ALL-ON-4 Plus®
A Permanent Alternative to Dentures
## Index

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dental Implants</td>
<td>2</td>
</tr>
<tr>
<td>Immediate Teeth</td>
<td>5</td>
</tr>
<tr>
<td>All-On-4™</td>
<td>6-7</td>
</tr>
<tr>
<td>Aesthetic Gums</td>
<td>8</td>
</tr>
<tr>
<td>Bone Grafting</td>
<td>10-11</td>
</tr>
<tr>
<td>All-On-4 Plus®</td>
<td>12-13</td>
</tr>
<tr>
<td>Zygomatic Implants</td>
<td>14-17</td>
</tr>
<tr>
<td>Treatment Stages</td>
<td>18-19</td>
</tr>
<tr>
<td>Hygiene</td>
<td>20</td>
</tr>
<tr>
<td>Review &amp; Maintenance</td>
<td>21</td>
</tr>
<tr>
<td>Teeth Options</td>
<td>22-23</td>
</tr>
<tr>
<td><strong>PORTFOLIO</strong></td>
<td>24-47</td>
</tr>
<tr>
<td>General Anaesthetic</td>
<td>48-49</td>
</tr>
<tr>
<td>Radiology</td>
<td>50</td>
</tr>
<tr>
<td>Laboratory</td>
<td>51</td>
</tr>
<tr>
<td>Patient Services</td>
<td>53</td>
</tr>
<tr>
<td>Dr Alex Fibishenko</td>
<td>54</td>
</tr>
</tbody>
</table>

All material contained herewith is for general information only and should not be regarded as individual dental or medical advice. Such advice may only be provided following a face-to-face consultation. Any surgical or invasive procedure carries risks. Before proceeding you should seek a second opinion from an appropriately qualified health practitioner.
Many people with dental problems avoid smiling, which cause them to appear less social, and perhaps introverted. The pattern is the same for problems when eating. Traditional false teeth are not always reliable, and there are foods and dishes you can only dream of tasting. Dental dysfunction can also affect nutrition and well-being, as the types of food that can be consumed are often limited - and it can also be an aesthetic problem, changing a person’s entire personality.

Recent advances in medical and dental technology have led to expanded areas of clinical practice never before thought possible. With such advances adding to one of the most researched and successful treatment modalities in dentistry to date, dental implants are today considered the standard of care for many oral conditions, and the best alternative to natural teeth or dentures for many who have lost or are about to lose their teeth.

The All-On-4 Plus® treatment offers an innovative solution for full arch rehabilitation with dental implants, which is focused on patients’ common desire for an uncomplicated treatment process and optimal immediate results. At the All On 4 Clinic we provide a high standard of care by using advanced techniques and 4 or more implants as determined by individual clinical situations, to support immediate fixed replacement teeth aimed to look, feel and function like beautiful natural teeth, which has helped many hundreds of our patients smile and function with confidence.

“HAPPINESS BEGINS WITH A SMILE”
ALL-ON-4-CLINIC’S TEAM MOTO
**Dental Implants**

A dental implant is a small titanium fixture that serves as the replacement for the root portion of a missing natural tooth. Due to the biocompatible properties of titanium, when implants are placed in the upper or lower jaw, they fuse with the bone and thus serve as anchors for the replacement teeth.

Implant-supported replacement teeth are aimed to look, feel and function like natural teeth, so that you can eat and drink normally with renewed confidence.

The embarrassment, irritation and self-consciousness often experienced by people who have missing teeth, those who wear dentures or who have suffered through older methods of tooth replacement may be overcome with the confidence of permanently anchored dental implants.

---

**DID YOU KNOW?**

Dental Implants were discovered quite by chance. Professor Branemark was not a dentist. He was a Swedish scientist doing research on the way blood vessels behaved inside bone. He inserted tiny little microscopes into living tissue in animals and made his observations. When he finished his study, it was time to remove the microscopes, but when he tried to remove them he was unable to. They were stuck to the bone, completely integrated. This is how he discovered osseointegration, and that titanium is accepted by the body’s immune system as though it had been its own biologic substance. And the rest, as they say, was history.
Smile

a pleased, kind, or amused facial expression, typically with the corners of the mouth turned up and the front teeth exposed
LUCINDA

47 years old
Actress

Treatment:
Upper All-On-4 Plus®

EARLY 2012
IMMEDIATE TEETH

Traditionally, the procedure was performed in two steps. The dentist began by installing the implants, which were left for three to six months to heal and integrate with the jawbone. The permanent teeth were not fitted until later. During the healing period the patient was given a temporary denture. This has been shown to be a potential cause for bone loss around the implants, thus avoiding a loose temporary denture with an immediate fixed bridge as with All-On-4 Plus® is a step towards a better outcome.

Today, modern implant design and state-of-the-art surgical techniques used at our clinics allows most patients to have fixed teeth fitted within a few days from the surgery. To get it right, a detailed work-up is done before the surgery to design your smile. After the implants are placed, teeth are set in wax in Madame Tussauds style, and tried in your mouth for aesthetic fine-tuning. It’s completely individualised. You get to approve your teeth before we finish.

A small percentage of patients may need to improve the volume or quality of their bone with bone grafting, which can often be done simultaneously with the implant procedure.

Even cases with advanced resorption of the jawbone can be treated with permanently anchored immediate teeth with the All On 4 Clinic’s Zygoma Plus™ solution.
All-On-4

The term ‘ALL-ON-4’ refers to the replacement of ALL teeth ON FOUR dental implants which support them. It is a modern technique where the back implants are tilted 45º to provide the required support for total rehabilitation (Illustration next page). The tilting the back of implants helps overcome bone deficiencies often found in the back of the jaws and most often avoids the need for bone grafting. Since less implants are used by comparison to older methods, there is less in the way of achieving optimal results. It also allows for simpler long-term maintenance and uncomplicated cleaning.

This procedure is the most common treatment in our clinic today for full arch rehabilitation and is suitable for almost all lower cases and most upper cases.

DID YOU KNOW?

The very first patient treated with dental implants was in 1965. He was 35 years old at the time and already wearing full dentures. He was interviewed at a major dental conference in Las Vegas in 2005 and he was asked something along the lines of: ‘why did you agree to be a Guinea pig, get something done to your body that had never been tried before?’ His answer was that he felt like an invalid, as though he had a disability, he said ‘if you were missing your arm and there was a breakthrough that could give you your arm back, would you not do anything to try it?’ His other motive was that he wanted to die with his teeth. He certainly achieved that goal. He passed away in 2007, with his dental-implant-supported fixed teeth. Sure, they were not the every same prostheses that were fitted back in 1965, there were numerous versions since that time, but most of the implants that supported the prosthesis were still the original dental implants.
UPPER AND LOWER REHABILITATION WITH ALL-ON-4™
Aesthetic Gum Replacement

For good aesthetics in a smile there needs to be harmony between the teeth, gums and the lips. In most patients who have lost or are about to lose their teeth, the gums loose their form and symmetry from gum disease or recession.

In such cases, ‘aesthetic gum replacement’ is the only predictable way to restore healthy proportions and harmony required for a natural looking smile. All-On-4 Plus® incorporates an Alveolectomy procedure to help achieve this.

Alveolectomy is the reduction or reshaping of the underlying bone, which serves to create the required space ‘aesthetic gum replacement’. It also creates a flat gum interface which simplifies the cleaning process. The resultant improvement to the restorative space facilitates the design and positioning of the implant-supported replacement teeth thus allowing for the optimal choreography of your smile.

PROBLEMS
Asymmetric Gingival Recession | Inadequate Gum Proportions
Female | Age 44

SOLUTION
Upper All-On-4 Plus® rehabilitation with Aesthetic gum replacement
RACHEL

43 years old
Medical Secretary

Treatment:
Upper All-On-4 *Plus*®
Lower All-On-4™
Bone Grafting

In certain cases it may be necessary to improve the volume or quality of bone with bone grafting. It is a surgical procedure that replaces missing bone with a material called a bone graft.

The graft materials most commonly used are synthetic or bovine bone substitutes, or autogenous bone [patients own bone] that is often harvested from within the oral cavity.

Whilst the grafting procedure may sometimes be required in advance of total rehabilitation, in the vast majority of cases it is possible and advantageous to perform bone grafting at the same time as implant placement to allow for future additional implants as may be required for long term support. By performing the grafting procedure simultaneously, we can utilise the patients own bone harvested from the bone preparation or alveolectomy procedure.

SINUS GRAFTING

The sinus is an air space in the upper jaw that can be utilised for bone grafting. Being a protected space, the graft is less susceptible to external influences, such pressure from a denture, and is today regarded part of routine dental surgical care used to restore bone height in the back of the upper jaw for the simultaneous, or subsequent, placement of dental implants. A bovine bone mineral called Bio-Oss® is a safe and effective material widely used today to help grow new bone, and is a newer and less morbid alternative to older methods of harvesting bone from other parts of the body.

Sinus Graft Procedure:
1. The sinus is accessed from inside and the lining it is gently elevated
2. The Bio-Oss® bone graft particles are placed beneath the membrane
3. The implant is placed at the time of surgery or after healing
4. Improved bone volume for implant placement and long term support
Sinus Grafting may be a required or an optional procedure that is performed at the same time as the implant surgery, and offers the following benefits:

**Improved visualisation** of the bone structure from within the sinus, allowing a better spread of the implants towards the back, and possibly an extra one or more teeth than otherwise;

**Re-using the patient’s own bone** from the alveolectomy in the graft mixture;

**Improving bone volume** to allow for additional implants for more teeth in the back;

**Improved contingency** and more simplified management in the rare case if implant failure.
All-On-4 Plus®

We recognise that patients don’t want ‘Implants’, they come to us because they want a beautiful smile, to be able to enjoy all foods.

With our unique All-On-4 Plus® approach each treatment is planned on an individual basis, and whilst certain patients may need additional implants or procedures for long term results, we aim to avoid prolonged treatment duration with further advanced techniques that afford minimal disruption to our patients’ day-to-day life and function. Whether it’s with four or more implants, with or without grafting, All-On-4 Plus® encompasses indication-specific treatment planning incorporating All On 4 Clinic’s innovative techniques that have a built-in contingency and facilitate the delivery of an immediate final restoration in the most streamlined process.

All-On-4 Plus® incorporates:

1. RESHAPING OF THE JAWBONE AND GUM SURGERY
   AIM: Improving the gum aesthetics, better hygiene through a flatter interface and improved durability

2. BONE AUGMENTATION (WHEN REQUIRED)
   AIM: Improved surgeon’s visualisation of the bone anatomy, wider spread of the implants with potentially more teeth in the archspace, and improved contingency by having new bone

3. CRITICAL IMPLANT POSITIONING USING ALL ON 4 CLINIC’S PROTOCOLS
   AIM: Improved comfort, speech and hygiene

4. ADDITIONAL IMPLANTS (ONLY WHEN INDICATED)
   AIM: Improving support and biomechanical resistance and allowing for an increased number of teeth in an arch

5. DELIVERY OF FINAL PROSTHESIS WITHIN 2-3 DAYS USING ALL ON 4 CLINIC’S INNOVATIVE TECHNIQUES
   AIM: Improved reliability and success rate as well as patient’s overall experience

6. INDICATION-SPECIFIC RESTORATIVE UPGRADES (WHEN REQUIRED)
   AIM: Improving the long term outlook
BEFORE TREATMENT
Patient has large sinus spaces and not enough bone to spread the implants sufficiently for a full complement of teeth.

DAY TWO
All-On-4 Plus® treatment with sinus grafting and insertion of a FINAL prosthesis that functions until the patient decides she wants more teeth or upgrade.

FUTURE EXTENTION & UPGRADE
Additional implants are inserted in the grafted bone and the fitting of a Zirconia bridge extending further back for a full complement of teeth.

BEFORE TREATMENT:
Denture flanges and full coverage of the palate

DAY TWO:
Final result with no plastic palate
Zygomaticus Implants

Bone atrophy is a natural phenomenon that occurs after the extraction of teeth, which is exacerbated over time due to wearing of a denture. Patients with advanced atrophy of the jaw due to many years of denture wearing sometimes do not have the necessary minimum volume or quality of bone required to have dental implants. The situation may be the same even when there are teeth still present, and when these are affected by severe infections or gum disease that cause the destruction of the jawbone. Such patients may often be deemed unsuitable for conventional treatment with dental implants.

Many of the patients treated with zygomatic implants at our clinic have been told elsewhere that they were not suitable for dental implants.

Zygomatic implants, also known as ‘Zygoma’, are longer than standard dental implants, which instead of relying on the jawbone, transverse the poor area of your upper jaw to anchor into the underside of the cheekbones from the inside through the sinus space.

This approach is used for severely resorbed upper jaws and is designed to facilitate immediate rehabilitation with fixed replacement teeth. The zygoma implants are inserted in the back section from within the mouth, along with one or more additional regular implants in the front part of your jaw, or in the most severe of cases two zygomatic implants may be placed on each side, which is referred to as Quad Zygoma (bottom right).

..FOR SEVERELY RESORBED OR BONE-DEFICIENT UPPER JAWS
MAY

85 years old
Retired

Treatment:
Upper Zygoma Plus®
Lower All-On-4™

EARLY 2014
TRADITIONAL ZYGOMA

The main advantage of Zygomatic treatment is the immediacy of the process, which is similar to the All-On-4 Plus® process. However, traditional methods have been associated with increased risks that included sinusitis and oro-antral fistula (an open communication between the sinus and oral cavity) because of the thinness of the bone [A] and the implants being placed through the sinus space being susceptible to bacterial cultivation that leads to those risks.

From a practical and clinical perspective, due to anatomical and technical limitations [B], there was also often an issue with the results being compromised compared to the grafting option or All-On-4 Plus® solution in terms of strength and durability, hygiene, aesthetics and bulkiness with reduced comfort [C].
NEW ZYGOMA Plus™

Our Zygoma Plus approach involves overcoming the anatomical limitations of the jawbone by with displacement of the base of the sinus area as required so as to improve the restorative space (D), and also incorporates simultaneous bone grafting (E). Our technique is a combination of various proven methods that have been put together aimed to help improve the outcome and reduce some of the risks.

The main benefits compared to the traditional approach include:

- It facilitates more accurate positioning of the implants, which is more conducive to optimising the restorative and aesthetic outcome compared to the traditional approach.

- Because the implant is surrounded by graft material, the graft medium between the sinus space and the oral cavity acts as a barrier, thus helping reduce the associated risks when the implants would otherwise be exposed in the sinus space.
EXAMINATION
The first step is to make an appointment for an oral examination to go over the treatment alternatives and determine the solution that works best for your very individual needs and expectations.

DIAGNOSTICS
An OPG and CAT scans are usually required to determine implant positions in full arch rehabilitation. If you are suitable for keyhole guided surgery, a special stent will be made to wear during your scan.

WORK-UP
Photos and models are used to plan the optimal set-up of the replacement teeth for aesthetics, function and speech. Surgical stents are then fabricated to guide the implant placement according to the work-up.
**IMPLANTS**

**DAY 1** Following extraction of teeth (if any), the jaw bone is reshaped with an ‘alveolectomy’ and the implants are placed in the same visit. The wounds are then closed with dissolvable sutures and impressions of the implants are taken for the next stage.

**TRY-IN**

**DAY 2** The teeth are set in wax and tried in your mouth within 5-24 hours after surgery. Any necessary adjustments are made as required with your input. You get to see what your teeth look like before we finish.

**SMILE**

**DAY 3** Your replacement teeth are inserted the very next day. We aim to give you a reason to smile with confidence. The initial set of teeth are constructed from High Impact Acrylic for optimal aesthetics and function. Other teeth options are available once the implants are integrated.
ORAL HYGIENE

At 3 weeks after your surgery, once the swelling had subsided, and you have become more accustomed to your new teeth, we will show you simple additional methods to effectively clean your new teeth. These include water flosser, bridge floss, and brushes with specialised tips.

Whilst the teeth often feel instantly solid and fully functional, it is important to stay on a softer diet (fish, pasta, eggs, stir-fry, etc.) for the initial 3 months of healing so as not to disturb the biological process of osseo-integration.

Once we confirm that the implants have integrated, at the 4 months review, you can start eating all types of food, even biting apples, nuts, crusty breads, chocolate and steak. Future maintenance is often uncomplicated and involves regular attendance for scale and clean, as with natural teeth, x-rays every 2 years, and may at times require certain repairs. All repairs to your bridge are included for a period of 2 years.
REVIEW & MAINTENANCE

At 4 months after your surgery we will see you for review to verify that implants have integrated and to fine tune your teeth as may be required. At this time it is also possible to remove the bridge to re-line its surface, or to make adjustments that require processing in the laboratory. We always aim not to leave you without your teeth for longer than a few hours, depending on what (if anything) needs to be done. This review and any laboratory adjustments are part of the package and an extension of our service to you.

Remember, we are always here to educate and support you, or work with your referring dentist, so as to help ensure that you get the most out of your new teeth.
TEETH OPTIONS

HIGH IMPACT ACRYLIC

Constructed from a highly aesthetic and resilient acrylic material, this bridge is the only choice for immediate teeth. It is reinforced internally with metal support, and is designed as the permanent restoration with optimal aesthetics and function.

Over time some wear occurs and this varies from patient to patient. On average, the acrylic teeth require replacement every 3-5 years. The process of replacing the teeth is uncomplicated and does not require any additional surgery. In certain patients, such as heavy grinders or those in whom the improvement to their biting force is beyond the tolerances of the acrylic material resulting in excessive wear or signs of stress, an upgrade to a stronger material such as Zirconia may be required at an earlier time, or at some time in the future.
Older methods of reinforcement in dentistry involved the use of a cast gold substructure to support the teeth. Today’s technology allows the use of zirconia or titanium substructures instead. These materials are more biocompatible and are precision milled, leading to superior adaptation over the implants and improved tissue health. Titanium substructures may be used to support acrylic teeth or zirconia-ceramic teeth, whereas the zirconia substructure is designed especially for direct layering of ceramic teeth for improved light transmission and long-term natural aesthetics (above).
IGOR’S STORY

Igor has had problems with his teeth for many years and had numerous restorations that were breaking down. The turning point for him was when he lost his front teeth, and with it he lost his ability to play the saxophone. The appearance was not so much of a problem for him. His main concern, apart from being unable to eat many foods, was that as a musician he was unable to work and was also facing the loss of more teeth.

IGOR

49 years old
Musician

Treatment:
Upper All-On-4™
Lower All-On-4™
EARLY 2008
UPPER & LOWER ALL-ON-4

COMPLETION TIME: 3 DAYS
ANNA

40 years old
Jeweller

Treatment:
Upper All-On-4 Plus®
Lower All-On-4™

EARLY 2009
ZIRCONIA UPGRADE 2013

See page 40 for before and after
HAVI

39 years old
Cosmetic Consultant

Treatment:
Upper Zygoma Plus®

LATE 2013

See page 35 for before and after
MOXIAN

47 years old
Housewife

Treatment:
Upper All-On-4™
Lower All-On-4™

LATE 2013

See opposite page for before and after
SUE’S STORY

Sue presented with missing teeth and wearing a partial upper denture which she hated.

She was distressed by the condition of her teeth and years of continued dental work with many fillings, crowns and root canal treatments, yet her dentists never being able to quite get control of her situation with a continued cycle of erosion, tooth decay and infections.

Her teeth felt fragile and were clinically structurally compromised. She was not able to chew all foods.

Sue wanted to avoid embarking on dental treatment that would be merely the same repairs and fixes of the past, and wanted to improve appearance, function and reliability.
SUE
59 years old
Retired Carer

Treatment:
Upper All-On-4 Plus®
Lower All-On-4™

EARLY 2013

See prior page for before and after
NICK
52 years old
CEO

Treatment:
Upper All-On-4 Plus®
Lower All-On-4™

EARLY 2010

See opposite page for before and after
Havi’s Story

Havi had a history of failed dental work and wanted to do something more permanent that would improve the appearance of her smile. She saw a dentist who gave her the option of full set replacement, but Havi was reluctant to remove whatever teeth she had left and decided to pursue a more conservative approach.

Her dentist placed some implants in the upper jaw, and temporary crowns. Havi began to suspect that it was not going to look like she expected due to the unevenness of the gums, dark gaps, and general imbalance (top next page). In addition, soon after commencing this work she suffered another infection from a fractured tooth that caused her pain and put her in a state of distress.

It was decided that it was time to explore full set replacement, but Havi had so much bone destruction from the infections, current and prior, as well as existing implants that had to be removed, that there was no adequate bone left for a straightforward approach with All On 4™. She also required surgical repositioning of the gum level with an alveolectomy to allow for Aesthetic Gum Replacement and restore balance. She was treated with Zygoma Plus® (next page middle and bottom).
HAVI

39 years old
Cosmetic Consultant
Treatment:
Upper Zygoma Plus®
LATE 2013

Please Note: The pictures may not be an accurate comparison due to presence of make-up and lipstick.
IAN’S STORY

Ian’s main issues were that he was unable to eat and did not like to smile. His issues were to do with a dysfunctional severe malocclusion due to a genetic discrepancy in the size and alignment of the jaws, crowding of the teeth, and a deep bite (bottom left).

One of the options considered was orthognathic jaw surgery and orthodontic treatment (braces), however due to numerous missing teeth as well as other deteriorated teeth this option had limited prospects of success with more significant risks.

Treatment using All On 4 Plus® in the upper and All On 4 in the lower meant a ‘new canvas’ with improved artistic and technical freedom to design the new teeth to a more ideal bite and aesthetic balance.
IAN

61 years old
Retired

Treatment:
Upper All-On-4 Plus®
Lower All-On-4™

EARLY 2013

See prior page for before and after
KAYE
55 years old
Customer Service Officer

Treatment:
Upper All-On-4™
Lower All-On-4™

EARLY 2011
ZIRCONIA UPGRADE 2014

See opposite page for before and after
Please Note: The pictures may not be an accurate comparison due to presence of make-up and lipstick.
ANNA’S STORY

Anna suffered from advanced gum disease and had lost many teeth over time (left). She had an upper denture (top left) which was very unstable and she needed to use denture adhesive whilst wearing it. She was unable to enjoy food and had lost her confidence and self esteem. Her teeth became extremely mobile and she couldn’t face the thought of having to go to full dentures.

Please Note: The pictures may not be an accurate comparison due to presence of make-up and lipstick.
ANNA
40 years old
Jeweller

Treatment:
Upper All-On-4 *Plus®*
Lower All-On-4™

EARLY 2009
ZIRCONIA UPGRADE 2013

See prior page for before and after
KAYE

71 years old
Housewife

Treatment:
Upper Zygoma *Plus®*
Lower All-On-4™

LATE 2013

See opposite page for before and after
KAYE’S STORY

Kaye had suffered with her teeth all her life. She had severe anxiety to do with dentists from experiences of the past and was a complete dental phobic. She had not seen a dentist for many years and as a result her teeth and gums deteriorated and became extremely mobile, held together only by the calculus build up around them. She hid her smile, but apart from the appearance, she started having difficulties eating and had dental pain and staph infection in her mouth. She needed to have her teeth removed and wanted to avoid dentures, but her main obstacle was the psychological fear of the dentist. She was so nervous that she did not turn up to her initial consultation merely to discuss her options and did a ‘runner’ as her husband put it. Save to say she was eventually treated under general anaesthetic.

Please Note: The pictures may not be an accurate comparison due to presence of make-up and lipstick.
KEVIN'S STORY

Kevin had advanced gum disease and his teeth became very loose. He noticed that the appearance of his teeth has changed. He always had buck teeth when younger but they started to spread and splay with the gum disease leaving big gaps. Apart from not liking the way his teeth looked, he also had pain and lots of trouble eating. He dreaded the thought of having to go into dentures.
MARCUS’S STORY

Marcus was embarrassed by his smile. He had numerous decayed and infected teeth that were sore and felt fragile. All the teeth were structurally compromised and it was too late to consider more conservative alternatives with crowns or bridges. He knew he had to do something about it and wanted to avoid dentures being so young.

MARCUS
37 years old
Rigger
Treatment:
Upper All-On-4™
Lower All-On-4™
Early 2012
All On 4 Plus®

PROBLEMS

GUMS DISEASE
LOOSE TEETH
POOR AESTHETICS
SOLUTION

Zirconia

UPPER AND LOWER ALL ON 4 Plus®

INITIAL COMPLETION TIME: 2 DAYS
ZIRCONIA UPGRADE: 3 YEARS LATER
General Anaesthetic
SPECIALIST ANAESTHETIC SERVICE

Patients want to be asleep for their procedure, but traditional hospital theaters do not cater for the specialised needs of the dental care provider. So we built a facility that does!

Anaesthetic services are provided by specialist anesthetists at our clinic to a standard that meets or exceeds any hospital facility. Brain wave monitors and other sophisticated equipment allow accurate gauging of patients consciousness and ensure precise and efficient delivery of the anaesthetic with the quickest possible recovery and reduced post operative side effects. Medicare rebates are available for specialist anaesthetic services.
DIAGNOSTIC IMAGING & 3-D CT-ASSISTED IMPLANT PLANNING

Our ‘New Generation i-CAT’ Cone Beam Volumetric scanner allows on-the-spot CT imaging and enables instant diagnosis and treatment planning, facilitating a streamlined process for the patient. All our Cone Beam x-rays are reported by specialist radiologists.

The CT X-Rays are BULK BILLED where possible*.  

* For eligible patients on presentation of a valid Medicare card and subject to our terms and conditions and Medicare rebates and policies, which may vary.
ONSITE LABORATORY

Conveniently located on the ground floor, our experienced Dental laboratory works in unison with our clinical implant team and referring practitioners and offers fast-tracked service and high quality implant-supported restorations. Having experienced technicians onsite not only facilitates fast turn-arounds, but also helps our dentists monitor and control the quality of production.
PATIENT SERVICES

Our treatment coordinators are there to facilitate the entire treatment process for our patients, including accommodation, transport and other services as required. They are the first point of contact for any questions and liaise with each patient as well as their referring practitioners (where relevant) before, during and after their treatment overseeing and ensuring a favourable experience for the patient from their initial visit through to completion.
DR ALEX FIBISHENKO  BDSC  FICOI (DENTAL SURGEON)
PRACTICE EXCLUSIVE TO DENTAL IMPLANTS & RECONSTRUCTIVE DENTO-ALVEOLAR SURGERY

Dr Fibishenko pioneered ‘All On 4’ in Australia and is conceive of the acclaimed ‘All On 4 Plus’ concept. He heads the implant team at the All On 4 Clinic in Melbourne, and also works closely with selected trained dentists and specialists throughout Australia.

Having graduated from the University of Melbourne in 1995, Dr Fibishenko undertook advanced training in oral implantology, bone grafting and reconstructive dento-alveolar surgery with some of the other pioneers and leaders in the field internationally.

He has been involved in implant work and reconstructive oral surgery since 1996 and today his practice is exclusive to these procedures with an emphasis on ultimate aesthetics and restored function. Having performed in excess of 5000 implant surgeries, Dr Fibishenko also developed numerous advanced surgical techniques used today to improve the outcome of oral rehabilitation with dental implants. He is respected by many of his peers as one of todays most progressive and leading experts.

Dr Fibishenko is the founder of the All On 4 Clinic, member of the Australian Dental Association (ADA) and Australian Osseointegration Society (AOS), an accredited member of the Australian Society of Implant Dentistry (ASID), Fellow of the International Congress of Oral Implantologists (ICOI), and chairman of the Implant Team Academy (ITA).
CENTRE FOR AESTHETIC & IMPLANT DENTISTRY
MELBOURNE’S OFFICIAL ‘ALL ON 4 CLINIC’

Appropriately located in Melbourne, the lifestyle and sporting capital of Australia ...where results always matter, our clinic has an international reputation as a centre of excellence for advanced oral rehabilitation and dental implants.

Located on the Burwood Highway tram-lines, in Melbourne’s east, the clinic is easily accessible to accommodation and shops. Patient parking is available at the rear.

PLEASE CALL THE CLINIC ON (03) 8845 5400 TO RESERVE AN AVAILABLE CONSULTATION