




RAYSCAN
ALPHA
PLUS 

01 Visible X-ray Guide

The user can conveniently adjust the FOV according to the purpose of the treatment

02 Image Processing Technology

70µm voxel size (4cm diameter) and 6 second reconstruction time (16cm diameter)

03 Specialized for Endodontic Procedures

- Voxel size: 70µm
- Minimum FOV: 4x3cm

04 Fast Scan View a CT Image in Less than 10 Seconds

- Ideal for immediate implant placement validation
- Scan time: 4.9 seconds
- Reconstruction time: 4 seconds
- More accurate, faster, and lower dose than a panoramic acquisition

05 One Shot Ceph

- Fast acquisition to reduce patient movement and image distortion
- Minimize patient dose with a 0.3 second exposure

06 Panoramic

The state of the art technology for high-definition image quality

07 Wireless remote control

Non-directional wireless remote control facilitates your patient positioning easier than ever

08 Various options for your practice

- 13x10cm or 16x10cm maximum FOV options
- 3 different cephalometry options including One Shot Ceph



& Rayguard Protection

Real-time monitoring to ensure optimal functionality



01 Visible X-ray Guide

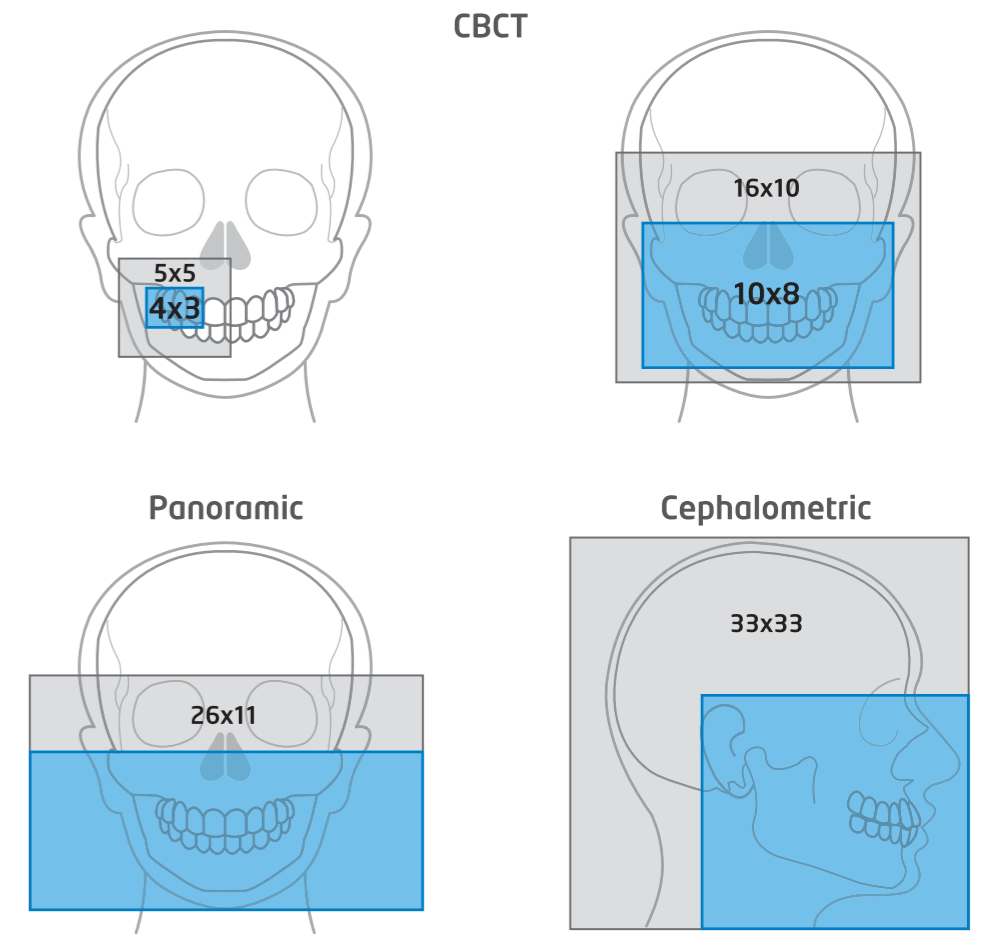


Visible X-ray Guide indicates the location of the area to be scanned.

The user can conveniently adjust the FOV according to the purpose of the treatment.

Dose Reduction

See where you focus
Light guided free FOV

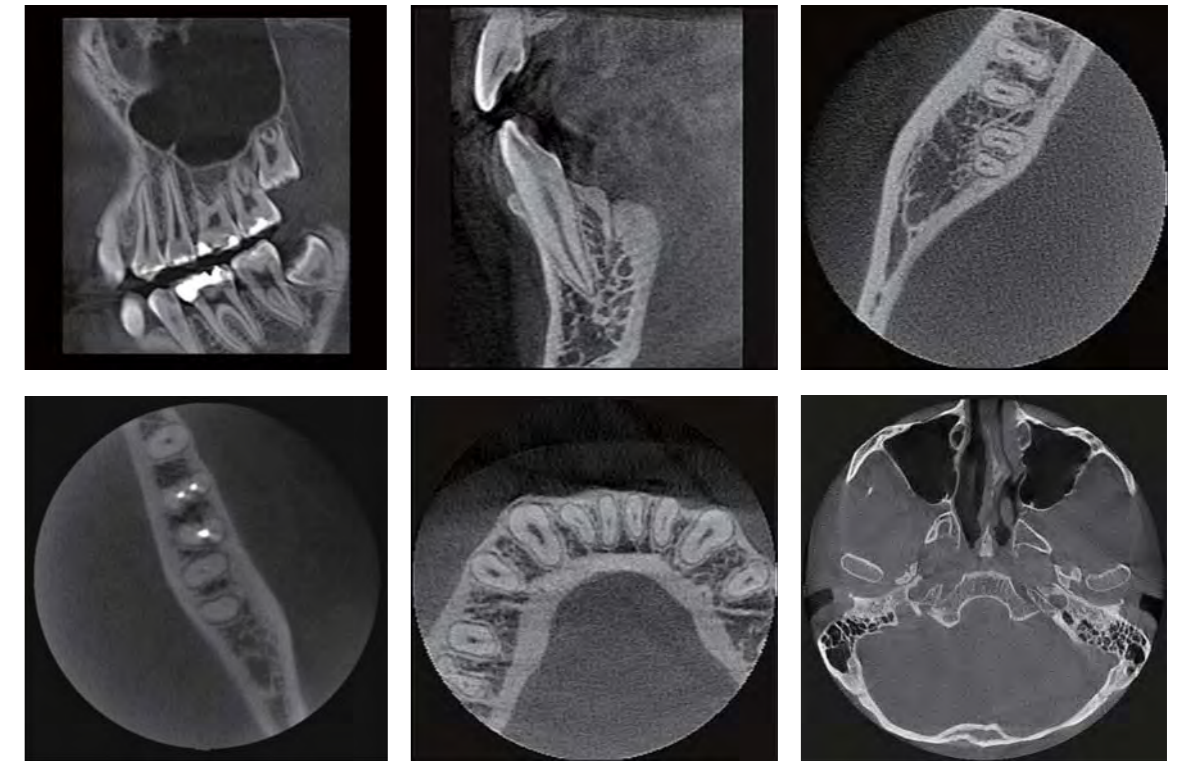


01 Visible X-ray Guide - Free FOV



The user gets the right image the first time and makes it more comfortable for the patient.

Consistently easy to position the patient for any image.
Choose the appropriate size for any procedure.
Keep the ALARA principle and reduce liability.



02 Image Processing Technology

When you need to scan faster...

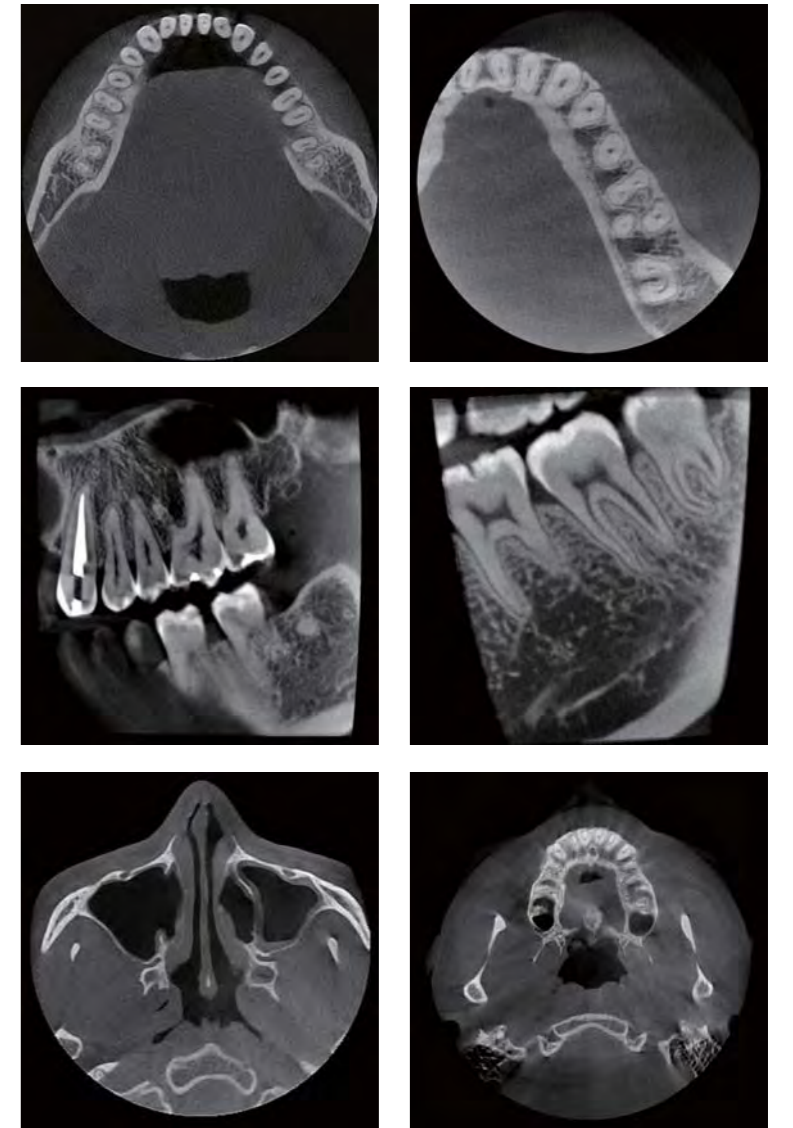
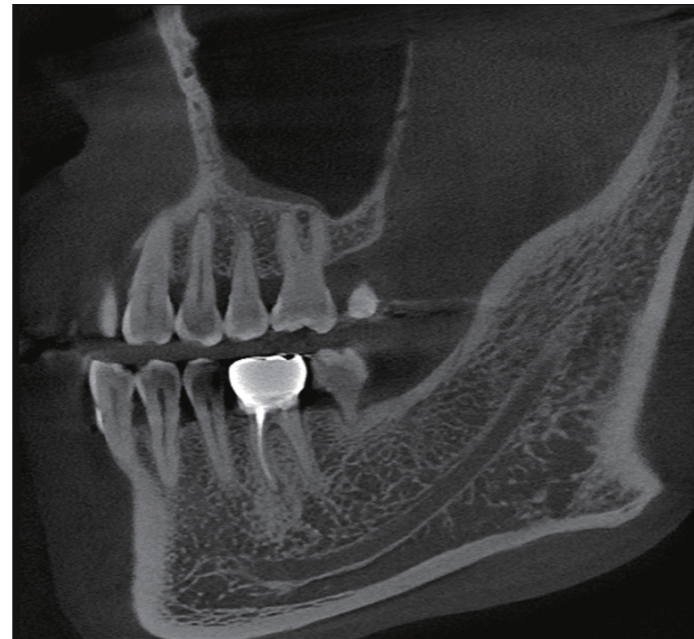
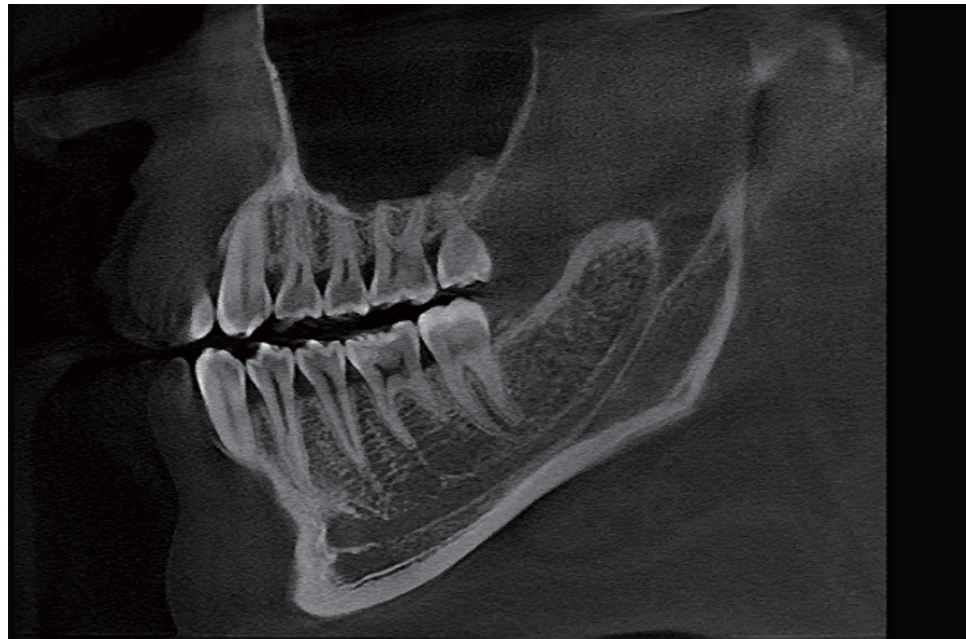
Down to **4.9 second scan** and **4 second 3D reconstruction** !

When you need to see more detail...

Up to **70 μm** with a **focused field of view** !

When you need to see more anatomy...

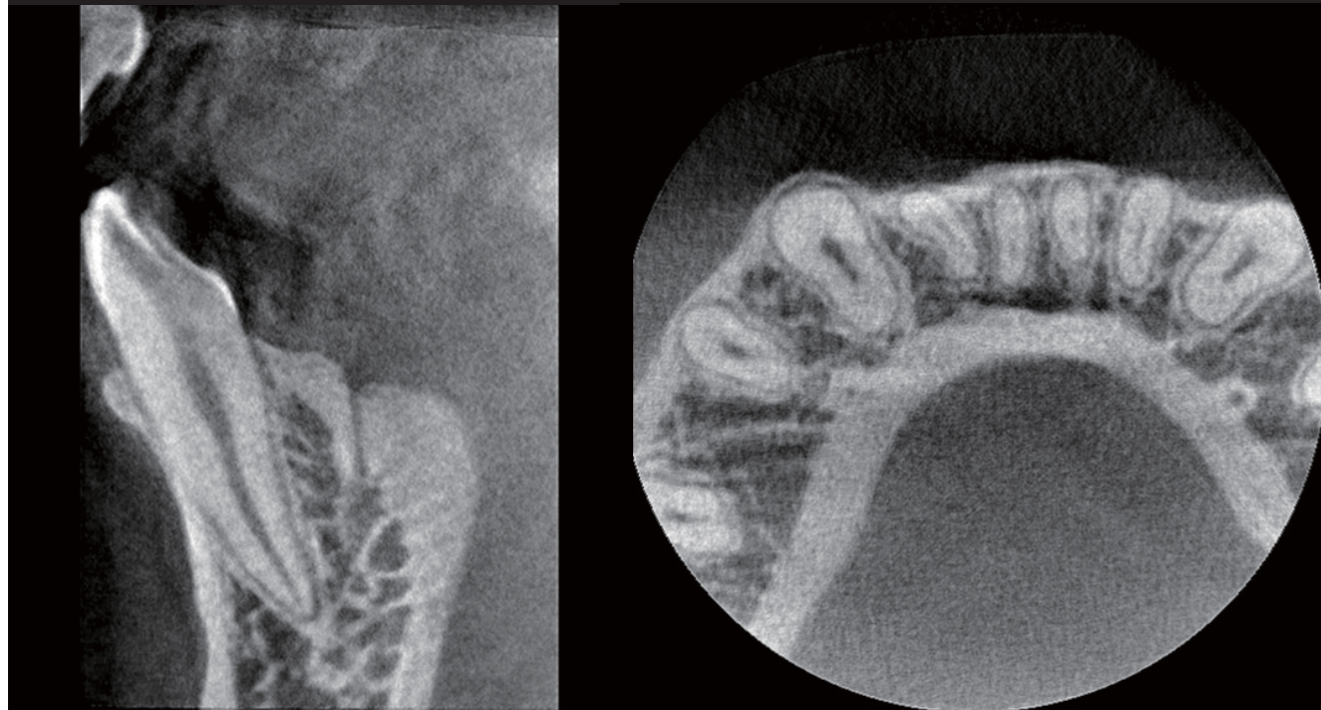
Up to **16 cm** diameter field of view reconstructed in **6 seconds** !



03 Specialized for Endodontic Procedures

Scan and reconstruct at 70 μm with a focused field of view for precise endodontic cases

Highest Resolution Dental CBCT Images

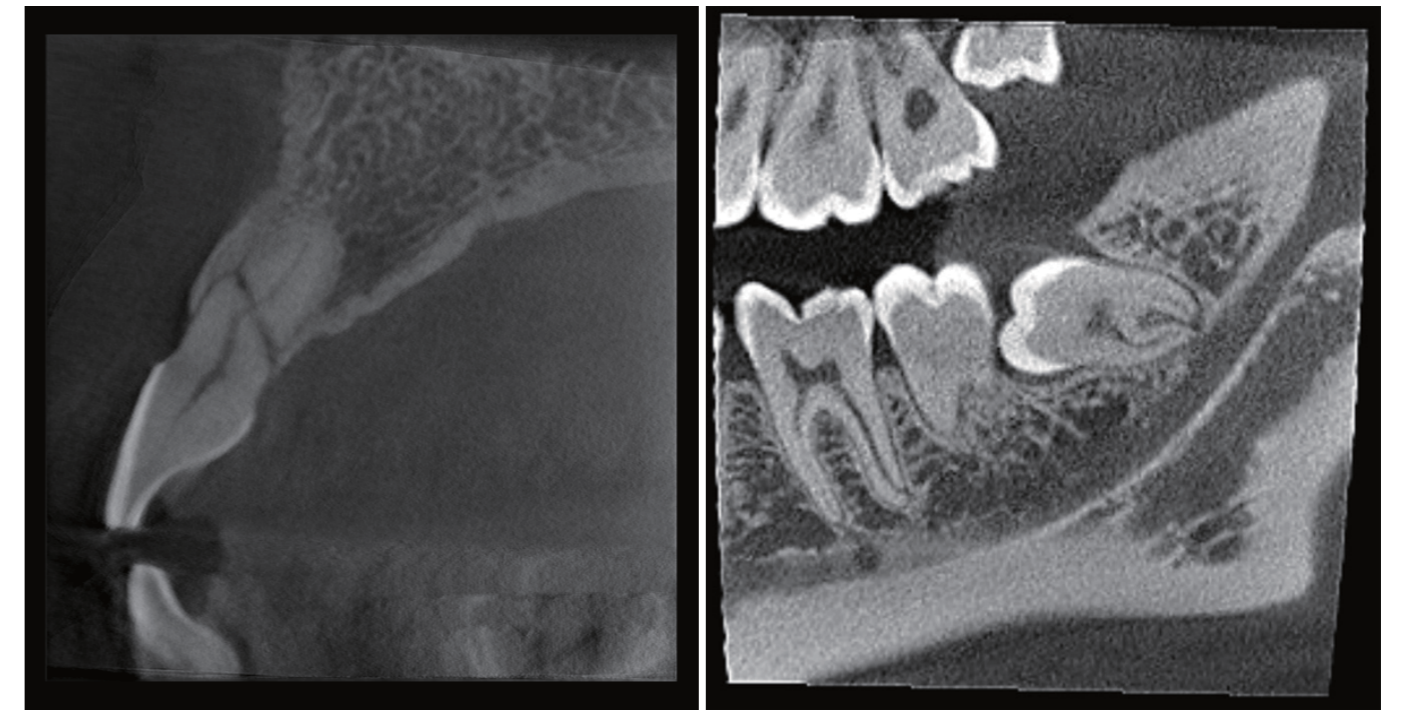


More Detail, More Confidence, More Procedures

See more detail using a high-resolution CT image in a specific area.

Have more confidence before, during, and after the procedure with increased awareness.

Do more procedures in less time.



04 Fast Scan View a CT Image in Less than 10 Seconds

Scan your patients faster than ever before!

"66% faster scans" is ideal for implant placement validation and for patients that cannot hold still.

"Fast scan mode" radiation dose is only **22.9 μSv**

2D
Panoramic

18s

14 second scan,
4 second image processing
& save



3D
Alpha Plus (Fast scan mode)

9.9s

4.9 second scan,
4 second reconstruction,
1 second save

V
S

Fast scan
4.9 seconds

3D Reconstruction
4.0 seconds

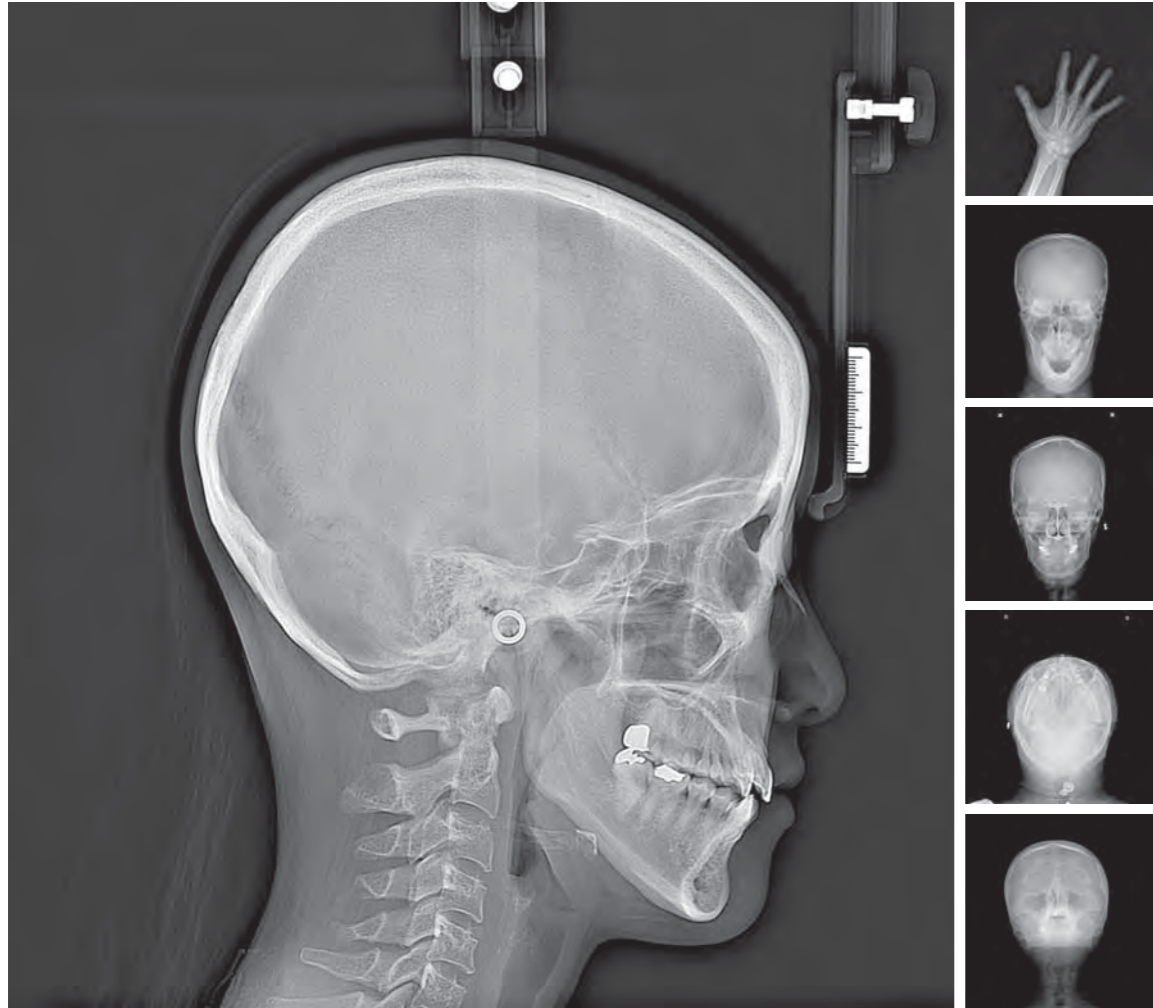
Save
1.0 second

Total time
9.9 seconds



05 One Shot Ceph

One Shot Cephalometric Imaging acquires images in less than 1 second to reduce image distortion !



Choose from two sizes of one shot cephalometric sensors. A scanning ceph is also available for a smaller overall unit footprint.

One Shot Cephalometry

Our cutting-edge Flat Panel Detector (FPD) provides a new level of performance and reliability while reducing radiation exposure and image distortion due to patient's movement. Two different sizes of FPD are available.



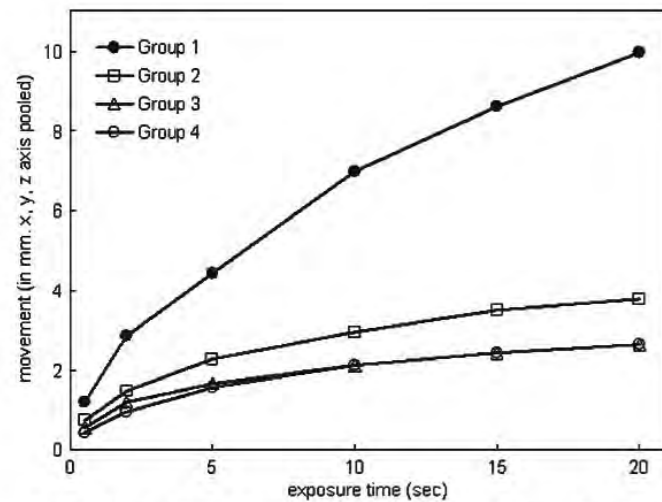
Scanning Cephalometry

Our scanning ceph module allows clinicians to upgrade their diagnostic capabilities while keeping costs to a minimum.



05 One Shot Ceph

Longer exposure times can result in greater movement during acquisition of cephalometric radiographs. Because patient movement was more significant in children, a shorter exposure time is recommended in order to get a good quality cephalometric image for pediatric patients.



Group 1 : 9 to 12 years old
Group 2 : 13 to 19 years old
Group 3 : 20 to 25 years old
Group 4 : 26 to 30 years old

Group 1 represents the main patients of orthodontic treatment and should not be imaged with a scanning ceph due to risk of patient movement.

Fig 5. The amount of the subjects' movements. The youngest group shows larger increasing proportion of the movements compared to other groups.

"Quantitative Evaluation of Patient Movement during Simulated Acquisition of Cephalometric Radiographs", Kyung-Hoe Huh, Erika Benavides, Young-Tak Jo, Bo-Ram Choi, Won-Jin Yi, Min-Suk Heo, Sam-Sun Lee, and Soon-Chul Choi, Journal of Digital Imaging, Vol 24, No 3 (June), 2011: pp 552Y559



Small variations (1 to 2 mm) in the identification of certain landmarks can lead to different angular measurements. Regarding diagnosis, in 56% of the cases skeletal classification was changed and in 52% of the cases malocclusion classification was altered, after evaluating the LCR.



Fig 1. The subject positions at the digital lateral cephalometric X-ray equipment. The optical marker is attached to the subject's chin.



Fig 2. Optical tracker (Polaris Vicra System, Northern Digital, Waterloo, Canada).

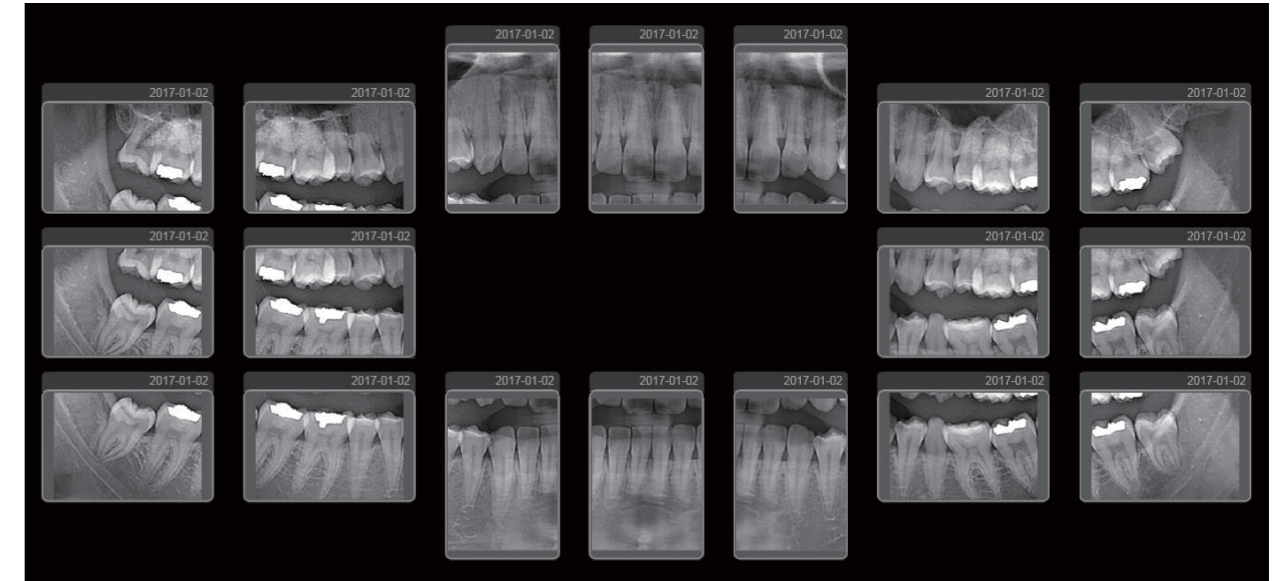
"The influence of using 2D cephalometry on orthodontic treatment outcome"
 Conference: 14th Congress of the European Academy of Dento-Maxillofacial radiology, At Cluj-Napoca

06 Panoramic

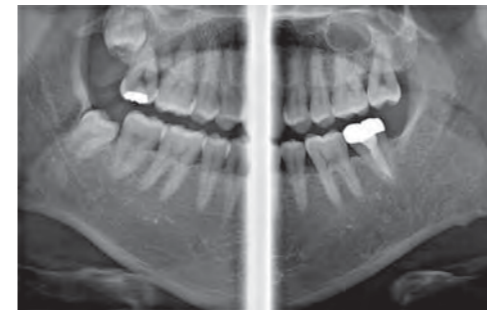
The state of the art technology for high-definition image quality



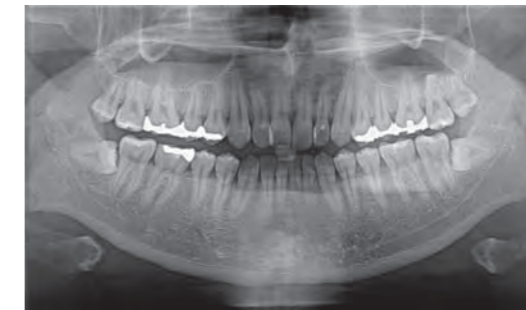
FMX(Full Mouth X-ray), extracting from a panoramic image



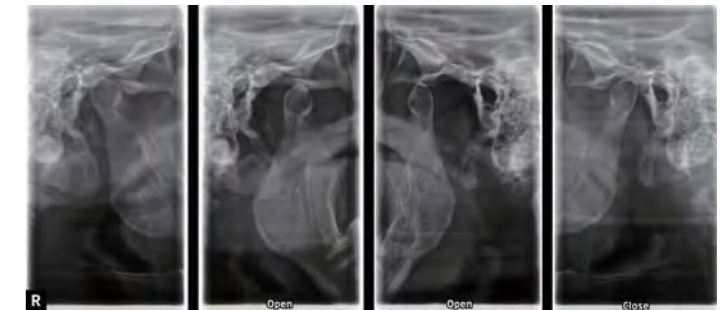
Bitewing



Orthogonal



TMJ



07 Wireless remote control

Non-directional wireless remote control facilitates your patient positioning easier than ever.



Type of Patient / Protocol

Column Up, Down

Canine beam adjustment (Pano mode)
Pre motion (CT mode)

Laser beam on, off
LED lighting guide on, off
90° Rotation

Collimator adjustment

Ready / Cancel

08 Various options for your practice

13x10cm or 16x10cm maximum FOV options

3 different cephalometry options including One Shot Ceph

Specifications are subject to change without prior notice.

RAYSCAN α+ (Model : RCT700)

Type	Panoramic, Cephalometric, Cone Beam CT				
Patient positioning	Standing (wheelchair accessible)				
Focal spot	0.5				
Tube current	4~17mA				
Tube voltage	60~90kVp				

	α+ 160	CBCT	Panoramic	α+ 130	CBCT	Panoramic
Detector type		CMOS	CMOS		CMOS	CMOS
FOV / Image size		Max. 16x10cm	Max. 15cm (H)		Max. 13x10cm	Max. 14.4cm (H)
Free FOV support		Yes	Yes		Yes	Yes
Voxel size		70~400μm			70~400μm	
Exposure time		4.9~14sec	6.2~13.9sec		4.9~14sec	6.2~13.9sec

	Cephalometric (Option)		
Type	SC (Scanning Ceph)	OCL (One shot Large)	OCS (One shot Standard)
Detector type	CdTe detector	a-Si TFT	a-Si TFT
Image size	Max. 26x24cm	Max. 33x33cm	Max. 30x25cm
Exposure time	3.7~18.2sec	0.2 / 0.3 / 0.5sec	0.3 / 0.8sec

Real-time IoT Service

- RAYSCAN for 24/7 monitoring
- Real-time healthy check & Preventive alerts
- Remote upgrade for the latest software and firmware

No matter where you are
Rayguard IoT

& Rayguard Protection

Real-time monitoring to ensure optimal functionality

Rayguard is a real-time monitoring service to take care of your RAYSCAN 24/7. It provides peace-of-mind by resolving your issues before you even reports it. What you get is immediate technical support.

SerialNumber	ConnectStatus	AlertStatus	AlignStatus	QCStatus	Model	Owner	Operator
RA100000	Disconnected	OK	OK	OK	Alpha MSDG	마음다운 치과	Mr.Kim
RA100001	Disconnected	OK	OK	OK	Alpha PP		Mr.Park
RA100002	OK	OK	OK	OK			
RA100003	Unknown	Error	OK	OK			
RA100004	Unknown	OK	OK	OK			
RA100005	Unknown	OK	OK	OK			
RA100006	Unknown	OK	OK	OK			
RA100007	Unknown	OK	OK	OK			
RA100008	Disconnected	OK	OK	OK			

Version	Acquisition	Warranty
RAYSCAN 2.4.2.0	IM CT	Expired CT 2016-08-18 00:00:00.000
THU 2.4.2.2.614	IM Ceph	Expired Ceph 2016-08-18 00:00:00.000
Prime	IM Pano	Expired Pano 2016-08-18 00:00:00.000
Sub		
LCeph		
GigaBoard		
Inverter		
	Term	24 Years



IDEA BRONZE



REDDOT WINNER



GD BEST OF BEST



GD AUSTRALIA



RBS-AP03 (rev.1)
Design and specifications
are subject to change
without notice

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please visit **www.raymedical.com**
or contact your local representative.

