

# Digital Lab Coordinator Starter Guide

A practical training manual for modern orthodontic offices using scans, 3D printing, appliance workflows, lab communication, and digital case tracking.

## The Digital Lab Flow



## CORE GUIDE #18

# Roadmap Check-In: The Original 30 Is Still On Track

This guide completes the 18 core paid guides. The 12 mini guides come next in the original order and can be sold as lead magnets, bonuses, or lower-ticket downloads.

## Completed Core Guides 1-18

The library has been built in order from career entry through clinical assisting, records, sterilization, OSHA, advanced assisting, front desk, phone scripts, customer service, treatment coordination, consultation, same-day starts, insurance, financial coordination, office management, onboarding, and now digital lab coordination.

- This guide is #18 and closes the core paid guide set.
- After this, the workflow moves into the 12 mini guides.
- Pins can be built in batches using inside-page screenshots after guide groups are complete.

## Mini Guides Still Ahead

The mini guide list remains intact: Office Roles, Ortho Vocabulary, Dental Anatomy, Braces/Wires/Bands/Elastics, Retainers/Headgear/Instructions, Emergencies/Repair Prevention, Upset Patients, Pending Follow-Up/Observation Recall, Insurance Terms, Collections Scripts, Busy Season Prep, and New Year Practice Planning.

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# What This Guide Covers

A digital lab coordinator needs more than tech curiosity. The role requires organization, safety awareness, clean handoffs, and the ability to protect the workflow from scan to delivery.

## Part 1: Role + Workflow

- What the digital lab coordinator does
- How the digital lab supports the clinical team
- Scan → design → print → process → deliver
- Scope boundaries and documentation habits

## Part 3: Safety + Quality

- PPE, SDS, and resin handling awareness
- Infection control for lab-related items
- Quality checks and remake prevention
- Equipment maintenance and troubleshooting

## Part 2: Technology + Case Flow

- Scanner and file basics
- Case tracking and naming rules
- 3D printer queue management
- Resin/material awareness
- Post-processing and appliance finishing

## Part 4: Training Tools

- Daily/weekly lab rhythm
- Case tracker worksheet
- Lab request form
- Trainer sign-off ladder
- 30-day growth plan and final readiness checklist

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# 1. What Is a Digital Lab Coordinator?

A digital lab coordinator helps the practice turn digital records into organized, trackable, usable lab outputs. This may include models, retainers, aligner-related workflow, indirect bonding trays, scan files, appliance handoffs, or outsourced lab communication depending on the office.

## The Simple Definition

A digital lab coordinator is the person who keeps the digital side of the orthodontic lab moving. They help prevent files from getting lost, prints from being delayed, appliances from being mislabeled, and clinical teams from guessing where a case stands.

## The Role Is Not Just “Printing Stuff”

A strong digital lab coordinator understands that every digital case is connected to a patient, a treatment timeline, a clinical appointment, and a delivery expectation. The job is technical, but the purpose is patient care and office flow.

- Organize incoming scan files and lab requests.
- Prepare or route files according to office protocol.
- Track print status, post-processing, packaging, and delivery.
- Communicate delays early so the schedule can adjust.

## Office Reality Check

The best digital lab coordinator is not always the person who knows the most software on day one. It is often the person who is organized, careful, teachable, and willing to follow a process exactly until they understand why it exists.

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## 2. Why This Role Matters Now

Orthodontic offices are becoming more digital. Scans, 3D printing, in-house appliance workflows, and digital case tracking can save time only when the workflow is controlled.

### Digital Tools Create Digital Responsibility

A scanner, printer, washer, curing unit, and software platform can make an office faster. But they can also create new problems: missing files, wrong material selection, failed prints, unclear approvals, poor labeling, and appliances that are ready too late.

### The Coordinator Protects the Clinical Schedule

When the digital lab runs smoothly, clinical team members can stay focused on patients. When the lab workflow breaks down, the schedule feels it: debond retainers are delayed, new aligner cases are not ready, tray delivery gets pushed, and patients lose trust.

- A ready appliance helps appointments start on time.
- A tracked case reduces remake confusion.
- A clean handoff helps the clinical team explain next steps confidently.

### Training Barrier Can Be Lower Than People Think

Some offices can train a digital lab person when they already have strong organization, basic tech comfort, and willingness to follow manufacturer instructions. The role can become a powerful entry point into orthodontic office systems.

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## 3. The Digital Lab Workflow Map

Think of the digital lab as a chain. Each step must be clean enough to protect the next step.

### Step 1: Receive the Request

The workflow begins when the doctor, assistant, treatment coordinator, or records team requests a lab item. The coordinator confirms the patient name, due date, appointment date, appliance type, scan status, doctor instructions, and any special notes.

### Step 2: Confirm the File

Before a case enters production, the coordinator verifies that the scan, file, or model is present and usable. If the file is missing, mislabeled, distorted, or incomplete, the case should not silently move forward.

### Step 3: Produce and Track

The coordinator routes the case through design, print, wash, cure, trim, polish, package, label, and delivery. Each status change should be trackable enough that another team member can understand where the case stands.

- Received
- Ready for design or review
- Queued to print
- Printed
- Post-processed
- Finished/packaged
- Delivered or ready for appointment

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## 4. Digital Lab Vocabulary for Beginners

New hires do not need to master every system in one day. They do need to learn the words the team uses every day.

### Scan

A digital impression captured with an intraoral scanner. The scan may be used to create models, aligner workflows, retainers, appliances, or other records depending on office systems.

### Resin / Material

The material used by many dental 3D printers. Different products can require different resins, handling steps, wash times, cure times, and safety procedures.

### STL / 3D File

A common 3D file format used to represent a digital model. Offices may also use proprietary files depending on the scanner and software platform.

### Post-Processing

The steps after printing. This may include washing, curing, removing supports, drying, trimming, polishing, inspection, and packaging depending on the product and manufacturer instructions.

### Build Platform

The printer surface where the model or appliance is created. Platform size affects how many items can print at once.

### Handoff

The transfer of a completed case to the clinical team, doctor, front desk, or patient appointment flow. A good handoff includes status, location, label, and any special notes.

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# 5. Scope, Supervision, and Safety Boundaries

This guide is built for support, organization, and training awareness. It does not replace state law, office policy, doctor direction, manufacturer instructions, or required certification.

Plain-language rule: do not guess your way into a clinical duty. If a task touches patient care, patient records, radiographs, appliance adjustment, or a procedure with legal requirements, check the office protocol and state rules first.

## What the Coordinator Can Often Support

- Case organization and tracking
- File labeling and workflow status updates
- Printer queue management under protocol
- Post-processing tasks allowed by the office and manufacturer instructions
- Packaging, labeling, and handoff preparation
- Communication with vendors or labs under office policy

## What Must Be Verified Locally

- Who may take scans or radiographs
- Who may adjust, deliver, or alter appliances
- Who may make patient-care decisions
- Who may access protected health information and under what purpose
- Which materials and devices the office is approved/trained to use



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## 6. Patient Data and File Hygiene

Digital lab work is still healthcare work. A file name, scan, model, prescription, chart note, and appliance label can all connect back to a real patient.

### Use the Minimum Needed Information

Keep file and label details useful but not excessive. The lab needs enough information to produce and deliver the correct item, not unnecessary private details.

### File Naming Rules

Each office should choose a format and stick to it. A practical format might include patient initials or approved identifier, appliance type, date, and stage. Avoid random names like “scan final final 2.”

- Example: LAST-FIRST\_initials\_appliance\_date\_due
- Example: SMITH\_J\_Retainer\_2026-04-20\_Due-05-03
- Use the office-approved privacy format.

### Digital Storage Habits

Do not leave files on random desktops, personal drives, personal email, or unsecured devices. Follow the practice’s storage, access, backup, and deletion rules.

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## 7. Scan Intake and Case Verification

The scan intake step protects the rest of the workflow. If the scan is wrong or the request is unclear, every step after it becomes weaker.

### Before Accepting a Case

- Confirm patient name or approved identifier.
- Confirm appliance or output requested.
- Confirm due date and appointment date.
- Confirm the scan exists and is attached or accessible.
- Confirm whether doctor approval/design review is required.
- Confirm special instructions before production.

### Common Scan Intake Problems

Missing scan, wrong patient, incomplete arch, bite not captured, unclear margins, distorted anatomy, wrong file exported, no due date, duplicate requests, or request entered without doctor approval.

### Professional Pause Script

"I want to make sure this is built correctly. I have the request, but I need to confirm the scan/file and due date before I move it into production."

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## 8. Case Tracker System

The digital lab should have a simple way to answer one question at any time: where is this case right now?

### Minimum Tracker Fields

- Patient approved identifier
- Appliance or product type
- Scan date
- Request date
- Due date
- Appointment date
- Status
- Assigned team member
- Doctor approval needed?
- Notes

### Helpful Status Examples

- Request received
- Need scan/file
- Need doctor review
- Ready to print
- In print queue
- Printed
- Washed/cured
- Trimmed/polished
- Packaged
- Delivered to clinic
- Remake needed

### Status Language

Use short, consistent statuses so everyone knows what they mean. Avoid vague statuses like “working on it.”

### The Rule

If the status is not updated, the team cannot trust the tracker. A simple tracker used every day beats a fancy tracker nobody updates.

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## 9. Printer Queue Management

The printer queue is where organization becomes money and time. A good coordinator understands priority, platform space, material selection, and due dates.

### Queue Priority Questions

- Which items are needed for tomorrow's appointments?
- Which cases have doctor approval already?
- Which material/resin is required?
- Can multiple compatible items print together?
- Is the platform clean and ready?
- Is there enough material to complete the print?

### Do Not Print Blind

Printing without confirming file, material, orientation, due date, and approval can waste time and supplies. When the coordinator feels rushed, the checklist becomes even more important.

### Queue Communication Script

"This case is in the print queue for today. I'll update the tracker after printing and post-processing, and I'll flag the team if there is a delay."

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# 10. Resin and Material Awareness

Different products may require different materials, handling steps, wash/cure settings, storage rules, PPE, and manufacturer instructions.

## Material Is Not Interchangeable by Guesswork

A model resin, surgical guide resin, splint resin, aligner-related resin, or appliance resin may have different intended uses and instructions. The coordinator should use only the material approved by the office for that product and follow the manufacturer's instructions.

## Before Using a Material

- Confirm product type and intended use.
- Check expiration date if applicable.
- Check storage requirements.
- Check printer and software compatibility.
- Check wash/cure instructions.
- Check PPE and SDS requirements.
- Confirm whether direct patient contact is involved.

## Safety Mindset

Resin handling is not casual craft work. Treat materials as professional dental/medical workflow supplies, not general art supplies.

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# 11. Printing Quality Checks

Quality control begins before printing and continues after the item comes off the platform.

## Pre-Print Quality Check

- Correct patient/case selected
- Correct file orientation
- Correct product type selected
- Correct material selected
- Build platform clean
- Enough resin/material available
- Printer status normal
- Estimated time fits due date

## Post-Print Quality Check

- No obvious distortion
- No missing anatomy or broken section
- No excessive support damage
- No incomplete print areas
- No labeling mismatch
- No visible contamination
- Ready for required wash/cure/finish steps

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## 12. Wash, Cure, Dry, and Finish

Post-processing is not “extra.” It is part of the production process. Follow the manufacturer’s instructions and office protocol every time.

### Post-Processing Awareness

Depending on the item and material, post-processing may include removing the item from the platform, draining, washing, drying, curing, support removal, trimming, polishing, inspection, and storage.

### Common Mistakes

- Skipping wash/cure instructions
- Mixing materials without clearing the process
- Over-trimming or damaging anatomy
- Not wearing required PPE
- Not labeling the item before it leaves the lab
- Not documenting a failed print or remake

### Professional Finish Standard

Finished items should be clean, labeled, organized, and ready for the clinical team. The patient should never feel like the office is scrambling behind the scenes.

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# 13. Retainers and Appliance Flow

In many orthodontic offices, the digital lab supports retainers or other appliances that connect directly to patient delivery appointments.

## Retainer Workflow Basics

- Confirm appliance type and arch.
- Confirm current scan/model.
- Confirm due date and delivery appointment.
- Produce model or required file output.
- Complete thermoforming/finishing if allowed and trained.
- Trim/polish according to office standard.
- Package and label before handoff.

## Patient-Facing Impact

A delayed retainer can affect patient satisfaction and treatment stability. The coordinator may not be delivering the retainer chairside, but the lab flow still affects patient experience.

## Handoff Script

"The retainer case is complete and packaged. It is labeled with the approved identifier, arch, date, and delivery appointment. It is ready in the designated pickup location."



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# 14. Trimming, Polishing, and Finishing Awareness

Finishing is where rough output becomes clinic-ready. This step requires training, safe tool use, eye protection, dust/control awareness, and office-specific standards.

## The Goal of Finishing

The goal is not speed first. The goal is safe, clean, consistent, patient-ready output. A finished appliance or model should match the office's standards for comfort, quality, and presentation.

## Finishing Checklist

- Correct case and appliance confirmed
- Edges inspected according to office standard
- No sharp or rough areas if applicable
- No cracks or distortion
- Polished/finished as trained
- Cleaned according to office protocol
- Packaged and labeled before delivery

## When to Stop

Stop and ask for review if you see cracks, warping, fit concerns, unclear anatomy, wrong arch, wrong label, or any issue that could affect patient comfort or clinical outcome.

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# 15. Digital Design and Doctor Review

Some digital workflows require doctor approval or design review before printing, ordering, or delivering. The coordinator must know when approval is needed.

## Know the Approval Gate

The approval gate is the step where a doctor or authorized team member reviews the plan, design, or file before production continues. Skipping this gate can create clinical risk and remakes.

## Coordinator Responsibilities

- Know which case types need approval.
- Keep “pending review” cases visible.
- Avoid printing or ordering before approval when required.
- Document approval status according to office protocol.
- Follow up respectfully when a deadline is approaching.

## Follow-Up Script

“This case is due for delivery on Thursday and is still marked pending review. Would you like me to hold it, route it for review, or update the appointment team?”

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# 16. Outsourced Lab and Vendor Communication

Not every office produces everything in-house. A digital lab coordinator may also track outsourced cases, vendor portals, shipping, and return dates.

## Outsourced Case Checklist

- Vendor name and portal/location
- Case submitted date
- Expected return date
- Tracking/shipping details
- Doctor approval status
- Patient appointment date
- Special instructions
- Confirmation of receipt

## Vendor Communication Rules

Be clear, professional, and factual. Include the information the vendor needs, but do not overshare private information. Follow office policy for what can be sent and where.

## Delay Script

"The vendor return date may affect the delivery appointment. I'm confirming status now and will update the schedule team if the case cannot arrive on time."

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# 17. Infection Control in the Digital Lab

Digital lab items can still move between patient-contact areas, equipment, and work surfaces. Safety habits matter even when the work feels technical.

## Clean vs. Dirty vs. Unknown

A digital lab coordinator should know whether an item is clean, dirty, disinfected, processed, or unknown. If status is unknown, treat it as not ready until the correct protocol is followed.

## Lab Infection-Control Habits

- Use PPE according to task and office policy.
- Separate clean and contaminated items.
- Follow surface disinfection protocol and contact time.
- Follow manufacturer instructions for reusable equipment.
- Use single-use barriers/items only as intended.
- Do not place contaminated items in clean storage.

## Scanner/Technology Handoff

If scanner tips, accessories, or digital equipment are involved, follow the office and manufacturer protocol for barriers, cleaning, disinfection, or sterilization. Do not improvise around patient-contact devices.

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# 18. Chemical, Resin, and SDS Awareness

Lab materials can create chemical-safety responsibilities. The coordinator should know where Safety Data Sheets are stored and how the office expects materials to be handled.

## SDS Basics

A Safety Data Sheet explains hazards, handling, storage, PPE, spill response, first aid, and disposal information for a chemical product. New hires should know where SDS information is kept and who to notify when a product concern occurs.

## Material Handling Habits

- Wear required gloves/eye protection.
- Keep containers closed when not in use.
- Avoid skin contact with uncured resin or chemicals.
- Label containers according to office policy.
- Do not mix products unless protocol allows it.
- Report spills, exposure, or unusual odor immediately.

## Do Not Guess Disposal

Used resin, contaminated materials, sharps, or chemical waste may require specific disposal. Follow SDS, manufacturer instructions, and office policy.

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# 19. Equipment Maintenance Rhythm

Digital lab equipment becomes reliable when maintenance is routine. A coordinator should help the office protect uptime.

## Daily Checks

- Printer clean and ready
- Build platform inspected
- Resin/material level checked
- Washer/cure unit ready
- Tools returned to place
- Finished cases moved out of production area
- Tracker updated before leaving

## Weekly Checks

- Clean workspace reset
- Inventory counted
- Maintenance log reviewed
- Failed print trends reviewed
- Materials checked for expiration/storage
- Pending cases reviewed with clinical schedule

## When to Escalate

Escalate repeated failures, unusual printer noise, software errors, material contamination, damaged equipment, blocked washer/cure workflow, or anything that could affect patient-facing deadlines.

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## 20. Handoffs to Clinical, Front Desk, and Doctor

A completed lab item is not complete until the right person knows it is ready and where to find it.

### Clinical Handoff

Tell the clinical team the item is ready, where it is located, what appointment it belongs to, and whether there are special notes or doctor review items.

### Front Desk Handoff

If a delivery appointment may need scheduling, rescheduling, confirmation, or patient communication, the coordinator should inform the appropriate front desk or scheduling team according to office process.

### Doctor Handoff

When doctor review is required, keep the note simple: case type, due date, patient appointment date, what needs approval, and what decision is needed.

- Do not overload the doctor with unrelated details.
- Do not hide delays.
- Do not mark complete before review if review is required.

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# 21. Daily Digital Lab Rhythm

A strong coordinator does not wait for chaos. They check the system before the day gets away from them.

## Morning Review

- Review today's and tomorrow's delivery appointments.
- Check pending cases and printer queue.
- Confirm doctor review items.
- Identify urgent cases before clinic starts.
- Flag missing scans or files early.

## End-of-Day Closeout

- Clear completed cases from active queue.
- Confirm tomorrow's lab items.
- Clean/reset workspace.
- Update maintenance or issue log.
- Leave notes for next team member.

## Midday Reset

- Update tracker status.
- Move finished items to correct location.
- Check print/post-processing timing.
- Communicate delays before end of day.

## The Standard

The lab should not depend on one person's memory. It should depend on a visible process.



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## 22. Weekly Lab Review

Weekly review turns the digital lab from reactive to organized. It helps identify bottlenecks before they become appointment problems.

### Weekly Review Questions

- How many cases were completed?
- How many remakes happened and why?
- Which printer/material issues repeated?
- Were any delivery appointments affected?
- Were any scan/file issues common?
- Are supplies low?
- Do any SOPs need updating?

### Remake Tracking

Every remake should have a reason. Not to blame someone, but to prevent the same problem from repeating. Categories might include scan issue, file issue, print failure, material issue, fit issue, wrong label, late request, or unclear instruction.

### Team Communication

A five-minute weekly review between the coordinator, clinical lead, and office manager can save hours of confusion later.

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## 23. Troubleshooting Without Panic

Troubleshooting is not guessing. It is observing, isolating the issue, checking protocol, and escalating when needed.

### If a Print Fails

- Do not throw away evidence before documenting.
- Check file, orientation, material, platform, printer status, and recent maintenance.
- Log the failure reason if known.
- Notify the right person if timing is affected.
- Do not restart blindly if the issue may repeat.

### If a File Looks Wrong

- Pause production.
- Confirm patient/case identity.
- Check whether the scan is complete.
- Ask for clinical review if quality is questionable.
- Update tracker to “needs review” or “needs file.”

### If a Case Is Late

Communicate before the appointment is at risk. The front desk or clinical team needs time to adjust the schedule or patient conversation.

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## 24. Quality Assurance Matrix

Use this matrix to decide whether a case is ready, needs review, or must be remade.

### Ready

The case has correct identity, correct appliance/output, correct material, clean finish, proper label, completed status, and handoff location. No unanswered questions remain.

### Needs Review

The case may be usable but has a question: unclear scan area, questionable fit, possible wrong instructions, doctor approval pending, minor finish concern, or missing special note.

### Remake / Stop

The case has wrong patient label, wrong arch, distorted print, cracked appliance, incorrect material, missing anatomy, failed cure/wash process, or any concern that could affect safety or patient outcome.

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# 25. Inventory and Supply Control

Digital lab delays often begin with supplies: resin, trays, bags, labels, blades, discs, gloves, alcohol, model storage, shipping materials, or printer parts.

## Minimum Inventory List

- Approved materials/resins
- Build platforms and printer accessories
- Wash/cure supplies
- Thermoforming materials if used
- Trimming/polishing supplies
- PPE and lab safety supplies
- Packaging bags/boxes/labels
- Cleaning/disinfection supplies

## Reorder Trigger

Set a reorder point before the office runs out. “We are out” is not a reorder system. The coordinator should know what low inventory looks like.

## Expiration and Storage

Some materials may have expiration dates, storage temperature requirements, light sensitivity, or handling instructions. Supplies are not just counted; they are protected.

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## 26. Lab Request Form Template

A clean request form prevents confusion. Use this as a model and adjust it to office policy.

### Required Fields

- Patient approved identifier
- Requesting team member
- Date requested
- Needed-by date
- Appointment date
- Appliance/output type
- Arch or area
- Scan/file location
- Doctor approval required?
- Special instructions
- Delivery location

### Good Request Example

"Upper and lower Essix retainers. Current scan completed today. Needed for debond delivery next Thursday. Doctor approval not required. Please package for clinical bin by Wednesday afternoon."

### Weak Request Example

"Need retainer."

This creates questions: for whom, which arch, what scan, what due date, which type, and who approved it?

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## 27. Case Tracker Worksheet

This worksheet can be copied into a spreadsheet, project board, or office software note system.

### Tracker Columns

Patient ID | Item Type | Scan Date | Request Date | Due Date | Appointment Date | Status | Approval | Material | Printer/Batch | Finished Date | Handoff Location | Notes

### Status Update Rules

- Update when the case enters a new stage.
- Do not leave completed cases in active queue.
- Use “needs review” instead of pretending the case is fine.
- Add short notes, not long stories.
- If a deadline is at risk, communicate outside the tracker too.

### Daily Tracker Habit

Check the tracker at the start, middle, and end of the day. The best tracker is the one used consistently.

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## 28. SOP Template for Digital Lab Tasks

Every repeatable lab task should have a simple SOP. The SOP protects the office from memory-based training.

### SOP Format

- Task name
- Purpose
- Who may perform it
- Required training/supervision
- Materials/equipment needed
- Step-by-step process
- Safety/PPE requirements
- Quality check
- Documentation required
- Escalation rule

### Example SOP Title List

- Print a study model
- Process a retainer model
- Package a retainer delivery case
- Submit outsourced lab case
- Run daily printer closeout
- Clean/reset lab station
- Document failed print

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## 29. Communication Scripts for the Digital Lab

The coordinator should communicate clearly without sounding panicked, defensive, or vague.

### Missing File

"I'm ready to move this case forward, but I don't see the scan/file attached. Can you confirm where it is stored or whether a new scan is needed?"

### Doctor Review Needed

"This case is prepared but still needs review before production. The delivery appointment is scheduled for [date]. Would you like me to hold, route, or update the schedule team?"

### Possible Delay

"The case may not be ready by the current delivery date because [brief reason]. I'm working through the next step now and wanted to flag it early."



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## 30. What Not to Do

Most digital lab problems are preventable. These mistakes create confusion, remakes, and trust issues.

### Avoid These Habits

- Printing from memory instead of the request.
- Using unclear file names.
- Changing material settings without approval.
- Skipping approval gates.
- Leaving finished cases unlabeled.
- Letting failed prints disappear without notes.
- Assuming someone else updated the tracker.
- Mixing dirty and clean areas.
- Using personal storage or email for patient files.

### Better Replacement Habits

- Confirm before producing.
- Label before moving.
- Track before handing off.
- Ask before guessing.
- Document issues while they are fresh.
- Reset the workspace daily.

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# 31. 30-Day Training Plan

This plan gives a beginner a clean path into the digital lab role without throwing them into the full workflow on day one.

## Week 1: Observe and Learn the Map

- Learn equipment names and locations.
- Shadow scan intake and lab handoffs.
- Learn clean/dirty zones and PPE expectations.
- Review file naming rules and tracker statuses.
- Do not run independent production yet.

## Week 2: Supervised Support

- Update tracker with supervision.
- Prepare labels and packaging.
- Assist with queue review.
- Observe printer setup and post-processing.
- Practice request form review.

## Week 3-4: Controlled Responsibility

Begin managing simple cases under supervision, then move toward independent tracker updates, queue preparation, and handoffs for approved low-complexity workflows.

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## 32. Trainer Sign-Off Ladder

A trainer should sign off skills in layers. Do not mark someone independent because they watched a task once.

### Level 1: Observed

The trainee watched the task and can explain the purpose, safety rules, and where it fits in the workflow.

### Level 2: Assisted

The trainee helped complete the task with trainer support and followed the checklist without skipping steps.

### Level 3: Supervised Independent

The trainee completed the task while the trainer observed and corrected as needed.

### Level 4: Independent Within Scope

The trainee can perform the task consistently within office policy, manufacturer instructions, and applicable legal boundaries.

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## 33. Scenario Drills

Scenario practice helps new coordinators learn how to respond before the real pressure hits.

### Scenario 1: Wrong Label

A finished retainer case has a label that does not match the tracker. What do you do?

Correct response: stop handoff, isolate the case, verify identity, notify the trainer/lead, document the issue, and do not deliver until confirmed.

### Scenario 2: Printer Failure

A print fails halfway through and the delivery appointment is tomorrow. What do you do?

Correct response: document the failure, check whether a same-day reprint is realistic, notify the team early, update tracker, and follow troubleshooting protocol.

### Scenario 3: Missing Scan

A request says “print model,” but no scan file is attached. What do you do?

Correct response: update status to needs file, message the requesting team member, and do not guess or use an old scan without authorization.

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## 34. Career Path: From Lab Support to Digital Workflow Leader

The digital lab role can become a growth lane for tech-minded team members who like organization, quality control, and systems.

### Beginner Role

Supports labeling, packaging, tracker updates, lab cleanup, basic case organization, and supervised workflow steps.

### Intermediate Role

Manages case tracker, coordinates queue, monitors due dates, communicates with clinical/front desk, supports printer and post-processing workflows, and helps prevent remakes.

### Advanced Role

Helps maintain SOPs, trains new lab support team members, communicates with vendors, helps compare workflow efficiency, and supports digital implementation projects.

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# 35. Resume Bullets for Digital Lab Coordinator Applicants

These bullets help a candidate describe transferable skills without pretending to have clinical authority they do not have.

## Entry-Level Resume Bullets

- Maintained organized digital case-tracking records and updated workflow status accurately.
- Supported scan/file organization, labeling, packaging, and appointment-based handoffs.
- Followed infection-control, PPE, and equipment-cleaning protocols in a healthcare-adjacent setting.
- Communicated clearly with clinical, administrative, and vendor teams to support deadlines.

## Tech/Production Resume Bullets

- Assisted with 3D printer queue organization and post-processing workflow under office protocol.
- Monitored material inventory, equipment readiness, and maintenance logs.
- Helped identify workflow bottlenecks and reduce case delays through consistent tracking.

## Interview Line

"I'm interested in the digital lab role because I like technology, organization, and repeatable systems. I understand that the lab supports patient care, so I'm careful with details, labeling, safety, and deadlines."

## CORE GUIDE #18

# 36. Implementation Plan for an Office

An office can implement this guide as a training product, onboarding tool, or internal systems manual.

## Step 1: Assign Ownership

Choose who owns the digital lab workflow: office manager, clinical lead, doctor, or dedicated coordinator. Someone must be responsible for the tracker and SOPs.

## Step 2: Build the Core Tracker

Create a tracker with the minimum fields. Start simple and improve after the team actually uses it.

## Step 3: Write 5 SOPs First

- Receive a lab request
- Prepare a case for production
- Print/process a case
- Package and label a finished case
- Handle a failed print or remake

## Step 4: Train and Review

Train one person, review weekly, and update the SOPs based on real workflow problems instead of theoretical perfection.

## CORE GUIDE #18

# 37. Final Readiness Checklist

Use this checklist before marking a trainee ready for independent digital lab coordination tasks.

## The Trainee Can Explain

- The scan-to-delivery workflow
- Which tasks require approval or supervision
- How to update the tracker
- How to identify missing information
- Clean/dirty/unknown item status
- Where SDS and manufacturer instructions are stored

## The Trainee Can Perform

- Review a lab request for completeness
- Update case status accurately
- Prepare labels and packaging
- Identify a print or file concern
- Communicate a delay professionally
- Reset the lab area at end of day

## The Trainer Has Verified

- Scope boundaries understood
- Safety protocol understood
- Quality checks completed correctly
- Handoffs documented
- Escalation rules followed
- No repeated preventable mistakes before independence



## CORE GUIDE #18

## 38. Source Notes and Training Disclaimer

This guide is educational and must be adapted to the office's actual technology, state rules, manufacturer instructions, doctor direction, and written policies.

### Source Notes Used for Safety and Workflow Context

AAO technology guidance discusses staffing challenges and the practical role of 3D printer lab technicians in orthodontic practices. ADA digital dentistry guidance outlines scan, design, print, process, and delivery workflow considerations, including materials, equipment, training, maintenance, and costs. CDC dental infection-prevention guidance emphasizes correct reprocessing sequence, trained personnel, PPE, and manufacturer instructions. OSHA dental guidance identifies dental workplace hazards such as bloodborne pathogens, chemicals, ergonomics, noise, vibration, and workplace violence. DANB provides state-specific dental assisting requirements and allowable-duty information. FDA explains 3D printing/additive manufacturing of medical devices and notes that 3D printed medical devices can include dental restorations.

### Disclaimer

This guide does not create legal, medical, dental, regulatory, OSHA, HIPAA, or clinical authorization. Offices should consult applicable state dental board rules, OSHA requirements, HIPAA/privacy policies, manufacturer instructions, and qualified professional advisors. New hires should perform only tasks they are trained, authorized, and legally permitted to perform.

## FINAL CORE GUIDE

# Core Guide #18 Complete

This guide closes the 18 core-guide library and prepares the catalog to move into the 12 mini guides.

A strong digital lab does not depend on memory. It depends on clean requests, clear status tracking, safe material handling, consistent quality checks, and professional handoffs.

## What Comes Next

The next phase is the 12 mini guides. They are smaller, more focused, and perfect as Etsy add-ons, lead magnets, bundle bonuses, or low-ticket downloads.

- Mini Guide #1: Orthodontic Office Roles Explained
- Mini Guide #2: Ortho Vocabulary for Beginners
- Mini Guide #3: Dental and Oral Anatomy Made Simple
- Mini Guide #4: Braces, Wires, Bands, and Elastics Explained

## Product Workflow Reminder

After completing guide batches, create premium pins using cover previews and inside-page screenshots. That keeps every guide looking real, useful, and buyer-ready.