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The future of NHS in Dentistry !

Kash was lucky enough to be able to attend Dental Compass first ever study group by Dr. Len D'Cruz at Henry Schein in West London with Dr. Ric Dedi (London & Watford based Private Dentist). They received straight information from Len who is very active in the NHS Dentistry and gave a better insight for Dental Professionals and what they should be expecting out of the NHS in the not so near future.

The study group outlined the contracting arrangements and the prototypes, a understanding of the care pathways and a history lesson based on how the NHS Dentistry has changed over years from the 1980s.

Kash stated " I was actually surprised about VT`s, I didn't know that they were not allowed to construct chrome type frameworks, considering when I qualified as a CDT and during, I made many Co/Cr Dentures, to be honest my first ever job when I opened my clinic a few months after qualifying was an implant bar retained denture, I am glad I went today as it has given a better understanding of how NHS Dentistry not only effects Dentists but the Dental Lab as well, good stuff".

The next line up of guest speakers is Dr. Tif Qureshi (The pioneer of Inman Aligner in the UK) on Thursday June 16th 2016 at Henry Schien in London, with the topic outline of ABB – from the simple to the interceptive restorative approach. Use *the link below to book your tickets.*
http://www.dentalcompass.co.uk

Straight Outta London !

Our Dental Laboratory was featured in FMC Dentistry Laboratory Magazine with the title 'Straight Outta London' based on an interview with Kash about the Dental Laboratory, time management, business and many more.

Kash stated " I apologise for the grammar, I actually didn't think they would write it up how I speak, ha! Always reminds me back when I was at uni and we had to say in front of the class what we were struggling with, so I sat at the front thinking they would ask me first and I could say anything, nope... they went from the back to the front and I was the last one, so every thing was taken in terms of a struggle. So I happily said.. I think I have an issue with grammar, the whole class burst out laughing and then someone in the back shouted, what's she got to do with it!! Ha! good times at UCLAN." *To view the article go to www.bremadent.co.uk/news*

LAB IN THE LIMELIGHT

Straight outta' London...

We speak to Kash Qureshi, new owner and managing director of Bremadent Premier London about training, time management and business challenges

Q. Can you please tell us a little about how and when your lab was created, and how the business has grown since?

Bremadent Premier London is a full-service commercial dental laboratory based in London and was established in 1969 by John Gerrard. In October 2015 I acquired the lab from John and took over as managing director in conjunction with the opening of the Swissedent Denture Clinic.

The laboratory started as a small one-storey building adjacent to a dental practice. Over the years, BPL expanded to offer a full service and is now two-storeys high with an added extension adjacent to the building for our second office, in-house clinic and sterilisation room.

Q. Where did you train/qualify, and is there any further education you have undertaken since?

I was born and bred in Walthamstow, East London where the lab is. I had a decent education and upbringing and came from a family where you had to work hard to get what you wanted in life, but growing up in London was hard, you basically had to be tough to survive. If it wasn't for wanted'. I came in and saw John Gerrard - I remember him seeming really tall - he showed me a model, and the shape it needed to be, so I trimmed it and John said it was better than some of his technicians. So I got the job, started in the plaster room and soon I was training other apprenticeships coming in. Since then I worked in the prosthetics department, managing that and building it up, expanding it to seven technicians. Learning about prosthetics taught me a lot before I did the clinical stuff, I went on lots of courses and studied the Swissedent manual nonstop.

I qualified as a CDT from UCLAN in Preston, taking the course while working in the lab. It was still in its early stages but a very good course. It extended my knowledge of what I was doing wrong in prosthetics, seeing things from a dentist's perspective and helping me respect what they do. Now when I approach new dentist clients, as a CDT I can show that I understand what they do.

Q. What type of work does your laboratory carry out?

Being a full-service dental laboratory we offer crown and bridge, prosthetics.

the main part of the business but it is very important. When you're treating patients they put up front which helps with the cash flow. Within the business it's treated as another account although the work we do there is seen as premium.

Q. How many other people work with

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Implant Bar Dentures .... Secure & Stable !!

Today im going to talk about implant bar type Dentures, I have been fortunate enough to have done many implant bar jobs in my own clinic as well as working close with many Dentists on implant retained dentures, whether its fixed, removable, locators, ball or stud.

Implant Retained Dentures are a cost effective solution for denture wearers. With at least two implants in the mandible and four implants in the maxilla every patient can benefit from implant retained dentures. There are various brand names used in Implant Dentistry, here is a list of systems commonly used for Implant Retained Dentures .

Removable | Ball head type | Locator type :
This system allows the patient to place and remove the implant denture when needed. A denture can be made to seat directly over ball head or locator head implant. This is a cost effective solution for patients. For best results chair side pick ups intra orally are recommended over pick ups lab side on a model due to expansion rates in the plaster.

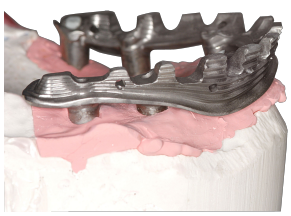
Screw retained | Implant Bar Framework (All on 4 Type) :
This solution is for your patients who prefer the denture to not be removed. A denture can have a metal framework bar incorporate into the denture with screw access holes for the denture to be screwed into the implant for a more stable, secure and longer lasting solution. This system needs to be assessed in accordance with the patients oral health as it is advised to remove the denture in 6 month intervals to clean underneath the denture. All screw type dentures are made with channels incorporated into the fitting surface of the denture around the implant housings to allow for cleaning.

Removable | Implant Bar Framework :
This solution is for patients who prefer a bar type denture with the added flexibility of removing the denture. The implant bar is screwed into the implants and the denture is attached over the top of the bar with specialised attachments (dependent on system). This allows the patient to maintain oral hygiene whilst still benefiting from implant retained dentures.

Bar framework can either be telescopic removable on a implant bar, hybrid bar, bar with attachments or abutment hybrid bar suitable for individual crowns to be placed and are all CAD/CAM milled.

All implant retained denture cases are dependent on verifying the accuracy of the implants when taking the impressions and should require a verification jig to make sure that the model cast from the impression is true to the exact implant positions in the mouth.




From: £1800.00

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Lab work in the spot light

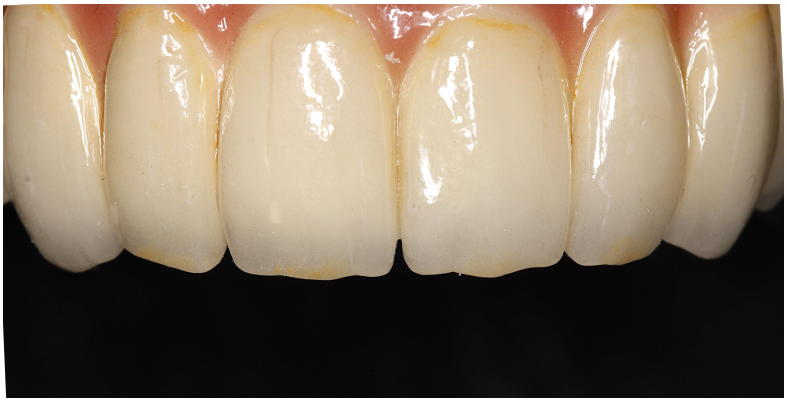
Our talented ceramist Carlos has had many big cases over the years, from smile make overs to full mouth rehabilitation cases. One of the cases was from a talented Dentist who works very close with our laboratory and it goes to show you, the cases will always go to plan when communication is at its best, everything from writing the lab docket correctly to having a biscuit bake of the bridge and showing us where the patients smile line, creates perfection. Below is the lab photos of this case which is more than a 9 unit bridge on implants, its a piece of art.

Technical features:
The Case : 4 Implants with a prepped UR7.

Requirement: 9 Unit Porcelain bonded bridge on X4 implants with a pontic connected to the UR7.

Framework: Due to the size of the 9 unit bridge in terms of width and height, a laster sintered bridge framework was made from Renishaw over the implants and connected to the UR7 prep.

Porcelain: After a biscuit bake the Dentist marked the patients smile, gum slips was added under each anterior tooth. All teeth are textured with transverse lines and have special effects staining around the gingival areas and a slight stain towards the incisal edge with a slight crack running from the ginival area up towards the incisal edge to provide a natural look that blends in with the patients adjacent teeth. The incisal edge of the UL21 UR12 is customized with translucency and shaped to compensate for the patients opposing arch.



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IPS e.max® is a Lithium Disillicate glass ceramic that delivers optimum aesthetics, translucency, durability and strength. With up to 10 years of clinical evidence, over 80 million restorations and a 97.6% survival rate, it is a proven system that provides highly durable and highly aesthetic restorations which makes it an affordable alternative to porcelain bonded crowns and zirconia based restorations.

Technical Features:
IPS e.max can either be pressed or milled via our in-house Sirona inLab CAD/CAM milling machine and provides a flexural strength between 360 – 400 Mpa. It is recommend for single unit anterior crowns or posterior crowns, 3 unit anterior bridges, partial and full crowns, minimal veneers (from 0.3mm) , inlays & onlays and screw retained implant crowns.

Clinical Features:
IPS e.max is a bio-compatible material and is used for highly aesthetic solutions due to its true to nature shade behaviour. IPS e.max promotes durable restoration due to the high flexural strength and is suitable with minimal invasive preparations. There is no condensation shrinkage thus providing a precise fit and reduce adjustment time

Find out more about IPS e.max and speak to our Ceramics Department on 0208 520 8528