

Practice News

JUNE 2017

THE STANDARD YOU'VE BEEN LOOKING FOR



The Campbell Clinic

Hello and welcome to the latest edition of The Campbell Clinic's practice news.

We have started our newsletter by bringing you some information regarding "scanning" in our practice. We want to show you how we use the term scanning in more than one way and how this benefits yourself as patients.

We are always ecstatic to find out what our patients think of their treatment and experience here at the clinic, and thought this would be a great opportunity to share them with you. You can find additional reviews on our website www.campbell-clinic.co.uk

At the practice we believe in giving back, and so have included some information about a fantastic charity we work with, Bridge2Aid as well as some additional information about two members of our team, Karen Walker and Emma McCormack, our hygienists.

Thank you for taking the time to read this and we hope to see you soon.

Colin



JONE 2017

Scanning patients for diagnosis and planning

The high tech revolution, which has been taking over the world over the past 10-15 years has not been lost on dentistry, or at least some aspects of dentistry and some dental practices. At The Campbell Clinic we have embraced the use of technology for improvement of a patients experience and treatment outcomes. In this short article I will hopefully explain to patients simple terms some the things we do at the practice using technology to make things better for patients who attend.

I wanted to focus on scanning at the practice because it's a term that's used quite frequently throughout medicine and dentistry but to explain in dentistry what we might mean by the different types of scanning and how this might affect patients when they attend the practice and how it might improve the experiences that they have.

TYPES OF SCANNING

When people talk about scanning in dental practices there are two different distinct types they are discussing.



1. CBCT (Cone beam computerized tomography) or 3D radiography.



2. The second type of scanning is optical scanning.

This is effectively a CT scan and at The Campbell Clinic we are able to take CT scans for our patients who are necessary to help with diagnosis and planning of specific cases. Not just dental implants but other aspects of treatment can really be helped with CT scans to gain further information as to what is going on. We have had a CT scanner in the practice since 2009 and we are now on our second type of scanner. These are expensive, extraordinary pieces of technology but we are delighted to have this at our fingers tips and the ability to use it for patients were it is required. Situations including wisdom tooth removal, complicated root treatment, implants dentistry and other aspects of treatment.

This uses a "wand" or optical scanner with video laser technology to capture a digital model of the mouth. In the olden days we used impressions material to make stone models, and in fact this is still carried out in certain cases. But more and more now we are able to use a "no impression technique" which allows us to scan the patients and create a digital model. This becomes extremely useful when we can import it into a CT model and we can have a model of patient's teeth and there bones in one place. It also allows us to design what we think will be our end result for a patients treatment digitally before we even start.

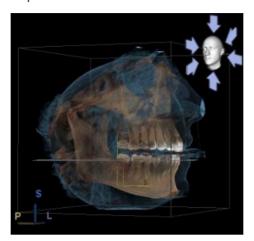
Both of these aspects of patient care can be considered an isolation, but the most exciting this that has happened in our practice over the past 2-3 years is the integration of both types of scanning together to assist us particularly in implant planning.

CBCT scanning will assist us in many aspects, one of the main points to be considered with CBCT scanning is not the scan itself but the interpretation of the scan following its capture from a patient. This is perhaps the most important aspect to CBCT scanning and the have the knowledge, experience and the ability to "report" a scan and to interpret the results of the benefit of the patient is the most important thing. CBCT (CT) scanning opens up all sorts of avenues of diagnosis in all sorts of aspects of treatment. At The Campbell Clinic we accept referrals for CBCT scans from other practices and also accept scans from other practitioners to order to allow us to report them as we have more experience in this than many other people.



We also organize and run and nationally recognized course to teach dentists how to report CBCT scans in the practice. CBCT scanning in our practice has been nothing short than revolutionary to the way we practice on a day to day basis. We couldn't be without it.

But more importantly we couldn't be without the interpretation of the scans and our team who are experienced.



Using intra oral scanning we can now scan a tooth of a patient and design a filling or crown on the same day, which can then be milled in a milling machine to provide a same day crown. This is extraordinary technology and in previous situations we would have to talk a model of the teeth and send the patient away for two weeks with a temporary restoration in place.

More and more now we can do this as a same day procedure with minimum fuss and minimum inconvenience for a patient but with extremely high rates of survival and success. Most



dramatic improvement though has been the ability to plan dental implant surgery using computer guided technology. This allows us to take CBCT scan and a scan of the inside of the mouth (a digital model) and to plan the exact position of the implant. Followed by production of a surgical guide, which is then clipped into the patient's mouth to allow perfect placement of the implant its self.



The integration of this technology into the practice had lead to an enormous investment financially but also emotionally from the team to learn how to use this to the benefit of patients, and where very proud of what we have achieved.

If you're interested to see any of this or to discuss it with a member of our team please do not hesitate to call.

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Our patients at The Campbell Clinic

We love to share and celebrate our great success stories and have recently had these great reviews from ongoing patients here at the practice.



Dale Smallwood:

The treatment I had done was implants and a bridge.

My thoughts on Colin, is that he is is a safe pair of hands, he makes you feel confident in his skills and you know your going to get a good job.

I have recommended the practiced to others, and I will continue to do so.

The Colin Campbell Clinic represents the three C's, confidence, competence and care.

I feel I have got my smile back.



Christopher Mellors:

Our relationship started off very professional, and turned into a friendship.

The benefits of my treatments are, that I can now smile, I can talk to people, I can eat whatever I want. Its nature!

I have no hesitation what's so ever recommending this clinic to anyone who is thinking of having dental treatment done, whether is be implants, or any other treatment, the situation here is superb, five star, and unquestioning the best dental clinic I have ever been to.



Karen Peck:

Colin Campbell was fantastic, put me at ease straight away.

I chose to have treatment for both upper and lower jaw, the upper I have had implants with a fixed bridge and the bottom I have had implants with a removable bridge.

I feel a lot more confident when I talk.

I would recommend the practice to anyone because as soon as you come in the receptionists are really friendly, the surgeons and nurses are a million to one, anytime you need them, they're there.



If you know of anyone who would like dental implants or considering dental treatment we would love to help. We have included a Pass it on card to hand to your friends and family.

STRATEGIC ALLIANCE PARTNERS

Who we work with:

Bridge2Aid was established founders Ian and Andie Wilson in 2002. Bridge 2 Aid provide training for local health workers. The training is carried out by volunteer dentists, nurses, hygienists and therapists from the UK and other parts of the world. For over a decade Bridge2Aid has demonstrated success in both Tanzania and Rwanda. access to life-changing treatment available to more than 4 million people. The Campbell Clinic alone have contributed to this and have helped over 80.000 individuals in East Africa.



Their first training program was ran in 2004, with the help of two volunteer dentists and 1 nurse. During 2005 to 2007, eight programs ran in rural areas of Northern Tanzania, training many Health Workers in emergency dental care. In 2013 Bridge2Aid were running a lot more training programs and had grown both in the UK and in Tanzania. Now the charity were able to create a three year strategic plan outlining that 366 Health Workers will be trained in the next 3 years alone.

Also during 2013 a training program was hosted in Rwanda – the first outside

of Tanzania. Allowing more individuals across rural East Africa to gain emergency dental care, all because of Bridge2Aid's proven training programs.

The Campbell Clinic are strona supporters of Bridge2Aid and over years have raised enough money to support over 80,000 people to gain access to emergency dental care. And this just keeps growing. Colin is a strong believer of giving back and because of this has set up a charity committee within the practice, were employees can volunteer to help support Bride2Aid. Every year we hold a charity ball locally in Nottingham, were we help to raise funds and awareness for Bridge2Aid. These have been a massive success, with out last one, held in November 2016, raising £12,000.

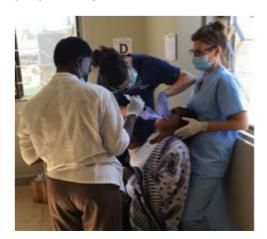
In February 2017 one of our colleagues Beatriz Sanchez Ingo joined the team in Tanzania to help support the charity. Beatriz said "I had heard about Bridge2aid a long time ago and knew how much of a respectable charity it was and they were doing an amazing iob in Tanzania: I had also met Mark Topley, the CEO of Bridge2Aid when he came to talk in the last DES conference hosted by The Campbell Academy, delivering an inspirational speech about Health in the Developing Countries. But it wasn't until one of my best friends and colleagues travelled on one of it's programs last October and told me her experience first hand, that I fell in love with the project". The Bridge2Aid project delivers a 2 week program to train, coach and mentor Clinical Officers, enabling them to provide emergency dental care to their patients, in the form of extracting hopeless teeth. By the end they are



able to offer relief from toothache to their patients, who sometimes suffer for years, something hard to imagine in this side of the World. On her return she explained, "My experience in Tanzania was incredible. When I was there I was in charge of one of the 6 clinical officers we were training. We taught them how to apply local anesthetic and take teeth out for them to provide emergency dental care in their communities.



I mostly enjoyed the one to one training and how to be able to apply, share and develop my professional knowledge in such a different and much needed environment. The charity itself is amazing, well organised, and with an enthusiastic, experienced and committed team. More than half of the people on my team were returners!"



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Meet Our Hygienists

Here at The Campbell Clinic, we have two fantastic hygienists who work very closely with the rest of the team. Both hygienists have a lot of experience and knowledge, which they are keen to share with there patients.



Karen Walker

Qualifications: CEB Dip Dental Hygiene Scotland GDC No: 4748

After qualifying as a hygienist in Edinburgh in 1994, Karen moved to Nottingham where she worked in a variety of dental practices before taking a five-year career break after the birth of her son.

Since returning to dentistry, Karen had attended various courses to enhance her in-surgery skills. She is a dedicated hygienist keen to equip her patients with the knowledge she has gained, to enhance their smiles and, ultimately, their general health and wellbeing.

Karen has a special interest in implant surgery and maintenance. As maintenance is pivotal to the success of dental implants, Karen has developed and implemented a maintenance programme within the practice to ensure all our

implant patients are continually cared for to our high standards.

Karen has lectured at the Congress for the International Team for

Implantology to promote and emphasise the need for continuing maintenance of dental implants among her peers. She is also qualified in all aspects of tooth whitening.

Karen is a supporter of the worldwide dental charity Dentaid. In 2008, Karen travelled to Uganda with Christian Relief Uganda in conjunction with Dentaid where she worked in remote villages providing emergency dental care with a team of dental professionals. Part of the program was to promote Dental Health Education linked to basic Health Education in rural schools. She and the team also helped to formulate a now published book on Infant Oral Mutilation (IOM), a subject at the heart of Dentaid's Educational Development Program in many African communities.

Karen is a member of the professional bodies, The British Society of Dental Hygiene & Therapy and The British Society of Periodontology.



Emma McCormack

Qualifications: BSc DipHE Dental Hygiene & Therapy Sheffield GDC No: 244517

After Emma completed her degree in Biomedical Science in 2010, she decided that she wanted to utilise her knowledge of the human body within a clinical setting and be at the front of patient care. Emma completed the Diploma in Higher Education in Dental Hygiene & Therapy at the University of Sheffield in June 2013.

Emma is passionate about improving patients' self-confidence and general well-being. She believes excellent communication and building a good rapport with each patient is the key to achieving a high standard of care and the best clinical results. Emma has a special interest in preventative oral health care and promotion of good oral health practices, particularly with regards to implant maintenance.

Outside of work, Emma enjoys reading, attending the gym, and spending time with her family and friends.





Its effects are **not mild** or inconsequential, they are agonising, debilitating and inescapable.



of the world has **no access** to a dentist but

25 will give access to **emergency treatment** for the **whole family** in East Africa

Visit www.bridge2aid.org/whatif to find out how you can help

