

"I scan and construct myself; this allows me to explain to patients what the next steps are and they can watch the manufacture. Most patients are very interested. This also creates trust and highlights the dentist's competence. Of course, as a fringe benefit, you really get to know the system."

Step 1: How to become a CEREC expert in no time at all

To achieve long-term success with your CEREC system, education and practice is essential, especially in the beginning. Being well prepared for the treatment of your patients requires experience. This can be acquired through appropriate training, practicing with the instruments and, last but not least, through support by experienced mentors, who we will introduce to you below.

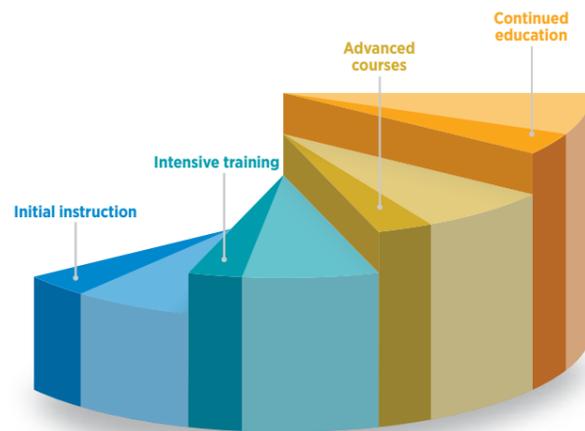
CEREC intensive training – The foundation for your success with CEREC

An intensive training program is the cornerstone of your work with the CEREC system. Upon completion of this hands-on course, you will be able to use the options the CEREC system provides and integrate them into your daily work. We recommend registering for your locally available training as soon as you have your installation date or, at the latest, once the system has been installed in your office.

If you have any doubts about whether you really need this course, ask yourself: Is your experience with CEREC sufficient to successfully perform treatments by yourself, without any guidance? Even if you have worked with CEREC during a product demonstration or at a CEREC training, by the time the equipment arrives at your practice, some time has likely passed, and you may already be starting to forget some things.

Performing successful CEREC treatments requires that you know which materials should be used and how, as well as the rules concerning their preparation. You must also be able to run the device and software. Speed and quality are important because CEREC is high tech, and the materials are too. The training addresses clinical questions, questions about bonding and finalization, as well as organizational issues. The training groups are small in size so everything can be discussed openly. Even if some things are quite intuitive, collaborating with experienced colleagues will give you the knowledge and confidence necessary to treat your patients.

If you are interested in learning more about digital dentistry and exchange with the international community:



General topics covered in the trainings:

- The CEREC workflow
- CEREC Software tools
- Live patient treatment (may vary by country)
- Clinical aspects of the CEREC treatments
- Material sciences
- Financial and billing questions



Bernhild-Elke Stannitz, DDS:

"Before you perform your first patient treatment, make sure you have attended an intensive training in order to operate the instruments confidently."

Gain expertise through practice

Scanning

In addition to the cheek retractor, it may be necessary to apply dry angles to optimally retract the cheek, including the back. Familiarize yourself with the scanner, for example by scanning a model's or your assistants' dental condition. Tutorials are available at my.cerec.com. Becoming familiar with cheek retractors such as Optragate will make scanning much easier. Also be sure to try different scanning positions to find which is most ergonomic for you.

Using the software

The CEREC software offers a tremendous number of possibilities. However, it is best to initially focus on the basics and develop a routine as you build proficiency. This means that you should follow the bio-generated recommendations. The free software tutorials at my.cerec.com offer great support.

How to operate CEREC Primemill and CEREC SpeedFire

When operating the CEREC Primemill and CEREC SpeedFire, it is helpful to include your assistants right from the start. For example, assistants should be involved in tasks such as regularly changing the water, blocks and instruments, as well as cleaning the devices. See my.cerec.com for detailed instructions.

Information on materials and their correct processing

The standard reference work for all-ceramic restorations, "All-Ceramic at a Glance" (Vollkeramik auf einen Blick), published by AG Keramik, offers guidance on indication, material selection, preparation and integration of all-ceramic restorations. Make sure to spend some time practicing.

For qualified support regarding material processing, contact your CEREC specialist or materials consultant, experienced colleagues, or your trainer.

Achieving clinical excellence

Use your preferred gingival retraction method, as needed, on a case by case basis. Additionally, the CEREC SW provides a very useful tool for you to analyze the quality of your dental preparation. This should lead to a better initial proposal and first fit.

Instructions on correct preparation and soft tissue management, as well as the adhesive bonding of CEREC restorations can also be found in various articles published on Pubmed.gov



Be sure to familiarize yourself with the Connect SW, which is pre-installed on your CEREC Primescan AC. For indications that you do not want to complete yourself, you can send the digital impression directly via Connect Case Center to a lab of your choice.



Key word suggestions for searching PubMed:

- CEREC Dental Preparation, CEREC Adhesive Bonding, and CEREC Scanning Accuracy



Having the right tools is imperative to achieve optimum work results. Listed below are some Dentsply Sirona products that are very helpful for the preparation and facilitation of a beautifully finished restoration, as well as soft tissue management.

Straight and contra-angle handpieces recommended for CEREC Users

Three preferred options for you to choose from, all of which are top-quality products:

- T1 Line EVA 04 L / 11 L – For micropreparations
- T2 Line A 200 L – For standard preparations
- T3 Line E 40 – For standard preparations



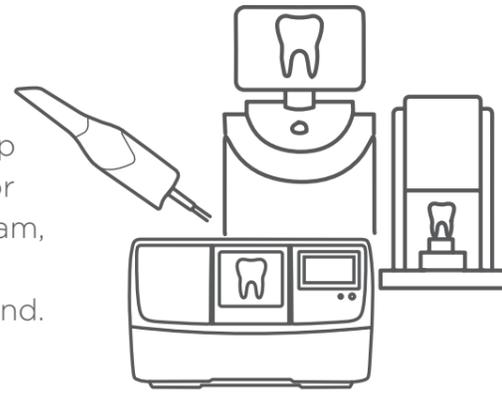
SiroLaser Advanced Plus

Sulcus widening and/or hemostasis as preparation for impression taking.



Step 2: How to get your practice CEREC ready

The key is to find the best way to organize and setup your practice for CEREC. See the following pages for how best to proceed when training your practice team, patient scheduling, practice management, ordering materials, patient marketing, and what to keep in mind.



Training your dental assistants and your practice team

Ensuring that everyone is included in this change process makes the practice integration much easier. When everyone feels involved from the beginning, they will share in your enthusiasm. As you already learned on pages 4 and 5, after your assistants completed a quick training, there are several tasks during the CEREC treatment that they can easily perform. This will help to create a more efficient schedule and reduce doctor's chair time where needed.

Make them experience CEREC

The earlier you can get your staff involved, the happier and more committed they will be. If possible, also make them part of the decision making process and encourage them to try it out themselves before it arrives. They will be excited and looking forward to welcome the new team member, the CEREC System.

Previous CEREC newcomers told us that having their assistants and other staff receive treatments or at least scans, helped tremendously in giving them a better understanding of the process. It also gave them more confidence to talk with patients about it.

When your team is able to competently and credibly talk about the advantages of the digital impression, a complete treatment in one session, and point out that there is no need for temporary crowns, they may actually be the ones to convince the patients.

Some staff members may be hesitant to change and adapt to the new technology, which is normal, so give them time and encourage them to learn and practice.



And most importantly: Get ready to experience much better teamwork and a lot of fun in the office.

Dedicate time for training

It's important to arrange a CEREC training program so your team receives sound knowledge right from the start, enhancing patient comfort and improving practice efficiency.

Start educating your team about CEREC before implementing the technology, and then move towards specific trainings, such as material sciences, which will eventually allow you to delegate parts of the material processing as well.

Scheduling

When integrating CEREC into your practice, one of the most important decisions you will face is whether or not you want to treat your patients in a single session. After all, one visit treatment is not mandatory with CEREC, regardless of the many advantages this provides, such as applying anesthesia only once. The digital impression and insertion of the finished restoration can still be

spread out over two sessions, and CEREC can be integrated into your practice procedure in this way. The following pages provide an overview of how CEREC treatments can be scheduled for different indications and with varying degrees of delegation.

Time your scheduling

Give yourself and your team enough time to become thoroughly acquainted with CEREC and all the procedures and to become very familiar with the materials and instruments before scheduling your first patients. Attending a training program will help you to reach this point faster. You can perform one or two

simple treatments on team or family members after sufficient practice on the model. Then you can schedule "regular" patients and treat them professionally and confidently. Page 16 of this guide will provide some mentor tips for your first treatment.

Scheduling for inlays, onlays, and partial crowns

Time management for inlays, onlays, and partial crowns (i.e. made of feldspar ceramic) is very simple: Schedule an approx. 1-hour chairside treatment, which means 2 or 3 time slots, depending on your schedule pacing. Since these treatments are generally quite lucrative, you can afford to spend the whole time with your patient. If you

invest the 10 minutes it takes CEREC to precisely mill an all-ceramic restoration in a conversation with your patient, you will lay the foundation for one or more referrals to your practice, or you can go over the next treatment steps.

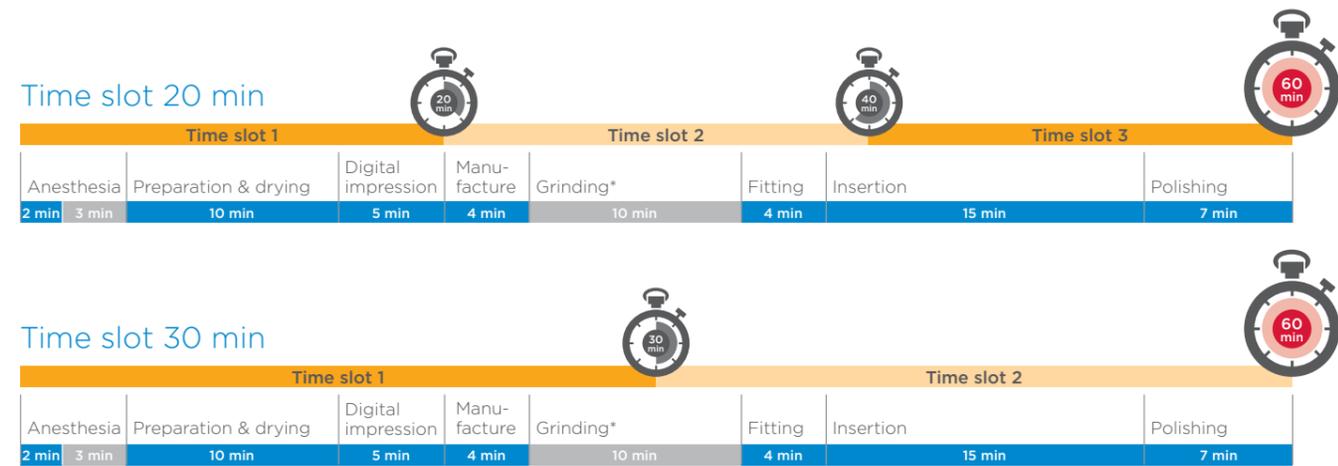


Fig. 1: Time diagram for inlays, onlays or partial crowns made of feldspar ceramics

■ Dentist time ■ Assistant time

As the time diagram shows, you can easily integrate CEREC into your treatment schedule, even if you don't want to work with just one visit. Anesthesia, preparation and digital impressions fit easily into a 20-minute time slot, just like fitting and insertion during the second session.

Crowns made of hybrid ceramics that do not require sintering, crystallization, or glaze firing can simply be polished or may be painted and/or glazed.

Polish only: The time diagram for inlays, onlays, and partial crowns applies

Paint and/or glaze: See next page

* It does not refer to the extra-fine or Super Fast mode.

Scheduling for crowns

All-ceramic crowns need to be fired, depending on the material, to reach the desired durability and require a slight modification in time management.

Duration of the individual firing procedures:	Sintering (for zirconium oxide) 15-20 minutes**	Crystallization & glazing (for glass ceramics*) 25-30 minutes**	Glazing (opt. for all materials) 10-15 minutes**	Cooling (for all restorations) 10-15 minutes**
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 **Dentist time = approx. 40 minutes**

Scenario 1: CEREC crown in a single visit, with maximum delegation

If you delegate all tasks that do not require the dentist to perform them, you will need approx. 40 min (in blue), your assistant will need a little over an hour (in gray). The patient will spend a maximum of 2 hours in your practice.

Regardless of how long your time slots are, you will need 2 treatment slots: one for the preparation and one for the insertion of the crown.

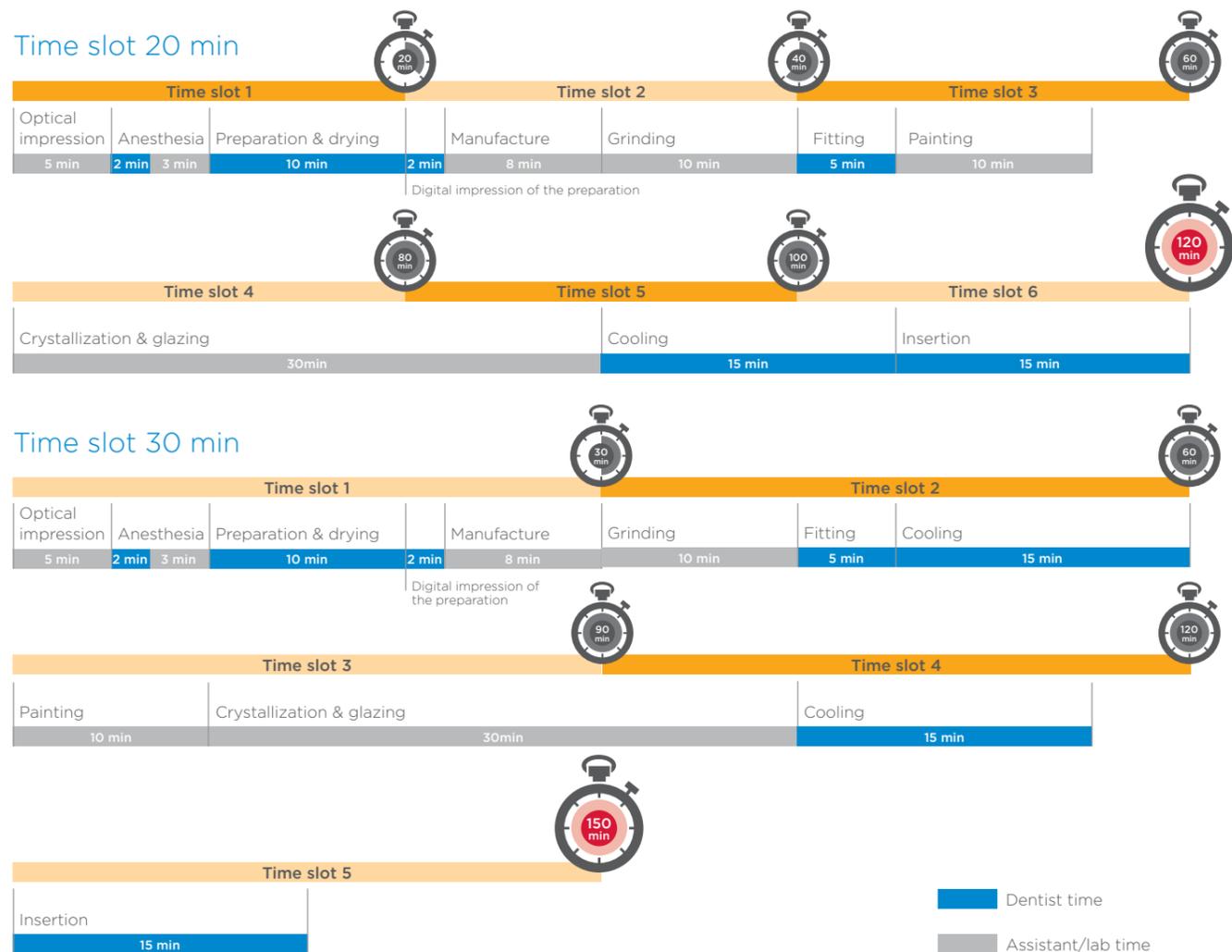


Fig. 2: CEREC chairside crown made of lithium disilicate, with maximum delegation

If your practice has a laboratory, you will typically delegate the digital impression to your assistant, and all further manufacturing processes to the dental

technician in your lab. This setup also works if you don't want to work chairside and the patient is treated over two sessions.

* Consult the material manufacturer's instructions for use to determine whether or not a certain material needs crystallization firing.
** Processing times vary depending on the furnace used, restoration design, material, and, in the case of zirconium oxide, wet or dry manufacture.

Scenario 2: CEREC crown in a single visit, no delegation

Many dentists who are already working with CEREC prefer to perform more steps themselves, for various reasons. This can also be achieved without any principal changes to the scheduling structure.

 **Dentist time = approx. 65 minutes**



Fig. 3: CEREC chairside crown made of lithium disilicate, no delegation

The time diagrams on these two pages refer to lithium disilicate crowns, but they can also be used as a basic guide for zirconium oxide crowns (e.g. CEREC Zirconia).

- > **Sintering + painting + glazing = 120 minutes** for the complete process
- > **Sintering + polishing = 90 minutes** for the complete process

Follow-ups

A follow-up appointment should be scheduled within 10 days of a CEREC treatment. During this visit, occlusion/articulation is checked and corrected, if needed, and the corrected areas are subsequently polished. You will also be able to recheck for remaining excess cement. During this session patients should have an opportunity to voice their positive feedback about the treatment they received. After all, patients remember their own words best.

Scheduling in shared practices

In this case, communication and coordination among the practice team are essential! It is important that all parties are aware of the length of time that each task will take so they can estimate who will be using which device for how long. Depending on your scheduling system, it may be helpful to reserve CEREC devices the same way that office space is scheduled, and to mark CEREC appointments in different colors for each treatment provider for easier tracking.

Business and Practice Management

Reviewing all the business and practice management aspects is a very important consideration when introducing CEREC. Below you will find the most important topics to be analyzed:



Pay attention to local regulations for billing and insurance issues

1. Schedule a conversation with your tax advisor

It is important that your tax advisor is aware that you will have a shift in the amount spent for Lab services and income received. Taxes and deduction rules might vary depending on local regulations.

2. Possibility to set up your own lab

After purchasing CEREC, some users choose to establish their own lab, either because in some countries it's a legal requirement (e.g. Germany) or due to a new business model they want to implement. This topic should also be discussed with your tax advisor. Consult other CEREC users for advice.

3. Account setup with your dealer

If you open your own lab, it might make sense to establish a second subaccount for the lab at the dental depot, allowing you to separate general practice supplies and lab supplies for accounting purposes.

4. Insurance issues

Depending on the country, some dental insurance providers may cover a portion of or the total cost of a CEREC crown. Insurance coverage may vary depending on materials used and whether the treatment is due to medical versus aesthetic reasons.



Flexibility in how to charge the patient

CEREC users must consider different factors when determining the cost of a CEREC crown, such as the number of crowns to be made, the complexity of the situation, how much work needs to be performed, materials used, and the financial situation of the patient. The benefit for you? You determine the price according to each case.



Opportunities to grow or expand your business

Adding CEREC to your practice opens new opportunities. It's possible to offer additional services and indications that go beyond restorative work, including Orthodontics, Implantology and Endodontics. Once CEREC is fully integrated in your practice, the resulting increase in productivity will allow you to expand or even modify your business model, providing new opportunities you may not have even considered. Start planning what you would like to achieve and what kind of services you would like to offer.



Increase your cash flow

The Single-Visit Dentistry approach saves time from additional visits and thus allows you to spend more time with each patient. This will lead to increased productivity and cash flow.

Patient Marketing and Education

Incorporating CEREC in your practice marketing can be game-changer and turn your patients into enthusiastic advocates. Make sure to promote it on your website and social media accounts. Today, more and more patients look up health-related information online.

When receiving CEREC in the practice

Start building awareness and communicating the advantages of CEREC to your existing patient base, letting them know this new technology is available for them. Explain what CEREC and single visit dentistry is and consider the following actions:

- Integrate CEREC services into your practice website
- Send out an email newsletter to all patients introducing CEREC
- Have CEREC print materials (posters, flyers, brochures, etc.) in the waiting room and entrance
- Create conversations about it on social media
- Share stories of satisfied patients, as well as before and after cases (if local regulations allow)



You can recruit a marketing agency for support, or you can make use of the many patient marketing materials that Dentsply Sirona has to offer at my.cerec.com. You can find a promotional video for patients, a presentation for the screen in your waiting room, as well as posters, flyers, and appointment cards.



During the consultation

Make sure all staff can explain and share excitement when the patient is having their first CEREC appointment.

Carefully explain all the steps. Patients can recognize the advanced technology that's being used in their treatment, and experience has shown that they feel totally thrilled:

- The 3D visualization of the intraoral situation is very impressive and an important part of patient understanding of a procedure. Case acceptance increases with patient understanding.
- They also love to watch the restoration being milled and frequently take pictures to share with family and friends.

A well-educated patient will lead the practice to a higher case acceptance and greater patient satisfaction.

Example: Claudia Scholz

Ordering materials and supplies

Make sure you order your materials needed for your CEREC treatment. We have prepared a checklist so you can provide everything needed to facilitate the procedure.



Checklist:

Which resources are needed for the CEREC treatment?

- Blocks that are large enough for all indications (sizes 12 to 14) in standard colors (A1-A3)
- Optional cheek retractor (e.g. Optragate)
- Saliva absorber (e.g. Drytips)
- Shade guide to determine the right color
- Suitable polishing instruments (e.g. from Melsing)
- Grinders (see grinding tables at dentsplysirona.com/CERECintegrieren)
- Disinfectant for the scanner (for recommended products and detailed instructions, see dentsplysirona.com/CERECintegrieren under Hygiene)
- Fixation system (for product recommendations, see instructions for the material used)
- Hemostatic agent (e.g. ExpasyI®)
- Tools for retraction (e.g. retraction thread)



"Preparation" tray



"Insertion" tray

A detailed list of tools needed for preparation and insertion is available under "Guide for CEREC Assistants" on page 17 of this guide.

To ensure that you always have sufficient blocks in your practice, we recommend that, for each material, you have one open package and one additional backup package in your supply cabinet. Once the open package

is used up and the backup from the supply cabinet has been opened, you should immediately add this item to your order list to replenish your supply. This method ensures sufficient supply, with minimal inventory.

Step 3: How to ensure your first treatment with CEREC will be a success



Select your first patient carefully

Preferably a patient you know well. Definitely not a phobic patient.



Start out with a posterior tooth crown

These are the easiest to scan and to manufacture.



Schedule sufficient time
Preferably at least 2 hours.



Choose an appointment slot towards the end of your schedule

If you don't have to be mindful of the next appointment, you will feel less pressured.

Personal tips from CEREC mentors



Daniel Vasquez, DDS

- As soon as you sign the contract for acquiring your CEREC System invest some time into training.
- Select a first molar to be your first crown.
- Be excited because your life is going to change, welcome to the family, and happy CERECing.



Carlos Repullo, DDS

- Select a straightforward case for your first CEREC restoration.
- The key to success is a good preparation. Take your time at this point to make the workflow much easier.
- Explore all the possibilities of CEREC, there is much to enjoy.



Leandro Passos, DDS

- Review the dental preparation needs that will be most suitable for the selected restorative material, in addition to the patient's periodontal health.
- Ensure that the images are free of artifacts or interference, the extent of arch scanning and occlusion are sufficient, and that the preparations are precise and defined.
- If possible, select cases that only require polishing, without the glaze. Thus, it will be one less step to control until you feel confident to evolve to other processes.



Hermann Loos, DDS

- Initial nervousness is normal, but nothing is worse than visible insecurity and bad preparation in front of the patient. Therefore, build up confidence by going through the case with a demo model ahead of time, schedule enough time and carefully prepare the work space.
- Decide ahead of time how you can inform your patient about the procedure in a simple and comprehensible way.



Stefan-Dan Reiz, DDS

- Choose a patient with a higher stress tolerance, not an anxious patient or someone who is in a hurry/under time pressure.
- To decrease performance pressure, you can inform the patient as if this were a standard procedure, running over several sessions. If it turns out that the procedure is then completed chairside within one session, the patient will be even more excited, but not disappointed if it does take several sessions.



Klaus Wiedhahn, DDS

- Select your first 2-3 patients very carefully.
- Experience shows that the first 3 treatments are quite stressful; there is a steep learning curve in the first 10 procedures, and after 30 "CERECs" it gets pretty relaxed.
- During the initial phase, please stay away from bridges, anterior teeth treatments, individual abutments or inlays/onlays on endodontically restored teeth.

Protocol of the CEREC treatment

Step by step towards success. Use this checklist to ensure that things will go smoothly during your first treatment. Your steps are marked in dark gray, assistant tasks are marked in light gray.

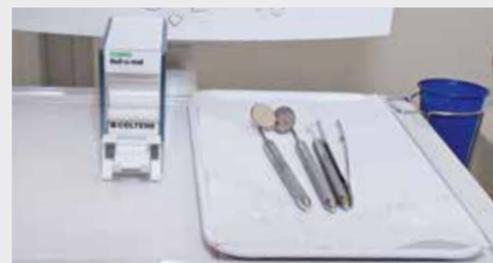
✓	Task
<input type="checkbox"/>	Turn on the CEREC device
<input type="checkbox"/>	Set up the "Preparation" tray
<input type="checkbox"/>	Set up the CEREC device (open the CEREC software, open/set up patient profile)
<input type="checkbox"/>	Check static occlusion with red paper
<input type="checkbox"/>	Scan the maxillary and mandibular quadrants/bite
<input type="checkbox"/>	Anesthesia
<input type="checkbox"/>	Preparation
<input type="checkbox"/>	Gingiva management (retraction with thread or astringent paste; if needed, a hemostatic agent, such as Expasyl®)
<input type="checkbox"/>	In case of using CEREC Omnicam, cut out the prepared tooth from the scan
<input type="checkbox"/>	Postscanning of the preparation
<input type="checkbox"/>	Manufacture of the restoration
<input type="checkbox"/>	Shade selection
<input type="checkbox"/>	Mounting the block
<input type="checkbox"/>	Prepare "Insertion" tray
<input type="checkbox"/>	Test the restoration
<input type="checkbox"/>	Polish (proximal)
<input type="checkbox"/>	Depending on the material, mounting and preparation of the ceramic part (etching, silanating)
<input type="checkbox"/>	Tooth preparation (cleaning, etching, bonding)
<input type="checkbox"/>	Keep tooth dry
<input type="checkbox"/>	Insert
<input type="checkbox"/>	Preliminary cleaning
<input type="checkbox"/>	Press into final position and keep pressing
<input type="checkbox"/>	Dental floss and final cleaning
<input type="checkbox"/>	Remove thread, if applicable
<input type="checkbox"/>	Harden
<input type="checkbox"/>	Remove rubber dam if present
<input type="checkbox"/>	Remove excess with the scalpel
<input type="checkbox"/>	Occlusion check
<input type="checkbox"/>	Adjustments
<input type="checkbox"/>	Polish
<input type="checkbox"/>	Fluoridate
<input type="checkbox"/>	Save CEREC patient case
<input type="checkbox"/>	Clean up room (remove instruments, clean/disinfect CEREC)

Guide for CEREC Assistants

The perfect support during CEREC treatments

"Preparation" tray

- Basic instruments (2x mirrors, probe, tweezers)
- 2x Aplitip
- Occlusion paper, red
- DryTips or cotton rolls
- Anesthesia
- Heidemann spatula
- Hemostatic agent (e.g. Expasyl) and tool for retraction, if needed (e.g. retraction thread)
- **Optional:** Retractor, matrix to protect neighboring teeth



"Insertion" tray

- Basic instruments (2x mirrors, probe, tweezers)
- Ball plunger
- Scalpel Fig. 12 or scaler
- Dental floss
- Cotton rolls and DryTips or rubber dam and accessories
- Occlusion paper red and blue
- Foam pellets
- Shimstock
- Bonding system
- Finishing instruments and polisher
- **Optional:** Teflon tape to protect neighboring teeth, Optragate, hemostatic agents, phosphoric acid gel



Room preparation

- Set up "Preparation" tray (see illustration on left)
- Prepare preparation set (drill, contra-angle, sonoabrasive instruments, if needed) and suction tool, large/small
- Turn on CEREC, open the program, open/set up patient file, also in the practice software

Patient preparation

- Check treatment plan and cost estimate
- Seating/drape
- X-ray check, if needed
- Check static occlusion with red paper
- Scan the maxillary and mandibular quadrants/bite

Assisting with the preparation

Grinding/resetting the room

- With CEREC Primemill the milling unit can be set-up while the dentist is working on the patient, which saves much time
- Prepare "Insertion" tray (see illustration on left)
- After grinding, remove the restoration from the grinder

Assisting with the insertion

Clean/disinfect the room

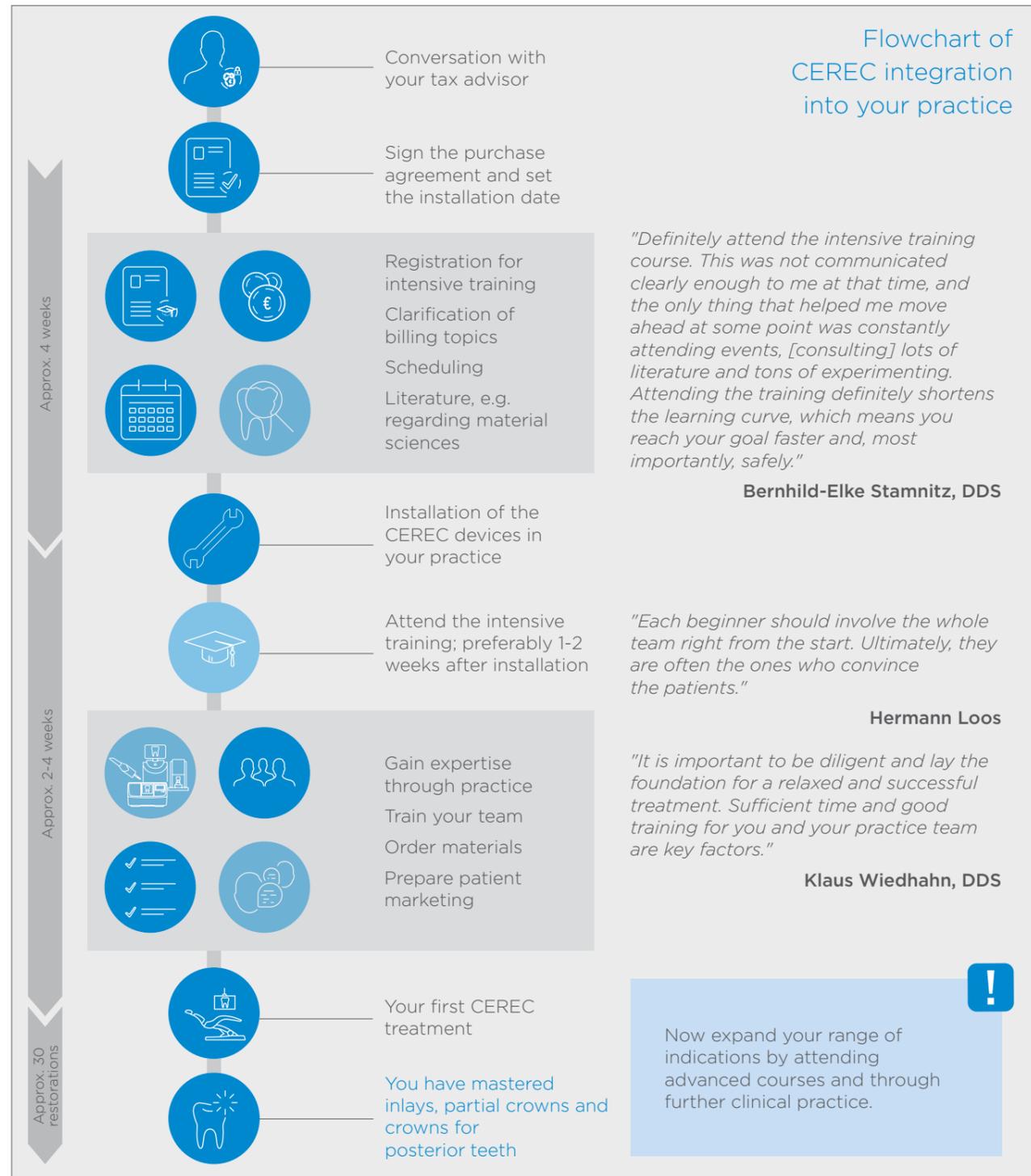
- Remove instruments
- Save CEREC patient case
- Disinfect scanner and surfaces with wipes
 - Alpro: MinutenSpray Classic, MinutenWipes, PlastiSept, PlastiSept-Wipes
 - Merz: Pursept-A
 - Dürr: FD 312

Step 4: How you can secure and expand your success with CEREC long-term

The fun with CEREC really starts when you can use it intensively for a wide range of indications. We highly recommend you to immerse yourself in intensive trainings and exchange experiences with your peers within the international CEREC users community.

How long will it take before I can use CEREC for the most common restorations?

Before going through the clinical possibilities, we want to give an overview of when you should start working on any of the specific tasks that were covered in the previous sections. Non-mandatory tasks are presented more transparently.



Clinical possibilities with CEREC

The best way to gain a high level of clinical competence is to develop your skills step by step and increase confidence through every case. This will lead you to better understand what makes the CEREC process predictable and efficient, as well what is needed to achieve the ultimate level of clinical success in the following aspects:

- 1) Long term performance of CEREC Restoration
- 2) Precision - Both imaging capture and milling
- 3) Margin quality
- 4) Precise occlusal design
- 5) Aesthetics

CEREC clinical journey

Key knowledge required

CEREC posterior restorations (inlays, onlays, crowns or bridges up to 3 elements)	Software tools, scanning and preparations, tooth anatomy, basic knowledge in materials and finalization	Get started
CEREC implant restorations (temporary, permanent, abutments, restorations)	Implant-specific SW tools, occlusion, tissue contours, clinical applications	Enhance in-office possibilities - more productivity
CEREC anterior restorations (veneers, crowns, bridges, Maryland bridges)	Deep on SW parameters, smile design, virtual wax-up, virtual articulator, prep for anteriors, advanced on materials and finalization	Go further in realizing full potential of CEREC
Full arch applications (splints, aligners, sleep appliances)	3D printer possibilities or outsourced partners	Additional Services
Advanced Chairside (large rehabilitations, integrated implantology)	inLab SW, other 3rd party SWs, different file formats, advanced design tools, surgical planning, surgical guide workflow	"Addicted" to delivering excellence and high technology to the patient

Cleaning, maintenance and updates – To extend the life of your products and continuously optimize your devices

Cleaning and maintenance

Certain tasks to clean, maintain and disinfect your devices as outlined by hygiene regulations need to be performed after each session or periodically. We recommend training a specific assistant who will diligently take care of these tasks.

Some maintenance tasks, such as filter changes, color calibration or instrument change, are displayed by the device; for other tasks, it is helpful to establish a quality management schedule for your CEREC system.

To support you, more information can be found at my.cerec.com:

• Videos and illustrated PDF instructions

Our short videos and PDF instructions explain clearly how to correctly perform regular tasks, such as disinfecting the scanner or mounting the block in the grinding unit. All videos and instructions are available for easy download, making them an ideal training tool for your practice assistants.

Comprehensive Hygiene Concept

With our versatile hygiene options, you can count on optimal infection control at all times, both with the intraoral scanner as well as with the Acquisition Center.

- 3 different sleeves for all hygienic needs
- The Acquisition Center is a medical device approved for use in patient vicinity and is very easy to clean
- Fully closed scanning window prevents fluid infiltration during the scanning process

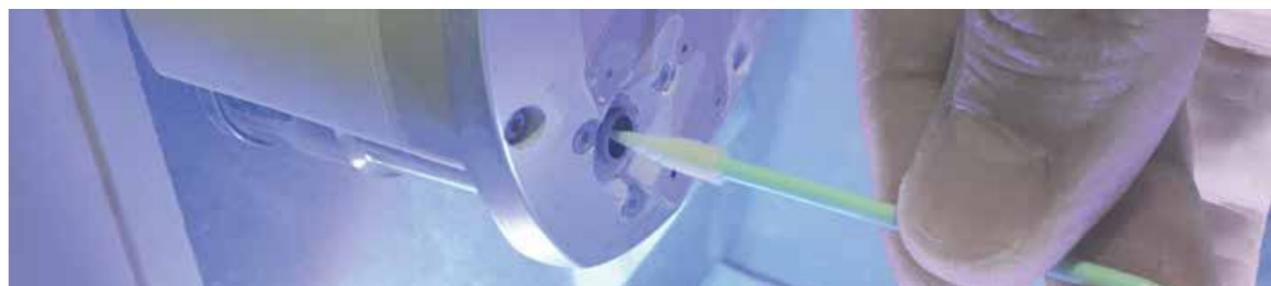
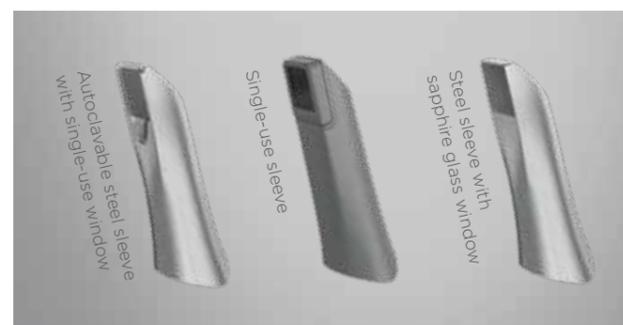
Software updates and new software versions

The latest CEREC software is optimized by new updates and expanded with new materials several times a year. These updates are free and can either be initiated as auto updates from a pop-up that is automatically displayed on your CEREC AC, or they can be downloaded from the CEREC user website at my.cerec.com.

New software versions are available for an additional fee. These are different from software updates in that new functions are added to the software, and they are generally released on an annual basis. However, they are included in the CEREC club membership services.



Installing software updates and new software versions during working hours is generally not recommended. Plan to set time aside for this when the practice is closed.



Additional ways to be committed to your success

Having a CEREC system is a unique experience you deserve to enjoy. Have a look at the additional tools and channels we have made available to support you during your successful journey:

The CEREC club keeps you up to date in the long run:

- Softwares upgrades
- Extended parts warranty
- Possibility to be renewed (3 + 3 years)
- Optional products can be added as required for a discounted price

Join within 30 days of your purchase and benefit from investment security, guaranteed innovation, and top value for your money.



my.CEREC.com
for additional information

Our my.cerec.com portal is where you can find all the tips, downloads, and useful information for CEREC users. We have bundled our complete range of support tools there, so you can enjoy all the benefits with just a few clicks.

We are always available by telephone, as well

As soon as you complete the purchase of the system, consult with your sales representative to compile a list of useful phone numbers that can support you during the integration process. We also have an international number available in the event you need technical or application support:

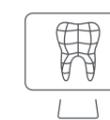
+49 / 6251 / 1616 70



Technical support

You will meet Dentsply Sirona technicians who are specially trained in:

- Support initial operation
- Problem analysis hardware
- Problem analysis software
- Network/IT support
- Spare parts recommendation



Application support

Highly qualified Dentsply Sirona employees will give you instructions and guide you step by step through the software to resolve your issue.

- Questions about device/software application
- Tips for optimal use
- Remote support/training
- Dentsply Sirona material application
- Workflow explanation
- Knowledge transfer

Meet the CEREC mentors



Hermann Loos, DDS

After studying in Jena and Dresden and working for 10 years as a dentist, Hermann Loos has been working in private practice in Chemnitz since 1991. He has been using CEREC since 2000, has authored publications about CEREC and CAD/CAM, and is a presenter at national and international conventions. As a CEREC mentor, he has shared his knowledge and experience using CEREC with his colleagues for many years.

"My recipe for success after almost 20 years of working with CEREC: honest, enthusiastic and open patient information."



Ariane Schmidt, DDS

Dr. Schmidt completed her studies in dentistry, including her doctoral studies, at the Westphalian Wilhelm University (Westfälische Wilhelms-Universität) in Münster. She gained her first experiences with CEREC early on during her dental residency. In her practice, focusing on preventive dentistry in Haltern am See, she has been using CEREC since 2008. In 2015 she became a CEREC mentor for DGCZ and offers presentations on the topic "Sirona Connect."

"In my practice, I want to offer my patients an alternative that is free of anxiety and devote much time and attention to them. CEREC helps me implement this credo every day, thanks to the digital impressions, by sparing my patients gagging and irritating tastes, and I can fully dedicate the time that this saves me to my patients."



Stefan-Dan Reiz, DDS

After graduating from the University of Cologne, Dr. Reiz trained countless students in the use of CEREC during his employment as a research assistant at the university. As an international CEREC trainer and mentor, he now also trains his colleagues in the application of the CEREC system. Since 2016 he has been working in private practice in Cologne, focusing on tooth preservation, computer-guided restorative dentistry and (implant) prosthetics.

"Before we had CEREC at the university, a student once managed to get a double mix impression so badly stuck inside a patient's mouth that I, as the supervising assistant dentist, had to cut apart the impression spoon inside the patient's mouth, then carefully and painstakingly cut out the silicon impression compound, piece by piece, from the patient's mouth. It was a traumatic experience for the patient, the student, and myself. I realized then that this could never have happened with a digital impression..."



Leandro Passos, DDS

Dr. Leandro has had his private practice since 1999 and has been a CEREC user since 2009. He specializes in Prosthodontics and has a master's and Ph.D. in Dentistry. Dr. Leandro is an Associate Professor at Federal Fluminense University (Brazil) and a Visiting Professor at the University of Alberta (Canada). He has been a CEREC Trainer & Mentor at the Dentsply Sirona Dental Academy since 2016, and CEREC Trainer at the International Society of Computerized Dentistry (ISCD) since 2017.

"CEREC is synonymous with innovation and technology applied to clinical practice. A system that has been evolving for generations and is making the user experience increasingly incredible and intuitive. I can't imagine myself without using the system for a single day."

Carlos Repullo, DDS

Dr. Carlos Repullo is a DDS graduate from the ISCS-SUL in Lisbon, Portugal. He has 20 years of Implant Dentistry experience and currently practices in Sevilla, Spain. He holds a diploma in Implant Dentistry and an advanced certificate in Implant Dentistry by the prestigious Royal College of Surgeons of England in London, UK. He became a CEREC user in 2011 and since 2014 has served as a CEREC mentor and the founder of Caddental training center. Dr. Repullo lectures on an international level about CAD/CAM Dentistry and Digital Implant Dentistry.

"CEREC allows clinicians to take the control over the whole restorative procedure, from planning to the final restoration. The implementation of the CEREC workflow in your daily practice will be a turning point in your professional career."



Bernhild-Elke Stammitz, DDS

After graduating and obtaining her doctorate from the Utrecht-Karla University in Heidelberg in 2004, Dr. Stammitz started her own private practice with a dental lab in Langen near Frankfurt, Germany. However, she already owned CEREC before she set up her first office space, and her focus is still geared towards prosthetic and implantology treatments using CEREC. In 2012, she also became a certified CEREC trainer and offers presentations and courses both nationally and internationally.

"Without CEREC I would no longer be able to implement my idea of treatment to the same extent. I am fascinated by technology, when it works—CEREC works. Therefore, I am already excited to see what the future holds."



Klaus Wiedhahn, DDS

Dr. Wiedhahn has been using CEREC since 1988. He is the founder and honorary president of the DGCZ and president of DISC. Through countless presentations, publications and advanced CEREC training courses, both nationally and internationally, he has advised his colleagues with interest in CEREC since 1991 on all aspects of CEREC and dental ceramics, with a focus on ceramic veneers and digitalizing the dental practice. Since 1976, he has been working in private practice in Buchholz i.d. Nordheide, Germany.

"(Continued) education was and still is an integral part of dentistry, and I am invested in passing on my enthusiasm for the CEREC system. Therefore, we have established the DDA (Digital Dental Academy) in Berlin, a modern CEREC continuing education center that provides you with the best options for increasing your qualifications as you desire."



Daniel Vasquez, DDS

Dr. Daniel Vasquez runs a general dentistry practice in Oceanside, California, near San Diego. In 2008, he acquired his first CEREC system. His practice is focused on aesthetic and digital dentistry, and his passion for CAD/CAM led him to become a key opinion leader and product tester for Dentsply Sirona. Additionally, he mentors CEREC dentists internationally. Dr. Vasquez advocates for Connect Case Center and believes in its seamless communication between CAD-CAM dentists and InLab laboratory technicians.

"Never stop learning and innovating. Continuing in education and new technology is the key to success. For the past 12 years, CEREC has been an unbelievable working tool for my dental office. Today CEREC Primescan and CEREC Primemill are essential for the continuing growth and success of my dental practice. Being part of this family who uses CEREC technology, I have met many dentists and have made friends for life!"



Dentsply Sirona

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dentsplysirona.com

Procedural Solutions

Preventive
Restorative
Orthodontics
Endodontics
Implants
Lab

Enabling Technology

CAD/CAM
Imaging
Treatment Centers
Instruments

Protocol of the CEREC treatment

Step by step towards success. Use this checklist to ensure that things will go smoothly during your first treatment. Your steps are marked in dark gray, assistant tasks are marked in light gray.

<input checked="" type="checkbox"/>	Task
<input type="checkbox"/>	Turn on the CEREC device
<input type="checkbox"/>	Set up the "Preparation" tray
<input type="checkbox"/>	Set up the CEREC device (open the CEREC software, open/set up patient profile)
<input type="checkbox"/>	Check static occlusion with red paper
<input type="checkbox"/>	Scan the maxillary and mandibular quadrants/bite
<input type="checkbox"/>	Anesthesia
<input type="checkbox"/>	Preparation
<input type="checkbox"/>	Gingiva management (retraction with thread or astringent paste; if needed, a hemostatic agent, such as Expasyl®)
<input type="checkbox"/>	In case of using CEREC Omnicam, cut out the prepared tooth from the scan
<input type="checkbox"/>	Postscanning of the preparation
<input type="checkbox"/>	Manufacture of the restoration
<input type="checkbox"/>	Shade selection
<input type="checkbox"/>	Mounting the block
<input type="checkbox"/>	Prepare "Insertion" tray
<input type="checkbox"/>	Test the restoration
<input type="checkbox"/>	Polish (proximal)
<input type="checkbox"/>	Depending on the material, mounting and preparation of the ceramic part (etching, silanating)
<input type="checkbox"/>	Tooth preparation (cleaning, etching, bonding)
<input type="checkbox"/>	Keep tooth dry
<input type="checkbox"/>	Insert
<input type="checkbox"/>	Preliminary cleaning
<input type="checkbox"/>	Press into final position and keep pressing
<input type="checkbox"/>	Dental floss and final cleaning
<input type="checkbox"/>	Remove thread, if applicable
<input type="checkbox"/>	Harden
<input type="checkbox"/>	Remove rubber dam if present
<input type="checkbox"/>	Remove excess with the scalpel
<input type="checkbox"/>	Occlusion check
<input type="checkbox"/>	Adjustments
<input type="checkbox"/>	Polish
<input type="checkbox"/>	Fluoridate
<input type="checkbox"/>	Save CEREC patient case
<input type="checkbox"/>	Clean up room (remove instruments, clean/disinfect CEREC)

The perfect support during CEREC treatments

"Preparation" tray

- Basic instruments (2x mirrors, probe, tweezers)
- 2x Aplitip
- Occlusion paper, red
- DryTips or cotton rolls
- Anesthesia
- Heidemann spatula
- Hemostatic agent (e.g. Expasyl) and tool for retraction, if needed (e.g. retraction thread)
- **Optional:** Retractor, matrix to protect neighboring teeth



Room preparation

- Set up "Preparation" tray (see illustration on left)
- Prepare preparation set (drill, contra-angle, sonoabrasive instruments, if needed) and suction tool, large/small
- Turn on CEREC, open the program, open/set up patient file, also in the practice software

Patient preparation

- Check treatment plan and cost estimate
- Seating/drape
- X-ray check, if needed
- Check static occlusion with red paper
- Scan the maxillary and mandibular quadrants/bite

Assisting with the preparation

"Insertion" tray

- Basic instruments (2x mirrors, probe, tweezers)
- Ball plugger
- Scalpel Fig. 12 or scaler
- Dental floss
- Cotton rolls and DryTips or rubber dam and accessories
- Occlusion paper red and blue
- Foam pellets
- Shimstock
- Bonding system
- Finishing instruments and polisher
- **Optional:** Teflon tape to protect neighboring teeth, Optragate, hemostatic agents, phosphoric acid gel



Grinding/resetting the room

- With CEREC Primemill the milling unit can be set-up while the dentist is working on the patient, which saves much time
- Prepare "Insertion" tray (see illustration on left)
- After grinding, remove the restoration from the grinder

Assisting with the insertion

Clean/disinfect the room

- Remove instruments
- Save CEREC patient case
- Disinfect scanner and surfaces with wipes
 - Alpro: MinutenSpray Classic, MinutenWipes, PlastiSept, PlastiSept-Wipes
 - Merz: Pursept-A
 - Dürr: FD 312