

# reveal<sup>®</sup>Plus

CLEAR ALIGNERS



## How To Guide

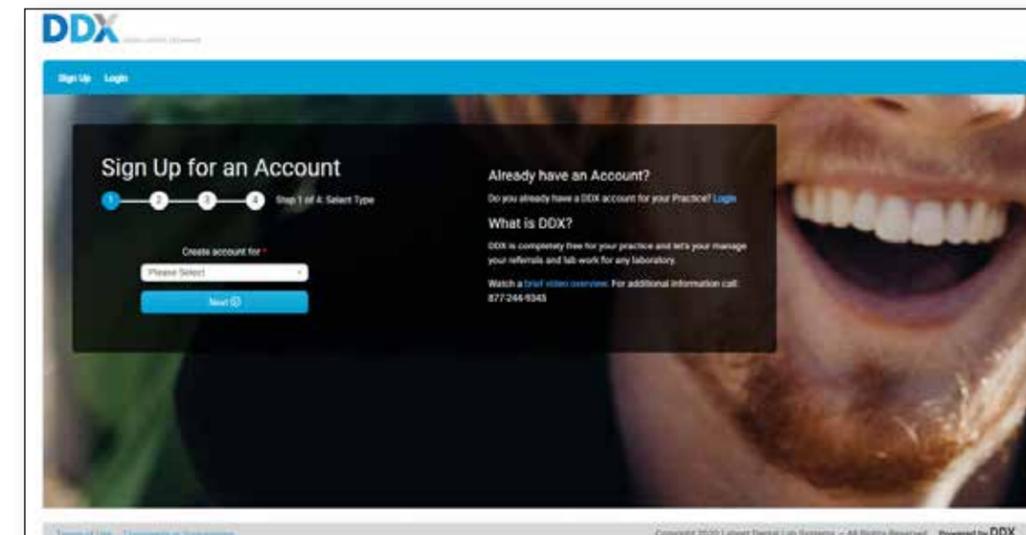
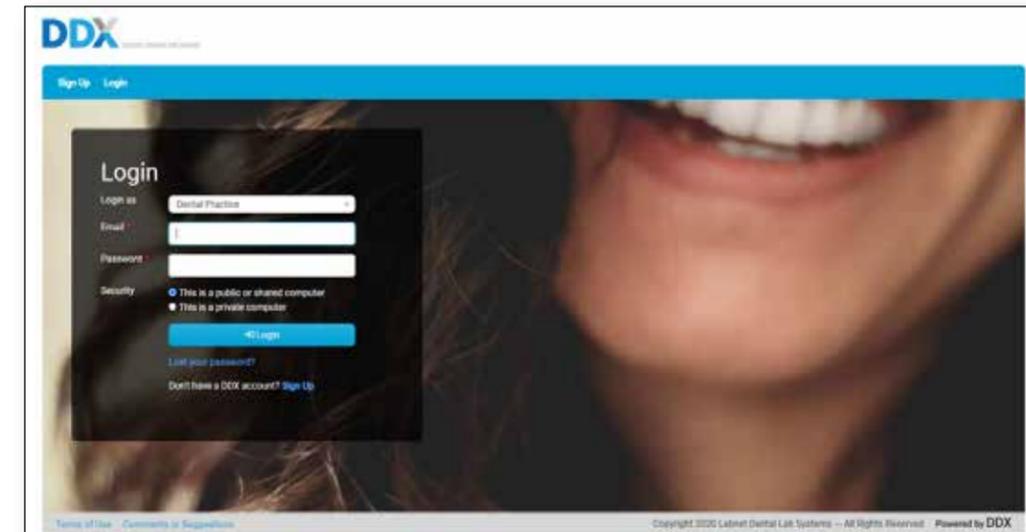


# TABLE OF CONTENTS

- A. Setup Your DDX Aligner Account
- B. Submit a Reveal Clear Aligner Case
- C. Tips & Tricks for PVS Impressions
- D. Scanning Best Practices
- E. Transitioning from Motion to Aligners
- F. Check on the status of existing cases
- G. Review, Modify or Send the Treatment Plan
- H. Request a Refinement, Revision or Replacement Aligners
- I. Direct Connect with 3Shape
- J. Direct Connect with Planmeca

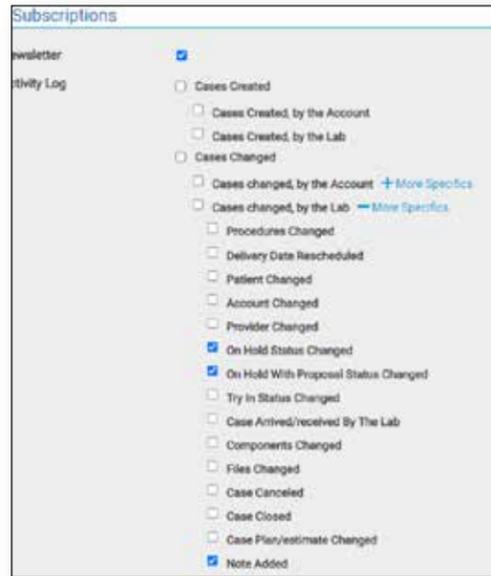
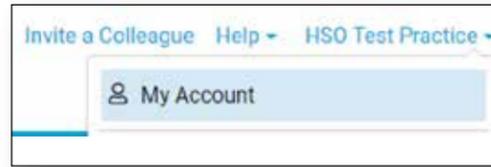
## Step 1. Get Registered For Reveal

1. Request an account from an HSO Orthodontic Sales Specialist to receive an invitation.
2. Receive an email invitation from team@ddxdental.com
3. Click on the first or second link.
4. Complete the Registration questions.



Step 2. Change your email notifications

1. Click your account name.
2. Click "My Account"
3. Scroll down to "Email Subscriptions"
4. Select your Email Subscription preferences
5. We recommend that you select "On Hold Status Changed, On Hold with Proposal Status changed and Notes Added"
6. Scroll to the bottom of the page and click Save!
7. You will now receive emails when the lab provides updates and notes for your cases, or when the lab uploads your Treatment Setup



Step 3. Set up additional users

1. Click on your account name
2. Click "My Account"
3. Choose Users on the menu
4. Click the + Add icon on the right-hand side
5. Add the user information & choose the emails that you would like this user to receive.
6. Click Save!

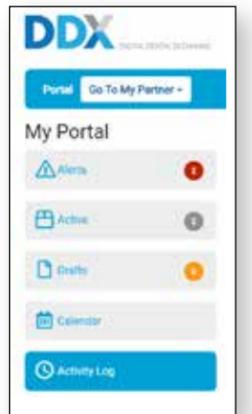


Other Helpful User Interface Information

- The Practice Portal is the "Starting point" of DDX | CMP. The portal gives you a quick overview to critical data. These cross-lab tools and lists in DDX is not available in any other software platform.

- Portal Menus - Quickly move from one section of the application to another

1. Alerts - The Alerts list shows what needs attention in DDX regardless of the lab. Each alert will offer links to the Case, the lab, and suggested method to Resolve the alert
2. Review - Review this list for any cases that need the doctor's attention
3. Active - Lists all active cases in all labs. Aligner case stay active for 1 1/2 years unless you close them.
4. Drafts - By definition these cases are not yet submitted to the lab. These cases may have been generated by a link from your scanner that sent the patient and STL files to DDX for easy case creation.



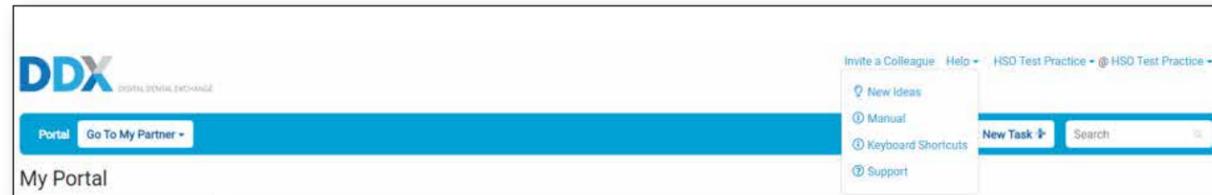
This list of draft cases provides a link to the draft as well as an action menu for the draft. Sorted by most recently created. The following actions are available for each draft:

1. Resume - Opens the draft prescription for you to edit and/or submit it
2. Review - Opens the draft prescription for you to Review prescription details, Decline with reason and notes, Approve and submit to lab as the last reviewer
3. Delete - Deletes the draft prescription from DDX | CMP
4. Move - Allows you to move a draft from the current lab to another lab

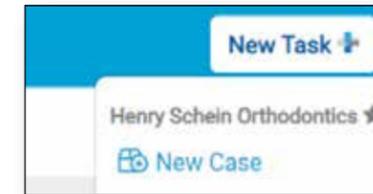
Other Helpful User Interface Information (cont.)

- Calendar - The Events page shows you this week’s overview of cases arriving and leaving dates. The header selector displays the week that is displayed. The arrows on either end allows you to navigate to other weeks. The Month icon will display the month calendar view of events. Each line in the list shows the following:
- An icon - Hover over the icon to discover the meaning, or a drop menu icon; Allows you to take an action on a case for the event
- Activity Log - The Activity log shows you the most recent activity in DDX. In the activity list you can click on a link to a patient, case, or account
- On the header selector, use the Older Entries and Newer Entries icons for more activity
- News and Offers - Displays links for promotions being offered by labs and other companies
- DDX Help - For other helpful tips about navigating DDX please refer to the help Manual

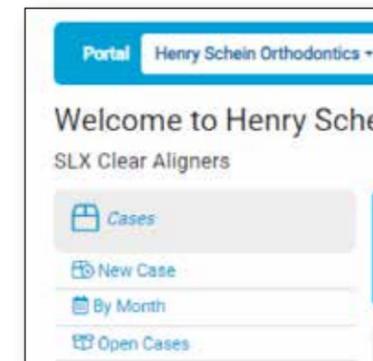
\* For a full list of Product Definitions, please see the appendix



Step 1. If you just logged in and are in the DDX Portal, select “New Task” & Choose your Aligner lab



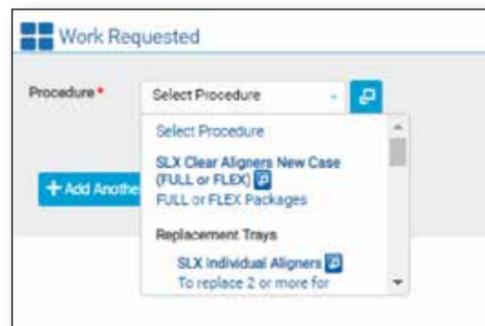
Step 2. If you are on your Aligner Lab Partner Page Select “New Case”



Step 3. Enter your patient’s information

 A screenshot of the 'Schedule a New Case' form. The form is titled 'Schedule a New Case' and has a 'Patient Details' section. The form contains several input fields: 'Provider' (a dropdown menu with 'HSD Test Practice' selected), 'First Name', 'Last Name', 'Gender', 'Patient Chart', and 'Birth Date'. The 'Provider' field is highlighted.

**Step 4. Under Work Requested select the aligner procedure you are looking to order. (Reveal Plus Aligners or Refinements or Replacements)**



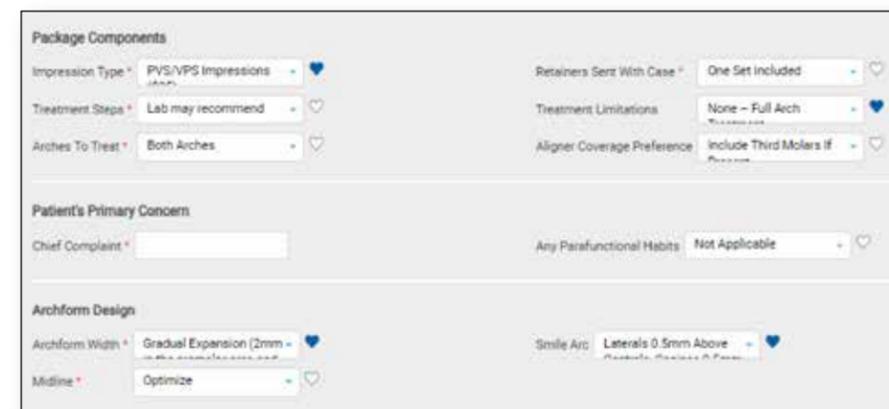
**Step 5. Complete the Work Requested Rx.**

- This section is for the doctor to communicate the final treatment goals, not diagnose the current occlusion. This section is your first opportunity for doctor directed treatment planning
- This simple one-page form facilitates the communication of the doctor's treatment goals to the lab.
- Our technicians value you taking the time to provide direction upfront. This helps them provide treatment plans that respond to your goals, resulting in fewer doctor and technician modifications.
- All of the items marked with a red asterisk are requested in order to be able to submit the case

**Step 6. Next to each item on the form, you will find a heart icon that allows you to choose Treatment Rx Favorites as default for all future cases**

- When a default is saved, the heart turns blue
- A new choice can be selected at any time for an individual case, or a new favorite can be chosen

**Step 7. The most common Rx choices have an automatic default for quick and easy submission. To alter these selections, simply select another option from the drop-down menu**



**Step 8. First take a look at the Package Components and review the choices and make any changes as needed:**

- Impression Type:** HSO accepts digital impressions from all modern intraoral scanners, or will accept and digitize traditional impressions in the U.S. and select global markets. The default is set to digital but if you will be sending PVS impressions please indicate and save this as a favorite so that you will be provided a shipping label.
- Treatment Steps:** Unlike competitive aligners, you don't need to pre-choose a package type. We will make a recommendation on the number of steps required to achieve the treatment plan you prescribe. If you would like to pre-choose an aligner package, we will optimize as far as possible to achieve your treatment plan.
- Arches to Treat:** We default to treat both arches, but if you would like to do a single arch treatment, please let us know by clicking on the drop-down selection.
- Treatment Limitations:** HSO's default is to treat the entire malocclusion on a case by case basis. Please let us know if you would like us to limit the treatment goal to:
  - 3 to 3 Only Movement
  - 5 to 5 Only Movement
  - Full Arch Treatment except for Third Molars

- e. Any Parafunctional Habits? For habits such as digit or thumb sucking, informing HSO will help differentiate the cause of the problem and may change the treatment plan accordingly. If there is any relapse after aligner treatment, we would better be equipped to differentiate the underlying cause, whether it is because of the underlying habit (which can also give us an idea about the compliance of the patient with aligners) or a different reason
- f. Retainers to be Sent with Case: One set is always included, but an extra set or two can be added for an additional fee
- g. Aligner Coverage Preference: Treating the third molars and how we trim the posterior aligners is a preference that can easily be accommodated. Please let us know your preference on a case-by-case basis or choose a favorite

### Step 9. Next review the ARCHFORM DESIGN section:

- a. Smile Arc: HSO would like to know what your ideal treatment plan is for each patient or your favorite, overall. Knowing this preference upfront will allow us to achieve a more accurate treatment proposal the first time
- b. Midline: Tell us what your treatment plan is for this patient. HSO defaults to Optimize.
- c. Archform Width: HSO can always propose an optimized treatment setup, but if you share your specific preference for each patient, the treatment proposal will be more accurate

### Step 10. For A-P & SAGITTAL RELATIONSHIP please review:

- a. Prior Carriere® Motion 3D™ Appliance Use: HSO's expertly trained technicians will plan for the following:
  1. Finish to a solid Class I with a solid overjet/overbite
  2. Keep the canine position that the appliance achieved, build the rest around that position.
  3. Cutouts will be a standard for continued use of the Sidekick™ bondable hook, and slits will be delivered in the same direction as the elastics used during the Motion 3D phase.
  4. For Class II, because the lower teeth haven't been moving, we will start expansion first with no flaring. Then when the anterior is being closed, the lower arch can be rounded and retracted. Typically arches will be rounded 1 - 2 mm on each side
  5. During the staging, we will not have the posterior coming forward; the anterior will be going back. We will make sure not to medialize the first molars.

- a. Right Canine, Left Canine, Right Molar, Left Molar: Tell us what your treatment plan is for this patient. HSO defaults to Optimize to a Class I platform
- b. Overjet / Underbite: HSO's default is to Optimize, but if you have a specific amount of overjet, please choose between 1 – 4 millimeters
- c. Overbite: HSO's default is to Optimize, but if you have a specific amount of overjet, please choose between 1 – 4 millimeters
- d. Crossbite: HSO's default to treating Optimize, but if you would like to leave the bite alone, please let us know

### Step 11. For TREATMENT TECHNIQUE please review:

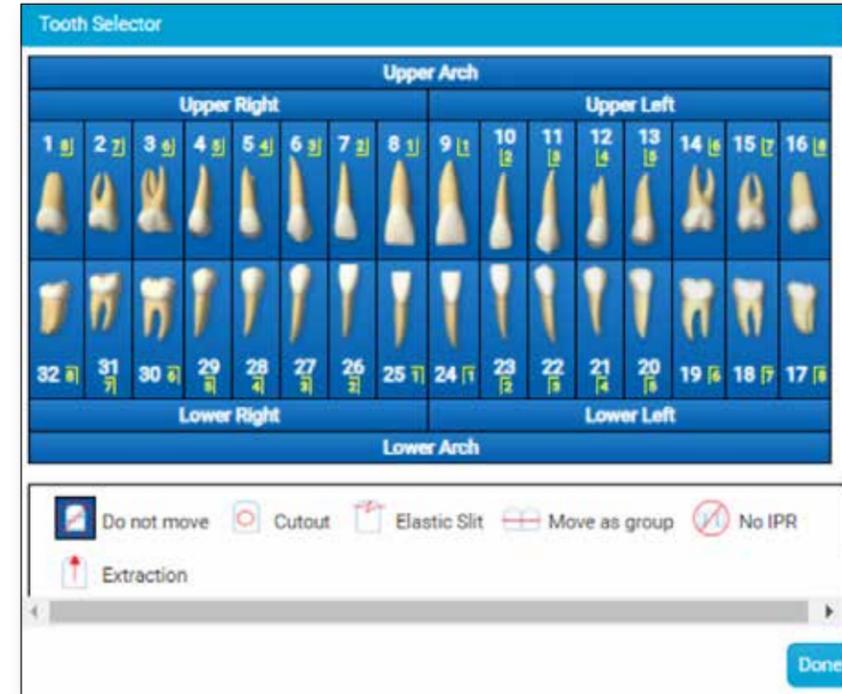
- a. Tooth Spacing & Crowding Resolution: There are a few typical methods of resolving crowding or extra spacing. You may choose a method or let our lab make a suggestion
  1. Expansion
  2. IPR
  3. Proinclination
  4. Leave Space Distal to Laterals
- b. IPR Prescription: HSO needs your permission to plan for IPR. Initial Treatment Setup includes total IPR for your approval. We default to initiating the IPR when feasible contact points become available. If you have scheduling preferences, please write a note.
- c. IPR Amount: If IPR is okay to recommend, HSO's Design Studio will never recommend more than .5 mm per contact. If you prefer to limit to .2 or .3 mm per contact, please use the drop-down menu to specify.
- d. Occlusal Contacts: HSO's treatment setup is the final occlusion goal that you would like your patient to end up in, NOT overcorrection. We will plan for overcorrection during our manufacturing process. Refinements are only intended to make final detailing adjustments (if needed), to the first treatment setup that was approved. Please make sure your choice for final occlusal contact is what is preferred for the final result.
- e. Attachment Type If Needed: HSO Aligners require fewer attachments, but for some movements such as extrusion, large bodily movements, extensive rotations, or to maintain root parallelism during distalization or retraction, we may need to add them to the proposed Treatment Setup. For planning purposes, this drop-down allows you to tell us when and what type of attachments are acceptable.

Step 12. For STAGING INSTRUCTIONS please review:

- a. Movement Velocity: HSO's default is a 1 degree tip & torque, a 2 degrees rotation, and a .25mm linear per tray. If you would like this adjusted, please use this drop-down to indicate or write us a note
- b. Passive Aligners At End Of Treatment: Some doctors like to add passive aligners at the end of treatment to help settle the bite. With SLX Aligners, you could have the patient hold on the final aligner, as our trays do not stain or discolor, or you may add passive aligners to your order. Please note that these aligners will be added to your overall aligner count and could change the package and price of your case
- c. Upper & Lower Number of Aligners: We default to provide the same amount of upper & lower trays, but if you would like to finish one arch sooner than the other, we can accommodate your request

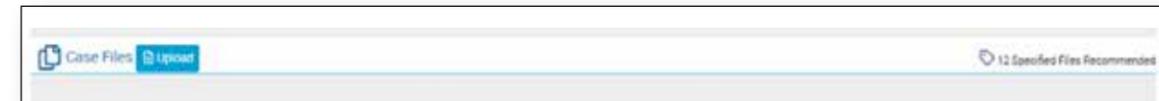
Step 13. In the TOOTH SPECIFIC DETAILS section a tooth chart will appear when selecting any field with a tooth icon. Click the icons on the chart followed by the relevant teeth for that action

- a. Don't Move Teeth & Move as Group: Please use the tooth chart to indicate if there are any veneers, crowns, bridges, endodontic posts, or implants
- b. Cutouts: Cutouts will be provided automatically if the Elastic Button Technique is chosen. If you are keeping the Sidekicks on for post MOTION 3D treatment, please let us know by clicking on the teeth. The cutouts will be added accordingly
- c. Elastic Slit: If you would like slits, please let us know in the notes if we should add retention attachments. We do not recommend placing slits and attachments on the same tooth as it could reduce the longevity of the aligner
- d. Extract Tooth: Please use this icon to tell us if you are planning or have already extracted any teeth. Extractions should take place before starting aligner therapy
- e. No IPR: You only need to use this if there are a couple of specific teeth that you are worried about. If you used the IPR Prescription drop down above, then using the tooth chart is optional



Step 14. Upload your patient records.

- a. Depending on your practice management software, you may be able to upload your records directly into DDX from the patient chart, or you may need to create a folder on your computer which can store your records
- b. The Case Files Upload area allows you to easily drag and drop your patient records as a group



- c. TIME SAVING PEARL: You have the option to individually upload each record as it is described OR upload all necessary records by selecting "all", then dragging and dropping all relevant records into the specified files section (without describing each record)
- d. Photographs can be submitted as individual files or a collage
- e. Here are the photo records necessary and the requirements for each of them
  - 1. Extraoral Photos
    - Extraoral photographs should be taken both in profile and portrait
    - All extraoral photographs should be cropped to display only the face and neck

- Here are the requirements for a good photo in-profile:
    - Teeth are in occlusion and lips are relaxed and in contact
    - The head is in a natural position, with a straight chin
    - Eyes are looking forward
    - The opposite eyelash is slightly visible
    - The approximate center of the frame is 1 centimeter in front of the center of the ear
  - For a good photo in portrait, make sure that:
    - The patient's eyes are open and looking into the camera
    - They are not wearing any jewelry, eyewear, or accessories that cover the neck
    - The ears should be visible
    - The interpupillary line is horizontal to the frame
    - The tip of the nose is in the center of the frame
    - Repeat the portrait photo, instructing the patient to smile in a natural way.
2. Intraoral Photos
- Intraoral photographs should be taken of the patient's bite, teeth in an anterior and posterior position, and of the palate
3. Bite Photos
- For a good photo of the bite, ensure that:
    - The occlusal plane is horizontal and bisects the photograph.
    - There is an equal display of posterior dentition
    - The teeth are in occlusion
4. Anterior & Posterior dentition
- Photos must show all of the teeth and the gingival margin. The occlusal plane should be parallel to the frame.
5. Palate
- A good photo of the palate:
    - Displays the mid-palate,
    - Frames the entire arch with minimal soft tissue interference.
    - Captures all the molars
- f. Upload your patient photos and panorex, if available. Ignore the request for the STL file types if you are sending PVS Impression
- g. Press "Control A" to select all the files in your folder. Then drag and drop them into the "Specified Files" section. As you hover over the "Specified Files" section, a blue box will appear instructing you to drop the files. Once you drop the files, a window will appear which will show you the progress of each upload
- h. If you choose to quickly upload all the necessary records at once, they will be placed into a bucket of records in the "Case Files" section below the "Specified Records" section

- i. It is not necessary to add a name for each file, but if you choose to individually specify each record, as you do so, they will be migrated into the "Specified Records" section
- j. NOTE: Do not close the upload box until all the files are at 100%
- k. STL file export instructions for some scanners are available upon request
- l. Direct connection instructions with Planmeca and 3Shape scanners are available later in this guide

### Step 15. Enter any specific treatment instructions or preferences in our "Notes" section

- a. Our technicians will read and follow your treatment instructions within the notes section. We rely on your directions. Please take time to describe your treatment goals and how you want movements to occur
- b. You can save note templates for future use. Once entered simply click this icon and follow prompts to save the note



### Step 16. Enter a promo coupon code if available

### Step 17. Please review and accept the Terms and Conditions for each case submission

I accept all [Terms and Conditions](#)

Tags:

### Step 18. Add a Tag for a case that you would like to run reports on at a later time. It can be helpful to tag cases that used a particular appliance before treatment or for those special VIP patients

**Step 19. Submit or Save a Draft**

- a. Draft cases can be reviewed at a later date or more records can be uploaded when available. Draft Cases are located on the main portal menu. Cases in draft form have not been submitted to the aligner laboratory to begin work and customer care and lab technicians cannot see your drafts
- b. NOTE: The case does not auto save!

**Step 20. Once the case is submitted you will receive your initial treatment proposal within five business days (typically two days). When your treatment plan proposal is ready, you will receive an email notification and the case will be available under “Review” on the main DDX Portal page**

**Step 21. The case will now be confirmed and a ‘Print UPS label’ option will become available**

- a. You might be asked to indicate the size of the box you will be using before you can download the label

**Step 22. To print the case form, click on ‘Print’ and select ‘Save as PDF’**

- a. This can be printed at the same time as the UPS label, after submitting the case

**Step 23. Prepare the package for shipping**

- a. PVS impressions must be carefully packed to prevent damage during shipping
- b. Before you send a patient's impressions to the lab, verify that they are accurate and ensure they have been disinfected.
- c. Only send one patient's impressions in each box to avoid confusion with tracking
- d. Place the impressions in a sealed bag, with the patient and doctor's names written on it
- e. Completely surround the bag with packing material, filling all voids in the box, to make sure it can't move during transportation
- f. Include the case form
- g. Tape the UPS shipping label to the outside of the box

**Step 24. Once the parcel is ready to be sent, contact your local UPS office to arrange a pick-up or drop the package off at your local UPS drop-off point.**

**Step 1. PVS impressions are an alternative to digital intraoral scans**

**Step 2. The impressions must capture all of the patient's dentition: both arches and bite**

**Step 3. If any part of the dentition is missing, your impressions will not be useable and it will need to be remade**

**Step 4. To take your patient's impressions, the recommended method is the one-step impression technique, using hydrophilic impression material in combination with a medium body and low viscosity wash**

**Step 5. Tray selection**

- a. It's important to choose the right tray to ensure an accurate impression

**Step 6. Tray type**

- a. Please ensure you use disposable trays, as the lab does not return them
- b. Full arch, perforated plastic trays are ideal for clear aligner impressions
- c. They have a mechanical retentive feature that reduces the risk of distortion during removal

**Step 7. Tray size**

- a. There should be a 2 to 3-millimeter space between the sides of the tray and the patient's teeth and the tray should extend for 2 millimeters beyond the terminal molar
- b. The tray should also be deep enough to allow for 2 to 3 millimeters of material between the tray and plastic and the incisal or occlusal edges of the patient's teeth
- c. Secondly, the tray should reach at least 2mm onto the gingiva

**Step 8. Applying adhesive**

- a. Once you've selected a tray, dry the surface with gauze before applying the adhesive
- b. PVS tray adhesive should be applied on the tissue surface of the tray covering an additional 5 millimeters over the external border to help prevent delamination
- c. Make sure the tray adhesive is dry before making the final impression

**Step 9. Dispensing PVS material**

- a. A combination of medium body and low viscosity wash should be used to make the impression
- b. Before applying each to the tray, dispense a small amount from the cartridge or syringe and check for a proper mix

- c. Fill two-thirds of the tray with the medium body
- d. Spread it with the tip of the dispenser to make sure it is applied at a level thickness
- e. Then, fill the final third of the tray with the low viscosity wash
- f. Again, spread it to ensure the material is level

**Step 10. Inserting the tray**

- a. Before inserting the tray into your patient's mouth, dry the teeth with gauze and moisture-free dry air
- b. You can block out any undercuts with wax or cotton
- c. Take the lower impression first, inserting the tray slowly, at an angle to prevent bubbles and slide marks. Take care not to rock the tray when seating it
- d. You should see impression material escaping the perforations. If you can't see this, the material set is inadequate
- e. Spread the escaping material around the tray to increase the pressure for an optimal impression
- f. When inserted correctly, the handle of the tray should line up with the patient's midline
- g. While the material sets, ensure the patient does not move and that the tray remains still
- h. PVS is fast setting, with a work time of 60 to 90 seconds

**Step 11. Tray removal**

- a. Once set, the seal around the patient's teeth may be tight
- b. To make removing the tray easier, you can blast the tissue impression interface with air. This will break the seal.
- c. The PVS impression should then be removed with a snap to prevent elastic deformation
- d. Remember to check the patient's mouth for any impression material that might have been left behind

**Step 12. Inspection**

- a. After removing the tray, carefully rinse the impression to clean away residual saliva
- b. Inspect the impression to make sure all the teeth margins have been accurately captured
- c. No tray exposure or bite ins should be visible

**Step 13. Bite registration**

- a. Next, you must take the patient's bite registration in centric occlusion
- b. To do this, apply tray adhesive to the mesh side of a full arch bite tray
- c. Then, load bite registration material to the center of the mesh on both sides
- d. Insert the tray and have your patient bite down

**Step 14. Disinfecting**

- a. If the impression is accurate, it can be disinfected as standard practice
- b. Immersion disinfectants work better than spray alternatives

**Step 1. Digital scans of the patient's arches and bite will be submitted to the lab to create the treatment plan and manufacture the aligners, allowing for a precision fit**

**Step 2. It's important that scans are accurate. Faulty scans mean the patient has to return to the clinic to retake the records**

### Step 3. Format

- a. Stereolithography (.STL) is the only file format accepted by the lab
- b. This format is the industry standard, widely used across different 3D modeling interfaces
- c. It allows for the high accuracy necessary to produce precision fit Henry Schein aligners

**Step 4. Scan categories. Our lab categorizes intraoral scans into four categories:**

- Category One
  - An ideal scan that is highly precise
- Category Two
  - A scan that has minor imperfections that won't affect creating a treatment plan and manufacturing aligners
- Category Three
  - A scan that can be used at the request of the doctor, however, there is a risk that the manufacturing may be affected. In some cases, we may provide a compromised treatment plan.
  - In this case, the lab will contact the doctor to discuss the potential risks and decide how to proceed
- Category Four
  - A scan that cannot be used due to a lack of essential details, making it impossible to create a treatment plan. The clinic will be notified and the patient will be required to repeat the scan

**Step 5. Ideal scan: What does an ideal digital scan look like?**

- An ideal scan:
  1. Accurately captures the teeth anatomy without gaps
  2. Captures the entire surface of each tooth
  3. Captures at least 2mm millimeters of gingival tissue

**Step 6. Common faults. Causes for the lab to reject a scan include:**

- Causes for the lab to reject a scan include:
  1. The distal of the terminal molars has not been captured
  2. Scans include bubbles or voids that compromise the accuracy of the patient's dental anatomy
  3. The gingival margins are not defined and clear
  4. A pre-aligner appliance has not been removed before scanning

**Step 7. Common faults. Causes for the lab to reject a scan include:**

- An ideal scan:
  1. The distal of the terminal molars has not been captured
  2. Scans include bubbles or voids that compromise the accuracy of the patient's dental anatomy
  3. The gingival margins are not defined and clear
  4. A pre-aligner appliance has not been removed before scanning

**Step 8. Technique tips. Here are some tips to ensure a good scan:**

- An ideal scan:
  1. Go slowly, using smooth motions, and taking care not to jump or jolt the wand
  2. Use a finger or dental mirror to create space between the teeth and lips or cheeks
  3. Wiggle or roll the scanner tip over the teeth whilst moving forward to capture all tooth surface and attached tissue
  4. Focus on the model on the screen as you scan, checking for any indications of missed sections
  5. Fill missed sections before proceeding

**Step 9. Lower arch. A good method for capturing an accurate scan of the lower arch is the three-sweep method.**

- An ideal scan:
  1. Perform the scan in three sweeps from occlusal to lingual and buccal, starting with the molar occlusal surface

**Step 10. Upper arch. Use the same three-sweep method to capture the upper arch moving from the occlusal to the buccal and over the palatal.**

1. Turning the tip of the wand up makes scanning the upper arch easier

**Step 11. Bite. When scanning the bite, let the tip of the wand hold the cheek away from the teeth and position the scanner on the buccal side of the molar.**

1. Slowly move the wand in a wave-like motion to ensure a sufficient capture of the occlusion

**Step 12. Finally, check the scan carefully before allowing the patient to leave.**

**Step 1.** Once the Class I platform has been achieved using the Carriere Motion 3D appliance, the patient is ready to move on to treatment with Henry Schein aligners.

**Step 2.** To transition from the Motion to the aligners, first remove the appliance and clean any residual bonding material from the teeth surface.

**Step 3.** You may leave the Sidekick Button on for continued elastic wear. For a mild case, it can be removed.

**Step 4.** The Motion appliance must be taken out before creating the records as it cannot be virtually removed without affecting the accuracy of the teeth anatomy. This is essential to achieve the precision fit of Henry Schein aligners.

**Step 5.** Create the records required to submit for the aligner case: an intraoral scan or a PVS impression and photographs of your patient.

**Step 6.** After you remove the Motion 3D Appliance, create a vacuum-formed retainer, such as an Essix ACE retainer, to hold the maxillary arch in place during the manufacturing time of the clear aligners.

**Step 7.** If usage of the Motion Sidekick or other buttons is continued, cut two elastic slits on the retainers.

**Step 8.** In this case, the patient should wear light elastics while they sleep to maintain the jaw position in between the Motion 3D Appliance treatment and the clear aligners treatment.

**Step 9.** Depending on the specifics of their case, the patient might have to continue wearing elastics for part or all of their treatment with aligners.

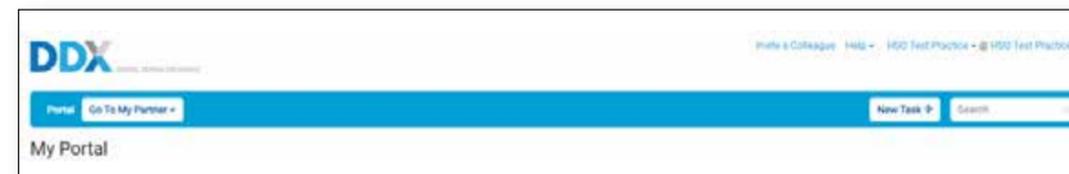
**Step 10.** When creating and submitting the case in DDX, inform the lab technicians that the patient has already been treated with the Carriere Motion 3D appliance.

**Step 11.** The default option is providing cut-outs for the aligners, but you will be able to request a different approach.

**Step 12.** Our expertly trained lab technicians will optimize the aligners treatment plan when you indicate the patient has used the Motion appliance.

**Step 1.** There are multiple ways to manage cases.

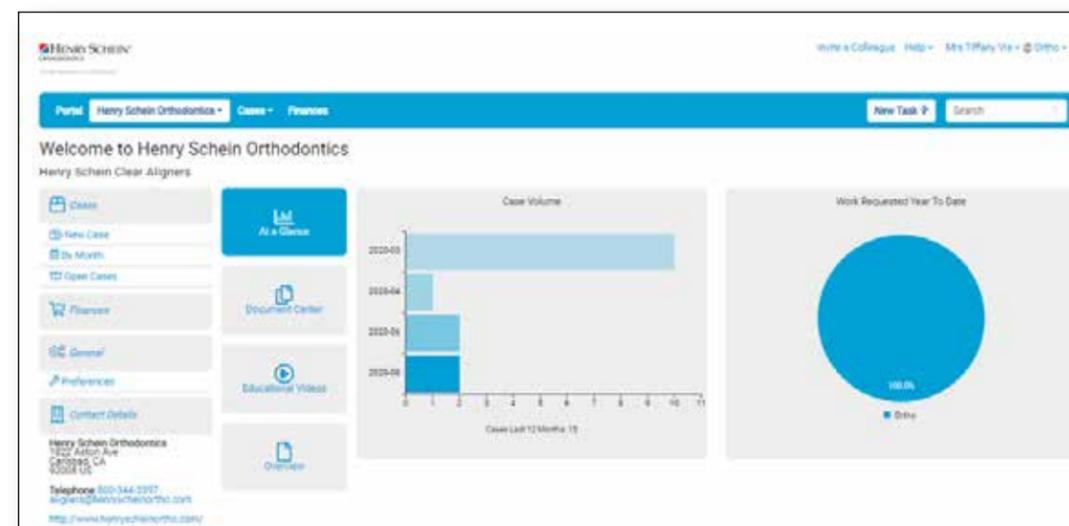
**Step 2.** You can always use the search bar at the top of the page to locate a particular patient.

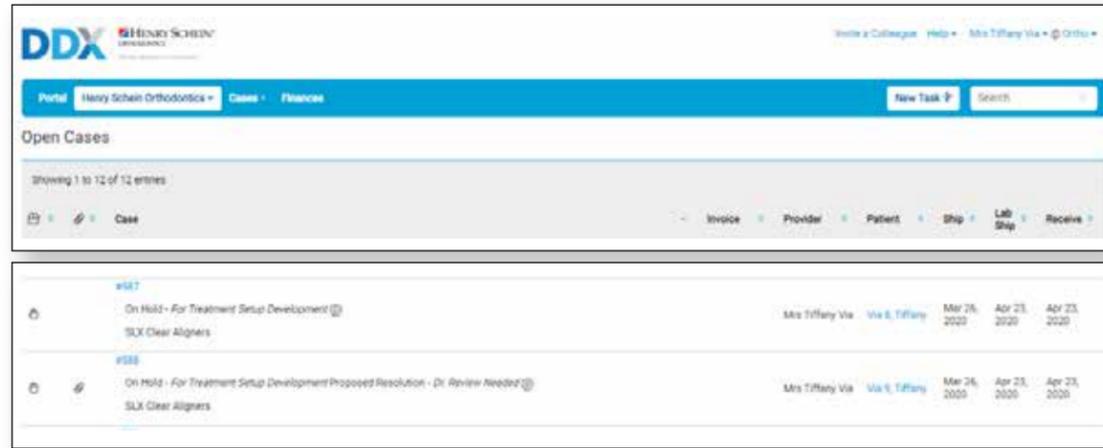


**Step 3.** From the DDX Portal click on the menu item “Review”. You will then find cases that need the doctor’s attention.

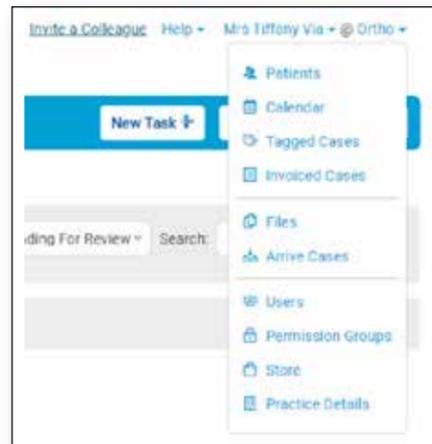


**Step 4.** You can go to your Aligner Lab page and select Open Cases to view all case that are in varying status.





Step 5. Use the drop-down menu at the top right-hand side of the page under your practice name to choose Patients to view a full list of patients that have aligner cases. Click on any patient name to see their case history.

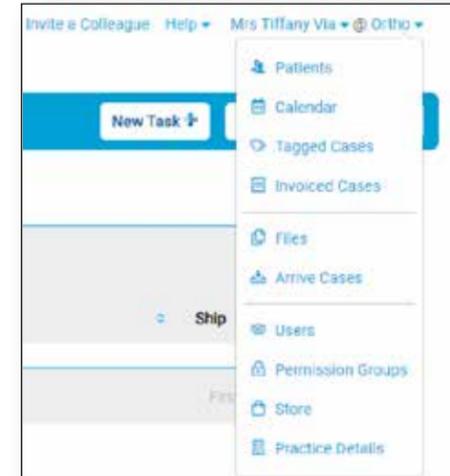


Step 6. The Patient list allows you to browse or search for Patients and view the details.

Step 7. Actions allow you to perform tasks on multiple patients at a time.



Step 8. Use the drop-down menu at the top right-hand side of the page to choose tagged cases. You will then be able to see any case that you have designated as needing special attention.



Step 9. To check the status of the case, first you can look at the “On Hold” Status. This means that the aligners are not being manufactured yet and have a few steps of communication with your office still needed. There are a few different messages to look out for:



- a. **On Hold – For Treatment Setup Development** - the lab is working on the Treatment Setup. No action is needed.
- b. **On Hold – For Treatment Setup Development - Dr. Review Needed** - the Treatment Setup is ready for doctor review. Action Needed.
- c. **On Hold – For Treatment Setup Development - Modification in Process** - a modification to the treatment plan has been requested by the doctor and the lab technicians are working on it. No action is needed.
- d. **On Hold – For Treatment Setup Development Customer Service Contact Is Required** - please call in to customer service. Action Needed.

## Check on the status of existing cases

- e. **On Hold – Under Development** - this is for a refinement or replacement aligner orders when there will be no actions needed from the office.
- f. **On Hold – Need Updated Records** - one of the following will be indicated as needed.
- Missing Digital Impressions
  - Missing PVS Impressions
  - Missing Patient Photos
  - New Impressions Requested
- g. **On Hold – Practice Request** - only if requested our customer service team will place a case on hold for an office for the following reasons;
1. Pending Patient Agreement
  2. Pending Patient Payment
  3. For Motion 3D Treatment
- g. **DDX Case in Process** - if the case is in manufacturing.
- i. **Closed** - if the case has been shipped to the practice.

**Step 1.** To Review the proposed Treatment Plan click on the case number.

**Step 2.** Find the proposed Treatment Plan in the “Work Requested” section under Case Files and click to open.

**Step 3.** HSO’s Treatment Setup Viewer allows you to efficiently review and modify the treatment plan proposed by the Henry Schein lab technicians, using a 3D model of your patient’s dentition.

**Step 4.** Henry Schein’s treatment setup differs from other aligner manufacturers’. It represents the final goal for the patient’s tooth position and it will be used in case refinements are necessary.

**Step 5.** If overcorrection is needed, the lab technicians will plan for it in the manufacturing process. You do not need to over-engineer the treatment plan.

**Step 6.** To send a Patient View of the Treatment Setup, right click the link and copy the path. You can then paste the text chain into an email or text message to quickly share the treatment Setup with a patient.

**Step 7.** To view alternate angles of the model, select from one of the options along the left side of the screen. They are front, right, left back, bottom and top.

**Step 8.** At any time you are able to view the before and after model. Select the Before and After icons at the bottom, center of the screen.

**Step 9.** To view the collisions, select the Collision icon at the top left.

**Step 10.** To Modify the Treatment Setup select the Modify icon at the bottom, center of the screen.

**Step 11.** Type in notes to tell the lab technicians what needs to be changed.

**Step 12.** If you need to walk away from the treatment planning for any reason, please click save notes so that you can come back to finish your modification request. Your modification request will not be worked on until you click on “Submit Modification”

**Step 13.** The modification tools to move individual teeth are available along the right side of the image.

**Step 14.** When selecting Translate or Rotate, three direction options will appear for you to utilize.

**Step 15.** Once a direction is selected, select the tooth you would like to move. The tooth will be highlighted in yellow.

**Step 16.** To move the tooth, position your mouse over the red arrows. Click, hold down (arrow will turn yellow) and move the mouse to the position you need.

**Step 17.** If you need to reset the changes, please select the Reset icon at the top left.

**Step 18.** To add attachments use the block or the circle icons as a starting point. Click on the shape you would like to start with and click the location on the tooth you would like it to be on.

**Step 19.** To modify the placement and shape of the attachment zoom in to the particular tooth and attachment by using your mouse controls.

**Step 20.** Use the icons above the model to rotate the block into the tooth or resize.

**Step 21.** When you are happy with the placement, click the Check Mark icon. If you would like to remove the attachment, click the Trash Can icon.

**Step 22.** Please add comments or typed notes for modification requests by clicking on the Notes icon.

**Step 23.** Submit your modifications and notes to the lab by clicking the Submit Modification icon.

**Step 24.** If you need to walk away from the treatment planning for any reason, please click save notes so that you can come back to finish your modification request. Your modification request will not be worked on until you click on “Submit Modification”

**Step 25.** Once you have received an optimal Treatment Plan please click the Approve icon.

**Step 25.** Once you have received an optimal Treatment Plan please click the Approve icon.

**Step 26.** If more notes have been added requesting modifications, the Approve icon will not be available.

**Step 1.** In most cases, fit issues can be addressed without requiring refinements. Please review the following to determine if a refinement is needed.

- a. Recommend to your patient to bite Chewies™ tray seaters each day, until the aligner is seated properly, and the discomfort has disappeared.
- b. Before moving to the next tray, ensure that the current one has expressed the prescribed movement. This may involve extending the wear time.
- c. If discomfort doesn't alleviate, trimming may be required and can be done in your office.
- d. If the issue persists after a week, and it is not caused by non-compliance, contact the Henry Schein team for advanced troubleshooting options before considering requesting a refinement.
- e. If the fit issue cannot be resolved through any of the suggested measures, the case may require refinements.

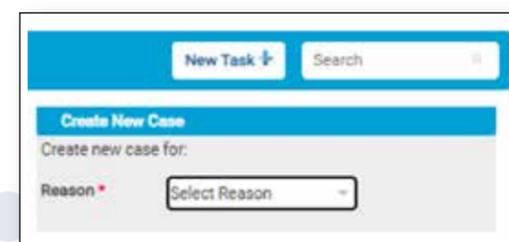
**Step 2.** If a set of aligners is lost or broken, it's essential to find the right solution to continue treatment without affecting the patient's progress. Please review the following to determine if replacements are needed.

- a. Recommend to your patient to bite Chewies™ tray seaters each day, until the aligner is seated properly, and the discomfort has disappeared
  - They should be instructed to wear their new aligners for up to a week longer than usual. This will ensure that all the necessary movement is expressed.
  - Chewie tray seaters can be used to improve the fit
- b. If 2 or more sets have been lost or damaged, you can request replacement aligners.
  - From the outset of treatment, inform the patient to always keep the previously used set in case this happens
  - Ensure that the patient continues to wear their previous set of trays to retain the occlusion until the replacements are available

**Step 3.** For offices that have a direct connection with 3Shape – take the scan of the patient first and send it to your aligner lab.

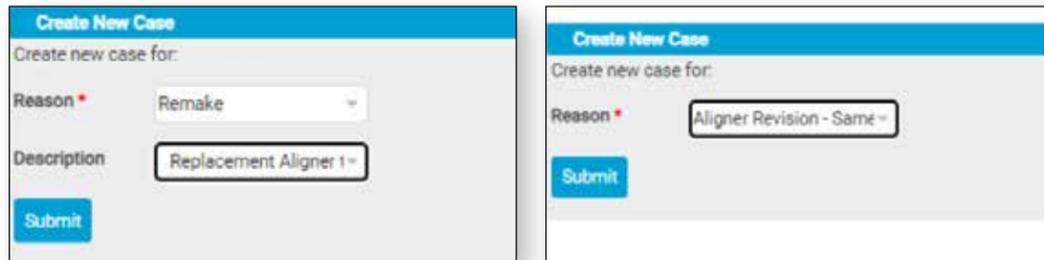
- a. Open DDX and look under Draft cases for the patient.
- b. Select the Refinement, Individual Aligner, or Retainer procedure and proceed to step 9.

**Step 4.** Go to Create New Case on the right-hand side of the page



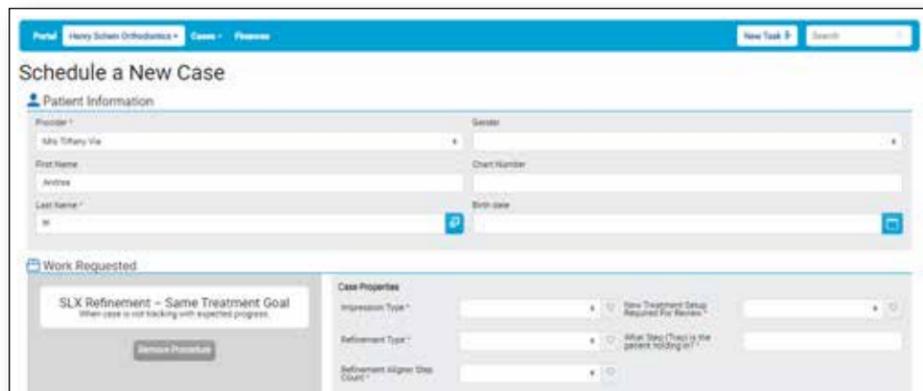
**(For Reveal Plus and SLX Aligners)**

**Step 5. Select if you would like a Refinement, Revision or Replacement Aligners**



**Step 6. Submit**

**Step 7. A new case will open that is linked to the original**



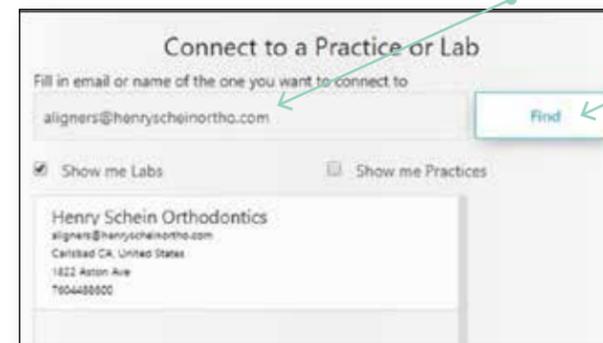
**Step 8. Complete the Work Requested RX form**

**Step 9. Upload new patient records**

**Step 10. Be sure to add notes onto what is not tracking and what, if any, details the lab should pay particular attention too**

**Step 11. Submit**

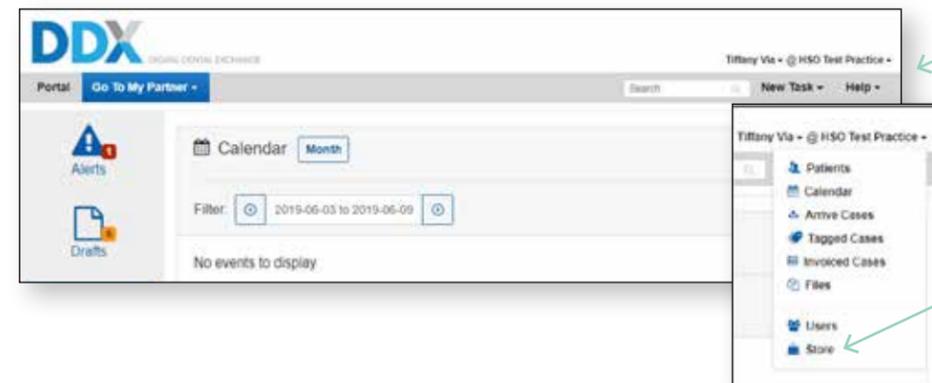
**Step 1. Login to 3Shape Communicate, click on the "Connections" tab and search for your Aligner Lab via the labs main contact email or name**



**Step 2. Under Settings, choose "Lab Connections" and select "Update". The Henry Schein Ortho lab account will appear as a lab on the office's TRIOS**

**Step 3. Logout**

**Step 4. Login to DDX, click on the drop-down arrow on the top right hand side of the page, to choose Store**



Step 6. Scroll down and find TRIOS 3Shape Communicate and click on "Enable"



Step 7. Click on "Configure your add-on"



Step 8. Click on "Authorize" and type in the email and password of your Communicate account



Step 9. Now the two networks are connected! Before performing a TRIOS scan, select SLX Clear Aligners as the receiver and DDX will create a Draft case.

Step 1. Setup the connection:

a. Setup only need to be done one time, and the office can call or email Geoff Crouse for any questions or for step by step help

- Direct Tool Free Number: 1-877-244-9345
- Or Email: Geoff.Crouse@henryschein.com

a. The following outline assumes that the following conditions have already been met:

- Practice has an Emerald scanner and Romexis software installed and connected
- Practice has a Romexis account with Planmeca
- Practice has a DDX account.
- DDX account has Henry Schein Orthodontics established as a lab partner

Step 2. Configure Romexis

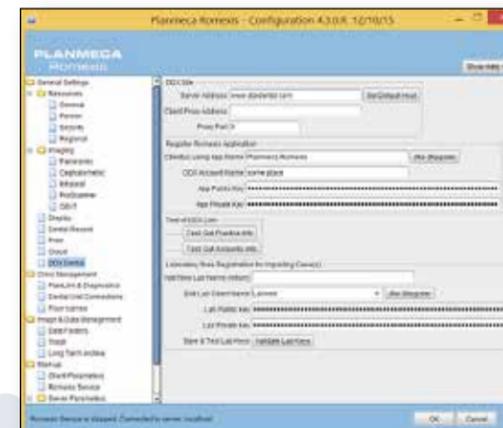
a. Open the Romexis Configuration application

b. Log into the application using the user ID 'sysadm' and password 'promax'



c. Enter settings in the Romexis Configuration application.

d. Navigate the General settings and select DDX Dental



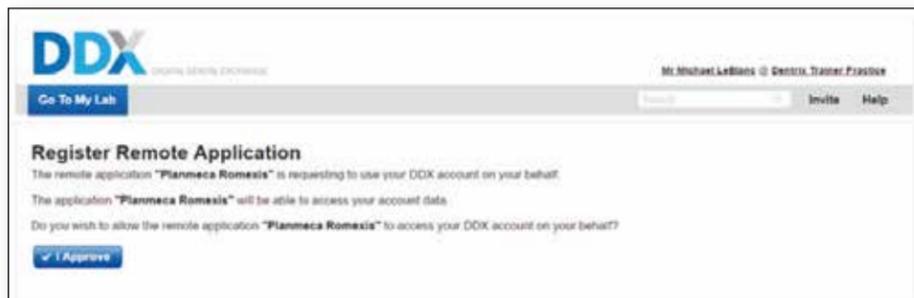
**Step 3. In the settings panel's DDX site group box:**

- a. Enter Server Address: www.ddxdental.com
- b. Click the (Re-)Register button.

**Step 4. DDX will be launched in a web browser**

- a. Click OK on the DDX Connection warning message if it comes up
- b. Approve the Registration of the Remote Application
- c. Login to DDX

**Step 5. On the Register Remote Application page, you will be asked to approve "Planmeca Romexis". Click I approve**



**Step 6. Copy and paste each key from DDX to Romexis**

- a. Tip: Romexis key fields are very specific in two ways:
  - It requires the exact number of characters to paste. Be careful when selecting the key for copying to only select the key. There must not be any extra characters or spaces, before or after, each key
  - You will need to use the keyboard, Ctrl+V to paste. It does not support right click and paste from the contextual menu
- b. In DDX, copy the Remote Application Public Key
- c. In Romexis, paste into the App Public Key
- d. In DDX, copy the Remote Application Private Key
- e. In Romexis, paste into the App Private Key



**Step 7. Test the connection in Romexis**

- a. In Romexis, Click the Test Get Practice Info button.
- b. If the keys are correct you should see a dialogue box with the practices DDX account information displayed.
- c. If correct you can click OK to close the dialogue and then OK again to close the Romexis Configuration application



**Step 8. Save Configuration**

- a. In Romexis, Click the OK button.

**Step 9. Restart the Romexis Services**

- a. Launch the Start Romexis Service application by right clicking and selecting 'Run as Administrator'
- b. Click the Stop Service button
- c. Click the Start Service button
- d. Click Done

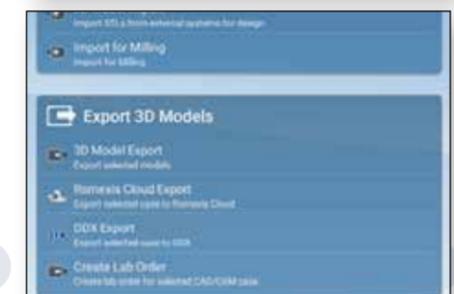


**Step 10. Show DDX Cloud Service Button**

- a. In Romexis, Click Admin button in bottom left
- b. Click the Local Settings tab
- c. In the Send/Receive Images group box:
  - Check the box for Show DDX Cloud Service Button
  - Click the Save button, the OK the the saved confirmation
  - Close and reopen Romexis to activate the DDX button

**Step 11. Case Submission**

- a. Prepare Romexis to export files
- b. Select patient
- c. Enter the CAD/CAM section of Romexis
- d. Select the Patient Case Files
- e. Click DDX Export



Step 12. Click the CREATE DDX RX button in the SEND CASE TO DDX

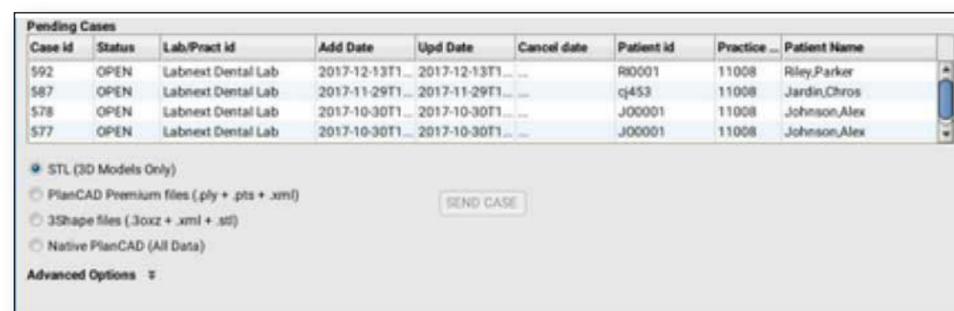
Step 14. DDX will open a new case for you with patient information pre-populated from Romexis

Step 15. Select the aligner procedure and fill out required fields

Step 16. Click Add Files to initiate the upload

Step 17. In the SEND CASE TO DDX window, select STL files

Step 18. Click the SEND CASE button. This starts uploading files to DDX



Step 19. You will see the Upload complete

Step 20. Files will now appear attached to DDX Case

a. **Assurance Plan** is guaranteed refinements for three years calculated by the aligner case invoice date.

b. **Elastic Button Technique (EBT)** is a technique for using buttons and rubber bands as auxiliaries to aligners in order to achieve extrusion. The Clinician will be notified if EBT is recommended on the Treatment Setup, but those recommendations are not required to be accepted by the Clinician and it is up to the Clinician to promptly inform HSI of any necessary changes. If the Clinician approves the Treatment Setup with EBT, directions on the location and timing for EBT will be provided once the aligners have been manufactured. The Clinician must follow directions provided by creating cutouts on aligners in-office and adhering separately purchased buttons to the surface of the teeth near the gingiva. The Clinician has complete choice of what buttons and elastics to use. After aligners have been modified and buttons adhered, the Clinician must instruct patients on proper elastics wear.

c. **Interproximal Reduction (IPR)** is a procedure where the proximal surfaces of the teeth are reduced. This reshaping creates spaces between the teeth to allow them to move more easily during treatment. The Clinician will be notified if IPR is recommended on the Treatment Setup, but those recommendations are not required to be accepted by the Clinician and it is up to the Clinician to promptly inform HSI of any necessary changes. The Clinician will need to notify HSI of any preferences on when to perform IPR when submitting the case or requesting modifications of the treatment plan. If the Clinician approves the Treatment Setup with IPR, directions on the location and timing for IPR will be provided once the aligners have been manufactured. The Clinician has complete choice of what instruments and methods to use for completion of planned IPR. HSI recommends always getting signed consent from the patient before performing IPR.

d. **Treatment Expiration Date** is calculated by the aligner delivery date plus 2 weeks per step, plus 120 days from completion of the final step.

e. **Treatment Setup** is a virtual three-dimensional representation of the patient's expected tooth movement which is used for communicating the orthodontic treatment plan. Treatment Setups include the virtual model and the option for Interproximal Reduction (IPR), Attachments, Cutouts, Elastic Slits, and Elastic Button Technique (EBT) if needed. Prior to approving the final Treatment Setup, the Clinician is requested to thoroughly review the Treatment Setup and request changes or modifications in the DDX Portal. If the Clinician does not approve the Treatment Setup, he/she may cancel the case with no cancellation fees. The Clinician's approval of the customized Treatment Setup is considered a prescription to HSI and HSI's final authorization to manufacture the Henry Schein's Aligners (when medically feasible for extraction cases, HSI recommends Treatment Setup approval prior to performing extractions). Results depicted in Treatment Setup are simulated; actual clinical results may vary and are not guaranteed.

f. **Refinement** – An option if further tooth movement is needed in order to meet the original approved Treatment Setup. Refinements are not an opportunity to modify the original Treatment Setup. HSI will provide the recommended number of aligners to achieve your approved Treatment Setup once appropriate records have been provided. A new Treatment Setup will be only provided for approval if requested. Refinements may only be requested after half the number of steps provided have been used and before the Treatment Expiration Date.

g. **Revision** - An option if the treatment plan needs to be changed by the doctor to achieve new treatment goals.

**reveal**<sup>®</sup>  
CLEAR ALIGNERS

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 **HENRY SCHEIN**<sup>®</sup>  
ORTHODONTICS

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