

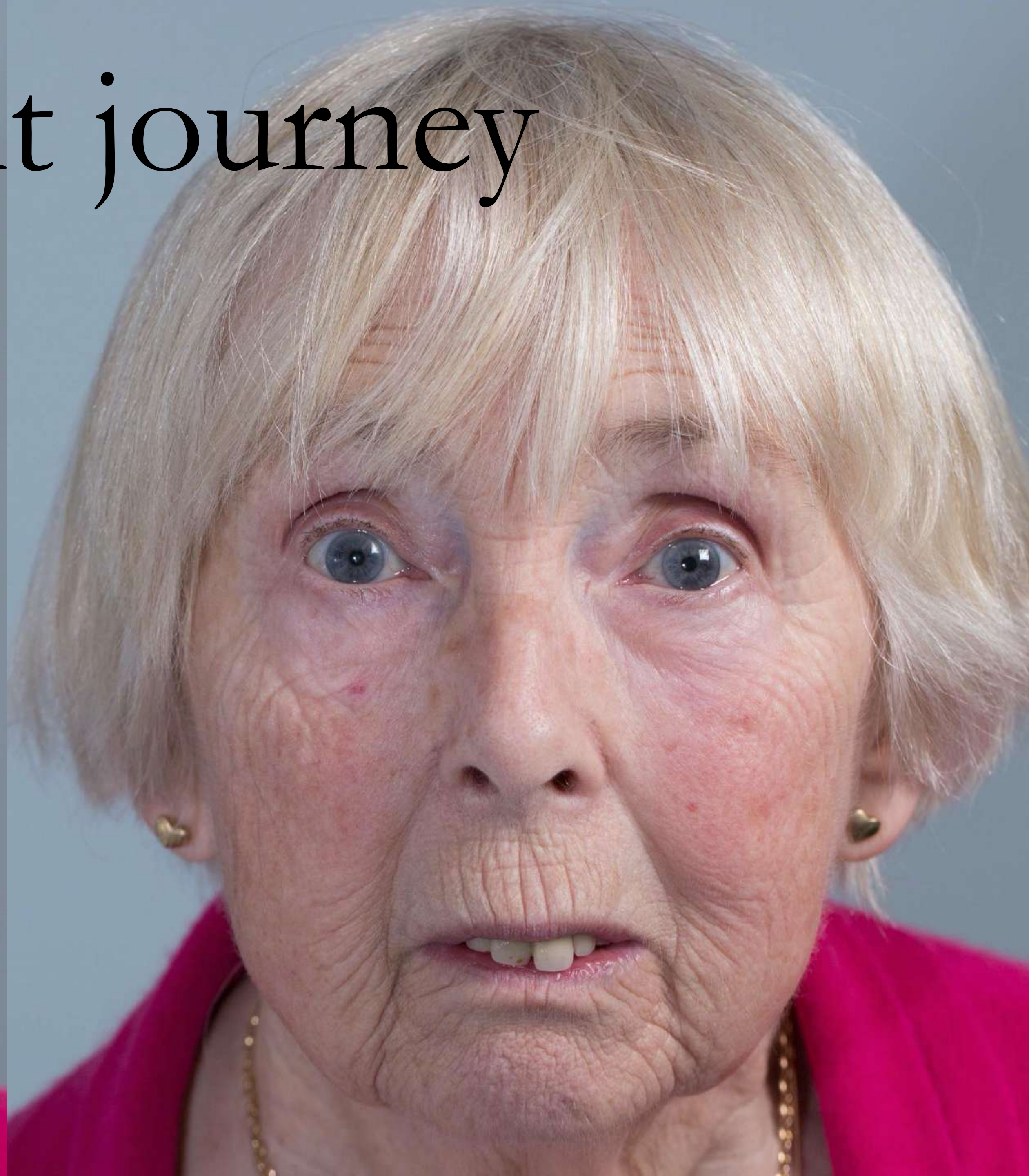


Managing Anne

Finlay Sutton

Full Membership Presentation

Treatment journey





Concerns

“Upper teeth/crowns/bridges all loose”

“Dentures seem the only option”

“Bottom teeth are not good but still functional”



Wish List

“Advise on upper denture”

“Provide a working denture”

“Provide a good looking denture”

I want this but better!





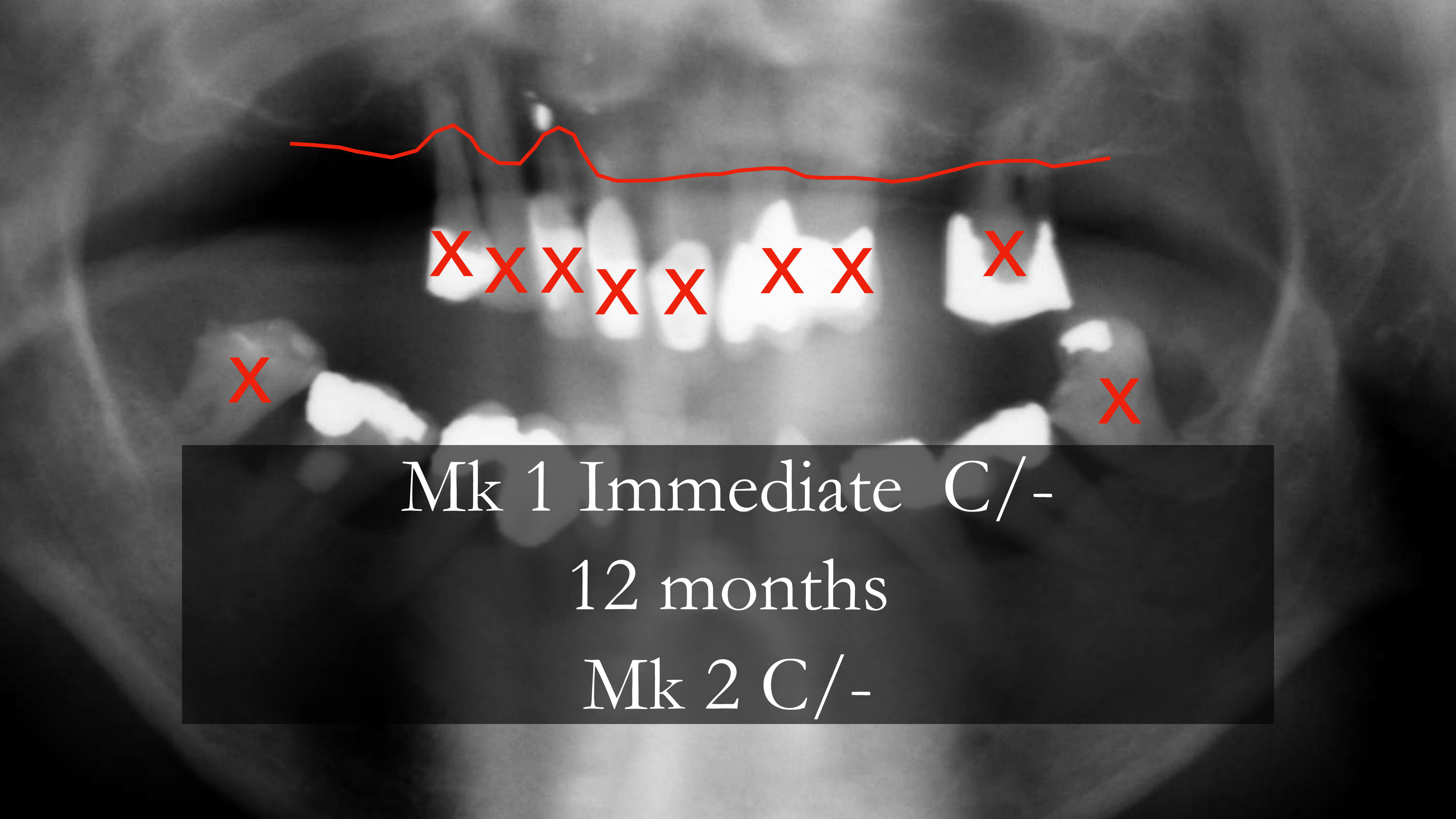




60 - 90% bone loss

Generalised periodontitis stage 4 (very severe) Grade C (rapid progression)





Mk 1 Immediate C/-

12 months

Mk 2 C/-

Wish list

“Advise on upper denture”



“Provide a working denture”



“Provide a good looking denture”



Name: Freeman Anne	Treatment plan No 1	Date estimate accepted:
Objective: <ul style="list-style-type: none"> Mk 1 Complete upper Immediate denture Remove remaining upper teeth and LL8 and LR8 Mk 2 Complete upper denture – 12 months after the extractions 		Preferred times:

Visit	Treatment and result	Fee (£)	Time required (Hours)	Appointment		Time Gap	Laboratory to produce	Lab and implant parts fee (£)
				Date	Time			
1.	Primary impressions	200	1			2 weeks	2 part upper window special tray	0
2.	Definitive impressions	400	1			2 weeks	Rim	0
3.	Registration ICP	400	1			2 weeks	Finish	0
4.	Extract all upper natural teeth XLA LR8 and LL8 Fit Mk 1 upper denture	1600	Full session			1 week		1000
5.	Review over 12 months as necessary Primary impressions needed	1600	1 (per visit)			11 months	Special trays	0
6.	Definitive - impression – Mk 2 definitive upper denture	400	1			2 weeks	Registration – RIM and CBA	0
7.	Registration stage – RIM CBA	400	1			2 weeks	Try in	1700
8.	Trial insertion	200	1			2 weeks	Finish	0
9.	Fit Mk 2 upper denture	400	1			1 week		0
10.	Review (reline Mk 1)	400	1			1 week		0
11.	Review	400	1					0
12.	Contingency (for additional reviews and planning)	3050						
Total		9050				61 weeks		2700

Total Fee £10,750

Payment at appointment 1: £6,450, Payment at appointment 3: £2,150 Payment at appointment 7: £2,150

Mrs A Freeman

Dear Anne

It was lovely to see you for consultation today with John. Dr Michael Quokyan has referred you to me for specialist restorative dentistry.

Your dental concern/problems:

- "Upper teeth/crowns/bridges all loose"
- "Dentures seem the only option"
- "Bottom teeth are not good but still functional."

You would like the following:

- "Advise on upper denture"
- "Provide a working denture"
- "Provide a good looking denture"

Diagnoses (Findings):

1. The upper teeth are not saveable with any degree of predictability as they have severe gum disease, decay and large fillings. We discussed various solutions. I recommend removing these teeth and replacing with an immediate complete upper denture and then in 12 months replacing this with a definitive complete upper denture. This treatment is included in the plan below.
2. The lower left and right back molars (LR8 and LL8) have severe gum disease and require extraction. I will do this as part of the treatment above.
3. The lower teeth have severe gum disease and require treatment. I advise you to discuss this with Mr Quokyan. Alternatively Mr Syed Abad, specialist in periodontics (at my practice) could provide this treatment. I imagine it will be in the region of £1,250 for an initial course of treatment with Syed. I believe it is worth holding onto these teeth as long as possible as coping with a lower complete denture is much more difficult than a complete upper denture. We can discuss this at a later date and I have not included it in the treatment plan below.
4. I am very happy to provide a definitive cobalt chromium based lower denture in the future should you so wish. This type of denture would be designed to secure the future of the lower teeth and be healthier for your gums than the current plastic denture you have. The fee for this would be in the region of £5,500. Please feel under no pressure to have this done. We can discuss this at a later date and I have not included it in the treatment plan below.
5. The soft tissues of the mouth appear healthy. This is a routine examination I provide checking the soft tissues of the mouth for oral cancer.

Mrs Anne Freeman..... Date 1

We discussed a number of options for resolution of the dental problems in the upper jaw namely:

1. Do nothing. This is not what you wanted.
2. Replacement teeth with a conventional upper denture following extraction of the remaining upper teeth. This process would involve provision of an immediate/interim denture fitted at the extraction appointment. The interim denture would be worn for 12 months until the gums shrink to a stable position. A definitive denture would then be fabricated. This option has the advantages that there is no surgery for dental implants and it will produce a good aesthetic outcome (a really nice smile). The main disadvantage is that it is removable. This is the option we both felt was the most appropriate and the treatment plan is described below. We can always go to the dental implant option later if you want extra stability of the denture for biting and chewing. This would need to be considered within 6 months of fitting the definitive dentures.
3. As option 2 with the added benefit of the upper denture being supported by four dental implants, if increased stability is required (it would be necessary to place 4 implants in the upper jaw). To be considered 6 months after fitting the immediate dentures in the treatment plan below (approx. additional £16,000). To consider this option the gum disease affecting the lower teeth would need to be fully stabilised.
4. Horseshoe – sleeve denture replacement upper teeth using 6 dental implants with an implant supported bar (£45,000). To consider this option the gum disease affecting the lower teeth would need to be fully stabilised.
5. A partial denture. We both felt that this was not the best option as discussed in diagnoses point 1.

Figure 1 Portrait now



Figure 2 you would like your new teeth to be similar with aesthetic improvements



Mrs Anne Freeman..... Date 2

Figure 3 teeth smiling



Figure 4 teeth with lips apart



Upper teeth to be removed and replaced with an immediate complete denture and a definitive upper complete denture.

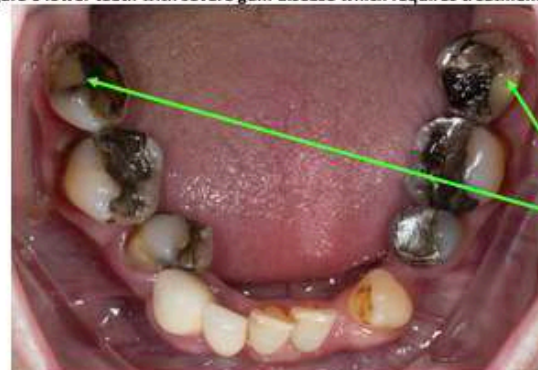
Mrs Anne Freeman..... Date 3

Figure 5 upper teeth



Upper teeth to be removed and replaced with an immediate complete denture and a definitive upper complete denture.

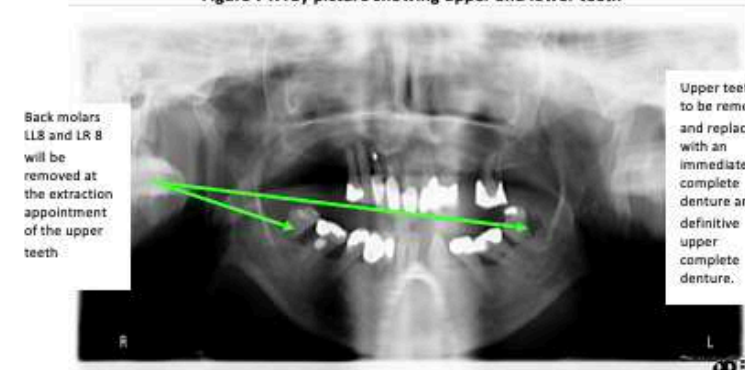
Figure 6 lower teeth with severe gum disease which requires treatment soon



Back molars LR8 and LR8 will be removed at the extraction appointment of the upper teeth

Mrs Anne Freeman..... Date 4

Figure 7 X ray picture showing upper and lower teeth



Back molars LR8 and LR8 will be removed at the extraction appointment of the upper teeth

Upper teeth to be removed and replaced with an immediate complete denture and a definitive upper complete denture.

Treatment plan

In summary, the upper remaining natural teeth will be removed (as well as the LR8 and LR7) and replaced with a complete denture. You will be given two sets of upper dentures. The first denture is an immediate interim denture, which are fitted straight after extracting the teeth. At no stage would you be without teeth. The interim denture is reviewed on a regular basis for approximately 12 months, until the definitive denture is constructed.

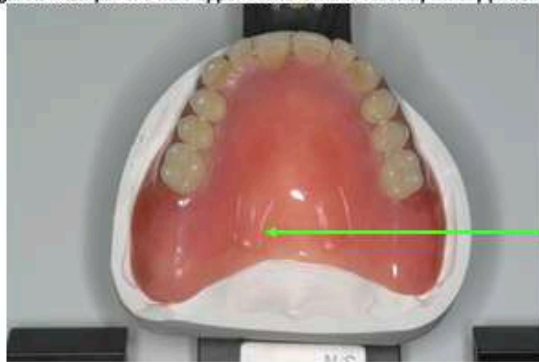
The immediate denture will have good aesthetics and will improve on your current dental situation. However, the definitive denture, which will be made and fitted twelve months after extracting the remaining teeth, will have excellent aesthetics, fit correctly and will be more comfortable.

Treatment plan in detail step by step:

Visit	Treatment and result	Time required (Hours)	Time Gap
1	Primary impressions - compound alginate	1	2 weeks
2	Definitive impressions	1	2 weeks
3	Registration	1	2 weeks
4	Extract all upper natural teeth and fit immediate denture Remove lower back molars	4	1 week
5	Review over 12 months as necessary Primary impressions needed	1 (per visit)	11 months
6	Definitive - impression - for definitive upper dentures	1	2 weeks
7	Registration stage	1	2 weeks
8	Trial insertion	1	2 weeks
9	Fit dentures	1	1 week
10	Review (reline immediate dentures)	1	1 week
11	Review	1	
Total			61 weeks

Mrs Anne Freeman..... Date 5

Figure 8 Example of a new upper denture made recently for my patient



This is the amount of extension necessary for the denture in order to give it the best suction - most patients adapt to this very well

Figure 9 Before - with crowned natural teeth



Figure 10 After with immediate denture



Mrs Anne Freeman..... Date 6

Figure 11 Before complete dentures

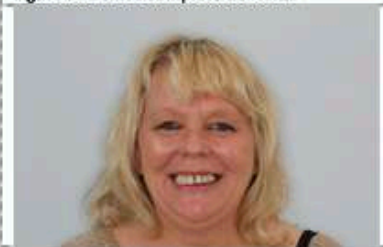


Figure 12 After complete dentures



As you know, I have designed my practice around having my own in-house Dental Technologist. This means that I have complete control over the production of the laboratory work that we fabricate for our patients and is a very special part of the practice. Mr Rowan Garstang, formerly Chief Dental Technologist at the University Dental Hospital of Manchester, will fabricate the dentures. Above are examples of our work.

Replacing missing teeth (Prosthodontics) is challenging due to the two demands of function (chewing and eating) and aesthetics. The following list contains items that I feel you should be aware of before you decide to have treatment. It covers aspects of this type of treatment, which I feel are important and has been developed over the past 25 years following treating patients with similar requirements to you. I am confident that you will rapidly become aware of the care, attention and professionalism that we can provide for you.

I would like you to be aware of the following before treatment:

- Immediate interim dentures (before the definitive dentures are made 12 months later)
 - The denture is fitted immediately fitted after extraction of the teeth. The interim dentures will not fit perfectly in the areas of the extracted teeth.
- Your mouth will feel sore following extraction of the teeth for up to 2 weeks. I always recommend at least one week off work (if you work), during this phase.
- Immediate dentures are removable mechanical substitutes for missing living tissues and as such exhibit a small amount of movement when in the mouth, especially when chewing food. Making new definitive dentures will help to rectify this.
- Some patients experience difficulties with speech following the fitting of new dentures. In all of my cases, patients adapt to this and the speech normalises.
- Learning to chew satisfactorily with new dentures usually requires at least 6 - 8 weeks, and sometimes longer. New memory patterns must be established in order for the muscles of the tongue, cheeks and lips to keep the dentures in position. These muscles need time to learn what they should and should not do. This is particularly relevant when cognitive learning abilities are reduced with dementia and Alzheimer's. This applies to the definitive dentures as well.
- All patients with new dentures are different and experiences with new dentures cannot be compared to another person's experiences.

Mrs Anne Freeman..... Date 7

- Initially the immediate dentures may cause you to produce more saliva than normal. This gradually reduces over time, but you should be aware of the change prior to commencement of treatment.
- Occasionally some of our patients require denture fixative in order to keep the dentures more secure. This is a very uncommon occurrence for my patients. This applies to the definitive dentures as well.
- Definitive denture
 - Careful handling and cleaning of the dentures are required, because they can break if dropped onto a hard surface.
 - The definitive dentures are removable mechanical substitute for missing living tissues and as such exhibit a small amount of movement when in the mouth, especially when chewing food.
 - I anticipate the dentures remaining serviceable between 5 years. However, because everyone's mouth is unique I cannot be absolutely definite about this.
- General
 - Patients regularly ask how long their fillings, porcelain crowns, onlays, bridges and dentures will survive. Unfortunately, it is impossible to predict this accurately. As dentistry is not an exact science it is not possible to guarantee how long dental work will last. It is very important that you understand that Rowan and I plan and fabricate our work to the best possible standard we possibly can, using the highest quality materials along with our many years of training, experience and expertise. However, as with all things involving moving parts, things wear out, break, snap, crack etc. and will fail eventually. In addition, the mouth is a unique, dynamic environment in constant use. Due to variations in human biology, some people are heavier on their teeth than others which can lead to aspects of their dental work wearing, chipping or coming loose sooner than for those who are less heavy on their teeth. I give a warranty on the work I provide for 1 year once active treatment has finished, where problems occurring will be rectified free of charge.
 - I calculate the time and appointments required as precisely as possible. However, owing to the nature of this type of dentistry additional visits may be required as necessary. If this is the case you will not be charged for the extra visits.
 - Once the work has been provided, the work is covered under a warranty for one year. After this year further treatment for items such as repairs, refurbishment and replacement are charged at my hourly rate of £400 per hour (plus laboratory fees).
 - The gums/ridges shrink slowly over time meaning that the dentures will require relining and replacement over time. My fees to reline one set of dentures at my current rate are £1,200.
 - Once you are comfortable with the dentures, I would like to see you on a 12 monthly basis. I recommend that you see myself on an annual basis to check the dentures and the lining of the mouth. The fee for me to provide an annual review is currently £250 and will involve cleaning the dentures in a machine, designed to clean dentures - ~~Synpro~~. Please contact us if you would like to have these annual reviews.
 - I recommend that the dentures are replaced on a 5 yearly basis.

Mrs Anne Freeman..... Date 8

Professional fees

The investment for the provision of the above treatment, assuming it was commenced in the next 6 months is £10,750. In order for us to provide the highest quality specialist service we ask for fee settlement in one of two ways as follows:

1. Payment in full at appointment 1 of £10,750 (this is our preference)
- or
2. Spread payments of £10,750

First payment of £6,450 at appointment 1
Second Payment of £2,150 at appointment 3
Third payment of £2,150 at appointment 5

I understand and appreciate that the level of investment is high for this treatment. The reason for this is that providing very high quality dentistry requires considerable surgery and laboratory time involving our specialist knowledge and expertise.

It would be a great privilege helping you and I look forward to seeing you on Thursday 11th January 2018.

If you have any questions as all about the treatment I propose, please do not hesitate to contact me.

With kind regards

Yours sincerely

Dr Finlay Sutton
BDS, DGD^P (UK), MSc, MFDS RCS Ed, MRD RCS Ed, PhD, FDS (Rest Dent) RCS Ed
General Dental Council Number: 69652

Cc Dr Michael Quokyan, Albany Dental Care, ~~Albany~~ Medical Centre, Lytham FY8 4GW

Mrs Anne Freeman..... Date 9

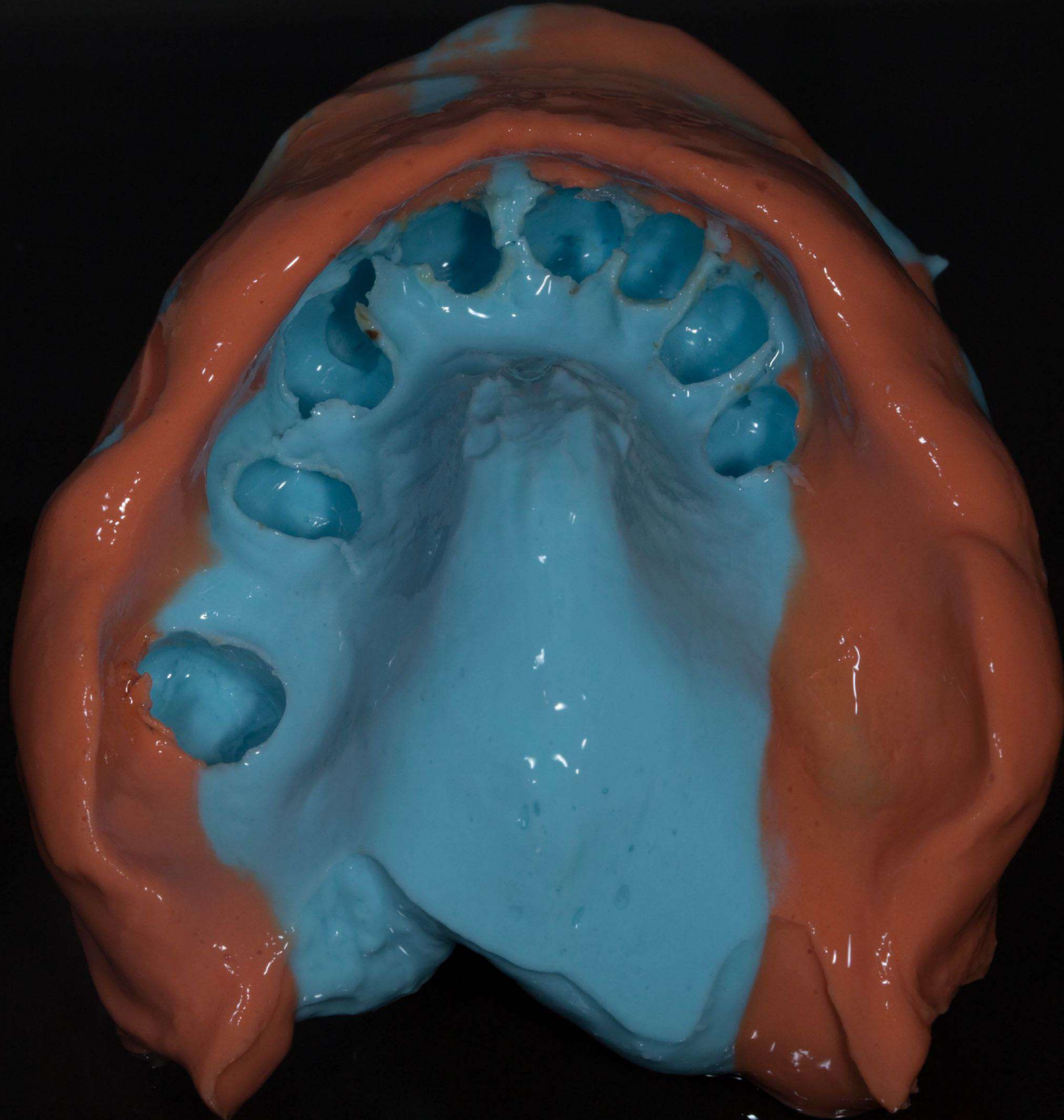
If you would like to go ahead with the proposed treatment, I will ask you to sign a copy of this report for visit 1. By signing a copy of this report, you are confirming the following:

- That you have read the report
- That you have had the opportunity to ask and have had answered any questions about the contents of this report
- That you understand the contents of this report and agree to its terms
- That you understand and agree that the specified, agreed treatments will incur costs as discussed during the consent to treatment process
- That you agree to pay the treatment fees outlined in the report and at the timescales detailed in the report
- That if you do not keep an appointment without giving 24 hours advance notice, you must pay for the time reserved at the rate of £250 per hour
- That the practice reserves the right to charge for unused surgery time if more than 2 appointments are rearranged with less than 48 hours notice within a course of treatment
- That the practice reserves the right to suspend treatment if you fail to pay for the treatment you have had provided. If you are in default of your payment plan, the practice may use a collection agency or take legal action to secure payments, as authorised by law, and the collection action will become part of your credit record. Patients will be notified in writing before the practice takes action to collect

Mrs Anne Freeman..... Date 10

Visit 1



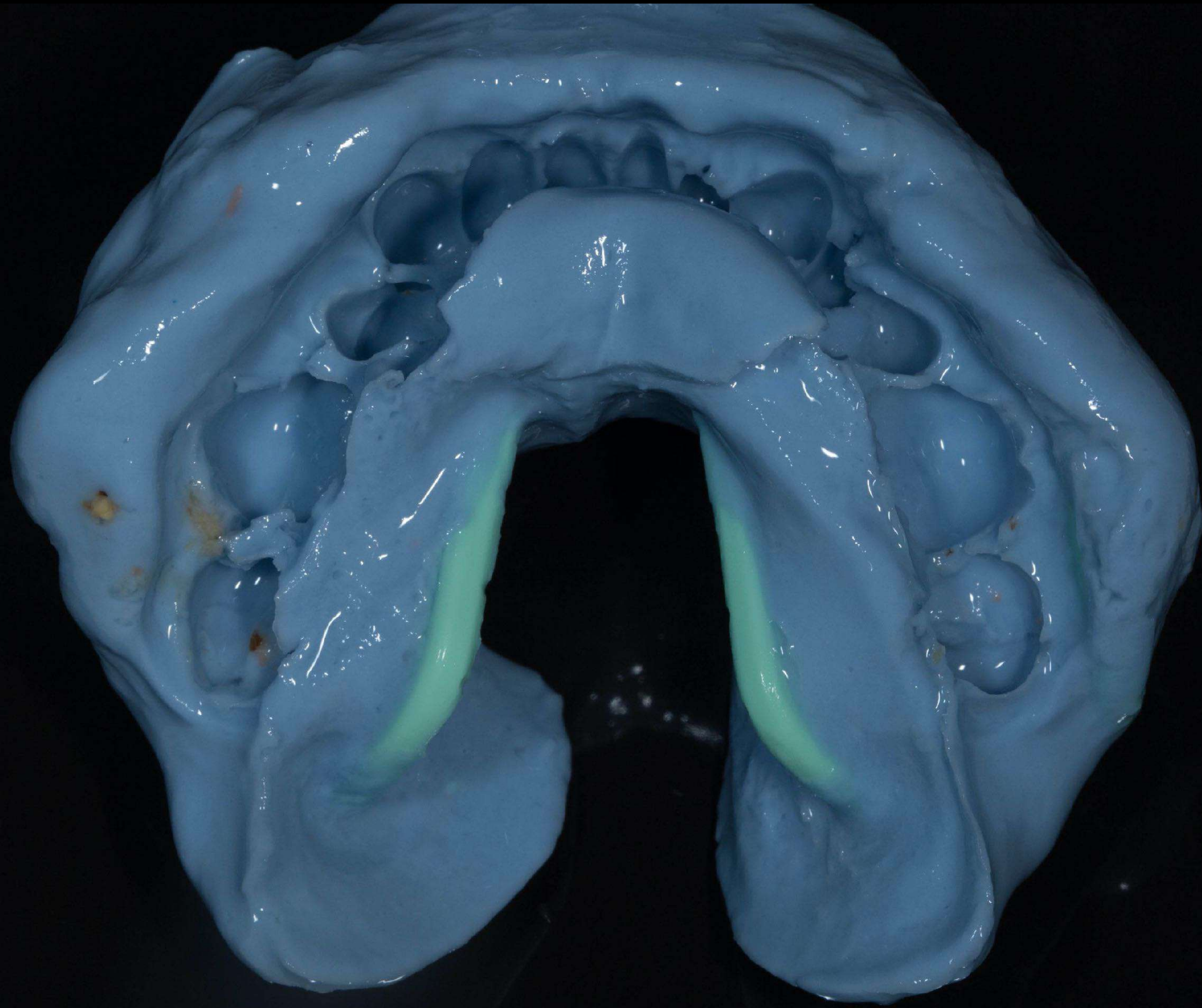


Tropicalgin
Base



Neocolloid
Injectable





DENTSPLY

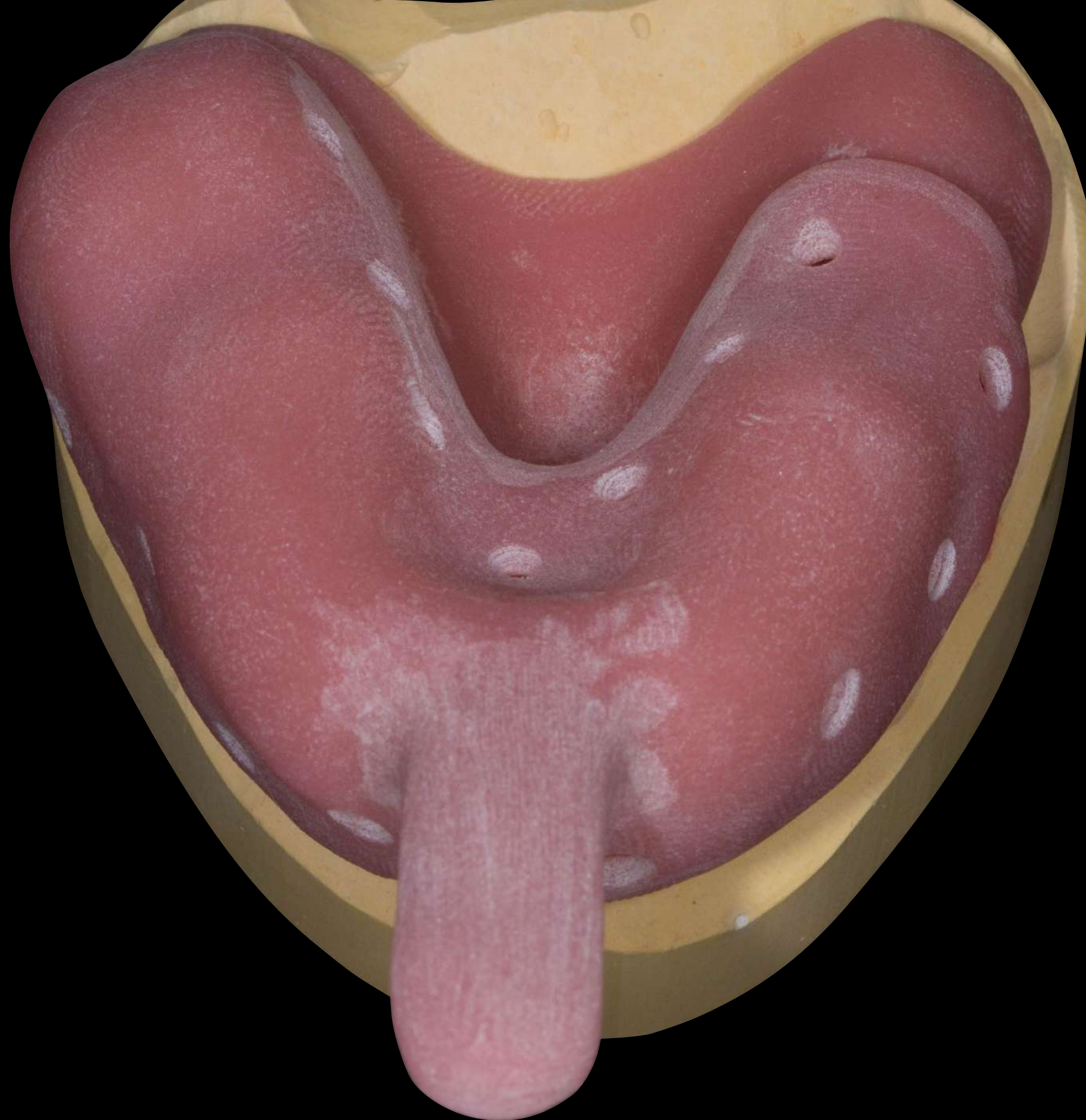
Blueprint®
x-creme

Dust-Free Alginate
Impression Material

500g e



Michael
Wise



Definitive impression Mk 1



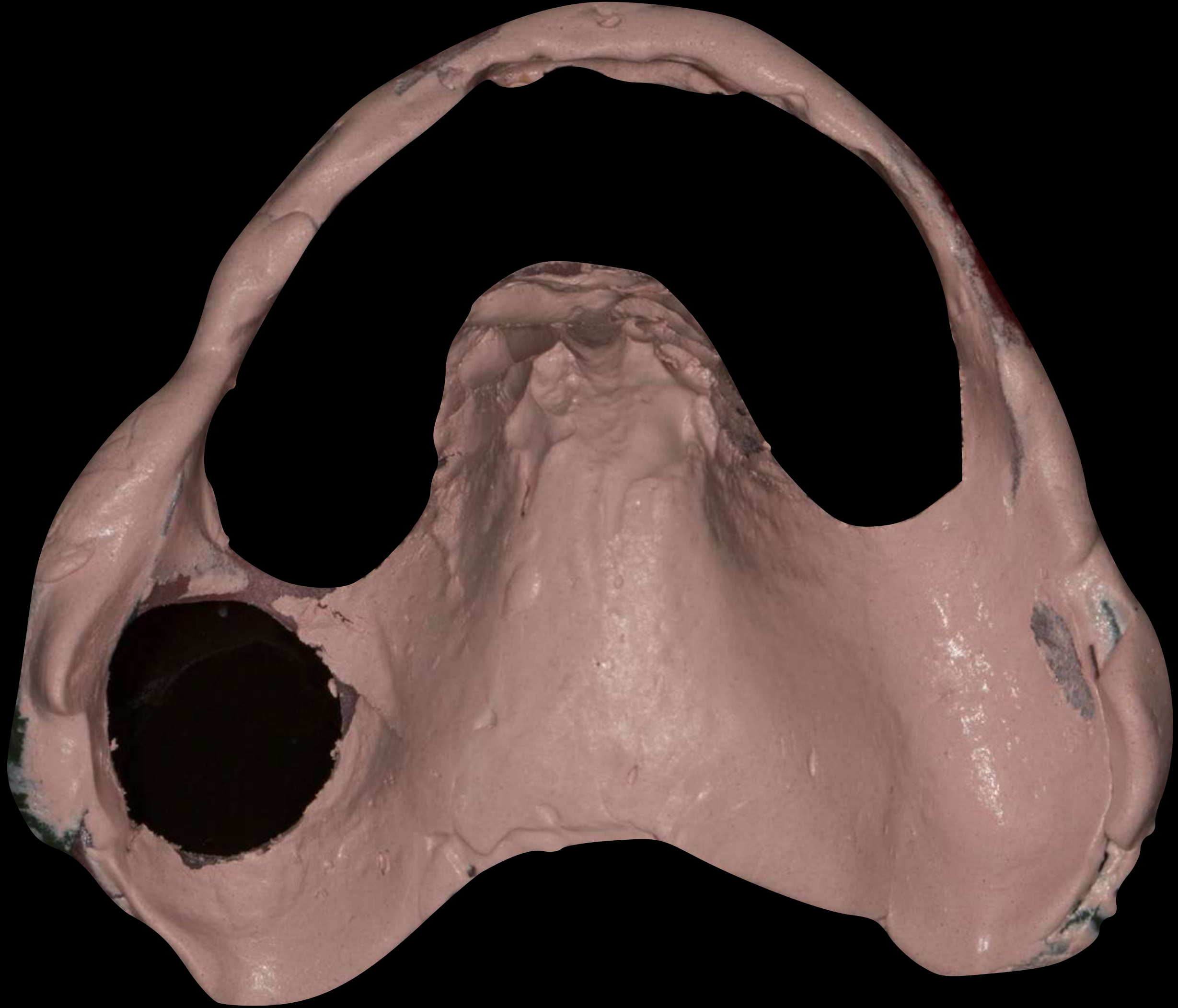
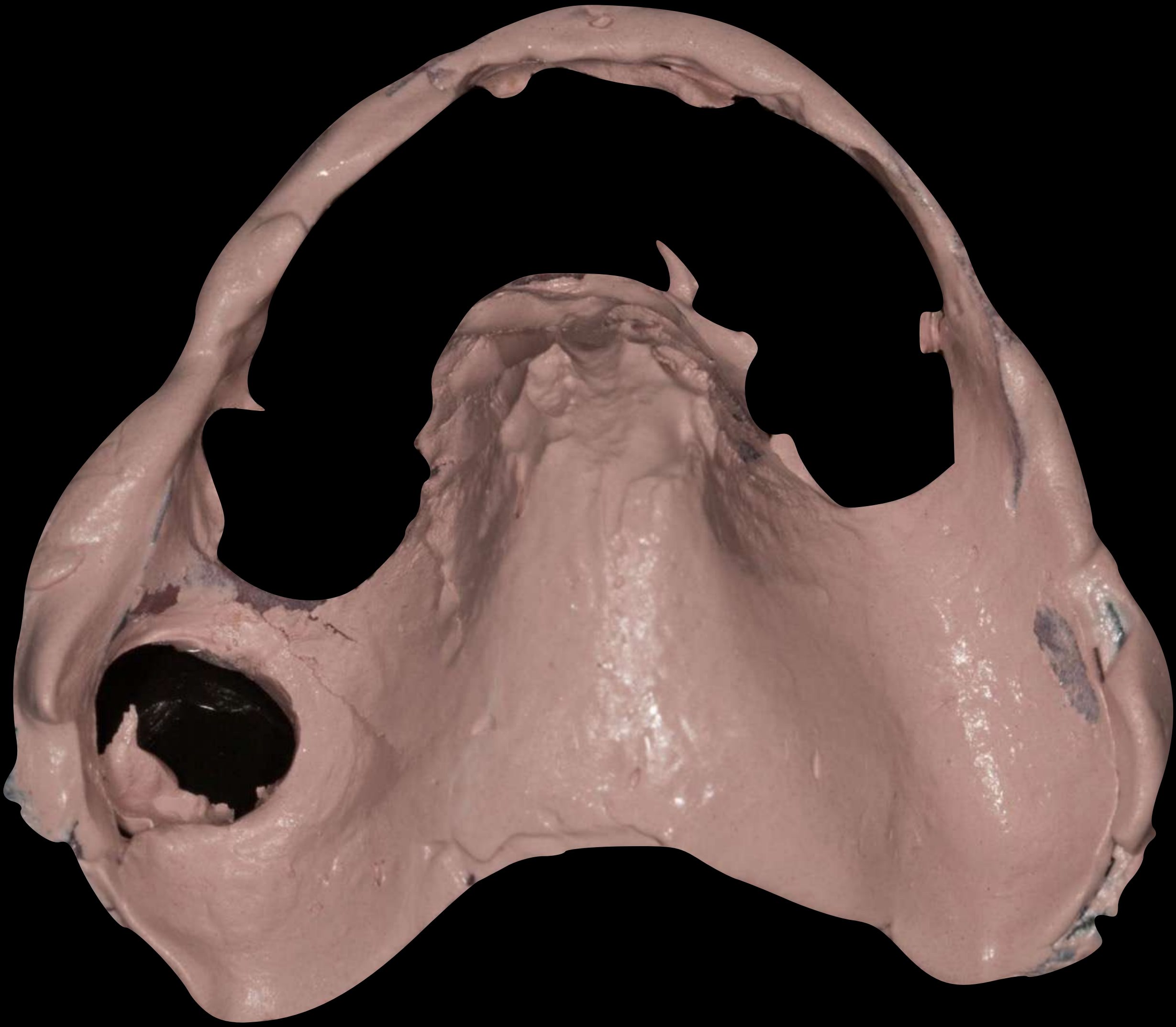
Definitive impression Mk 1



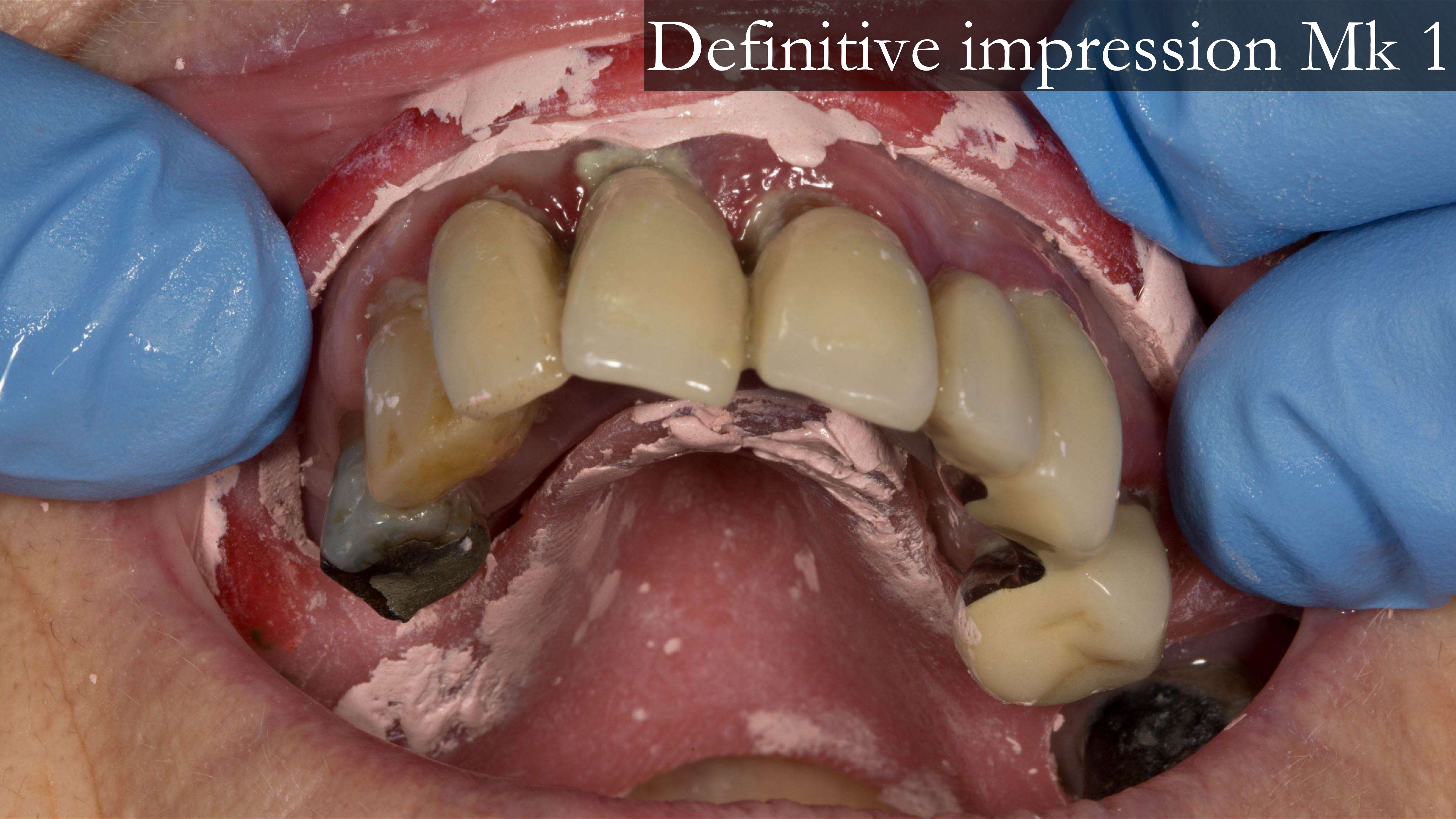
Before moulding



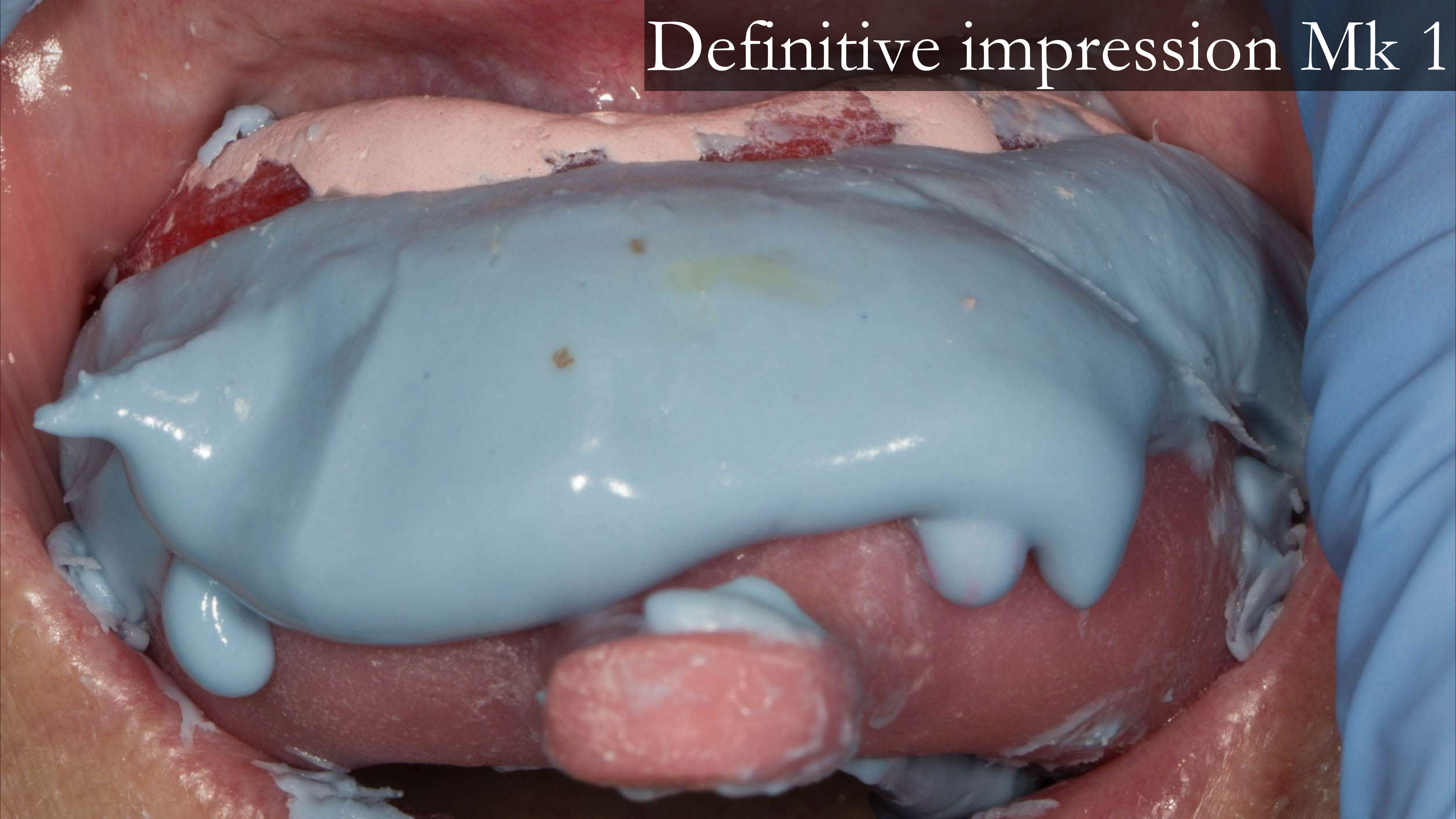
After moulding



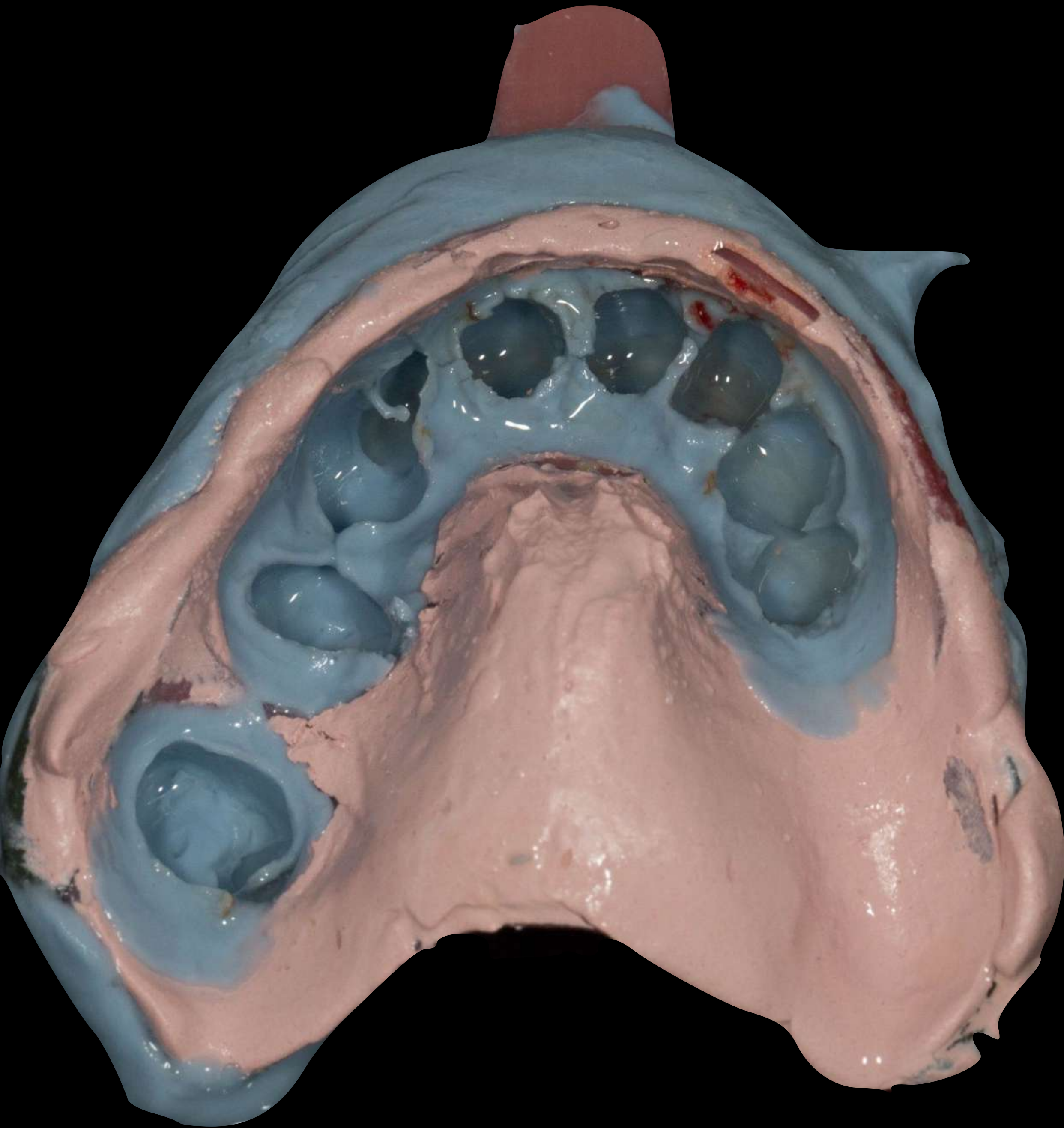
Definitive impression Mk 1



Definitive impression Mk 1



Working cast Mk 1



MIP Registration Mk 1

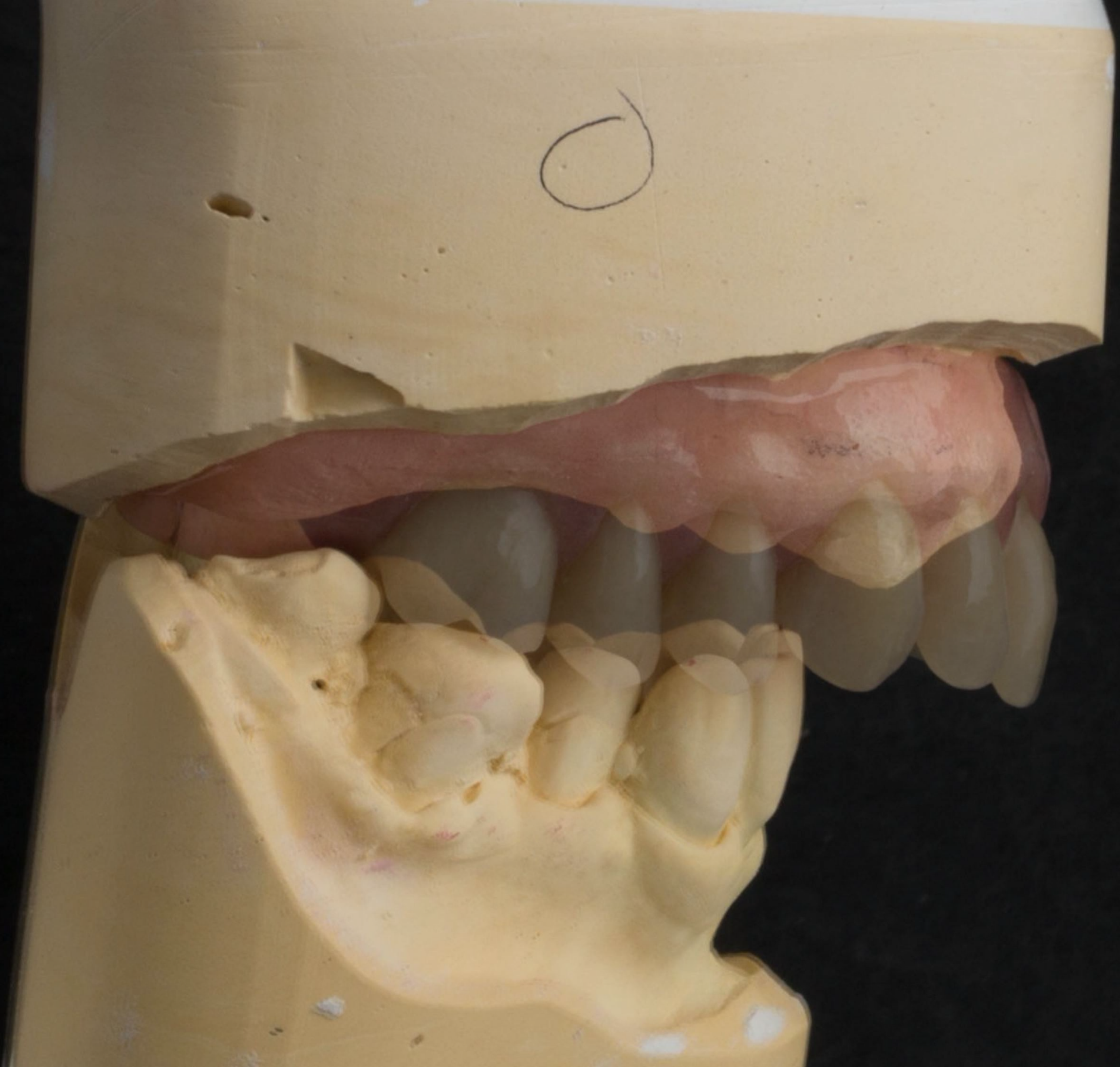


MIP Registration Mk 1



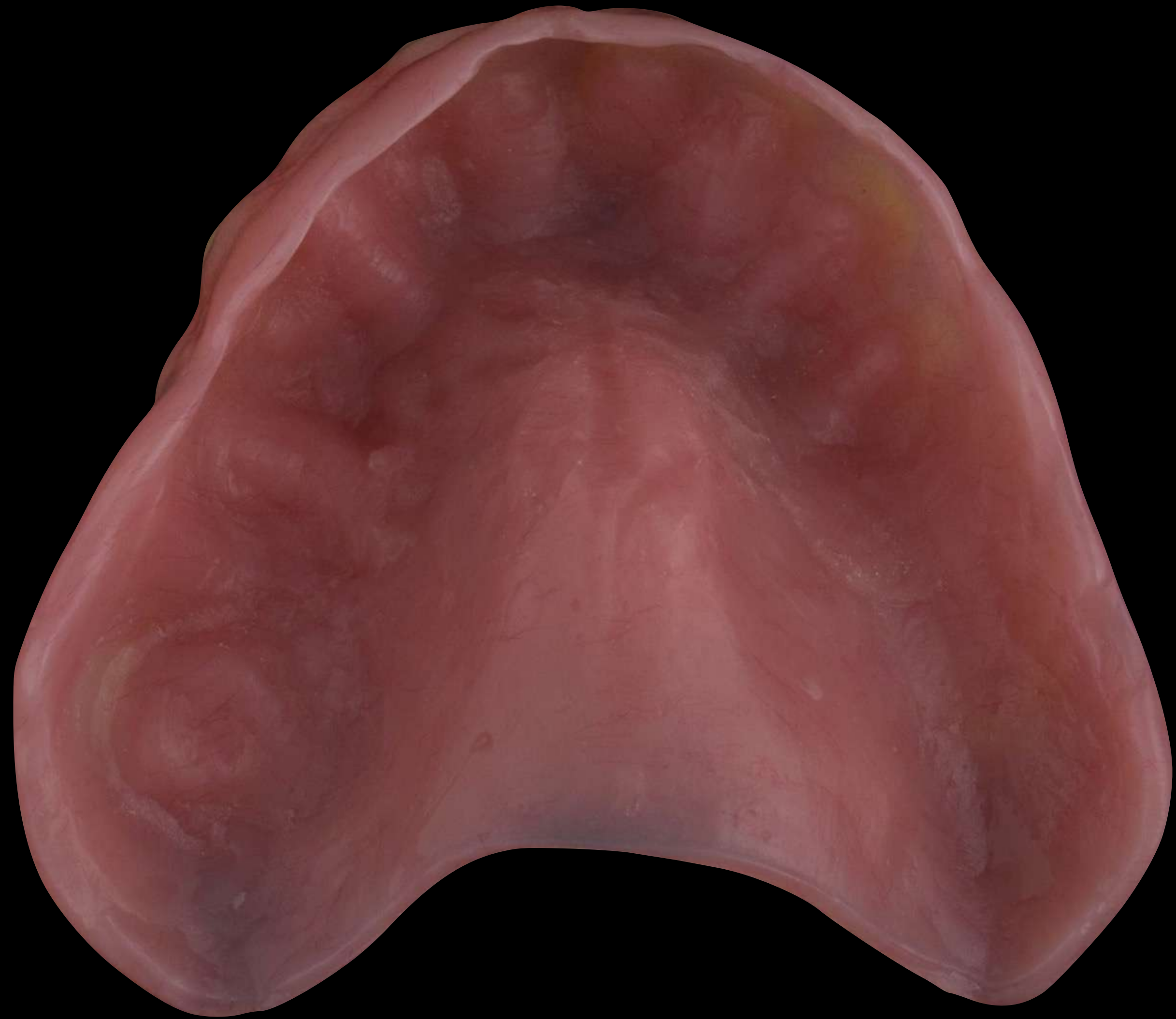


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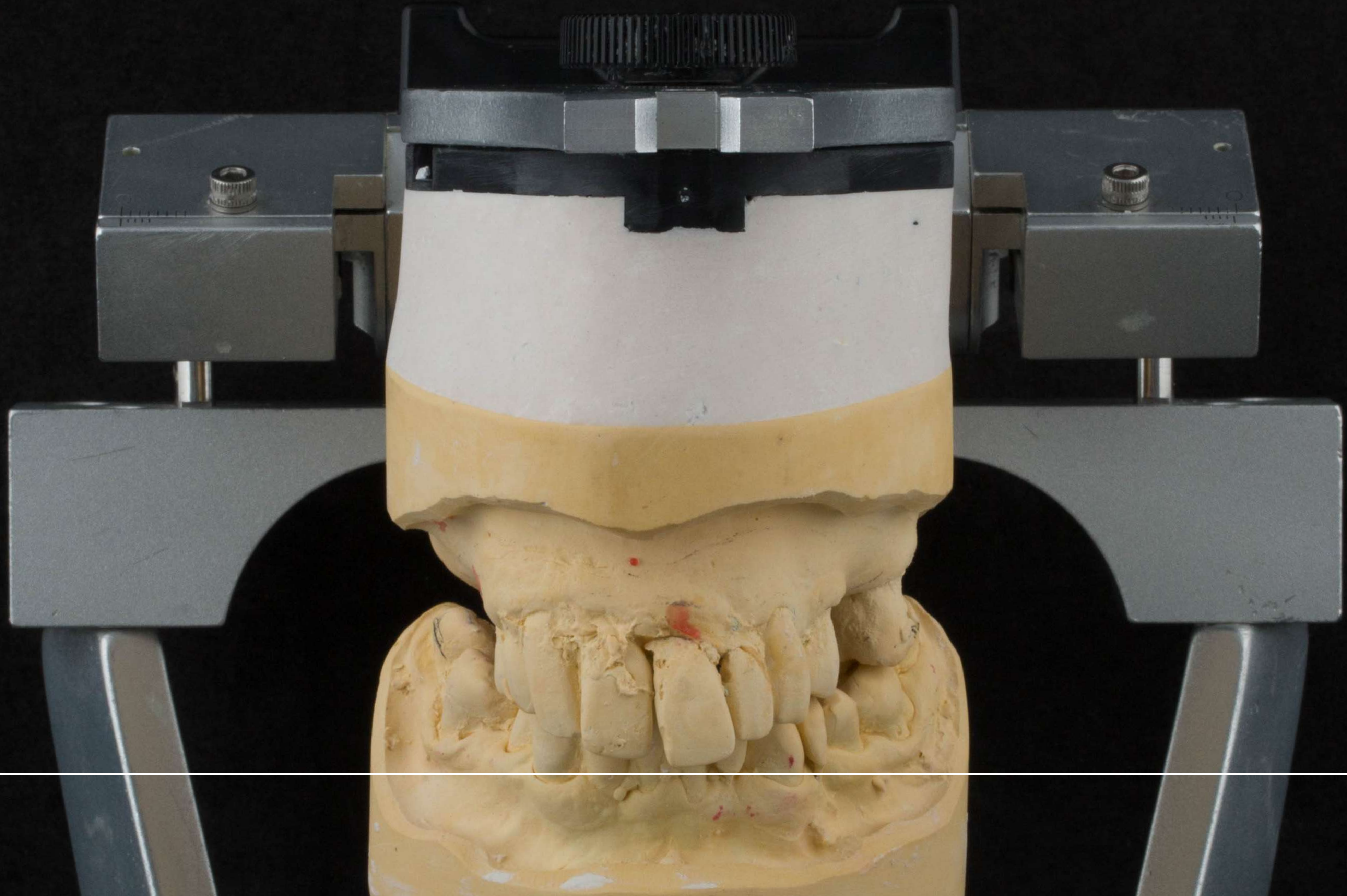




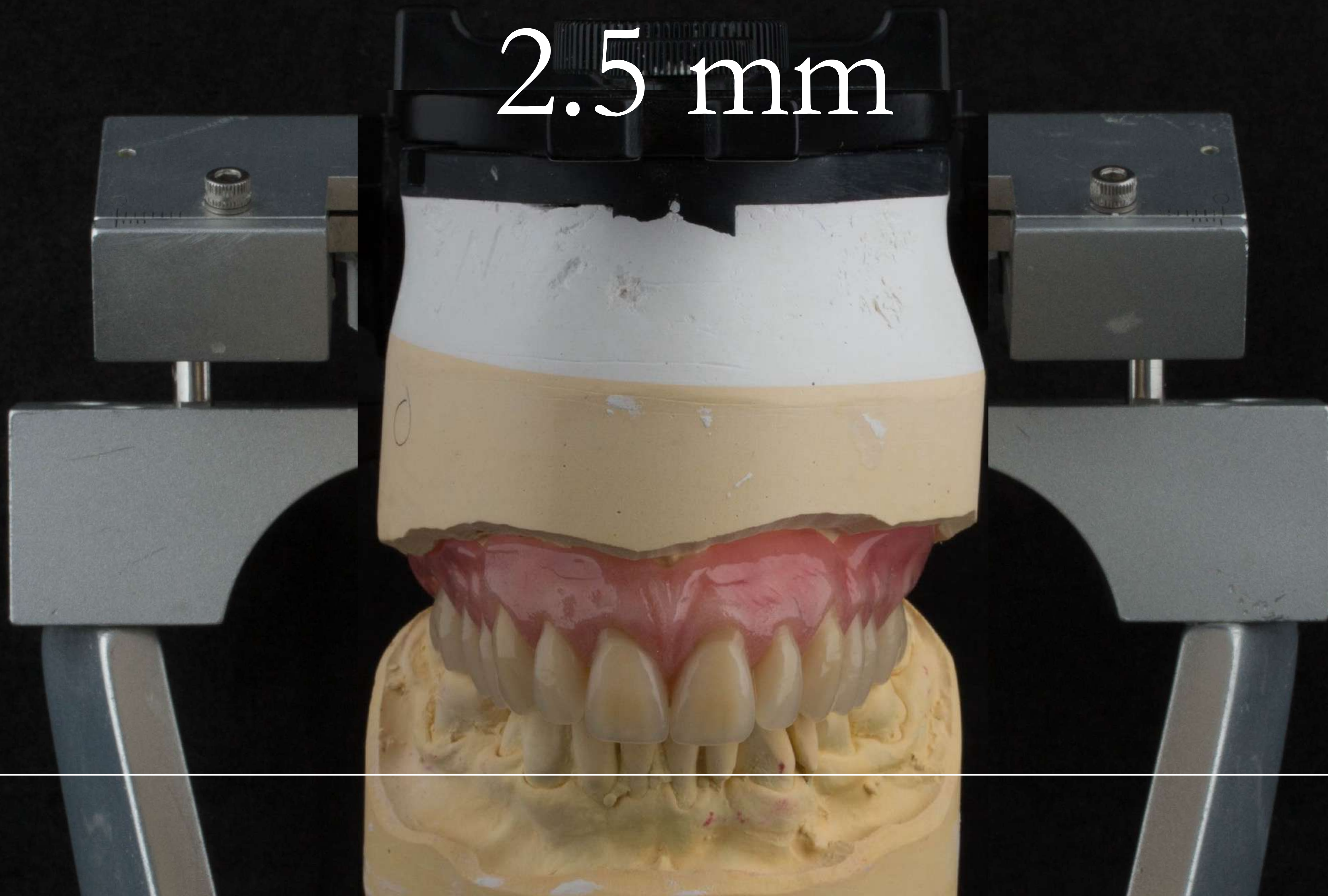
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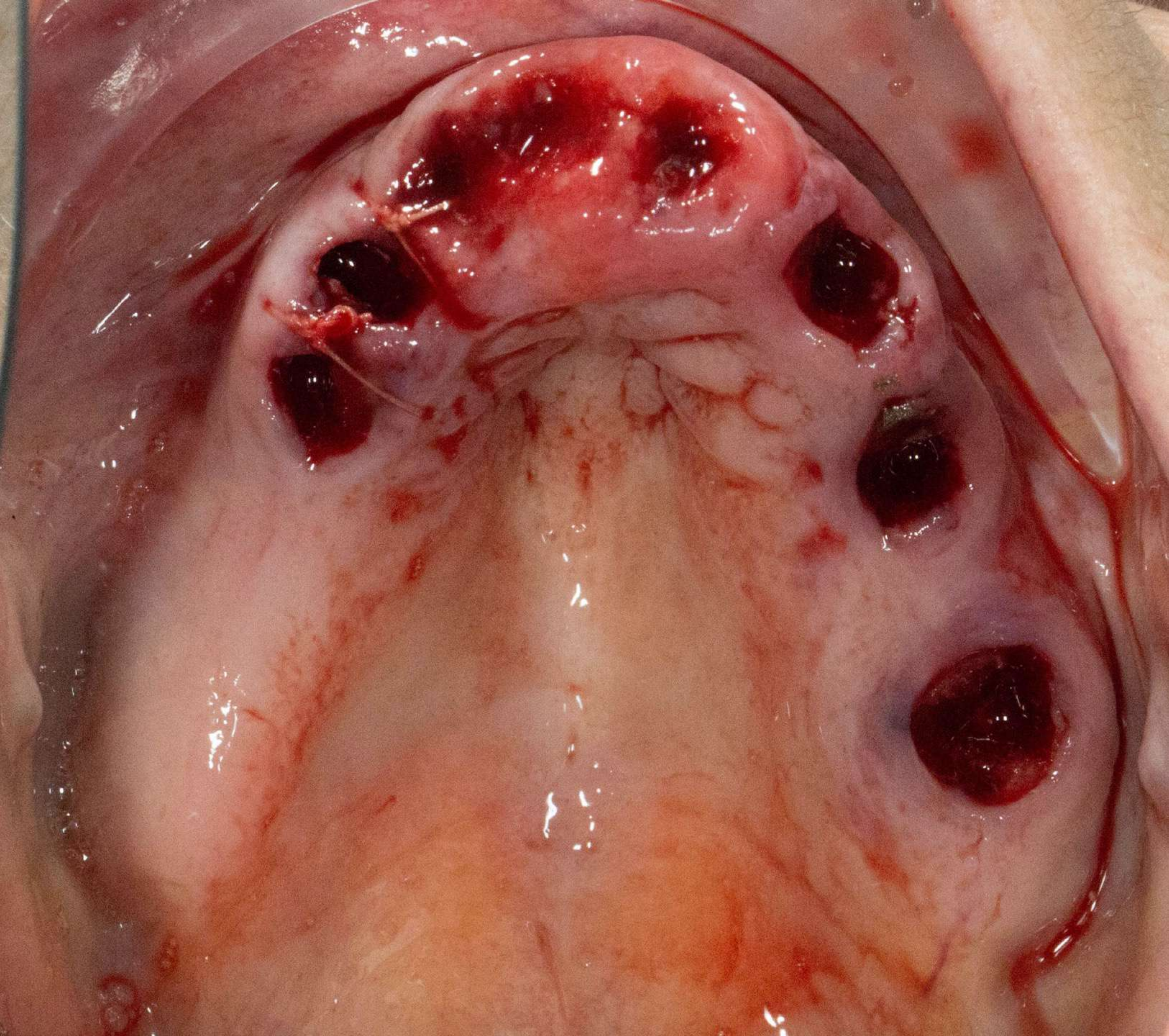
2.5 mm

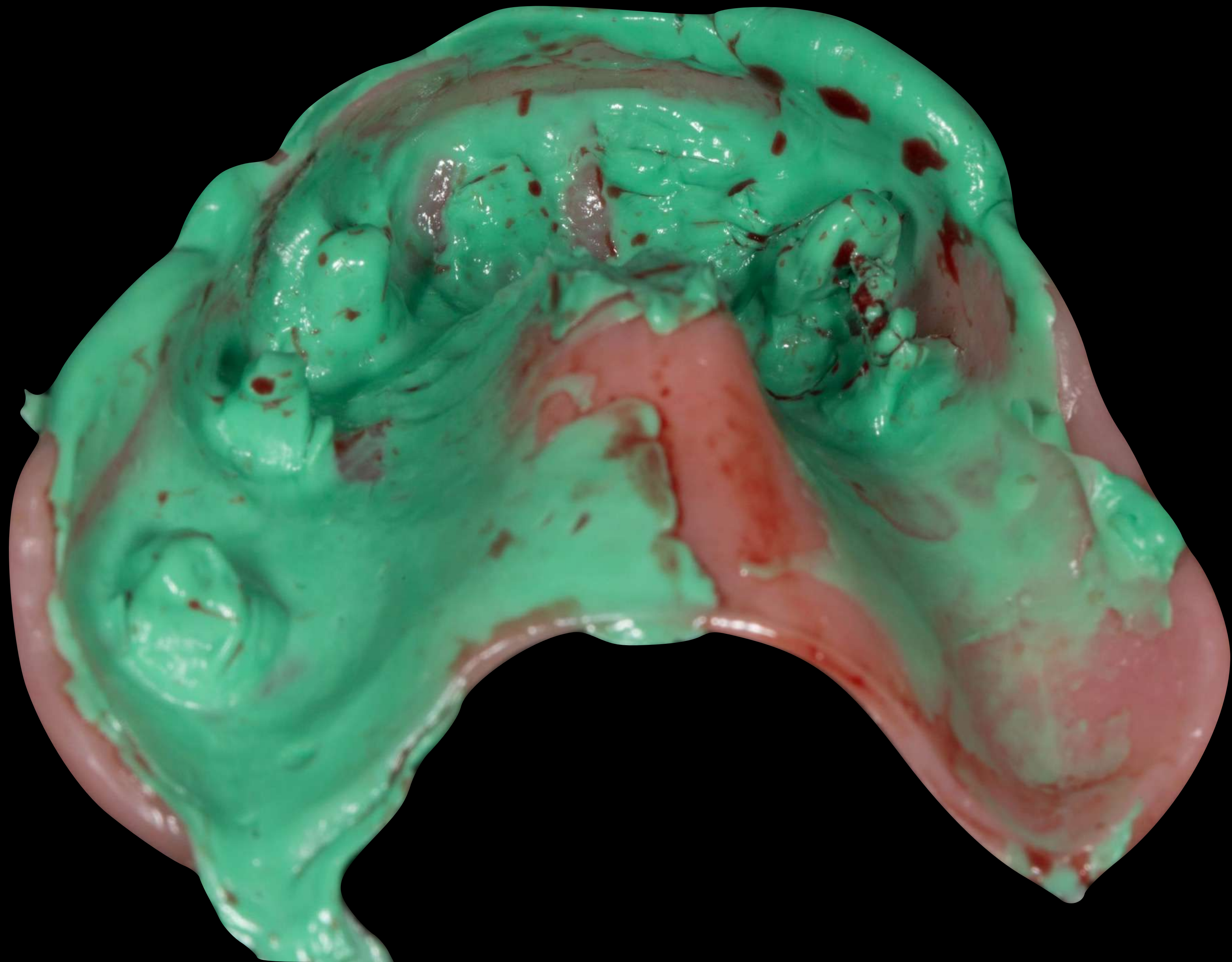




Extractions Visit 4











Mk 1 Room for improvement

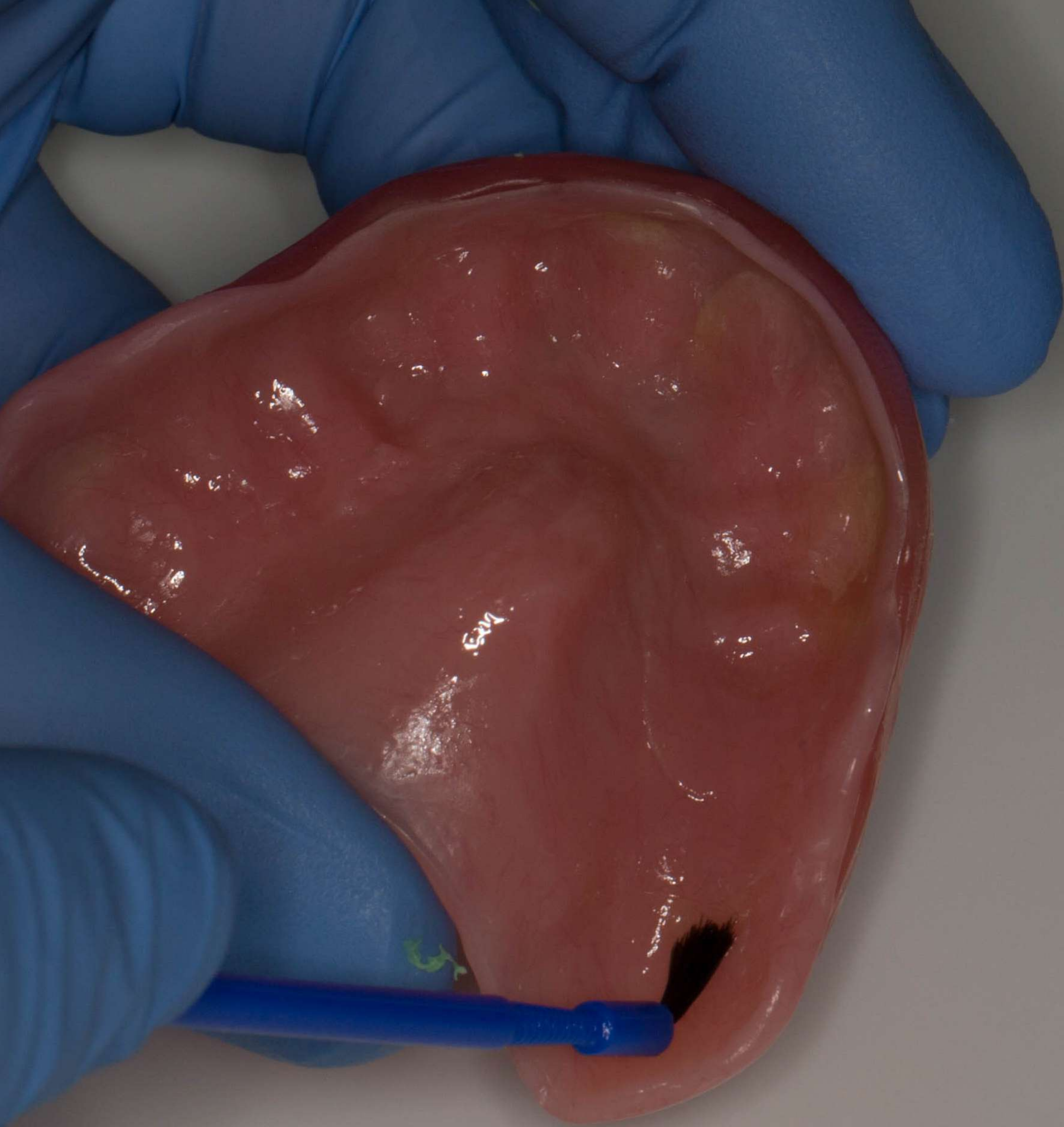




2 months - chairside reline

Top tip



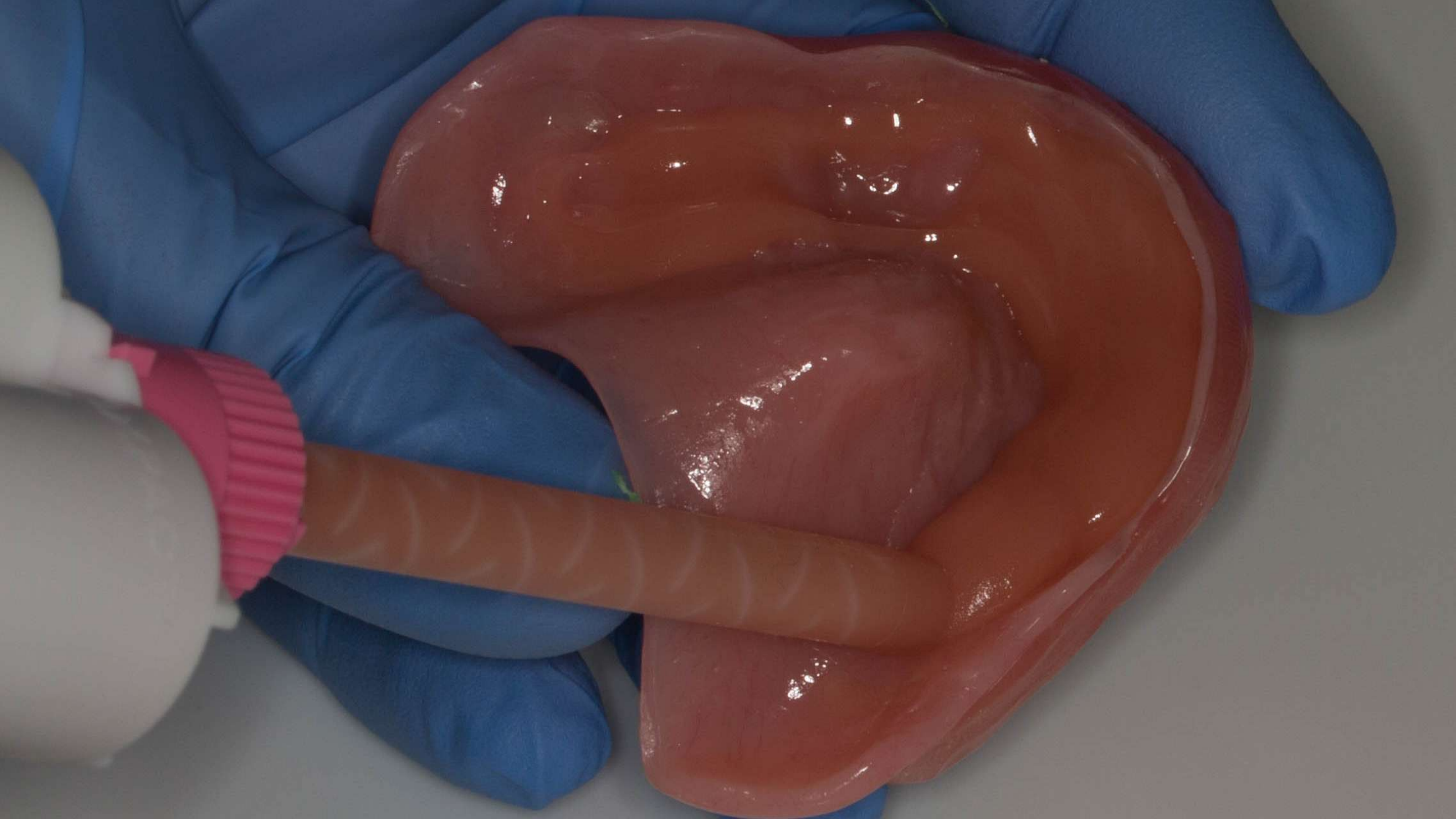


Ufi G



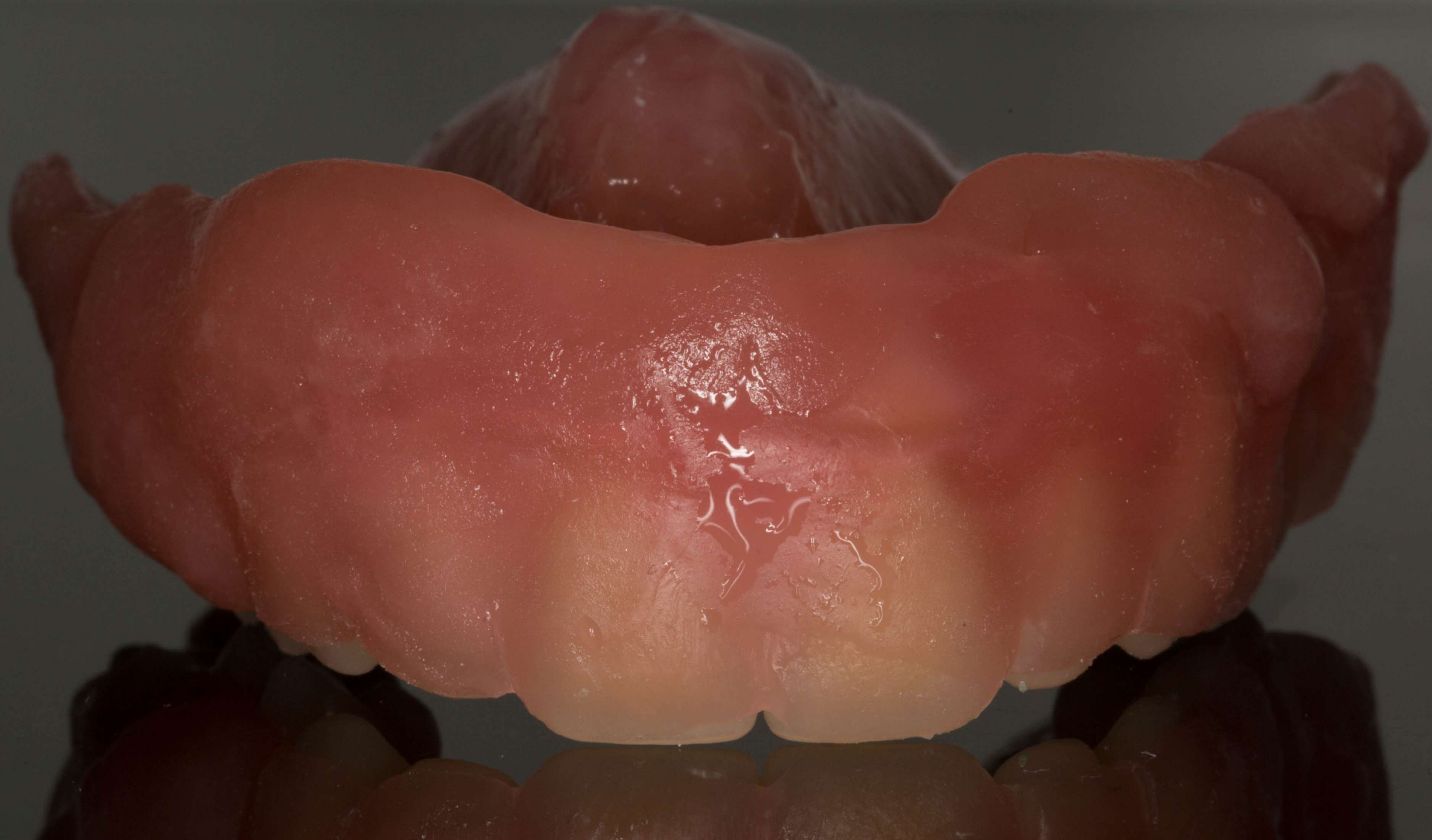
Ufi Gel hard C

Flüssiges Adhäsiv
für den Haftverbund




Chairside relined









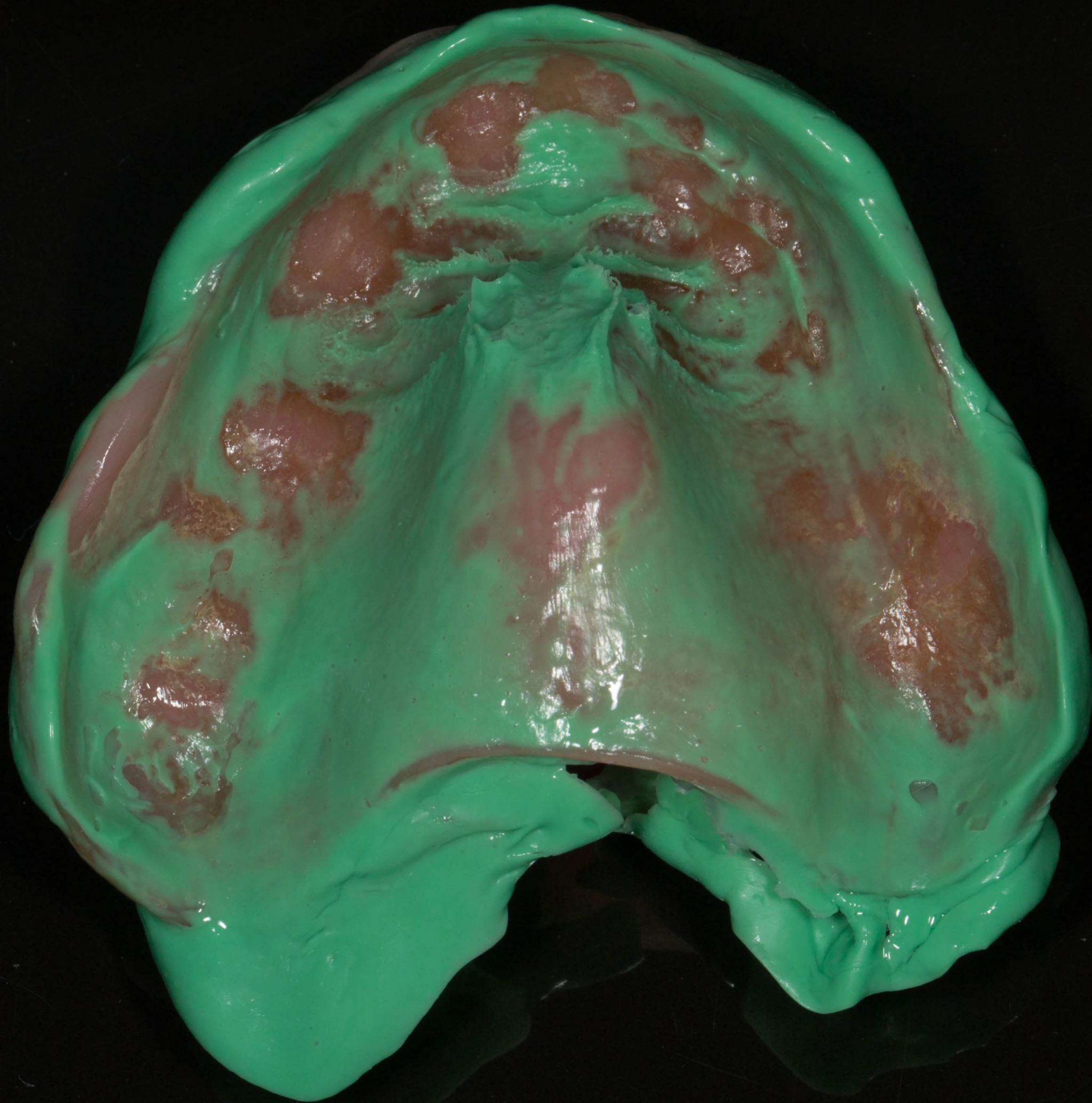
A close-up clinical photograph of a patient's mouth, showing the upper lip and the inner surface of the upper dental arch. The tissue appears moist and pinkish-red. A white, semi-transparent material is visible, likely a lab relining or a partial denture base, which has been in place for 4 months. The text "4 months - lab reline" is overlaid at the bottom of the image in white font.

4 months - lab reline

Mk1 - lab reline









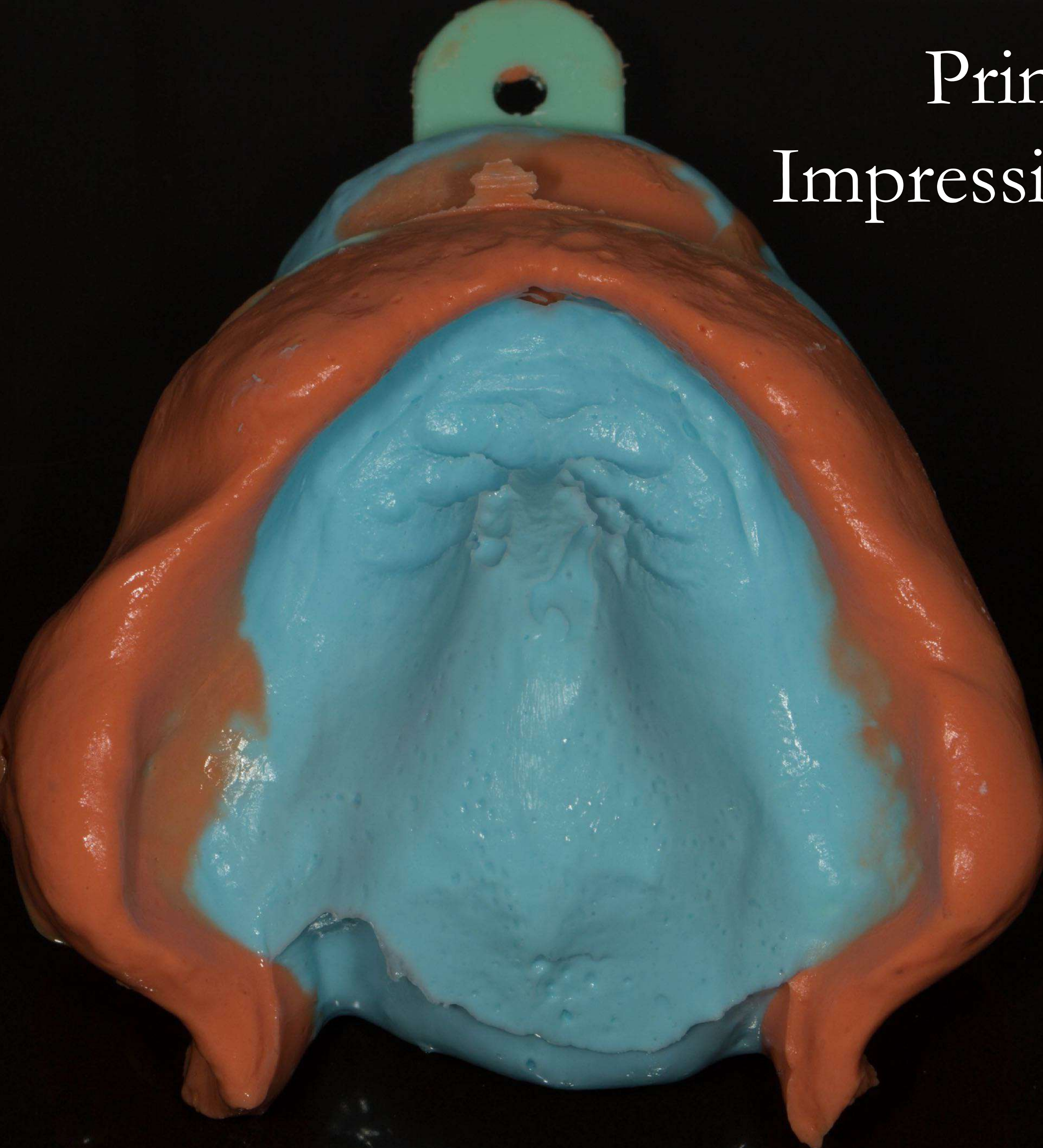


Mk1 - lab reline fit

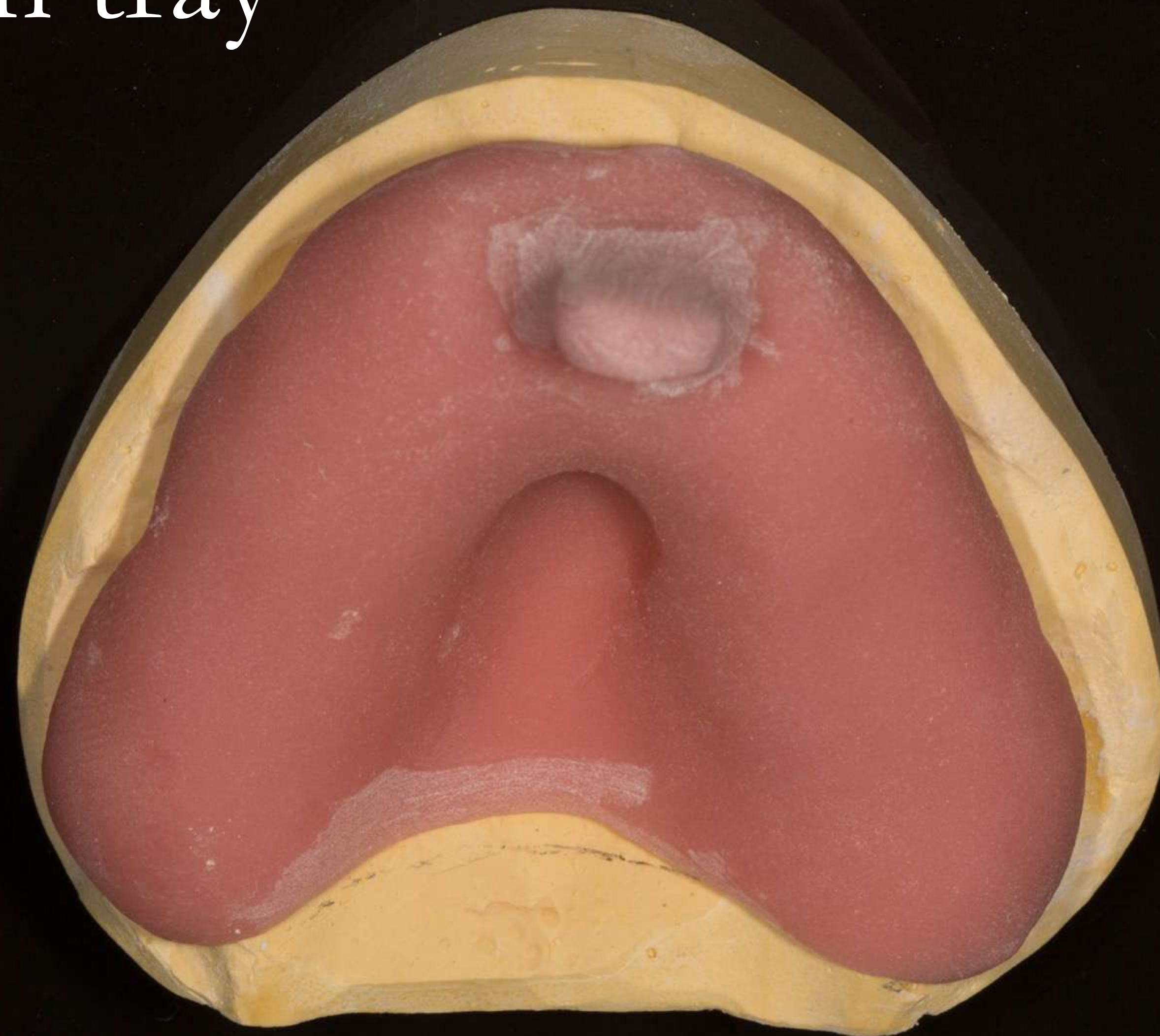
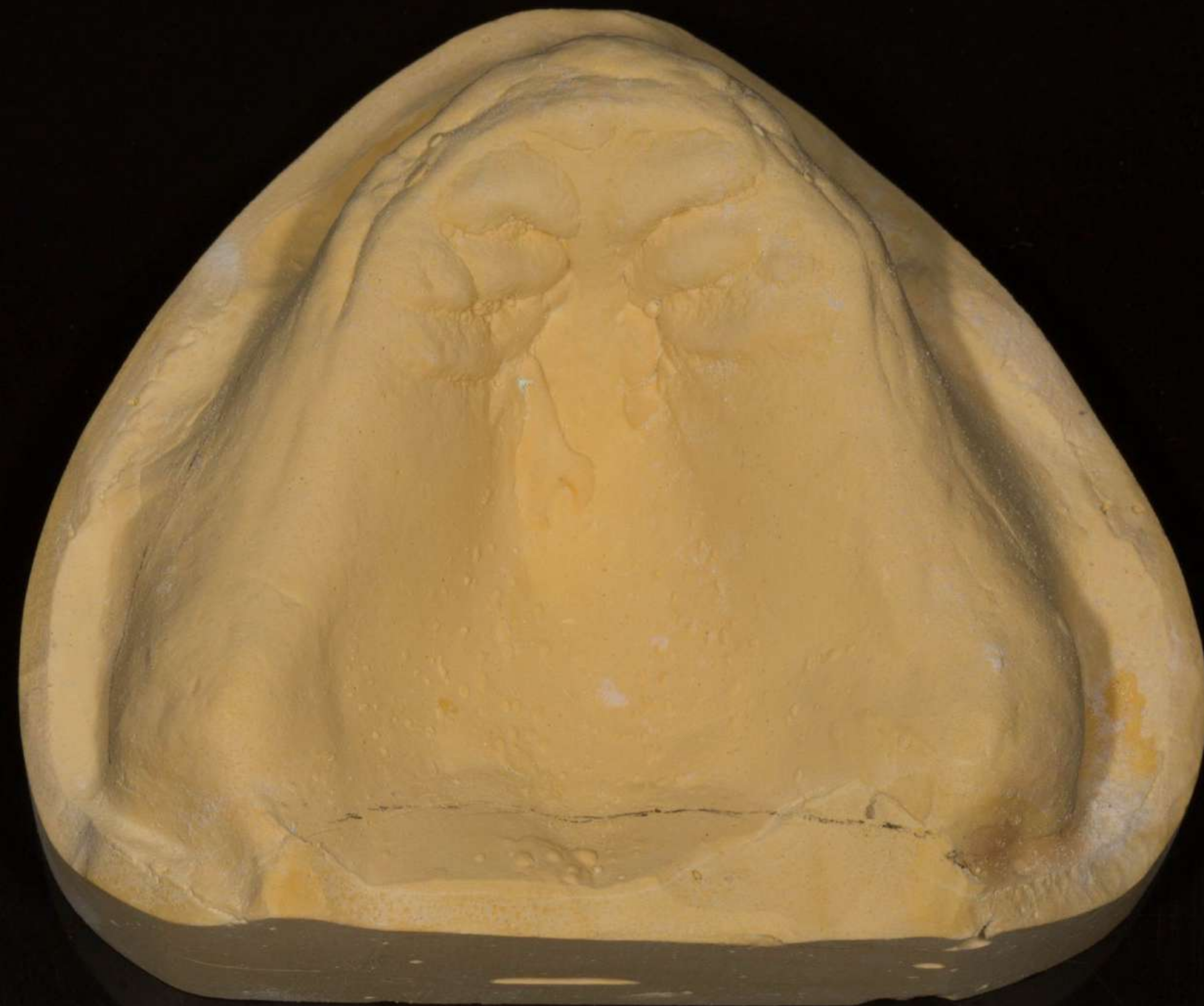


Wait 8 months

Primary Impressions Mk 2



Custom tray



Definitive
impression Mk 2

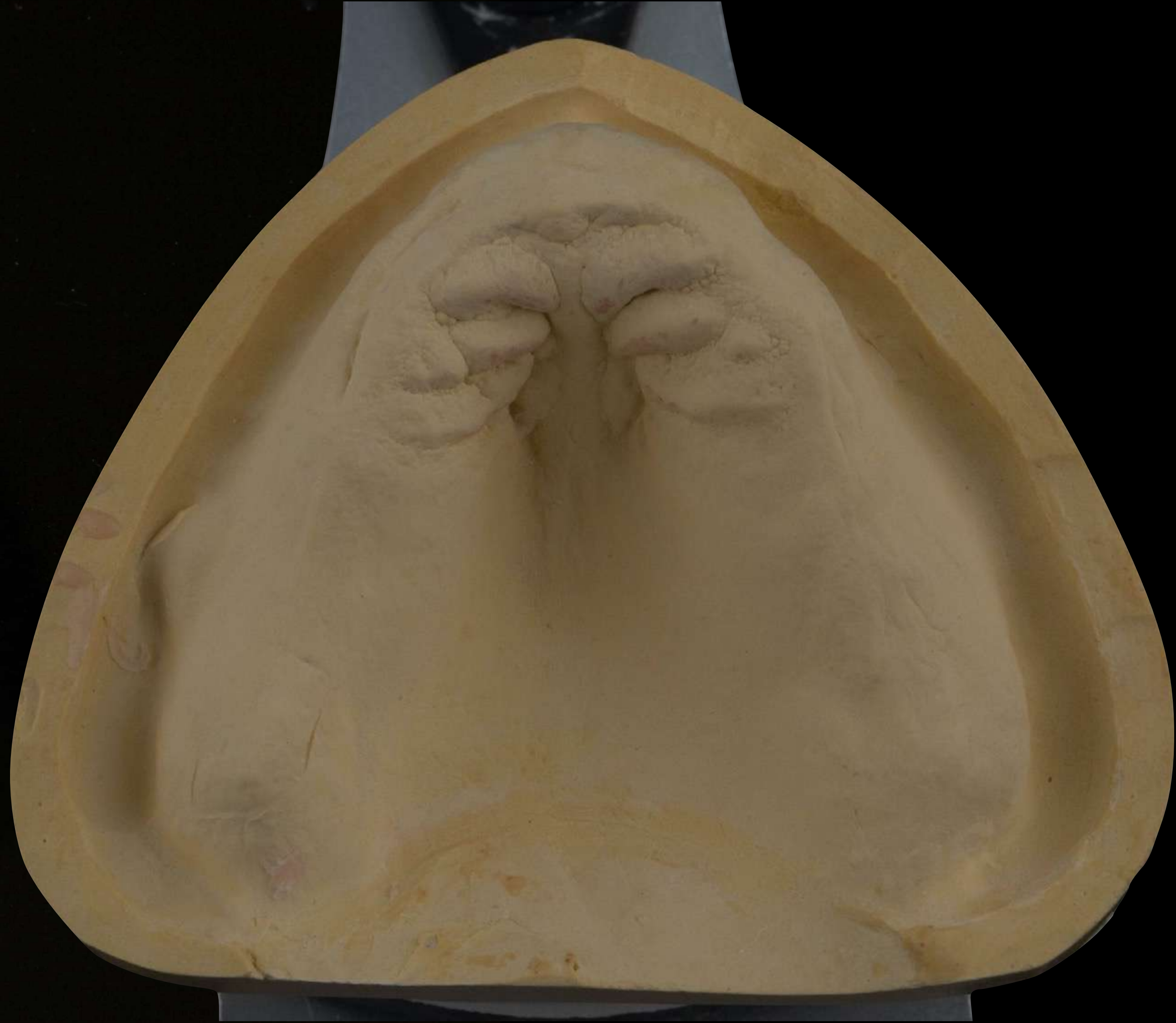


Adhesive



Blueprint





Registration stage



Central bearing appliance
“Gothic arch tracing”



Wax rim

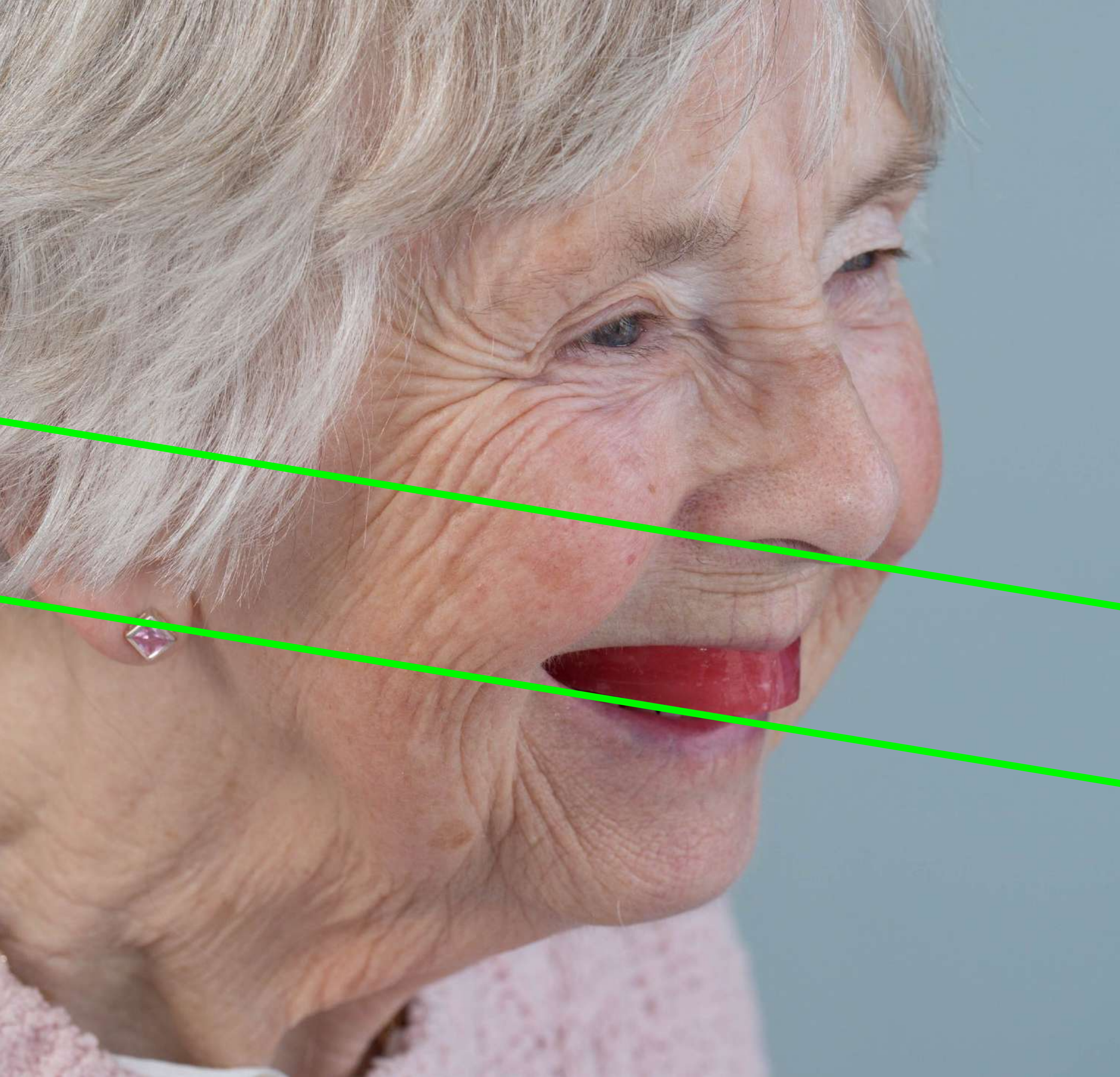


1. Lip Support



2. Incisal plane





3. Occlusal plane



4 & 5 Buccal corridors and centre line

6. Occlusal Vertical Dimension

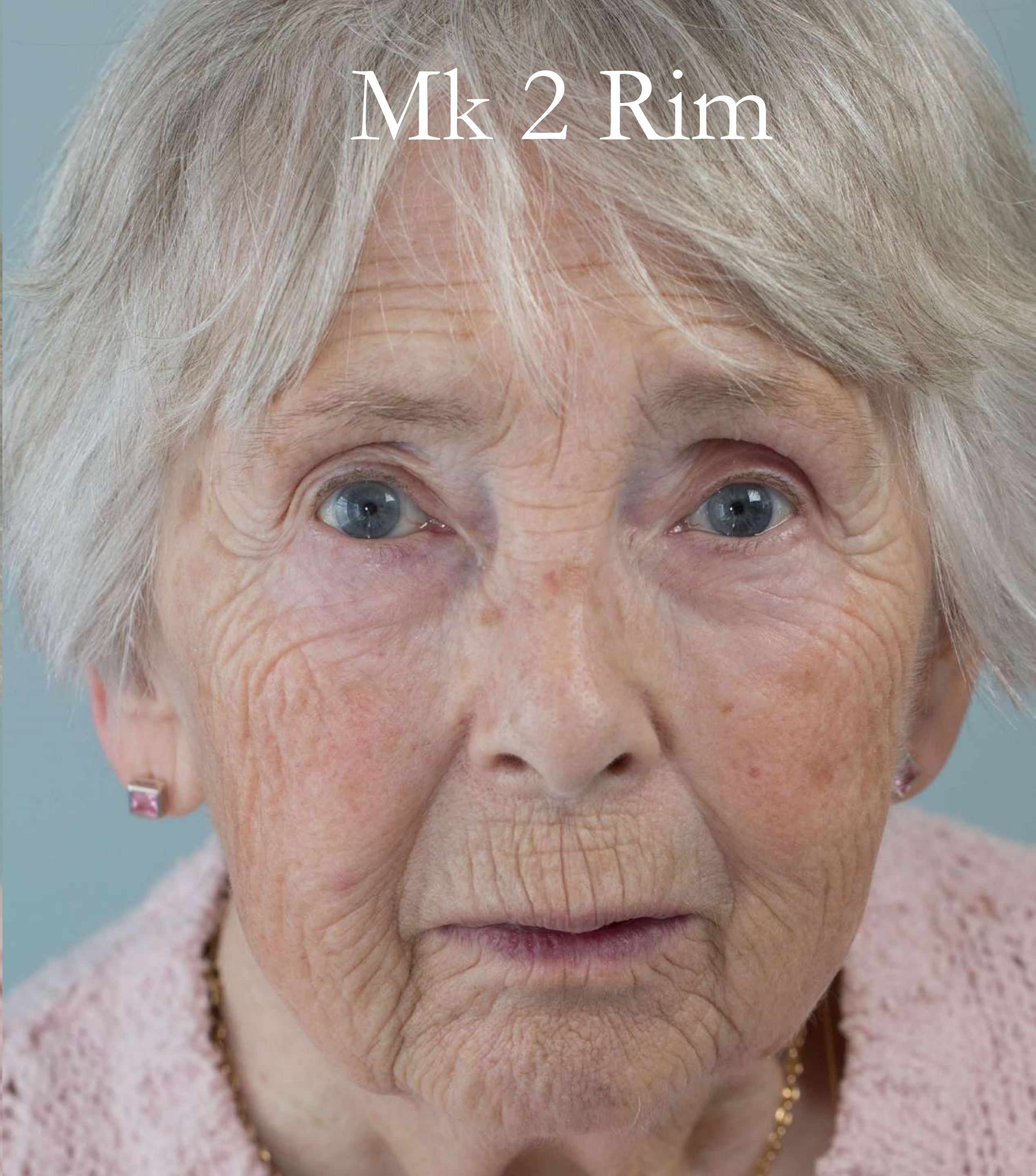




Mk 1



Mk 2 Rim



Mk 1



Mk 2 Rim



Mk 1



Mk 2 Rim



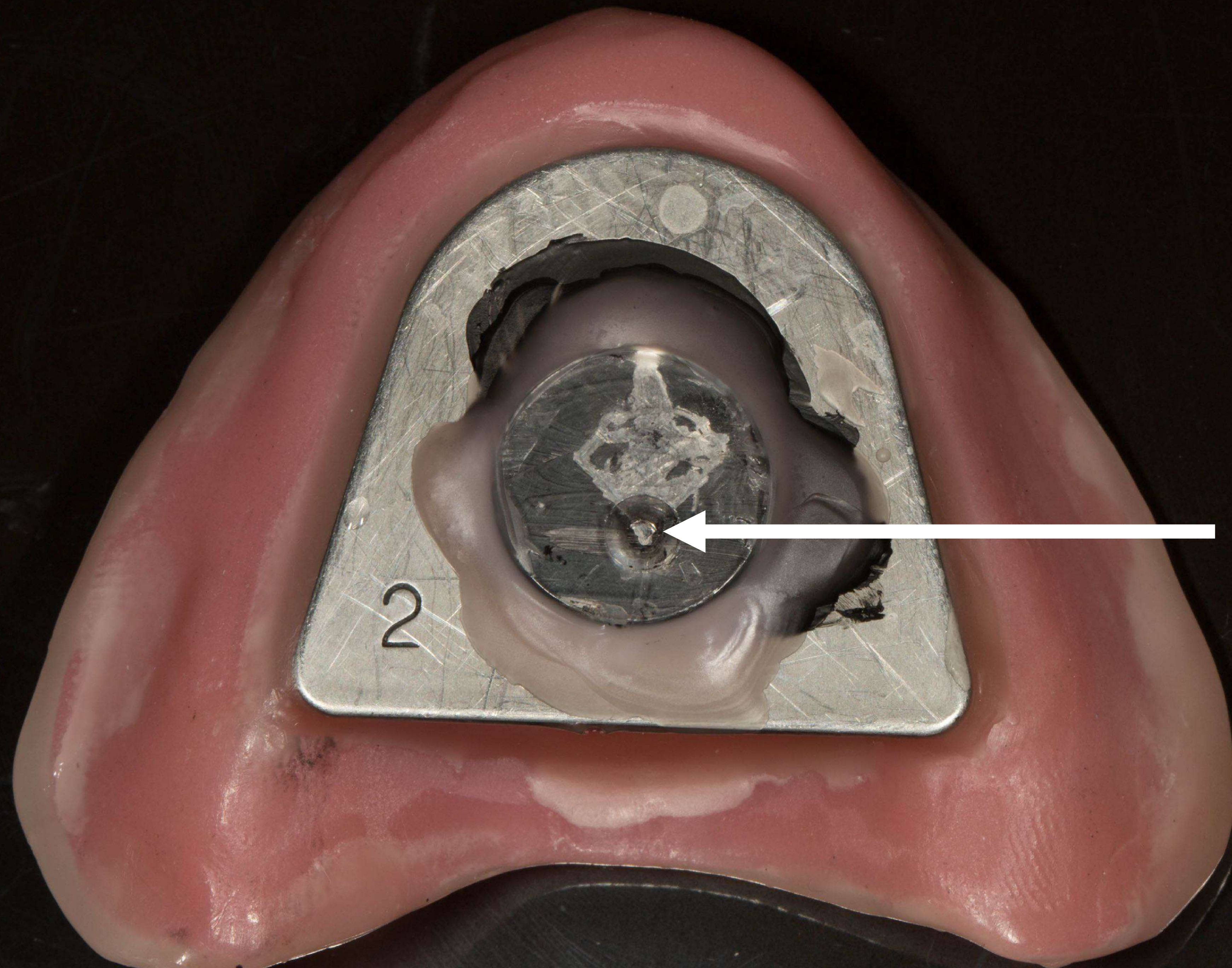
Key photos for Rowan





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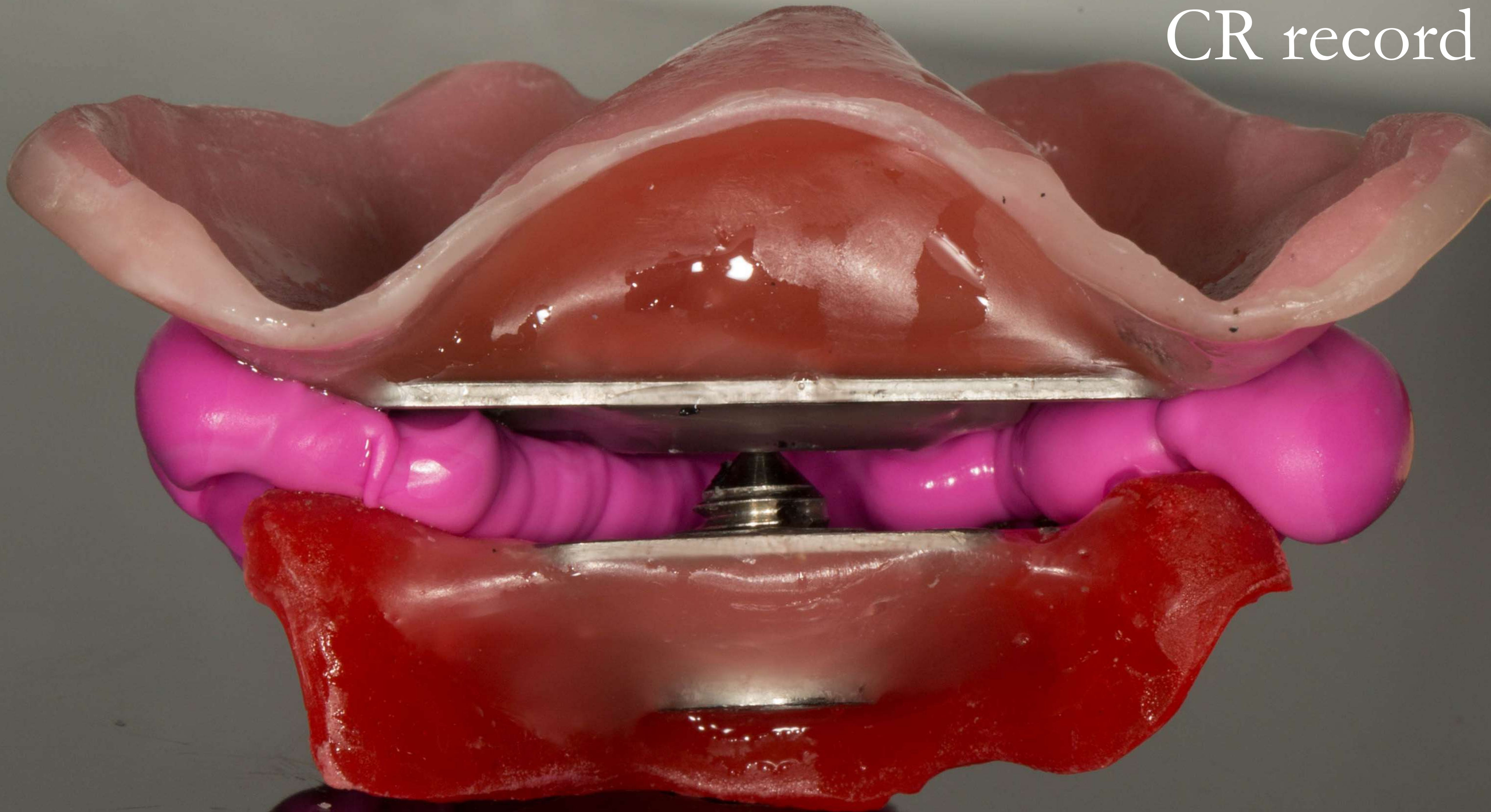
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CR

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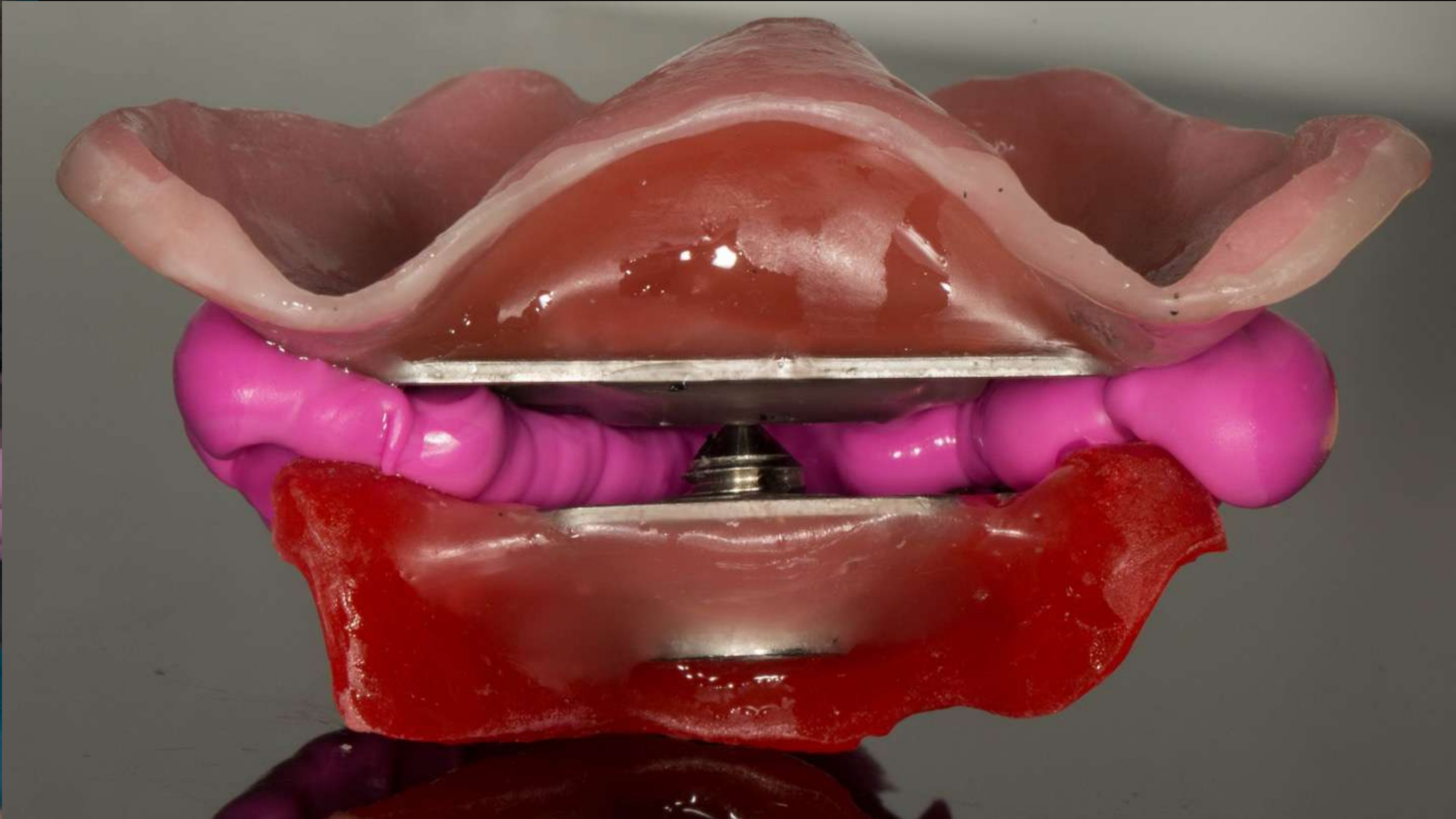
CR record

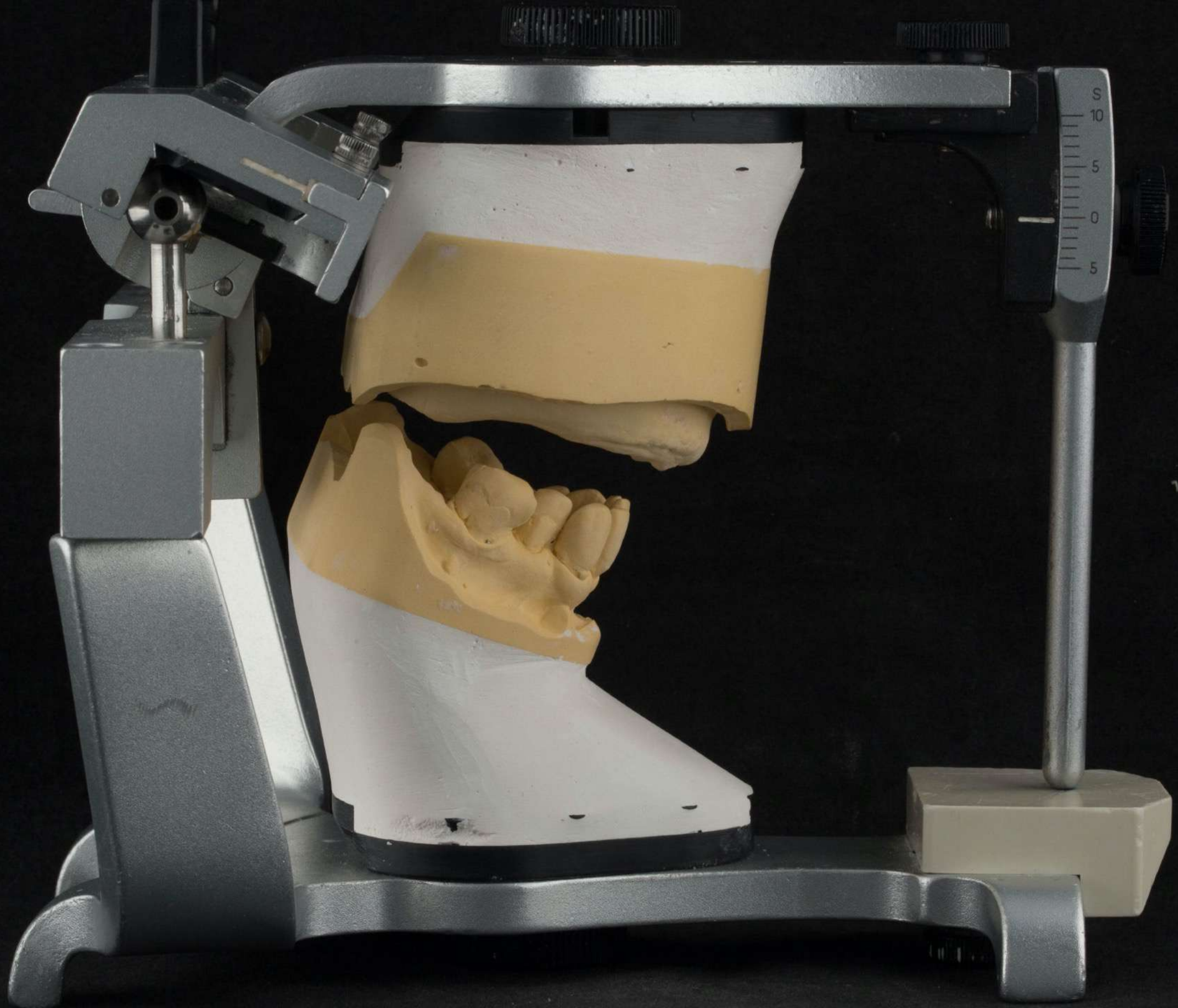


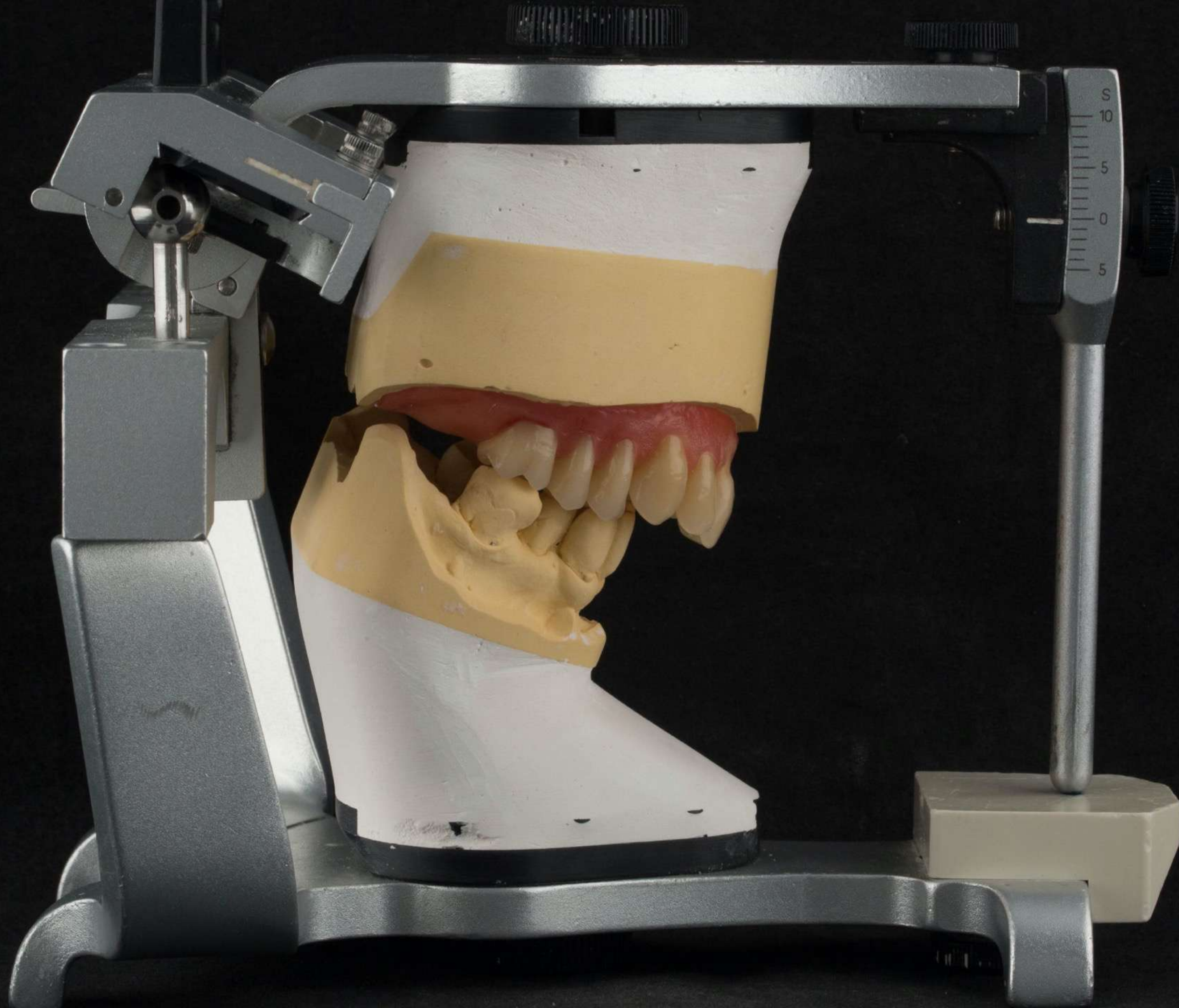
Facebow



+ CR record







Try in Mk 2



Try in Mk 2



Video of Try in Mk 2









12.5 mm



Schottlander Enigmalive + K24B















Ala tragus



Like my own
but better



On reflection
Metal reinforcement













Thank you